If the basis of the need as stated on the application for services is vocational training leading directly to a recognized trade, paraprofession, or profession, childcare and development services shall be limited, except as specified in subdivision (I), to whichever expires first.

(1) Six years from the initiation of services pursuant to this section: or
(2) Twenty four semester units, or its equivalent, after the attainment of a Bachelor's Degree

STUDENT VOCATIONAL PLAN

Date______________________

Student Name_______________________________________

Attending__________________________________________

Name of Accredited School or Program

1. Please state your vocational goal: ________________________________________________

______________________________________________________________________________

______________________________________________________________________________

2. Please indicate the approximate length of time (from this date) required for you to achieve this goal: __________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

3. What are the academic prerequisites and requirements necessary for you to achieve this goal? __________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

4. Are there other required steps beyond your immediate course of study which you must take before you reach your goal (e.g. hours of internship, State examination, etc.)?

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

5. Please circle and initial to indicate that you:  DO   DO NOT have a Bachelor’s Degree or other academic degree___________ (initial)