

SLEEP TRACKER

TAKE 5 FOR WELLNESS! HEALTHY HOLIDAY ACCOUNTABILITY CHALLENGE

Name: _____ Location: _____

Sleep Goal: _____

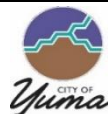
Prefill calendar with this month's dates. Write down your bedtimes, wake times, and how many hours of sleep you had each night. Include how well you slept and any factors that influenced it.

Month: _____				Year: _____		
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date _____	Date _____	Date _____	Date _____	Date _____	Date _____	Date _____
Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____
Awake _____	Awake _____	Awake _____	Awake _____	Awake _____	Awake _____	Awake _____
Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____
Quality _____	Quality _____	Quality _____	Quality _____	Quality _____	Quality _____	Quality _____
Date _____	Date _____	Date _____	Date _____	Date _____	Date _____	Date _____
Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____
Awake _____	Awake _____	Awake _____	Awake _____	Awake _____	Awake _____	Awake _____
Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____
Quality _____	Quality _____	Quality _____	Quality _____	Quality _____	Quality _____	Quality _____
Date _____	Date _____	Date _____	Date _____	Date _____	Date _____	Date _____
Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____
Awake _____	Awake _____	Awake _____	Awake _____	Awake _____	Awake _____	Awake _____
Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____
Quality _____	Quality _____	Quality _____	Quality _____	Quality _____	Quality _____	Quality _____
Date _____	Date _____	Date _____	Date _____	Date _____	Date _____	Date _____
Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____
Awake _____	Awake _____	Awake _____	Awake _____	Awake _____	Awake _____	Awake _____
Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____
Quality _____	Quality _____	Quality _____	Quality _____	Quality _____	Quality _____	Quality _____
Date _____	Date _____	Date _____	Date _____	Date _____	Date _____	Date _____
Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____	Bedtime _____
Awake _____	Awake _____	Awake _____	Awake _____	Awake _____	Awake _____	Awake _____
Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____	Total Hrs _____
Quality _____	Quality _____	Quality _____	Quality _____	Quality _____	Quality _____	Quality _____

Notes: _____



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Questions? Contact challenges@welcoaz.org

FITNESS TRACKER

TAKE 5 FOR WELLNESS! HEALTHY HOLIDAY ACCOUNTABILITY CHALLENGE

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

SUNDAY



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Questions? Contact Challenges@welcoaz.org

Healthy Shopping List

Take 5 for Wellness! Healthy Holiday Accountability Challenge

Veggies



- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Proteins



- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Drinks



- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Fruits



- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Dairy



- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Spices + Such



- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Grains



- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Healthy Fats



- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Other Stuff



- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____



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Questions? Contact Challenges@welcoaz.org

Weekly Meal Plan

Take 5 for Wellness! Healthy Holiday Accountability Challenge

	Breakfast	Lunch	Dinner	Snacks
M				
T				
W				
Th				
F				
Sa				
Su				

Food to Prep



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Where Does All My Time Go?

Take 5 for Wellness! Healthy Holiday Accountability Challenge

Do you ever wonder where all of your time goes? Take a moment and calculate how much time you take doing your weekly routines on average. Your week starts with 168 hours and will decrease as you complete activities throughout the week.

Weekday Activities	Time Calculation		Weekend Activities	Time Calculation	
168 Hours a Week	Total Hours	Hours Left in the Week	168 Hours a Week	Total Hours	Hours Left in the Week
Working			House / Yard Work		
Commuting			Running Errands		
Sleeping			Church / Clubs		
Preparing Food			Studying / Personal Admin		
Eating In/Out			Hanging out with Friends / Family		
Watching TV			Chores		
Looking after children or family			Grocery Shopping		
Internet / Screen Time			Miscellaneous		
Relaxing			Miscellaneous		
Exercise / Recreation			Miscellaneous		

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