

GOAL SETTING TEMPLATE

NAME:	DATE:
Be SMART to set your ultimate goal: Specific – what will you do? Measurable – how often, how much and when will you do something? Achievable – don't set yourself up to fail Realistic – you are able to perform the task Timely – give yourself a starting date	

Client concerns/Issues: <i>(Client to identify)</i>	Client's values: <i>(Client to identify)</i>			
•	• Relationships			
•	• Work/financial			
•	• Independence			
•	• Wellness			
Personal Goal/Ultimate Goal				
What is your “ultimate goal”?				
When would you like to achieve this?				
Time Period:				
Are there any barriers that could prevent this?				
Confidence:	<i>The greater your confidence, the better your success!</i>			
0 Not	1	2 Confident	3	4 Very
Readiness:	<i>Are you ready?</i>			
0 Not	1	2 Confident	3	4 Very
Importance:	<i>How important is achieving your goal to you?</i>			
0 Not	1	2 Confident	3	4 Very

Short term goals/client steps to achieving your ultimate goal:		DISCIPLINE INVOLVED:
1. What's your short term goal?		
When would you like to achieve this?		
Time Period:		
Action plan		Comments
		DISCIPLINE INVOLVED:
2. What's your short term goal?		
When would you like to achieve this?		
Time Period:		
Action plan		Comments
		DISCIPLINE INVOLVED:
3. What's your short term goal?		
When would you like to achieve this?		
Time Period:		
Action plan		Comments
Copy provided to Client: Yes <input type="checkbox"/> No <input type="checkbox"/>		Copy placed in Client Record: Yes <input type="checkbox"/> No <input type="checkbox"/>