Goggle Days Planning Sheet

Name: Block:

*Answer the questions below in full sentences.*

1. What is your semester goal?

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2. Why is this goal important to you?

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3. What will you create to show you have met your goal?

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4. What resources and/or materials will you need?

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5. What new skills will you need to learn? Be specific.

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6. What will you need help with?

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7. Make a plan:

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| Class # | **What I plan to accomplish** |
| 1 | Set goal and complete planning sheet |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 8 |  |
| 9 |  |