|  |  |
| --- | --- |
| **Goal:** | **Success?**  **(circle)** |
| Step #  Any barriers? Got a plan to overcome them?  Confidence 0-------------------------7-----------10 | *Yes*  *To some*  *extent*  *No*  **What next?** ….. |
| Step #  Any barriers? Got a plan to overcome them?  Confidence 0-------------------------7-----------10 | *Yes*  *To some*  *extent*  *No*  **What next?** ….. |
| Step #  Any barriers? Got a plan to overcome them?  Confidence 0-------------------------7-----------10 | *Yes*  *To some*  *extent*  *No*  **What next?** ….. |



My Action Plans (steps)

Name: