

Candidate Name: Credential Received:

INDIVIDUALIZED LEARNING PLAN

The Individualized Learning Plan (ILP) can be modified and updated as needed. Include the date each time information is added, updated, or modified.

| | rnia Standards for the Teaching Profession Areas of Strength & Areas for Growth aching Practice (CTP), list the areas of strength and the a | | 1 | |
|---|---|---|---|--|
| California Standards for the Teaching Profession (CSTP) | | Areas of Strength (List Specific Elements) | Areas for Growth (List Specific Elements) | |
| ☐ Standard 1-Engaging and Supporting All S | tudents in Learning | | | |
| ☐ Standard 2-Creating and Maintaining Effe | ctive Environments for Student Learning | | | |
| ☐ Standard 3-Understanding and Organizing | | | | |
| ☐ Standard 4-Planning Instruction and Designation | gning Learning Experiences for All Students | | | |
| ☐ Standard 5-Assessing Students for Learning | | | | |
| ☐ Standard 6-Developing as a Professional E | | | | |
| ☐ Personal Professional Growth Goal: | | - | 1 | |
| Step 2 -Based on your identified areas for growth, put a goal(s) you have identified. | an X in the box to the left of the CSTP(s) you want to focu. | s on/or next to the personal p | rofessional growth | |
| Growth Goal(s) Step 3- • List your goal, explain how your goal connects to your selected CSTP areas for growth, and explain why you have chosen to focus on your specific goal. | Action Plan Step 4- Describe how you plan on meeting your goal(s). Your plan must clearly define the steps you will take to accomplish your goal(s). (Include Professional Development Opportunities) | Outcomes Step 5- List the measurable outcomes (evidence) that will demonstrate that you have accomplished your goal(s). | | |
| For Personal Professional growth goals list the goal and explain why you have chosen to focus on your specific goal. | | | | |
| Professional Growth Goal 1: | Goal 1 Action Plan: | Goal 1 Outcomes: | | |
| Professional Growth Goal 2: | Goal 2 Action Plan: | Goal 2 Outcomes: | | |
| Professional Growth Goal 3: | Goal 3 Action Plan: | Goal 3 Outcomes: | | |
| Professional Growth Goal 4: | Goal 4 Action Plan: | Goal 4 Outcomes: | | |



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| Quarter 1: Candidate's Reflection on Progress towards growth goals- | Quarter 1: Evidence of CSTP's/Candidate Goals-Observed by Mentor- | | | |
|---|---|--|--|--|
| Quarter 2: Candidate Reflection on Progress towards growth goals- | Quarter 2: Evidence of CSTP's /Candidate Goals-Observed by Mentor- | | | |
| Quarter 3: Candidate Reflection on Progress towards growth goals- | Quarter 3: Evidence of CSTP's/Candidate Goals-Observed by Mentor- | | | |
| Quarter 4: Candidate Reflection on Progress towards growth goals- | Quarter 4: Evidence of CSTP's /Candidate Goals-Observed by Mentor- | | | |
| End of Year Inqu | uiry Cycle Reflection: | | | |
| Based on the cycles of Inquiry you implemented, what of your action research (pre and post test gains)? | changes have you measured, in student achievement, as a result | | | |
| 2. As a result of the Inquiry process, what was the impact on student achievement? | t of the instructional strategies/lessons, and what was the impact | | | |
| 3. Describe how you will apply new learning to other are | eas of future practice. | | | |



Candidate Name: Credential Received: School Site: Mentor:

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| Pı | Professional Development: | | Date Attended: | | | |
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| The Candidate and Mentor | are responsible for completion | n of this document and subn | nission of one copy t | to the Induction Director at | the end of the school year. | |
| Documentation Review: | | | | | | |
| | Candidate Signature | Teacher Induction Dire | etor | Mentor Signature | Date | |