

Goal-setting checklist

Navigating the NDIS requires a clear understanding of one's own needs, strengths, and goals. As an NDIS participant, knowing these aspects will help you effectively advocate for the support and resources you may need. This checklist, designed for self-reflection, can be used as a tool to guide your thought process. **If you're unsure about any part, your support coordinator or network can help you explore and brainstorm these questions further.**

You can easily download and print or email the below checklist

Remember, goals don't happen overnight – so if you don't know all the answers, that's ok, too. Not having all the answers immediately is perfectly normal and part of your growth.

| Self-Reflection | | |
|---|---|--|
| ☐ I have identified my strengths. | | |
| \square I can name three activities that bring me joy. | | |
| $\hfill \square$ I am aware of the areas in my life where I require support. | | |
| Goal Setting — | | |
| Short-term Goals (Next 12 Months) | | |
| ☐ I have set a specific goal for the upcoming year. | | |
| ☐ I understand why this goal is important to me. | | |
| ☐ I know what types of support I need to achieve this goal. | | |
| Medium-term Goals (Next 2-3 Years) | | |
| ☐ I have a specific goal for the next 2-3 years. | | |
| ☐ I comprehend the importance of this goal. | | |
| ☐ I am clear on the support needed for this goal. | | |
| Long-term Goals (5+ Years) | | |
| ☐ I have envisioned a significant goal for the future. | | |
| ☐ I recognise the impact achieving this goal would have. | | |
| ☐ I understand the support systems necessary for this achievement. | | |
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| Enhancing Daily Life | | |
| $\hfill \square$ I have pinpointed activities for more independence and the required support | | |
| $\hfill \square$ I have chosen a skill to develop or improve, along with a development plan. | | |
| ☐ I am interested in community or social activities and know the supports needed. | | |
| Future Planning | | |
| ☐ I can envision my best possible life and the necessary conditions or supports. | | |
| ☐ I have listed the services or aids that could facilitate my goals. | | |
| ☐ I have identified supportive individuals or organisations in my network. | | |

Disclaimer: This checklist is intended as a guide for personal reflection and planning within the context of the NDIS. It is not a substitute for guidance from the NDIS or Service Provider. While it aims to assist participants in identifying their needs, strengths, and goals, individual circumstances may vary. Participants are encouraged to consult with their NDIS support coordinator or local area coordinator Copyright © 2024 myAutonomy. All rights reserved.