

Change Plan Worksheet

Name: _____ Date: _____

Some changes I want to make include:

The reasons why I want to make these changes include:

My plan for making these changes is to:

I will know my plan is working when this happens:

Some things that could interfere with my plan for change include:

If those things interfere, I plan to:

Use the scale below to answer the following questions:

Not important at all – 0 – 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10 – Very important

_____ How important is it to make this change?

_____ How motivated am I to make this change?

_____ How confident am I that I can make this change?