



FOR OFFICE USE ONLY

DATE: \_\_\_\_\_

GROUP: \_\_\_\_\_

## Well-Being Checklist

Read each item. Check the box next to the item if you agree with that item.

- ☐ I understand that I am responsible for taking care of myself.
- ☐ I understand that taking care of myself helps take care of the entire group.
- ☐ I will take **Responsibility** for myself.
  - ☐ I will come to the farm **Ready** to work.
    - ☐ I will bring any materials I need.
    - ☐ I will be dressed for the farm.
  - ☐ I will take responsibility for my **Physical Needs**.
    - ☐ I will listen to my body.
    - ☐ I will give my body what it needs. (examples: food, water, rest, bathroom break)
    - ☐ I will tell a facilitator if I must take care of a need.
  - ☐ I will take responsibility for my **Emotional Needs**.
    - ☐ I will let myself feel whatever I am feeling. (examples: sadness, frustration, excitement)
    - ☐ I will not judge anyone else for feeling something.
    - ☐ I will ask for help when I need help.
- ☐ I will follow the **Time Out** rule.
  - ☐ If someone calls a Time Out, I will step away from the activity and go to that person.
  - ☐ I will not leave that person until everyone agrees on a plan to stay safe.
  - ☐ I will call a Time Out if I feel unsafe.
  - ☐ I will call a Time Out if I see something unsafe happening.
- ☐ I will respect everyone's **Privacy**.
  - ☐ I will not share information about anyone but myself outside the farm.

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

Signed: \_\_\_\_\_

Date: \_\_\_\_\_