Lukki by Nature Coaching

Weekly Check-In Form

Name: _____ Week No: _____ Date: _____

This week I felt (tick all that apply):

[ ] Happy [ ] Motivated [ ] Tired [ ] Stressed [ ] Anxious [ ] Proud [ ] Overwhelmed [ ] Calm

Energy level this week (circle): 1 2 3 4 5 6 7 8 9 10

Sleep quality (circle): 1 2 3 4 5 6 7 8 9 10

Did you complete your workouts this week? [ ] Yes [ ] Mostly [ ] Some [ ] No

Water intake — were you hitting your target? [ ] Yes [ ] No [ ] Some days

Nutrition — how did you eat this week? [ ] On track [ ] Mostly good [ ] Could improve

What went well this week?

_____
_____

_____
_____

What was challenging?

_____
_____

_____
_____

My focus for next week:

_____
_____

_____
_____

Message for Lukki:

_____
_____

_____
_____

Send your completed check-in to Lukki each week. You are doing amazing — keep going!