

Healthy New Year!

Log your health-related goals and intentions for the New Year below! Track your progress throughout the year by checking the box next to each goal as you complete it.

2021 HEALTH GOALS

-
-
-
-
-
-
-

DO MORE OF:

MENTAL

DO LESS OF:

MENTAL

PHYSICAL

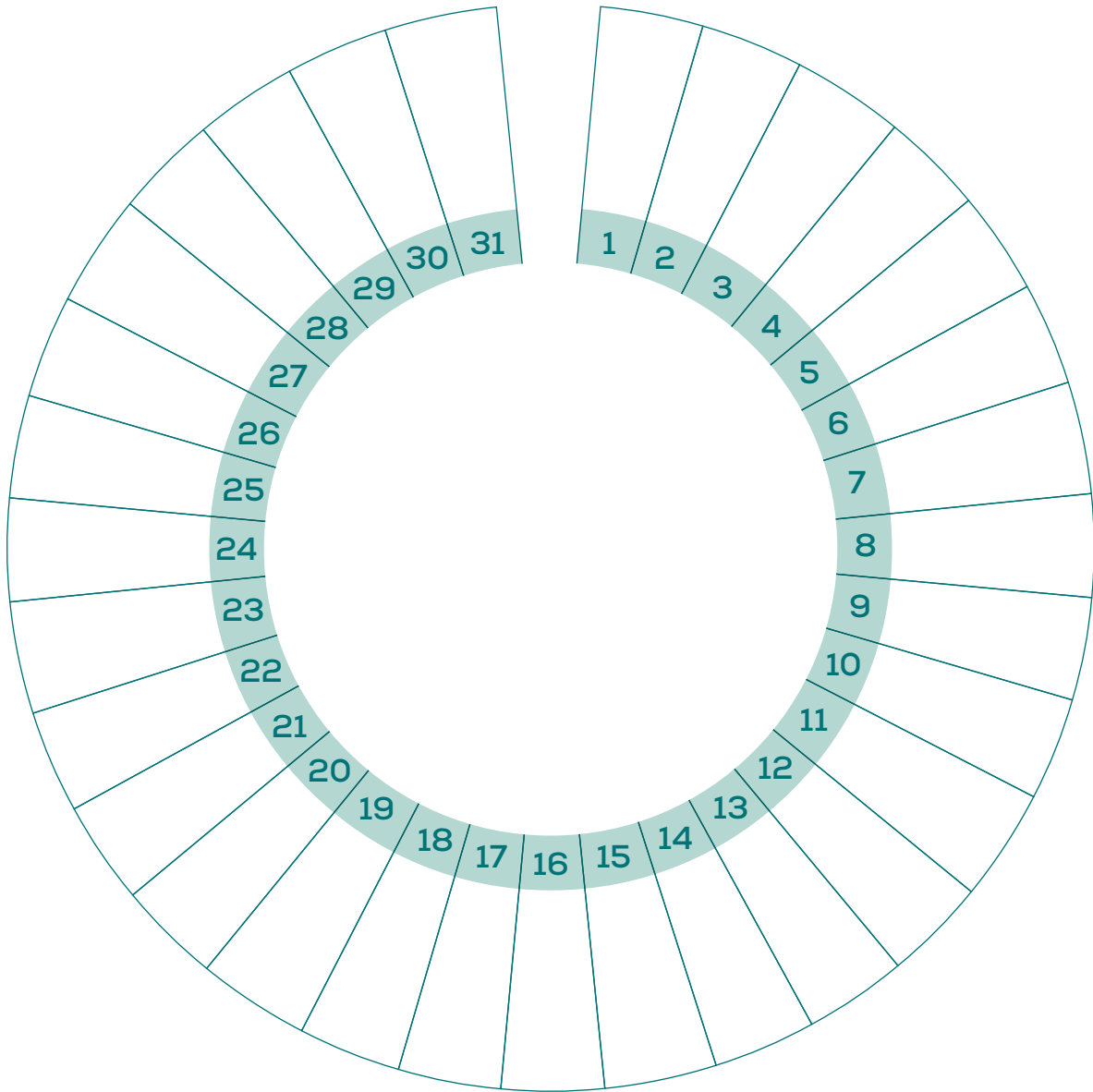
PHYSICAL

EMOTIONAL

EMOTIONAL

Mood Tracker

MONTH: _____



MOOD COLOR KEY

Fill in each mood below with a different color. Use the circle above to track your mood daily with the corresponding coloring.



Productive



Tired



Depressed



Neutral





Anxious



Energetic



Stressed



Sick



12 Mantras to Shift Your Mindset in 2021

Cut out your favorite mindfulness mantras and attach them around your home, workspace, etc., to help shift your mindset year round.



PROGRESS
OVER
PERFECTION



TODAY,
I AM
PERFECT



BE
FEARLESS



I LISTEN TO
MY BODY AND
GIVE IT WHAT
IT NEEDS



I AM
ENOUGH



SEIZE THE
MOMENT




GOOD HEALTH
IS A PRACTICE
AND I HAVE
PATIENCE



DISCONNECT
TO
RECONNECT



SHOW UP
TODAY



INHALE.
EXHALE.



SELF-CARE IS
NOT SELFISH



JUST KEEP
MOVING!

Drink Up! Daily Water Intake for Women

Track your water daily water consumption with this water intake log to ensure you're hitting your hydration goals.

Reminder: it's recommended that women drink about 11.5 cups of water each day!



= 1 cup of water



= 1/2 cup of water




WEEK OF: _____

SUN	MON	TUE	WED	THU	FRI	SAT

Yearly Health & Appointment Stickers

Directions: Print and cut out each sticker. Use the health stickers with your planner or calendar to help you keep track of important health dates, check-ins, or appointments.




DOCTOR'S APPT.

DR: _____

TIME: _____




DOCTOR'S APPT.

DR: _____

TIME: _____

DOCTOR'S APPT.

DR: _____

TIME: _____

DOCTOR'S APPT.

DR: _____

TIME: _____




DOCTOR'S APPT.

DR: _____

TIME: _____

DOCTOR'S APPT.

DR: _____

TIME: _____

APPT _____

APPT _____

APPT _____

APPT _____

APPT _____

APPT _____

AT-HOME HEALTH TEST

AT-HOME HEALTH TEST

AT-HOME HEALTH TEST

AT-HOME HEALTH TEST


AT-HOME HEALTH TEST


AT-HOME HEALTH TEST


 **REMINDER:**
WELLNESS
CHECK-IN

 **REMINDER:**
WELLNESS
CHECK-IN

 **REMINDER:**
WELLNESS
CHECK-IN

 **REMINDER:**
MENTAL HEALTH
CHECK-IN

 **REMINDER:**
MENTAL HEALTH
CHECK-IN

 **REMINDER:**
MENTAL HEALTH
CHECK-IN