

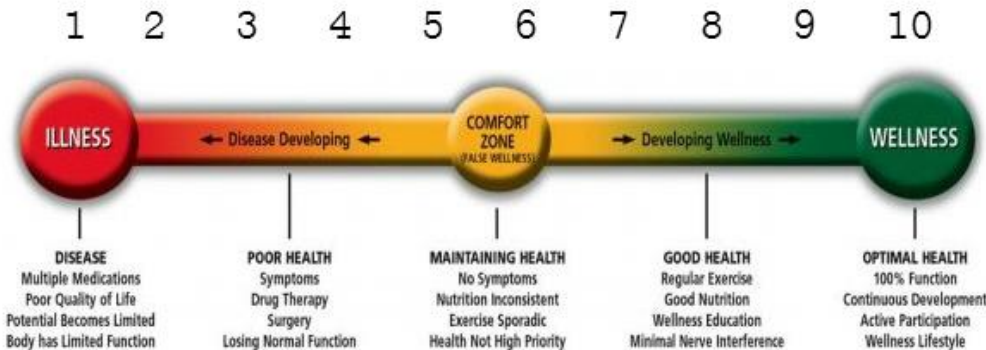


### Let's get started with a subjective evaluation

Put the day's date in the top row, then in the column below, rate each of the following on a scale of 1 (very poor) -10 (exceptionally good):

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Date:  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| How is my level of exercise?                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| How is my level of nutrition?                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| How is my level of water consumption?          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| How is my level of sleep?                      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| How am I coping with stress?                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| How is the quality of my relationships?        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Average (add the above scores and divide by 6) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Looking at the Wellness Continuum chart below, where are you in health?



Which aspects of your daily life need most attention?

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Repeat this self-assessment every month while you are making changes.

How is your score changing?

Contact me if you'd like to talk about it.