



Families Forward Charlotte Goal Action Plan

Name: _____

What is the MAIN goal I want to achieve? _____

Target Date: _____

Primary Bridge Sub Pillar: ☐ Housing ☐ Family ☐ Physical/Mental Health ☐ Networks ☐ Debts ☐ Savings ☐ Education ☐ Employment

SMART Criteria: ☐ Specific ☐ Measurable ☐ Attainable ☐ Relevant ☐ Time-Bound

Why is this goal important to me? _____

Action Steps	Target Date	How will we know when it's done?	Done?
1.			
2.			
3.			
4.			

How will we know when the goal is done? _____

Personal Goal Recognition: _____

What is your main potential challenge to achieving this goal? What's one thing you can do to overcome this challenge?

Family Signature: _____ **Liaison Signature:** _____ **Date:** _____

OPTIONAL BRAINSTORMING WORKSHEET

On a scale of 1-10, how IMPORTANT is this to you?



Not at all important

Somewhat important

Very important

Brainstorm a list of Action Steps that you would need to take to achieve your goal. To start, don't worry about the order you write them. Once you have completed the full list, go back and number them in order.

**What challenges could keep you from achieving your goal?
What strategies could you use to overcome them and what resources can help you?**

CHALLENGES

STRATEGIES / RESOURCES

On a scale of 1-10, how CONFIDENT are you in being able to achieve this goal?



Not at all confident

Somewhat confident

Very confident