

MY HEALTH GOAL

MY HEALTH GOAL IS...
(using SMART goals)

TARGET DATE



ACTION STEPS



1. _____
2. _____
3. _____
4. _____
5. _____

MY 'WHY' FOR THIS GOAL

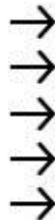


1. _____
2. _____
3. _____
4. _____
5. _____

Milestones

1. _____
2. _____
3. _____
4. _____
5. _____

Projected Dates



1. _____
2. _____
3. _____
4. _____
5. _____

What new habits will I need to master to achieve my goal?

1. _____
2. _____
3. _____
4. _____
5. _____

My key qualities that will help me achieve this goal are...



1. _____
2. _____
3. _____
4. _____
5. _____

QUARTERLY MOMENTUM PLANNER



GOAL: _____

QUARTERLY OBJECTIVES	MONTHLY OBJECTIVES MONTH: _____	MONTHLY OBJECTIVES MONTH: _____	MONTHLY OBJECTIVES MONTH: _____
	1. _____	1. _____	1. _____
	2. _____	2. _____	2. _____
	3. _____	3. _____	3. _____
	4. _____	4. _____	4. _____
	5. _____	5. _____	5. _____
QUARTERLY OBJECTIVES	MONTHLY OBJECTIVES MONTH: _____	MONTHLY OBJECTIVES MONTH: _____	MONTHLY OBJECTIVES MONTH: _____
	1. _____	1. _____	1. _____
	2. _____	2. _____	2. _____
	3. _____	3. _____	3. _____
	4. _____	4. _____	4. _____
	5. _____	5. _____	5. _____
QUARTERLY OBJECTIVES	MONTHLY OBJECTIVES MONTH: _____	MONTHLY OBJECTIVES MONTH: _____	MONTHLY OBJECTIVES MONTH: _____
	1. _____	1. _____	1. _____
	2. _____	2. _____	2. _____
	3. _____	3. _____	3. _____
	4. _____	4. _____	4. _____
	5. _____	5. _____	5. _____
QUARTERLY OBJECTIVES	MONTHLY OBJECTIVES MONTH: _____	MONTHLY OBJECTIVES MONTH: _____	MONTHLY OBJECTIVES MONTH: _____
	1. _____	1. _____	1. _____
	2. _____	2. _____	2. _____
	3. _____	3. _____	3. _____
	4. _____	4. _____	4. _____
	5. _____	5. _____	5. _____

Let us not become weary in doing good, for at the proper time we will reap a harvest if we do not give up. Gal 6:9
cathymorenzie.com weightlossgodsway.com

Weekly
PLANNER

HEALTHY
by Design
Weight Loss, God's Way

WEEK OF: _____

MY FOCUS THIS WEEK

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

SUNDAY

SMART

Goal Setting

WORKSHEET

S

Specific: Is your goal well-defined? Does your goal line up or contradict the Word of God?
Is your goal based on the right motive? Examples :Decrease my body fat to 25%, lose 30 pounds, run a 10km race, gain 10 pounds of muscle

M

Measurable: Can you tangibly show how you will meet your goal?
Examples: Improvement in distance walked or jogged, improvement in repetitions of an exercise, decreased waist measurement, decreased body fat, increased muscle mass, decreased number on the scale

A

Attainable: Can I see myself achieving this goal?

R

Realistic and Relevant: Is the goal too difficult to reach? Too Easy? Are your goals in line with your Christian values and based on something that is possible based on your current lifestyle?

T

Time-constrained: What is the date that I expect to achieve my goal?

Based on the above, my goal is:

MONTH/YEAR

MONTHLY *Planning* WORKSHEET

WORD FOR THE YEAR

TARGET GOAL WEIGHT		
TARGET GOAL MONTH		
THIS MONTH	STARTING	ENDING
Weight		
BMI		
W-H Ratio		

NEW HABITS PRACTICED THIS MONTH							
<i>(check below as completed)</i>							
1							
2							
3							

	PHYSICAL	SPIRITUAL	MENTAL
SUCCESSSES THIS MONTH			
CHALLENGES THIS MONTH			

	Habit	mon	tue	wed	thu	fri	sat	sun
Week 1	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 2	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 3	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 4	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Week 5	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

BREAKTHROUGHS THIS MONTH

