

**Lander University, AmeriCorps Program  
AmeriCorps Member Individual Goal Plan**

V. Sample 2

AmeriCorps Member:				Site:	
Site Mentor:				Date Submitted:	
<u>GOAL</u>	Target Date	Support/Resource	Course of Action	Progress Review Date	Status
<u>Education:</u>					
<u>Personal Development:</u>					
<u>Professional Development:</u>					
<u>Community Building:</u>					
<u>Life After AmeriCorps:</u>					

SAMPLE

AmeriCorps Member Signature: \_\_\_\_\_

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

Site Mentor Signature: \_\_\_\_\_

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

Program Assistant Signature \_\_\_\_\_

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

Program Director Signature \_\_\_\_\_

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