

PERSONAL MOT 4U SERVICE REVIEW

NAME:

DATE:

Review your drawing and notes from the "MOT 4U" workshop to answer the questions and complete the following diagnostics for your "vehicle for well-being". REMEMBER TO "SAVE" FILE!!

| Key Success Markers | Key Focus Areas | Dashboard Warnings | Additional Notes | | | |
|--|---|--|---|--|--|--|
| Which parts of the car do you feel you are doing really well? 1. | Which parts of the car do you feel need attention? | What are your "signs" that things aren't quite right? 1. | What else are you noticing about your vehicle? 1. | | | |
| 2. | 2. | 2. | 2. | | | |
| 3. | 3. | 3. | 3. | | | |





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Continue to review your reflections to build your on-going maintenance plan. Rate your overall well-being and set a date for future review. REMEMBER TO "SAVE" FILE!!

| Continued Success | Activations | Support | Remedies |
|---|---|---|--|
| How will you keep the "good bits" going? 1. | What will you do about the areas needing attention? | What help might you need for your plans? 1. | What will you do if you notice your warning signs flashing? |
| 2. | 2. | 2. | 2. |
| 3. | 3. | 3. | 3. |

| FINAL CHECKS: | REVIEW PLAN: | Overall self-assessment (circle): | | | | | | | |
|------------------------------------|---|-----------------------------------|---|---|---|---|---|---|---|
| Confirmed successful parts | When will I next review this? | 1 = Seek support 7 = Best for me | | | | | 9 | | |
| Highlighted attention needed areas | | | | | | | | | |
| Identified warning signs | What do I want to be saying on that date? | | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Planned on-going adjustments | | | | | | | | | |

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