

Daily Self Check-In

Remember to:

- | | |
|--|--|
| <input type="checkbox"/> Take meds as prescribed | <input type="checkbox"/> Brush teeth |
| <input type="checkbox"/> Exercise | <input type="checkbox"/> Eat healthy foods |
| <input type="checkbox"/> Bathe and groom | <input type="checkbox"/> Do something you enjoy |
| <input type="checkbox"/> Get dressed | <input type="checkbox"/> Talk to someone you trust |
| <input type="checkbox"/> Sleep at pre-set time | <input type="checkbox"/> Mindfulness/Meditation |

Energy Level



Social Involvement (circle one for individual, to all for group)



Today's Activities:

- _____
- _____
- _____

I am grateful for:

How am I feeling / thinking today?



Today I'm proud of:

Tomorrow I'm looking forward to:
