WEEK 1 - DAYS 1-7	3/20	3/21	3/22	3/23	3/24	3/25	3/26
DAILY TASK	**1**	**2**	**3**	**4**	**5**	**6**	**7**
PART 1: CUT OUT COMPLETELY OR HALF	☐	☐	☐	☐	☐	☐	☐
PART 2: NO: TV, VIDEO GAMES, UNNEECESSARY PHONE/COMPUTER	☐	☐	☐	☐	☐	☐	☐
PART 3: YES: DRINK GALLON OF WATER, BOX BREATHING 30 MIN OUTSIDE	☐	☐	☐	☐	☐	☐	☐
PART 4: JOURNAL	☐	☐	☐	☐	☐	☐	☐

WEEK 2 - DAYS 8-14	3/27	3/28	3/29	3/30	3/31	4/1	4/2
DAILY TASK	**1**	**2**	**3**	**4**	**5**	**6**	**7**
PART 1: CUT OUT COMPLETELY OR HALF	☐	☐	☐	☐	☐	☐	☐
PART 2: NO: TV, VIDEO GAMES, UNNEECESSARY PHONE/COMPUTER	☐	☐	☐	☐	☐	☐	☐
PART 3: YES: DRINK GALLON OF WATER, BOX BREATHING 30 MIN OUTSIDE	☐	☐	☐	☐	☐	☐	☐
PART 4: JOURNAL	☐	☐	☐	☐	☐	☐	☐

WEEK 3 - DAYS 15-21	4/3	4/4	4/5	4/6	4/7	4/8	4/9
DAILY TASK	**1**	**2**	**3**	**4**	**5**	**6**	**7**
PART 1: CUT OUT COMPLETELY OR HALF	☐	☐	☐	☐	☐	☐	☐
PART 2: NO: TV, VIDEO GAMES, UNNEECESSARY PHONE/COMPUTER	☐	☐	☐	☐	☐	☐	☐
PART 3: YES: DRINK GALLON OF WATER, BOX BREATHING 30 MIN OUTSIDE	☐	☐	☐	☐	☐	☐	☐
PART 4: JOURNAL	☐	☐	☐	☐	☐	☐	☐

WEEK 4 - DAYS 22-28	4/10	4/11	4/12	4/13	4/14	4/15	4/16
DAILY TASK	**1**	**2**	**3**	**4**	**5**	**6**	**7**
PART 1: CUT OUT COMPLETELY OR HALF	☐	☐	☐	☐	☐	☐	☐
PART 2: NO: TV, VIDEO GAMES, UNNEECESSARY PHONE/COMPUTER	☐	☐	☐	☐	☐	☐	☐
PART 3: YES: DRINK GALLON OF WATER, BOX BREATHING 30 MIN OUTSIDE	☐	☐	☐	☐	☐	☐	☐
PART 4: JOURNAL	☐	☐	☐	☐	☐	☐	☐