

ULTIMATE

self-care

PLANNER

Remember to look after yourself

DAILY SELF-CARE

DATE -

Daily self-care

Today's quote -

Today I am grateful for

Today self-care looks like

Water goals



Meal goals

breakfast -

lunch -

dinner -

Daily self-care checklist

- Get fresh air
- Move my body
- Drink water
- Positive self talk
- Stick to meal plan

notes

WEEKLY SELF-CARE

Week: _____

Quote: _____

MON	How I practiced self-care mentally:	How I practiced self-care physically:
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TUES	How I practiced self-care mentally:	How I practiced self-care physically:
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WED	How I practiced self-care mentally:	How I practiced self-care physically:
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THURS	How I practiced self-care mentally:	How I practiced self-care physically:
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FRI	How I practiced self-care mentally:	How I practiced self-care physically:
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SAT	How I practiced self-care mentally:	How I practiced self-care physically:
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SUN	How I practiced self-care mentally:	How I practiced self-care physically:
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MONTHLY SELF-CARE

JAN FEB MARCH APRIL MAY JUNE JULY AUGUST SEPT OCT NOV DEC

Monthly summary

Affirmation for the month -

Mental focus

Health & wellness focus

Top priorities

Worry less about

Self-care ideas

■ Take a bath once a week

■ Sit in the sun with a good book

■ Meditate more often

Improvement

■ Work on 8 hours sleep

■ 8 glasses of water a day

■ Balanced meals

SELF-CARE FOCUS AREAS

8 CATEGORIES OF SELF-CARE

Physical

Psychological

Emotional

Social

Professional

Environmental

Spiritual

Financial

SELF-CARE ROUTINES

MORNING ROUTINE

	M	T	W	T	F	S	S
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EVENING ROUTINE

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	M	T	W	T	F	S	S

SLEEP TRACKER

HOURS SLEPT

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

MONTH

JAN
FEB
MAR
APR
MAY
JUN
JUL
AUG
SEP
OCT
NOV
DEC

NOTES

MEAL TRACKER

MONTH - _____

	WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
SATURDAY					
SUNDAY					

SELF-CARE ACTIONS LIST

MONTH -

WEEK -

“

”

MONDAY

- _____
- _____
- _____
- _____
- _____

TUESDAY

- _____
- _____
- _____
- _____
- _____

WEDNESDAY

- _____
- _____
- _____
- _____
- _____

THURSDAY

- _____
- _____
- _____
- _____
- _____

FRIDAY

- _____
- _____
- _____
- _____
- _____

SATURDAY

- _____
- _____
- _____
- _____
- _____

SUNDAY

- _____
- _____
- _____
- _____
- _____

IMPORTANT NOTES

- _____
- _____
- _____
- _____
- _____

30-DAY SELF-CARE CHALLENGE

Self-improvement & self-love

<input type="checkbox"/> Take a long bath	<input type="checkbox"/> Do some exercise	<input type="checkbox"/> Phone an old friend	<input type="checkbox"/> Go for a walk in the park	<input type="checkbox"/> Watch your favorite series
<input type="checkbox"/> Do some yoga	<input type="checkbox"/> Take time to journal	<input type="checkbox"/> Make a healthy meal	<input type="checkbox"/> Bake your favorite recipe	<input type="checkbox"/> Do a face mask at home
<input type="checkbox"/> Go for coffee with a friend	<input type="checkbox"/> Drink a healthy smoothie	<input type="checkbox"/> Get your nails done	<input type="checkbox"/> Go for a massage	<input type="checkbox"/> Get your hair done
<input type="checkbox"/> Take a shower	<input type="checkbox"/> Go to a sauna	<input type="checkbox"/> Take a nap and get some rest	<input type="checkbox"/> Sit in the sun and get some Vit. D	<input type="checkbox"/> Create a morning routine
<input type="checkbox"/> Create an evening routine	<input type="checkbox"/> Buy new skincare products	<input type="checkbox"/> Watch an old movie you love	<input type="checkbox"/> Think about 3 things you're grateful for	<input type="checkbox"/> Go out for the day
<input type="checkbox"/> Take a walk on the beach	<input type="checkbox"/> Cut out sugar for a week	<input type="checkbox"/> Stay hydrated	<input type="checkbox"/> Try something new	<input type="checkbox"/> Be kind to a stranger

SELF-CARE FOCUS

Date - _____

Main self-care focus - _____

Start date - _____

End date - _____

Breakdown of main focus

Smaller tasks to accomplish self-care focus goal

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Notes

SELF-CARE ACTIONS

Action -

Why is this important to me?

