**Interaction:** For each day of the week, briefly describe a specific interaction you had with another person that day. Choose the interaction that caused you to have the strongest reaction, either positive or negative, regardless of the time of day. As time permits, expand on this interaction in your journal.

**Specific emotions:** Rate each of the emotions that you had during that interaction from 0 (emotion did not occur) to 4 (very strong emotional reaction). Also, list any other emotions (see back of sheet).

**Date of first entry:** ________________

<table>
<thead>
<tr>
<th>Day</th>
<th>Interaction</th>
<th>Specific emotions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Shame 0-4</td>
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<tr>
<td>Mon</td>
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<td>Sun</td>
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</tbody>
</table>
Emotions List

strong
confident
powerful
capable
respected
desirable
excited
detached
scornful
intruded

jealous
angry
mad
irritated
annoyed
frustrated
impatient
harassed
betrayed
persecuted
blamed
distrustful
misunderstood
unappreciated
proud
innocent
blameless

sad
grieving
hurt
disappointed
concerned
competent
capable
lovable
secure
curious
playful
content
satisfied
fulfilled
peaceful
relaxed
hopeful
forgiving
grateful

scared
afraid
uncertain
hesitant
worried
apprehensive
helpless
insecure
inadequate
incompetent
longing
needy
lonely
trusting
close
loved
appreciated
understood
accepted

ashamed
embarrassed
guilty
inferior
irresponsible
worthless
discouraged
hopeless
desperate
frantic
rejected
alone
abandoned