

# Brain Wellness Profile – Self Assessment

Please read each question and circle the option that best describes your experience over the past 2–4 weeks.

Scoring scale: 0 = Never 1 = Sometimes 2 = Frequently 3 = Always

Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Focus

Circle one: 0 1 2 3

1. How often do you find your mind wandering when you're trying to concentrate on a task?  
0 1 2 3 Score: \_\_\_\_
2. How easy is it for you to stay focused during meetings, conversations, or reading?  
0 1 2 3 Score: \_\_\_\_
3. How often do you re-read the same sentence or paragraph because your mind drifted off?  
0 1 2 3 Score: \_\_\_\_
4. When you start a task, how often do you complete it without getting sidetracked?  
0 1 2 3 Score: \_\_\_\_
5. How often do you feel mentally “scattered” or pulled in too many directions at once?  
0 1 2 3 Score: \_\_\_\_
6. How easily can you filter out background noise or distractions when you're working?  
0 1 2 3 Score: \_\_\_\_
7. How often do you lose track of what you were doing after checking your phone or emails?  
0 1 2 3 Score: \_\_\_\_
8. How often do you procrastinate because you can't get your brain to “lock on” to the task?  
0 1 2 3 Score: \_\_\_\_
9. How often do you struggle to focus when you're tired but still need to get things done?  
0 1 2 3 Score: \_\_\_\_
10. How often do you experience a clear, steady sense of mental focus when it really matters?  
0 1 2 3 Score: \_\_\_\_

**Focus – Total Score (0–30):** \_\_\_\_\_

## Mood

Circle one: 0 1 2 3

1. How often do you feel low, flat, or “emotionally drained” without a clear reason?  
0 1 2 3 Score: \_\_\_\_
2. How easily do you become irritable or snappy with people around you?  
0 1 2 3 Score: \_\_\_\_
3. How often do you feel calm and emotionally steady throughout the day?  
0 1 2 3 Score: \_\_\_\_
4. How often do you experience sudden shifts in mood (up one moment, down the next)?  
0 1 2 3 Score: \_\_\_\_
5. How often do you feel genuinely hopeful and optimistic about the future?  
0 1 2 3 Score: \_\_\_\_
6. How often do small problems feel bigger than they probably are?  
0 1 2 3 Score: \_\_\_\_
7. How often do you feel anxious, worried, or “on edge” during a typical week?  
0 1 2 3 Score: \_\_\_\_
8. How easily can you shift from a negative mood back to a more balanced one?  
0 1 2 3 Score: \_\_\_\_
9. How often do you feel joy, gratitude, or appreciation in your day-to-day life?  
0 1 2 3 Score: \_\_\_\_
10. How often do you feel emotionally resilient rather than emotionally fragile?  
0 1 2 3 Score: \_\_\_\_

**Mood – Total Score (0–30):** \_\_\_\_\_

## Brain Endurance

Circle one: 0 1 2 3

1. How often does your brain feel "tired" before your day is actually over?  
0 1 2 3 Score: \_\_\_\_\_
2. How easily can you maintain clear thinking during long periods of concentration?  
0 1 2 3 Score: \_\_\_\_\_
3. How often do you feel mentally exhausted after routine tasks that used to feel easy?  
0 1 2 3 Score: \_\_\_\_\_
4. How often does your thinking slow down or feel "foggy" as the day goes on?  
0 1 2 3 Score: \_\_\_\_\_
5. How well can you handle back-to-back mentally demanding tasks without crashing?  
0 1 2 3 Score: \_\_\_\_\_
6. How often do you need caffeine or sugar just to keep your brain going?  
0 1 2 3 Score: \_\_\_\_\_
7. How often do you notice that your performance drops in the afternoon or evening?  
0 1 2 3 Score: \_\_\_\_\_
8. How often do you wake up feeling mentally refreshed and ready to think clearly?  
0 1 2 3 Score: \_\_\_\_\_
9. How often does mental fatigue affect your productivity or decision-making?  
0 1 2 3 Score: \_\_\_\_\_
10. How often do you feel you have strong, consistent mental stamina throughout the day?  
0 1 2 3 Score: \_\_\_\_\_

**Brain Endurance – Total Score (0–30):** \_\_\_\_\_

## Resolve

Circle one: 0 1 2 3

1. How often do you follow through on tasks even when they feel boring or difficult?  
0 1 2 3 Score: \_\_\_\_\_
2. How often do you give up on a goal when it becomes uncomfortable or challenging?  
0 1 2 3 Score: \_\_\_\_\_
3. How easily do you stick to decisions you've made, rather than second-guessing yourself?  
0 1 2 3 Score: \_\_\_\_\_
4. How often do you finish what you start, even if your motivation dips?  
0 1 2 3 Score: \_\_\_\_\_
5. How often do you delay important tasks even though you know they matter?  
0 1 2 3 Score: \_\_\_\_\_
6. How often do you take action promptly instead of over-thinking and hesitating?  
0 1 2 3 Score: \_\_\_\_\_
7. How often do you push yourself to do the "right" thing rather than the "easy" thing?  
0 1 2 3 Score: \_\_\_\_\_
8. How often do you keep going with your plans, even when you feel tired or discouraged?  
0 1 2 3 Score: \_\_\_\_\_
9. How often do you uphold personal promises (diet, exercise, sleep, habits) you make to yourself?  
0 1 2 3 Score: \_\_\_\_\_
10. How strong is your sense of inner determination when you commit to something important?  
0 1 2 3 Score: \_\_\_\_\_

