**Planning for Health Changes**

**The change I want to make is (be very specific, what, when, how?)**

**My goal for the next month is:**

**How ready are you to work on this goal?**

0-------1---------2----------3-------------4-------------5----------6-----------7--------------8--------------9----------------10

**The steps I will take to reach the goal:**

1.

2.

3.

**The things that will make it hard to reach the goal**:

1.

2.

3.

**The ways I can overcome those things that might get in my way:**

**My confidence that I can reach my goal:**

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