1	2	3	4	5	6	7	8	9	10
11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30

Habit -

Why is this important to me?

1	2	3	4	5	6	7	8	9	10
11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30

HABIT TRACKER

Month -

Week -

HABIT - _____

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

HABIT - _____

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

HABIT - _____

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

HABIT - _____

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

HABIT - _____

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

STRESS-FREE CHALLENGE

Start Here

Go through the challenge for the next 10 days to create a life that is a little more stress-free!

1

Take time to exercise and move your body today

2

Take a long walk outside in an environment that you love

3

Put together a supplement routine to support your body

4

Learn how to do some breathing exercises for any stress or tension

5

Keep a journal and take time to write your thoughts

6

Try essential oils and discover if they will benefit you or not

7

Take time to be creative. Create some kind of artwork today

8

Do yoga or meditate and see if it helps with your stress

9

Take time to hug someone you love or have a good laugh with a friend

10

Take time to drink more water or herbal tea today

The End!

Well done on completing the stress-free challenge!

A LETTER TO ME

Dear future me...

HOW TO WRITE A LETTER TO YOURSELF
Choose an age where you will be different from who you are now and write a letter to you in the future. Pick a date to open the letter. Chat about who you are now, your future goals, and your current beliefs and values.

QUESTIONS TO ANSWER
1 - What goals do you have
2 - How do you currently feel about your life
3 - What are you looking forward to
4 - What are your biggest dreams

5 MINUTES OF GRATITUDE

3 People I'm grateful for

What I love about my body

Something I have recently achieved and am proud of

Something that made me laugh today

2 things I'm looking forward to

What did I bring to the day

SELF-REFLECTION QUESTIONS

Share 4 things that you love about yourself?

What makes you feel strong and confident?

What's the best compliment you have received & why?

What does it feel like to be accepted and love unconditionally?

30-DAY CHALLENGE

Let's do this

30-DAY CHALLENGE TO A HEALTHY LIFESTYLE

- Join the gym
- Run 5k
- Go for a long walk
- Drink water only
- Make a healthy smoothie
- Go vegan for a week
- Eat clean for a month
- Cut out sugar
- Get enough sleep
- Listen to your body
- Try out yoga
- Meditate in nature
- Cut out alcohol
- Drink more tea
- Consume less caffeine
- Don't deprive yourself
- Practice gratitude
- Try something new
- Don't eat past 7pm
- Get sunlight daily
- Read more
- Take a phone break
- Walk barefoot outside
- Journal more
- Have a cold shower
- Make your bed
- Take probiotics
- Try kombucha
- Use a facemask
- Use clean products

