

# Daily Check-in

HOW AM I FEELING PHYSICALLY AND MENTALLY?

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WHAT HAVE I DONE FOR MYSELF TODAY?

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WHAT AM I GRATEFUL FOR RIGHT NOW?

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DID I DRINK ENOUGH WATER TODAY?

DID I TAKE MY VITAMINS TODAY?

DO I NEED HELP WITH ANYTHING?

DID I EAT NUTRITIOUS MEALS/SNACKS  
TODAY?

DID I ACCOMPLISH A GOAL TODAY?

DID I PRACTICE GRATITUDE TODAY?

DID I STRETCH/EXERCISE TODAY?

WAS I GENTLE WITH MYSELF TODAY?

AM I WELL RESTED?

WHAT AREAS IN MY SELF-CARE ROUTINE COULD  
USE MORE OF MY ATTENTION?

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