

LGT version 3.2

Life psychological Goal setting Tool

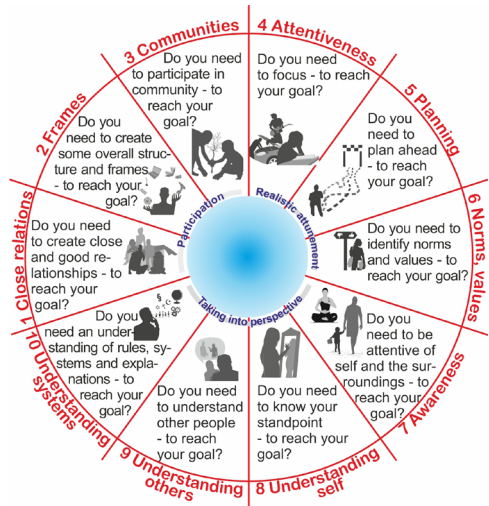
1: Set a goal

Which challenge would you like to work on?

Which goal may help you in this work?

S.M.A.R.T. GOAL?

- Specific ?
- Measurable ?
- Attuned?
- Realistic ?
- Timed



2: Choose a focus on your goal

A.	B.	C.
A: How is this skill already working well?	B: How is this skill already working well?	C: How is this skill already working well?
A: How can you improve this skill?	B: How can you improve this skill?	C: How can you improve this skill?

3: The next step towards your goal

Next step towards the goal using this focus?	Next step towards the goal using this focus?	Next step towards the goal using this focus?
You will take the next step at this point in time: ...and/or when you experience the following:	You will take the next step at this point in time: ...and/or when you experience the following:	You will take the next step at this point in time: ...and/or when you experience the following:
IS YOUR NEXT STEP MOTIVATING? yes maybe no <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Do you want to? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are you capable of? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> External possibilities? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are you being met? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Do you act?	IS YOUR NEXT STEP MOTIVATING? yes maybe no <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Do you want to? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are you capable of? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> External possibilities? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are you being met? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Do you act?	IS YOUR NEXT STEP MOTIVATING? yes maybe no <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Do you want to? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are you capable of? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> External possibilities? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are you being met? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Do you act?

Name: _____

Date: _____

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