

PERFORMANCE VALUES FORM

Name: _____

Date: _____

The following is a list of performance values that may help direct your actions on a daily basis. After each value is recorded, please identify the barriers to, and the actions that must be taken in pursuit of, those values.

Training: How do you want to approach training? Why is this important to you?

Barriers and necessary actions:

Performance: How do you want to approach performing? Why is this important to you?

Barriers and necessary actions:



Cast mate: What type of cast mate do you want to be? Why is this important to you?

Barriers and necessary actions:

Industry member: What type of industry member do you want to be? Why is this important to you?

Barriers and necessary actions:

Well-being: How do you want to approach well-being? Why is this important to you?

Barriers and necessary actions:

(Adapted from Gardner & Moore, 2007)

