

# My SMART Lifestyle Goals

USING THE TABLE BELOW, LIST YOUR **SMART** GOALS FOR YOUR TREATMENT PLAN.

Get SMART	GOAL 1	GOAL 2	GOAL 3	GOAL 4	GOAL 5
<b>Specific</b>					
Who					
What					
Where					
When					
Which					
Why					
<b>Measurable</b>					
How much					
How many					
How will I know it's accomplished					
<b>Attainable</b>					
Skills					
Capacity					
Financial					
<b>Realistic</b>					
Willing	YES or NO	YES or NO	YES or NO	YES or NO	YES or NO
Able	YES or NO	YES or NO	YES or NO	YES or NO	YES or NO
<b>Time bound</b>					
Start date					
Finish date					

Consider your top goal (goal 1) from the list above and answer the following questions:

a. Why is this important to you?

b. How will this benefit you?



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