

ACTION PLAN

Name:
Period:
Date:

1. Specify your goal.

I would like to:

2. Specify the things you need to do to reach your goal.

In order to reach my goal, I should do the following things:

- a.
- b.
- c.
- d.
- e.

Where will I do these things?

How will I do these things?

When will I do these things?

3. Barriers, or things that might get in my way.

The following things might be barriers in my environment:

These thoughts of mine might be barriers:

Other people might be barriers in the following ways:

I, _____, agree to follow the Action Plan above for the next two weeks.

I also agree to work to solve problems that might get in the way of using my Action Plan.