

Limiting Beliefs Worksheet

Name: _____ Date: _____



Write down one belief that is holding you back

When did this belief first develop?

What experiences reinforced this belief?

How does this belief affect your...

Daily actions:

Relationships:

Career/goals:

Emotions:

Examining evidence

What evidence **supports** this belief?

What evidence **challenges** this belief?

Transform your limiting belief into an empowering one

How do you feel about this new belief?

What pieces of evidence support this new belief?

What are 3 small steps to reinforce your new beliefs?

List people/resources that could help

Reflections