

Name: _____ Date: _____

Setting Personal Boundaries

PERSONAL SPACE

Who is able to stand close to you? How close do you want them to be?

WHAT OTHERS KNOW ABOUT YOU

Who do you share your feelings and secrets with? Who's allowed to know where you live?

HOW OTHERS TALK TO YOU

How do you want others to speak to you? Who is allowed to call you by a nickname?

HOW OTHERS TOUCH YOU

What kind of touch do you allow from a friend? A family member? A stranger?