

Name: _____

Date: _____

SELF-FORGIVENESS

What part of your experience felt like you made “a mistake”?

What emotion(s) does this make you feel?

Where in your body/mind do you feel discomfort?

Name: _____

Date: _____

I LOVE YOU

What needs to be done for you to forgive yourself?

What have you learned from holding on to guilt/shame?

What part of your experience are you ready to move forward from?