Background Information

This Workbook is part of the Healthy Expectations project, prepared by George Mason University’s Center for the Advancement of Public Health. Healthy Expectations emphasizes healthy transitions to college for first-year students. It incorporates a positive and proactive approach for students and intermediaries who seek to provide assistance to these students. Its innovative approach exposes students to legacy development, life health principles, and resource connectedness. Designed to complement traditional campus-based efforts, it is grounded in social norms marketing and life health planning theories.

To operationalize seven life health principles, the COMPASS: A Roadmap to Healthy Living CD-ROM and web-based resources were prepared. COMPASS ‘transforms’ the life health themes into 31 topics for direct application by first-year students. For each topic, COMPASS includes an essay by a Mason faculty/staff member, a reflection worksheet, a planning worksheet, and a web link to annotated listings of resources (at Mason, in the region, and nationally). The CD-ROM, distributed to all first-year students, also includes 360 inspirational quotes. The words behind COMPASS (Creating, Optimizing, Mapping, Planning, Achieving, Steering, Succeeding) are the foundation for engaging students proactively with life health planning.

The Workbook incorporates the reflection worksheet and the planning worksheet for each topic area, identified on the Listing of Topics page. The first worksheet, Looking Back: A Self-Reflection, provides students with the opportunity to review their past behavior and attitudes. The second worksheet Moving Ahead: The Challenge is designed to assist students with making specific plans for the future. The design of having 31 topics is such that each topic corresponds with a day of the month; students are encouraged to reflect upon their prior plans and progress on a monthly basis. This provides students with the opportunity to continue to improve, thereby maximizing their own success as they transition in college.

July, 2006
Listing of Topics

Optimism
Attitude
Self Esteem

Creativity
Self Responsibility

Values
Cultural Competence
Spirituality

Human Respect

Self- Care
Body Image
Drugs
Financial Management
Nutrition
Sleep
Time Management
Writing and Study Skills

Alcohol
Exercise and Fitness
Mental Health
Personal Safety
Stress and Relaxation
Tobacco

Relationship Health
Anger Management
Conflict Resolution
Interpersonal Relationship

Assertiveness
Etiquette
Sexual Decision Making

Community Health
Campus Involvement

Social Life & Activities

Nature
Natural World

Service
Career Planning

Volunteering & Leadership
OPTIMISM

WORKSHEETS
LOOKING BACK: A Self-Reflection

Attitude Worksheet

What contributes to your good attitude? When you are in a good mood, why are you in a good mood? What causes you to be in a bad mood?

Think about a time in the past when your attitude has helped you to achieve a goal. Has it ever hindered you in achieving a goal?

List 4 adjectives that you believe describe your attitude:
1. ____________________ 2. ____________________
3. ____________________ 4. ____________________

Are there adjectives that you didn’t write down that you wished you had to describe your attitude? If so, list them:
1. ____________________ 2. ____________________
3. ____________________ 4. ____________________

CHALLENGE

Take a walk around campus and find a comfortable place to sit where there are a lot of people you can observe. Pick at least three people that grab your attention. Write down what you observed about who they are just by watching the way they carry themselves. Do they have any characteristics in common? What made you notice them out of everyone walking by?

In the space below, describe a positive and successful attitude:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

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MOVING AHEAD: The Challenge

Attitude Worksheet

What affect do the following have on your attitude?

- Workload
- Exercise
- Responsibilities
- Relationships
- Music
- Finances
- Sleep
- Physical Setting

Which of these can you control? What can you do to prevent these from negatively affecting your attitude?

Use the space below to briefly describe your personal vision for your life over the next several years. What action steps do you need to take in order for this vision to become a reality? Finally, identify an individual with whom you are comfortable talking through this with.

__________________________________________________________________________________________
__________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

Take a few minutes to reflect on the vision you outlined for your life in the previous question. Now think about how you want to face the world. Does your current approach toward life and your vision match up? If so – great! If not, what do you need to do to align your attitude in order for you to realize your vision?

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Identify three daily practices that you are interested in incorporating into your daily routine. This could included something like a morning walk, daily meditation, yoga practice, martial art, etc. Once you’ve identified your top three, highlight one that you are going to commit to.

1._______________________________________________________________________
2._______________________________________________________________________
3._______________________________________________________________________

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www.compass.gmu.edu
FIND YOUR INTERESTS

How do you define creativity?

How creative of a person are you? Are you good at drawing, writing, thinking, dancing, music performance? Make a list of creative abilities you have:

1.___________________________________________________________________________
2.___________________________________________________________________________
3.___________________________________________________________________________
4.___________________________________________________________________________

What can you do to develop each one of these abilities?

1.___________________________________________________________________________
2.___________________________________________________________________________
3.___________________________________________________________________________
4.___________________________________________________________________________

What are the advantages of thinking “outside the box?” How can you increase your quality of life by making more creative decisions on a daily basis?

Think of others who you feel are creative. How are they creative? How do you think they got that way?
DEVELOP YOUR INTERESTS

The following worksheet will help you to explore and exercise your creativity. These simple activities should assist in strengthening your artistic processes, moving outside your comfort zone, and honing your creative forces. Try and feed your creativity by performing at least two of the following each week.

