

RESILIENCY ASSESSMENT

Answer the following questions to determine your baseline resiliency using the following scale:																
0		1	2	3	4	5	6	7	8	9	10					Your Score
(low, n	(low, never, bad) (high, always, good)															
1.	1. What is your current stress level?															
2.	ŀ	low of	en do y	ou feel	burned (out?										
3.	3. In a typical week, how would you rate your energy level at work *(while performing work-like tasks)?															
4.	. In a typical week, how would you rate your energy level at home?															
5.	. After a typical night's sleep, how often do you feel rested?															
6.	How would you rate your overall quality of life?															
7.	. How would you rate your spiritual well-being?															
8.	How would you rate your level of support?															
9.	. How often are you mindful: your thoughts are in the present moment?															
10.). H	low wo	uld you	ı rate yo	ur level	of happ	iness?									
Step 1:	: 1	Γotal th	e score	s from q	uestion	s 1 and 2	2								(1)	+ (2) =
Step 2:	: 5	Subract	your a	nswer fr	om step	1 from	the nun	nber 20.							20	(step 1 answer) =
Step 3:	: 1	Fotal th	e score	s from q	uestion	s 3-10.										(items 3-10)
Step 4:	: /	Add you	ır answ	ers from	Step 2	and Ste	3.									+=
TOTAL	. S(CORE														

Source: Mayo Clinic Healthy Living Program *parenthetical phrase added