

Private Counselling In Havering

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Action Brainstorming Worksheet

Name: _____ **Date:** _____

- 1) This is for you to answer personally; no other input should be received.
- 2) Ensure that you are alone and have at least 30-minutes to spare, without being interrupted.
- 3) Try to be as open and true to self as possible, when giving your answers.
- 4) You can come back to this and add/edit as you wish, there is no need to complete this form in one go.
- 5) This tool is for you to identify your own strengths, weaknesses, and any changes within yourself you aim to achieve. It also helps us both to elevate the working progress, as we will revisit these answers at various point within the future or our work together and reflect on the outcomes.

	STOP	Do LESS	KEEP DOING	Do MORE	START
1					

2					
3					
4					
5					