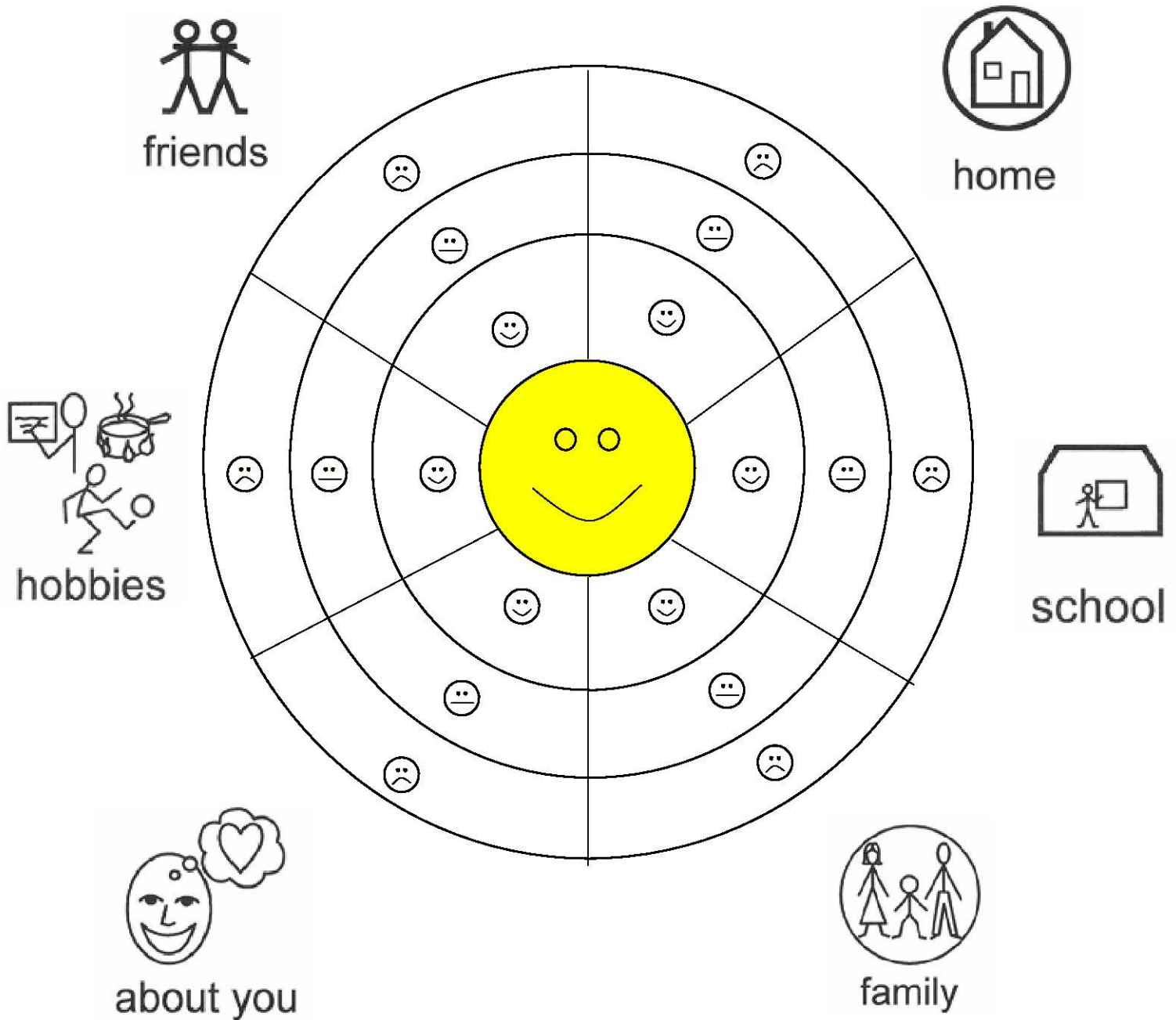


My Feelings Colouring Chart

Name _____ Age _____

How happy are you?






Thinking about everything we've talked about, on a scale of 0 to 10, where 10 is being as happy as you could be... where are you now?









My Feelings Number Line




Name _____ Age _____




How happy are you?




 home	 0 1 2 3 4 5 6 7 8 9 10 
--	--

 family	 0 1 2 3 4 5 6 7 8 9 10 
--	--

 school	 0 1 2 3 4 5 6 7 8 9 10 
---	--

 friends	 0 1 2 3 4 5 6 7 8 9 10 
--	--

 about you	 0 1 2 3 4 5 6 7 8 9 10 
---	--

 hobbies	 0 1 2 3 4 5 6 7 8 9 10 
---	--

My Feelings Number Line

Name _____ Age _____

Thinking about everything we've talked about, on a scale of 0 to 10, where 10 is being as happy as you could be... where are you now?




0 **1** **2** **3** **4** **5** **6** **7** **8** **9** **10**




My Feeling Feedback Record

Form for **practitioners** to record child/young persons views and ideas

CHILD/YOUNG PERSON'S NAME: _____ DOB: _____

 home	Where are you now? Are you generally happy at home? Sad at home? Or somewhere in between?
	What makes you feel like this?
	If things were better what would they look like?
	What could you do or someone else do that could make this better?


 school	Where are you now? Are you generally happy at school? Sad at school? Or somewhere in between?
	What makes you feel like this?
	If things were better what would they look like?
	What could you do or someone else do that could make this better?


My Feelings Feedback Record

Form for practitioners to record child/young persons views and ideas

CHILD/YOUNG PERSON'S

NAME: _____ DOB: _____

 family	Where are you now? Are you generally happy? Sad? Or somewhere in between?
	What makes you feel like this? Tell us about your family
	If things were better what would they look like?
	What could you do or someone else do that could make this better?


 about you	Where are you now? Are you generally happy about yourself? Sad? Or somewhere in between?
	What makes you feel like this?
	If things were better what would they look like?
	What could you do or someone else do that could make this better?


My feelings Feedback Record

Form for practitioners to record child/young persons views and ideas

CHILD/YOUNG PERSON'S

NAME: _____ DOB: _____

 hobbies	Where are you now? What do you enjoy doing in your free time? Are you generally happy with your hobbies? Sad? Or somewhere in between?
	What makes you feel like this? Are you able to do them? How often do you do them?
	If things were better what would they look like?
	What could you do or someone else do that could make this better?

 friends	Where are you now? Are you generally happy with your friends? Sad? Or somewhere in between?
	What makes you feel like this? Tell us about your friends
	If things were better what would they look like?
	What could you do or someone else do that could make this better?

My Feelings Feedback Record

CHILD/YOUNG PERSON'S

NAME: _____ DOB: _____

On a scale of 0 to 10, where 10 means that we have captured all your ideas, how would you rate the work we have just done together?



0

1

2

3

4



5

6

7

8

9



10

Date Completed: