Weekly Goals Record

Name:_____

Signature: _____

TASKS TO BE COMPLETED	How often?	Monday Date:	Tuesday Date:	Wednesday Date:	Thursday Date:	Friday Date:	Saturday Date:	Sunday Date:	Done? Y/N	Impact? 0-4
Reading										
Calming Technique										
Thought Diaries										
Pleasant Events										
Exposure tasks										
Other behavioural goals										

Eap Assist

Impact Ratings: 0 = Definitely did not find task useful 1 = Not very useful 2 = Not sure if it was useful 3 = Quite useful 4 = Very useful