

LOVE-PLAY-WORK-HEALTH Balance Worksheet

CURRENT:

- Mark your dashboard as it currently exists.
- What do you observe (and are you being fair)?

DASHBOARD

| | | | | | | |
|--------|---|----------------------|----------------------|----------------------|----------------------|------|
| Work | 0 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | FULL |
| Play | 0 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | FULL |
| Love | 0 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | FULL |
| Health | 0 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | FULL |

- If you could make one incremental adjustment, what would it be? Redraw your improved dashboard.

REVISED:

- What would you get if you could attain this revised level of balance? How would life (really) change for you?

DASHBOARD

| | | | | | | |
|--------|---|----------------------|----------------------|----------------------|----------------------|------|
| Work | 0 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | FULL |
| Play | 0 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | FULL |
| Love | 0 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | FULL |
| Health | 0 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | FULL |

- What incremental change could you attempt to move in this direction? What would it take for you to live this way for two weeks?

Mind Mapping:

My crazy idea is:

| | | | | | |
|--------------------------|-----------|------------|-------------------------------|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |
| Alternative Plan # _____ | | | 6 word title: _____ | | |
| | | | | | |
| RESOURCES | I LIKE IT | CONFIDENCE | Questions this plan addresses | | |
| | | | _____ | | |
| | | | _____ | | |
| | | | _____ | | |

Odyssey Plan Insights:

What observations and affirmations did you get?

What did you learn from sharing your plans?

Prototyping Your Odyssey Plans

Review your Odyssey Plans and identify 1-2 things you are curious about and want to try out to decide if that possible future is right for you.

Think about what you need to learn.

“How might I prototype...”

My Action Plan:

| Actions | Deadline | Support |
|----------------|-----------------|----------------|
| | | |

Closing Commitment:

As you get ready to leave this retreat, review your action items and identify the one action you will take in the next week to make a difference in your life.

Complete the sentence:

When I leave here, I will.....



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