

Name: \_\_\_\_\_ Date: \_\_\_\_\_

# Setting Personal Boundaries

Who do I struggle to set  
boundaries with?

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Type of boundaries I struggle to  
set with this person:

- |                                    |                                      |
|------------------------------------|--------------------------------------|
| <input type="checkbox"/> emotional | <input type="checkbox"/> time        |
| <input type="checkbox"/> physical  | <input type="checkbox"/> spiritual   |
| <input type="checkbox"/> financial | <input type="checkbox"/> other _____ |

What am I afraid will happen if I set boundaries with this person?

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In what ways is not setting boundaries affecting me?

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How would I feel if I set healthy boundaries?

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How do I think the other person react to these boundaries?

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An affirmation that gives me courage:

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