



Derby City Council

My Life, My Journey

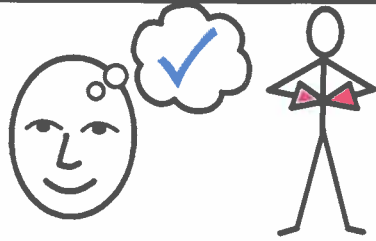
Getting to know me

Three Things About Me

Name

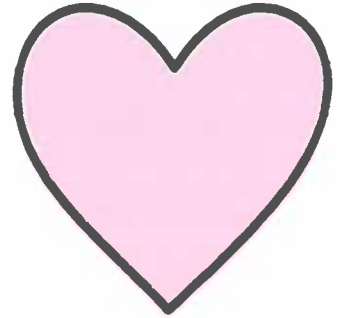
Age

Today's Date

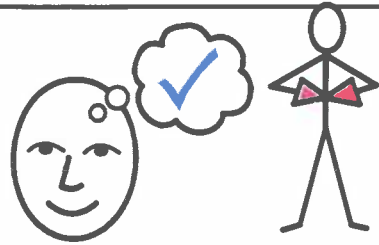


Getting to know me?

I like



A large, empty rectangular box with rounded corners and a black border, intended for writing a response to 'I like'.

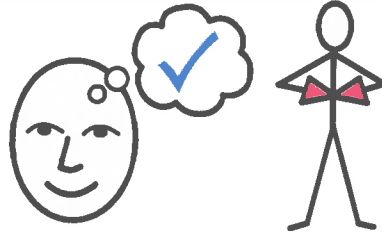


Getting to know me?

I do not like

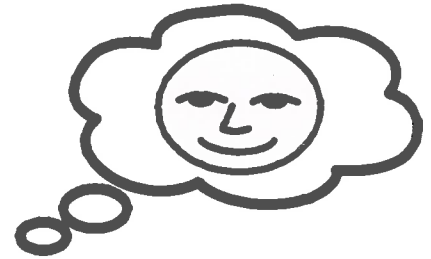


A large, empty rounded rectangular box for writing or drawing.

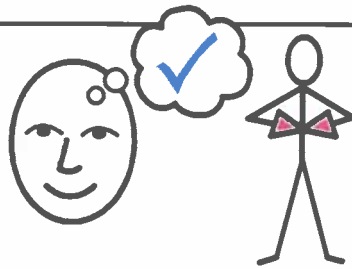


Getting to know me?

Things people like
and admire about me



A large, empty rectangular box with rounded corners, intended for writing answers to the question above.



Getting to know me?

I need help with



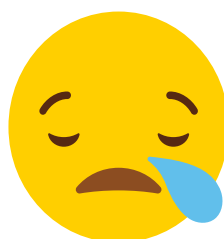
A large, empty rectangular box with rounded corners, intended for writing or drawing.

How are you feeling today?

Happy



Sad



Excited



Sick



Tired



Bored



Confused



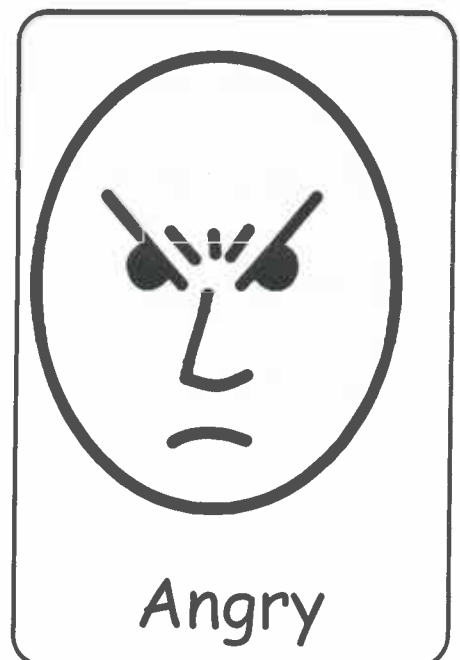
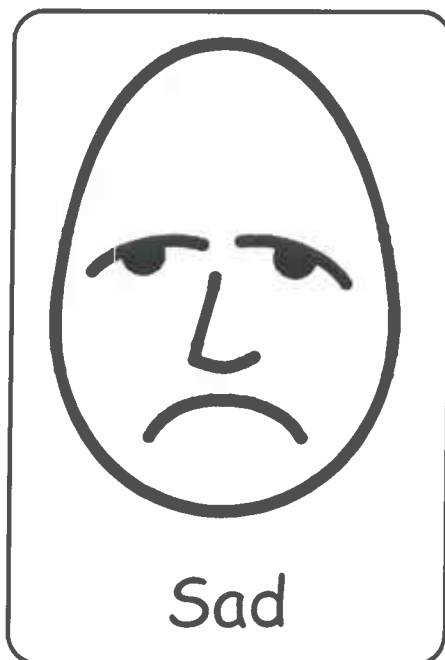
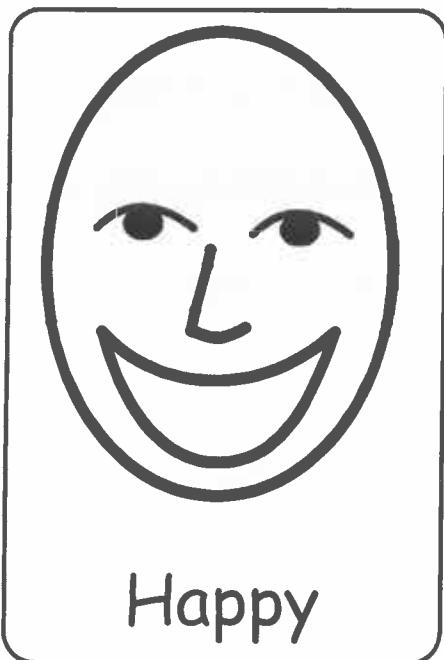
Angry



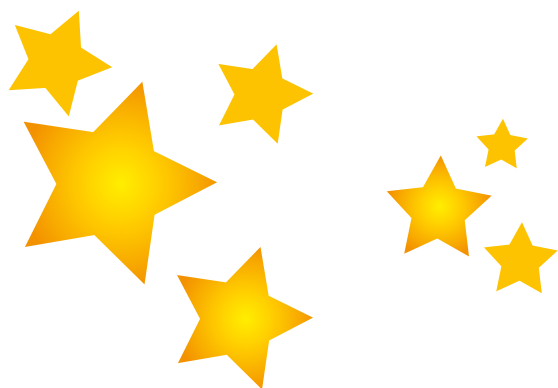
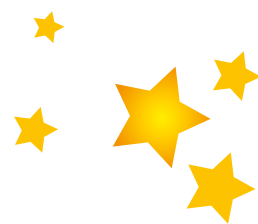
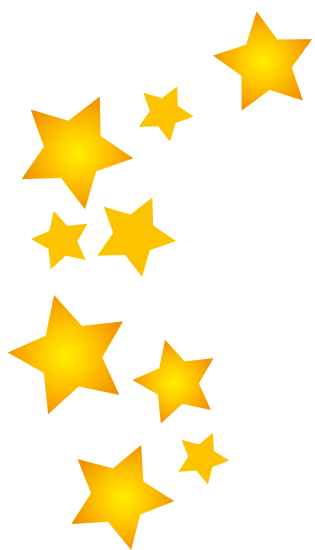
Frustrated



How are you feeling today?



This is what I would
change by waving my
magic wand



This is Me

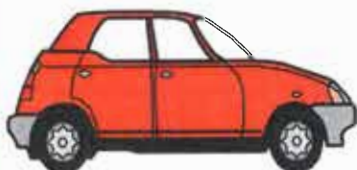
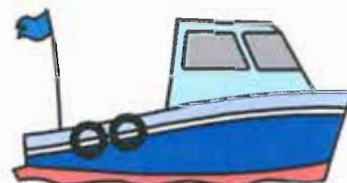
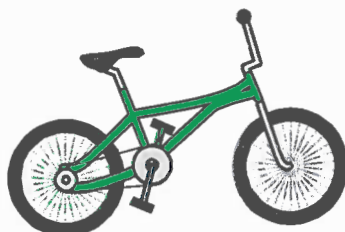
I have lots of strengths and talents, including;

- | | |
|--|--|
| <input type="checkbox"/> Reading | <input type="checkbox"/> Stories |
| <input type="checkbox"/> Spelling | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Writing | <input type="checkbox"/> Sports |
| <input type="checkbox"/> Drawing and art work | <input type="checkbox"/> Cooking |
| <input type="checkbox"/> Computers | <input type="checkbox"/> Cleaning |
| <input type="checkbox"/> Computer games | <input type="checkbox"/> Tidying up |
| <input type="checkbox"/> Maths and numbers | <input type="checkbox"/> Putting things in order |
| <input type="checkbox"/> Remembering things | <input type="checkbox"/> Mechanical things |
| <input type="checkbox"/> Music | <input type="checkbox"/> Making things |
| <input type="checkbox"/> Facts about my favourite thing, which is; | <input type="checkbox"/> What else? |

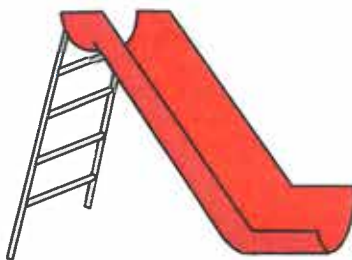
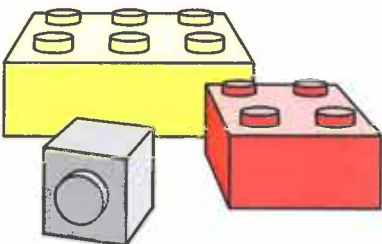
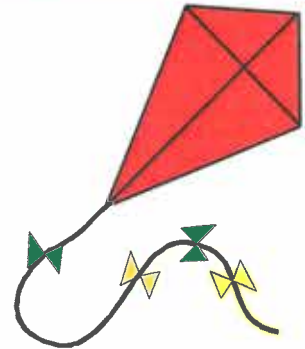
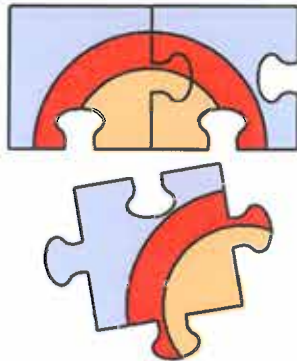
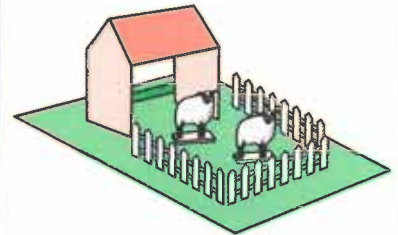
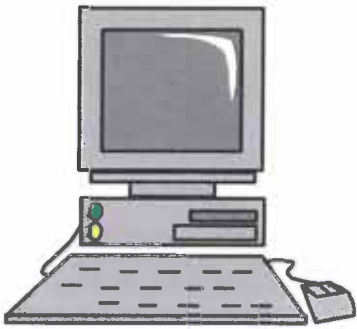
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I will tick the things that are true for me

