



# Assembling Your Success Team

1. Do you want to change your health? Yes or No
    - a. What do you want to change? (Be specific. Ex: I want to lose 30 pounds in 90 days.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
    - b. Why do you want to do it? (Put this answer on a 3x 5 card that you will see daily)  
(Ex: I want to lose weight so I can get off medications)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  2. How will you gain new skills and abilities?
    - a. Read the book, attend class, fill out notes, do homework
    - b. Other \_\_\_\_\_
  3. Who will cheer you on?
    - a. List 2 or 3 people you are going to ask to encourage and support you. \_\_\_\_\_  
\_\_\_\_\_
    - b. Who might make it difficult to succeed? \_\_\_\_\_  
\_\_\_\_\_
    - c. What will you do to prevent problems? \_\_\_\_\_  
\_\_\_\_\_
  4. Who will be your coach?
    - a. List everyone who will be coaching you: \_\_\_\_\_  
\_\_\_\_\_
    - b. Will you come weekly and have testing monthly? Yes or No  
(Not applicable to online class)
  5. List your rewards and incentives. What will you do as a reward when you hit a goal?
    - a. Short term rewards and incentives: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
    - b. Long term rewards and incentives: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  6. Your health friendly environment. Remove things that will hinder you.  
What do you need to get out of your house, workspace and other places? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Done? Yes or No