

Health Yourself January Wonder Challenge

Name & Dpt: _____

I wonder what would happen if I _____ every day...

of weeks with 5 daily habits completed:

How could this impact my wellbeing?

What barriers might get in the way?

How can I overcome these barriers?

How can I reward myself if I meet my goal 5/7 days for 3 weeks?

Notes

	M	T	W	Th	F	Sa	Su
Week 1 ___ / 7 days							

	M	T	W	Th	F	Sa	Su
Week 2 ___ / 7 days							

	M	T	W	Th	F	Sa	Su
Week 3 ___ / 7 days							

Mark each day that you complete your new habit and when you did it. Return your completed log to Jess Brown by 2/5 to qualify for points.