

# SELF CONTRACTS FOR RISK FACTOR INTERVENTION

PRACTICE NAME \_\_\_\_\_

Patient Name \_\_\_\_\_ Date \_\_\_\_\_

## Self-Contract Fitness

**CURRENTLY**, each week, I exercise: \_\_\_\_\_ Minutes per day \_\_\_\_\_ Times per week \_\_\_\_\_ Activity

**TEN WEEK GOAL** \_\_\_\_\_

**ACTION:** This week, I will exercise: \_\_\_\_\_ Minutes per day \_\_\_\_\_ Times per week \_\_\_\_\_ Activity

Every two weeks I will add \_\_\_\_\_ minutes per day or add another day.

How certain are you that you will complete the above contracts this week? (Mark number that describes confidence level.)

Not at all Confident

Slightly Confident

Fairly Confident

Very Confident

0 1 2 3 4 5 6 7 8 9 10

**REWARD** when Action or Goal is completed. Plan to give yourself a reward that can be healthy, positive, and something that makes you feel good!

When I \_\_\_\_\_, my reward will be \_\_\_\_\_.

## Self-Contract Other "Substances" (Smoking)

**CURRENTLY**, I smoke \_\_\_\_\_

**TEN WEEK GOAL** \_\_\_\_\_

**ACTION:** This week, I will \_\_\_\_\_

How certain are you that you will complete the above contract this week? (Mark number that describes confidence level.)

Not at all Confident

Slightly Confident

Fairly Confident

Very Confident

0 1 2 3 4 5 6 7 8 9 10

**REWARD** when Action or Goal is completed. Plan to give yourself a reward that can be healthy, positive, and something that makes you feel good!

When I \_\_\_\_\_, my reward will be \_\_\_\_\_.

## Self-Contract Body Weight

**CURRENTLY**, I weigh \_\_\_\_\_ **TEN WEEK GOAL** \_\_\_\_\_

**ACTION:** This week, I will \_\_\_\_\_

How certain are you that you will complete the above contract this week? (Mark number that describes confidence level.)

Not at all Confident

Slightly Confident

Fairly Confident

Very Confident

0 1 2 3 4 5 6 7 8 9 10

**REWARD** when Action or Goal is completed. Plan to give yourself a reward that can be healthy, positive, and something that makes you feel good!

When I \_\_\_\_\_, my reward will be \_\_\_\_\_.