K Emotional Processing & Self-Reflection Form

For identifying triggers, exploring emotions, and finding resolution strategies.		
Date & Time of Incident:		
❤️ 1. What Happened?		
Briefly describe the situation that led to your emotional reaction.		
(Who was involved? What was said or done? Where were you?)		
🚨 2. Trigger Check-In		
What do you think may have triggered you? (Check all that apply)		
A tone of voice		
A memory or past experience		
Feeling ignored or dismissed		
Feeling rejected or unloved		
Someone crossed a boundary		
Fear of failure or not being good enough		
• Other:		

💡 3. Thoughts That Came Up

What thoughts immediately ran through your mind?

	Emotions You Felt
nat e	motions did you notice? (Circle or list any)
•	Angry
•	Sad
•	Scared
•	Confused
•	Ashamed
•	Anxious
•	Numb
•	Rejected
•	Hurt
•	Embarrassed
•	Lonely
•	Disrespected
•	Other:

Describe your behavior or response.		
🧠 7. Pause & Reflect		
Looking back, was your emotional response:		
Proportional to the moment?		
More intense than expected?		
Linked to something deeper or past-related?		
Explain if needed:		
8. What Do You Need Right Now?		
What would help you feel safe, calm, or supported?		
 A grounding activity (deep breathing, tapping, etc.) 		
To talk it out with someone		
A change in environment		
Reassurance or validation		
Space to journal or reflect		
• Other:		

9. Emotion Regulation Tools You Can Try:

What coping tool(s) can you use to regulate and reset?
Deep breathing
Positive self-talk
Scripture or affirmation
Prayer or guided meditation
Listen to music
Movement/stretching
Name the feeling aloud
Use the STOP skill (Stop, Take a breath, Observe, Proceed)
• Other:
♦ 10. What Did This Teach You?
What insight or takeaway do you want to remember next time?
Additional Notes or Journal Thoughts: