CALM MIND WORKBOOK PACK

Printable Sleep & Stress Workbooks with Trackers
Coach Client-Use License Included



Sleep Reset Workbook • Stress Less Workbook • Calm Habits Pack

30-day sleep diary • Breathing guides • Habit & mood trackers

US Letter • Print as many tracker copies as you need

PUZZLE POUT TALON

Product code: PP-CALMMIND-01

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What you MAY do with this pack:

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• and use them with your own clients during your own work.

• Print extra copies of tracker and journal pages as often as you

• need for yourself or for those clients.

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Important Disclaimer — Please Read

This workbook pack is an educational and relaxation resource. It offers general information about everyday sleep habits, stress management and calm daily routines, plus printable worksheets and trackers you can fill in at your own pace.

It is not medical advice, and it is not a diagnosis or a treatment for any health condition. Nothing in this pack replaces the guidance of a qualified healthcare professional.

If you have ongoing concerns about your sleep, your health, or your wellbeing, please talk with a doctor or another qualified professional who knows your situation. If you ever feel unsafe, contact local emergency services or a trusted support service in your country right away.

Use the exercises gently and at your own pace. Stop any breathing or relaxation exercise if it feels uncomfortable, and adapt every worksheet to what works for your life.

Coaches, therapists and counselors who use these worksheets with their own clients remain responsible for their own professional judgment and for any advice they give.

What's Inside

Sleep Reset Workbook — about 70 pages

Short, plain-language sleep-hygiene reading pages, a 30-day sleep diary (morning and evening check-ins), stimulus-control checklists, wind-down planners, a simple sleep-efficiency tracker, thought records and bedtime-reset pages.

Stress Less Workbook — about 70 pages

Stress trigger logs, a weekly stress-scale tracker, illustrated breathing pages (box breathing and 4-7-8), thought records, worry-window pages, controllables pages and grounding 5-4-3-2-1 worksheets.

Calm Habits Pack — about 55 pages

Weekly and monthly habit trackers, mood trackers, gratitude pages, evening reviews, weekly reflections and calm day planners.

Print the pages you need, in any order. A pen is all you need.

Sleep Reset Workbook

Steadier nights, one small habit at a time.

- Sleep-hygiene reading pages
- 30-day sleep diary
- Wind-down & bedtime planners
- Thought records for sleep worries

Sleep Hygiene, in Plain Words

Name: _____ Date: _____

Sleep hygiene is the everyday set of habits and surroundings that make restful sleep easier to find. It is not a set of strict rules, and no single habit works for everyone. Think of this workbook as a menu: try one small change, track what happens in your diary for a week or two, and keep only what genuinely helps you.

- Keep a regular wake-up time, even at weekends, as far as life allows.
- Get outdoor light soon after waking when you can.
- Keep the bedroom cool, dark and quiet where possible.
- Save big experiments for one change at a time, so you can see its effect.

One habit I want to try first

How Sleep Works: Cycles & Rhythm

Name: _____ Date: _____

Across the night, sleep moves in cycles of lighter and deeper sleep, roughly 90 minutes each. Waking briefly between cycles is normal. What matters most over time is a fairly regular rhythm: similar wake times, light in the morning, and dimmer, quieter evenings all help your body clock know when night is coming.

- A regular wake time anchors the whole rhythm.
- Morning light is the strongest daily signal for your body clock.
- Long, late naps can make the next night lighter for some people.
- One rough night is normal; patterns over weeks tell the real story.

My current rhythm, honestly described

Light, Screens & Evenings

Name: _____ Date: _____

Bright light in the evening, especially close to the face, can make falling asleep harder for many people. You do not need a perfect routine: a dimmer last hour, a set time to put devices down, and something pleasant to do instead makes the change stick.

- Dim overhead lights in the last hour before bed.
- Set a screens-off time and keep chargers outside the bedroom if you can.
- Replace scrolling with a shower, music, stretching or a paper book.
- If you must use a screen, lower the brightness and hold it further away.

My screens-off plan for this week

Caffeine, Food & Evenings

Name: _____ Date: _____

Caffeine stays in the body for hours. Many people find that caffeine after midday makes their night lighter, even when they still fall asleep at a normal time. Heavy meals late at night can also sit uncomfortably, while going to bed hungry is distracting too. Notice your own pattern in the diary instead of following anyone else's rules blindly.

- Note caffeine timing in your evening check-in for two weeks.
- Try a midday caffeine cut-off and compare your sleep quality scores.
- Keep late meals lighter, and have a small snack if you are hungry.
- Alcohol can make sleep more broken for many people; track it if relevant.

What my diary shows about caffeine and food

Your Bedroom: A Rest Cue

Name: _____ Date: _____

A bedroom that is mostly used for sleep becomes a cue for sleep. Cool, dark and quiet helps most people. Small upgrades count: an eye mask, earplugs, a fan for steady background sound, or clearing the pile of work from the bed.

- Tidy one thing that makes the room feel unfinished or stressful.
- Check light leaks: chargers, standby lights, thin curtains.
- Keep a notepad by the bed for thoughts that pop up at night.
- Leave work and bills outside the bedroom where you can.

Three small changes I will make to my room

Naps, Weekends & Catch-Up Sleep

Name: _____ Date: _____

Short early-afternoon naps suit some people; long or late naps can steal sleep pressure from the night. Sleeping in for many hours at weekends can shift your rhythm like a mini trip across time zones. Gentle consistency usually beats big catch-up sessions.

- If you nap, try 20–30 minutes, before mid-afternoon.
- Keep weekend wake times within about an hour of weekday times.
- After a poor night, keep the day normal rather than cancelling everything.
- Get light and movement during the day after a rough night.

My nap and weekend plan

Winding Down: The Last Hour

Name: _____ Date: _____

The last hour before bed works best as a bridge: same steps, same order, dimmer and slower. A written routine beats good intentions, because a tired brain follows a list more easily than a decision. You will build yours in the planner pages ahead.

- Pick 3–5 steps you actually enjoy; boring routines get skipped.
- Put the routine where you will see it: bathroom mirror or bedside.
- Start the routine by time, not by how tired you feel.
- Review the routine weekly and swap out steps that annoy you.

What a good last hour looks like for me

Reading Your Diary Patterns

Name: _____ Date: _____

After two weeks of diary pages, patterns usually stand out: the nights after late caffeine, the evenings with no wind-down, the weekends with very late starts. Look for links, not blame. Pick the one pattern that looks strongest and work on that first.

- Circle your three best nights and note what those days shared.
- Circle your three worst nights and note what those days shared.
- Ignore single odd nights; repeat patterns are the useful signal.
- Share your diary with a professional if you ever discuss sleep with one.

The strongest pattern I can see so far

Sleep Diary — Day 1

Day 1 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 2

Day 2 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 3

Day 3 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 4

Day 4 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 5

Day 5 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 6

Day 6 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 7

Day 7 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 8

Day 8 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 9

Day 9 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 10

Day 10 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 11

Day 11 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 12

Day 12 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 13

Day 13 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 14

Day 14 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 15

Day 15 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 16

Day 16 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 17

Day 17 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 18

Day 18 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 19

Day 19 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 20

Day 20 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 21

Day 21 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 22

Day 22 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 23

Day 23 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 24

Day 24 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 25

Day 25 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 26

Day 26 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 27

Day 27 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 28

Day 28 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 29

Day 29 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Sleep Diary — Day 30

Day 30 of 30 Date: _____

Morning check-in (fill in when you wake up)

Morning record	Your notes
Time I woke up	
How I slept (circle): Poor / Fair / Good / Great	
Times I woke in the night	
How rested I feel (1–10)	

Evening check-in (fill in before bed)

Evening record	Your notes
Time I plan to get into bed	
Screens off at (time)	
Caffeine after midday? Yes / No	
Wind-down steps I did tonight	

One line about today

Stimulus-Control Checklist — Week 1

Name: _____ Date: _____

These classic sleep-hygiene habits link the bed with sleep again. Tick each habit on the nights you used it this week, and be honest rather than perfect — the ticks are information, not a score.

- ☐ I get into bed only when I feel sleepy.
- ☐ If I am awake and frustrated in bed, I get up to a dim, quiet place.
- ☐ I return to bed when I feel sleepy again.
- ☐ I keep wake-up time steady, even after a rough night.
- ☐ I use the bed mainly for sleep, not for work or scrolling.
- ☐ I keep the bedroom dim and calm during the night.

What got in the way, and my fix for next week

Stimulus-Control Checklist — Week 2

Name: _____ Date: _____

These classic sleep-hygiene habits link the bed with sleep again. Tick each habit on the nights you used it this week, and be honest rather than perfect — the ticks are information, not a score.

- ☐ I get into bed only when I feel sleepy.
- ☐ If I am awake and frustrated in bed, I get up to a dim, quiet place.
- ☐ I return to bed when I feel sleepy again.
- ☐ I keep wake-up time steady, even after a rough night.
- ☐ I use the bed mainly for sleep, not for work or scrolling.
- ☐ I keep the bedroom dim and calm during the night.

What got in the way, and my fix for next week

Stimulus-Control Checklist — Week 3

Name: _____ Date: _____

These classic sleep-hygiene habits link the bed with sleep again. Tick each habit on the nights you used it this week, and be honest rather than perfect — the ticks are information, not a score.

- ☐ I get into bed only when I feel sleepy.
- ☐ If I am awake and frustrated in bed, I get up to a dim, quiet place.
- ☐ I return to bed when I feel sleepy again.
- ☐ I keep wake-up time steady, even after a rough night.
- ☐ I use the bed mainly for sleep, not for work or scrolling.
- ☐ I keep the bedroom dim and calm during the night.

What got in the way, and my fix for next week

Stimulus-Control Checklist — Week 4

Name: _____ Date: _____

These classic sleep-hygiene habits link the bed with sleep again. Tick each habit on the nights you used it this week, and be honest rather than perfect — the ticks are information, not a score.

- ☐ I get into bed only when I feel sleepy.
- ☐ If I am awake and frustrated in bed, I get up to a dim, quiet place.
- ☐ I return to bed when I feel sleepy again.
- ☐ I keep wake-up time steady, even after a rough night.
- ☐ I use the bed mainly for sleep, not for work or scrolling.
- ☐ I keep the bedroom dim and calm during the night.

What got in the way, and my fix for next week

Wind-Down Routine Planner — Version 1

Name: _____ Date: _____

Write your routine once, then follow the list each night. Times can be approximate — the order matters more than the clock.

Step	My plan
Screens off at	
Lights dimmed / room ready	
Wash, change, teeth	
Gentle stretch or shower	
Paper book, music or podcast (low volume)	
Lights out at	

One step to make easier or more pleasant

Wind-Down Routine Planner — Version 2

Name: _____ Date: _____

Write your routine once, then follow the list each night. Times can be approximate — the order matters more than the clock.

Step	My plan
Screens off at	
Lights dimmed / room ready	
Wash, change, teeth	
Gentle stretch or shower	
Paper book, music or podcast (low volume)	
Lights out at	

One step to make easier or more pleasant

Wind-Down Routine Planner — Version 3

Name: _____ Date: _____

Write your routine once, then follow the list each night. Times can be approximate — the order matters more than the clock.

Step	My plan
Screens off at	
Lights dimmed / room ready	
Wash, change, teeth	
Gentle stretch or shower	
Paper book, music or podcast (low volume)	
Lights out at	

One step to make easier or more pleasant

Wind-Down Routine Planner — Version 4

Name: _____ Date: _____

Write your routine once, then follow the list each night. Times can be approximate — the order matters more than the clock.

Step	My plan
Screens off at	
Lights dimmed / room ready	
Wash, change, teeth	
Gentle stretch or shower	
Paper book, music or podcast (low volume)	
Lights out at	

One step to make easier or more pleasant

Wind-Down Routine Planner — Version 5

Name: _____ Date: _____

Write your routine once, then follow the list each night. Times can be approximate — the order matters more than the clock.

Step	My plan
Screens off at	
Lights dimmed / room ready	
Wash, change, teeth	
Gentle stretch or shower	
Paper book, music or podcast (low volume)	
Lights out at	

One step to make easier or more pleasant

Wind-Down Routine Planner — Version 6

Name: _____ Date: _____

Write your routine once, then follow the list each night. Times can be approximate — the order matters more than the clock.

Step	My plan
Screens off at	
Lights dimmed / room ready	
Wash, change, teeth	
Gentle stretch or shower	
Paper book, music or podcast (low volume)	
Lights out at	

One step to make easier or more pleasant

Sleep-Efficiency Tracker — Week 1

Name: _____ Date: _____

Sleep efficiency is a simple estimate: time asleep divided by time in bed, times 100. Example: in bed 8 hours (480 minutes), asleep about 7 hours (420 minutes) — 420 ÷ 480 × 100 = 88%. Estimates are fine; use your diary.

Day	In bed (min)	Asleep (min)	Efficiency %
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

This tracker is for noticing patterns only. There is no score you must reach.

What I notice this week

Sleep-Efficiency Tracker — Week 2

Name: _____ Date: _____

Sleep efficiency is a simple estimate: time asleep divided by time in bed, times 100. Example: in bed 8 hours (480 minutes), asleep about 7 hours (420 minutes) — 420 ÷ 480 × 100 = 88%. Estimates are fine; use your diary.

Day	In bed (min)	Asleep (min)	Efficiency %
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

This tracker is for noticing patterns only. There is no score you must reach.

What I notice this week

Sleep-Efficiency Tracker — Week 3

Name: _____ Date: _____

Sleep efficiency is a simple estimate: time asleep divided by time in bed, times 100. Example: in bed 8 hours (480 minutes), asleep about 7 hours (420 minutes) — 420 ÷ 480 × 100 = 88%. Estimates are fine; use your diary.

Day	In bed (min)	Asleep (min)	Efficiency %
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

This tracker is for noticing patterns only. There is no score you must reach.

What I notice this week

Sleep-Efficiency Tracker — Week 4

Name: _____ Date: _____

Sleep efficiency is a simple estimate: time asleep divided by time in bed, times 100. Example: in bed 8 hours (480 minutes), asleep about 7 hours (420 minutes) — 420 ÷ 480 × 100 = 88%. Estimates are fine; use your diary.

Day	In bed (min)	Asleep (min)	Efficiency %
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

This tracker is for noticing patterns only. There is no score you must reach.

What I notice this week

Thought Record: Sleep Worries — Sheet 1

Name: _____ Date: _____

When a worry about sleep shows up, write it down in the evening, not at 3 a.m. Then answer it the way you would answer a friend: fairly, with the evidence from your own diary.

The worry, in my own words

What evidence supports it? What evidence does not?

A fairer, calmer way to say it

What I will do tonight instead of worrying

Thought Record: Sleep Worries — Sheet 2

Name: _____ Date: _____

When a worry about sleep shows up, write it down in the evening, not at 3 a.m. Then answer it the way you would answer a friend: fairly, with the evidence from your own diary.

The worry, in my own words

What evidence supports it? What evidence does not?

A fairer, calmer way to say it

What I will do tonight instead of worrying

Thought Record: Sleep Worries — Sheet 3

Name: _____ Date: _____

When a worry about sleep shows up, write it down in the evening, not at 3 a.m. Then answer it the way you would answer a friend: fairly, with the evidence from your own diary.

The worry, in my own words

What evidence supports it? What evidence does not?

A fairer, calmer way to say it

What I will do tonight instead of worrying

Thought Record: Sleep Worries — Sheet 4

Name: _____ Date: _____

When a worry about sleep shows up, write it down in the evening, not at 3 a.m. Then answer it the way you would answer a friend: fairly, with the evidence from your own diary.

The worry, in my own words

What evidence supports it? What evidence does not?

A fairer, calmer way to say it

What I will do tonight instead of worrying

Thought Record: Sleep Worries — Sheet 5

Name: _____ Date: _____

When a worry about sleep shows up, write it down in the evening, not at 3 a.m. Then answer it the way you would answer a friend: fairly, with the evidence from your own diary.

The worry, in my own words

What evidence supports it? What evidence does not?

A fairer, calmer way to say it

What I will do tonight instead of worrying

Thought Record: Sleep Worries — Sheet 6

Name: _____ Date: _____

When a worry about sleep shows up, write it down in the evening, not at 3 a.m. Then answer it the way you would answer a friend: fairly, with the evidence from your own diary.

The worry, in my own words

What evidence supports it? What evidence does not?

A fairer, calmer way to say it

What I will do tonight instead of worrying

Reset My Bedtime — Plan 1

Name: _____ Date: _____

Shift bedtime gradually, in 15-minute steps every few nights, rather than all at once. Anchor the plan to a steady wake-up time.

Step	My plan
My steady wake-up time	
Current usual bedtime	
Step 1 bedtime (a few nights)	
Step 2 bedtime (a few nights)	
Target bedtime	
My wind-down start time	

How I will handle a night that does not go to plan

Reset My Bedtime — Plan 2

Name: _____ Date: _____

Shift bedtime gradually, in 15-minute steps every few nights, rather than all at once. Anchor the plan to a steady wake-up time.

Step	My plan
My steady wake-up time	
Current usual bedtime	
Step 1 bedtime (a few nights)	
Step 2 bedtime (a few nights)	
Target bedtime	
My wind-down start time	

How I will handle a night that does not go to plan

Reset My Bedtime — Plan 3

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Current usual bedtime	
Step 1 bedtime (a few nights)	
Step 2 bedtime (a few nights)	
Target bedtime	
My wind-down start time	

How I will handle a night that does not go to plan

Reset My Bedtime — Plan 4

Name: _____ Date: _____

Shift bedtime gradually, in 15-minute steps every few nights, rather than all at once. Anchor the plan to a steady wake-up time.

Step	My plan
My steady wake-up time	
Current usual bedtime	
Step 1 bedtime (a few nights)	
Step 2 bedtime (a few nights)	
Target bedtime	
My wind-down start time	

How I will handle a night that does not go to plan

Weekly Sleep Review — Week 1

Name: _____ Date: _____

Ten quiet minutes, once a week. Use your diary pages — no guessing.

My best night this week, and what helped

My hardest night, and what was different

One habit to keep

One small change for next week

Weekly Sleep Review — Week 2

Name: _____ Date: _____

Ten quiet minutes, once a week. Use your diary pages — no guessing.

My best night this week, and what helped

My hardest night, and what was different

One habit to keep

One small change for next week

Weekly Sleep Review — Week 3

Name: _____ Date: _____

Ten quiet minutes, once a week. Use your diary pages — no guessing.

My best night this week, and what helped

My hardest night, and what was different

One habit to keep

One small change for next week

Weekly Sleep Review — Week 4

Name: _____ Date: _____

Ten quiet minutes, once a week. Use your diary pages — no guessing.

My best night this week, and what helped

My hardest night, and what was different

One habit to keep

One small change for next week

Sleep Goals & Progress — Sheet 1

Name: _____ Date: _____

Goals work best when they are small, specific and kind. 'Screens off at 10:30 on weeknights' beats 'sleep perfectly'.

Step	My plan
My goal for the next two weeks	
Why it matters to me	
The smallest first step	
How I will track it	
My reward when I stick with it	

Progress notes

Sleep Goals & Progress — Sheet 2

Name: _____ Date: _____

Goals work best when they are small, specific and kind. 'Screens off at 10:30 on weeknights' beats 'sleep perfectly'.

Step	My plan
My goal for the next two weeks	
Why it matters to me	
The smallest first step	
How I will track it	
My reward when I stick with it	

Progress notes

Sleep Goals & Progress — Sheet 3

Name: _____ Date: _____

Goals work best when they are small, specific and kind. 'Screens off at 10:30 on weeknights' beats 'sleep perfectly'.

Step	My plan
My goal for the next two weeks	
Why it matters to me	
The smallest first step	
How I will track it	
My reward when I stick with it	

Progress notes

Stress Less Workbook

Notice it earlier. Shrink it smaller. Recover faster.

- Stress trigger logs
- Weekly stress-scale tracker
- Illustrated breathing pages
- Worry windows & grounding sheets

Stress, in Plain Words

Name: _____ Date: _____

Stress is the body's alarm system doing its job: heart rate up, muscles ready, attention narrowed. In short bursts it helps you act. It becomes a problem mainly when the alarm rarely switches off — when demands pile up faster than recovery. This workbook helps you spot triggers earlier, calm the body with simple tools, and shrink problems into next steps.

- Notice body signals early: jaw, shoulders, breathing, stomach.
- Short recovery breaks work better than one distant holiday.
- You cannot remove every demand; you can change pace, order and support.
- Track for two weeks before judging what your biggest trigger is.

Where stress shows up first in my body

Your Personal Stress Signals

Name: _____ Date: _____

Everyone has an early-warning pattern: headaches, a short temper, shallow breathing, doom-scrolling, a messy desk. Learning your first signals matters, because small tools work best when stress is still small.

- Body signals: _____
- Behaviour signals: _____
- Thinking signals: _____
- Who notices before I do, and what do they see? _____

My three earliest signals

Breathing: Why Slow Helps

Name: _____ Date: _____

Slow, comfortable breathing — especially a longer out-breath — is one of the simplest ways to settle a racing body. The next pages give you two pictured patterns. Keep every exercise gentle: if you feel dizzy or uncomfortable, stop, breathe normally, and try a shorter session another day.

- Sit comfortably; drop your shoulders before you start.
- Counts are guides, not tests — comfort comes first.
- Two to five minutes is a full session; more is optional.
- Pair practice with a daily cue: kettle, commute, lunch.

When I will practise each day

Thoughts Are Not Facts

Name: _____ Date: _____

Under stress, the mind predicts the worst and presents it as news. A thought record slows that down: situation, thought, feeling, then a fairer reframe. The reframe is not forced positivity — it is the version of the story that fits all the evidence.

- Write the thought exactly as it sounded in your head.
- Rate the feeling 0–10 before and after the reframe.
- Ask: what would I say to a friend in this situation?
- Repeat records on the same worry are progress, not failure.

A thought I want to examine this week

The Worry Window Idea

Name: _____ Date: _____

Worries that float all day drain energy without solving anything. A worry window gives them an appointment: 15 minutes, same time each day, pen in hand. Outside the window, note the worry in one line and postpone it. Inside the window, sort each worry into: act now, plan a step, or let it rest.

- Pick a time that is not right before bed.
- Keep the list by you during the day; capture, do not chase.
- End the window by writing one next step or one closing line.
- If a worry returns at night, remind it of its appointment.

My worry window: time and place

Controllables: Sorting the Pile

Name: _____ Date: _____

A lot of stress comes from carrying things you cannot control as if they were tasks. Sorting a problem into three piles — fully mine, partly mine, not mine — frees energy for the first two and helps you set the third down, one line at a time.

- Fully mine: my next email, my bedtime, my reply, my asking for help.
- Partly mine: shared projects, other people's choices I can influence.
- Not mine: the past, the weather, other people's opinions of me.
- For 'not mine' items, write what letting go would look like today.

One 'not mine' item I am carrying

Stress Trigger Log — Sheet 1

Name: _____ Date: _____

Log the moment while it is fresh. Rate stress 1–10. You are collecting clues, not judging yourself.

Time	Trigger / situation	Stress 1–10	What helped, even a little

Pattern I can see

Stress Trigger Log — Sheet 2

Name: _____ Date: _____

Log the moment while it is fresh. Rate stress 1–10. You are collecting clues, not judging yourself.

Time	Trigger / situation	Stress 1–10	What helped, even a little

Pattern I can see

Stress Trigger Log — Sheet 3

Name: _____ Date: _____

Log the moment while it is fresh. Rate stress 1–10. You are collecting clues, not judging yourself.

Time	Trigger / situation	Stress 1–10	What helped, even a little

Pattern I can see

Stress Trigger Log — Sheet 4

Name: _____ Date: _____

Log the moment while it is fresh. Rate stress 1–10. You are collecting clues, not judging yourself.

Time	Trigger / situation	Stress 1–10	What helped, even a little

Pattern I can see

Stress Trigger Log — Sheet 5

Name: _____ Date: _____

Log the moment while it is fresh. Rate stress 1–10. You are collecting clues, not judging yourself.

Time	Trigger / situation	Stress 1–10	What helped, even a little

Pattern I can see

Stress Trigger Log — Sheet 6

Name: _____ Date: _____

Log the moment while it is fresh. Rate stress 1–10. You are collecting clues, not judging yourself.

Time	Trigger / situation	Stress 1–10	What helped, even a little

Pattern I can see

Stress Trigger Log — Sheet 7

Name: _____ Date: _____

Log the moment while it is fresh. Rate stress 1–10. You are collecting clues, not judging yourself.

Time	Trigger / situation	Stress 1–10	What helped, even a little

Pattern I can see

Stress Trigger Log — Sheet 8

Name: _____ Date: _____

Log the moment while it is fresh. Rate stress 1–10. You are collecting clues, not judging yourself.

Time	Trigger / situation	Stress 1–10	What helped, even a little

Pattern I can see

Stress Trigger Log — Sheet 9

Name: _____ Date: _____

Log the moment while it is fresh. Rate stress 1–10. You are collecting clues, not judging yourself.

