

# FAMILY SUPPORT GOAL ACTION WORKSHEET

Kids deserve the best.

SMART Criteria:  Specific  Measurable  Attainable  Relevant  Time-bound

What do I want to accomplish? \_\_\_\_\_

\_\_\_\_\_ by: \_\_\_\_\_.

Why is this goal important to me? \_\_\_\_\_

On a scale of 1 to 10, how important is this goal to you?

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>
Not at all		Slightly			Somewhat			Very	

Bridge Pillar:  PCI  Safety  Housing  Legal  Supports  Health  Expenses  Debts  Skills and Education

Type:  Court-ordered goal -OR-  Personal goal  New Goal -OR-  Revised Goal

Action Steps	Target Date	How can we celebrate?	How will we know this step is done?	Who can help with this step?	Done?
1.					<input type="checkbox"/>
2.					<input type="checkbox"/>
3.					<input type="checkbox"/>
4.					<input type="checkbox"/>
5.					<input type="checkbox"/>

How will we know this goal is done? \_\_\_\_\_ Recognition and/or Incentive: \_\_\_\_\_

On a scale of 1 to 10, how confident do you feel about achieving this goal?

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>
Not at all		Slightly			Somewhat			Very	

Participant Signature: \_\_\_\_\_ FSS Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Optional Brainstorming: Write a list of action steps that you would need to take to achieve your goal. Once you completed a list, go back and number them in order.

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

----- for FSS only -----

- Goal was achieved by *original* target date. Date Achieved: \_\_\_\_\_
- Goal was achieved by *extended* target date. Date Achieved: \_\_\_\_\_
- Goal was terminated. Date discontinued: \_\_\_\_\_

Reason for goal revision or discontinuation: