| **Executive Name** |  |
| --- | --- |
| **Goal Title** |  |
| **Goal Type (Strength / Development)** |  |
| **Goal Description****SMART Goal: S (Specific), M (Measurable), A (Agreed and Accepted), R (Realistic), and T (Time-bound).** |  |
| **Competency Addressed**What OPM ECQ’s are being addressing? |  |
| **Expected Outcomes / Measure** How will you know that you were successful? How will other’s be able to observe your success? |  |
| **Current Reality**A number between 1 and 10 |  |
| **Desired Reality**A number between 1 and 10 |  |
| **Achieve the Goal by When** | **DATE:** |
| **Activity 1** (Including any resources needed)  | Start Date | Finish Date | **Progress** |
| **Activity 2** (Including any resources needed) | Start Date | Finish Date | **Progress** |
| **Activity 3** (Including any resources needed) | Start Date | Finish Date | **Progress** |