



Week:..... (Monday – Sunday

		Monday	Tuesday	Wednesday
DO Personal & professional goals for the week:		What's going on this week?		
Consider it a win if:				
EAT V1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> FF <input type="checkbox"/> <input type="checkbox"/> V2 <input type="checkbox"/> <input type="checkbox"/> HF <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> LP <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Plan meals that fit your schedule above.		V1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> FF <input type="checkbox"/> <input type="checkbox"/> V2 <input type="checkbox"/> <input type="checkbox"/> HF <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> LP <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Plan meals that fit your schedule above.	V1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> FF <input type="checkbox"/> <input type="checkbox"/> V2 <input type="checkbox"/> <input type="checkbox"/> HF <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> LP <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Plan meals that fit your schedule above.	
Breakfast				
A.M Snack				
Lunch				
P.M Snack				
Dinner				
(Dessert or) Bedtime Snack <i>Optional</i>				
MOVE Milestone:		Plan workouts that will fit your schedule above.		
Type				
Time				



TRACK: Body progress

Weight:..... Body Fat %:..... Neck:..... Upper Arm:..... Chest:..... Bust:.....

Waist:..... Hips:..... Upper Thigh:..... Mid Thigh:..... Calf:.....

Thursday

Friday

Saturday

Sunday

V1 ☐☐☐☐☐☐ FF ☐☐
V2 ☐☐ HF ☐☐
LP ☐☐☐☐

V1 ☐☐☐☐☐☐ FF ☐☐
V2 ☐☐ HF ☐☐
LP ☐☐☐☐

V1 ☐☐☐☐☐☐ FF ☐☐
V2 ☐☐ HF ☐☐
LP ☐☐☐☐

V1 ☐☐☐☐☐☐ FF ☐☐
V2 ☐☐ HF ☐☐
LP ☐☐☐☐