

Exercise 9A – Perceptions and Observations About Life

For each of the items below ask, **How often do I feel or think this way?**

Rate each one from 0 to 5 using the scale below. If a particular item seems dependent upon particular people or circumstances, feel free to make a note next to the item and give it a second rating as well.

0=never 1=rarely 2=occasionally 3=sometimes 4=often 5=most of the time

- | | |
|--|---|
| <input type="checkbox"/> I am afraid of what God wants from me | <input type="checkbox"/> I worry about finances |
| <input type="checkbox"/> I think God is disappointed in me | <input type="checkbox"/> I'm really hard on myself |
| <input type="checkbox"/> God seems very distant from me | <input type="checkbox"/> Evil seems more powerful than good |
| <input type="checkbox"/> I feel angry at God about things that have happened to me | |
| <input type="checkbox"/> I have doubts about God's interest or concern for me | |
| <input type="checkbox"/> I'm better off alone than trying to get close to others | |
| <input type="checkbox"/> I have places in my life where I feel stuck and cannot seem to change | |
| <input type="checkbox"/> I feel judgmental or contemptuous toward others | |
| <input type="checkbox"/> I compare myself to others and feel as if I don't measure up | |
| <input type="checkbox"/> I seem to need everyone to like me and/or approve of me | |
| <input type="checkbox"/> There are people that I'm not sure I can ever forgive | |
| <input type="checkbox"/> I have trouble "forgiving myself" for mistakes I have made | |
| <input type="checkbox"/> I am afraid of making mistakes or failing at things I try | |
| <input type="checkbox"/> I am surprised by how negative my reaction can be to certain situations | |
| <input type="checkbox"/> I have painful regrets about choices I have made | |
| <input type="checkbox"/> I believe negative feedback more than positive | |

There is no scoring for this survey. The purpose is to call attention to areas which may indicate the presence of underlying beliefs that God wants to change.

Exercise 10A – A Survey of Possible Self-Rejection Symptoms

For each of the items below ask, **How often do I feel or think this way, or act like this?**

0=never 1=rarely 2=occasionally 3=sometimes 4=often 5=most of the time

- I'm really hard on myself about mistakes or oversights
- I don't like who I am, who I have become
- I have thoughts of self-destructive actions
- I despair over my feelings of powerlessness
- I felt unloved / unwanted by my parents in ways that have not been healed
- I can allow others grace in ways that I will not allow for myself
- I think I have an inner saboteur who tries to ruin my life
- I feel shame or fear when receiving (gifts, help, compliments, comfort)
- I believe negative feedback more than positive
- I think that if you knew me better, you wouldn't like me
- I have been cheated out of having the spouse or income or [whatever] I needed to have
- I compare myself to others and feel inferior in some important aspects
- I have very little self-worth
- I feel like I can't do anything right
- I reject compliments
- I assume that people will reject me
- I think God disapproves of me
- I am a perfectionist
- I hide behind a rather strong facade
- I wish I had never been born

There is no scoring for this survey. The purpose is to call attention to areas which may indicate the presence of underlying beliefs that God wants to change.

Exercise 11A – Naming Our Fears

The items below are things people commonly find fearful, and ways we might describe those fears. Using a scale of 0 to 5, rates the items below according to **how strongly you feel fear** in regard to each person or thing. Feel free to qualify any of the items, if necessary.

0 = not at all 1 = very minor 2 = somewhat 3 = moderate 4 = strong 5 = extreme

Ways We Describe Our Fears

Walking on eggshells
Unsafe
Distrust
Apprehension

Intimidation
Foreboding
Terror
Panic

Unease
Anxiety
Dread
Scary

People, Things, Circumstances

___ My boss

___ Exposure

___ My own anger

___ My spouse

___ Failure

___ Another person's anger

___ My parents

___ Success

___ Shame

___ A brother or sister

___ Intimacy

___ Poor health / Getting sick

___ Some other relative

___ God's view of me

___ Death

___ Rejection by others

___ God's will for me

___ Finances

___ Work responsibilities

___ Loss of control

___ Wasting my life

___ Family responsibilities

___ Needs not being met

___ Making mistakes

___ Abandonment

___ Physical pain

___ My own inner impulses

There is no scoring for this survey. The purpose is to call attention to areas which may indicate the presence of underlying beliefs that God wants to change.

Daily 3x5 Appreciation

Reflecting on my day ... what are 3 things I appreciate about the day ... about another person ... about myself ... about God; and what are 3 things I think God appreciates about me or my day?

	#1	#2	#3
What I appreciate about my day			
What I appreciate about another person			
What I appreciate about myself			
What I appreciate about God			
What I think God appreciates today			

This chart was developed 2005, by David Takle of Kingdom Formation Ministries, www.KingdomFormation.org, inspired by others who taught on the value of appreciation. Please feel free to distribute the above chart with this attribution.