Time	Trigger / situation	Stress 1–10	What helped, even a little

Pattern I can see

Stress Trigger Log — Sheet 10

Name: _____ Date: _____

Log the moment while it is fresh. Rate stress 1–10. You are collecting clues, not judging yourself.

Time	Trigger / situation	Stress 1–10	What helped, even a little

Pattern I can see

Weekly Stress Scale — Week 1

Name: _____ Date: _____

Once a day, mark your overall stress (1 = very calm, 10 = overwhelmed) and note the peak moment. Weekly averages matter more than single days.

Day	Stress 1–10	Peak moment	Recovery I used
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

What I notice this week

Weekly Stress Scale — Week 2

Name: _____ Date: _____

Once a day, mark your overall stress (1 = very calm, 10 = overwhelmed) and note the peak moment. Weekly averages matter more than single days.

Day	Stress 1–10	Peak moment	Recovery I used
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

What I notice this week

Weekly Stress Scale — Week 3

Name: _____ Date: _____

Once a day, mark your overall stress (1 = very calm, 10 = overwhelmed) and note the peak moment. Weekly averages matter more than single days.

Day	Stress 1–10	Peak moment	Recovery I used
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

What I notice this week

Weekly Stress Scale — Week 4

Name: _____ Date: _____

Once a day, mark your overall stress (1 = very calm, 10 = overwhelmed) and note the peak moment. Weekly averages matter more than single days.

Day	Stress 1–10	Peak moment	Recovery I used
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

What I notice this week

Weekly Stress Scale — Week 5

Name: _____ Date: _____

Once a day, mark your overall stress (1 = very calm, 10 = overwhelmed) and note the peak moment. Weekly averages matter more than single days.

Day	Stress 1–10	Peak moment	Recovery I used
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

What I notice this week

Weekly Stress Scale — Week 6

Name: _____ Date: _____

Once a day, mark your overall stress (1 = very calm, 10 = overwhelmed) and note the peak moment. Weekly averages matter more than single days.

Day	Stress 1–10	Peak moment	Recovery I used
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

What I notice this week

Weekly Stress Scale — Week 7

Name: _____ Date: _____

Once a day, mark your overall stress (1 = very calm, 10 = overwhelmed) and note the peak moment. Weekly averages matter more than single days.

Day	Stress 1–10	Peak moment	Recovery I used
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

What I notice this week

Weekly Stress Scale — Week 8

Name: _____ Date: _____

Once a day, mark your overall stress (1 = very calm, 10 = overwhelmed) and note the peak moment. Weekly averages matter more than single days.

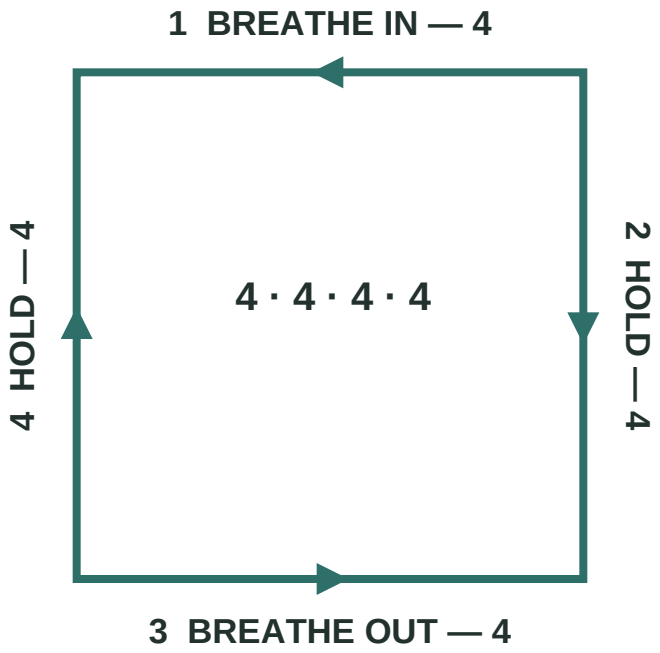
Day	Stress 1–10	Peak moment	Recovery I used
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

What I notice this week

Box Breathing 4-4-4-4 — Practice 1

Name: _____ Date: _____

Box breathing uses four equal counts. Follow the square: breathe in, hold, breathe out, hold — each side is a count of four. Move slowly and stop if you feel dizzy.



My practice rounds (tick one box per round)

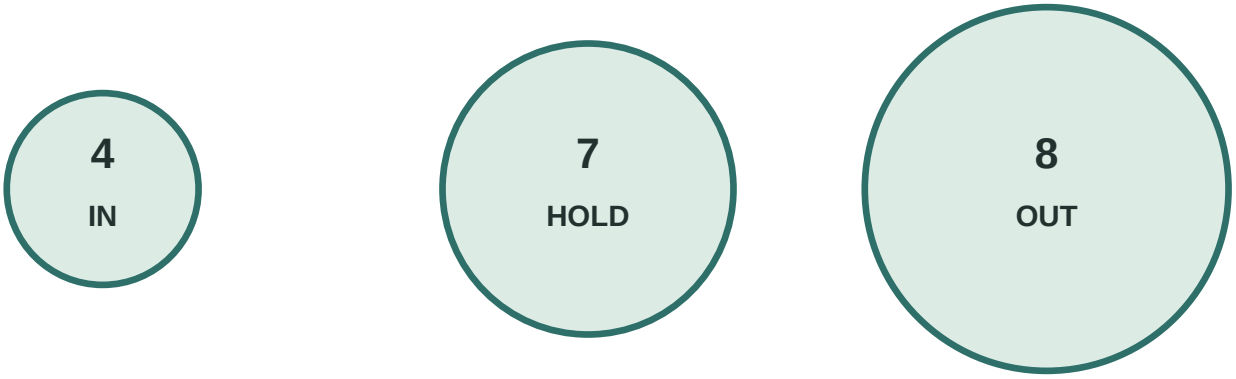
- ☐ Round 1
- ☐ Round 2
- ☐ Round 3
- ☐ Round 4

How I feel afterwards

Breathing 4-7-8 — Practice 1

Name: _____ Date: _____

In this pattern you breathe in for a count of 4, hold for a count of 7, and breathe out slowly for a count of 8. The circles below show the rhythm: small, large, longest. Keep it gentle — comfort matters more than exact counts.



Before and after (circle a number: 1 = tense, 10 = at ease)

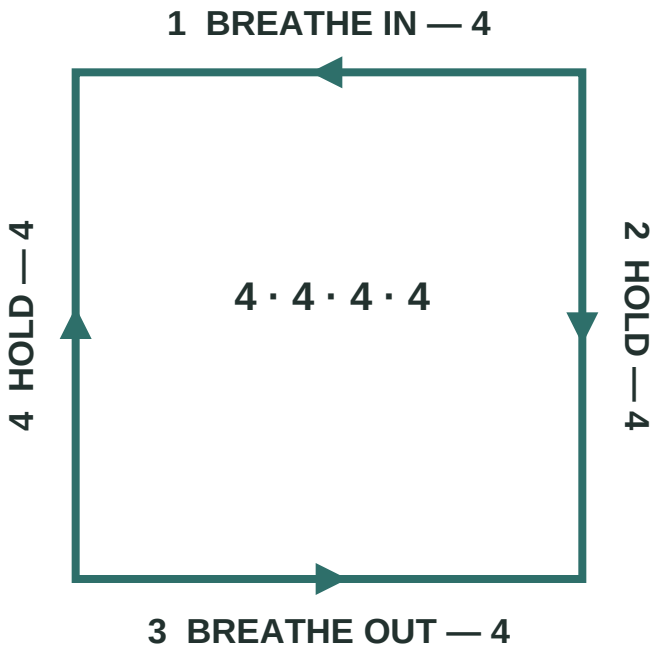
	1	2	3	4	5	6	7	8	9	10
Before										
After										

Notes

Box Breathing 4-4-4-4 — Practice 2

Name: _____ Date: _____

Box breathing uses four equal counts. Follow the square: breathe in, hold, breathe out, hold — each side is a count of four. Move slowly and stop if you feel dizzy.



My practice rounds (tick one box per round)

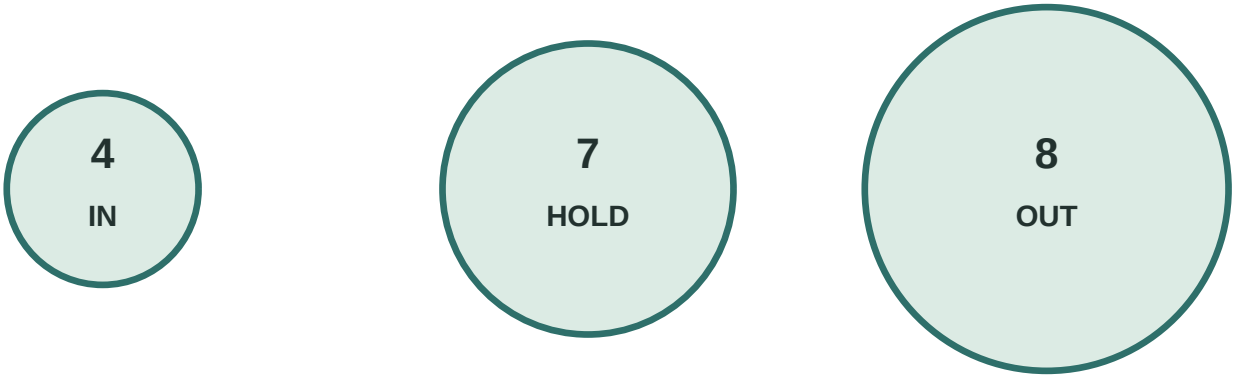
- ☐ Round 1
- ☐ Round 2
- ☐ Round 3
- ☐ Round 4

How I feel afterwards

Breathing 4-7-8 — Practice 2

Name: _____ Date: _____

In this pattern you breathe in for a count of 4, hold for a count of 7, and breathe out slowly for a count of 8. The circles below show the rhythm: small, large, longest. Keep it gentle — comfort matters more than exact counts.



Before and after (circle a number: 1 = tense, 10 = at ease)

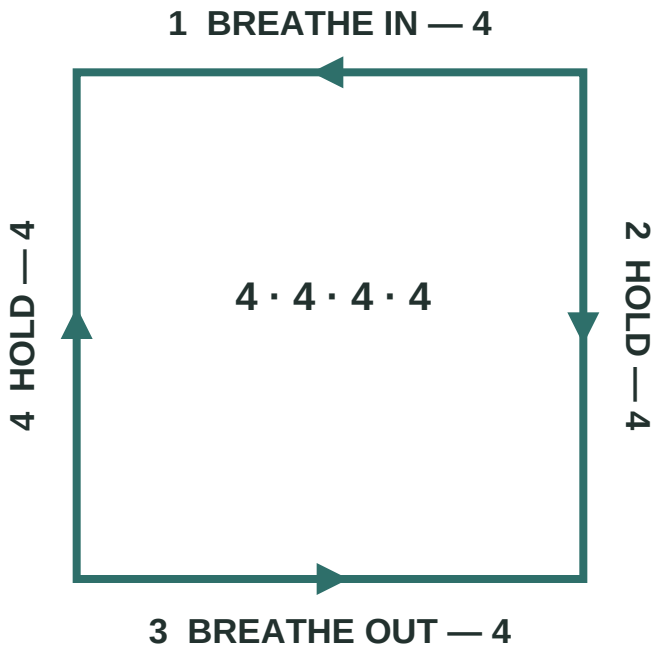
	1	2	3	4	5	6	7	8	9	10
Before										
After										

Notes

Box Breathing 4-4-4-4 — Practice 3

Name: _____ Date: _____

Box breathing uses four equal counts. Follow the square: breathe in, hold, breathe out, hold — each side is a count of four. Move slowly and stop if you feel dizzy.



My practice rounds (tick one box per round)

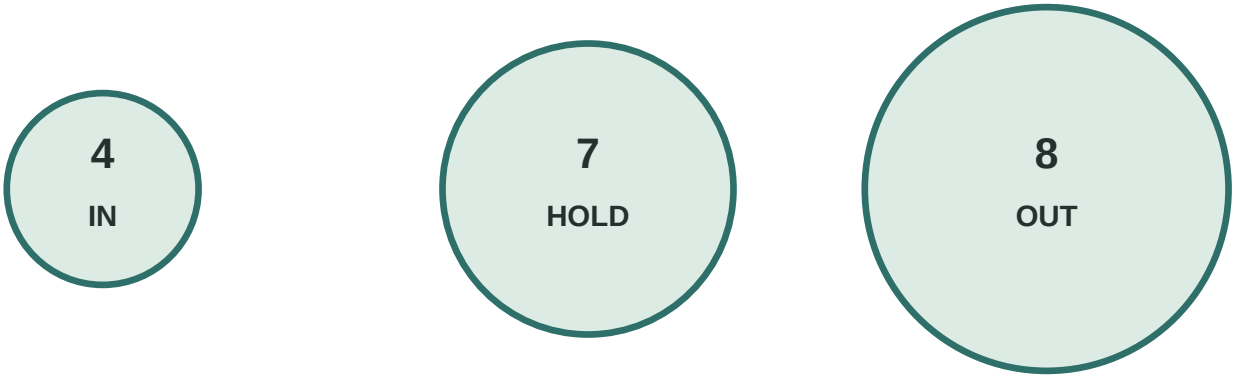
- ☐ Round 1
- ☐ Round 2
- ☐ Round 3
- ☐ Round 4

How I feel afterwards

Breathing 4-7-8 — Practice 3

Name: _____ Date: _____

In this pattern you breathe in for a count of 4, hold for a count of 7, and breathe out slowly for a count of 8. The circles below show the rhythm: small, large, longest. Keep it gentle — comfort matters more than exact counts.



Before and after (circle a number: 1 = tense, 10 = at ease)

	1	2	3	4	5	6	7	8	9	10
Before										
After										

Notes

Thought Record — Sheet 1

Name: _____ Date: _____

Four steps: catch the situation, name the thought and feeling, then write a fairer reframe and re-rate the feeling.

Situation: what happened, where, who was there

Thought: the exact words in my head • Feeling & strength (0–10)

Evidence for and against that thought

Reframe: a fairer version • Feeling now (0–10)

Thought Record — Sheet 2

Name: _____ Date: _____

Four steps: catch the situation, name the thought and feeling, then write a fairer reframe and re-rate the feeling.

Situation: what happened, where, who was there

Thought: the exact words in my head • Feeling & strength (0–10)

Evidence for and against that thought

Reframe: a fairer version • Feeling now (0–10)

Thought Record — Sheet 3

Name: _____ Date: _____

Four steps: catch the situation, name the thought and feeling, then write a fairer reframe and re-rate the feeling.

Situation: what happened, where, who was there

Thought: the exact words in my head • Feeling & strength (0–10)

Evidence for and against that thought

Reframe: a fairer version • Feeling now (0–10)

Thought Record — Sheet 4

Name: _____ Date: _____

Four steps: catch the situation, name the thought and feeling, then write a fairer reframe and re-rate the feeling.

Situation: what happened, where, who was there

Thought: the exact words in my head • Feeling & strength (0–10)

Evidence for and against that thought

Reframe: a fairer version • Feeling now (0–10)

Thought Record — Sheet 5

Name: _____ Date: _____

Four steps: catch the situation, name the thought and feeling, then write a fairer reframe and re-rate the feeling.

Situation: what happened, where, who was there

Thought: the exact words in my head • Feeling & strength (0–10)

Evidence for and against that thought

Reframe: a fairer version • Feeling now (0–10)

Thought Record — Sheet 6

Name: _____ Date: _____

Four steps: catch the situation, name the thought and feeling, then write a fairer reframe and re-rate the feeling.

Situation: what happened, where, who was there

Thought: the exact words in my head • Feeling & strength (0–10)

Evidence for and against that thought

Reframe: a fairer version • Feeling now (0–10)

Thought Record — Sheet 7

Name: _____ Date: _____

Four steps: catch the situation, name the thought and feeling, then write a fairer reframe and re-rate the feeling.

Situation: what happened, where, who was there

Thought: the exact words in my head • Feeling & strength (0–10)

Evidence for and against that thought

Reframe: a fairer version • Feeling now (0–10)

Thought Record — Sheet 8

Name: _____ Date: _____

Four steps: catch the situation, name the thought and feeling, then write a fairer reframe and re-rate the feeling.

Situation: what happened, where, who was there

Thought: the exact words in my head • Feeling & strength (0–10)

Evidence for and against that thought

Reframe: a fairer version • Feeling now (0–10)

Thought Record — Sheet 9

Name: _____ Date: _____

Four steps: catch the situation, name the thought and feeling, then write a fairer reframe and re-rate the feeling.

Situation: what happened, where, who was there

Thought: the exact words in my head • Feeling & strength (0–10)

Evidence for and against that thought

Reframe: a fairer version • Feeling now (0–10)

Thought Record — Sheet 10

Name: _____ Date: _____

Four steps: catch the situation, name the thought and feeling, then write a fairer reframe and re-rate the feeling.

Situation: what happened, where, who was there

Thought: the exact words in my head • Feeling & strength (0–10)

Evidence for and against that thought

Reframe: a fairer version • Feeling now (0–10)

Worry Window — Session 1

Name: _____ Date: _____

Use only during your worry window (about 15 minutes). Sort every worry: act now, plan a step, or let it rest.

Worry 1 — act / plan / rest? Next step:

Worry 2 — act / plan / rest? Next step:

Worry 3 — act / plan / rest? Next step:

Closing line: the window is over; the rest can wait until tomorrow

Worry Window — Session 2

Name: _____ Date: _____

Use only during your worry window (about 15 minutes). Sort every worry: act now, plan a step, or let it rest.

Worry 1 — act / plan / rest? Next step:

Worry 2 — act / plan / rest? Next step:

Worry 3 — act / plan / rest? Next step:

Closing line: the window is over; the rest can wait until tomorrow

Worry Window — Session 3

Name: _____ Date: _____

Use only during your worry window (about 15 minutes). Sort every worry: act now, plan a step, or let it rest.

Worry 1 — act / plan / rest? Next step:

Worry 2 — act / plan / rest? Next step:

Worry 3 — act / plan / rest? Next step:

Closing line: the window is over; the rest can wait until tomorrow

Worry Window — Session 4

Name: _____ Date: _____

Use only during your worry window (about 15 minutes). Sort every worry: act now, plan a step, or let it rest.

Worry 1 — act / plan / rest? Next step:

Worry 2 — act / plan / rest? Next step:

Worry 3 — act / plan / rest? Next step:

Closing line: the window is over; the rest can wait until tomorrow

Worry Window — Session 5

Name: _____ Date: _____

Use only during your worry window (about 15 minutes). Sort every worry: act now, plan a step, or let it rest.

Worry 1 — act / plan / rest? Next step:

Worry 2 — act / plan / rest? Next step:

Worry 3 — act / plan / rest? Next step:

Closing line: the window is over; the rest can wait until tomorrow

Worry Window — Session 6

Name: _____ Date: _____

Use only during your worry window (about 15 minutes). Sort every worry: act now, plan a step, or let it rest.

Worry 1 — act / plan / rest? Next step:

Worry 2 — act / plan / rest? Next step:

Worry 3 — act / plan / rest? Next step:

Closing line: the window is over; the rest can wait until tomorrow

Worry Window — Session 7

Name: _____ Date: _____

Use only during your worry window (about 15 minutes). Sort every worry: act now, plan a step, or let it rest.

Worry 1 — act / plan / rest? Next step:

Worry 2 — act / plan / rest? Next step:

Worry 3 — act / plan / rest? Next step:

Closing line: the window is over; the rest can wait until tomorrow

Worry Window — Session 8

Name: _____ Date: _____

Use only during your worry window (about 15 minutes). Sort every worry: act now, plan a step, or let it rest.

Worry 1 — act / plan / rest? Next step:

Worry 2 — act / plan / rest? Next step:

Worry 3 — act / plan / rest? Next step:

Closing line: the window is over; the rest can wait until tomorrow

Controllables vs Not — Sheet 1

Name: _____ Date: _____

Write the problem once at the top. Then sort its parts honestly. Spend your energy on the first two columns; practise setting the third down.

The problem, in one line

Fully mine	Partly mine	Not mine

My next step from the 'fully mine' column

Controllables vs Not — Sheet 2

Name: _____ Date: _____

Write the problem once at the top. Then sort its parts honestly. Spend your energy on the first two columns; practise setting the third down.

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The problem, in one line

Fully mine	Partly mine	Not mine

My next step from the 'fully mine' column

Grounding 5-4-3-2-1 — Sheet 1

Name: _____ Date: _____

Use your senses to come back to the room you are in. Go slowly, one sense at a time, and write down what you notice. There are no right answers.

5 things I can SEE

4 things I can TOUCH

3 things I can HEAR

2 things I can SMELL

1 thing I can TASTE

How settled do I feel now (1–10)? _____

Grounding 5-4-3-2-1 — Sheet 2

Name: _____ Date: _____

Use your senses to come back to the room you are in. Go slowly, one sense at a time, and write down what you notice. There are no right answers.

5 things I can SEE

4 things I can TOUCH

3 things I can HEAR

2 things I can SMELL

1 thing I can TASTE

How settled do I feel now (1–10)? _____

Grounding 5-4-3-2-1 — Sheet 3

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1 thing I can TASTE

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2 things I can SMELL

1 thing I can TASTE

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Name: _____ Date: _____

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3 things I can HEAR

2 things I can SMELL

1 thing I can TASTE

How settled do I feel now (1–10)? _____

Grounding 5-4-3-2-1 — Sheet 6

Name: _____ Date: _____

Use your senses to come back to the room you are in. Go slowly, one sense at a time, and write down what you notice. There are no right answers.

5 things I can SEE

4 things I can TOUCH

3 things I can HEAR

2 things I can SMELL

1 thing I can TASTE

How settled do I feel now (1–10)? _____

Stress Review & Action Plan — Sheet 1

Name: _____ Date: _____

Turn a week of logs into one small plan. Small and done beats big and postponed.

My biggest trigger this week, from my logs

What helped most, even a little

One boundary, request or change I will make

My recovery plan for next week (daily, small)

Stress Review & Action Plan — Sheet 2

Name: _____ Date: _____

Turn a week of logs into one small plan. Small and done beats big and postponed.

My biggest trigger this week, from my logs

What helped most, even a little

One boundary, request or change I will make

My recovery plan for next week (daily, small)

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What helped most, even a little

One boundary, request or change I will make

My recovery plan for next week (daily, small)

Stress Review & Action Plan — Sheet 6

Name: _____ Date: _____

Turn a week of logs into one small plan. Small and done beats big and postponed.

My biggest trigger this week, from my logs

What helped most, even a little

One boundary, request or change I will make

My recovery plan for next week (daily, small)

Stress Review & Action Plan — Sheet 7

Name: _____ Date: _____

Turn a week of logs into one small plan. Small and done beats big and postponed.

My biggest trigger this week, from my logs

What helped most, even a little

One boundary, request or change I will make

My recovery plan for next week (daily, small)

Stress Review & Action Plan — Sheet 8

Name: _____ Date: _____

Turn a week of logs into one small plan. Small and done beats big and postponed.

My biggest trigger this week, from my logs

What helped most, even a little

One boundary, request or change I will make

My recovery plan for next week (daily, small)

Stress Review & Action Plan — Sheet 9

Name: _____ Date: _____

Turn a week of logs into one small plan. Small and done beats big and postponed.

My biggest trigger this week, from my logs

What helped most, even a little

One boundary, request or change I will make

My recovery plan for next week (daily, small)

Calm Habits Pack

Small daily habits that make calm days more likely.

- Habit trackers (weekly & monthly)
- Mood trackers
- Gratitude & evening review pages
- Calm day planners

How to Use the Calm Habits Pack

Name: _____ Date: _____

Habits grow from cues, not willpower: same time, same place, tiny step. Track a habit for a week before deciding it does not work. Missed a day? Mark it honestly and continue the next day — a streak is a tool, never a judge.

- Start with one or two habits, not ten.
- Make the first step so small it feels easy: two minutes counts.
- Tick the tracker right after the habit, while you remember.
- Review weekly: keep, shrink, swap or drop each habit.

My first two calm habits

Mood Tracking, Simply

Name: _____ Date: _____

A mood tracker is a weather log for your inner climate: one or two marks a day, plus a word or two about what was happening. After a few weeks you will see links between mood, sleep, people, movement and work that memory alone would miss.

- Rate mood 1–10, morning and evening if you can.
- Add one word: tired, steady, bright, flat, hopeful.
- Do not chase perfect scores; look for patterns.
- Share the tracker with a professional if you ever discuss mood with one.

What I hope my tracker will show me

Gratitude That Feels Real

Name: _____ Date: _____

Gratitude pages work best when they are specific and small: the exact sentence someone said, the light at breakfast, a task finally finished. Forced cheerfulness does not help; honest noticing does. Three lines a day is a complete practice.

- Be specific: name the person, moment or thing.
- Small counts: warm socks and finished emails qualify.
- Repeat entries are fine — some goods are daily goods.
- Re-read old pages on flat days; they are evidence, not slogans.

Three specific goods from today

Weekly Habit Tracker — Week 1

Name: _____ Date: _____

Write your habits in the first column. Tick each day you do the habit — or mark a dot for a smaller, partial version. Partial counts.

Habit	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Habit 1							
Habit 2							
Habit 3							
Habit 4							
Habit 5							

What I notice this week

Weekly Habit Tracker — Week 2

Name: _____ Date: _____

Write your habits in the first column. Tick each day you do the habit — or mark a dot for a smaller, partial version. Partial counts.

Habit	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Habit 1							
Habit 2							
Habit 3							
Habit 4							
Habit 5							

What I notice this week

Weekly Habit Tracker — Week 3

Name: _____ Date: _____

Write your habits in the first column. Tick each day you do the habit — or mark a dot for a smaller, partial version. Partial counts.

Habit	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Habit 1							
Habit 2							
Habit 3							
Habit 4							
Habit 5							

What I notice this week

Weekly Habit Tracker — Week 4

Name: _____ Date: _____

Write your habits in the first column. Tick each day you do the habit — or mark a dot for a smaller, partial version. Partial counts.

Habit	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Habit 1							
Habit 2							
Habit 3							
Habit 4							
Habit 5							

What I notice this week

Weekly Habit Tracker — Week 5

Name: _____ Date: _____

Write your habits in the first column. Tick each day you do the habit — or mark a dot for a smaller, partial version. Partial counts.

Habit	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Habit 1							
Habit 2							
Habit 3							
Habit 4							
Habit 5							

What I notice this week

Weekly Habit Tracker — Week 6

Name: _____ Date: _____

Write your habits in the first column. Tick each day you do the habit — or mark a dot for a smaller, partial version. Partial counts.

Habit	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Habit 1							
Habit 2							
Habit 3							
Habit 4							
Habit 5							

What I notice this week

Weekly Habit Tracker — Week 7

Name: _____ Date: _____

Write your habits in the first column. Tick each day you do the habit — or mark a dot for a smaller, partial version. Partial counts.

Habit	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Habit 1							
Habit 2							
Habit 3							
Habit 4							
Habit 5							

What I notice this week

Weekly Habit Tracker — Week 8

Name: _____ Date: _____

Write your habits in the first column. Tick each day you do the habit — or mark a dot for a smaller, partial version. Partial counts.

Habit	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Habit 1							
Habit 2							
Habit 3							
Habit 4							
Habit 5							

What I notice this week

Weekly Habit Tracker — Week 9

Name: _____ Date: _____

Write your habits in the first column. Tick each day you do the habit — or mark a dot for a smaller, partial version. Partial counts.

Habit	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Habit 1							
Habit 2							
Habit 3							
Habit 4							
Habit 5							

What I notice this week

Weekly Habit Tracker — Week 10

Name: _____ Date: _____

Write your habits in the first column. Tick each day you do the habit — or mark a dot for a smaller, partial version. Partial counts.

Habit	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Habit 1							
Habit 2							
Habit 3							
Habit 4							
Habit 5							

What I notice this week

Monthly Habit Tracker — Month 1

Name: _____ Date: _____

One habit per row, one column per day (1–30). Shade or tick each day you do it. At month end, count the ticks — that number, not perfection, is your baseline to beat gently next month.

Habit	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Habit 1																														
Habit 2																														
Habit 3																														
Habit 4																														

Ticks this month: _____ **Habit to keep / shrink / swap next month:**

Monthly Habit Tracker — Month 2

Name: _____ Date: _____

One habit per row, one column per day (1–30). Shade or tick each day you do it. At month end, count the ticks — that number, not perfection, is your baseline to beat gently next month.

Habit	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Habit 1																														
Habit 2																														
Habit 3																														
Habit 4																														

Ticks this month: _____ **Habit to keep / shrink / swap next month:**

Monthly Habit Tracker — Month 3

Name: _____ Date: _____

One habit per row, one column per day (1–30). Shade or tick each day you do it. At month end, count the ticks — that number, not perfection, is your baseline to beat gently next month.

Habit	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Habit 1																														
Habit 2																														
Habit 3																														
Habit 4																														

Ticks this month: _____ **Habit to keep / shrink / swap next month:**

Monthly Habit Tracker — Month 4

Name: _____ Date: _____

One habit per row, one column per day (1–30). Shade or tick each day you do it. At month end, count the ticks — that number, not perfection, is your baseline to beat gently next month.

Habit	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Habit 1																														
Habit 2																														
Habit 3																														
Habit 4																														

Ticks this month: _____ **Habit to keep / shrink / swap next month:**

Mood Tracker — Sheet 1

Name: _____ Date: _____

One row per day. Rate mood 1–10, add energy 1–10, and one word or short note about the day.

Day / date	Mood 1–10	Energy 1–10	One word / note
Day 1			
Day 2			
Day 3			
Day 4			
Day 5			
Day 6			
Day 7			

What I notice this week

Mood Tracker — Sheet 2

Name: _____ Date: _____

One row per day. Rate mood 1–10, add energy 1–10, and one word or short note about the day.

Day / date	Mood 1–10	Energy 1–10	One word / note
Day 1			
Day 2			
Day 3			
Day 4			
Day 5			
Day 6			
Day 7			

What I notice this week

Mood Tracker — Sheet 3

Name: _____ Date: _____

One row per day. Rate mood 1–10, add energy 1–10, and one word or short note about the day.

Day / date	Mood 1–10	Energy 1–10	One word / note
Day 1			
Day 2			
Day 3			
Day 4			
Day 5			
Day 6			
Day 7			

What I notice this week

Mood Tracker — Sheet 4

Name: _____ Date: _____

One row per day. Rate mood 1–10, add energy 1–10, and one word or short note about the day.

Day / date	Mood 1–10	Energy 1–10	One word / note
Day 1			
Day 2			
Day 3			
Day 4			
Day 5			
Day 6			
Day 7			

What I notice this week

Mood Tracker — Sheet 5

Name: _____ Date: _____

One row per day. Rate mood 1–10, add energy 1–10, and one word or short note about the day.

Day / date	Mood 1–10	Energy 1–10	One word / note
Day 1			
Day 2			
Day 3			
Day 4			
Day 5			
Day 6			
Day 7			

What I notice this week

Mood Tracker — Sheet 6

Name: _____ Date: _____

One row per day. Rate mood 1–10, add energy 1–10, and one word or short note about the day.

Day / date	Mood 1–10	Energy 1–10	One word / note
Day 1			
Day 2			
Day 3			
Day 4			
Day 5			
Day 6			
Day 7			

What I notice this week

Mood Tracker — Sheet 7

Name: _____ Date: _____

One row per day. Rate mood 1–10, add energy 1–10, and one word or short note about the day.

Day / date	Mood 1–10	Energy 1–10	One word / note
Day 1			
Day 2			
Day 3			
Day 4			
Day 5			
Day 6			
Day 7			

What I notice this week

Mood Tracker — Sheet 8

Name: _____ Date: _____

One row per day. Rate mood 1–10, add energy 1–10, and one word or short note about the day.

Day / date	Mood 1–10	Energy 1–10	One word / note
Day 1			
Day 2			
Day 3			
Day 4			
Day 5			
Day 6			
Day 7			

What I notice this week

Gratitude Page — Sheet 1

Name: _____ Date: _____

Three specific goods from today — small is perfect. Then one good thing about a person, and one about yourself, if you can find them.

Good thing 1

Good thing 2

Good thing 3

A person I am glad exists, and why

Something I did well recently

Gratitude Page — Sheet 2

Name: _____ Date: _____

Three specific goods from today — small is perfect. Then one good thing about a person, and one about yourself, if you can find them.

Good thing 1

Good thing 2

Good thing 3

A person I am glad exists, and why

Something I did well recently

Gratitude Page — Sheet 3

Name: _____ Date: _____

Three specific goods from today — small is perfect. Then one good thing about a person, and one about yourself, if you can find them.

Good thing 1

Good thing 2

Good thing 3

A person I am glad exists, and why

Something I did well recently

Gratitude Page — Sheet 4

Name: _____ Date: _____

Three specific goods from today — small is perfect. Then one good thing about a person, and one about yourself, if you can find them.

Good thing 1

Good thing 2

Good thing 3

A person I am glad exists, and why

Something I did well recently

Gratitude Page — Sheet 5

Name: _____ Date: _____

Three specific goods from today — small is perfect. Then one good thing about a person, and one about yourself, if you can find them.