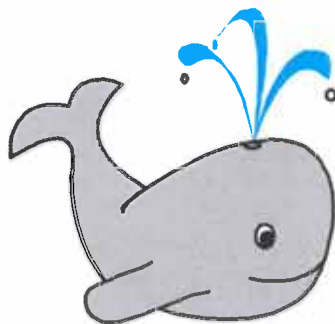
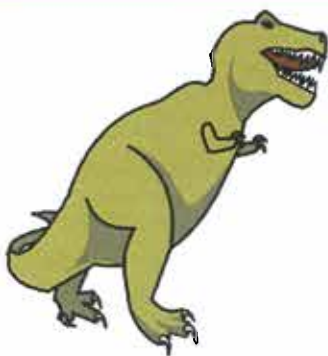
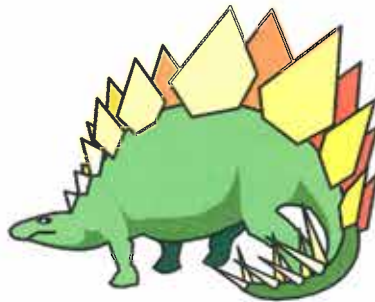
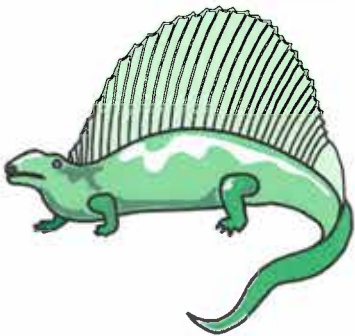
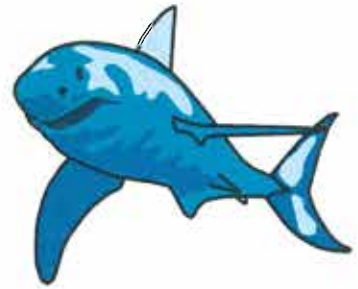
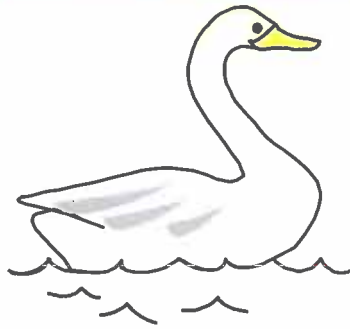
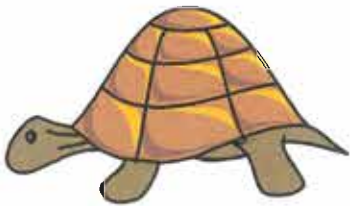
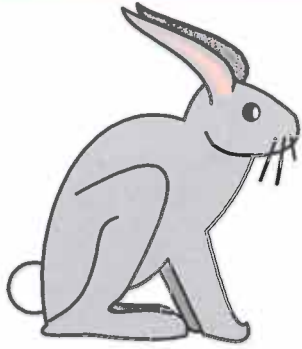
Communicate in Print Images



