

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

Name: \_\_\_\_\_ Date: \_\_\_\_\_

1) Choice Option/s Selected from C.R.O.S.S.ROADS™ Decision-Making Process:

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2) Plan for personal effort to make my choice happen:

Who	What effort on my part?	When (Date)	Done (Date)

3) Evaluate progress. Check one:  Daily  Weekly  Monthly

Every \_\_\_ day  Other: \_\_\_\_\_

Method for evaluating progress: \_\_\_\_\_

4) Date for Review and Revision if needed: \_\_\_\_\_

5) Progress Accountability: (Optional)

\_\_\_\_\_  
 Accountability Partner will be: (Select one or more as appropriate: Classmate, Teacher, Parent, Other)

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Signature