

Overall Wellbeing Self-Assessment

Month/Year: _____

Wellbeing area	Where I am today					Why I chose that rating	Where I want to be					
	1	2	3	4	5		1	2	3	4	5	
Physical												
Mental												
Spiritual												
Social												
Emotional												
Financial												

Rating scale: 1. Very poor; 2. Poor; 3. Fair; 4. Good; 5. Excellent

Monthly Wellbeing Self-Management Plans

Month/Year: _____

Wellbeing area	What I will focus on this month (nominate three ideas per wellbeing area and do at least one every day)		
	Item 1	Item 2	Item 3
Physical			
Mental			
Spiritual			
Social			
Emotional			
Financial			

End-of-month reflection

Month/Year: _____

Wellbeing area	How did I do?					Why I chose that rating	What I will focus on next month
	1	2	3	4	5		
Physical							
Mental							
Spiritual							
Social							
Emotional							
Financial							

Rating scale: 1. Very poor; 2. Poor; 3. Fair; 4. Good; 5. Excellent