1. Look at things from a new perspective. Sit in a different place in the library, dining hall, coffee shop, study lounge, or class. Walk to class a different way. Notice things (animals, buildings, plants, signs, people) along each route.

2. Create a personal bulletin board. Post quotations, pictures, and cartoons that inspire you.

3. Work on a puzzle (such as a jigsaw, crossword, scrabble, acrostic, or word find).

4. Tune in to a radio station you’ve never heard before. Listen for at least an hour.

5. Try a new food at mealtime (something you’ve never tried before or think you won’t like). Cook using a new recipe, eat a new cuisine, or pick a new restaurant.

6. Move your watch or ring to the other arm for the day.

7. Buy a bound journal. Write or draw what you’re thinking or what you see each day.

8. Before bed, tell yourself “tonight I’ll remember my dreams.” As soon as you wake up, jot down two key things you remember from your dream. Gradually you’ll become a more productive dreamer/daydreamer.

9. Grab a camera and walk across campus, taking pictures as you go.


11. Brainstorm 25 alternative uses for a toothpick, newspaper, rubber band, or paper clip.

12. Take class notes using colored pencils or a different color pen – variety is the spice of life.

13. Doodle away! Add your own detail to the following figures.

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What does self-esteem mean to you?
_____________________________________________________________________________
_____________________________________________________________________________
How do you feel or react when you make a mistake? Do you forgive yourself easily based upon the nature of the mistake? Do you think about the future and consequences of the mistake? Can it be avoided or corrected?
_____________________________________________________________________________
_____________________________________________________________________________
Think about these terms and try to list down some situations that make you feel so.

<table>
<thead>
<tr>
<th>Sadness</th>
<th>Contentment</th>
<th>Surprise</th>
<th>Anger</th>
<th>Shy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excitement</td>
<td>Hopeless</td>
<td>Fear</td>
<td>Love</td>
<td>Joy</td>
</tr>
<tr>
<td>Conscious</td>
<td>Assertive</td>
<td>Guilt</td>
<td>Disgust</td>
<td>Safe</td>
</tr>
</tbody>
</table>

_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Do you accept and like yourself the way you are? Why or why not?
_____________________________________________________________________________
_____________________________________________________________________________

Is there anything you would want to change about yourself? What prompts you to think of these changes? What results do you expect in your self-esteem as a result of these changes?
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
### Self-Esteem Worksheet

**MOVING AHEAD: The Challenge**

What effect do the following have on your self-esteem?

- Workload
- Exercise
- Responsibilities
- Relationships
- Music
- Finances
- Sleep
- Physical Setting

Which of these can you control? What can you do to prevent these from negatively affecting your self-esteem?

Can you list some activities that make you feel accomplished? Do these activities have a lasting impact?

Can you identify people in your life that help you with your self-esteem? Do you have a mentor? Who can you consult when you need to work on your self-esteem and how it affects your daily activities and well-being?

What steps can you think of that are important to take in order to improve your self-esteem?
LOOKING BACK: A Self-Reflection

Self-Responsibility Worksheet

SETTING YOUR FOUNDATION

What does self-responsibility mean to you?

How have you shown self-responsibility in the past?

List a few situations (academically, family, or friend related) in your past where you didn’t get the result you wanted, below:

1. _______________________________________________________
2. _______________________________________________________
3. _______________________________________________________

Who did you think was responsible for the negative outcome? Why? In your response, were you quick to blame someone else – a teacher, parent, or friend? Was it really their responsibility? What role or responsibility did you have in the situation?

List a few situations in your past where you got the result you wanted, below:

1. _______________________________________________________
2. _______________________________________________________
3. _______________________________________________________

What accounted for that? Can you take credit? Why or why not? How did you demonstrate self-responsibility in order to achieve your goal?

How do you make decisions about what is right and wrong? Is this based on your core beliefs? Who directed you to determine what is right and wrong? How do you balance the teachings from your upbringing with your personal choices today? Reflect by writing a few sentences below:
BUILDING FOR THE FUTURE

As a college student, you will make more and more choices on your own. For example, you’ll be faced with decisions concerning finances, the type of company you keep, narrowing down a major to support your interests and life goals, etc. As you think about your choices concerning right and wrong, what changes would you like to make for your future? List them below:

1.___________________________________________________________________________
2.___________________________________________________________________________
3.___________________________________________________________________________
4.___________________________________________________________________________

College is a time of exploration and looking at new ways of behaving and thinking about things, challenging much of what you have done in the past. How will you balance this for yourself, what compromises will you make, and how will you maintain good relationships as you head in your new direction?

As you look forward, how will you maximize your ownership and responsibility for consequences in the future?

How can you resolve a situation in which others in positions of authority say something that you are doing is wrong, when you think it’s right?
VALUES

WORKSHEETS
FIRST THOUGHTS: WHEN KEEPING IT REAL GOES WRONG

1. One of the basic principles of the National Coalition Building Institute’s (NCBI) diversity training model is that we all carry records of misinformation about people who are different than we are. If we don’t confront this misinformation it keeps getting triggered, unconsciously, when we meet folks (Brown and Mazza, 35). For example some of the first thoughts that we have been taught are: women shouldn't be in charge, Jews are controlling, black men are dangerous, etc.

Challenge: Choose a group that you would like to work on for your own first thoughts:

• What were some of your first thoughts about this group?
• Think of a situation in which some of your negative first thoughts about a person’s group might get in the way of your building an effective relationship with that person.

2. Another core NCBI principle is that guilt is the glue that holds prejudice in place, meaning that rather than turning our energies outward so that we confront our prejudices, we instead direct our own bad feelings inward (Brown and Mazza, 3). Feeling bad does not help us confront our prejudices.

Challenge: Think back to a time when you said something hurtful or oppressive about another group and you were condemned for the comment.

• Describe what happened
• How could the person have approached you that would have made you less defensive?

3. Underneath every oppressive comment is some form of hurt – another NCBI principle. This challenges us to be reflective rather than reactive.

Challenge: Think of an example of an oppressive comment you have heard in the past year. What hurt might lie underneath the comment that might be fueling the oppressive mark (Brown and Mazza, 50).

IMPROVING CULTURAL COMPETENCE: ACTION STEPS AND GOALS

Two important positive and proactive aspects of cultural competency are: 1. finding out more about resources that can assist us in the process of our cultural literacy, and 2. serving as an advocate or ally when we witness oppressive language or actions towards others. Both of these aspects are powerful and assist on the journey to cultural competence.

Choose 4 of the following 8 action steps so that you can become a better ally to people outside your own group(s):

1. I will research some of the resources on my campus to become a better ally.
2. I will research some of the resources in my communities to become a better ally.
3. I will make a commitment to stopping offensive jokes when I hear them.
4. I will read some of the books and articles that are included in the resources list for improving Cultural Competence.
5. I will make a commitment to acknowledging that every person matters.
6. I will work on healing my own scars of mistreatment so that I can be a better ally to others.
7. I will work on stepping outside of my comfort zone.
8. I will commit to examining a hypocrisy in my own life and working to resolve that hypocrisy.

Which four action steps did you choose?

Why did you choose those four?

How will put these action steps into practice?

Who might you team up with so that you can discuss your progress, share resources, and/or work on these issues together?
LOOKING BACK: A Self-Reflection

Human Respect Worksheet

WE’RE ONE… WE CARRY EACH OTHER

1. Think of a person in your life for whom you feel great respect and admiration.

2. Name 3 to 5 qualities they have that you admire.

3. Consider the way in which these qualities are reflected in you. In what ways do you have and demonstrate the same qualities?

4. Name someone in your life that you have a really tough time liking or getting along with.

5. Name 3 to 5 qualities they have that you do not like.

6. Consider the ways in which these qualities are also part of your own character. In what ways do you have and exhibit the same qualities?

TAKING THE POWER BACK

1. Think of one time (this could be an early or recent life event) in which someone treated you badly. They may have used words or actions that hurt or simply treated you with less respect than you deserved. Briefly write a few notes to recall that person and situation.

2. In what ways do you carry any negative messages about yourself from this situation?

3. What message could you tell yourself that would be more accurate and true, giving you back your full respect as a human being?

SPIRIT: LOVING THE WORLD THROUGH US

1. When you think of what you currently believe about spirituality, a power greater than ourselves, perhaps using the word “God” (or perhaps not) to name this higher, divine force, what are the words or qualities that come to your mind?

2. Given your response to the question above, describe your reaction to the Eastern tradition of “Namaste: I salute the divinity in you which salutes the divinity in me.”

REAPING WHAT YOU SOW

Think of a time in your life when you were returned loving and respectful treatment from others as a result of feeling good about yourself as well as being generous to and respectful of those around you. This may not have been just from the specific people you treated well, but also from others around you.
RESPECT FOR OURSELVES
Increasing the amount of time when you feel self-respecting, more time when you remember your own basic worth and goodness, is important. In what current and potentially future situations are you likely to feel less than fully good about yourself?

1. Describe one situation.
2. How can you plan to help yourself remember and reclaim your self respect in this situation?
   • What positive messages, affirmations, or positive self-talk could you use?
   • Who are two supportive people you could talk with who would help you see your goodness in this situation?

REAPING WHAT WE SOW

1. Name a person, a relationship, a situation, or a group with whom you’re aware that you’ve thought and/or acted with less than full respect.

2. Remember, showing respect does not necessarily mean agreeing with someone or backing down from your principles. However, think hard about ways you can find the humanity in this person or group. What about them can you find to respect?

3. What could you do (independent of their opinions or actions) that would create a more respectful interaction with them?

4. As you approach this situation and/or people differently, see if you can notice any shift in how you are treated by them. If you see no difference in their behavior, notice ways in which you feel better about your part in the relationship. Stick with this! Old patterns are hard to break. See what positive changes you notice over the next weeks or months.

NOT A MINUTE TO HATE: PURSUITING SOCIAL JUSTICE

1. Looking over the list of national and international resources, name one justice-related cause or organization you believe in. If you have alternative social justice causes and/or organizations, name them.

2. Give two examples of ways you could possibly increase the level of your dedication/commitment to the work of this cause or organization over the next three months.

