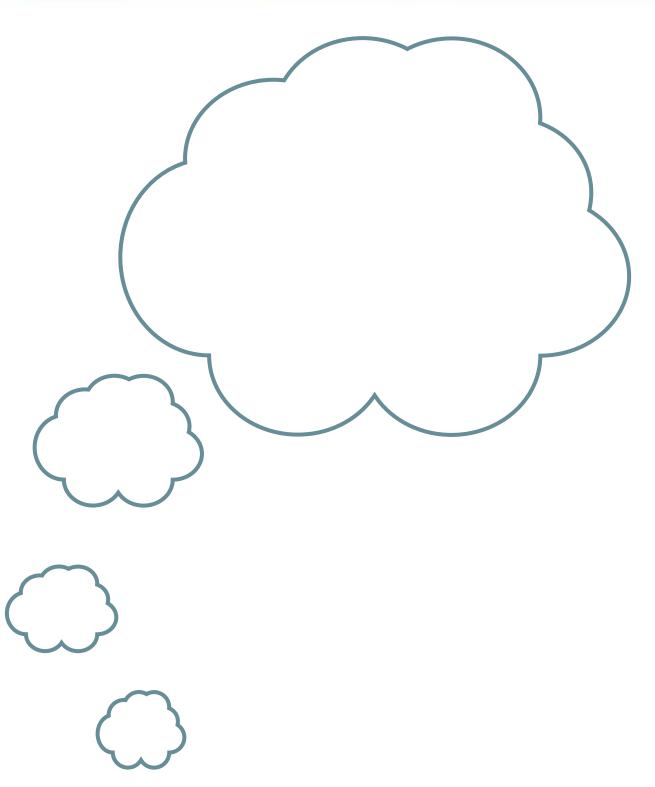


My Life, My Journey

Improvement Ladder

Name		••••••	••••••	••••••
Age	••••••	••••••	••••••	•••••
Today's Dat	e		• • • • • • • • • • • • • •	

? What are my worries?



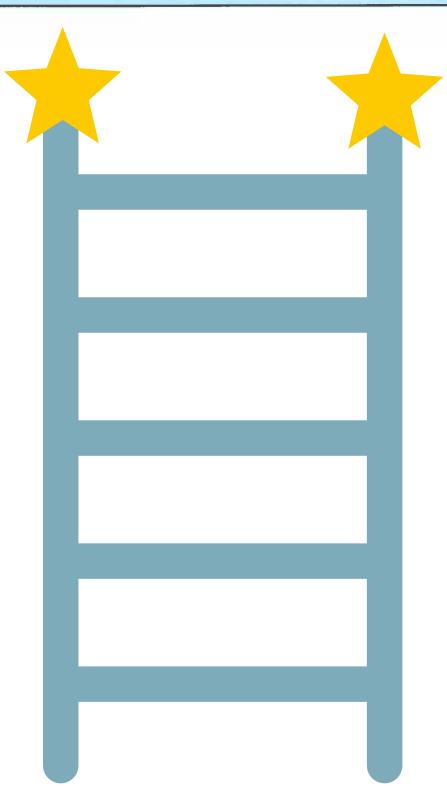


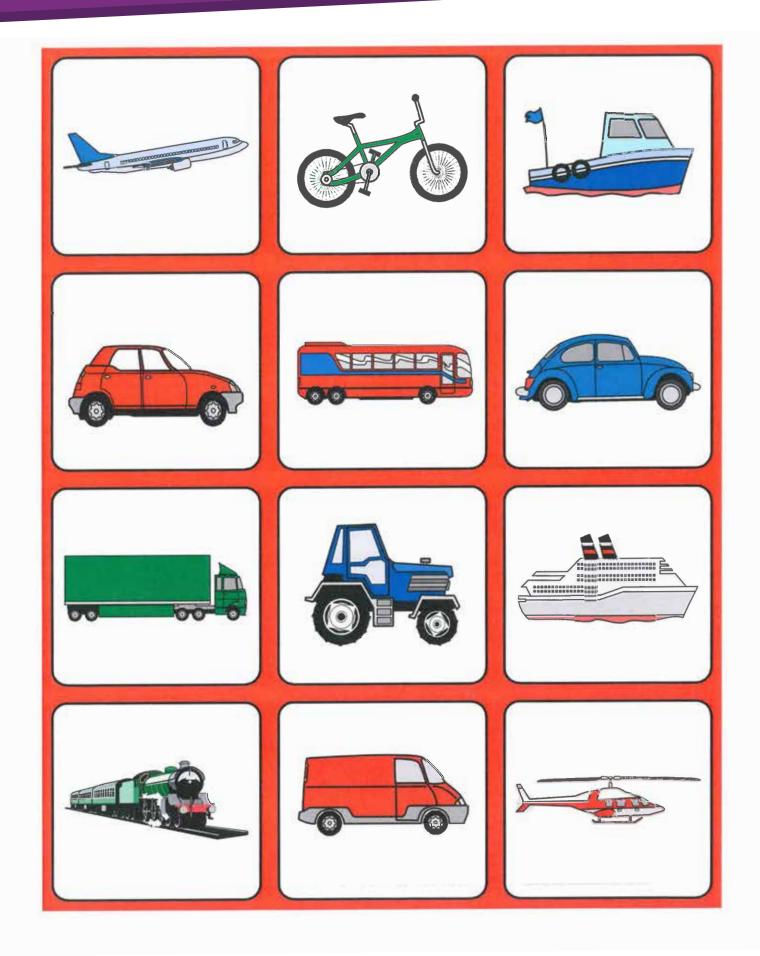
This is what I would like to change?

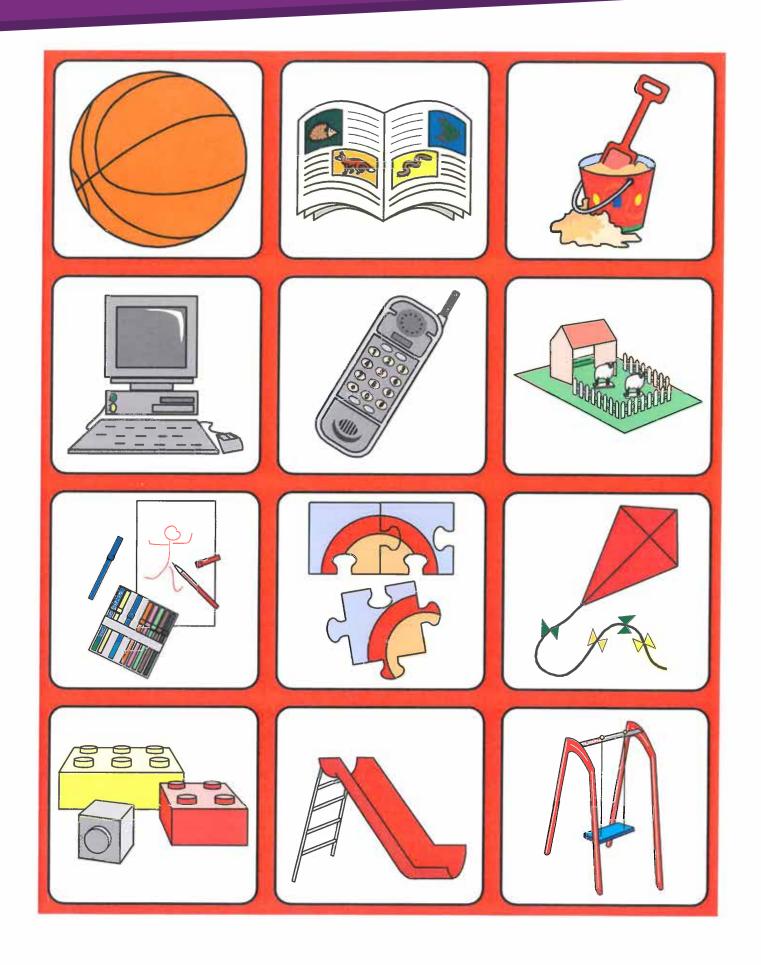


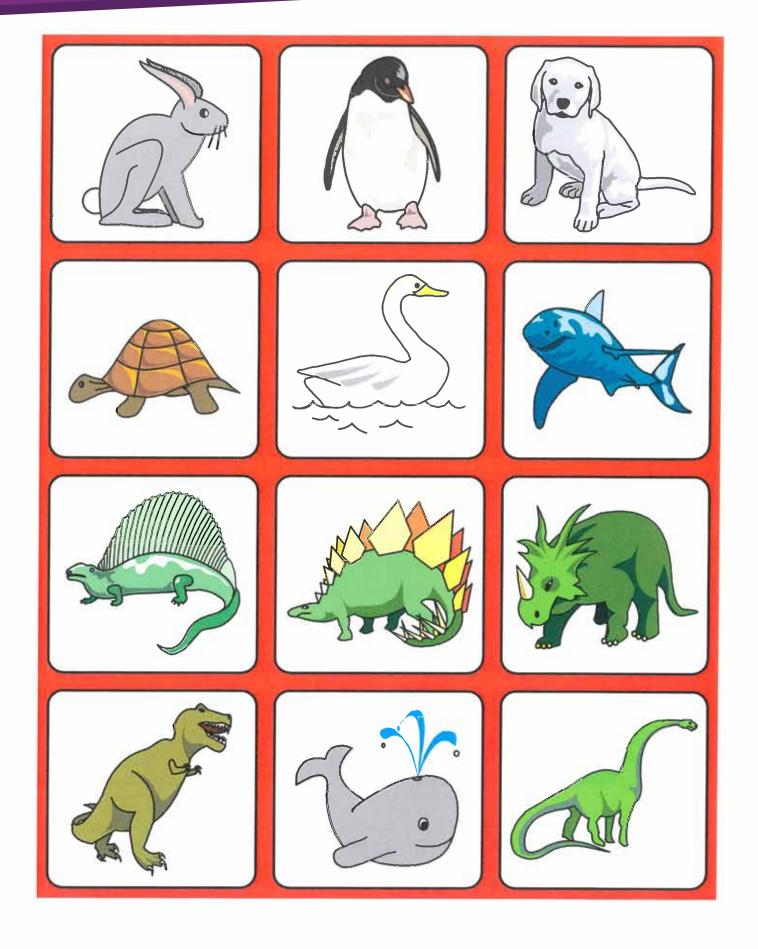


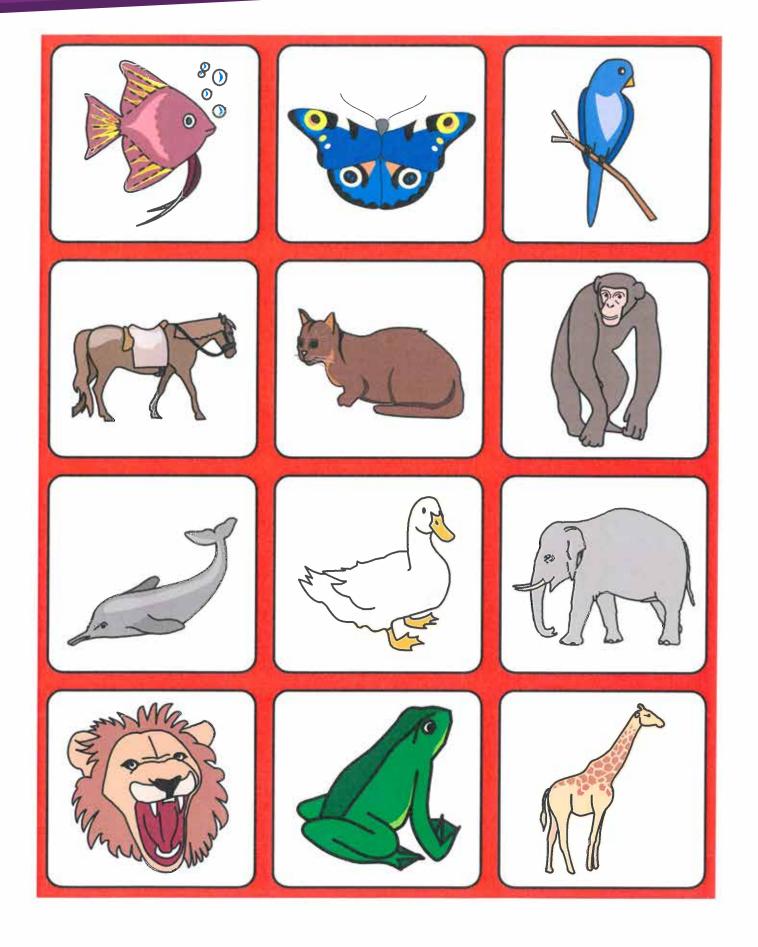


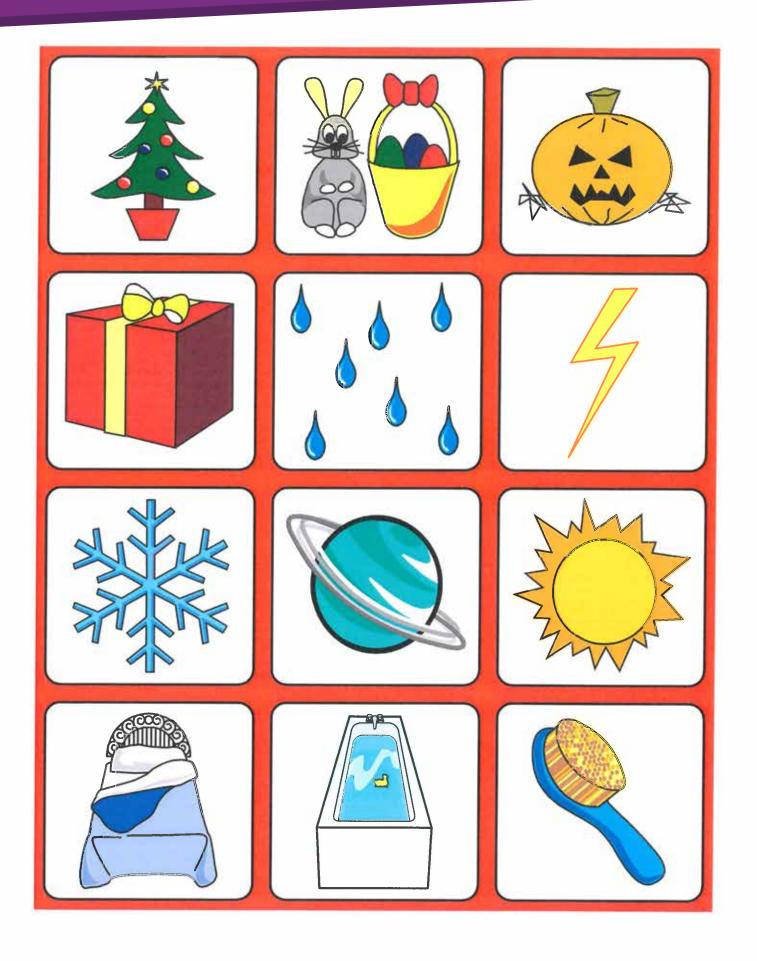


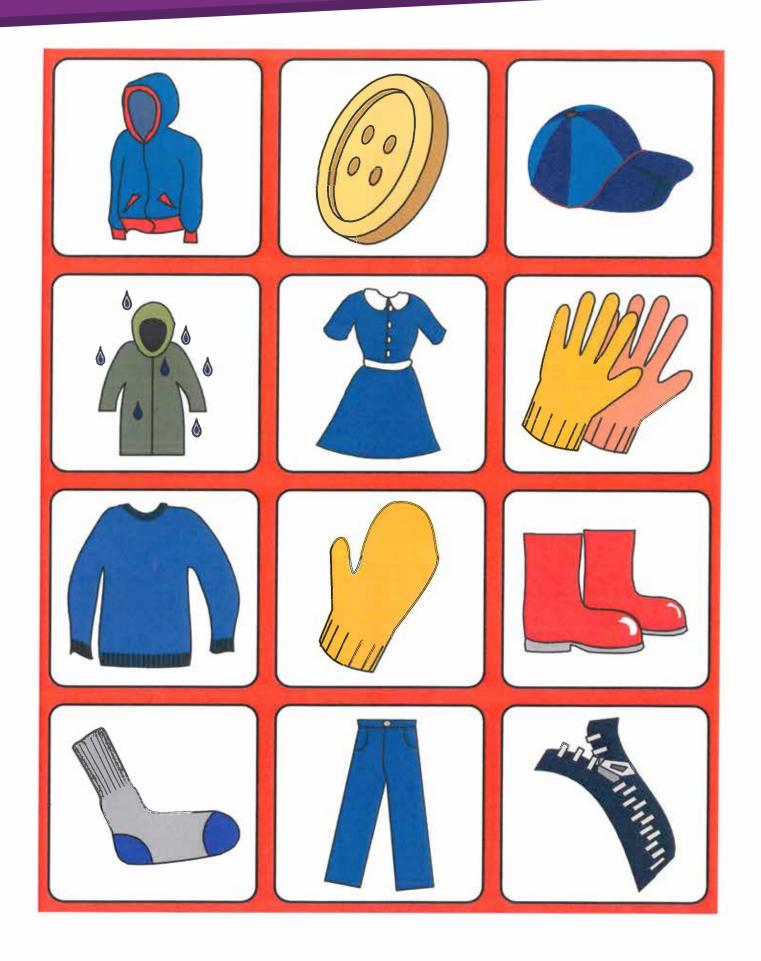


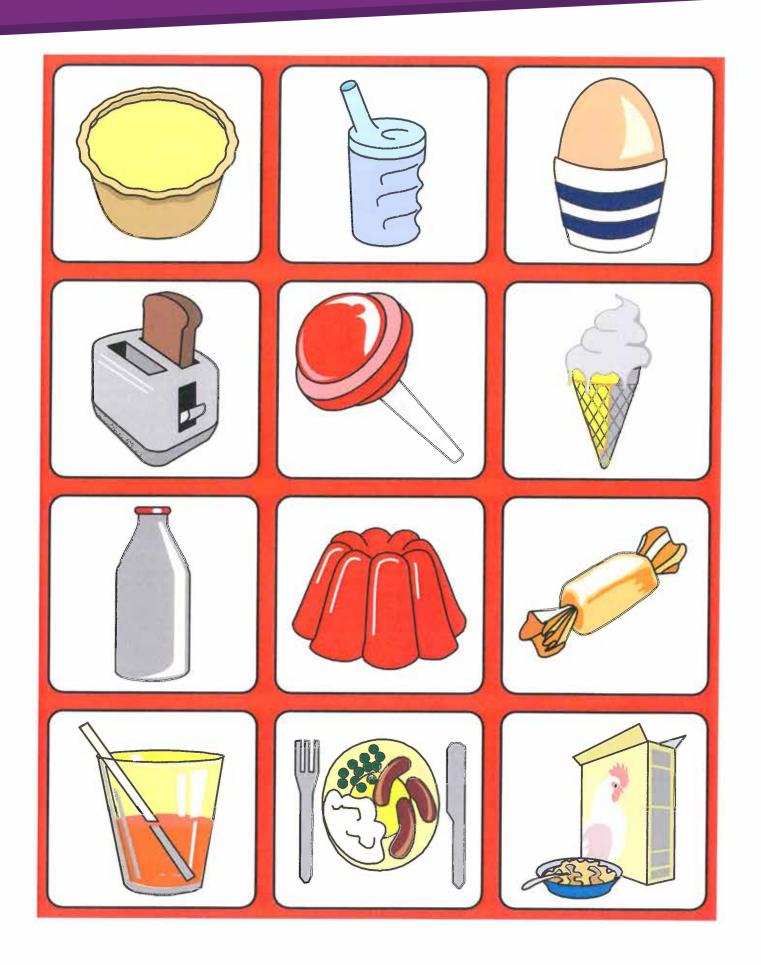


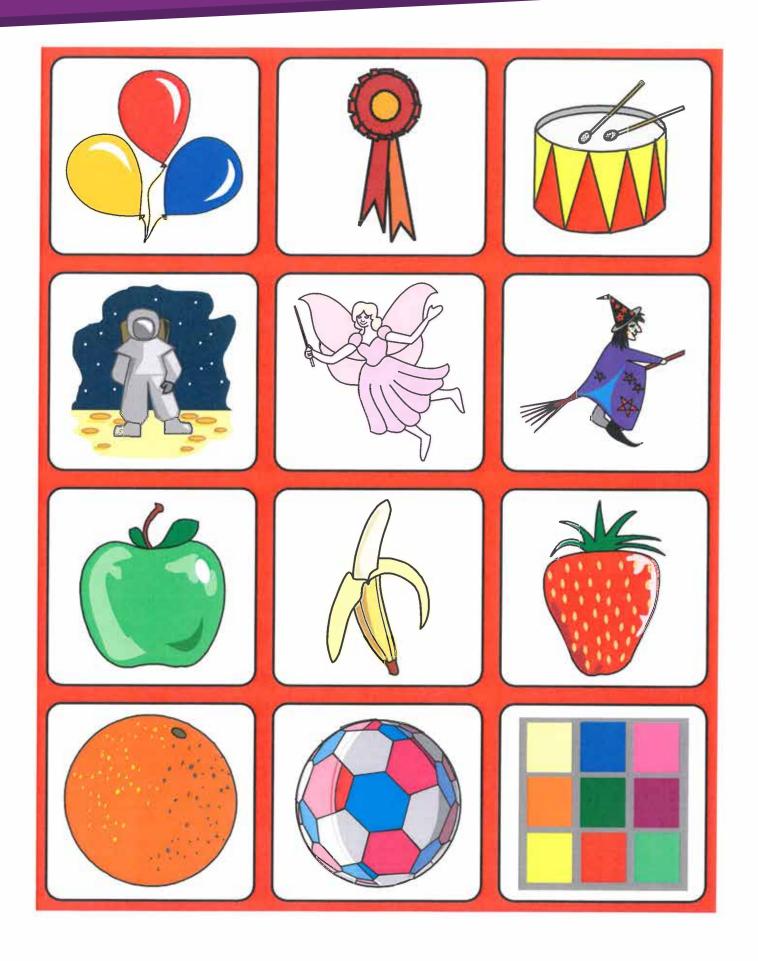


