

Montesano School District  
 Post High School Action Plan



**Join the “Work Force”**

Student:	Graduation Date:
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**I plan to:** \_\_\_\_\_ **Seek Employment**

Please list your options for employment in order of preference.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

	Required	Completed	Need to Complete	N/A
Take ASVAB				
Complete resume'				
Complete 2 letters of application				
Collect 3 letters of recommendation				

**Estimated Monthly Costs for Living Independently**

Rent	
Utilities	
Food & Personal Items	
Transportation	
Medical Insurance	
Entertainment	
Savings	
Other	
<b>Total Estimated Costs</b>	

**Estimated Monthly Costs for Living Independently**

Rent	
Utilities	
Food & Personal Items	
Transportation	
Medical Insurance	
Entertainment	
Savings	
Other	
Total Estimated Costs	

**AND/OR**

**Financial Preparation for Tuition Costs**

Estimated Cost of Attendance		Estimated Resources for Next School Year	
Tuition		Your Savings	
Books/Materials		Your Earnings from work next year	
Room/Board		Amount your parents will give for college during next school year	
Transportation		Help/Gifts from relatives	
Personal Expenses		Scholarships	
Other		Grants	
Other		FAFSA Completed	Yes No
Total Cost Estimate		Total Resources	