

Mindfulness Worksheet

Client Information			
First Name	Last Name	Date of Birth	Date/Time
Reflection on Self-Awareness			
How am I feeling today?			
What am I worried about?			
List the top 5 things that put me in a good mood			
List the top 5 things that I am most grateful of			
Reflection on Present Surroundings			
Before writing anything down for the following questions, try to sit quietly and alone for 10 minutes, and pay attention to what is going on around you.			
Right now I see...			
Right now I hear...			
Right now I am touching...			
Right now I smell...			
Right now I feel...			