3. Now, get more concrete! Of the two examples above, state one thing you will do, and how and when you will do it.

4. Always remember what the Reverend Martin Luther King Jr. said: “Life’s most urgent question is: What are you doing for others?”
THE POWER OF MEMORY

You may still be unsure as to how spirituality truly affects your health. Even when you’ve found-how spirituality affects you, the what? How can you use this information to make your college years more enjoyable, memorable, and healthy? Drawing on memory may help you to find meaning. At the very least, noticing positive or negative patterns in your past can prompt you to make changes in your approach to developing spirituality.

MY SPIRITUALITY AS I REMEMBER IT

Describe your spirituality during childhood/adolescence:______________________________________________________
________________________________________________________________________________________________________

Describe your spirituality as a teenager:__________________________________________________________
________________________________________________________________________________________________________

WHAT I THINK ABOUT THESE MEMORIES NOW

Describe your reaction to your childhood/adolescent memories:___________________________________________________
________________________________________________________________________________________________________

Describe your reaction to your memories as a teenager:_______________________________________________________
________________________________________________________________________________________________________

________________________________________________________________________________________________________

Have you had any health concerns in your past that you can relate to your spirituality?________________________________________
________________________________________________________________________________________________________
CHARTING YOUR COURSE

What are your spiritual goals for the future? If you are interested in religion, you may wish to find a location where you can actively participate. Perhaps you’d like to sample different religions by attending a number of meetings or services. If meditation is your preferred method, you may want to look into yoga or relaxation techniques. You may choose to get creative! Finding another form of spiritual enhancement can be both challenging and rewarding. The possibilities are endless. The key to strengthening your spirit is being pure in body and mind. It is having an appreciation and respect for yourself and your community. It’s not necessary for you to subscribe to any one belief. The recipes for promoting good spiritual health are as diverse as we are. With this in mind, consider your spirituality now as well as where you’d like it to be in the near and distant future.

My current thoughts on spirituality: __________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

Create a list of things you’d like to do or activities you’d like to participate in to better explore or develop your spirituality.

Semester goals:
1._______________________________________________________________________________________
2._______________________________________________________________________________________
3._______________________________________________________________________________________
4._______________________________________________________________________________________

Academic year goals:
1._______________________________________________________________________________________
2._______________________________________________________________________________________
3._______________________________________________________________________________________
4._______________________________________________________________________________________
SELF-CARE

WORKSHEETS
When you look in the mirror what do you see? When you walk past a shop window and catch a glimpse of your body, what do you notice first? Are you proud of what you see, or do you think, I'm too short, I'm too fat, if only I were thinner or more muscular? Most people answer negatively. Reflect on the following questions.

1. Have you avoided sports or working out because you didn’t want to be seen in gym clothes? If so, why?
2. Does eating even a small amount of food make you feel fat?
3. Do you worry or obsess about your body not being small, thin or good enough?
4. Are you concerned your body is not muscular or strong enough?
5. Do you avoid wearing certain clothes because they make you feel fat?
6. Do you feel badly about yourself because you don’t like your body?
7. Have you ever disliked your body?
8. Do you want to change something about your body?
9. Do you compare yourself to others and “come up short?”

If you answered “yes” to 3 or more questions, you may have a negative body image.

Without mentioning your appearance, complete the following statements:

1. I love my body because...

2. I love myself because...

Make sure your answers aren’t about the way you look, or the parts of the body you have, but are about the things you and your body have the power to do. Reread the list and add to it often.
Regarding your weight and other body attributes, what habits and/or personal values would you like to keep the same?

1.____________________________________________________
2.____________________________________________________

What habits and/or personal values would you like to change?

1.____________________________________________________
2.____________________________________________________

Regarding your physical health, what habits and/or personal values would you like to keep the same?

1.____________________________________________________
2.____________________________________________________

What habits and/or personal values would you like to change?

1.____________________________________________________

List some good qualities that you have, such as compassion, open-mindedness, or innovation. Repeat these to yourself whenever you start to have negative feelings about your body.

1._____________________    2.__________________________
3._____________________    4.__________________________

List 3 reasons why it’s ridiculous for you to believe that other people are happier or “better” based on how much they weigh or how big they are. Repeat these reasons to yourself whenever you compare your body shape or weight to someone else’s.

1.___________________________________________________________
2.___________________________________________________________
3.___________________________________________________________
LOOKING BACK: A Self-Reflection

Alcohol Worksheet

When you think about your decisions regarding your use or non-use of alcohol, how were these determined? What, specifically, helped you make your previous decisions about alcohol?

Each individual is encouraged to make his or her own personal, informed choice. To what extent do you believe that your decisions are your own, and are informed?

Think back about yourself and your use/non-use of alcohol. If you ever used alcohol, think about the following items with respect to when these occurred, and the circumstances surrounding them (e.g., who you were with, where you were):

1. Your first taste of alcohol
2. Your first drink
3. The first time you became intoxicated
4. The second time you became intoxicated
5. The first time you set out to get drunk
6. When you believe you started to drink regularly
7. When some negative consequences happened, or you had something bad happen to you, because of your drinking

When you think about your responses to these questions, what does this tell you? Do you see any patterns? How do you feel about this? Does any of this concern you?

What do you consider to be “social use of alcohol”?

When does alcohol use become a problem? List specific attitudes or behaviors you believe are a problem from the following perspectives: (a) social; (b) emotional; (c) intellectual/cognitive; (d) physical; (e) legal; (f) safety; (g) ethical; (h) other.

How do you feel about someone who does not drink alcohol? What if this decision is conditional (i.e., the person drinks sometimes and not at other times)? What if this decision is for all circumstances?

What specific guidelines or standards help guide your decisions about when and where (i.e., conditions) to drink alcohol? Consider the following:

1. Whether or not you have to drive
2. Your academic responsibilities
3. Who you are with
4. Your physical status – tired, taking other medications or drugs, hungry, stressed
5. Reasons for use
6. Legal factors, such as the legal drinking age of 21
7. Other factors

Do you know anyone who you believe might have a problem with their use of alcohol? How do you feel about that?
In what ways does your use or non-use of alcohol help you to achieve your overall goals? How does it contribute to the attainment of your goals while at school? How does it hinder the attainment of these goals?

When you think about your pattern of use or non-use of alcohol, what changes would you like to make? These may have to do with the quantity used, frequency of use, negative consequences associated with use, legal considerations, interaction with friends and others, and how you feel both when drinking and afterwards.

1. List these changes that you would like to make.
2. As you review each change you would like to make, what or who would help you make the change? When would you like to make the change?

What behaviors with others’ use of alcohol do you see that are problematic for you? What can you plan to do about these behaviors? These might include modifying your perceptions and attitudes, talking with the person, and talking with a knowledgeable person about your concerns with that person.

If you think about your alcohol use or non-use, list specific benefits below regarding this. Also list specific drawbacks regarding your use of alcohol. Compare the two, and see how they relate to one another.

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Drawbacks</th>
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<td></td>
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</table>

What is your overall perception of alcohol? What role does it play in your life? What role does it play in the lives of those around you – friends, colleagues, family members? What role does it play in our society as a whole? How do you feel about these responses, and what would you be willing to try to change or sustain them?

Talk with other people about their perceptions of your use or non-use of alcohol. Find out what they say, and how these compare with your own perceptions of your use or non-use.
LOOKING BACK: A Self-Reflection

Drugs Worksheet

When you think about drug use overall, what are some of the reasons that people use drugs? Try to organize these in terms of the following areas:

Physical:

Social:

Cognitive / Mental:

Emotional:

When you think about your experience with drugs overall, what words best describe it? For example, think in terms of “extensive,” “limited,” “sheltered,” “wide open,” etc.

- Think about the previous question, and answer it with respect to “prescription drugs.” In what ways does your answer change?
- Now think of this in terms of “over the counter drugs.”
- Now try “illicit drugs.”
- What do your responses tell you about the term “drugs,” and what do they tell you about your overall background?

What words describe your feelings or attitudes about the use of each of the following?

Prescription drugs
Over the counter drugs
Illicit drugs (generally not accepted by society)
Illegal drugs
Use of prescription drugs for non-medicinal purpose
Designer drugs
Drug abuse

When you think about someone whom you believe is abusing drugs, or whom you believe has a problem with their drug use, what words best describe how you feel? What have you done about this? How do you feel about what you did or didn’t do?
Think about any experience you've had using drugs (prescription, over the counter, illicit, etc.). For each experience, identify the nature of the experience, what you expected to happen (what you were seeking), what actually happened, and alternative ways of seeking that same result that do not involve drug use.

Experience: Expected Result | Actual Result | Non-Drug | Alternative(s)
1. 
2. 
3. 
4. 
5. 
6. 

Drug use and drug abuse are large areas of study. What specific questions would you like to have answered? These may include short-term or long-term effects for any specific drugs, dependency concerns, how to prevent problems, or ways of responding to issues.

1. ______________________________________________________________________________________
2. ______________________________________________________________________________________
3. ______________________________________________________________________________________
4. ______________________________________________________________________________________
5. ______________________________________________________________________________________
6. ______________________________________________________________________________________

When you think about your own prior use (if any) of any drugs, what would you like to change? How easy or difficult would that be to change? What type of assistance would be helpful in making that change? Where could you seek additional information?

Think about someone who is using drugs (whether legal or illegal). What would you like to say to that person? How would you best approach that? Where could you get additional information or assistance so that your conversation with that person would be constructive and meaningful?
MY EXERCISE HABITS

How active or inactive are you in your regular life? List a few physical activities you enjoy.

What kind of activities did you participate in when you were growing up? Do these differ from the activities you currently enjoy?

Do you exercise? If so, which days of the week?

For how long do you engage in physical activity each day (minutes/hours)? Also list a few times during your weekly schedule in which you can take “mini exercise breaks.”

Days: Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday
Amount:

Can you list any habits that may be preventing you from getting more regular exercise?

1. _______________________________________________________
2. _______________________________________________________
3. _______________________________________________________

Do you have a physical activity routine?

