**🌿 Daily Mind-Body Tracking Journal**

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**🧠 Mood & Emotions**

**Overall mood today (1–10):** \_\_\_\_\_\_\_
**Describe your mood in a few words:**

**Emotional highs/lows or changes during the day?**

**💇 Hair Pulling**

**Urge to pull (0–10):** \_\_\_\_\_\_\_
**Did you pull today?** ☐ Yes ☐ No
**If yes:**

* **When?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **How long?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **What were you feeling/thinking before/during?**

**What helped reduce the urge (if anything)?**

**🍽️ Food & Eating**

**Meals & Snacks (list what you ate, approx. times):**

* Breakfast: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Lunch: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Dinner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Snacks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Did you have any cravings, sensitivities, or reactions?**

**Energy or mood changes after meals?**

**🛌 Sleep**

**Hours slept last night:** \_\_\_\_\_\_\_
**Sleep quality (1–10):** \_\_\_\_\_\_\_
**Any sleep disruptions?** ☐ Yes ☐ No
If yes, describe:

**🧘 Stress & Triggers**

**Stress level today (1–10):** \_\_\_\_\_\_\_
**Top stressors or triggers:**

**What helped you cope today?**
☐ Exercise ☐ Talking to someone
☐ Breathing/mindfulness ☐ Journaling
☐ Supplement/medication ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**🌟 Gratitude or Wins**

Write 1–2 positive things about today, no matter how small: