

I CAN RELAX

I will practice my relaxation skills by doing _____, _____,
 or _____ every day this week. Rate your distress level (1-10) before and
 after relaxing.

Day	What Relaxation Technique I did	Distress Before 1 = none, 10 = worst	Distress After 1 = none, 10 = worst
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
Monday			
Tuesday			
Wednesday			