

# Personal Values Worksheet

Your full name:

Date submitted:

Your therapist's full name:

Acceptance	Compassion	Friendship	Intimacy	Power
Achievement	Courtesy	Fun	Justice	Purpose
Adventure	Creativity	Generosity	Knowledge	Responsibility
Authority	Dependability	Genuineness	Leisure	Safety
Autonomy	Duty	Growth	Logic	Self-acceptance
Beauty	Faith	Health	Love	Self-control
Caring	Fame	Helpfulness	Mastery	Sexuality
Cautious	Family	Honesty	Moderation	Spirituality
Comfort	Flexibility	Humility	Order	Stability
Commitment	Forgiveness	Independence	Pleasure	Tolerance

If there are any values not included in this list that you feel should be included, write at least five below:


Among these values, which are the ten most important to you? List them down below.


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**Among the ten that you listed, which five are the most important? (OPTIONAL)**


**Think of the factors that have caused you psychological distress and the negative thoughts and behavioral patterns that emerged as a response to those causes. Do you think how you responded to those causes and how you are now are aligned with your most important values (whether the top ten or top five)? If so, why do you think that way? How are your thoughts, feelings, behaviors, and actions not aligned with your values?**

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**What could you have responded differently based on your values in response to the causes of your psychological distress?**

**What do you want to do moving forward based on your values? This part is OPTIONAL but if you want to answer it, write down your goals, plans, and actionable steps you'll take that will lead you to a healthier life both physically and mentally. These can include lifestyle changes, participating in activities you love, healthier coping mechanisms, etc. You can even save this for your next therapy session so your therapist can assist you.**