

FORM — A

Defining The Objective

| LIFE OBJECTIVE |
|----------------|
| |



| |
|---------|
| Talent: |
| Talent: |
| Talent: |
| Talent: |
| Talent: |

FORM — B

SWOT Analysis

Strengths / Talents

Weaknesses

Opportunities

Threats

Appendix — Form B

FORM — C

Goal Planning

Life Objective

Identify the Goals that will Achieve the Objective

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____

DISCIPLINE

FORM — D

Benchmark (Sub-Goal) Planning

The Individual Goal

Identify the Benchmarks that will Achieve the Goal

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____

DISCIPLINE

FORM — E

Personal Character Assessment

Select the answer that best describes your character

Physical Character Assessment:

| | Very Much So | | | Not Very Much So |
|-----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Are you physically in-shape | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you in control of your weight | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you eat a proper diet | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you physically healthy | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Educational Character Assessment:

| | Very Much So | | | Not Very Much So |
|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Is your knowledge well-rounded | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you read regularly | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you a good listener | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Can you comprehend subjects | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Social Character Assessment:

| | Very Much So | | | Not Very Much So |
|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Are you a friendly, likeable person | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is your personality balanced | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you like yourself | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you fun to be with | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Spiritual Character Assessment:

| | Very Much So | | | Not Very Much So |
|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Are you honest | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you charitable | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you humble | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you patient, not quick to anger | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

After you complete your personal character assessment,
list below some changes you would like to see in your character

Physical Changes _____

Educational Changes _____

Social Changes _____

Spiritual Changes _____

FORM — F

Weeks:

ATTRIBUTE DEVELOPMENT SCHEDULE

Physical _____

P. Temperance _____

Education _____

Social _____

Spiritual _____

Week 1

- Sunday
- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday

Week 2

- Sunday
- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday

- Evaluate progress after two weeks.

FORM — G.1

Life Phase Segmentation

Phase (1): _____

_____ 19 _____ to _____ 19 _____

Phase (2): _____

_____ 19 _____ to _____ 19 _____

Phase (3): _____

_____ to _____

Phase (4): _____

_____ to _____

Phase (5): _____

_____ to _____

Phase (6): _____

_____ to _____

Phase (7): _____

_____ to _____

FORM — G.2

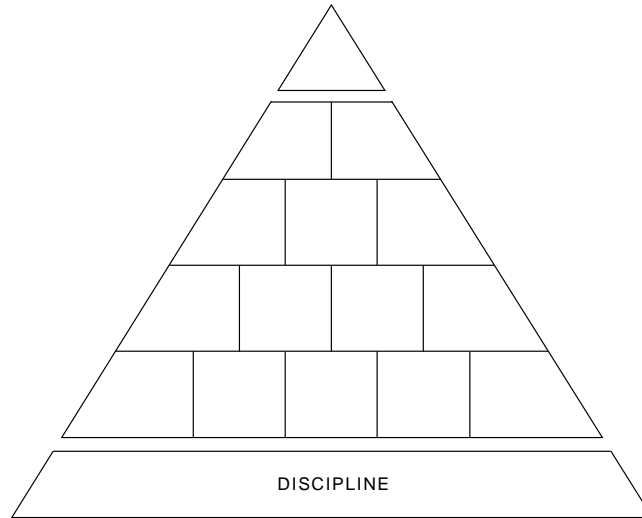
| Life Phase Segmentation | |
|--------------------------------|----------------|
| Phase (8): _____ | _____ to _____ |
| Phase (9): _____ | _____ to _____ |
| Phase (10): _____ | _____ to _____ |
| Phase (11): _____ | _____ to _____ |
| Phase (12): _____ | _____ to _____ |
| Phase (13): _____ | _____ to _____ |
| Phase (14): _____ | _____ to _____ |

FORM — H

Phase ()

Time Period: _____

OBJECTIVE AND GOAL PLANNING



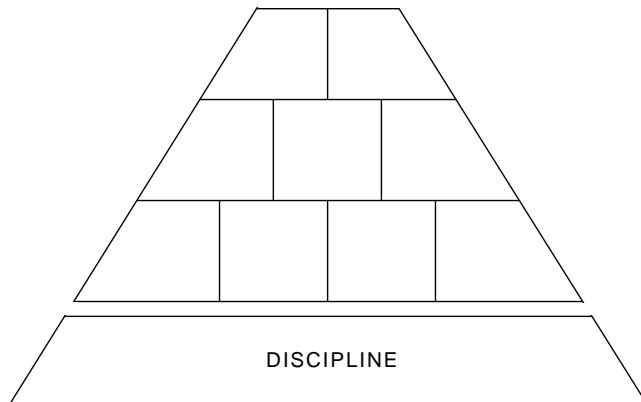
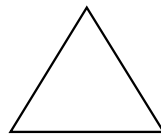
Appendix — H

FORM — I

Phase ()

Time Period: _____

BENCHMARK PLANNING AND SELECTION



Achieve: _____

FORM — J

Phase ()

Time Span: _____

TASK ASSIGNMENT SHEET





Complete Date

**Major
Tasks**

- _____
- _____
- _____
- _____
- _____

Recognize _____



Complete Date

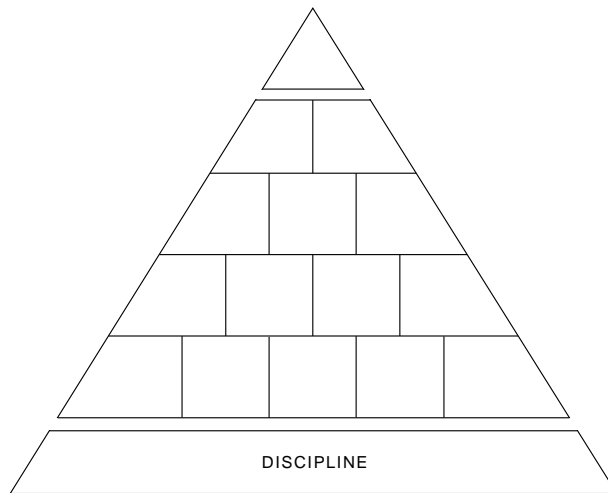
**Major
Tasks**

- _____
- _____
- _____
- _____
- _____

Recognize _____

FORM — K

Personal Goal Planning Kit



This form can be used as a cover sheet for your goal planning kit.

Appendix — K

FORM — L

Week:

WEEKLY GOAL PLANNING SHEET



1: _____

1: _____

Major
Tasks _____

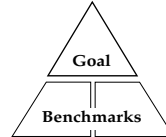
Major
Tasks _____

2: _____

2: _____

Major
Tasks _____

Major
Tasks _____



See Week: _____

See Week: _____

See Week: _____

See Week: _____

Physical _____

P. Temperance _____

Education _____

Social _____

Spiritual _____

Discipline — Character Attributes

Appendix — L

FORM — M

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| Week: _____ | |
| WEEKLY ROLE PLANNING SHEET | |
| <div style="border: 1px solid black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Tasks: _____ _____ _____ _____ _____ | <div style="border: 1px solid black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Tasks: _____ _____ _____ _____ _____ |
| <div style="border: 1px solid black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Tasks: _____ _____ _____ _____ _____ | <div style="border: 1px solid black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Tasks: _____ _____ _____ _____ _____ |
| <div style="border: 1px solid black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Tasks: _____ _____ _____ _____ _____ | <div style="border: 1px solid black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Tasks: _____ _____ _____ _____ _____ |

FORM — N

Scheduling Worksheet

| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|---------|---------|---------|-----------|----------|---------|----------|
| 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| 8 | 8 | 8 | 8 | 8 | 8 | 8 |
| 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| 10 | 10 | 10 | 10 | 10 | 10 | 10 |
| 11 | 11 | 11 | 11 | 11 | 11 | 11 |
| 12 | 12 | 12 | 12 | 12 | 12 | 12 |
| 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| 3 | 3 | 3 | 3 | 3 | 3 | 3 |
| 4 | 4 | 4 | 4 | 4 | 4 | 4 |
| 5 | 5 | 5 | 5 | 5 | 5 | 5 |
| 6 | 6 | 6 | 6 | 6 | 6 | 6 |
| 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| Evening | Evening | Evening | Evening | Evening | Evening | Evening |
| | | | | | | |
| Tasks | Tasks | Tasks | Tasks | Tasks | Tasks | Tasks |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Appendix — N

FORM — O.1

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date: _____ <div style="text-align: right; font-size: 24px; font-weight: bold; margin-top: 10px;">Sunday</div> | |
| APPOINTMENT AND TASK SCHEDULE | |
| A.M. _____ | 2 _____ |
| 8 _____ | 3 _____ |
| 9 _____ | 4 _____ |
| 10 _____ | 5 _____ |
| 11 _____ | 6 _____ |
| 12 _____ | 7 _____ |
| 1 _____ | P.M. _____ |
| <input type="checkbox"/> Review Weekly Progress _____ <input type="checkbox"/> Plan for Next Week _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ | CHARACTER ATTRIBUTES / TASKS <input type="checkbox"/> Physical <input type="checkbox"/> P. Temperance <input type="checkbox"/> Education <input type="checkbox"/> Social <input type="checkbox"/> Spiritual |

Appendix — O.1

FORM — O.2

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date: _____ <div style="text-align: right; font-size: 1.5em; font-weight: bold; margin-left: 200px;">Monday</div> | |
| APPOINTMENT AND TASK SCHEDULE | |
| A.M. _____ | 2 _____ |
| 8 _____ | 3 _____ |
| 9 _____ | 4 _____ |
| 10 _____ | 5 _____ |
| 11 _____ | 6 _____ |
| 12 _____ | 7 _____ |
| 1 _____ | P.M. _____ |
| <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> <u>Review Weekly Goals and Plan Day</u> | CHARACTER ATTRIBUTES / TASKS <input type="checkbox"/> Physical <input type="checkbox"/> P. Temperance <input type="checkbox"/> Education <input type="checkbox"/> Social <input type="checkbox"/> Spiritual |

FORM — O.3

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| Date: _____ | | Tuesday |
| APPOINTMENT AND TASK SCHEDULE | | |
| A.M. _____ | 2 _____ | |
| 8 _____ | 3 _____ | |
| 9 _____ | 4 _____ | |
| 10 _____ | 5 _____ | |
| 11 _____ | 6 _____ | |
| 12 _____ | 7 _____ | |
| 1 _____ | P.M. _____ | |
| <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> <u>Review Weekly Goals and Plan Day</u> | <p>CHARACTER ATTRIBUTES / TASKS</p> <input type="checkbox"/> Physical <input type="checkbox"/> P. Temperance <input type="checkbox"/> Education <input type="checkbox"/> Social <input type="checkbox"/> Spiritual | |

Appendix — O.3

FORM — O.4

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date: _____ Wednesday | |
| APPOINTMENT AND TASK SCHEDULE | |
| A.M. _____ | 2 _____ |
| 8 _____ | 3 _____ |
| 9 _____ | 4 _____ |
| 10 _____ | 5 _____ |
| 11 _____ | 6 _____ |
| 12 _____ | 7 _____ |
| 1 _____ | P.M. _____ |
| <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> <u>Review Weekly Goals and Plan Day</u> | CHARACTER ATTRIBUTES / TASKS <input type="checkbox"/> Physical <input type="checkbox"/> P. Temperance <input type="checkbox"/> Education <input type="checkbox"/> Social <input type="checkbox"/> Spiritual |

FORM — O.5

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date: _____ <div style="text-align: right; font-size: 1.2em; font-weight: bold; margin-left: 20px;">Thursday</div> | |
| APPOINTMENT AND TASK SCHEDULE | |
| A.M. _____ | 2 _____ |
| 8 _____ | 3 _____ |
| 9 _____ | 4 _____ |
| 10 _____ | 5 _____ |
| 11 _____ | 6 _____ |
| 12 _____ | 7 _____ |
| 1 _____ | P.M. _____ |
| <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> <u>Review Weekly Goals and Plan Day</u> | CHARACTER ATTRIBUTES / TASKS <input type="checkbox"/> Physical <input type="checkbox"/> P. Temperance <input type="checkbox"/> Education <input type="checkbox"/> Social <input type="checkbox"/> Spiritual |

FORM — O.6

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date: _____ <div style="float: right; font-size: 24px; font-weight: bold; margin-top: 10px;">Friday</div> | |
| APPOINTMENT AND TASK SCHEDULE | |
| A.M. _____ | 2 _____ |
| 8 _____ | 3 _____ |
| 9 _____ | 4 _____ |
| 10 _____ | 5 _____ |
| 11 _____ | 6 _____ |
| 12 _____ | 7 _____ |
| 1 _____ | P.M. _____ |
| <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> <u>Review Weekly Goals and Plan Day</u> | CHARACTER ATTRIBUTES / TASKS <input type="checkbox"/> Physical <input type="checkbox"/> P. Temperance <input type="checkbox"/> Education <input type="checkbox"/> Social <input type="checkbox"/> Spiritual |

FORM — O.7

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date: _____ <div style="text-align: right; font-size: 1.5em; font-weight: bold; margin-left: 200px;">Saturday</div> | |
| APPOINTMENT AND TASK SCHEDULE | |
| A.M. _____ | 2 _____ |
| 8 _____ | 3 _____ |
| 9 _____ | 4 _____ |
| 10 _____ | 5 _____ |
| 11 _____ | 6 _____ |
| 12 _____ | 7 _____ |
| 1 _____ | P.M. _____ |
| <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> <u>Review Weekly Goals and Plan Day</u> | CHARACTER ATTRIBUTES / TASKS <input type="checkbox"/> Physical <input type="checkbox"/> P. Temperance <input type="checkbox"/> Education <input type="checkbox"/> Social <input type="checkbox"/> Spiritual |

Appendix — O.7

FORM — P.1

Date:

Sunday

DAILY TASK SCHEDULE

- Review Weekly Progress** _____
- Plan for Next Week** _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

CHARACTER ATTRIBUTES

- Physical
- P. Temperance
- Education
- Social
- Spiritual

FORM — P.3

| | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------|---------------------------------|----------------------------------------|------------------------------------|------------------------------------|--|
| Date: _____ | | <h2>Tuesday</h2> | | | | | | |
| DAILY TASK SCHEDULE | | | | | | | | |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> | | | | | | | |
| | <input type="checkbox"/> Review Weekly Goals and Plan Day | | | | | | | |
| <p>CHARACTER ATTRIBUTES</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Physical</td> <td><input type="checkbox"/> Social</td> </tr> <tr> <td><input type="checkbox"/> P. Temperance</td> <td><input type="checkbox"/> Spiritual</td> </tr> <tr> <td><input type="checkbox"/> Education</td> <td></td> </tr> </table> | | | <input type="checkbox"/> Physical | <input type="checkbox"/> Social | <input type="checkbox"/> P. Temperance | <input type="checkbox"/> Spiritual | <input type="checkbox"/> Education | |
| <input type="checkbox"/> Physical | <input type="checkbox"/> Social | | | | | | | |
| <input type="checkbox"/> P. Temperance | <input type="checkbox"/> Spiritual | | | | | | | |
| <input type="checkbox"/> Education | | | | | | | | |

FORM — P.4

| | |
|---------------------------------|---------------------------------------------------------------------------|
| Date: _____ Wednesday | |
| DAILY TASK SCHEDULE | |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
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| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Review Weekly Goals and Plan Day |
| CHARACTER ATTRIBUTES | <input type="checkbox"/> Physical <input type="checkbox"/> Social |
| | <input type="checkbox"/> P. Temperance <input type="checkbox"/> Spiritual |
| | <input type="checkbox"/> Education |

Appendix — P.4

FORM — P.5

Date:

_____ **Thursday**

DAILY TASK SCHEDULE

| | |
|--------------------------|-----------------------------------------|
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
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| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Review Weekly Goals and Plan Day |

CHARACTER ATTRIBUTES

| | |
|----------------------------------------|------------------------------------|
| <input type="checkbox"/> Physical | <input type="checkbox"/> Social |
| <input type="checkbox"/> P. Temperance | <input type="checkbox"/> Spiritual |
| <input type="checkbox"/> Education | |

FORM — P.7

| | | | |
|-----------------------------|-----------------------------------------|------------------------------------|-------------------|
| Date: _____ | | | <h2>Saturday</h2> |
| DAILY TASK SCHEDULE | | | |
| <input type="checkbox"/> | _____ | | |
| <input type="checkbox"/> | _____ | | |
| <input type="checkbox"/> | _____ | | |
| <input type="checkbox"/> | _____ | | |
| <input type="checkbox"/> | _____ | | |
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| <input type="checkbox"/> | _____ | | |
| <input type="checkbox"/> | _____ | | |
| <input type="checkbox"/> | _____ | | |
| <input type="checkbox"/> | _____ | | |
| <input type="checkbox"/> | Review Weekly Goals and Plan Day | | |
| CHARACTER ATTRIBUTES | | | |
| | <input type="checkbox"/> Physical | <input type="checkbox"/> Social | |
| | <input type="checkbox"/> P. Temperance | <input type="checkbox"/> Spiritual | |
| | <input type="checkbox"/> Education | | |

FORM — Q

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Week:</p> <p>_____</p> | |
| CHARACTER ATTRIBUTE EVALUATION | |
| <p style="text-align: right;">Sunday</p> <p><input type="checkbox"/> Physical</p> <p><input type="checkbox"/> P. Temperance</p> <p><input type="checkbox"/> Education</p> <p><input type="checkbox"/> Social</p> <p><input type="checkbox"/> Spiritual</p> | <p style="text-align: right;">Monday</p> <p><input type="checkbox"/> Physical</p> <p><input type="checkbox"/> P. Temperance</p> <p><input type="checkbox"/> Education</p> <p><input type="checkbox"/> Social</p> <p><input type="checkbox"/> Spiritual</p> |
| <p style="text-align: right;">Tuesday</p> <p><input type="checkbox"/> Physical</p> <p><input type="checkbox"/> P. Temperance</p> <p><input type="checkbox"/> Education</p> <p><input type="checkbox"/> Social</p> <p><input type="checkbox"/> Spiritual</p> | <p style="text-align: right;">Wednesday</p> <p><input type="checkbox"/> Physical</p> <p><input type="checkbox"/> P. Temperance</p> <p><input type="checkbox"/> Education</p> <p><input type="checkbox"/> Social</p> <p><input type="checkbox"/> Spiritual</p> |
| <p style="text-align: right;">Thursday</p> <p><input type="checkbox"/> Physical</p> <p><input type="checkbox"/> P. Temperance</p> <p><input type="checkbox"/> Education</p> <p><input type="checkbox"/> Social</p> <p><input type="checkbox"/> Spiritual</p> | <p style="text-align: right;">Friday</p> <p><input type="checkbox"/> Physical</p> <p><input type="checkbox"/> P. Temperance</p> <p><input type="checkbox"/> Education</p> <p><input type="checkbox"/> Social</p> <p><input type="checkbox"/> Spiritual</p> |
| <p style="text-align: right;">Saturday</p> <p><input type="checkbox"/> Physical</p> <p><input type="checkbox"/> P. Temperance</p> <p><input type="checkbox"/> Education</p> <p><input type="checkbox"/> Social</p> <p><input type="checkbox"/> Spiritual</p> | <p style="text-align: right;">Sunday</p> <p><input type="checkbox"/> Review Last Week's Progress</p> <p><input type="checkbox"/> Plan for Next Week</p> |

Appendix — Q