What types of exercise do you engage in? Cardiovascular? Endurance? Do you include strength/resistance training, or flexibility/stretching exercises? How much of each are you doing? Create a list below:

1. Exercise:_________________________________________ Type:__________________
2. Exercise:_________________________________________ Type:__________________
3. Exercise:_________________________________________ Type:__________________
4. Exercise:_________________________________________ Type:__________________

How do you feel when you don’t exercise?
How will you change your exercise routine to incorporate the three main types of exercise into your schedule (cardiovascular, strength/resistance training, and flexibility/stretching exercises)?

Exercise 3 times a week for 2 weeks. What days do you plan to exercise? What changes in your schedule will you make in order to meet the recommended 30 to 60 minutes of moderate to vigorous exercise most days of the week? Will you wake up earlier? Will you use break time between classes? How will you reward yourself for meeting your exercise goals?

Once you begin your new routine, how do you feel? Do you notice any changes in your energy level? Your sleep patterns? Your appetite? Your studies? How can you measure the effectiveness of your exercise routine? If you don’t see results right away, will you continue? Why or why not?

MY TARGET HEART RATE

Monitor your heart rate immediately after finishing your workout, and then each minute for the following five minutes. How quickly does your body recover? Use the following example to calculate your target heart rate.

Example: 18 years old
200
-18
202 (maximum heart rate)
202 x (.60) = 121.2 lower limit
202 x (.85) = 171.7 upper limit

Are you meeting your target heart rate? Start at the lower end as a beginner then work toward the higher number as you increase your conditioning.

MY ACTIVITY LOG

<table>
<thead>
<tr>
<th>Date</th>
<th>Type of Physical Activity</th>
<th>Total Minutes</th>
<th>How I felt</th>
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</table>
SOURCES OF INCOME

List your sources of income here. Examples of sources of income include, but may not be limited to, money you earn from a part or full-time job, money you receive from your parents to help defray the cost of college, or money you receive from financial aid. Create a monthly and/or weekly average income by adding all of your sources together.

Income Source #1:___________ /Month:_______/Week:_______
Income Source #2:___________ /Month:_______/Week:_______
Income Source #3:___________ /Month:_______/Week:_______
Income Source #4:___________ /Month:_______/Week:_______
Total:_______ / Total:_______

LIST OF EXPENSES

List your expenditures here. These include the money you spend eating out at restaurants, on clothes, at the grocery store, gasoline costs, public transportation (bus or train) costs, going to the movies, buying new music, or supplies for school. They might also include rent, utilities, cable TV, or high speed internet costs. Once you compile the list, calculate the monthly and/or weekly amount spent on each item. Then, rate the item according to how necessary it is: 1 for extremely necessary, 2 for somewhat necessary, 3 for not necessary. Compare your monthly or weekly costs to the total above. If you have money left over, you’re in the “green” and are able to put this money in your savings account. If you don’t have enough money to cover your expenses, you’re in the “red” and should work on eliminating (or cutting down on) a few unnecessary expenses. If your expenses exceed the number of spaces provided, use a separate sheet of paper.

<table>
<thead>
<tr>
<th>Type of Expense</th>
<th>Amnt Monthly</th>
<th>Amnt Weekly</th>
<th>Rating</th>
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<tr>
<td>1.______________</td>
<td>$___________</td>
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<tr>
<td>Total:__________</td>
<td>Total:________</td>
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</table>
INCREASING YOUR INCOME
Are there ways you can increase your monthly or weekly income? Applying for financial aid, taking on another part-time job (as long as it doesn't interfere with your school work, of course!), or opening a special bank account that will accrue interest on your money are all examples of how you can increase how much money you have to spend each month.

GOALS
Creating goals is the first step to financial success. Create a list of goals for increasing your income below.
1. _______________________________________________________________________________________
2. _______________________________________________________________________________________
3. _______________________________________________________________________________________
4. _______________________________________________________________________________________ 

REDUCING YOUR EXPENSES
Have you found any unnecessary monthly/weekly expenses? How can you reduce these expenses or eliminate them altogether? How much money would you save by reducing or eliminating these expenses? More money in the bank means more money for a rainy day. You might need this money in the future for car expenses or a last minute plane ticket to see a good friend.

GOALS
Create a list of goals that will help you reduce or eliminate your unnecessary expenses. You may decide to go to the movies or eat out less each week. Making your own dinner can be less costly and healthy. Staying in and entertaining friends also costs less and can be just as much fun as going out to a movie or the mall. Once you’ve tried incorporating these changes into your month, revisit the “Looking Back” worksheet in this section and compare your new totals. How much money have you saved?

1. _______________________________________________________________________________________
2. _______________________________________________________________________________________
3. _______________________________________________________________________________________
4. _______________________________________________________________________________________

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LOOKING BACK: A Self-Reflection

Mental Health Worksheet

What does it mean to be “sound in body, mind and spirit”?

_____________________________________________________________________________
_____________________________________________________________________________

Think about an adult in your life (a parent, teacher, coach, mentor, etc.) who is “sound in body, mind and spirit.” What do you see that makes you conclude this? What do you think this person does to achieve this result?

