



Outlook Academy

Township General Assistance Survey

Please complete this form to the best of your knowledge. **Please note that this information is kept confidential and your answers are used for data collection only; your name and information will never be given out without your permission.**

Date: _____

Student Name: _____

ID#: _____

Please Circle “Y” for yes or “N” for no

1. Are you 18 years old or older? Y N
2. Are you currently employed? Y N
3. Do you have dependents (children)? Y N
4. Do you collect benefits? Y N



TTHSD205 Outlook Academy Career and Post-Secondary Plan

Student Name: _____ Date: _____

ID#: _____ Home School: TR TT TW

Counselor: _____

Self-Inventory:

Begin this process by completing the following items in regard to how you see yourself.

Below, list courses in school that you have done well in and/or enjoyed:

List work experiences (paid or unpaid) that you have found interesting and enjoyable:

List special achievements, awards, or certificates that you have received:

List your special interests, talents, and/or hobbies:
Examples: environment, animals, fixing things, crafts, etc.

List clubs and organizations that you have enjoyed:



Personal strengths/attributes: Check the five words below that best describe you. (You may add additional strengths or attributes.)

- | | | |
|--|--|--|
| ☐ Observant | ☐ Creative | ☐ Practical |
| ☐ Friendly | ☐ Innovative | ☐ Investigative |
| ☐ Nature-loving | ☐ Artistic | ☐ Persuasive |
| ☐ Accommodating | ☐ Enterprising | ☐ Well organized |
| ☐ Mathematical | ☐ Social | ☐ Conventional |
| ☐ Communicative | ☐ Active | ☐ Directive |
| ☐ Realistic | ☐ Original | ☐ Imaginative |
| ☐ Humanitarian | ☐ Authoritative | ☐ Spatial |
| ☐ Mechanical | ☐ Scientific | ☐ Detail-oriented |
| ☐ Industrious | ☐ Responsible | ☐ Decisive |

Additional strengths/attributes:

Keeping in mind the information you just gained from the Self-Inventory, read each of the following descriptions. Rank them from 1 to 6 in the order that best describes you, 1 being the best. Use each number only once.

- _____ A. Are you a creative thinker? Are you imaginative, innovative, and original? Do you like to communicate ideas?
- _____ B. Do you enjoy being a leader, organizing people, planning activities for others, and talking with people? Do you like to work with numbers or ideas? Do you enjoy carrying through with an idea and seeing the end product? Do you like to know what is expected of you and like things around you to be neat and orderly?
- _____ C. Do you like to care for people or animals who are sick or help them stay well? Are you interested in new diseases and how the body works? Do you enjoy observing patients and looking for changes in how they are doing?
- _____ D. Are you friendly, open, outgoing, understanding, and cooperative? Do you like to work with people to help solve problems? Is it important to you to do something that makes things better for other people?
- _____ E. Are you mechanically inclined and practical? Do you like to use your hands and build things? Are you curious about how things work?
- _____ F. Are you a nature lover? Are you practical, curious about the physical world, and interested in plants and animals? Do you like to be physically active? Do you like to observe, learn, investigate, or solve problems?



Career Pathways:

A = Arts and Communications, B = Business/Information Management/Marketing
C = Health Sciences, D = Family and Human Services, E= Engineering/Industrial/Technological Sciences F = Agriculture/Natural Resources, M = Military, O = Other, V= Vocational

Discuss this information with adults in your family and with other interested adults. Ask them to share what they see as your strengths and talents. It is also helpful to ask them to talk about information they may have about careers and the world of work.

There are a variety of other career interest instruments other than listed above. You may wish to research those categories that interest you.

