

Blue Heron Elementary  
Parent Goal Setting Form

This form should be filled out by the parent(s). Please take some time to reflect on your child's strengths and challenges in each of the following areas. When you are finished, please return this for to your child's Mrs.Fognani.

	Strengths	Challenges
Writing:		
Reading:		
Math:		
Social Studies & Science:		
Work Habits:		

Using the information above, create 2 goals you would like to see your child accomplish this school year.

1. Goal #1 \_\_\_\_\_  
\_\_\_\_\_

As a parent I will help by child accomplish this goal by: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Goal #2 \_\_\_\_\_  
\_\_\_\_\_

As a parent I will help by child accomplish this goal by: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student Signature: \_\_\_\_\_  
Date \_\_\_\_\_

Parent Signature \_\_\_\_\_  
Date \_\_\_\_\_