

GOALS & LIMITING FACTORS

NAME: _____ DATE _____

GOALS

I'd like to know about one specific goal that you'd like to achieve over the next three months. Please be as detailed and specific as possible. To help you out I've outlined the S.M.A.R.T goal setting techniques below.

S M A R T stands for:

- S – Simple/Specific: Keep your goal simple and focused, rather than wordy and vague. Be very specific about the outcome you want.
 - EX: I want to be 12% body fat
- M – Measurable: How will you know when your goal has been reached? What will be different?
 - EX: I will know because I have taken body fat measurements and can see in my before and after photos
- A – Attractive: Does this goal inspire you? Is it exciting enough in both the long and short term?
 - If it's not, re-think it so that it is.
- R – Realistic: The goal must be achievable.
 - I can help with this but do you think it is realistic?
- T – Timed: State your goal as if its already been achieved. This trains the unconscious mind to accept the goal as real, which helps you to move more effectively towards it. Know when your goal will be realised.
 - EX: I HAVE reached my goal of 12% body fat by January 1st, 2015

Using the SMART goal setting technique above please state your biggest fitness goal over the next 3 months. Please also list 3 to 5 action steps that you can take now to get you one step closer to that goal (EX: Hire a trainer, take by body measurements, perform a kitchen makeover, schedule workouts into my calendar)

QUESTION:

What are some things you have tried in the past (exercise, diet, etc...) to reach this goal?

Why do you feel you were not successful or the method was not successful? If it was successful why do you feel like it was?

Where, what days, and at what times will you be working out each week. Ideally these should not change week to week. Pick a minimum of four.

Day 1: _____
Time: _____
Place: _____

Day 2: _____
Time: _____
Place: _____

Day 3: _____
Time: _____
Place: _____

Day 4: _____
Time: _____
Place: _____

LIMITING FACTORS

Take some time to think about this. What do you feel are 3-5 limiting factors that keep you from reaching your goal as stated above?

1. _____

2. _____

3. _____

4. _____

5. _____

BEHAVIORAL CHANGES TO OVERCOME THESE LIMITATIONS

(I WILL FILL THIS OUT AND SEND BACK TO YOU WHEN DONE)

1. _____

2. _____

3. _____

4. _____

5. _____