

MY WEEKLY HABIT/GOALS

NAME:

DATE:

NUTRITION

TRAINING

MISCELLANEOUS

SUN

MON

TUE

WED

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WEEKLY HABIT/GOAL TRACKER

MY WEEKLY GOAL IS TO:	SUN	MON	TUE	WED	THU	FRI	SAT

MY REWARD FOR THIS WEEK:

BEDTIME CHECKLIST

for a good night's sleep

Have you...

No cell phones past ____

Nightly routine (brush teeth, wash face, etc.)

Prepped meals & snacks for tomorrow

DAILY TO-DO

I CAN
DO IT!

Month: _____

Days: _____

Year: _____

SUNDAY

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MONDAY

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SATURDAY

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I AM
RESPONSIBLE!
PRIZE: