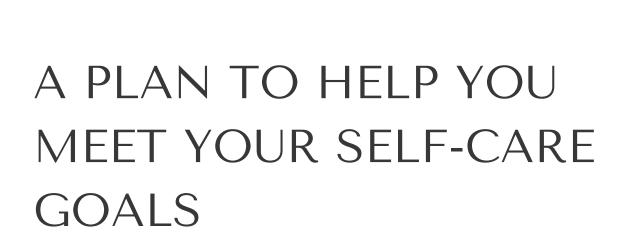
CARPENTER
COUPLE & FAMILY
COUNSELING, PLLC

## SELF-CARE PLAN



HAVE

## MYSELF-CARE PLAN

This week, I will do some kind of self-care activity times.
One mental/emotional self-care activity I will do this week/month
One physical self-care activity I will do this week/month is:
One social self-care activity I will do this week/month is:
To ensure that I engage in the above self-care activities, I will
Self-care activities I enjoy:
Self-care activities I would like to try:
Self-care activities I can do when I don't have much time:
Boundaries I need to set so I make sure to take care of myself this week/month:
People who can support me in my self-care goals: