

Things, places, people and thoughts that bother me

To be completed by the child (with assistance if needed)

Directions: Write down all the things you can think of that bother you, make you worried or afraid, why they upset you and what you do to make the bad feelings go away.

Name:

Age:

Date:

Thing, place, person, thought or situation that bothers me	It bothers me because... I fear or worry that...	What I do to make the bad feeling go away