

Emotion and Body Link

What distraction activity do you have planned to help you put your emotion back away after filling out this form? _____

Do Not Proceed Without A Plan

What event triggered your emotion (pleasant or unpleasant) ? _____

Which emotion did this cause? _____

Strength of emotion? (1-10) _____

Were there any myths that you had attached to this emotion? What myths? _____

Do you think the myths caused the emotion to be felt more strongly? _____

What fact did you use to counter the myth? _____

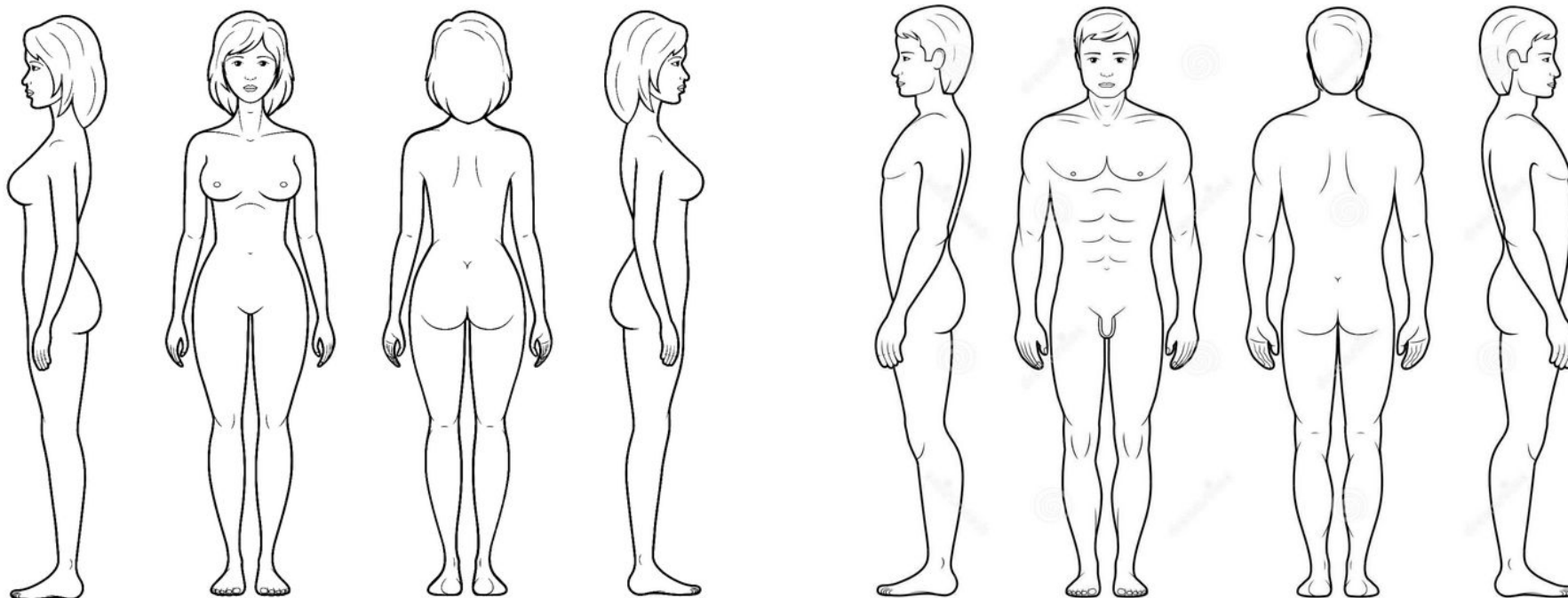
Did replacing it with fact lessen the feeling? _____

Where in your body did you feel the emotion? (all places felt) _____

Describe in detail all physical sensations you feel/felt with this emotion _____

Stop thinking about this emotion, distract and enjoy.

If you have blocked emotions to the point that you have trouble feeling them, it is recommended that you fill out this sheet whenever you feel an emotion. This will help you get back in touch with what you feel. Practice focusing on pleasing emotions, but learn to feel those that are unpleasant too.



Label with order of sensation strength. (A for the strongest feeling - Z)

Label with order of appearance. (1 - _)

Describe the strongest sensation in detail:

Is it **HEAVY** or **LIGHT**? _____

Is it **WARM** or **COOL**? _____

Is it **SOLID** or does it have **MOTION**? _____

Is it **SOFT** or **HARD**? _____

Is it **PAINFUL** or **SOOTHING**? _____

Is it **DARK** or **LIGHT**? _____

What does this feeling tell you? _____