

# WHEEL OF LIFE



**MENTAL HEALTH  
DAILY STRESS &  
PERSONAL LIFE  
REFLECTION SURVEY**



## WHEEL OF LIFE

Stress, Health, & Life - Survey Questions

name: \_\_\_\_\_

**Directions:** This survey is to assess where you are at in life, give you encouragement where you are succeeding, and shed a light on areas for improvement. Be honest and truthful with yourself to gain the most accurate results. Use these questions and the scores received, to complete the "Wheel of Life" on the final page.

	Physical	Low to High
1	I exercise to a sweat at least 3x a week for 20 minutes. I am in shape.	1 2 3 4 5
2	I eat a full healthy breakfast every day.	1 2 3 4 5
3	I drink at least 8 glasses of water each day. I do not drink more than 1 caffeinated or carbonated beverage per day.	1 2 3 4 5
4	I get 7-9 hours of quality sleep each night.	1 2 3 4 5
5	I eat well-balanced portions of fruits, vegetables, and proteins. I avoid excess quantities of preservatives, processed foods and sugar.	1 2 3 4 5
6	I am on media devices no more than 2 hours a day. (phone, computer, TV, gaming...)	1 2 3 4 5
<i>(Add your individual scores in this category)</i> <b>Total Score</b>		
<i>(Take your Total Score and divide by 5. It may be a decimal)</i> <b>Divided Total</b>		

	Mental	Low to High
1	I refrain from complaining, excuses and negative perspectives. I am known to look for positive perspectives in situations.	1 2 3 4 5

# REFLECTION SURVEY

- ✦ 8 AREAS OF HEALTH
- ✦ 6 QUESTIONS EACH
- ✦ 4 TOTAL PAGES
- ✦ ADD UP THE FINDINGS
- ✦ GRAPH THE RESULTS

## WHEEL OF LIFE

Stress, Health, & Life - Survey Questions

PAGE 3

	Family	Low to High
1	I desire to be with my family. We do enjoy events together as a family.	1 2 3 4 5
2	I verbally and non-verbally express my love and appreciation to my family members when needed.	1 2 3 4 5
3	I have meals with my family numerous times throughout the week.	1 2 3 4 5
4	I have a good relationship with my extended family members (aunts, uncles, grandparents, etc...)	1 2 3 4 5
5	There is no one in my family that I do not love.	1 2 3 4 5
6	I have a good relationship with my friends and family members.	1 2 3 4 5
<i>(Add your individual scores in this category)</i> <b>Total Score</b>		
<i>(Take your Total Score and divide by 5. It may be a decimal)</i> <b>Divided Total</b>		

## WHEEL OF LIFE

Stress, Health, & Life - Survey Questions

PAGE 2

	Spiritual	Low to High
1	I describe myself as a person of faith.	1 2 3 4 5
2	I have a personal relationship with God or a person of faith.	1 2 3 4 5
3	I volunteer my time and give money to my church or religious organization.	1 2 3 4 5
4	I pray or meditate each day to meditate/grow in my spiritual walk.	1 2 3 4 5
5	I seek help from my faith when trials or problems come.	1 2 3 4 5
6	My faith beliefs are the foundation to my actions.	1 2 3 4 5
<i>(Add your individual scores in this category)</i> <b>Total Score</b>		
<i>(Take your Total Score and divide by 5. It may be a decimal)</i> <b>Divided Total</b>		

**"I LOVE THIS RESOURCE BECAUSE IT HELPS MY STUDENTS REFLECT ON THEMSELVES, AN IMPORTANT LIFE SKILL TO ENABLE GROWTH!"**

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PAGE 4

	Productivity	Low to High
1	I feel a sense of purpose, direction, and completeness.	1 2 3 4 5
2	I have enough time for all aspects of life. I don't feel rushed.	1 2 3 4 5
3	I find ways to be productive.	1 2 3 4 5
4	I know what to do.	1 2 3 4 5
5	I am not constantly thinking of the last thing I did or the next thing I need to do.	1 2 3 4 5
6	I take a "day of relaxation" once a week. (other than sleep)	1 2 3 4 5
<i>(Add your individual scores in this category)</i> <b>Total Score</b>		
<i>(Take your Total Score and divide by 5. It may be a decimal)</i> <b>Divided Total</b>		

	Lifestyle	Low to High
1	I have many things to expand my experiences and interests (travel, instruments, theatre, sports, outdoors, etc...)	1 2 3 4 5
2	I am thankful for the opportunity.	1 2 3 4 5
3	I complete my assignments on time.	1 2 3 4 5
4	I have hobbies at least twice a week.	1 2 3 4 5
5	I review my personal life-plan.	1 2 3 4 5
6	I am aware of my current state in life.	1 2 3 4 5
<i>(Add your individual scores in this category)</i> <b>Total Score</b>		
<i>(Take your Total Score and divide by 5. It may be a decimal)</i> <b>Divided Total</b>		

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# WHEEL OF LIFE RESULTS

- ◆ STUDENTS WILL GRAPH THEIR RESULTS ON EACH SPOKE OF THE WHEEL TO DETERMINE HOW THEIR LIFE IS ROLLING ALONG

## AREAS OF REFLECTION

- ◆ PHYSICAL HEALTH
- ◆ SOCIAL HEALTH
- ◆ FAMILY HEALTH
- ◆ TIME MANAGEMENT
- ◆ MENTAL HEALTH
- ◆ LIFESTYLE HEALTH
- ◆ FINANCIAL HEALTH
- ◆ SPIRITUAL HEALTH

**WHEEL OF LIFE**  
Stress, Health & Life - Scoring Wheel

name: \_\_\_\_\_

**Directions:** Take the divided total from the completed categories and correctly mark this score on the appropriate spoke in the "Wheel of Life," starting from the center and counting out (1 point for each notch). Next, connect all 8 of your markings, like playing connect the dots, and see how your wheel looks. The rounder your wheel is, and the larger your wheel is, then the smoother your ride in life will be and the lower amount of stress you will have.

**Reflection Questions:** How is your life is rolling along? What areas are going well? What areas are flat and need improvement? Look back at the questions that had a lower score. Like any wheel, what needs attention and some extra maintenance? What practical items need to be addressed?

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REFLECTION AND DISCUSSION  
QUESTIONS ALSO INCLUDED



