

**Northeast South Dakota Head Start Program**  
**Family Partnership Agreement**  
*Partnering for School Readiness and Life Success*

**“SMART GOALS”**

- **Specific:** not too broad or general
- **Measureable:** how you know you made it
- **Achievable:** not too ambitious
- **Realistic:** consistent with your situation
- Timed:** set a date to be done

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

*Every Family has strengths or good things that are happening.  
 What are the strengths of your family?*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*Our Goal:*

*Our Goal:*

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*Steps needed to reach goal:*

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*What support or resources are needed to complete each steps:*

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*Follow Up: What progress has the family made towards these goals:*

<i>Date:</i> _____	<i>Date:</i> _____
<i>Date:</i> _____	<i>Date:</i> _____

*Goal Category:*

- \_\_\_ Family Well-Being
- \_\_\_ Parent-Child Relationship
- \_\_\_ Families as lifelong Educators
- \_\_\_ Families as Learners
- \_\_\_ Family Engagement in Transitions
- \_\_\_ Family Connection to Peers & Community
- \_\_\_ Families as advocates & Learners

*Requesting more information regarding:*

- \_\_\_ Budgeting/ Money management
- \_\_\_ Child Behavior and Discipline
- \_\_\_ Child Development
- \_\_\_ Literacy: Bringing families together through stories
- \_\_\_ Nutrition/fitness
- \_\_\_ School Readiness: preparing children and parent for Kindergarten
- \_\_\_ Safety: Home, Farm and Community
- \_\_\_ Stress

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_