

# DAY CHALLENGE:

IN \_\_\_\_\_ DAYS/WEEKS, I WILL: \_\_\_\_\_

ACCOUNTABILITY: \_\_\_\_\_

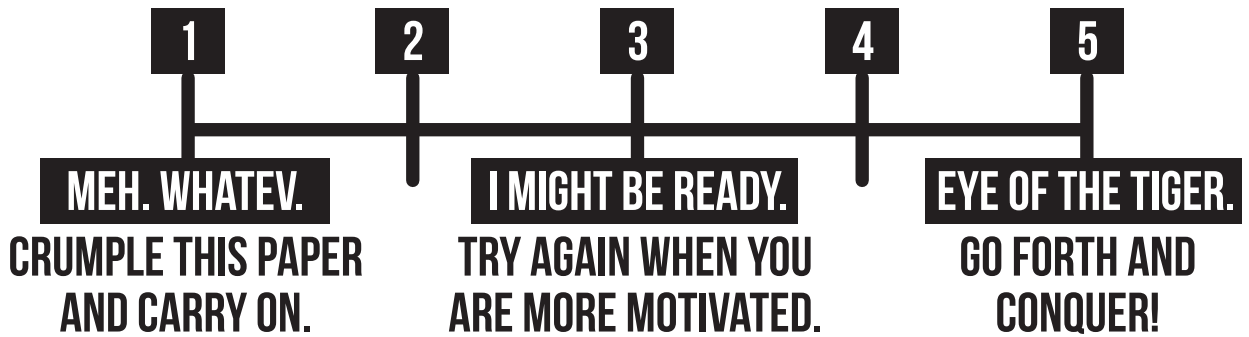


**THIS IS IMPORTANT TO ME BECAUSE:** \_\_\_\_\_

**I CAN DO IT BECAUSE:**  I AM AWESOME.  I HAVE HELP.  
 I DESERVE THIS.  NO CHOICE.

**MOTIVATION CHECK:**

[THE MAKE A GOOD HABIT MOTIVATION SCALE]:



WHEN I WANT TO GIVE UP, I WILL: \_\_\_\_\_

## COUNT DOWN THE DAYS TO SUCCESS:

- |                                       |                                      |                                    |                                   |                                 |                                |                                |
|---------------------------------------|--------------------------------------|------------------------------------|-----------------------------------|---------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> TWENTY EIGHT | <input type="checkbox"/> TWENTY FOUR | <input type="checkbox"/> TWENTY    | <input type="checkbox"/> SIXTEEN  | <input type="checkbox"/> TWELVE | <input type="checkbox"/> EIGHT | <input type="checkbox"/> FOUR  |
| <input type="checkbox"/> TWENTY SEVEN | <input type="checkbox"/> TWENTYTHREE | <input type="checkbox"/> NINETEEN  | <input type="checkbox"/> FIFTEEN  | <input type="checkbox"/> ELEVEN | <input type="checkbox"/> SEVEN | <input type="checkbox"/> THREE |
| <input type="checkbox"/> TWENTY SIX   | <input type="checkbox"/> TWENTY TWO  | <input type="checkbox"/> EIGHTEEN  | <input type="checkbox"/> FOURTEEN | <input type="checkbox"/> TEN    | <input type="checkbox"/> SIX   | <input type="checkbox"/> TWO   |
| <input type="checkbox"/> TWENTY FIVE  | <input type="checkbox"/> TWENTY ONE  | <input type="checkbox"/> SEVENTEEN | <input type="checkbox"/> THIRTEEN | <input type="checkbox"/> NINE   | <input type="checkbox"/> FIVE  | <input type="checkbox"/> ONE   |

**MY REWARD:** \_\_\_\_\_