



Miscellaneous Sample Work from Past Clients:

JOURNALS & TRACKERS

week 1.

my habit for the week is:

habit pool

- one. _____
- two. _____
- three. _____
- four. _____
- five. _____
- six. _____
- seven. _____
- eight. _____
- nine. _____
- ten. _____

importance

one short-term benefit

one long-term benefit

why this habit matters to me

resources to help me

"Habits are not a finish line to be crossed, they are a lifestyle to be lived."

- James Clear

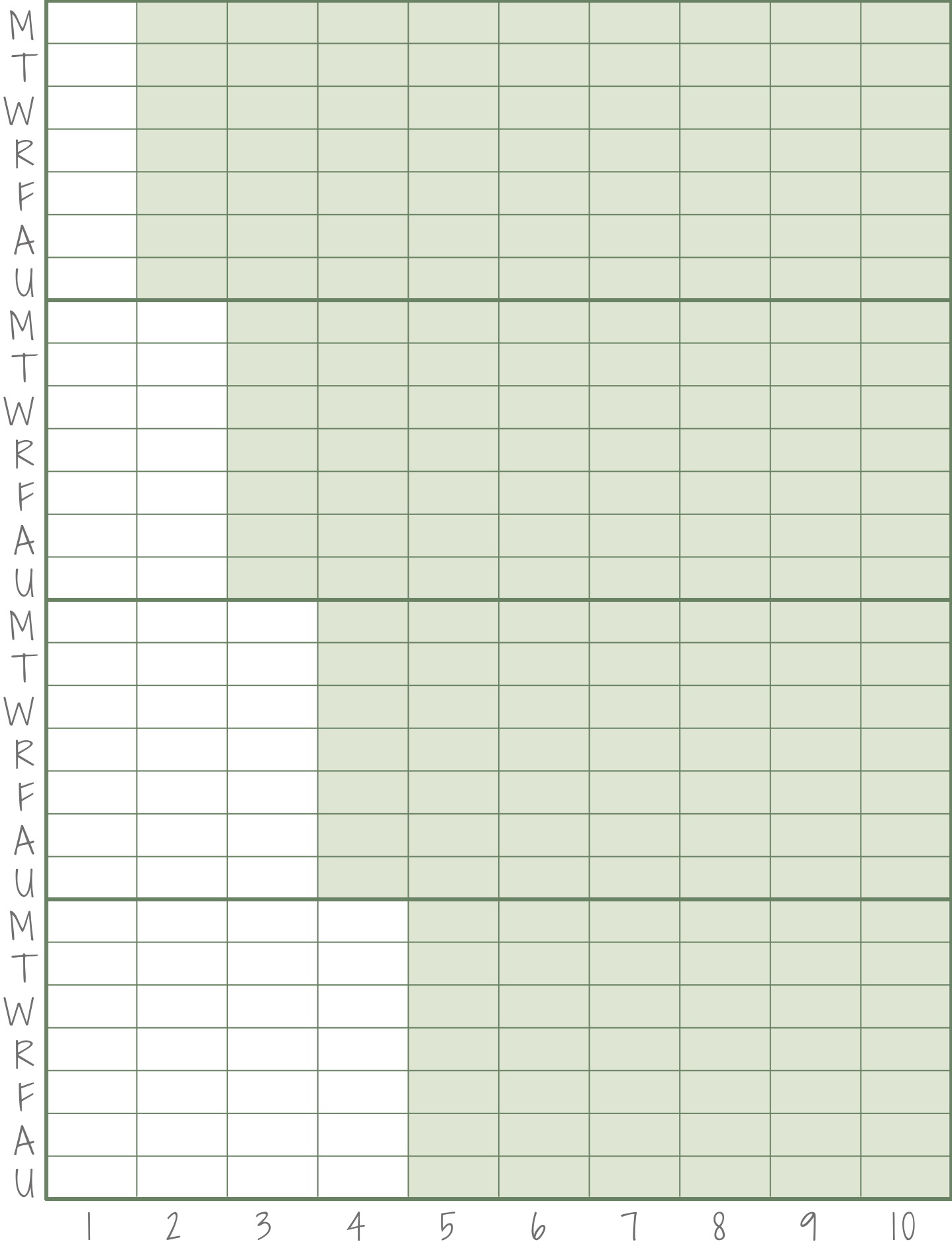
daily tracker

M	T	W	R	F	A	U

my thoughts...

my reward...

weeks 1-4 at a glance.



check-in for: _____

bpt

MORNING

EVENING



I FEEL...



TODAY WAS...



TODAY WOULD BE GREAT IF...



IT COULD'VE BEEN BETTER IF...



TODAY I'M GRATEFUL FOR...

1

2

3



TOMORROW, I HOPE...



TODAY'S AFFIRMATION IS...



anxiety tracker

bpt

MORNING

 **DATE:**

 **LAST NIGHT I SLEPT...**

GREAT SO-SO POORLY

 **TODAY WILL BE...**

BUSY SO-SO SLOW



 **SO FAR, I FEEL...**

GREAT SO-SO ANXIOUS

EVENING

REMEMBER:

MY WATER INTAKE

DAILY ROUTINE

DAILY ANXIETY TRACKER

START	STOP	SYMPTOM(S)	TRIGGER(S)

HOURLY MOOD TRACKER

<input type="radio"/>	12AM	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6AM
<input type="radio"/>	6AM	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12PM
<input type="radio"/>	12PM	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6PM
<input type="radio"/>	6PM	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12AM
<input type="radio"/>	SLEEPING								

day 1-3

SELF CARE

HOW I FELT

TIME

--	--	--

MONEY

--	--	--

EASE

--	--	--

SELF CARE

HOW I FELT

TIME

--	--	--

MONEY

--	--	--

EASE

--	--	--

SELF CARE

HOW I FELT

TIME

--	--	--

MONEY

--	--	--

EASE

--	--	--

IN 10 WEEKS, THE GOAL I WANT TO ACCOMPLISH IS:

HERE ARE 5 WAYS I CAN CONTRIBUTE TO THIS GOAL:

1:

2:

3:

4:

5:

I CARE ABOUT THIS GOAL BECAUSE...

IF I ACHIEVE THIS GOAL IN 5 WEEKS, I WILL FEEL/BE...

WEEK ONE

REMINDER OF 5 OPTIONS

- 1: _____
- 2: _____
- 3: _____
- 4: _____
- 5: _____

THOUGHTS TO SELF...

DAY ONE - I CHOSE OPTION: 1 2 3 4 5

DAY TWO - I CHOSE OPTION: 1 2 3 4 5

DAY THREE - I CHOSE OPTION: 1 2 3 4 5

DAY FOUR - I CHOSE OPTION: 1 2 3 4 5

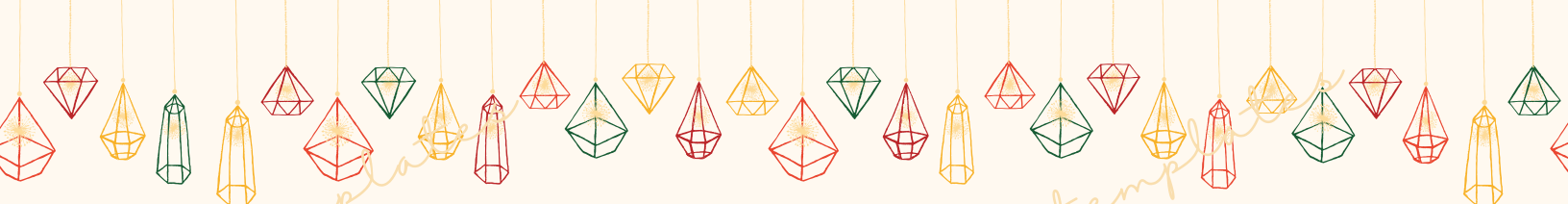
DAY FIVE - I CHOSE OPTION: 1 2 3 4 5

DAY SIX - I CHOSE OPTION: 1 2 3 4 5

DAY SEVEN - I CHOSE OPTION: 1 2 3 4 5

HOW FAR AM I IN MY GOAL?





My Gift List

8

FOR: _____ WHEN/WHERE: _____ PURCHASED:

IDEA: _____ COST: _____ WRAPPED:

9

FOR: _____ WHEN/WHERE: _____ PURCHASED:

IDEA: _____ COST: _____ WRAPPED:

10

FOR: _____ WHEN/WHERE: _____ PURCHASED:

IDEA: _____ COST: _____ WRAPPED:

11

FOR: _____ WHEN/WHERE: _____ PURCHASED:

IDEA: _____ COST: _____ WRAPPED:

12

FOR: _____ WHEN/WHERE: _____ PURCHASED:

IDEA: _____ COST: _____ WRAPPED:

13

FOR: _____ WHEN/WHERE: _____ PURCHASED:

IDEA: _____ COST: _____ WRAPPED:

14

FOR: _____ WHEN/WHERE: _____ PURCHASED:

IDEA: _____ COST: _____ WRAPPED:

Total cost: _____



emotions tracker for: _____



MORNING

DATE: _____

LAST NIGHT I SLEPT...
 GREAT SO-SO POORLY

TODAY WILL BE...
 BUSY SO-SO SLOW

SO FAR, I FEEL...
 GREAT SO-SO BAD

EVENING

REMEMBER: _____

MY WATER INTAKE

DAILY ROUTINE
 _____ _____ _____

WHAT WERE MY BIG EMOTIONS TODAY?

START	STOP	EMOTION DESCRIPTION	POTENTIAL CAUSES

HOURLY EMOTION TRACKER

<input type="checkbox"/>	_____	12AM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6AM
<input type="checkbox"/>	_____	6AM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12PM
<input type="checkbox"/>	_____	12PM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6PM
<input type="checkbox"/>	_____	6PM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12AM
<input type="checkbox"/>	SLEEPING								