

PTIQ POWER PLANNING WAY OF THE PROPERTY OF THE

90-DAY REVIEW



DATE: _____

#	QUESTION	YOUR REVIEW
1.	What are your wins; personally, professionally, physically, emotionally?	
2.	How do these wins make you feel?	
3.	What are your lessons from the last 90 days?	
4.	Taking each lesson, how can you look at it to take something from it? What has it taught/is it teaching you?	
5.	What are you going to do to solve the lessons?	

90-DAY PROJECTION DATE:

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#	QUESTION	YOUR REVIEW
1.	What is your 1 primary goal?	
2.	Concerning your goal, how does look/feeling better, being healthier, having more energy and more confidence help that?	
3.	ls your goal realistic?	
4.	Are you willing to do what's required to achieve it?	
5.	What 1 key habit do you need to lock in over the next 90 days to accomplish your goal?	
6.	How confident are you that you will achieve this? Certain/Possibly/Uncertain	
7.	If not certain, how can we alter the goal so that you are certain?	
8.	What other habits will help increase your certainty?	

THE NEXT 30 DAYS

PTIQ

	DATE:	PTIC TRAINSMART
	YOUR REVIEW	
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#	QUESTION	YOUR REVIEW
1.	How do you feel about your body/health/ fitness? Great/Pleased but can up it/ Not great.	
2.	How committed have you been for the last 30 days? Very committed/Comfort Zone/Very Inconsistent.	
3.	What are you choosing to allow to get in the way? E.g. work, people, stories, environment, emotions, circumstances.	
4.	Do you journal/write commitments statements or affirmations?	
5.	Do you plan your week and your day?	
6.	What are you doing now and have done for the past 30 days that seemed difficult when you started but now you're in control?	

LOOKING FORWARD

#	QUESTION	YOUR REVIEW
1.	What is your goal for the next 30 days (this should help towards achieving your 90-day goal)?	
2.	What is the motivation behind this goal?	
3.	What process/habit will you commit to locking in over the 30 days?	

SETTING STANDARDS DATE:



PROCESS	CURRENT STANDARD	NEW STANDARD	FOCUS AREA
Training			
Food	calories	calories	
Food Quality	/10	/10	
Steps	per week	per week	
Water	L per day	L per day	
Sleep	hours per night	hours per night	
Planning			
State Management			

From what you've written here, what stands out for you?	
Does this tie in with your 90 day habit?	
What challenges will you face in the next 30 days?	
What anti-fail measures can you apply?	





DATE:	

FOCUS AREA	RATING (1-10)	STRENGTHS	FRUSTRATIONS	COMMENTS
MINDSET				
BODY				
FAMILY & RELATIONSHIPS				
MONEY & FINANCES				
TIME & FREEDOM				

90 DAY PROJECT #1 DATE:____



FOCUS		
Purpose - What do you want to accomplish?	Result - What does the dream result look like?	
Consequence - What are the consequences of not completing this?	Anti-Fail - What challenges do you anticipate?	

ACTION STEPS - WHAT ARE THE KEY PIECES?			
1.	2.	3.	
4.	5.	6.	
		-	

90 DAY PROJECT #2



DATE:

FOCUS		
Purpose - What do you want to accomplish?	Result - What does the dream result look like?	
Consequence - What are the consequences of not completing this?	Anti-Fail - What challenges do you anticipate?	

ACTION STEPS - WHAT ARE THE KEY PIECES?			
1.	2.	3.	
4.	5.	6.	
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90 DAY PROJECT #3 DATE:_____



FOCUS		
Purpose - What do you want to accomplish?	Result - What does the dream result look like?	
Consequence - What are the consequences of not completing this?	Anti-Fail - What challenges do you anticipate?	

ACTION STEPS - WHAT ARE THE KEY PIECES?			
1.	2.	3.	
4.	5.	6.	





DATE: _____

METRICS	THE NEXT 90 DAYS
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REWARDS & COMMITMENT DATE:



#	QUESTION	YOUR REVIEW
1.	How will I have fun this month?	
2.	How will I reward myself when I hit my 90-day goal?	

COMMITMENT STATEMENT/AFFIRMATION		



CONTACT US



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SOCIAL MEDIA



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