

NAME: _____

DATE: _____

S.A.S

(self-assessment sheet)

Was there a "TRIGGER"? What was the situation that UPSET YOU?

Where were you? _____

Who was there? _____

BRIEFLY - Tell us what happened? _____

What were you THINKING? _____

How UPSET were you? Circle one:

| | | | | |
|------------|--------|------------|------------------------|------------|
| 1 | 2 | 3 | 4 | 5 |
| Very upset | Really | Moderately | Mildly But still ok | Not at all |

What did you DO? How did you handle this situation?