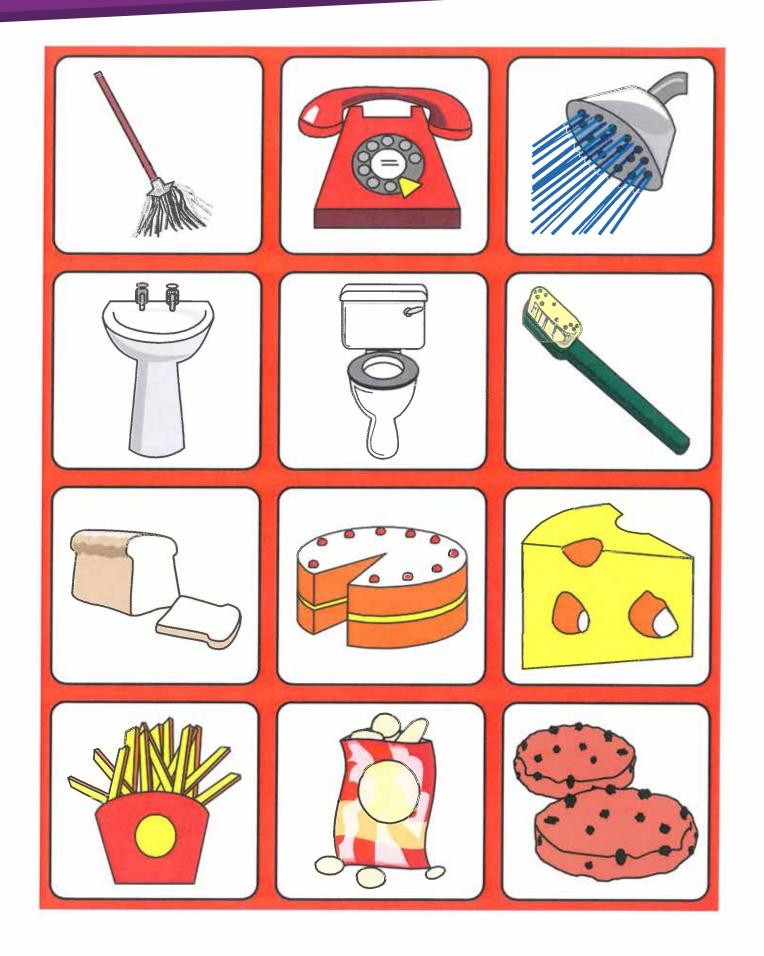












Action Plan



Name

When would you like it to start?		
Who is going to help you?	night help?	
How is it going to help you?	What else might help?	
What is going to help you?		

Review



Name

How much has it helped you?	Not at all	
	A little	
	A lot	