75 Days of Fitness Self-Guided Challenge Weekly Tracker

STRIVE to be Better!

Participant Name: _____

Week Number: _____ (1–11)

Dates Covered: _____

Weekly Schedule

Day	Value	Activity Completed?	Notes / Reflections
Monday	**S**upport	____ Yes ____ No	_____
Tuesday	**T**eamwork	____ Yes ____ No	_____
Wednesday	**R**espect	____ Yes ____ No	_____
Thursday	**I**ntegrity	____ Yes ____ No	_____
Friday	**V**alue	____ Yes ____ No	_____
Saturday	**E**xcellence	____ Yes ____ No	_____
Sunday	Recharge Day	____ Yes ____ No	_____

Weekly Goals & Focus

Personal Fitness Goal(s) for this Week: _____

Nutrition or Wellness Goal(s):_____

Accountability Partner (Optional):_____

Weekly Progress

Days Attended: ____ out of 7

Milestone Check-Ins – How Many Days Completed

November 12 = 25 Days Check-In: _____

December 7 = 50 Days Check-In: _____

December 31 = 75 Days Check-In: _____

Self-Check:

Overall Energy Level: 😊 ☺ 😐 ☹

Motivation: High / Medium / Low

Challenges Faced: _____

Reflection

What I enjoyed most this week:_____

What I'd like to improve next week:_____

Community Connections Made:_____