Directions: At the beginning of the month, plan an individualized goal for each child. Select where the individualized goal comes from, using the below choices. Incorporate activities to meet the individualized goal on your weekly lesson plans marked with an *. At the end of the month, record progress the child has made to meet the individualized goal in the Outcome section.

Class_____ # Individualization **Month_____**

Child's Name	Area of Dev.	Objective	Goal From
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			

Child's Name	Area of Dev.	Objective	Goal From
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			
			□ IEP/IFSP □ Parent Goal □ GOLD/Screening Concern
Outcome:			

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