**Resolve – Total Score (0–30):** \_\_\_\_\_

## Resilience

Circle one: 0 1 2 3

1. How quickly do you bounce back after a stressful event or setback?  
0 1 2 3 Score: \_\_\_\_\_
2. How often do you find yourself dwelling on problems long after they've happened?  
0 1 2 3 Score: \_\_\_\_\_
3. How well do you cope when your routine is disrupted or plans change suddenly?  
0 1 2 3 Score: \_\_\_\_\_

## Resilience (continued)

4. How often do you feel overwhelmed rather than challenged by pressure?  
0 1 2 3 Score: \_\_\_\_\_
5. How often can you keep a clear head when you're under time or performance stress?  
0 1 2 3 Score: \_\_\_\_\_
6. How easily do you recover emotionally after criticism or conflict?  
0 1 2 3 Score: \_\_\_\_\_
7. How often can you access solutions and problem-solving rather than staying stuck in worry?  
0 1 2 3 Score: \_\_\_\_\_
8. How often do stressful events linger in your mind and affect your sleep or mood?  
0 1 2 3 Score: \_\_\_\_\_
9. How often do you feel confident that you can handle whatever life throws at you?  
0 1 2 3 Score: \_\_\_\_\_
10. How often do you grow or learn from difficulties rather than feeling crushed by them?  
0 1 2 3 Score: \_\_\_\_\_

**Resilience – Total Score (0–30):** \_\_\_\_\_

## Memory

Circle one: 0 1 2 3

1. How often do you forget why you walked into a room or what you were about to do?  
0 1 2 3 Score: \_\_\_\_\_
2. How often do you struggle to remember names of people you've recently met?  
0 1 2 3 Score: \_\_\_\_\_
3. How often do you misplace everyday items such as keys, phone, or glasses?  
0 1 2 3 Score: \_\_\_\_\_
4. How often do you forget important dates, appointments, or commitments?  
0 1 2 3 Score: \_\_\_\_\_
5. How easily do you remember details from conversations or meetings later in the day?  
0 1 2 3 Score: \_\_\_\_\_
6. How often do you forget what you were just about to say in the middle of a sentence?  
0 1 2 3 Score: \_\_\_\_\_
7. How often do you need to re-check instructions, messages, or emails because you don't recall them clearly?  
0 1 2 3 Score: \_\_\_\_\_
8. How easily can you remember new information you're trying to learn (courses, training, reading)?  
0 1 2 3 Score: \_\_\_\_\_
9. How often do you rely on lists, reminders, or alarms because your memory doesn't feel reliable?  
0 1 2 3 Score: \_\_\_\_\_
10. How often do you feel your memory is sharp, dependable, and working well for your age?  
0 1 2 3 Score: \_\_\_\_\_

**Memory – Total Score (0–30):** \_\_\_\_\_

## Ability to Relax

Circle one: 0 1 2 3

1. How easily can you switch off from work or responsibilities at the end of the day?  
0 1 2 3 Score: \_\_\_\_\_
2. How often does your mind keep racing when you want to relax or go to sleep?  
0 1 2 3 Score: \_\_\_\_\_
3. How often do you feel physically tense (jaw, neck, shoulders, chest) without realising it?  
0 1 2 3 Score: \_\_\_\_\_
4. How often do you find it difficult to sit still and simply rest without needing a distraction?  
0 1 2 3 Score: \_\_\_\_\_
5. How often do you feel genuinely calm and at ease in your body and mind?  
0 1 2 3 Score: \_\_\_\_\_
6. How easily can you relax without using food, alcohol, screens, or social media as a crutch?  
0 1 2 3 Score: \_\_\_\_\_

## **Ability to Relax (continued)**

7. How often do you engage in activities that genuinely restore you (nature, breathing, meditation, hobbies)?  
0 1 2 3      Score: \_\_\_\_\_
8. How often do you feel “on alert” or hyper-vigilant, even in safe situations?  
0 1 2 3      Score: \_\_\_\_\_
9. How often do you wake up feeling rested rather than tense or wired?  
0 1 2 3      Score: \_\_\_\_\_
10. How often do you experience a deep sense of inner stillness or peacefulness, even for a few moments?  
0 1 2 3      Score: \_\_\_\_\_

**Ability to Relax – Total Score (0–30):** \_\_\_\_\_

## Brain Wellness Profile – Scoring Summary

Record your section scores below:

Focus: \_\_\_\_\_ (0–30)

Mood: \_\_\_\_\_ (0–30)

Brain Endurance: \_\_\_\_\_ (0–30)

Resolve: \_\_\_\_\_ (0–30)

Resilience: \_\_\_\_\_ (0–30)

Memory: \_\_\_\_\_ (0–30)

Ability to Relax: \_\_\_\_\_ (0–30)

Overall Total Brain Wellness Score (0–210): \_\_\_\_\_

Higher scores generally indicate better perceived brain and mental wellness in each area.

Use this profile as a starting point for discussion with a qualified practitioner or within your Brain Wellness or Power Up Your Brain Program. This is not a diagnostic tool and does not replace medical or psychological assessment.