

Daily Wellness Monitoring Checklist

Date:

Basic Information

Name	<div></div>
Sleep Duration (hrs)	<div></div>
Water Intake (glasses)	<div></div>
Physical Activity (mins)	<div></div>

Daily Wellness Checklist

Task	Completed
Healthy Breakfast	<input type="checkbox"/>
10+ min Movement	<input type="checkbox"/>
Hydration Goal Met	<input type="checkbox"/>
Screen Breaks	<input type="checkbox"/>
Personal Hygiene	<input type="checkbox"/>
Relaxation/Mindfulness	<input type="checkbox"/>

Mood & Notes

Mood Rating (1-5)	<div></div>
Notes / Reflections	<div></div>