



Lifestyle Goal Worksheet

Date _____

Name _____

1. Activity and Exercise

My intermediate activity and exercise goals:

A _____

B _____

C _____

How I plan to get there:

To increase my lifestyle by _____ minutes per day, I will:

To increase my structured activity, I will:

_____ minutes	_____ times per week
_____ minutes	_____ times per week
_____ minutes	_____ times per week
_____ minutes	_____ times per week

2. Weight and Eating Habits:

My target weight is: _____

In 4 weeks, I would like to weigh _____

In 8 weeks, I would like to weigh _____

In 12 weeks, I would like to weigh _____

To eat healthier and achieve a more reasonable weight, I will:

Add _____ When _____

Add _____ When _____

Add _____ When _____

Add _____

When _____

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Substitute _____

For _____

Substitute _____

For _____

Substitute _____

For _____

Substitute _____

For _____

Limit _____

To _____

Limit _____

To _____

Limit _____

To _____

Limit _____

To _____

3. Stress Busters:

My overall level of stress is:

1	2	3	4	5	6	7	8	9
Minimal								Maximal

To better manage stress, I can:

A _____

When _____

B _____

When _____

C _____

When _____

4. Counseling and Support:

I plan to meet with my lifestyle and weight management consultant:

_____ Individually _____ times per month

_____ Group _____ times per month

Anticipated absences _____

Other people I can ask for support:

Who? _____ Can help how? _____

Who? _____ Can help how? _____

Who? _____ Can help how? _____

5. Additional Goals (sleep, smoking, etc.):

A _____	When _____
B _____	When _____
C _____	When _____
D _____	When _____
E _____	When _____

6. Potential Obstacles and Solutions:

Obstacle	Solution
_____	_____
_____	_____
_____	_____
_____	_____

7. Evaluation of Goals:

We plan to review these goals in _____ weeks on _____.

Client

Lifestyle and Weight Management Consultant

Attainment of Goals

Goals Achieved:

Date	Goal
_____	_____
_____	_____

Additional Goals:

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