## Goals Sheet: Week#

Name	Date
1. What are my goals	for this week?
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2. How will I know I'v	e reached my goals?
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What did I do?							
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What worked?							
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Could I have done anything differently? If so, what?	_	
Did I reach my goals?  Could I have done anything differently? If so, what?  Did I learn anything about myself? If so, what?		
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