**Semester Goal Form**

Your Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Period : \_\_\_\_\_\_\_\_\_\_

We are officially halfway through the semester. Please think about your performance and your learning goals for the rest of the semester and complete this sheet. I will make a copy of this goal sheet and return it to you tomorrow. If you get it signed by your parent/guardian, you will receive extra credit.

**Performance Goals**

**Grade**

What is your percentage and grade in this class now? \_\_\_\_\_\_\_\_\_\_\_

What percentage and grade do you want at the end of the semester? \_\_\_\_\_\_\_\_\_\_

**Literacy**

What percentage of the text do you think you comprehend currently? \_\_\_\_\_\_\_\_\_

What percentage of the text would you like to comprehend at the end of the semester? \_\_\_\_\_\_

**Number of countries**

How many countries of the world do you know so far this semester? \_\_\_\_\_\_\_\_\_\_\_\_\_

How many would you like to know at the end of the semester? \_\_\_\_\_\_\_\_\_\_\_\_\_

**Learning Goals**

What other goals do you have for yourself (a more positive attitude, more thoughtful annotation, take more leadership in the class, be more organized, etc.)?

1.

2.

3.

Three things you are going to do each week to accomplish your goals:

1.

2.

3.