YEAR RESET WORKSHEET

Fill in once. Review daily. NAME: _____ DATE: _____

1. HALFTIME CHART

FIRST HALF (What's working & what isn't?)	SECOND HALF (What needs to change & focus areas?)

2. WILL OR SKILL

WILL (Motivation, drive, energy blocks) Where am I holding back?	**SKILL** (Capabilities, tools, systems) Where do I need training or support?

3. THE MODEL WEEK GRID (Six Key Activities)

MY 6 KEY ACTIVITIES	THE MODEL WEEK				
	MON	TUE	WED	THU	FRI
1. _____					
2. _____					
3. _____					
4. _____					
5. _____					
6. _____					

4. DAILY CHECK (Your daily ritual)

	M	T	W	T	F	S	S
☐ Review my 6 key activities	○	○	○	○	○	○	○
☐ Protect my focus blocks	○	○	○	○	○	○	○
☐ Team check-in	○	○	○	○	○	○	○
☐ End-of-day review	○	○	○	○	○	○	○

