



# *Soaring Together*

*Tools for Life*



*Transition Planner*

[soaringtogether.ca](http://soaringtogether.ca)

# HOPE



**THUNDERBIRD**  
PARTNERSHIP FOUNDATION

[thunderbirdpf.org](http://thunderbirdpf.org)

# Making a Transition Plan

One of the ways to use the resources on the ***Soaring Together: Tools for Life*** website is to support youth in planning for change. Making a transition plan is a good way to take stock of what matters to you as you become an adult. It can help you make decisions towards living your life on purpose.

## *What is a transition plan?*

This kind of plan includes an overview of the skills, knowledge and resources you already have and those you'd like to have, to prepare for life as a young adult. It's a process that breaks down your long-term plans into smaller, short-term goals.

Planning for change is useful if you are moving towards being more independent in your life. If you have been living in out-of-home care, it can be especially useful for you as you prepare to live on your own. This plan can also be important if you are someone who is moving from youth to adult services.

## *Why does transition planning matter?*

Having a plan like this connects to positive outcomes for youth, including being ready to be self-sufficient, and feeling Hope for the future.

According to research, youth who developed a plan early

- felt more prepared for the change,
- felt more equipped with the skills they needed,
- were more likely to rate their emotional health as good or excellent, and
- were more likely to be enrolled in school.

Having a plan also helps you to remain housed. Youth who were leaving out-of-home care said that this type of plan is one of the best supports they can have.

A transition plan is guided by your wishes, hopes, and dreams. Doing it with the support of trusted adults can be great for you, and your plan can even be used as a way to help connect with others you trust. Having the support of reliable adults is the best measure of success for young people moving on from foster care. Making a plan can also help you to (re)connect with culture and identity.

## *What can a transition plan include?*

Your plan can focus on any area(s) of your life in which you expect change - or would like to make change. The Soaring Together: Tools for Life website is organized in a way that can help you identify what some of these areas may be. For instance, under Where am I going?, you can see the following areas:

- A place to call home
- Basic building blocks for our success
- Making the most of our money
- Back to school
- Entering the work world
- Participating in our communities

You can create a plan for each of these areas, or just for the ones that you would most like to focus on. Other parts of the Where am I going? page that you might like to turn to when planning are:

- I live in or am leaving out-of-home care. Now what?
- Accessing awards, grants, and scholarships
- Decision-making about substances and alcohol
- A strong start for children and youth

You can adapt and expand your plan at any time.

## *What can a transition plan look like?*

There are lots of different ways to plan for change.

For each area that you would like to plan, a Soaring Together Planner can help you. The Planners below all follow the same structure, but with different questions and prompts to help you along. The structure goes like this:

- ***What I Have Now***
- ***Resources Available to Me***
- ***This is My Plan***
- ***How Ready I Am***

# BELONGING



# A Place to Call Home

## What I Have Now

**Trusted adult(s):** \_\_\_\_\_

**SoaringTogether.ca resources relevant for me:**



A Place to  
Call Home



I Live In or Am  
Leaving Out-of-Home  
Care. Now What?



Accessing Awards,  
Grants, and  
Scholarships



Decision-Making  
About Substances  
and Alcohol



A Strong Start  
for Children  
and Youth

☐ Others: \_\_\_\_\_

**Where I live now:** \_\_\_\_\_

Planned end date: \_\_\_\_\_

**Where I will live next:** \_\_\_\_\_

Planned start date: \_\_\_\_\_

**Rental reference or cosigner (name):** \_\_\_\_\_

Phone or email: \_\_\_\_\_

**Life skills** (check, and add notes):

☐ Laundry: \_\_\_\_\_

☐ Cleaning: \_\_\_\_\_

☐ Home safety: \_\_\_\_\_

☐ Grocery shopping: \_\_\_\_\_

☐ Cooking: \_\_\_\_\_

☐ Communication: \_\_\_\_\_

☐ Others: \_\_\_\_\_



## A Place to Call Home

### Resources Available to Me

**Assistance type:**

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**What I need to qualify:**

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**Who I can contact:**

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### This is My Plan

**One year goal:** \_\_\_\_\_

**Short term (1 year) actions towards that goal:**

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**Steps, and who will help me:**

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**Five years from now, my housing goal is:** \_\_\_\_\_

**How ready I am to start my first step:** (1: I don't want to do it / I don't know how to start) ① ② ③ ④ ⑤ (5: I am excited and prepared)

**For help moving your number up this scale:**

- ☐ visit [Soaringtogether.ca](https://soaringtogether.ca) to connect with Hope, Belonging, Meaning, and Purpose;
- ☐ connect with a trusted adult; and
- ☐ reach out to the resources listed at the top of this worksheet.

# Basic Building Blocks for My Success

## What I Have Now

Trusted adult(s): \_\_\_\_\_

SoaringTogether.ca resources relevant for me:



Basic Building  
Blocks for  
Our Success



I Live In or Am  
Leaving Out-of-Home  
Care. Now What?



Accessing Awards,  
Grants, and  
Scholarships



Decision-Making  
About Substances  
and Alcohol



A Strong Start  
for Children  
and Youth

☐ Others: \_\_\_\_\_

Personal documents:

Status (check one):

Who has them:

	HAVE	APPLIED FOR	DO NOT HAVE	
Birth Certificate:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____
Status Card or Citizenship Card:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____
Social Insurance Number:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____
Government Issued ID:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____
Health Care Number:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____
Other(s): _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	_____

I have a safe place for my personal documents: ☐ Yes ☐ No

I know I may request a copy of my case file (if I have one): ☐ Yes ☐ No



# Basic Building Blocks for My Success

## Resources Available to Me

**Assistance type:**

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**What I need to qualify:**

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**Who I can contact:**

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## This is My Plan

**One year goal:** \_\_\_\_\_

**Short term (1 year) actions towards that goal:**

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**Steps, and who will help me:**

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**Five years from now, my goal for basic building blocks is:** \_\_\_\_\_

**How ready I am to start my first step:** (1: I don't want to do it / I don't know how to start) ① ② ③ ④ ⑤ (5: I am excited and prepared)

**For help moving your number up this scale:**

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- ☐ reach out to the resources listed at the top of this worksheet.



# Making the Most of My Money

## What I Have Now

Trusted adult(s): \_\_\_\_\_

SoaringTogether.ca resources relevant for me:



Making the Most of  
Our Money



I Live In or Am  
Leaving Out-of-Home  
Care. Now What?



Accessing Awards,  
Grants, and  
Scholarships



Decision-Making  
About Substances  
and Alcohol



A Strong Start  
for Children  
and Youth

☐ Others: \_\_\_\_\_

Bank account (check all that apply):

Bank name: \_\_\_\_\_

- ☐ Opened a chequing account
- ☐ Opened a savings account
- ☐ Other: \_\_\_\_\_

Savings goal for transition: \_\_\_\_\_

Amount saved so far: \_\_\_\_\_

Have developed a monthly budget: ☐ Yes ☐ No

Regular source(s) of income:

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

Monthly amount:

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

Money management skills (check all that apply, and add notes to describe):

- |  |  |
|--|--|
| <input type="radio"/> Budgeting: _____     | <input type="radio"/> Emergency Matters: _____                                     |
| <input type="radio"/> Saving: _____        | <input type="radio"/> Accessing Compensation: _____                                |
| <input type="radio"/> Banking: _____       | <input type="radio"/> Protecting myself against fraud, scams, and predators: _____ |
| <input type="radio"/> Filling Taxes: _____ | <input type="radio"/> Others: _____  |
| <input type="radio"/> Using Credit: _____  |  |



## Making the Most of My Money

### Resources Available to Me

**Assistance type:**

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**What I need to qualify:**

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**Who I can contact:**

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### This is My Plan

**One year goal:** \_\_\_\_\_

**Short term (1 year) actions towards that goal:**

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**Steps, and who will help me:**

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**Five years from now, my money goal is:** \_\_\_\_\_

**How ready I am to start my first step:** (1: I don't want to do it / I don't know how to start) ① ② ③ ④ ⑤ (5: I am excited and prepared)

**For help moving your number up this scale:**

- ☐ visit [Soaringtogether.ca](https://soaringtogether.ca) to connect with Hope, Belonging, Meaning, and Purpose;
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# Back to School

## What I Have Now

Trusted adult(s): \_\_\_\_\_

### SoaringTogether.ca resources relevant for me:



Back to School



I Live In or Am  
Leaving Out-of-Home  
Care. Now What?



