



Self-Care Check In

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| 1. My Energy Levels | _____ / 10 | _____ |
| 2. How Inspired I'm Feeling | _____ / 10 | _____ |
| 3. Fun and Play | _____ / 10 | _____ |
| 4. Self-Honesty | _____ / 10 | _____ |
| 5. Physical Activity..... | _____ / 10 | _____ |
| 6. Peace and Quiet | _____ / 10 | _____ |
| 7. Feeling Heard or Seen | _____ / 10 | _____ |
| 8. Connection to That Which is Greater..... | _____ / 10. | _____ |
| 9. Feeling Accepted and Understood | _____ / 10 | _____ |
| 10. My Friendships | _____ / 10 | _____ |
| 11. My Physical Appearance | _____ / 10 | _____ |
| 12. Feeling Loved and Appreciated | _____ / 10 | _____ |
| 13. My Environment (eg. home, workspace) | _____ / 10 | _____ |
| 14. Physical Health | _____ / 10 | _____ |
| 15. My Feelings and Emotional Health | _____ / 10 | _____ |
| 16. Organization and Simplicity | _____ / 10 | _____ |
| 17. Being Challenged and Stretched | _____ / 10 | _____ |
| 18. Learning and Personal Growth | _____ / 10 | _____ |
| 19. Money/Finances | _____ / 10 | _____ |
| 20. Connection to Myself | _____ / 10 | _____ |
| 21. Relaxation and Pampering | _____ / 10 | _____ |
| 22. Time Spent in Nature..... | _____ / 10. | _____ |
| 23. Something else? _____ | _____ / 10 | _____ |

1. Score how satisfied you currently are with each are on a scale of 1-10 (1 is low, 10 is high)
2. In the right-hand column, ask yourself, "What do I need?" What would raise my score here?
3. Answer the following questions:

- What surprised you most about your responses?

- What patterns and themes do you notice?

- Finally, write ONE action you will take THIS week to take more care of yourself:
