

DATE \_\_\_\_\_

# SELF-CARE

## C H E C K L I S T

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TODAY I CAN NOURISH MY MIND, BODY + SPIRIT BY...

- |  |  |
|--|--|
| <input type="checkbox"/> NO PHONE WHEN WAKE UP | <input type="checkbox"/> TAKE A RELAXING BATH            |
| <input type="checkbox"/> 10 MINUTE MEDITATION  | <input type="checkbox"/> 5 MINS OF DEEP BREATHING        |
| <input type="checkbox"/> TAKE VITAMINS         | <input type="checkbox"/> RANDOM ACT OF KINDNESS          |
| <input type="checkbox"/> SKINCARE ROUTINE      | <input type="checkbox"/> TRY A HEALTHY RECIPE            |
| <input type="checkbox"/> GO FOR A WALK         | <input type="checkbox"/> WATCH A MOVIE                   |
| <input type="checkbox"/> SHORT STRETCH SESH    | <input type="checkbox"/> JOURNAL SESH                    |
| <input type="checkbox"/> MAKE A HEALTHY SNACK  | <input type="checkbox"/> DO A TASK YOU'VE PUT OFF        |
| <input type="checkbox"/> LISTEN TO FAVE MUSIC  | <input type="checkbox"/> TIME WITH YOUR PET OR LOVED ONE |
| <input type="checkbox"/> TEXT A FRIEND         | <input type="checkbox"/> _____                           |
| <input type="checkbox"/> TAKE A READING BREAK  | <input type="checkbox"/> _____                           |

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TODAY I'M GRATEFUL FOR...

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WATER INTAKE (CUPS)

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SLEEP (HOURS)

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