SAMPLE - INDIVIDUAL TRAINING PLAN

This is a sample form and is intended for districts to modify for their own use.

(Individual Training Plan is to be attached to the Individual Training Agreement)

Student’s Name: __________________________________________________________

Job Title: _______________________________________________________________

Employer: _______________________________________________________________

Assigned Supervisor: _____________________________________________________

Work-Based Learning Coordinator: _________________________________________

School: _________________________________________________________________

Beginning Date: ______________  Ending Date: ______________

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<tr>
<th>Area/Task Assigned</th>
<th>Timeline</th>
<th>Measurement</th>
<th>Class/Worksite</th>
<th>Date Completed</th>
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Minnesota Department of Education, Sample - Individual Training Plan, 2018