**LEARNING PLAN**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| **How I Learn Something New** | **Often** | **Sometimes** | **Never** |
|  | | | |
| By myself |  |  |  |
| In a group |  |  |  |
| When it is quiet |  |  |  |
| With music playing |  |  |  |
| By watching others |  |  |  |
| By trying it myself |  |  |  |
| By listening to instructions |  |  |  |
| By reading about it |  |  |  |

Other ways I learn:

My goal is to learn:

There are some things about \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ that I already know, including:

These are some things I would like help with:

This is what I want to work on first:

This is how I will know I have reached my goal: