



My Healthy Living Goal

WEEK

– What do you want to work on in the next week?

Pick ONE goal from the suggestions below, or write your own SMART goal in the space provided.

SWEAT – 60 minutes of moderate to vigorous activity each day.

- I will go for a walk with my family after dinner ___ times this week.
- I will engage in physical activity for ___ minutes ___ times this week (i.e., walking, biking, dance, online exercise video, or home workout routine).
- I will do a physical activity outdoors (i.e. soccer, walking, biking, Frisbee, badminton) ___ times this week.
- OTHER:

SLEEP – Uninterrupted 9 to 11 hours of sleep per night for those aged 5–13 years and 8 to 10 hours per night for those aged 14–17 years, with consistent bed and wake-up times.

- I will aim for ___ hours of sleep every night this week.
- I will try to wake up and go to bed at the same time every day this week.
- I will turn off my phone ___ minutes before bed.
- I will keep my phone outside of my bedroom when I sleep.
- I will go to bed ___ minutes earlier ___ nights this week.
- I will try a new sleep hygiene tip (see *Sleep Hygiene* info in workbook).
- OTHER:

SIT – No more than 2 hours per day of recreational screen time.

- After 1 hour of screen time, I will get up and take a ___ minute break.
- I will put away electronics during meals and snacks ___ days this week.
- I will limit my recreational screen time to ___ hours each day this week.
- After ___ minutes/hour(s) of screen time, I will do a different activity (i.e. take a walk, play a board game, do a puzzle, or do an arts and crafts project).
- OTHER:

NUTRITION

- We will eat together as a family ___ times this week.
- I will eat half a plate of vegetables with dinner ___ times this week.
- I will try to drink no more than ___ sugary drinks this week.
- I will drink ___ cups of water each day.
- I will eat whole foods (i.e. less processed) in my meals/snacks ___ times this week.
- OTHER:

My action plan:

My confidence with achieving my goal:

MY GOAL TRACKER

DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7



Did I meet my goal?



My Healthy Living Goal

SAMPLE WEEK #2 – What do you want to work on in the next week?

Pick ONE goal from the suggestions below, or write your own SMART goal in the space provided.

SWEAT – 60 minutes of moderate to vigorous activity each day.

- I will go for a walk with my family after dinner ___ times this week.
- I will engage in physical activity for ___ minutes ___ times this week (i.e., walking, biking, dance, online exercise video, or home workout routine).
- I will do a physical activity outdoors (i.e. soccer, walking, biking, Frisbee, badminton) ___ times this week.
- OTHER: Go for a bike ride with my family 2 times this week**

SLEEP – Uninterrupted 9 to 11 hours of sleep per night for those aged 5–13 years and 8 to 10 hours per night for those aged 14–17 years, with consistent bed and wake-up times.

- I will aim for ___ hours of sleep every night this week.
- I will try to wake up and go to bed at the same time every day this week.
- I will turn off my phone ___ minutes before bed.
- I will keep my phone outside of my bedroom when I sleep.
- I will go to bed ___ minutes earlier ___ nights this week.
- I will try a new sleep hygiene tip (see *Sleep Hygiene* info in workbook).
- OTHER:**

SIT – No more than 2 hours per day of recreational screen time.

- After 1 hour of screen time, I will get up and take a ___ minute break.
- I will put away electronics during meals and snacks ___ days this week.
- I will limit my recreational screen time to ___ hours each day this week.
- After ___ minutes/hour(s) of screen time, I will do a different activity (i.e. take a walk, play a board game, do a puzzle, or do an arts and crafts project).
- OTHER:**

NUTRITION

- We will eat together as a family ___ times this week.
- I will eat half a plate of vegetables with dinner ___ times this week.
- I will try to drink no more than ___ sugary drinks this week.
- I will drink ___ cups of water each day.
- I will eat whole foods (i.e. less processed) in my meals/snacks ___ times this week.
- OTHER:**

My action plan: **We will bike around our neighbourhood for 30mins on Monday and Friday**

My confidence with achieving my goal:

MY GOAL TRACKER						
DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7
Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday
		X		X		X



Did I meet my goal?