

# WEEKLY FOCUS

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HABITS	ACTIVITIES	GOALS
<b>WEEKLY OBJECTIVE(S):</b>		
<b>WHAT WILL MAKE THIS WEEK GREAT:</b>		
<b>SOMETHING I NEED TO DO, THAT I DON'T WANT TO DO:</b>		

# DAILY SCHEDULE

DATE / /

MORNING	AFTERNOON	NIGHT
TO DO		NOTES
<ul style="list-style-type: none"><li><input type="checkbox"/></li><li><input type="checkbox"/></li><li><input type="checkbox"/></li><li><input type="checkbox"/></li><li><input type="checkbox"/></li><li><input type="checkbox"/></li><li><input type="checkbox"/></li><li><input type="checkbox"/></li><li><input type="checkbox"/></li><li><input type="checkbox"/></li></ul>		

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# WEEKLY REVIEW

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PHYSICAL	MENTAL/RELATIONAL	PROFESSIONAL
<b>WEEKLY AAR: WHAT TO KEEP DOING, STOP DOING, START DOING...</b>		
<b>WIN(S) FOR THE WEEK:</b>		
<b>LESSON(S) LEARNED THIS WEEK:</b>		