

Women With Drive Participant Monthly Goal Sheet

This is a brief document intended to help you and your team set and manage your goals each month as you progress through our program(s). Through the questions below, we will determine priorities, establish benchmarks and adjust your process accordingly.

NOTE: Not all goals will be a priority/be expected to be achieved at the same time. There may be some goals that you wish to reach first before tackling others. This monthly sheet will help your team and our board follow your progress and offer accurate assistance. The goals are based on the five platforms from your Assessment. Thank you for taking the time to help us.

DATE: _____

MAKE/MODEL _____

LICENSE PLATE: _____ **MILEAGE:** _____

PARTICIPANT NAME:

EMPLOYER/SCHOOL or TRAINING PROGRAM:

CASEWORKER:

PROJECTED COMPLETION DATE:

FAMILY:

Within the next three months, I hope to:

I will take these steps toward my goal:

COMMUNITY:

Within the next three months, I hope to:

I will take these steps toward my goal:

FINANCIAL:

Within the next three months, I hope to:

I will take these steps toward my goal:

EDUCATION:

Within the next three months, I hope to:

I will take these steps toward my goal:

HEALTH:

Within the next three months, I hope to:

I will take these steps toward my goal:

SIGNED BY PARTICIPANT:

PRINTED NAME:
