



Putting Goals into ACTION

Client's Name: _____

Start Date _____ Target Date _____

Completion Date _____

Goal – *Written in the form of a statement.*

Must be SMART (Specific, Measurable, Agreed Upon, Realistic, Timely)

Expected Results (*How will you feel when you achieve your goal?*)

1.

2.

3.

4.

5.

Agree Upon with _____ Date _____



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Benefits from achieving this goal. (*What positive results will you enjoy?*)

1.

2.

3.

4.

5.

Tracking: *How you are going to measure your results?*

Potential Obstacles:

Solutions and Opportunities:



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	Specific Steps to Achieve Goal	Target Date	Completion Date
1			
2			
3			
4			
5			
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26			

Is this goal in alignment with your values?

Is achieving this goal worth the time and effort involved? Yes _____ No _____