

TAKING CARE OF ME
Daily Tracker

NAME: _____

DATE: _____

MENTAL WELLNESS HABITS:		<i>Example</i>	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
EARLY TO BED, EARLY TO RISE	Sleep Time	<i>10 pm</i>							
	Wake Time	<i>6 am</i>							
GRATITUDE	Daily	✓							
DRINK WATER	At least 64 oz. a day	✓							
EXERCISE	Type of Activity	<i>Walk</i>							
	Time Spent	<i>60 min</i>							
HEALTHY BREAKFAST	✓	✓							
GROUND FLAXSEED	At least 2 tbsp per day	✓							
CLASSICAL MUSIC	Time Spent	<i>15 min</i>							
SUGAR	Avoided / Reduced	✓							
CAFFEINE		✓							
DRUGS		✓							
SPIRITUAL EXERCISE	Type of Activity	<i>Read Psalms</i>							
	Time Spent	<i>30 mins</i>							
CONNECT WITH PEOPLE	Support group, act of kindness, etc.	<i>Call a sick friend</i>							
AVOID NEGATIVE SPEECH	✓	✓							
SCREEN TIME	Reduce to 1 hr per day	✓							
SPEND TIME OUTDOORS	At least 30 min / day	✓							
OVERALL MOOD	☺ ☹ ☹	☺							