



Academic Parent-Teacher Teams<sup>®</sup> (APTT)



Family S.M.A.R.T. Goal Sheet  
(Teacher Copy)

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

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

**Foundational Grade Level Skill: Reading Fluency**

Today, my child read \_\_\_\_\_ words per minute correctly. **In 60 days**, I want my child to read \_\_\_\_\_ words per minute.

To help my child reach his or her goal, I will: \_\_\_\_\_

\_\_\_\_\_



Academic Parent-Teacher Teams<sup>®</sup> (APTT)



Family S.M.A.R.T. Goal Sheet  
(Parent Copy)

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

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

**Foundational Grade Level Skill: Reading Fluency**

Today, my child read \_\_\_\_\_ words per minute correctly. **In 60 days**, I want my child to read \_\_\_\_\_ words per minute.

To help my child reach his or her goal, I will: \_\_\_\_\_

\_\_\_\_\_

