

WORRY CHART

Name: _____

Date: _____

What is the worry?	Rate your worry 1-10 <i>1= Not worried 10= Most worried</i>	What do you think could happen?	How are you feeling?	What can you do or say to help with the worry?	How do you feel now? <i>Rate your worry 1-10 1= Not worried 10= Most worried</i>