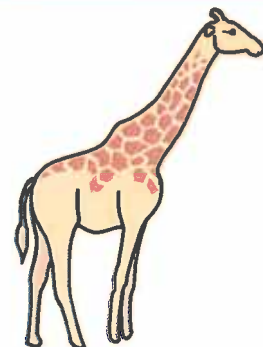
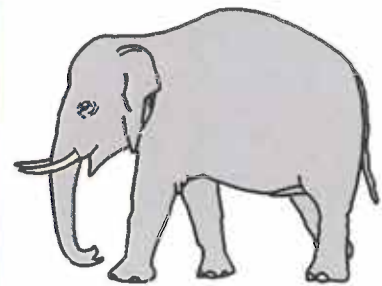
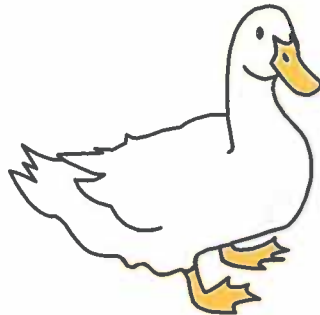
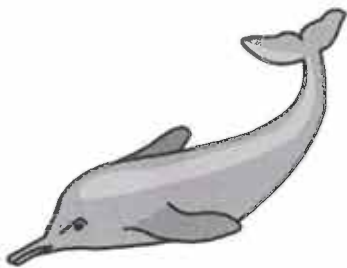
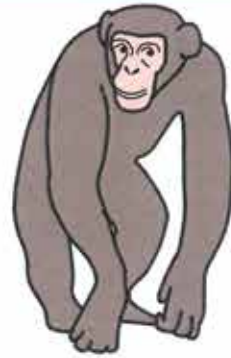
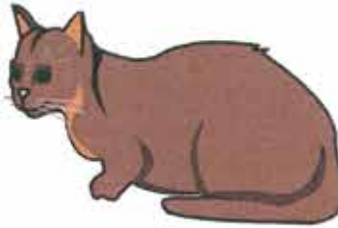
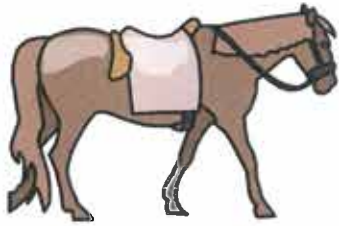
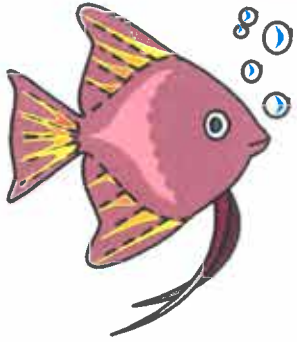
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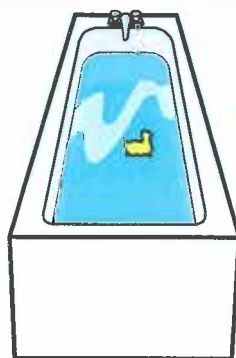
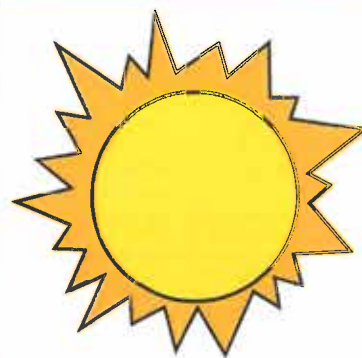
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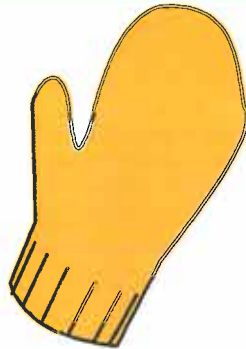
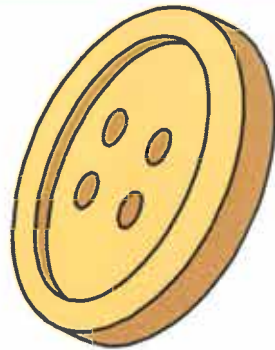
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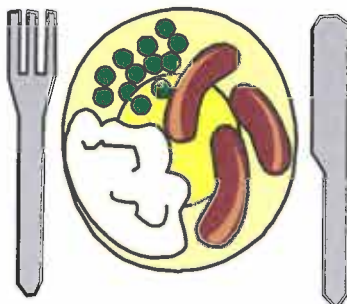
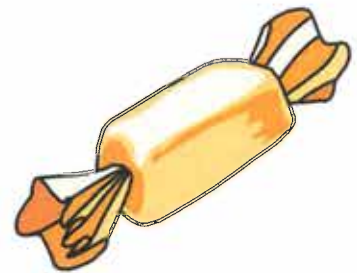
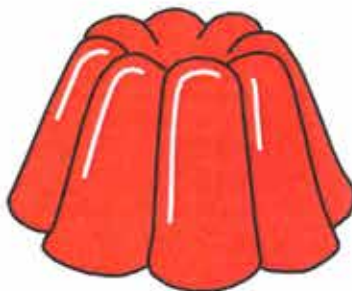
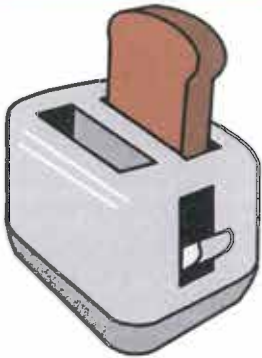
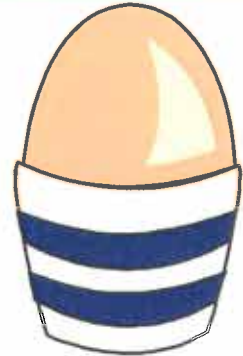
