Feelings check-in

A few times a day, stop and write down what you are feeling.

Name _____ Date _____

Two or three times a day, stop for a moment. What is happening? What do I notice in my body? What is the feeling, and how strong is it?

Day and time	What was happening	What I noticed in my body	The feeling (be exact)	How strong (0 to 10)

What am I noticing about my feelings this week?

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