

Lifestyle Medicine: Tools for Promoting Healthy Change
June 26, 2009 ◆ Boston, MA

GOAL DEVELOPMENT WORKSHEET

Date _____

Goal #1: _____

Importance Rating: _____ Confidence: _____

How will I meet this goal?

Action 1: _____

Action 2: _____

Action 3: _____

What are the potential Obstacles and how do I overcome them?

Obstacle 1: _____ Plan: _____

Obstacle 2: _____ Plan: _____

I want to achieve this goal by: _____

Notes:

Goal #2: _____

Importance Rating: _____ Confidence: _____

How will I meet this goal?

Action 1: _____

Action 2: _____

Action 3: _____

What are the potential Obstacles and how do I overcome them?

Obstacle 1: _____ Plan: _____

Obstacle 2: _____ Plan: _____

I want to achieve this goal by: _____

Notes:

Goal #3: _____

Importance Rating: _____ Confidence: _____

How will I meet this goal?

Action 1: _____

Action 2: _____

Action 3: _____

What are the potential Obstacles and how do I overcome them?

Obstacle 1: _____ Plan: _____

Obstacle 2: _____ Plan: _____

I want to achieve this goal by: _____

Notes:

Signature of Client/Date

Signature of Coach/Date