



Nine Steps To Healthy Lifestyle

Health & Lifestyle Questionnaire

In order to empower you above and beyond this Nine Steps to Healthy Lifestyle educational course, I want to get more acquainted with your current health and lifestyle as you answer the forms and perhaps, for the first time, see everything more clearly. Sometimes, it takes writing down answers and going through the exercises to become aware of your current lifestyle. This is all about YOU reaching your optimal lifestyle and your goals.

What are you top three health goals?

- 1.
- 2.
- 3.

How would you rate your lifestyle? HEALTHY UNHEALTHY
SOMEWHERE-IN-BETWEEN NOT SURE



1. What is your level of Physical Activity on a daily basis?

2. How much medicine are you taking?

3. Are you taking supplements at random or for a purpose?

a.) If taking supplements, do you know the quality and for what benefit?

4. Is your environment free of toxins?

5. Do you know what toxins to avoid?

6. Are you cognizant of your breathing?

7. Do you incorporate healing practices such as meditation, yoga, quietness?

8. Do you put time and thought into what you are drinking and eating and why?



9. Do you mindfully eat? Portion control?

10. Quality of Sleep?

11. Overall happiness: What is your overall mental and emotional health?

12. What is the quality of connections to family and friends?

13. What is your ability to face your fears and move on? What's holding you back?

14. How is your mindset? half-full or half-empty?



Obstacles -- Self-Sabotaging actions, thoughts, behaviors

What do you feel are the obstacles or your potential actions, behaviors or activities that could impede your progress towards accomplishing your healthy lifestyle goals

Think of three methods that you plan to use to overcome these obstacles:

1.

2.

3.

Answer honestly so you have a starting point to develop additional strengths and work on areas of improvement.

Added bonus:

Once completed, if you want me to review it then send me a copy.