

Goal Planner

Goal: Date:

Is my goal SMART?

<input type="checkbox"/>	S Specific	<input type="checkbox"/>	M Measurable	<input type="checkbox"/>	A Achievable	<input type="checkbox"/>	R Realistic	<input type="checkbox"/>	T Time-bound
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Actions I need to take to achieve my goal

DATE

COMPLETED

.....	<input type="checkbox"/>
.....	<input type="checkbox"/>
.....	<input type="checkbox"/>
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.....	<input type="checkbox"/>
.....	<input type="checkbox"/>
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My motivation

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What obstacles might I face? How will I overcome them?

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Notes

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Access a library of health and wellbeing resources anywhere, anytime from your preferred device by visiting BeneHub at Benestar.com