Based on previous information and knowledge you gained from Steps 1 and 2:

1. Which career pathways do you think fit you best?

2. Why do you think they are a good choice for you?



List below your plans for the following years after high school:

Plans Beyond High School:

Year 13

Year 14

Year 15

Year 16

Attach the following documents to this packet:

1. Resume (required)
2. 3 Letters of Reference (required)
3. Verification of Service Learning Hours (required)
4. Verification of College Applications/Acceptance Letters (if applicable)
5. Verification of Employment (if applicable)
6. Verification of Intent to Join the Military (if applicable)
7. Verification of Acceptance into a Vocational/Training Program (if applicable)

Signatures:

_____ Date: _____



Student:

School Representative: please initial if student completed the following

Documentation:	Counselor's Initials:
Resume (required)	
Letters of Reference (required)	
Service Learning Hours (required)	
College Applications/Acceptance Letters (if applicable)	
Employment (if applicable)	
Military (if applicable)	
Vocational or Training Programs (if applicable)	

Document Checked by: _____

Date: _____

Completed CSU's Continuing Education Week

<u>Date</u>	<u>Days of Week</u>	<u>Attended: Yes or No</u>
	Monday	
	Tuesday	
	Wednesday	
	Thursday	
	Friday	

Met All OA Graduation & Final Transcript Requirements:

_____ Date: _____



ON THE ROAD TO GRADUATION

Circle the student's home school

TR

TT

TW

Name: _____

ID#: _____

Graduation Year: _____

Under the appropriate column, write in the name of each course AND semester the student passed. If the course is already listed write in the year the student passed the course in the box. All empty boxes are classes students need to take at Outlook Academy in order to graduate under the 24 credits rule.

Each box represents 0.5 credit

English (4.0)	Math (3.0)	Science (3.0)	PE (3.5)	Elective (6.5)
English I S1	Algebra I S1	Biology S1		
English I S2	Algebra I S2	Biology S2		
English II S1	Geometry S1			
English II S2	Geometry S2			
English III S1				
English III S2				
English IV S1				
English IV S2				

Social Studies (1.0)	US History	Economics	Health	Speech	Constitution Exam
					SAT
Civics					



Outlook Academy Housing Survey

Please complete this form to the best of your knowledge. **Please note that this information is kept confidential and your answers are used for data collection only; your name and information will never be given out without your permission.**

Date: _____

Student Name: _____ ID#: _____

1. Who is your legal guardian? Both Parents - Mom Only - Dad Only

2. If you did not circle an answer above, please indicate below

_____.

3. Are you actively under DCFS Guardianship? YES NO

4. Do you live in a house, apartment or condo? If not one of these, please indicate here

_____. Are you homeless? YES NO

5. How many people live with you? _____

6. What is your relationship with the people you live with? (For example, mom dad, cousin, aunt, sister, etc.) List all below:



Thornton Township High School District 205 – SY 2020-21 Title I Parent Compact (Template) Section 1118(d), ESEA

As a school, we will:

- Provide a high-quality effective learning environment that is safe and that enables the student to meet the State's student academic achievement standards
- Provide ongoing two-way communication between teachers and parents through parent-teacher-student conferences and frequent reports to parents
- Provide reasonable access to staff through an "open door" policy
- Provide opportunities for parents to volunteer and participate in their child's class and observe classroom activities
- Provide a mutually respectful relationship between all parties (students, parents, teachers, and volunteers)

As a parent, I will:

- Support my child's learning by ensuring that he/she has proper rest and nutrition and attends school on time and on a regular basis
- Support my child's learning by reading with him/her
- Help set a positive tone for learning with my child
- Strive to make positive use of my time with my child ("quality" one on one time)
- Participate in decisions relating to the education of my child through a mutually respectful relationship with school staff
- Provide a mutually respectful relationship between all parties (students, parents, teachers, and volunteers)
- Provide a time for homework completion ("perfect practice")
- Support my child's class/school (i.e. helping in class/school, volunteering in my child's classroom/school, communicating with my child's teachers, attending school events when possible, etc.)

As a student, I will:

Ask questions when I am not sure about a lesson or an assignment

- Make good choices like paying attention in class, staying on task, doing my best, and working hard at my schoolwork

Parent Name: _____ Date: _____

Child's Name _____ Date: _____

Teacher's Name _____ Date: _____