SELF-CARE ACTIVITIES

MENTAL

Take a day off from everything

Self-reflect with journal prompts

Take a social media break

Go for a walk to clear your head

Call an old friend and just talk

Read a book you enjoy

Attend a social event you enjoy

PHYSICAL

Start a new outdoor hobby

Join the gym and exercise

Drink enough water

Get enough sleep at night

Eat a balanced diet daily

Stretch if you work at a desk

Take a day off to pamper yourself

EMOTIONAL

Spend time with someone you love

Watch a funny series or movie

Write down what you're grateful for

Write some text over here

Talk positively to yourself

Connect to your inner child

Figure out what triggers you

GRATITUDE PRACTICE

HEALTH

FRIENDS

FAMILY

MIND

WORK

HOME

SELF-CARE QUIZ

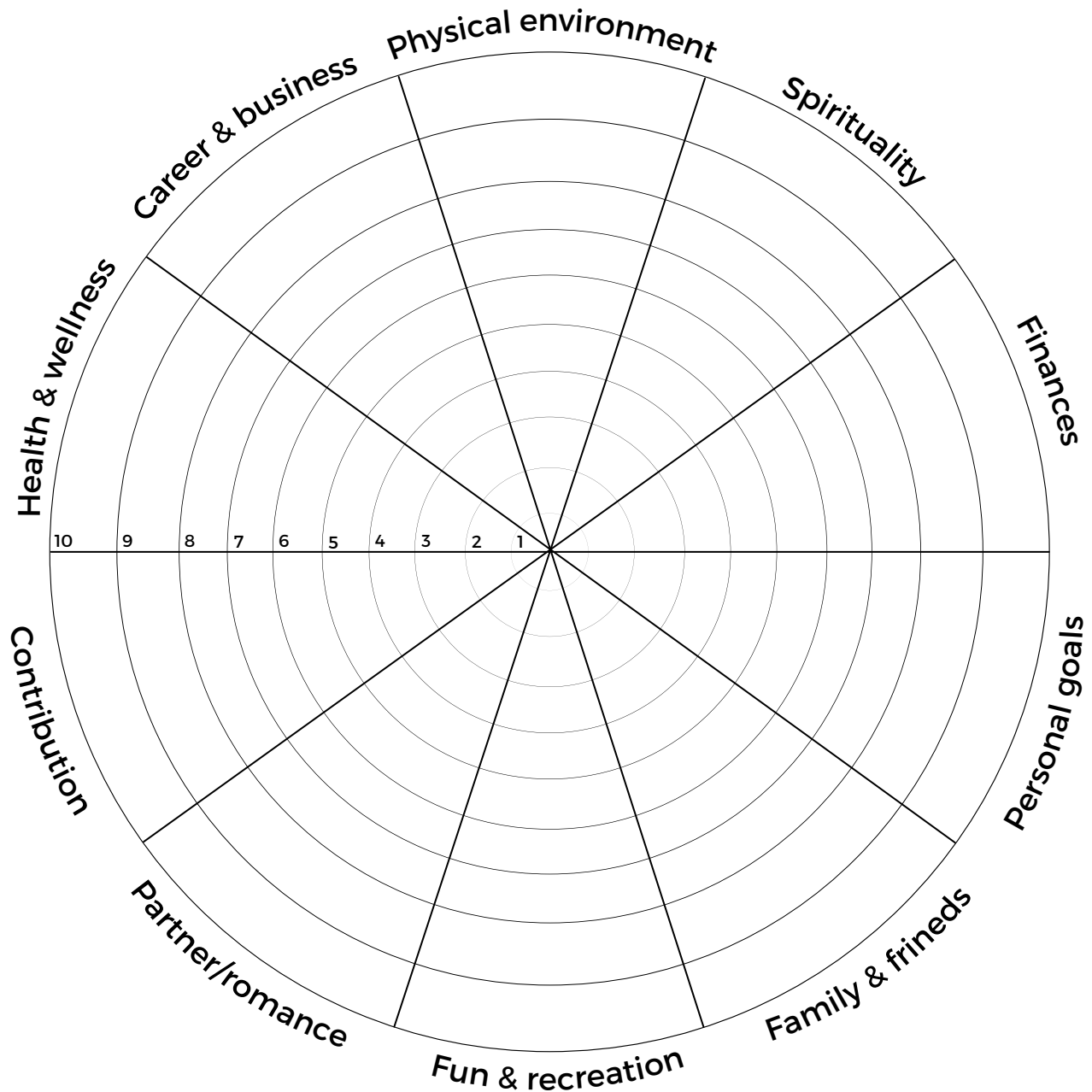
INSTRUCTIONS

The self-care quiz looks at what your current self-care habits look like. Answer yes, no, or sometimes. 2 points for yes, 1 point for sometimes and 0 points for no.

- | | | | |
|--|---------------------------------|---------------------------------------|--------------------------------|
| 1 I'm up to date with regular health check-ups (dentist, GP, optician) | Yes
<input type="checkbox"/> | Sometimes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 2 I stick to a healthy and balanced diet most of the time and do not overeat/undereat | Yes
<input type="checkbox"/> | Sometimes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 3 I move my body regularly. Exercising more than 3 times a week and getting regular steps in | Yes
<input type="checkbox"/> | Sometimes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 4 I keep my environment clean, tidy, and organized most of the time | Yes
<input type="checkbox"/> | Sometimes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 5 I love where I live and my current environment is a place that I enjoy to be present in | Yes
<input type="checkbox"/> | Sometimes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 6 I set healthy boundaries with people and don't feel guilty about it | Yes
<input type="checkbox"/> | Sometimes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 7 I feel loved and respected by the people in my life and have good friends | Yes
<input type="checkbox"/> | Sometimes
<input type="checkbox"/> | No
<input type="checkbox"/> |
| 8 I regularly take time out to do something for myself that I enjoy | Yes
<input type="checkbox"/> | Sometimes
<input type="checkbox"/> | No
<input type="checkbox"/> |

Write down your score and what you think you could work on to practice better self-care. Did you learn anything that surprised you?

