

Date:

No. of consecutive  
days  
(consistency beats  
intensity)

Complete this planner in the last 10  
minutes of your day

## SECTION 1: DAILY TASKS

#1 CRITICAL TASK (to tackle FIRST THING tomorrow):

1.

YOU ME MONEY

Next TOP 3 tasks:

2.

YOU ME MONEY

3.

YOU ME MONEY

4.

YOU ME MONEY

OTHER tasks (if time allows):

5.

YOU ME MONEY

6.

YOU ME MONEY

7.

YOU ME MONEY

8.

YOU ME MONEY

9.

YOU ME MONEY

10.

YOU ME MONEY

## SECTION 2: DAILY WELLBEING & CONDITIONING

What is the day's **HEALTH** or **ACTIVITY** goal?

 for  minutes

How much **MINDFULNESS** will you practice?

 for  minutes

**ONE** thing I am grateful for (pause for two minutes and **FEEL** it):

**REWARD** for 7 ticks (only if earned):

Plan your (almost) Random Act Of **KINDNESS** and write it in here:

# SECTION 3: SCORECARD

- 1. Did I complete my **#1 CRITICAL** task?
- 2. Did I complete at least one **ME** task?
- 3. Did I complete at least one **£** task?
- 4. Did I complete my **HEALTH** or **ACTIVITY** goal?
- 5. Did I complete a **MINDFULNESS** activity?
- 6. Did I practice **GRATITUDE** for at least 2 minutes?
- 7. Did I **SMILE** and perform an act of **KINDNESS**?

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

REMINDER		YES	NO
Have you scored your last <b>MAGNIFICENT SEVEN</b> on the previous sheet (or whatever your personal target was)?	<input type="checkbox"/>	<input type="checkbox"/>	
Did you earn (and take) your <b>REWARD</b> ? (7 x Yes only on yesterday's Planner!)	<input type="checkbox"/>	<input type="checkbox"/>	

## NOTES