

Sample Personal Learning Plan

NAME: _____ REVIEWED WITH: _____ DATE: _____

What will I study?	When will I study?	Where will I study?	How long will I study?	What materials do I need?

What do I need to meet my goals? (i.e. a ride, babysitter, internet access, ect.)

How am I going to meet my goals?

Self Evaluation		
Did I meet my goals?	Why or why not?	What changes do I need to make?

