

Name : _____ Date : _____

NEW SCHOOL YEAR GOALS PLANNING

Mission 1: Something New I Want to Try

Draw or write one new thing you would like to try this year.

Mission 2: My Super Strength

What is something you are already good at?

How can you use this strength at school?

Mission 3: My Challenge

What is something that is difficult for you right now?

What can you do to get better?

Mission 4: My Dream School Year

If this school year is amazing, what will it look like?

- | | |
|--|--|
| <input type="checkbox"/> I make new friends. | <input type="checkbox"/> I help others. |
| <input type="checkbox"/> I learn many new things. | <input type="checkbox"/> I feel proud of myself. |
| <input type="checkbox"/> I finish my work on time. | <input type="checkbox"/> Others _____ |