GROWTH Self-Assessment for Goal Getting

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| Date: | Attempting (beginning) | Almost there (continued effort needed) | Yes! I’m where I need to be to reach my goal. | I’m doing better than I thought! I’ve exceeded my own expectations. |
| G: Goal  How is my overall progress toward reaching my goal? |  |  |  |  |
| R: Realistic Plan  Do my choices support the plan I have in place? |  |  |  |  |
| O: Obstacles  Am I learning as a result of the obstacles I encounter? |  |  |  |  |
| W: Who and What?  Have I determined at least three people or resources I can turn to when setbacks occur? |  |  |  |  |
| T: Tracking  Am I tracking my growth in a journal to measure it? |  |  |  |  |
| H: Habits  What new habits am I forming that contribute to my success? |  |  |  |  |
| What is going well that I need to continue? What changes need to be made in order to reach my goal? | | | | |