**Template: Personal Plan**

The change I want to make is:

My desire to make this change is (rate on a scale of 1–10):

My confidence in making this change is (rate on a scale of 1–10):

*What would you need in order to raise this number by at least 1 point? Use your response to this question to assist in filling out the rest of this plan*.

The most important reasons why I want to make this change are:

The strengths I bring to this change are:

The (SMALL) steps I plan to take in changing are:

|  |  |
| --- | --- |
| Specific Action  | When |
|  |  |
|  |  |
|  |  |

The ways other people can help me are:

|  |  |
| --- | --- |
| Person | Possible ways to help |
|  |  |
|  |  |
|  |  |

Some things that could interfere with my plan are:

|  |  |
| --- | --- |
| Possible obstacles | How to (KINDLY) respond |
|  |  |
|  |  |
|  |  |

I will know that my plan is working when I see these results:

How is your confidence now? Speak with a counsellor, occupational therapist, friend, etc., about your remaining concerns and add them to/revise your **Personal Plan.**