

POSSIBLE PRACTICES

Here's a list of possible practices that could be of benefit. Check mark those you find as acceptable or you want to do.

1/2W? = probably semi weekly; Freq = frequently; Per. = periodically; Occ = as it occurs, handle it;

Physical practices

		Probable Frequency	Tickled
<input type="checkbox"/>	Medical check-ups	Yr.	
<input type="checkbox"/>	Tickled for reminder		
<input type="checkbox"/>	Charted for key indicators over time (see pre-designed chart)		
<input type="checkbox"/>	Physical exercise	Day	
<input type="checkbox"/>	Chart maintained (see pre-designed charts for weight tracking and for exercise and diet)		
<input type="checkbox"/>	Nutrition		
<input type="checkbox"/>	Vitamins and supplements fully decided (See pre-designed, but also must be customized)	Yr.	
<input type="checkbox"/>	Overall diet decided (See pre-designed diet suggested)	Yr.	
<input type="checkbox"/>	Physical goals set	Yr.	
<input type="checkbox"/>	Physical goals charted (see ones mentioned above)		
<input type="checkbox"/>	Deep relaxation exercises	Per.	

Meditative

		Probable Frequency	Tickled
<input type="checkbox"/>	Deep breathing, counting breaths	Per	
<input type="checkbox"/>	Watching thoughts and letting them go	Per	
<input type="checkbox"/>	Soothing tape or CD for relaxation	Per	
<input type="checkbox"/>	Beach		

Viewpoint, focusing on positives

		Probable Frequency	Tickled
<input type="checkbox"/>	Review commitments	Mo?	
<input type="checkbox"/>	Review your standards, code of respect, and/or values	Mo?	
<input type="checkbox"/>	Review the person you'd most like to be or be like	Mo?	
<input type="checkbox"/>	Review the person you've decided to be over the long term	Mo?	
<input type="checkbox"/>	Review and/or select daily the ways of being you've chosen	Day?	
<input type="checkbox"/>	Review goals	½ W	
<input type="checkbox"/>	Review Vision	Mo?	
<input type="checkbox"/>	Review purpose, mission	Mo?	
<input type="checkbox"/>	Review dreams	Mo?	
<input type="checkbox"/>	Review achievements, successes	Mo?	
<input type="checkbox"/>	Review thank you's, compliments	Mo?	
<input type="checkbox"/>	Rewrite interpretations around failures. (Finish)	Mo?	
<input type="checkbox"/>	Review and get clear on life philosophy (Finish write-up)		
<input type="checkbox"/>	<input type="checkbox"/> Your own	½ Mo	
<input type="checkbox"/>	<input type="checkbox"/> Other healthy write-up	½ Mo	
<input type="checkbox"/>	Inspirational reading		
<input type="checkbox"/>	<input type="checkbox"/> Poems	Occ	
<input type="checkbox"/>	<input type="checkbox"/> Books like Chicken Soup	Occ	

Psychological

		Probable Frequency	Tickled
<input type="checkbox"/>	Daily reading of compilation of comforting statements about yourself and life.	Day?	
<input type="checkbox"/>	Gratitude		
<input type="checkbox"/>	<input type="checkbox"/> Review list,	½ W?	
<input type="checkbox"/>	<input type="checkbox"/> Write out what you're grateful for	Per.	
<input type="checkbox"/>	Rewrite negative or disempowering statements	Occ	
<input type="checkbox"/>	Review empowering statements		
<input type="checkbox"/>	<input type="checkbox"/> repeating,	Freq	
<input type="checkbox"/>	<input type="checkbox"/> writing,	Per.	
<input type="checkbox"/>	<input type="checkbox"/> reviewing	Per.	
<input type="checkbox"/>	Ground of being	Week	
<input type="checkbox"/>	Affirmations	Day?	
<input type="checkbox"/>	Review and get clear on what I can and can't control	Mo.	

Time management

		Probable Frequency	Tickled
<input type="checkbox"/>	Daily planning	Day	
<input type="checkbox"/>	Time Tally – annually	Yr	
<input type="checkbox"/>	Weekly planning	Week	
<input type="checkbox"/>	Monthly planning, review plan	Mo	
<input type="checkbox"/>	Quarterly planning, review plan, write quarterly changes and additions	Qtr	
<input type="checkbox"/>	Yearly planning	Yr	

Relationship

		Probable Frequency	Tickled
<input type="checkbox"/>	Weekly partners or family meeting	Week	
<input type="checkbox"/>	Yearly check-up (see forms), preferably with qualified counselor	Yr	

Career, Business

		Probable Frequency	Tickled
<input type="checkbox"/>	Review the success factors in the business	Mo.	

Insert these in your Current Operating Notebook or your Grounding/Reminders/Inspiration Notebook¹, whichever works for you for easier reference.

¹ See www.thelifemanagementalliance.com, Site III, Notebooks