



GOALS SETTING

Name: _____

You are determined to continue pushing boundaries and making an impact in your life. Take a moment to reflect on what you have been working on and what your future plans are.

LIST OUT YOUR GOALS

IMMEDIATE GOALS

- 1.
- 2.
- 3.

LONG TERM GOALS

- 1.
- 2.
- 3.

CURRENT CONDITION

MY ABILITIES/SKILLS

RESOURCES AVAILABLE

WHAT I AM WILLING TO DO

NEXT BEST ACTIONS

(FILL IN THIS SECTION AFTER CONSULTATION WITH AMY)

THE GAP

WHAT I AM WILLING TO DO