Unit #1 Title: Targeting Careers

Lesson Title: My School Goal (Part 3)   **Lesson:** 3 of 4

Grade Level: 3

Length of Lesson: 30 minutes sessions

Missouri Comprehensive School Counseling Big Idea:
CD.7: Applying Career Exploration and Planning Skills in the Achievement of Life Goals

Grade Level Expectation (GLE):
CD.7.A.03:   Identify and apply the steps to setting short-term, long-term, personal and educational goals.

American School Counselor Association (ASCA) Mindsets and Behaviors:
Career Development

Materials and Resources (include handouts or supporting documents)

My Goal Sheet Student Mini Goal Sheet
My School Goal Weekly Goal Sheet completed during lesson 2
Board, flip chart or other visual media
Pencil or chalk

Show Me Standards: Performance Goals (check one or more that apply)

X	Goal 1: Gather, analyze and apply information and ideas
	Goal 2: Communicate effectively within and beyond the classroom
	Goal 3: Recognize and solve problems
X	Goal 4: Make decisions and act as responsible members of society

This lesson supports the development of skills in the following academic content areas.
Academic Content Area(s)   **Specific Skill(s)**

X	Communication Arts	3. Reading and evaluating nonfiction works and material 4. Writing formally and informally
	Mathematics	
	Social Studies	
	Science	
	Health/Physical Education	
	Fine Arts	

Enduring Life Skill(s)

X	Perseverance		Integrity	X	Problem Solving
	Courage		Compassion		Tolerance
	Respect	X	Goal Setting	X	Decision Making

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Lesson Measurable Learning Objectives:

The student will evaluate progress toward a goal.

Lesson Formative Assessment (acceptable evidence):

Assessment should relate to the performance outcome for goals, objectives and GLEs. Assessment can be question answer, performance activity, etc.
The student will review his/her weekly goal sheet and evaluate the success of his/her actions toward accomplishment of his/her goal (self-assessment- Rethink-Revise/Refine-Reflect).

Lesson Preparation

Essential Questions:
Why to people review and reflect on their goals?

Engagement: Think about how your day has gone so far today. Students will raise their hands as the counselor shares the words underlined words below.
Feedback: Great…why? Okay…Why? Not good…Why? One or two students will explain why they rated their days as they did.

Procedures

Instructor Procedures/Instructional Strategies:	Student Involvement/Instructional Activities:
1. The instructor asks students to brainstorm in small groups of 4 or 5 and share their meaning of "evaluation." **Evaluation is like feedback…how did you do?**	1. Students brainstorm their ideas in small group and share their ideas with the larger group.
2. Students are given the weekly goal setting plan they completed during the last session to review and evaluate the success of their actions.	2. Students self assess how they did with accomplishing their short-term goal after reviewing their Student Mini Goal Sheet that is taped to their desk.
3. Students are asked to write their self-evaluation feedback on the plan they developed in lesson 2.	3. Students evaluate their success using the following scale: a. I completed my goal. b. I improved my goal. c. I am still working on my goal. d. I didn't do anything to accomplish my goal.
4. Instructor asks students to share their self-evaluation feedback in small groups and then asks a few students to share "learning" with the larger group.	4. Students share their self-evaluation feedback and/or a "Idea" they learned.
5. At the end of class the instructor asks	5. Students take a supply of mini goal sheets

students to continue to set short term goals for their schoolwork.	to continue to use in their goal setting.

Teacher Follow-Up Activities

The instructor encourages the teacher to have students set weekly short-term goals using the mini goal sheet.

Counselor reflection notes (completed after the lesson)

Student Mini Goal Sheet

My Goal Sheet	*My Goal Sheet*
Name _____	**Name** _____
Date _____	**Date** _____
Goal 1_____ _____	**Goal 1**_____ _____
Feedback before next session: Mark daily: **1.** Did a good job **2.** OK **3.** Keep working	Feedback before next session: Mark daily: **1.** Did a good job **2.** OK **3.** Keep working

My Goal Sheet (top-left) feedback table:

Mon.	Tues.	Wed.	Thurs.	Fri.

Comments:_____

My Goal Sheet (top-right) feedback table:

Mon.	Tues.	Wed.	Thurs.	Fri.

Comments:_____

My Goal Sheet

Name _____

Date _____

Goal 1_____
_____
Feedback before next session:
Mark daily:
1. Did a good job   **2.** OK   **3.** Keep working

Mon.	Tues.	Wed.	Thurs.	Fri.

Comments:_____

My Goal Sheet

Name _____

Date _____

Goal 1_____
_____
Feedback before next session:
Mark daily:
1. Did a good job   **2.** OK   **3.** Keep working

Mon.	Tues.	Wed.	Thurs.	Fri.

Comments:_____