Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Activity 4 - Six Weeks S.M.A.R.T. Goals Planner**

**MONTHLY Activities**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Week #** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **1**  **Date** |  |  |  |  |  |
| **2**  **Date** |  |  |  |  |  |
| **3**  **Date** |  |  |  |  |  |
| **4**  **Date** |  |  |  |  |  |
| **5**  **Date** |  |  |  |  |  |
| **6**  **Date** |  |  |  |  |  |
| **Six Weeks’ Priorities:** | | | | | |