

Daily Outcome Planner			
Date:		<input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday	
What is my most important outcome for today?	Why is this so important?	What PERSONA do I need to have? What STATE do I need to be in?	What are the best ACTIONS I must take to achieve this outcome?
What is my top SELF outcome?			
What is my top RELATIONSHIP outcome?			
What is my top HEALTH & WELL-BEING outcome?			
What is my top CAREER outcome?			
What is going to be my biggest CHALLENGE today?		How am I going to overcome this challenge?	
What worked well today? What WINS did I have?		What didn't work well today?	
How can I be and do better tomorrow?			