



STRESS MANAGEMENT PLAN

Target stress area: _____

Impact it has on you (physical, emotional, mental behavioral): _____

Desired goal: _____

Reasons for change: 1. _____
2. _____
3. _____

Potential road blocks: 1. _____
2. _____
3. _____

1. What will you do to accomplish your goal? (exercise daily for 30 minutes, meditate, consider career change, stop smoking, etc.)

2. What is your start date? _____

3. How will you measure your success? _____

4. How will you reward yourself for sticking to it? _____