_____________________________________________________________________________
_____________________________________________________________________________

When you think about how you live your life overall, in what areas do you think you are “in balance?” List them below:

1. __________________________________________
2. __________________________________________
3. __________________________________________
4. __________________________________________

In what areas do you think you are “out of balance?” List them below:

1. __________________________________________
2. __________________________________________
3. __________________________________________
4. __________________________________________

Think about the last year in your life when you were depressed about something. What was that situation? What brought on your feelings of depression? How was the situation resolved? What did you learn from the situation?
When you think about being more “sound in body, mind, and spirit,” you can increase this both immediately (in the short-term), and over the long-term. Identify specific ways in which you can do each of these below:

Ways in enhance soundness in body

*in the short-term*  *in the long-term*
1.  
2.  
3.  

Ways in enhance soundness in mind

*in the short-term*  *in the long-term*
1.  
2.  
3.  

Ways in enhance soundness in spirit

*in the short-term*  *in the long-term*
1.  
2.  
3.  

For each of the items above, where can you seek assistance? In what ways can you take advantage of courses, workshops, discussions, or individual interaction to enhance these?

When you think about areas where your life is “out of balance,” what action steps can you take to increase your level of balance?

1.  
2.  
3.  

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WHAT DO YOU EAT?

Make a list of things you’ve eaten over the past few days:
1.____________________________________________________
2.____________________________________________________
3.____________________________________________________
4.____________________________________________________
5.____________________________________________________
6.____________________________________________________
7._____________________________________________________
8.____________________________________________________

YOUR MEAL SCHEDULE

When do you eat? Why did you choose to eat these things? Were your meals well thought out or were they planned quickly to fit your schedule? Part of good nutrition is creating a consistent schedule for meals. List the time of each meal for each day below:

   Monday   (Breakfast):_________ (Lunch):_________ (Supper):_________
   Tuesday  (Breakfast):_________ (Lunch):_________ (Supper):_________
   Wednesday (Breakfast):_________ (Lunch):_________ (Supper):_________
   Thursday (Breakfast):_________ (Lunch):_________ (Supper):_________
   Friday   (Breakfast):_________ (Lunch):_________ (Supper):_________
   Saturday (Breakfast):_________ (Lunch):_________ (Supper):_________
   Sunday   (Breakfast):_________ (Lunch):_________ (Supper):_________

What do you consider your most important meal of the day? Why?

Do you make it a point to eat nutritious food? Do you look at nutritional information on the items you pick out at the grocery store?

How would you define “nutritious”?

To what extent do advertising, packaging, smell, or peers make a difference in your answer?
MOVING AHEAD: The Challenge

Nutrition Worksheet

Think about your current diet and all the things you would like to change about it. Identify ways in which you can improve your eating habits in the future:
1. ________________________________________________
2. ________________________________________________
3. ________________________________________________
4. ________________________________________________

SWITCH YOUR DIET FOR A WEEK

For one whole week, eliminate as much candy and processed sugar from your diet as possible, and try the following:

1. Eliminate fast food from your diet. Only eat good quality meat that is high in protein.
2. Eat five fruits and vegetables every day.
3. Drink 8 generous glasses of water every day.
4. If you want a piece of candy, try a piece of fruit or glass of juice instead.

After switching your diet, how do you feel? What are your reactions to the change? Has your concentration/energy level decreased or increased? Are there any other noticeable changes? Make a journal entry below:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Has your definition of “nutritious” changed after trying this new diet?

How can this new diet be used to positively influence your study habits? Exercise routine? Sleep habits?
LOOKING BACK: A Self-Reflection

Personal Safety Worksheet

SAFETY FOR YOURSELF

What does personal safety mean to you? Have you been in a situation where you or someone else’s personal safety has been threatened? What did you do?

Determine whether the following situations are safe or unsafe. Why are they safe or unsafe?

1. Your night class gets out later than usual, and there aren’t many students out and about. You’ve parked in an isolated lot on the other side of campus. A friend offers to walk you to your car, but you’ll have to wait about 20 minutes for them to finish with the professor. You’d like to take your friend up on his offer, but you really need to get home as soon as possible. You decide to take your chances and walk alone. (circle) safe/unsafe

2. During orientation you meet a very attractive guy. He gives you his phone number and asks for yours in return, which you give him. Because he wants to pick you up before your date, he asks you for your address. After some hesitation you tell him where you live. (circle) safe/unsafe

3. You drive into town alone during a bad rainstorm. On your way, you see an older women walking without an umbrella. She is carrying several heavy bags. You stop to offer her a ride. (circle) safe/unsafe

SAFETY FOR OTHERS

If you are a witness to a situation where someone else’s personal safety is threatened, what responsibility do you have to them? Why? How can you help? Determine your course of action for the following scenarios.

1. During your second night at home in your off-campus apartment, you hear a loud disturbance upstairs in the apartment above you. After listening further, you determine that someone is being domestically abused. What do you do? What is the ideal outcome for this situation?

2. As you walk to your car after classes, you notice a strange person loitering in the lot. The person is far enough away from you not to pose an immediate threat to you. What do you do? What is the ideal outcome for this situation?

