## **Fear Hierarchy Worksheet**

Your	full	name:

## Date submitted:

**Instructions:** List down all your fears. Don't worry about how "trivial" you think they are. Just list them down in the order of what distresses you the least to what distresses you the most. Also, indicate if you are normally able to avoid these fears or if you somehow can't avoid them. We'll discuss your fears and help you work through them later, but for now, just list them down.

Rank	Fears	Are you able to avoid them? (YES / NO)	Rate how distressing this fear is from 1 to 10