



MY BELIEFS

Your beliefs affect every area of your life. Take some time now to consider what have you recorded about each area of your life.

<u>Area of Life</u>	<u>(Δ)LIMITING</u>	<u>(+)LIBERATING</u>
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- Family
- Career/Job
- Health/Well-being
- Education/Personal Development
- ?
- ?

Application Question/Activity:

1. Spend time filling in the chart above. What areas of your life are missing?

2. What beliefs help (i.e., liberate) you?

3. Which beliefs harm or hold you back (i.e., limit)?