

Skill Development Plan

Preparing for the Future



Name: _____

Date: _____

Getting a driver's license, earning money, getting along with others, and solving problems are a few of the skills everyone needs to get along in life. One step in getting ready for *your future* is to know what skills you have and which ones you need to improve. By filling out the next few pages, you can begin to figure this out.

1) In Column #1, answer *how important each skill area* is to you using this scale:

“V” if it is Very Important to you “S” if it is Somewhat Important to you “N” if it is Not Important to you

2) In Column #2, check the skills *you want to improve*.

3) In Column #3, rate *how well you do each skill* by using this scale:

1 = Not very good 2 = Ok, but needs improvement 3 = Good 4 = Excellent

4) Together, we'll set some goals and get you connected to the people or programs to help you get ready for your future.

In Column #1—Indicate how **important** each skill is to you

V = Very Important

S = Somewhat Important

N = Not at All Important

In Column #2—Check the ones you would like to **improve**

In Column #3—Indicate **how well** you do each skill

1 = Not very good

2 = Ok, needs improvement

3 = Good

4 = Excellent

In Column #1—Indicate how **important** each skill is to you **V = Very Important** **S = Somewhat Important** **N = Not at All Important**

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Social/Interpersonal Skills <i>5. Friends/Peers/Adults</i>	<i>Initial Review</i>			<i>Second Review</i>			<i>Third Review</i>			<i>Comments:</i>
	<i>Date:</i>			<i>Date:</i>			<i>Date:</i>			
	<i>#1</i>	<i>#2</i>	<i>#3</i>	<i>#1</i>	<i>#2</i>	<i>#3</i>	<i>#1</i>	<i>#2</i>	<i>#3</i>	
Have 2 or more good friends										
Know how to meet new people and make friends										
Know how to keep friends—be nice, don't bully or tease										
Be trustworthy & reliable										
Share or help out a friend in need										
Respect other's possessions and "personal space"										
Respect people in authority (parents, teachers, police, judges, etc.)										
Other:										
6. Communication										
Express my thoughts and feelings in words										
Talk, don't yell										
Understand body language from myself and others										
Communicate with others peacefully and respectfully										
Other:										
Constructive Use of Time <i>7. Participation in hobbies and positive activities</i>										
Know what I'm good at and like to do										
Spend time doing hobbies or activities (arts, sports, etc.) every week										
Spend time doing spiritual activities										
Spend time with supportive adults										
Minimize time just hanging out with "nothing to do"										
Other:										
Empowerment <i>8. Connection to neighborhood and community</i>										
Do community service (volunteers, help others, etc.)										
Recognize the needs of others and help out										
Feel safe in my home and neighborhood										
Receive positive recognition or support from my neighbors										
Other:										

In Column #1—Indicate how **important** each skill is to you **V = Very Important** **S = Somewhat Important** **N = Not at All Important**

In Column #2—Check the ones you would like to **improve**

In Column #3—Indicate **how well** you do each skill

1 =Not very good

2 = Ok, needs improvement

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4 = Excellent

All of the skills listed above are important to know and improve. The Skills listed below are the ones I want to focus on.

<i>Focus Area</i>	<i>Who I'll work with (Parent, school, program, social worker, etc.)</i>	<i>Goal or how I want to improve</i>	<i>Steps I'll take to improve this skill</i>
<i>Example: #9 Academic Skills and #10 School Behavior</i>	<ol style="list-style-type: none"> 1. School counselor and tutor 2. My mom 3. NIP 	<ol style="list-style-type: none"> 1. Go from "Ds" to "Cs" 2. Stay in school (no more suspensions) 	<ol style="list-style-type: none"> 1. Get to school on time every day 2. Say hello or talk to Mr. Jones (favorite teacher) every day for a few minutes 3. Do homework and get t tutor 4. Join one after school activity—probably football

Youth _____

Parent/ Caregiver _____

Intake social worker: _____

Date of Initial Plan: _____