

Physical N. E. E. D.

SLEEP:	1	2	3	4	5	6	7	8	hours

Health Cave

Nutrition

Annual Check-ups for vision, dental, and health. Refill prescriptions

1 2 3 4

<u>Breakfast</u>

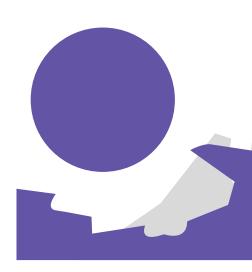
Health Concern

Lunch

Doctor's Notes

Dinner

Mental & Emotional NEEDS



Counseling	Stress Reduction	
Contraction of	BOUNDARIES	
	Saying no when you'd rather not do something	
	Not volunteering for extra work	
	Communicating needs directly to others	
—— Take a Break ——	COGNITIVE ABILITIES	
	Learning something new	
Day: Time:	Playing brain games to improve concentration	
Activity:	Reading	



Mindful Awareness

PERSONAL TIME THIS DAY

Morning Routine				
	Wake up on time			
	Stay away from social media			
	Record positive affirmation			
	Exercise			
	Shower			
	Eat a nutritious breakfast			

Affirmation

TODAY'S GOALS



Monthly ACTION

September-October

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Self-cave Action

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Self-care Action

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

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October-November

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Class Name :				
Address/Phone :				
Practice Schedule :	<u>GOALS</u>			
Take a shower before class Skip the perfumes/cologne Skip the scented lotion Avoid eating before class Leave my shoes at the door Sign in and pay before class Stay calm				
Practice seriously				
Appointment				

	10	De	29			
J	O	U	R	N	A	L

Date	:	
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Today's Mood





I FEEL SO