**NAME:**

**THE CONNECTION CODE**

1. **AWARENESS**

**PRACTITIONER:**

**DATE:**

My specific area of focus (issue, stress, or concern):

Using the list from exercise 1. Acceptance, now write how the things on your lists make you FEEL in both the negative and positive (i.e., what these things are doing to your life, mind and body).

|  |  |  |
| --- | --- | --- |
| HOW DO YOU FEEL WITH THE NEGATIVE? |  | HOW DO YOU FEEL WITH THE POSITIVE? |
| Eg. I’m tired & unfocused at work.       |  | Eg. I’m excited when I look into training.      |