## **MY QUIT PLAN**

Name My reasons to quit I have made a decision to quit using tobacco on **Confidence Rating:** /10 As part of my plan to quit tobacco use, I will: (check all that apply) Complete the Tobacco Cessation Classes. Plan my tobacco use so that I will run out by Quit Day. Make a list of all the reasons I want to quit. I will carry this with me in my pocket as a reminder. Remove tobacco from my home, car, and any other places where I have it stored. Remove all ash trays, lighters, and clean up areas where I used to smoke. Save the money I used to buy tobacco to do something or buy something special for myself. My "Support Person" will be: . He/She will help me to guit and remain without tobacco. Instead of using tobacco, I will try to talk to this person when I feel like I want tobacco. Begin using nicotine replacement therapy or medication. Rely on stress management techniques instead of tobacco for relaxation. Make a list of hobbies or interests that can fill up my day. Other Ideas for My Quit Plan