



# Graduation Plan for ACE IT/SSA Programs

## School District No. 38 (Richmond) – Career Programs Office

NAME: \_\_\_\_\_ PEN: \_\_\_\_\_  
Last First

PROGRAM Applied for: \_\_\_\_\_ Home School: \_\_\_\_\_ Grade: \_\_\_\_\_

Student email: \_\_\_\_\_ Cell: \_\_\_\_\_ Home Phone: \_\_\_\_\_

- Place a check (☑) in boxes to indicate courses already taken and credits earned. PRINT course names in spaces provided.
- Place an (☒) in boxes to indicate courses you are planning to take or are currently taking but which are not yet completed.

GRADE 10 REQUIREMENTS	CREDITS	Total Credits:	COURSE LOCATION
<input type="checkbox"/> English 10 <input type="checkbox"/> Social Studies 10 <input type="checkbox"/> Science 10 <input type="checkbox"/> a Math 10 _____ <input type="checkbox"/> PE 10 <input type="checkbox"/> Planning 10 (Senior Planning)	4 4 4 4 4 4	(minimum 24)	_____ _____ _____ _____ _____
GRADE 11 REQUIREMENTS	CREDITS	Total Credits:	COURSE LOCATION
<input type="checkbox"/> English or Communications 11 (underline which one) <input type="checkbox"/> a Social Studies 11 _____ <input type="checkbox"/> a Science 11 _____ <input type="checkbox"/> a Math 11 _____	4 4 4 4	(minimum 16)	_____ _____ _____
GRADE 12 REQUIREMENTS	CREDITS	Total Credits:	COURSE LOCATION
<input type="checkbox"/> English or Communications 12 (underline which one) <input type="checkbox"/> _____ 12 Three courses at the Grade 12 <input type="checkbox"/> _____ 12 Level. (Can be chosen from your <input type="checkbox"/> _____ 12 apprenticeship courses below.) <input type="checkbox"/> GRADUATION TRANSITIONS <input type="checkbox"/> Daily Physical Activity Documentation	4 _____ _____ 4 <input type="checkbox"/> Requirement Met	(minimum 20)	_____ _____ _____ _____ _____
FINE ARTS &/OR APPLIED SKILLS REQUIREMENT	CREDITS	Total Credits:	COURSE LOCATION
<b>REQUIRED: Either 4 credits of one area, or 2 credits of each</b> <input type="checkbox"/> Fine Arts _____ 10 / 11 / 12 (circle grade) <input type="checkbox"/> Applied Skills _____ 10 / 11 / 12 (circle grade)	_____ _____	(minimum 4)	_____ _____
ADDITIONAL (ELECTIVE) COURSES:	CREDITS	Total Credits:	COURSE LOCATION
<input type="checkbox"/> _____ 10 / 11 / 12 (circle grade) <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12 <input type="checkbox"/> _____ 10 / 11 / 12	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____	(minimum 16)	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____
<b>OVER ALL TOTAL GRADUATION CREDITS ( 80 CREDITS REQUIRED)</b>		<b>TOTAL CREDITS</b>	<b>Graduation Date:</b> _____ / _____ <small style="margin-left: 100px;">Month</small> <small style="margin-left: 100px;">Year</small>
<b>HIGH SCHOOL CREDENTIAL:</b> <input type="checkbox"/> Dogwood Diploma <input type="checkbox"/> School Completion Certificate (Evergreen)			
<b>POST SECONDARY PLANS:</b> <input type="checkbox"/> Continue apprenticeship <input type="checkbox"/> Other _____			

*I have discussed the completion of my graduation plan with my parent(s)/guardian(s).*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

District Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Counsellor or Career Programs staff)