

Preparation for Adulthood

Year Group/Class:

Name: Date:

Name of person helping me fill in the form:

My hopes for the future (what do I want to do/be when I leave school?)	Learning (what do I want to learn?)
Training and employment (what job do I want to do? What training might I need?)	Keeping healthy (what support am I going to need to stay healthy?)
Where am I going to live?	Being part of the community
(e.g. supported living with friends, independent	(what activities would like to do?)
living, living with family)	
What do people say about me? (friends/ adults who work with me)	Celebrating success (what has gone well?)