

# ICAN 2012 Success Plan



Student Name: \_\_\_\_\_ Nickname \_\_\_\_\_

Discuss how you feel about school? (Hate school? School is confusing? Do not have time to study? Class situation? Etc...)

## Contact Information:

Student name	Home #	Cell #	Email
Parent/Guardian	Home #	Cell #	Email
Parent/Guardian	Home #	Cell #	Email

What classes do you struggle in?

Why are you in the ICAN program? Be honest about what choices, decisions, circumstances, and or reasons that led to you needing the ICAN program.

What learning behaviors and class issues do you want to address?

What are your personal interests? i.e. Foods, extra curricular activities, sports, entertainment, etc.

## ICAN 2012 Success Plan cont.



What do you want to do when you grow up? Career plans? High school plans?

What are your goals for the ICAN program? How will you know you have been successful?

Do you have computer access at home? Yes No

(if not, is there somewhere you might be able to work on this course outside of school? Library, relatives house?)

What is your study schedule (at school, at home) and learning habits for your ICAN course?  
(remember: positive behaviors and learning habits will improve success)

Do you have any other needs? How can we help you be successful?