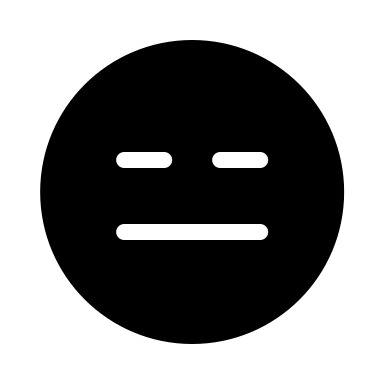
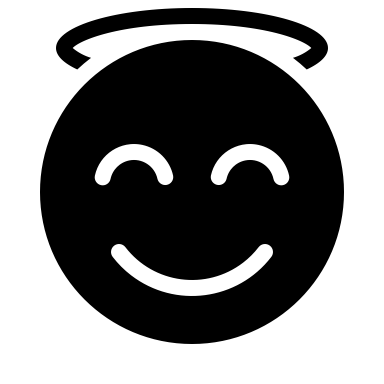
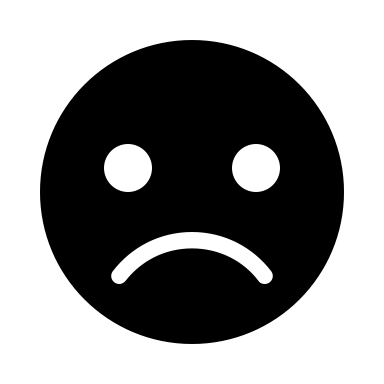
Name: Week #:

**Weekly SMART Goals Check-in**

Circle the face that represents your efforts this week towards your SMART goals.





What did I do well this week?

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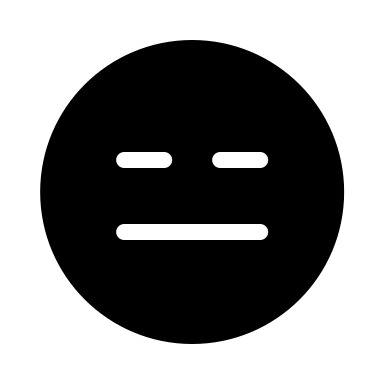
What can I do to improve next week?

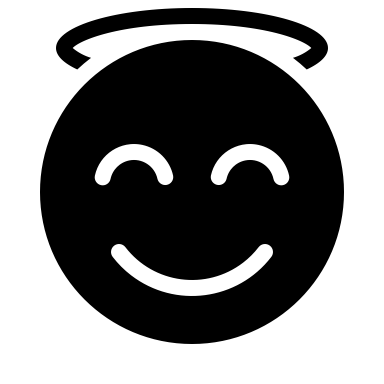
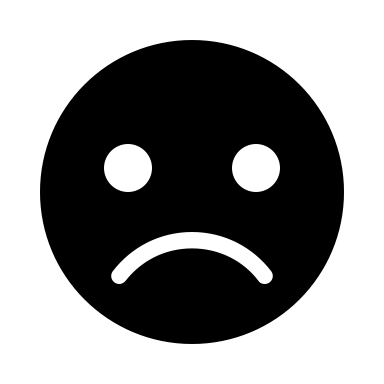
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Name: Week #:

**Weekly SMART Goals Check-in**

Circle the face that represents your efforts this week towards your SMART goals.





What did I do well this week?

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What can I do to improve next week?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_