



Goal-Setting Form

FOR THE CIRCLE CLASSROOM ENVIRONMENT CHECKLIST (CEC)

Teacher:	Date:	School Year:			
Site:	Age Group:	Infant	Toddler	Pre-K	
Coach:	Time of Year:	BOY	MOY	EOY	Other
Date goals to be completed by:	TSR Only-Teacher Status:	PY1	Y1	Y2	Y3

CEC Goals:

Resources for CEC Goals:

On My Own:

With Support:

Additional Comments: