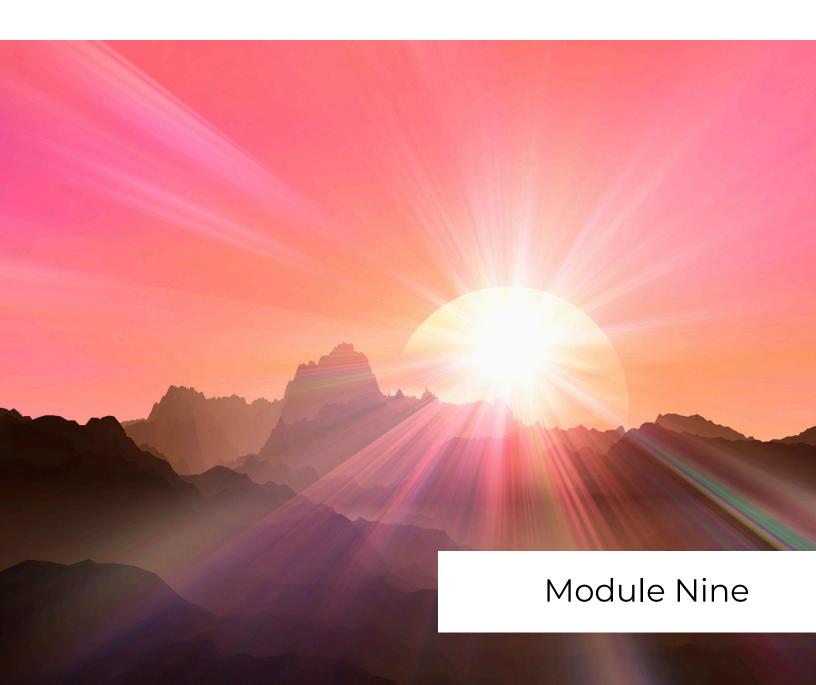
EVALUATING SUCCESS AND REFINING GOALS

PARTICIPANT'S NAME:_____DATE____DATE



Reflecting on My Journey

What have I accomplished since starting this program?			
What habits am I most proud of developing?			
What challenges did I overcome, and how?			

Refining My Wellness Goals

Which original goals still resonate with me?
What new goals or priorities have emerged?

Why	How	When
	Why	Why How