

Goal Setting Workshop

GOALS Guiding Our Active Life System

GOAL TYPE: _____ (financial, educational, career, exercise, etc)

1. MY GOAL – WHAT DO I WANT TO ACHIEVE? _____

2. WHY DO I WANT THIS GOAL? _____

3. WHAT’S STOPPING ME? _____

4. WHO’S ON MY TEAM? _____

5. PLAN OF ACTION – WHAT I NEED TO DO:
a. _____
b. _____
c. _____
d. _____
e. _____

Completion date: _____

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