

Name \_\_\_\_\_

Date \_\_\_\_\_

Class Period \_\_\_\_\_

### SMART Goal Map

Directions: Fill the required information in the appropriate areas as indicated.

|          |                               |   |
|----------|-------------------------------|---|
| <b>S</b> | Make it<br><b>S</b> pecific   | What do you want to accomplish?                           |
| <b>M</b> | Make it<br><b>M</b> easurable | How will you know when you have accomplished your goal?   |
| <b>A</b> | Make it<br><b>A</b> ttainable | How can the goal be accomplished?                         |
| <b>R</b> | Make it<br><b>R</b> elevant   | Is this goal worth working for it to accomplish? Explain. |
| <b>T</b> | Make it<br><b>T</b> imely     | By when will the goal be accomplished?                    |