

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

# Self Confidence Worksheet

5 physical things I like about myself:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

5 non-physical things I like about myself:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

What I love about me:

*What is my favorite thing about me? Why?*