



Session 07 – Big Little Things: Daily Tracker

After reflecting on your weekly tracking forms, please complete the fields below and return this sheet to your challenge coordinator.

YOUR NAME: _____ DEPARTMENT: _____

Please write a short reflection on what cues to action you identified in each category during the challenge.

Going forward where would you like to focus your self-care activity?

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PHYSICAL WELLBEING		
EMOTIONAL WELLBEING		
MENTAL WELLBEING		
LIFE PURPOSE WELLBEING		
CAREER/ FINANCIAL WELLBEING		
SOCIAL WELLBEING		