Good thing 1

Good thing 2

Good thing 3

A person I am glad exists, and why

Something I did well recently

Gratitude Page — Sheet 6

Name: _____ Date: _____

Three specific goods from today — small is perfect. Then one good thing about a person, and one about yourself, if you can find them.

Good thing 1

Good thing 2

Good thing 3

A person I am glad exists, and why

Something I did well recently

Gratitude Page — Sheet 7

Name: _____ Date: _____

Three specific goods from today — small is perfect. Then one good thing about a person, and one about yourself, if you can find them.

Good thing 1

Good thing 2

Good thing 3

A person I am glad exists, and why

Something I did well recently

Gratitude Page — Sheet 8

Name: _____ Date: _____

Three specific goods from today — small is perfect. Then one good thing about a person, and one about yourself, if you can find them.

Good thing 1

Good thing 2

Good thing 3

A person I am glad exists, and why

Something I did well recently

Gratitude Page — Sheet 9

Name: _____ Date: _____

Three specific goods from today — small is perfect. Then one good thing about a person, and one about yourself, if you can find them.

Good thing 1

Good thing 2

Good thing 3

A person I am glad exists, and why

Something I did well recently

Gratitude Page — Sheet 10

Name: _____ Date: _____

Three specific goods from today — small is perfect. Then one good thing about a person, and one about yourself, if you can find them.

Good thing 1

Good thing 2

Good thing 3

A person I am glad exists, and why

Something I did well recently

Evening Review — Sheet 1

Name: _____ Date: _____

Five minutes at the end of the day. Close the day on paper so the mind can close it too.

Three things that happened today (facts only)

One thing I handled well

One thing to park until tomorrow (write it, then leave it)

Tomorrow's single most important thing

Evening Review — Sheet 2

Name: _____ Date: _____

Five minutes at the end of the day. Close the day on paper so the mind can close it too.

Three things that happened today (facts only)

One thing I handled well

One thing to park until tomorrow (write it, then leave it)

Tomorrow's single most important thing

Evening Review — Sheet 3

Name: _____ Date: _____

Five minutes at the end of the day. Close the day on paper so the mind can close it too.

Three things that happened today (facts only)

One thing I handled well

One thing to park until tomorrow (write it, then leave it)

Tomorrow's single most important thing

Evening Review — Sheet 4

Name: _____ Date: _____

Five minutes at the end of the day. Close the day on paper so the mind can close it too.

Three things that happened today (facts only)

One thing I handled well

One thing to park until tomorrow (write it, then leave it)

Tomorrow's single most important thing

Evening Review — Sheet 5

Name: _____ Date: _____

Five minutes at the end of the day. Close the day on paper so the mind can close it too.

Three things that happened today (facts only)

One thing I handled well

One thing to park until tomorrow (write it, then leave it)

Tomorrow's single most important thing

Evening Review — Sheet 6

Name: _____ Date: _____

Five minutes at the end of the day. Close the day on paper so the mind can close it too.

Three things that happened today (facts only)

One thing I handled well

One thing to park until tomorrow (write it, then leave it)

Tomorrow's single most important thing

Weekly Reflection — Week 1

Name: _____ Date: _____

Look back at this week's trackers before you answer. Evidence first, impressions second.

What gave me energy this week

What drained me this week

A pattern across my mood and habit trackers

Next week: keep / shrink / swap / drop

Weekly Reflection — Week 2

Name: _____ Date: _____

Look back at this week's trackers before you answer. Evidence first, impressions second.

What gave me energy this week

What drained me this week

A pattern across my mood and habit trackers

Next week: keep / shrink / swap / drop

Weekly Reflection — Week 3

Name: _____ Date: _____

Look back at this week's trackers before you answer. Evidence first, impressions second.

What gave me energy this week

What drained me this week

A pattern across my mood and habit trackers

Next week: keep / shrink / swap / drop

Weekly Reflection — Week 4

Name: _____ Date: _____

Look back at this week's trackers before you answer. Evidence first, impressions second.

What gave me energy this week

What drained me this week

A pattern across my mood and habit trackers

Next week: keep / shrink / swap / drop

Weekly Reflection — Week 5

Name: _____ Date: _____

Look back at this week's trackers before you answer. Evidence first, impressions second.

What gave me energy this week

What drained me this week

A pattern across my mood and habit trackers

Next week: keep / shrink / swap / drop

Weekly Reflection — Week 6

Name: _____ Date: _____

Look back at this week's trackers before you answer. Evidence first, impressions second.

What gave me energy this week

What drained me this week

A pattern across my mood and habit trackers

Next week: keep / shrink / swap / drop

Plan a Calm Day — Planner 1

Name: _____ Date: _____

Design one day on purpose: protect the anchors first (wake, food, movement, rest), then fit tasks around them — not the other way round.

Step	My plan
Wake time & morning light	
Movement (what & when)	
Deep-work / main task block	
Food & breaks	
People & connection	
Evening wind-down start	

If the day goes sideways, my minimum calm version is

Plan a Calm Day — Planner 2

Name: _____ Date: _____

Design one day on purpose: protect the anchors first (wake, food, movement, rest), then fit tasks around them — not the other way round.

Step	My plan
Wake time & morning light	
Movement (what & when)	
Deep-work / main task block	
Food & breaks	
People & connection	
Evening wind-down start	

If the day goes sideways, my minimum calm version is

Plan a Calm Day — Planner 3

Name: _____ Date: _____

Design one day on purpose: protect the anchors first (wake, food, movement, rest), then fit tasks around them — not the other way round.

Step	My plan
Wake time & morning light	
Movement (what & when)	
Deep-work / main task block	
Food & breaks	
People & connection	
Evening wind-down start	

If the day goes sideways, my minimum calm version is

Plan a Calm Day — Planner 4

Name: _____ Date: _____

Design one day on purpose: protect the anchors first (wake, food, movement, rest), then fit tasks around them — not the other way round.

Step	My plan
Wake time & morning light	
Movement (what & when)	
Deep-work / main task block	
Food & breaks	
People & connection	
Evening wind-down start	

If the day goes sideways, my minimum calm version is

Plan a Calm Day — Planner 5

Name: _____ Date: _____

Design one day on purpose: protect the anchors first (wake, food, movement, rest), then fit tasks around them — not the other way round.

Step	My plan
Wake time & morning light	
Movement (what & when)	
Deep-work / main task block	
Food & breaks	
People & connection	
Evening wind-down start	

If the day goes sideways, my minimum calm version is

Plan a Calm Day — Planner 6

Name: _____ Date: _____

Design one day on purpose: protect the anchors first (wake, food, movement, rest), then fit tasks around them — not the other way round.

Step	My plan
Wake time & morning light	
Movement (what & when)	
Deep-work / main task block	
Food & breaks	
People & connection	
Evening wind-down start	

If the day goes sideways, my minimum calm version is

Plan a Calm Day — Planner 7

Name: _____ Date: _____

Design one day on purpose: protect the anchors first (wake, food, movement, rest), then fit tasks around them — not the other way round.

Step	My plan
Wake time & morning light	
Movement (what & when)	
Deep-work / main task block	
Food & breaks	
People & connection	
Evening wind-down start	

If the day goes sideways, my minimum calm version is

Keep Going!

Finished the pack? Here is what to do next:

1) Claim your FREE mini gift pack

A complete mini whodunit case, free on our hub gift page — new free packs land there first.

Claim Your Free Gift

https://puzzlepouttalon-hub.pages.dev/gift/?src=pdf-gift

2) More ready-to-print packs from Puzzle Pout Talon

Whodunit Detective Puzzle Pack v2

100 ready-to-print detective mystery puzzles with full answer keys.

View on the Hub ->

AI KDP Master-Pack

A 12-volume printable puzzle collection for KDP publishers, with full answers.

View on the Hub ->

Cold Case Detective Studio

Printable cold-case files: evidence sheets, suspect profiles and case puzzles.

View on the Hub ->

AI KDP Prompt Pack - 500 Prompts

500 ready-to-use ChatGPT prompts for creating KDP activity and puzzle books.

View on the Hub ->

Mythic Creature Atlas & Lore Pack

A printable field-guide atlas of mythical creatures — maps, lore, activities.

View on the Hub ->

3) Everything else lives on our official hub

Browse the Full Catalog on the Hub

https://puzzlepouttalon-hub.pages.dev/?src=pdf-calmmind

Support, any time: puzzle-pout-talon@duck.com

Thank you for learning with us — see you in the next pack!