Feelings Sheet

*Record your feelings 3 times per day. Use Feelings List from Resources as needed

SUN	Morning	
	Afternoon	
	Evening	
MON	Morning	
	Afternoon	
	Evening	
TUE	Morning	
	Afternoon	
	Evening	
WED	Morning	
	Afternoon	
	Evening	
THU	Morning	
	Afternoon	
	Evening	
FRI	Morning	
	Afternoon	
	Evening	
SAT	Morning	
	Afternoon	
	Evening	

“Saying No” Change Sheet

*Record number of times you say ‘no’ per day

	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1												
2												
3												
4												
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31												

“Asking For Help” Change Sheet

*Record number of times you ask for help per day

	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1												
2												
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Likes and Dislikes

Likes	Dislikes

“Prioritizing Enjoyment” Change Sheet

*Record number of times you prioritize your own enjoyment per day

	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1												
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“Eating” Change Sheet

*Record the number of times each day that you override an unhealthy habit

	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1												
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“Exercise” Change Sheet

*Put a checkmark on the days that you exercise

	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
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“Rest & Relaxation” Change Sheet

*Put a checkmark on the days that you rest & relax

	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
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"Self-Discipline" Change Sheet

*Record your 'Three Things' each day

SUN	#1	
	#2	
	#3	
MON	#1	
	#2	
	#3	
TUE	#1	
	#2	
	#3	
WED	#1	
	#2	
	#3	
THU	#1	
	#2	
	#3	
FRI	#1	
	#2	
	#3	
SAT	#1	
	#2	
	#3	

Self-Soothing List

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.