

Goals for a Better Day

Name _____ Age _____ Date _____

How did your day go? _____

How do you want your day to go? _____

What can you do to change your day to make it go the way you want it? _____

Make a timeline of a good day.

6 am	
7	
8	
9	
10	
11	
12 pm	
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	

Use this to practice having a good day. Change anything you need to make it even better as the days pass and you learn from your days.