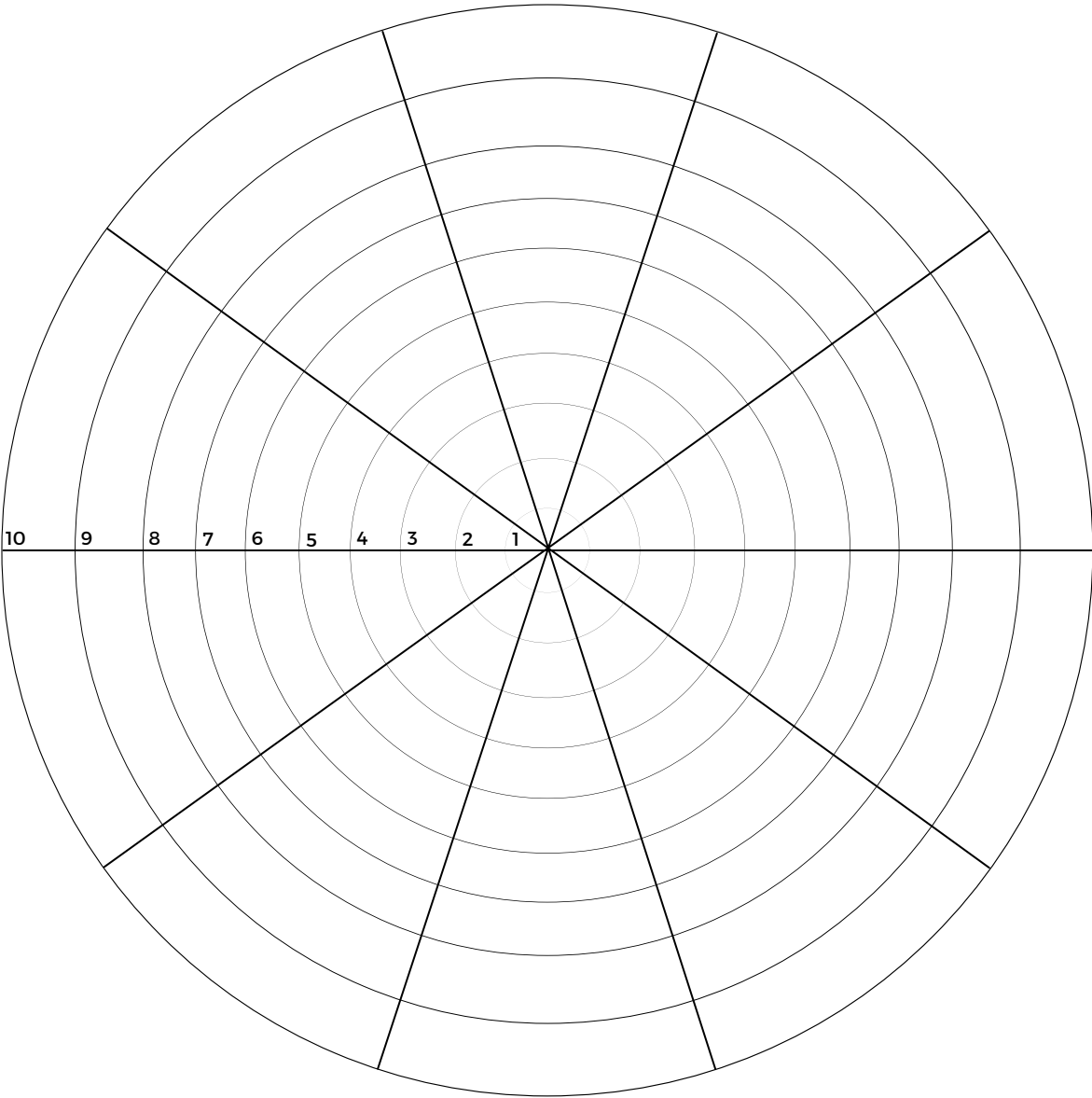
WHEEL OF LIFE (10)



INSTRUCTIONS

- 1 - Review the 10 categories in the wheel of life. The categories are a view of what a balanced life looks like for you.
- 2 - Color in the number of lines of satisfaction that you have for each area. Color from the middle. 1 - being disappointed/unhappy and 10 - being satisfied/happy in that area of your life.