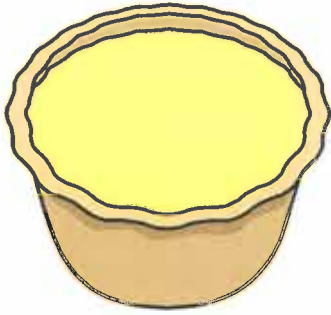
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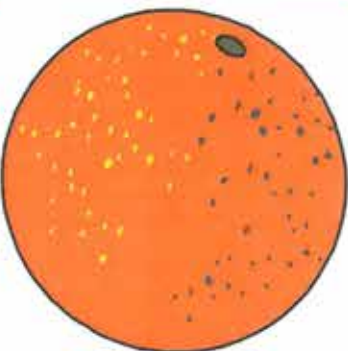
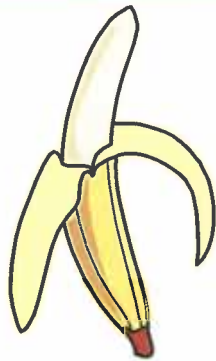
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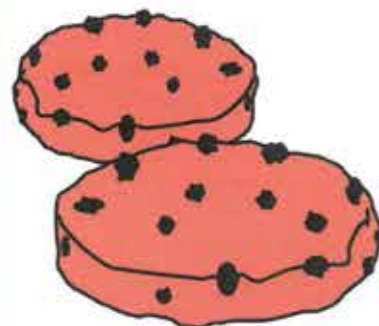
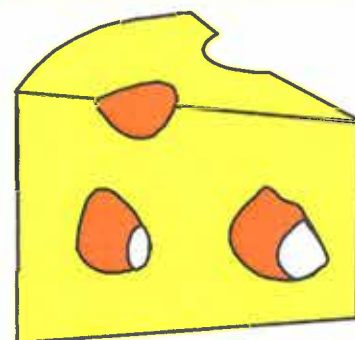
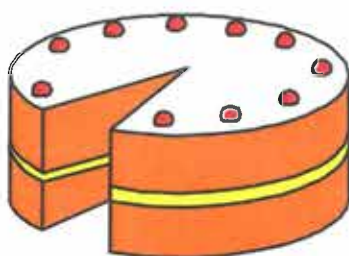
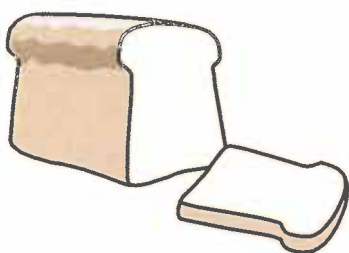
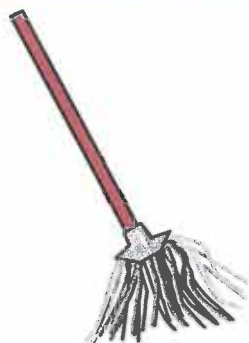
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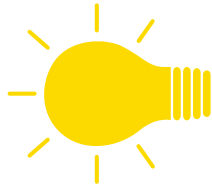
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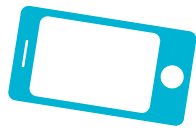
Action Plan



Name

What is going to help you?	How is it going to help you?	Who is going to help you?	When would you like it to start?
What else might help?			

Review



Name

How much has it helped you?		
A lot	A little	Not at all

