

Let Your Sparkle Shine

SELF-CARE PLANNER

DATE: _/_/_

TODAYS ACTIVITIES:

MOOD:



WHAT HAVE I EATEN TODAY?

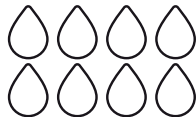
BREAKFAST:

LUNCH:

DINNER:

SNACKS:

WATER:



WHAT MADE ME HAPPY TODAY?

WORRIES:

HOURS OF SLEEP:

GOALS FOR TOMORROW: