

My Toolbox Practices

Month _____ Year _____

This checklist is to keep track of my ongoing practices, and new practices that I'm trying out. I can also keep track of the ones I'd like to do throughout yearly seasons. I will write down my intended outcome for this phase, and then select a time frame of at least one month (this can be extended to three, six, and twelve month phases).

Intent/Goals:



Body

Practice/Description	New or ongoing?	Frequency (e.g. 1x/day, 3x/week, 1x/season)	Continue?

Module to try next:



Mind

Practice/Description	New or ongoing?	Frequency (e.g. 1x/day, 2x/week, 1x/season)	Continue?

Module to try next:



Spirit

Practice/Description	New or ongoing?	Frequency (e.g. 1x/day, 2x/week, 1x/season)	Continue?

Module to try next:



Shadow

Practice/Description	New or ongoing?	Frequency (e.g. 1x/day, 2x/week, 1x/season)	Continue?

Module to try next: