WELLNESS AFTER 40 SUMMIT

SUMMIT GOAL SETTING

MY WELLNESS LIFE VISION

What will your wellness life look like in 5, 10, 20 years and beyond?

MY BREAKTHROUGH WELLNESS GOAL

What is your goal that, if it happened would completely change your wellness life?

I will achieve this goal by .....(DATE)

This end goal is important to me because? *(MY WHY)*

What impact will achieving this goal have on my wellness life?

What sacrifices must I make and I am willing to make to achieve this goal?
What am I prepared to do to achieve this goal?

What is my starting point or baseline for working towards this goal?

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MY MEANS GOALS

My main sub goals for achieving my end goal in order of priority.

☐ 1 _____

_____ *by* _____

☐ 2 _____

_____ *by* _____

☐ 3 _____

_____ *by* _____

☐ 4 _____

_____ *by* _____

KEY ACTIONS & TASKS *(IN ORDER OF PRIORITY)*

What are the 3-5 things you can do right now to start achieving your means goals

Based on means Goal #1:

☐ 1 _____

_____ *by* _____

☐ 2 _____

_____ *by* _____

☐ 3 _____

_____ *by* _____

☐ 4 _____

_____ *by* _____

☐ 5 _____

_____ *by* _____

Based on means Goal #2:

☐ 1 _____

_____ *by* _____

☐ 2 _____

_____ *by* _____

☐ 3 _____

_____ *by* _____

☐ 4 _____

_____ *by* _____

☐ 5 _____

_____ *by* _____

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Based on means Goal #3:

☐ 1 _____

_____ *by* _____

☐ 2 _____

_____ *by* _____

☐ 3 _____

_____ *by* _____

☐ 4 _____

_____ *by* _____

☐ 5 _____

_____ *by* _____

Based on means Goal #4:

☐ 1 _____

_____ *by* _____

☐ 2 _____

_____ *by* _____

☐ 3 _____

_____ *by* _____

☐ 4 _____

_____ *by* _____

☐ 5 _____

_____ *by* _____

What strengths, skills, experience do I already have that will help me achieve my breakthrough goal?

1 _____ 4 _____

2 _____ 5 _____

3 _____ 6 _____

What are some weaknesses I have that may limit my ability to achieve my end goal?

1 _____ 4 _____

2 _____ 5 _____

3 _____ 6 _____

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The habits/skills/experience/knowledge I will develop and/or learn to achieve my end goal:

☐ 1 _____ ☐ 4 _____

☐ 2 _____ ☐ 5 _____

☐ 3 _____ ☐ 6 _____

The habits I will stop and the activities I will say no to:

1 _____ 4 _____

2 _____ 5 _____

3 _____ 6 _____

What are some beliefs I have that may limit my ability to achieve my end goal?

1 _____

2 _____

3 _____

Replace or reframe this belief with a new positive and empowering belief that is stated as an affirmation beginning with **"I am":**

1 **I am** _____

2 **I am** _____

3 **I am** _____

What people and resources will I need to help me achieve my goals?

_____

_____

The person I will share my goals with and look to keep me accountable is:

_____

I will share my progress with him/her _____ *(TIMEFRAME)*

On completing this goal, I will celebrate my success and reward myself with:

_____

_____

YOUR TO DO

☐ Fill out your Summit Goal Setting Worksheet using our template

☐ Take a photo or screen shot and share in the Facebook Group