WHEEL OF LIFE (10)



WHEEL OF LIFE EVALUATION

PHYSICAL ENVIRONMENT

INSTRUCTIONS - 10 spoke wheel

After looking at your satisfaction for each category write down ways you would be able to increase your satisfaction for those specific categories in your wheel of life.

CONTRIBUTION

FUN & RECREATION

FAMILY & FRIENDS

PARTNER/ROMANCE

FINANCES

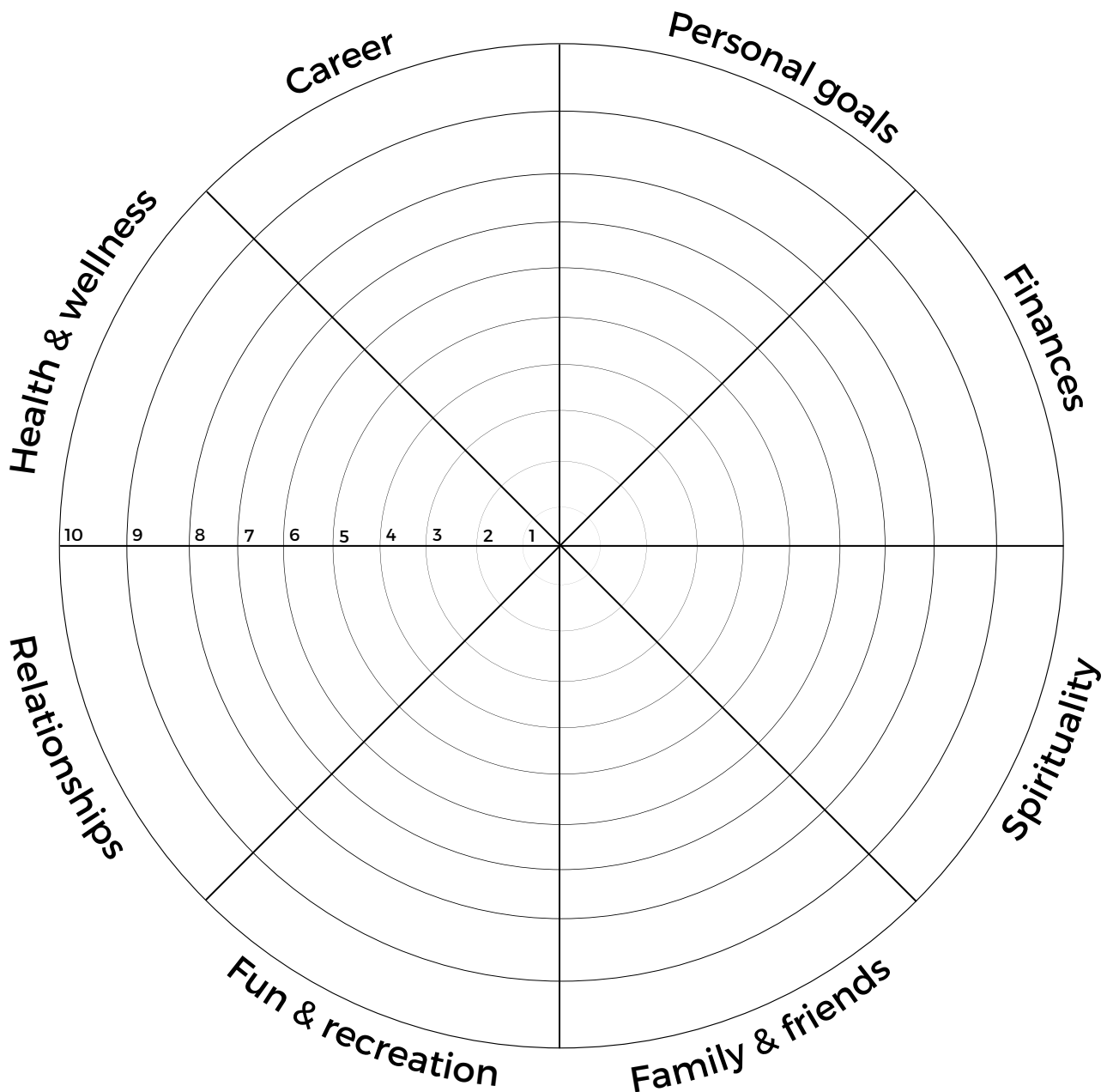
SPIRITUALITY

PERSONAL GOALS

CAREER

HEALTH & WELLNESS

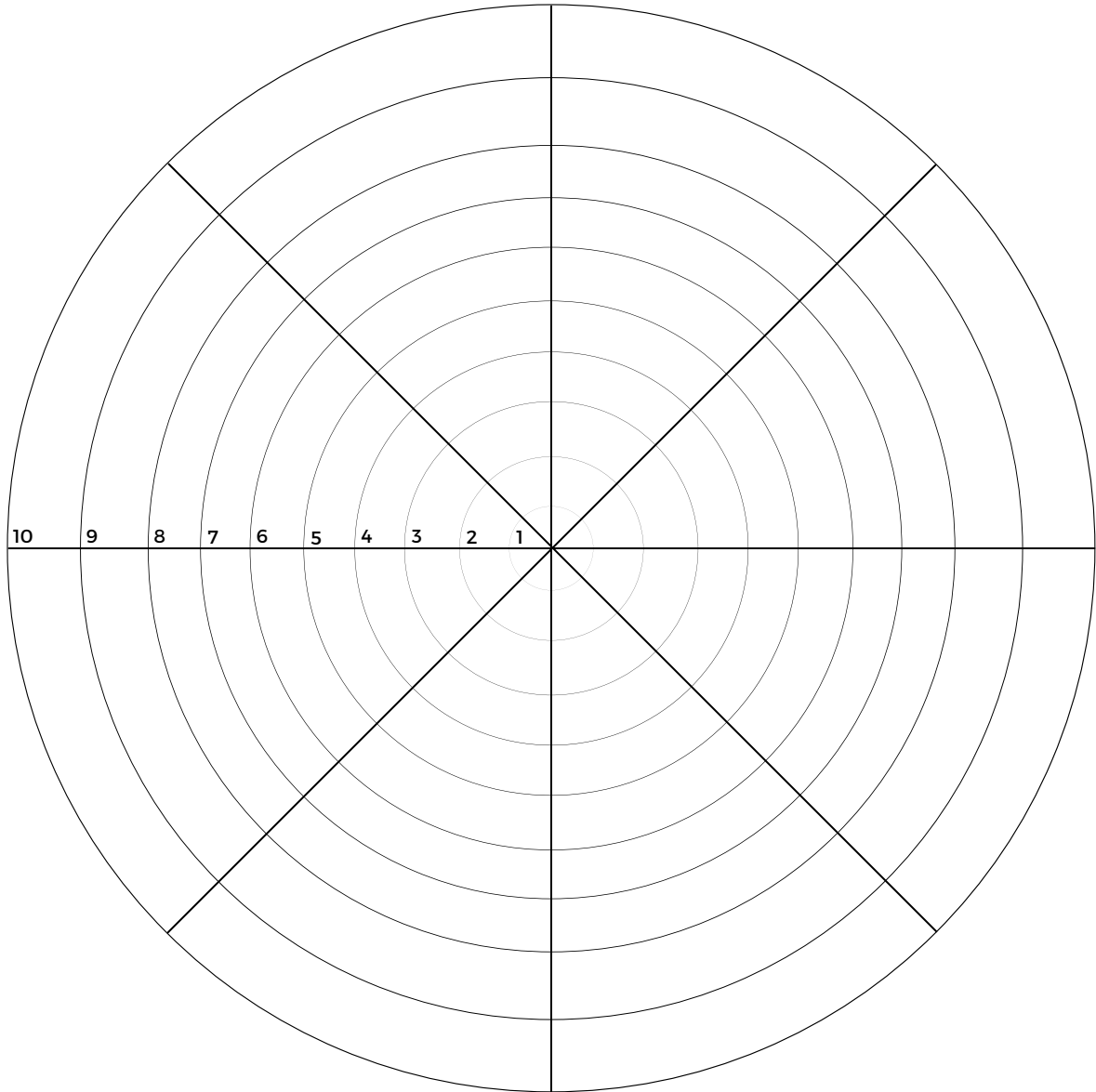
WHEEL OF LIFE (8)



INSTRUCTIONS

- 1 - Review the 8 categories in the wheel of life. The categories are a view of what a balanced life looks like for you.
- 2 - Color in the number of lines of satisfaction that you have for each area. Color from the middle. 1 - being disappointed/unhappy and 10 - being satisfied/happy in that area of your life.

WHEEL OF LIFE (8)



WHEEL OF LIFE EVALUATION

INSTRUCTIONS - 8 spoke wheel

After looking at your satisfaction for each category write down ways you would be able to increase your satisfaction for those specific categories in your wheel of life.

RELATIONSHIPS

FUN & RECREATION

FAMILY & FRIENDS

SPIRITUALITY

FINANCES

PERSONAL GOALS

CAREER

HEALTH & WELLNESS

WHEEL OF LIFE EVALUATION

INSTRUCTIONS

Evaluate each current situation of your wheel of life. Write down how you feel about where you are and what your end goals look like for each category

Financial

Health & wellness

Family & friends

Partner & romance

WHEEL OF LIFE EVALUATION

INSTRUCTIONS

Evaluate each current situation of your wheel of life. Write down how you feel about where you are and what your end goals look like for each category

Personal goals

Physical environment

Fun & recreation

Contribution

WHEEL OF LIFE EVALUATION

INSTRUCTIONS

Evaluate each current situation of your wheel of life. Write down how you feel about where you are and what your end goals look like for each category

Spirituality

Business & career

Write down some action steps you could take immediately in order to start achieving your end goals

WHEEL OF LIFE QUESTIONS 1

How do you feel about the results of your wheel?

What shocked you the most about your wheel?

Did the wheel of life look as how you expected it to look?

Which area do you believe needs the most work and why?

WHEEL OF LIFE QUESTIONS 2

After doing the wheel what goals are you working towards?

What action steps do you plan to take to achieve those goals?

Could single action steps achieve multiple results to get more balance?

Would one particular change today get you different results?

WHEEL OF LIFE QUESTIONS 3

What does the current balance of the wheel feel like in your life?

What would your ideal wheel look and feel like to you?

Next to each category write down your aspiring satisfaction level & the positive emotion or feeling that it will bring

Personal goals and development -

Financial -

Spirituality -

Family & friends -

Fun & recreation -

Partner & romance -

Contribution & giving -

Health & wellness -

Career & business -

Physical environment -

GOAL BREAKDOWN

Personal goals

Broken into small steps

- Your smaller step goes right over here
- Your smaller step goes right over here
- Your smaller step goes right over here

Financial

Broken into small steps

- Your smaller step goes right over here
- Your smaller step goes right over here
- Your smaller step goes right over here

Spirituality

Broken into small steps

- Your smaller step goes right over here
- Your smaller step goes right over here
- Your smaller step goes right over here

Family & friends

Broken into small steps

- Your smaller step goes right over here
- Your smaller step goes right over here
- Your smaller step goes right over here

Fun & recreation

Broken into small steps

- Your smaller step goes right over here
- Your smaller step goes right over here
- Your smaller step goes right over here

Partner & romance

Broken into small steps

- Your smaller step goes right over here
- Your smaller step goes right over here
- Your smaller step goes right over here

GOAL BREAKDOWN

Contribution & giving

Broken into small steps

- Your smaller step goes right over here
- Your smaller step goes right over here
- Your smaller step goes right over here

Health & wellness

Broken into small steps

- Your smaller step goes right over here
- Your smaller step goes right over here
- Your smaller step goes right over here

Career & business

Broken into small steps

- Your smaller step goes right over here
- Your smaller step goes right over here
- Your smaller step goes right over here

Physical environment

Broken into small steps

- Your smaller step goes right over here
- Your smaller step goes right over here
- Your smaller step goes right over here

”

**YOU CAN'T
POUR FROM AN
EMPTY CUP.
LOOK AFTER
YOURSELF
FIRST**

“



love yourself



**MAKE SURE YOU
ALWAYS LOOK AFTER
YOURSELF**

Your notes

**AND
INSPIRATION**

Goes here

Let's do this!

