

# HABIT AWARENESS & IDENTITY ALIGNMENT

Define your direction and audit your habits

## Define Your Direction

Before building new habits, clarify who you want to become. Write a short description of the type of person you are working toward and the goals you want to achieve.

- The type of person I want to become:
  
- The goals I am working toward:

## Audit Your Current Habits

Habits are actions you repeat regularly, often without thinking about them. A positive habit might be exercising daily, a negative habit could be eating at night, and a neutral habit can be things like brushing your teeth. Over time, even small repeated behaviors shape your results. List your daily habits and evaluate their impact. Use the symbols below to assess alignment.

+ Moves me forward

– Holds me back

= Neutral impact





# MONTHLY GROWTH TRACKER

Building consistent habits

Choose 1–3 habits that directly support the person you are becoming. Focus on **consistency and clarity** rather than intensity.

## Define When & Where

Write a clear plan for when and where you will complete each habit. **Specific timing and location increase follow-through.**

**Example:** I will read for 10 minutes **at** 7a.m. **in** my living room before watching TV.

**Habit 1:**

I will \_\_\_\_\_ at \_\_\_\_\_ in \_\_\_\_\_.

**Habit 2:**

I will \_\_\_\_\_ at \_\_\_\_\_ in \_\_\_\_\_.

**Habit 3 (optional):**

I will \_\_\_\_\_ at \_\_\_\_\_ in \_\_\_\_\_.

## 4-Week Growth Log

Month: \_\_\_\_\_

### Week 1

Habit Name:	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7

Completion Total: \_\_\_\_ / 7 days

Notes / Obstacles / Adjustments:

### Week 2

Habit Name:	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						

Completion Total: \_\_\_\_ / 7 days

Notes / Obstacles / Adjustments:

### Week 3

Habit Name:	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						

Completion Total: \_\_\_\_ / 7 days

Notes / Obstacles / Adjustments:

### Week 4

Habit Name:	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						

Completion Total: \_\_\_\_ / 7 days

Notes / Obstacles / Adjustments:

What did this 30-day cycle teach you about your consistency and discipline?