

Name:

Date:

RELATIONSHIP BOUNDARIES

Answer each question openly and honestly.

Think about two people in your life who make you feel safe and secure. What boundaries do you have with them? What boundaries do they hold with you?

What challenges have you faced trying to set healthy boundaries? How did you overcome them?

What are your most important values? How can your boundaries reflect these values?

Boundaries can fall on a sliding scale from flexible to rigid. Where do your boundaries fall now? Where do you want them to fall ideally?