

GOAL			
PLAYER NAME:		TEAM NAME:	
DESCRIPTION OF GOAL: (What do you want to accomplish? Why is this a goal? Be specific.)			
NEAR TERM <input type="checkbox"/>	MID TERM <input type="checkbox"/>	LONG TERM <input type="checkbox"/>	TARGET DATE:
			ACHIEVED DATE:
MEASUREMENT			
MEASUREMENT OF GOAL: (How will you measure this goal?)			
ACTIONS			
ACTIONS TO ACCOMPLISH GOAL: (What actions will you need to take to accomplish this goal?)			WHEN/FREQUENCY
			COMPLETED
1			<input type="checkbox"/>
2			<input type="checkbox"/>
3			<input type="checkbox"/>
4			<input type="checkbox"/>
5			<input type="checkbox"/>
OBSTACLES		NOTES	
POTENTIAL OBSTACLES: (What setbacks might you face? How will you overcome?)			

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