



GOSOSY Reporting Form 2017 Goal Setting / Learning Plan

State: _____ **Service Provider:** _____

Instructions: Please record the results of your students' participation in Goal Setting implementation and Learning Plan implementation. All data will be collected for each state's Director Coordinator Report – Form 1.

1. Goal Setting results:

Student Name	Date Goal Setting Began	Date Goal Setting Ended	Goal Setting Rubric Score	Score of 8 or More? (Y or N)
Ex. John Doe	6/1/17	6/15/17	10	Y

Comments:

2. Learning Plan results:

Student Name	# Steps needed to meet their goal	# Steps completed toward their goal	Were half or more of the steps completed? (Y or N)
Ex. Jane Doe	12	8	Y

Comments: