

Operation Goddess

GODDESS ASSESSMENT WORKSHEET

Name:

Date:

Give each section a satisfaction rating out of 10. Note down any goals or desires you have for each section. Anything below an 8 needs your love, attention and focus, which you can give it via your Operation Goddess session planner & timetable.

Body Weight

/10

Body Confidence

/10

Healthy Eating & Nourishing Food

/10

Fitness & Movement

/10

Self Love & Feeling Worthy

/10

Anxiety & Stress

/10

Feeling Beautiful

/10

Aging

/10

Sex & Pleasure

/10

Life Moving Forward

/10

Self-Care & Self-Kindness

/10

Clothes & Fashion

/10

Skin Care & Beauty Treatments

/10

Sleep & Rest

/10

