

Self Love Worksheet

Patient Information	
Name	Date
Self-Reflection	
My Strengths	
My Achievements	
Things I Like About Myself	
Gratitude and Appreciation	
People I Am Grateful For	
Things That Make Me Happy	
My Support System	

Self-Care Practices

Physical Self-Care

Emotional Self-Care

Spiritual Self-Care

Challenges and Growth

Challenges I Have Overcome

Areas for Growth

Affirmations for Growth

Challenges and Growth

Challenges I Have Overcome

Areas for Growth

Affirmations for Growth

Action Plan for Self-Love

Daily Self-Love Actions

Long-Term Self-Love Goals

Additional Reflections

Notes from Your Counselor