

Set a Goal!

Name _____

Goal (can be counted or measured)	
Action required	
How often?	
Start date	
Monitoring (daily written record)	<input checked="" type="checkbox"/> HW diary + <input type="checkbox"/> wall calendar <input type="checkbox"/> other:
Time limit	One week. End date:
Measure of success	

How did I do?

Complete this section right after the end date of your goal.

In trying to achieve this goal, I was . . .

- Completely successful
- Mostly successful
- Somewhat successful
- Not really successful

As a result, I am going to . . .

- Revise my goal, and repeat it
- Repeat it as is, and try harder
- Choose a new goal

Give details of your achievement:

I did did not keep a daily written record in my homework agenda.

I succeeded

___times/days/classes (circle one) out of ____.

Student's signature _____

Date _____

Teacher's initials _____