Action Commitment Worksheet

NAME DATE **Outcome goal Behavior goal** Chosen skill Chosen small daily action(s) **Chosen practice** How confident are you in your ability to do the chosen daily action(s)? 100% CONFIDENT I CAN DO IT CAN'T DO IT AT ALL What might make you more confident in your ability to do the chosen daily action(s)? Revise small daily action(s) If confidence scores less than 9/10, discuss smaller, simpler or easier small daily action(s) Revised small daily action(s) How confident are you in your ability to do the chosen daily action(s)? 100% CONFIDENT I CAN'T DO IT

Clarify, confirm, and prepare

How, and how often, will you measure progress towards the outcome goal? (I.e., what are you tracking, how often, and how will you know if you're moving forward on your outcome goal?)
How, and how often, will you measure progress on behavior goal(s) and/or action(s)? (I.e., what are you tracking, how often, and how will you know if you're moving forward on your action(s) and behavior goal(s)?)
What will help you do the action(s)? (E.g., skills, resources, supports, etc.)
Looking forward to the next few weeks, what challenges are likely to come up?
What planning, preparation and/or adjustments, if any, will you need to make to work through those challenges?
Who else needs to know about the action(s)?

Action Commitment Worksheet

John Doe June 14, 2020

NAME DATE

Outcome goal

Build muscle

Behavior goal

Support my recovery outside the gym with great nutrition every day.

Chosen skill

Eat enough nutrients

Chosen practice

Eat enough protein

Chosen small daily action(s)

Make and drink a Super Shake every day

Have Greek yogurt at my work lunch with my sandwich, every day

How confident are you in your ability to do the chosen daily action(s)?

CAN'T DO IT AT ALL



















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100% CONFIDENT I CAN DO IT

What might make you more confident in your ability to do the chosen daily action(s)?

Only doing these actions 5 days per week, and having a clearer portion size for Greek yogurt

Revise small daily action(s)

If confidence scores less than 9/10, discuss smaller, simpler or easier small daily action(s)

Revised small daily action(s)

Drinking the Super Shake 5 out of 7 days per week

Having ~1 cup (225 g) of plain Greek yogurt at 4 of my 5 work lunches

How confident are you in your ability to do the chosen daily action(s)?

CAN'T DO IT AT ALL





















100% CONFIDENT I CAN DO IT

Clarify, confirm, and prepare

How, and how often, will you measure progress towards the outcome goal? (I.e., what are you tracking, how often, and how will you know if you're moving forward on your outcome goal?)

Measure body composition monthly to show change in lean body mass.

How, and how often, will you measure progress on behavior goal(s) and/or action(s)? (I.e., what are you tracking, how often, and how will you know if you're moving forward on your action(s) and behavior goal(s)?)

Daily: Track specified actions using ProCoach app Weekly: Review assigned actions to identify what is working and what might need adjustment, or additional support and guidance from coach to execute

What will help you do the action(s)? (E.g., skills, resources, supports, etc.)

I already loosely plan many of my weekly meals, I like many different protein sources, and I know how to cook many of them too

Looking forward to the next few weeks, what challenges are likely to come up?

I have a bachelor party weekend in a few days where getting in protein regularly will not be as easy

What planning, preparation and/or adjustments, if any, will you need to make to work through those challenges?

I will bring protein powder to make a daily protein shake even if I can't make a true Super Shake. I will also bring some tofu to grill along with some eggs and Greek yogurt for breakfast and snacks. And I will aim for progress, not perfection!

Who else needs to know about the action(s)?

I'm going to let my partner know what the plan is, so she can be aware of my goals and intended actions