



# C.R.O.S.S.ROADS™ Goal Planning Sheet

Academic Effort Goal  
 Character Goal  
 LP Respect, Compassion

Name Ms Tucker Date 8/23

1) **Personal Goal:** My goal is to implement the Magic Triad culture in my classroom including the manner in which I handle classroom management and discipline, integrating it with Choice strategies, Life Principles, and 8 Expectations..

2) **Steps to achieve goal:**

Who	What effort is required? (personal or by other person/s)	When (Date)	Completed Date
ME	Review and select <u>Strategies for Use of the Magic Triad</u> and the <u>Ideas at the Door</u> from online <u>Practice 9</u> resources and include in lesson plans. Always be at the door early enough to greet every student. Consider making the <u>Magic Triad Greeting Rug</u> .	Week of 8/23	
ME	Make copies of the <u>Magic Triad Posters</u> to display. Check out the <u>Literature/Poems about Magic Triad</u> and the <u>Music for Practice 9</u> and select pieces to use each week.	Week of 8/23	
ME	Use the <u>Mind Map on Magic Triad</u> to brainstorm with the class what it will look like. Use the <u>Simplified Goal Setting Worksheet</u> to set a goal in our classroom. Reinforce the <u>Pr. 2 - speaking in complete sentences</u> strategies.	8/25	
ME	Review and use our <u>C.R.O.S.S.ROADS Simplified Decision-making Process Worksheet</u> consistently modeling how to work through any problems or conflicts. Include having students analyze our stories with <u>C.R.O.S.S.ROADS™ Decision-making Process</u> . Use strategies from the <u>Choice C.R.O.S.S.ROADS Directory</u> .	Week of 8/23	

3) Evaluate progress towards goal - Check one:  Daily  Weekly  Monthly  
 Every \_\_\_ Days  Other: i.e. after weekly quiz \_\_\_\_\_

Date of 1st Evaluation: 9/6

Method for Evaluating Progress:  Completed Projects  Quiz/Test  
 Homework Grades  Rubric  Other: Observations and goal checks with whole class

4) Progress Data will be kept in:

Data Log  Digital Class  Graph  Other: Track number of discipline incidents

5) My Accountability Partner will be: (Check one or more as appropriate) OPTIONAL

Classmate  Teacher  Parent  Other \_\_\_\_\_

Mr. Thomas

(Name of Accountability Partner)

Mr. Thomas

(Signature of Accountability Partner)