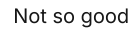
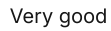


Mood Journal

Time _____

How was your day? Circle one.



How did you feel? Tick all that fit.

- | | | | | |
|------------------------------------|------------------------------------|--------------------------------------|---------------------------------------|-------------------------------------|
| ☐ Energized | ☐ Balanced | ☐ Surprised | ☐ Stressed | ☐ Angry |
| ☐ Excited | ☐ Calm | ☐ Confused | ☐ Worried | ☐ Annoyed |
| ☐ Happy | ☐ Content | ☐ Overwhelmed | ☐ Disappointed | ☐ Frustrated |
| ☐ Hopeful | ☐ Grateful | ☐ Bored | ☐ Hopeless | ☐ Nervous |
| ☐ Inspired | ☐ Motivated | ☐ Tired | ☐ Lonely | ☐ Sad |
| ☐ Proud | | | | ☐ Weak |
| ☐ Loved | | | | ☐ Guilty |
| ☐ Relieved | | | | |

Other feelings _____

What did you do?

- ☐ Family ☐ Friends ☐ Love ☐ Sport ☐ Relax
☐ Reading ☐ Mindfulness ☐ Nature ☐ Creativity ☐ Work
☐ Travel ☐ _____ ☐ _____

Write about your day

One good thing