

My Personal Action Plan

Area of Life

Today's Date

Final Target Date

Date Achieved

Statement of Goal

How I will benefit from this goal

Possible Obstacles

Strategies for Overcoming Obstacles

Possible Obstacles	Strategies for Overcoming Obstacles

Specific Action Steps for Achieving this Goal

**Target
Date**

**Complete
√**

1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
12		
13		
14		
15		

Is it worth my time, effort and money to reach this goal?

YES

NO

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Affirmations to support this goal

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