

# MENTAL health TRACKER

Date: \_\_\_\_\_

Affirmation: \_\_\_\_\_

Today I feel...

- |                                      |                                     |                                      |                                     |
|--------------------------------------|-------------------------------------|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> Happy.      | <input type="checkbox"/> Satisfied. | <input type="checkbox"/> Lonely.     | <input type="checkbox"/> Annoyed.   |
| <input type="checkbox"/> Grateful.   | <input type="checkbox"/> Relaxed.   | <input type="checkbox"/> Depressed.  | <input type="checkbox"/> Sad.       |
| <input type="checkbox"/> Proud.      | <input type="checkbox"/> Calm.      | <input type="checkbox"/> Anxious.    | <input type="checkbox"/> Angry.     |
| <input type="checkbox"/> Motivated.  | <input type="checkbox"/> Powerful.  | <input type="checkbox"/> Hurt.       | <input type="checkbox"/> Annoyed.   |
| <input type="checkbox"/> Productive. | <input type="checkbox"/> Excited.   | <input type="checkbox"/> Frustrated. | <input type="checkbox"/> Exhausted. |

Why do I feel this way?

Energy Level

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Stress Level

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Hours of Sleep

\_\_\_\_\_ hrs.

3 goals for today

_____
_____
_____

Ways to take care of myself

_____
_____
_____

What I am grateful for

_____
_____
_____

What can I do to make my next day better?

_____
_____
_____

Thoughts & Reflections

_____
_____
_____
_____
_____