

## Teaching Practice Action Plan

<b>Coach:</b>		<b>Teacher/Provider:</b>		<b>Date:</b>	
<b>Delegate/GO:</b>		<b>Provider/Center:</b>		<b>Funding:</b> <input type="checkbox"/> MSHS <input type="checkbox"/> RHS <input type="checkbox"/> EHS <input type="checkbox"/> State <b>Program Model:</b> <input type="checkbox"/> Center <input type="checkbox"/> Home Base <input type="checkbox"/> FCCH	
<b>The long-term goal is:</b>					
<b>The short-term goal I will work on is:</b>					
<b>Steps to achieve this goal:</b>		<b>Resources needed:</b>			<b>Timeline:</b>
<b>Review Date:</b> _____					
<input type="checkbox"/> I know I achieved this goal because:		<input type="checkbox"/> I am making progress toward this goal and will keep implementing my action plan.		<input type="checkbox"/> I need to change my plan to achieve this goal by revising the goal or changing the action steps.	