Accessing Awards,  
Grants, and  
Scholarships



Decision-Making  
About Substances  
and Alcohol



A Strong Start  
for Children  
and Youth

☐ Others: \_\_\_\_\_

### Current educational status (check one):

- ☐ Attending full time
- ☐ Attending part time
- ☐ Not attending

### On track for (check one):

- ☐ Diploma
- ☐ GED or Modified Diploma
- ☐ Other: \_\_\_\_\_

Individualized Education Plan? ☐ Yes ☐ No ☐ Unsure

### Skill level in the following areas (describe):

- ☐ Math: \_\_\_\_\_
- ☐ Reading: \_\_\_\_\_
- ☐ Writing: \_\_\_\_\_
- ☐ Language: \_\_\_\_\_
- ☐ Other areas: \_\_\_\_\_
- ☐ \_\_\_\_\_

### Most recent school attended:

\_\_\_\_\_

Successes: \_\_\_\_\_

\_\_\_\_\_

Challenges: \_\_\_\_\_

\_\_\_\_\_

Last grade completed: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_

Expected completion date: \_\_\_\_\_

### Previous school attended:

\_\_\_\_\_

Successes: \_\_\_\_\_

Challenges: \_\_\_\_\_

### Previous school attended:

\_\_\_\_\_

Successes: \_\_\_\_\_

Challenges: \_\_\_\_\_



## Back to School

### Resources Available to Me

**Assistance type:**

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**What I need to qualify:**

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**Who I can contact:**

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### This is My Plan

**One year goal:** \_\_\_\_\_

*Short term (1 year) actions towards that goal:*

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*Steps, and who will help me:*

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**Five years from now, my educational goal is:** \_\_\_\_\_

**How ready I am to start my first step:** (1: I don't want to do it / I don't know how to start) ① ② ③ ④ ⑤ (5: I am excited and prepared)

*For help moving your number up this scale:*

- ☐ visit [Soaringtogether.ca](https://soaringtogether.ca) to connect with Hope, Belonging, Meaning, and Purpose;
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# Entering the Work World

## What I Have Now

Trusted adult(s): \_\_\_\_\_

SoaringTogether.ca resources relevant for me:



Entering the  
Work World



I Live In or Am  
Leaving Out-of-Home  
Care. Now What?



Accessing Awards,  
Grants, and  
Scholarships



Decision-Making  
About Substances  
and Alcohol



A Strong Start  
for Children  
and Youth

☐ Others: \_\_\_\_\_

**Current employment status** (check one):

- ☐ Not Working
- ☐ Seeking Work
- ☐ Working Full-Time
- ☐ Working Part-Time ( \_\_\_\_\_ hrs per week)

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

Pay Rate: \_\_\_\_\_

**Resume complete?** ☐ Yes ☐ No

**Cover letter complete?** ☐ Yes ☐ No

**Past employer or volunteer experience:**

Employer or supervisor (name and contact): \_\_\_\_\_

Location: \_\_\_\_\_

Dates: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**Past employer or volunteer experience:**

Employer or supervisor (name and contact): \_\_\_\_\_

Location: \_\_\_\_\_

Dates: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**Work skills:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Certificates:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## Entering the Work World

### Resources Available to Me

**Assistance type:**

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**What I need to qualify:**

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**Who I can contact:**

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### This is My Plan

**One year goal:** \_\_\_\_\_

Short term (1 year) actions towards that goal:

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Steps, and who will help me:

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**Five years from now, my employment goal is:** \_\_\_\_\_

**How ready I am to start my first step:** (1: I don't want to do it / I don't know how to start) ① ② ③ ④ ⑤ (5: I am excited and prepared)

For help moving your number up this scale:

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# Participating in My Community

## What I Have Now

Trusted adult(s): \_\_\_\_\_

SoaringTogether.ca resources relevant for me:



Participating in  
Our Communities



I Live In or Am  
Leaving Out-of-Home  
Care. Now What?



Accessing Awards,  
Grants, and  
Scholarships



Decision-Making  
About Substances  
and Alcohol



A Strong Start  
for Children  
and Youth

☐ Others: \_\_\_\_\_

**Community connections** (groups, cultural activities,  
volunteering, drop-in centers, etc.):

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

**Contact person**  
(name, phone or email):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Trusted cultural support (name, phone or email): \_\_\_\_\_

My First Nation: \_\_\_\_\_

My traditional territory: \_\_\_\_\_

My language: \_\_\_\_\_

Registered to vote? ☐ Yes ☐ No

**Friends/Peers:**

Length of time known:

Phone or email:

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

_____	_____
_____	_____
_____	_____
_____	_____

**My interests:**

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

3. \_\_\_\_\_
4. \_\_\_\_\_



## Participating in My Community

### Resources Available to Me

**Assistance type:**

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**What I need to qualify:**

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**Who I can contact:**

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### This is My Plan

**One year goal:** \_\_\_\_\_

Short term (1 year) actions towards that goal:

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Steps, and who will help me:

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**Five years from now, my community involvement is:** \_\_\_\_\_

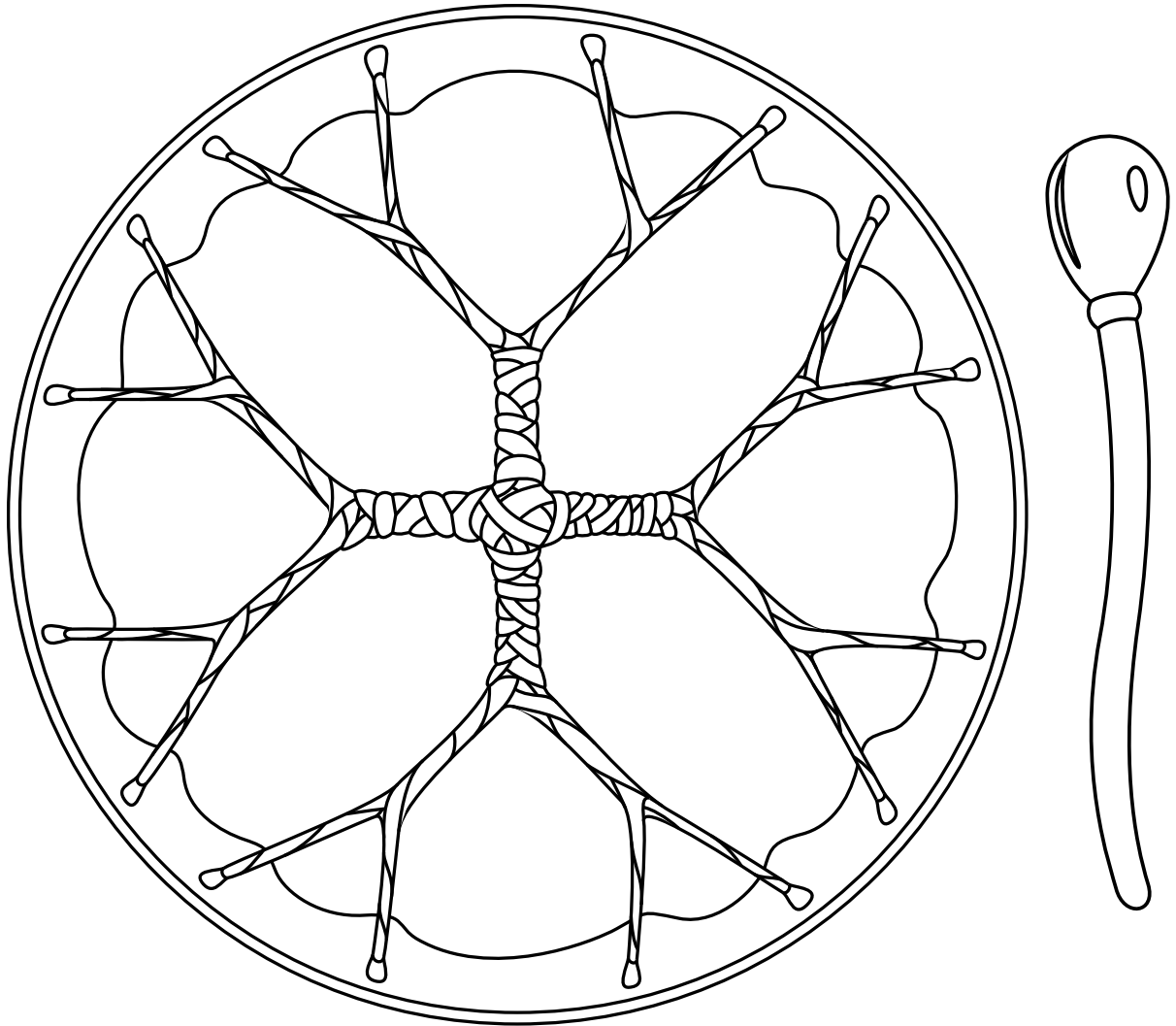
**How ready I am to start my first step:** (1: I don't want to do it / I don't know how to start) ① ② ③ ④ ⑤ (5: I am excited and prepared)

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# MEANING



**This resource was developed based on the following sources. You can visit them to learn more:**

CanFASD. (n.d.). *Article Summary #17: Review of Transition Planning Tools for Youth with FASD*. Retrieved 5 March 2025 from <https://canfasd.ca/2021/01/28/article-summary-17-review-of-transition-planning-tools-for-youth-with-fasd/>



Government of British Columbia. (2012). *Cross Ministry Transition Planning Protocol for Youth with Support Needs - FINAL*. Retrieved 5 March 2025 from [https://www2.gov.bc.ca/assets/gov/family-and-social-supports/children-teens-with-support-needs/2012\\_ytpp\\_protocol.pdf](https://www2.gov.bc.ca/assets/gov/family-and-social-supports/children-teens-with-support-needs/2012_ytpp_protocol.pdf)



Manitoba Department of Families. (2024). *Age of Majority Planning – Youth in Care Transitioning to Community Living disABILITY Services*. Retrieved 5 March 2025 from <https://www.gov.mb.ca/fs/clds/pubs/age-of-majority-planning.pdf>



Children's Bureau. (2018). *Working With Youth to Develop a Transition Plan*. Retrieved 5 March, 2025 from [https://cwig-prod-prod-drupal-s3fs-us-east-1.s3.amazonaws.com/public/documents/transitional\\_plan.pdf?Version-Id=ymt67PBCdfXghHalapeHDF5vm2O6.k1s](https://cwig-prod-prod-drupal-s3fs-us-east-1.s3.amazonaws.com/public/documents/transitional_plan.pdf?Version-Id=ymt67PBCdfXghHalapeHDF5vm2O6.k1s)



Government of British Columbia. (2021). *Transition Planning for Youth & Young Adults*. Retrieved 5 March 2025 from <https://www2.gov.bc.ca/gov/content/family-social-supports/services-for-people-with-disabilities/transition-planning-for-youth-young-adults>



McCreary Center Society. (2024). *Youth transitioning out of care in BC*. Retrieved 5 March 2025 from [https://mcs.bc.ca/pdf/youth\\_transitioning\\_out\\_of\\_care\\_fall\\_2024.pdf](https://mcs.bc.ca/pdf/youth_transitioning_out_of_care_fall_2024.pdf)



FosterClub. (n.d.). *Transition Toolkit*. Retrieved 5 March 2025 from [https://fosteringconnections.org/tools/assets/files/transition\\_toolkit.pdf](https://fosteringconnections.org/tools/assets/files/transition_toolkit.pdf)



Homeless Hub. (2025) *Transition Supports for Youth Exiting Public Systems*. Retrieved 5 March 2024 from <https://homelesshub.ca/collection/programs-that-work/transition-supports-for-youth-exiting-public-systems/>



Representative for Children and Youth. (2020). *A parent's duty: Government's obligation to youth transitioning into adulthood*. Retrieved 5 March 2025 from <https://baseline.bchumanrights.ca/wp-content/uploads/2022/08/A-Parents-Duty-Governments-Obligation-to-Youth-Transitioning-into-Adulthood.pdf>



# PURPOSE



Notes

This image shows a full page of blank, lined paper. It features approximately 20 evenly spaced horizontal grey lines across the entire width of the page, providing a guide for handwriting or typing. The background is a clean, off-white color.

Notes

This image shows a full page of blank, lined paper. It features approximately 20 evenly spaced horizontal grey lines across the entire width of the page, typical of standard notebook or composition paper. The background is white, and there are no margins, text, or other markings present.