

Health Checklist

Date:

Morning Routine

Wake-up Time:

Water Intake:

Breakfast:

- Protein Source
- Fruit or Vegetable
- Whole Grains

Vitamins / Supplements:

Exercise:

Type:

Duration:

Midday Check

Lunch:

- Protein Source
- Fruit or Vegetable
- Whole Grains

Water Intake:

Movement Breaks:

- Morning
- Afternoon

Afternoon / Evening Routine

Snacks:

Healthy Option 1:

Healthy Option 2:

Dinner:

Protein Source

Fruit or Vegetable

Whole Grains

Water Intake:

Evening Activity / Exercise:

Type:

Duration:

Mental & Emotional Well-being

Mood Check (Happy, Sad, Stressed, etc.):

Stress-Relief Activities:

Meditation

Reading

Hobbies

Social Interaction:

In Person

Video Call

Phone Call

Gratitude Log:

Sleep Routine

Screen Time Limitation:

Yes No

Bedtime Rituals:

- Reading
- Meditation

Sleep Time:

Sleep Quality:

Poor Average Good

Reflections & Notes

Today's Achievements:

Areas for Improvement:

Health Goals for Tomorrow: