DAILY WELLNESS CHECK

Emotional Check	Physical Check	Yes No
How did I feel today and why?	Did I do any exercises?	\bigcirc
	Did I get any sunlight?	$\circ \circ$
	Did I eat enough?	00
	Did I drink enough water?	\bigcirc
•	Did I get enough sleep?	00
Mental Check	Reflection Check	
What thoughts are occupying my mind and are they positive, negative, or neutral?	What went well today?	
	•	
	•	
Am I feeling overwhelmed or stressed?	What challenges did I face and how did I handle them?	
Self-Care Check	•	
What did I do for myself today that I enjoyed or found relaxing?	•	
	What did I learn from today's experiences?	
	•	
Gratitude Check	•	
What am I grateful for today?	•	
•	Future Check	
What's a positive thing that happened today?	Is there something I'm looking	forward to?
what s a positive timing that happened today;	•	