



## Exercise Chart

What are your habits? Do you want to get rid of some old ones? Gain new ones?  
Fill out this worksheet and let's see what kind of changes you can make!

Habit	Have It	Need It	Lose It
Brushing my teeth			
Flossing			
Exercising daily			
Going to bed on time			
Drinking 8 glasses of water daily			
Finishing homework			
Keeping my room clean			
Making time for hobbies			
Taking medications			
Eating to stay healthy			
Recycling			
Biting nails			
Other			
Other			
Other			
Other			