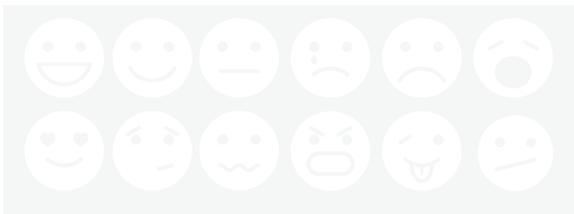# Mental health daily check-in

DATE _____

HOW AM I FEELING TODAY?

WHAT THINGS HAVE TRIGGERED NEGATIVE EMOTIONS TODAY?

○ _____

○ _____

○ _____

○ _____

WHAT SOLUTIONS HAVE I FOUND?

○ _____

○ _____

○ _____

○ _____

WHAT AM I GRATEFUL FOR TODAY?

○ _____

○ _____

○ _____

WHAT GOOD THINGS HAVE HAPPENED TODAY?

○ _____

○ _____

○ _____

WHAT SELF-CARE HAVE I PRACTICED TODAY?

○ _____

○ _____

○ _____

WHAT HAVE I ACHIEVED TODAY?

○ _____

○ _____

○ _____

MY RANKING OF MY MENTAL HEALTH TODAY

☆ ☆ ☆ ☆ ☆