

SELF-CARE CHECKLIST



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Welcome, dear friend!

The Self-Care Checklist is your personal companion, guiding you on a journey toward self-love and growth.

It functions as a tool for self-reflection, encouraging you to assess your current state and identify areas that may require additional attention.

This inventory is a deliberate and personalized approach to understanding your strengths and focusing on the aspects of your life that contribute to your overall well-being.

Utilizing the checklist can establish a targeted self-care plan, directing your efforts toward specific areas that need nurturing.

It is designed to be more than a simple list; it is a practical guide for intentional self-discovery and personal development.

This checklist empowers you to create a life that aligns with your priorities and fosters a sense of fulfillment.

Sincerely,

Tatiana Bell



Check List



Environment

- ☐ Is your office organized so you can find things easily?
- ☐ Are there more than two piles of papers, magazines, and books in your workspaces?
- ☐ Does your home provide you comfort and a peaceful place where you can think?
- ☐ Are your appliances in working order?
- ☐ Do you have backup systems in case of electric failure, including a backup energy source for your computers?
- ☐ Do you maintain your car regularly so everything works properly?
- ☐ Does your home have a smoke detector, fire extinguisher, and easy contact with the police?
- ☐ Do you keep enough home and office supplies so you don't run out?
- ☐ Do you find the colors and decor in your home and office pleasing?
- ☐ Is the temperature in your home and office comfortable?



Physical Health

- ☐ Do you sleep six to eight hours every day?
- ☐ Is your bed comfortable?
- ☐ Does your back feel fine after sitting in your chair at work?
- ☐ Do you eat fresh, healthful food almost every day?
- ☐ Do you exercise at least three times a week?
- ☐ Is your cholesterol count within the normal range?
- ☐ Do you drink at least five glasses of filtered water each day?
- ☐ Do you drink zero to two caffeinated drinks a day?
- ☐ Do you keep your sugar intake to a minimum?
- ☐ Do you get a medical physical annually?

Check List



Mental Health

- ☐ Do you wake up looking forward to your day?
- ☐ Do you take the time to acknowledge what you are grateful for each night?
- ☐ Do you take at least two vacations a year that refresh and energize you?
- ☐ Do you have someone in your life that hugs you regularly?
- ☐ Do you arrive at least five minutes early for your appointments?
- ☐ Do you take your time when driving?
- ☐ Do you promise only what you can deliver?
- ☐ Do you regularly explore new ways of perceiving the world?
- ☐ Do you have a good belly laugh at least once a day?
- ☐ Do you have at least two friends outside of your immediate family with whom you feel free to talk about anything?



Money

- ☐ Do you have little or no debt?
 - ☐ Do you save at least 10 percent of your income?
 - ☐ Do you carry enough cash with you to cover emergencies?
 - ☐ Are you compensated adequately for your work?
 - ☐ Do you recover from financial disappointments quickly, knowing things will improve?
 - ☐ Do you have savings to cover home, car, and health emergencies?
 - ☐ Are you amply insured for your home, car, and health?
 - ☐ Do you invest in your own career development so you can earn more in the future?
- Or, are you saving enough for your retirement?
- ☐ Do you have a special knowledge or skill that gives you job security?
 - ☐ Do you have a reputable and knowledgeable financial advisor?

Check List



Relationships

- ☐ Do your family/friends/colleagues encourage your dreams?
- ☐ Do your family/friends/colleagues support your efforts to relieve your stress?
- ☐ Do you avoid no one?
- ☐ Have you said you were sorry to those who you've harmed in some way?
- ☐ Have you forgiven everyone who has hurt you?
- ☐ Do you tell those you love how much you care about them?
- ☐ Are you free of the need to fix other people?
- ☐ Are you free of people who repeatedly disappoint, frustrate, drain, or disrespect you?
- ☐ Do you feel significant with everyone you meet?
- ☐ Do you have a relationship with nature, your God, or a force outside of yourself that recharges your faith?

Summary

Calculate boxes checked for each category



Environment	<input type="text"/>
Mental Health	<input type="text"/>
Relationships	<input type="text"/>
Physical Health	<input type="text"/>
Money	<input type="text"/>

TOTAL
BOXES
CHECKED

- Evaluate in which category the lowest score is, and it requires attention first and foremost.
- Set goals to achieve the boxes left blank, one box at a time.
- Start with the category you scored the highest on, so you begin on your most muscular foot.
- Work on this checklist until your score reaches at least 45.

What's Next?



360-Degree Clarity Session

Dive deep into your challenge.
Answer questions, reflect, and be heard.
Uncover unexpected aspects.
Gain insights into the root cause
and receive recommendations
for positive changes.
90 min - \$150

SCHEDULE YOURS



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