

My Achievable ACTION PLAN

- **Why I am working this business?** (Extra Income, Freedom, More time with family, etc.)

- **What I am going to do?** (Incremental steps that will take me to my goal)

	Approaches	Presentations	Enrollments
Daily	#	#	#
Weekly	#	#	#
Monthly	#	#	#

- **When I am going to do it?** (Days of week & time of day. Establish your schedule)

- **How I am going to do it?** (Telephone, In person, On Net, w/up line, conference calls etc.)

- **10 Minute Weekly Mentoring Session:**
 Day _____ Time _____ Mentors Phone _____

I Give my Coach / Mentor / Friend (name) _____ permission to aggressively support & help me reach my goals.

X _____ Date _____