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| *Thought and Evidence Journal*  |
| **Situation**When? Where? Who? What happened? | **Feelings**One-word summaries. Rate 0-100 | **Automatic Thoughts**What you were thinking just before and during the unpleasant feeling. | **Evidence For** | **Evidence Against** | **Balanced or Alternative Thoughts** Circle possible action plans. | **Re-rate Feelings**0-100  |
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