

Name: _____

Date: _____

AREAS OF WELLNESS

M R T Z P P V W P E V I S F W G U
C S J Y I H X M K J S A S Z K I E
G S T I B A H V O A R L S D X S N
V S S L T L A N O I T O M E F G V
P I V N D R N A A A N T B T Z O I
Z N B L A U T I R I P S S U V C R
E T V A X R G P W M Z F I C H C O
E E L Z U O U Y Y A L Z B S T U N
C L L G I U G S G N I L E E F P M
I L A G S T S Z W Q P J O P R A E
C E C L A I C N A N I F S L Q T N
I C I U J N R J H J O X O V W I T
J T S C J E R K X T U D C O C O A
I U Y U S S V C W A U U I E V N L
U A H Q O O C G Z V M V A L L A K
Z L P X F I D R I Z V M L I Y L Y
R X C A E M S U P P O R T E I I B

ENVIRONMENTAL

OCCUPATIONAL

INTELLECTUAL

FINANCIAL

SPIRITUAL

EMOTIONAL

FEELINGS

ROUTINES

PHYSICAL

SUPPORT

HABITS

SOCIAL