



Symptoms: \_\_\_\_\_

Excess weight \_\_\_\_\_

Knee pain \_\_\_\_\_

Emotions: \_\_\_\_\_

Frustration \_\_\_\_\_

Sadness \_\_\_\_\_

Events: \_\_\_\_\_

when I was laid off \_\_\_\_\_

when my Mom commented on my weight \_\_\_\_\_

Limiting Beliefs: \_\_\_\_\_

Nothing works for me \_\_\_\_\_

I have to suffer to lose weight \_\_\_\_\_