



Parental/Caregiver Goals

Family Name: _____

June 2013

<p>Goal 1: Language, literacy, and social interaction skills of children aged 0-17 will be enhanced so they are better able to achieve success at home, school, and in the community.</p> <p><i>Ex: Songs and rhymes, supporting and building on the positives already being done, reading & writing skills, increasing a child's confidence, having fun as a tool for learning, positive communication, RSI...</i></p>	<p>Goals: Caregivers Evaluations *Please check off ratings below that best describes the goals that were met:</p> <p>Do you feel based on review of your goal setting that you have increased your awareness of factors needed for healthy learning in the home, community and work.</p>
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Parent/Caregiver Goals

<p>1. Date: _____ 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/></p>	<p>1: Somewhat met goal <input type="checkbox"/> Met goal <input type="checkbox"/> Exceeded goal <input type="checkbox"/></p> <p>Comments:</p>
<p>2. Date: _____ 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/></p>	<p>2: Somewhat met goal <input type="checkbox"/> Met goal <input type="checkbox"/> Exceeded goal <input type="checkbox"/></p> <p>Comments:</p>
<p>3. Date: _____ 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/></p>	<p>3: Somewhat met goal <input type="checkbox"/> Met goal <input type="checkbox"/> Exceeded goal <input type="checkbox"/></p> <p>Comments:</p>

<p>Checking in at 2 months. – Date:</p>	<p>Checking in at 6 months. – Date:</p>
<p>Family: Do goals still apply? Yes <input type="checkbox"/> Somewhat <input type="checkbox"/> No <input type="checkbox"/></p> <p>Family: I have made progress in meeting my goals? Agree <input type="checkbox"/> Somewhat agree <input type="checkbox"/> Somewhat disagree <input type="checkbox"/> Disagree <input type="checkbox"/></p>	<p>Family: Do goals still apply? Yes <input type="checkbox"/> Somewhat <input type="checkbox"/> No <input type="checkbox"/></p> <p>Family: I have made progress in meeting my goals? Agree <input type="checkbox"/> Somewhat agree <input type="checkbox"/> Somewhat disagree <input type="checkbox"/> Disagree <input type="checkbox"/></p>
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<p>Goal 2: Parents/caregivers encourage and support their children's learning.</p> <p><i>Ex: Understanding how each other learns (learning styles), building confidence, learning through play, positive encouragement (using the right words, not rewards), strategies around making learning fun and/or interesting...</i></p>	<p>Goals: Caregivers Evaluations *Please circle ratings below that best describes the goals that were met:</p> <p>Do you feel based on review of your goal setting that you have increased your awareness of factors needed for healthy learning in the home, community and work.</p>
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<p>Goal 3: Parents/caregivers increase their own basic literacy and learning skills.</p> <p><i>Ex: Learning styles, continuing education, parenting tips, positive interaction between caregivers and child, reading & writing, numeracy, computer use, filling out documents, increase knowledge with parenting skills...</i></p>	<p>Goals: Caregivers Evaluations *Please circle ratings below that best describes the goals that were met:</p> <p>Do you feel based on review of your goal setting that you have increased your own basic skills?</p>
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