3. You go on a double date with your best friend. As the night draws to a close, walking back to campus from the bar, your friend’s date suggests that she and he go back to his room. She expresses a bit of hesitation, but it seems as if she may give in to him. They have only recently started to date, but have known each other for almost a year. What do you do? What is the ideal outcome for this situation?
ACTION PLAN FOR YOUR SAFETY

What responsibility do you have for your personal safety? Make a list of ways in which you can better ensure personal safety on and off campus:

1. ______________________________________________________
2. ______________________________________________________
3. ______________________________________________________
4. ______________________________________________________
5. ______________________________________________________

ACTION PLAN FOR THEIR SAFETY

What responsibility do you have for the personal safety of others? Make a list of ways in which you can better ensure safety for others on and off campus:

1. ______________________________________________________
2. ______________________________________________________
3. ______________________________________________________
4. ______________________________________________________
5. ______________________________________________________

Part of personal safety is being prepared before situations to occur. You should also have a solid plan of action for when things get out of hand. For instance, if you are sexually harassed, assaulted, or stalked, what will you do?

How can you prevent it from happening again?
YOUR SLEEP HABITS

1. When do you usually go to sleep?
2. When do you usually wake up?
3. Do you have a bedtime routine? If so, what is it?
4. Do you worry at night?
5. Do you smoke?
6. In bed at night you (check all that apply):
   a. ___ Eat
   b. ___ Talk on the phone
   c. ___ Watch television
   d. ___ Listen to music
   e. ___ Drink one or more glasses of water

7. At night your bedroom is (check all that apply):
   a. ___ Dark
   b. ___ Quiet
   c. ___ Noisy
   d. ___ Bright

8. Days I sleep in (circle): M T W Th F Sa Su
9. Days I drink alcohol within 6 hours of bedtime (circle): M T W Th F Sa Su
10. Days I drink caffeine within 6 hours of bedtime (circle): M T W Th F Sa Su
11. Days I exercise (circle): M T W Th F Sa Su
12. Days I nap (circle): M T W Th F Sa Su
13. List other things that may affect your sleep:
   a. __________________________________________________________
   b. __________________________________________________________
   c. __________________________________________________________
   d. __________________________________________________________
YOUR SLEEP RESOLUTIONS

1. When do you plan to go to bed each night?

2. When do you plan to wake up each morning?

3. How many hours do you plan to sleep each night?

4. Which days do you plan to sleep in?

5. How will you plan or change your bedtime routine to encourage a healthy night’s sleep? What activities can you avoid? What things can you do to promote a healthy night’s sleep?

6. How will you schedule “worry time” into your day to ensure it does not interfere with your sleep?

7. What plans do you want to make about the use of caffeine, alcohol, or nicotine within 6 hours of bedtime?

8. What plans do you want to make regarding exercise? Do you plan on exercising during the day or at night? If at night, do you plan to exercise at least a few hours before bedtime?

9. How will you adjust your napping habits to ensure they do not interfere with your sleep?

10. List any other sleep resolutions:
    a. ____________________________________
    b. ____________________________________
    c. ____________________________________
    d. ____________________________________
LINKING PRIORITIES TO STRESS

Identify the top five “musts” in your life (financial, health, occupation, etc.) below. How much does each contribute to your stress level? Circle the number that corresponds to the “must” beside it (1 being the least amount of stress and 5 being the most amount of stress).

1. _______________________________________________________________________ 1 2 3 4 5
2. _______________________________________________________________________ 1 2 3 4 5
3. _______________________________________________________________________ 1 2 3 4 5
4. _______________________________________________________________________ 1 2 3 4 5
5. _______________________________________________________________________ 1 2 3 4 5

How do you react to stress? Do you get angry? Do you internalize it or shut down? Do you get anxious? Do you use chemicals (drugs or liquor)? Do you go shopping? Do you eat? List the 2 reactions you observe in your behavior the most:

1. _______________________________________________________________________________________
2. _______________________________________________________________________________________

How is the stress manifested? In your stomach? Do you get a headache? Do you lose or increase your appetite? List the 2 reactions you observe the most:

1. _______________________________________________________________________________________
2. _______________________________________________________________________________________

What ways have you best dealt with stress in the past? What ways work? How do others deal with stress that works? Whether it is something you have done or something you have seen someone else do, list a few ways to positively combat stress:

1. _______________________________________________________________________________________
2. _______________________________________________________________________________________
3. _______________________________________________________________________________________
LEARNING HOW TO REDUCE YOUR STRESS

Since stress can be cumulative and build up or be one large stressor, how can you reduce its effects?

How can you most effectively reduce stress in your life? Think in terms of behaviors, adaptation skills (skills of coping), attitude, and relationships. With respect to your top 5 “musts,” what can you do to ensure a lower stress level for each? List your ideas below:

1. ___________________________________________________
2. ___________________________________________________
3. ___________________________________________________
4. ___________________________________________________
5. ___________________________________________________

List 3 areas where you’ve felt tension in your body below. List ways in which you can reduce the particular tension, whether it is through relaxation, exercise, or imagery.

1. ___________________________________________________
2. ___________________________________________________
3. ___________________________________________________

Identify a few beliefs that may contribute to your stress:

1. ______________________________________________________________________
2. ______________________________________________________________________
3. ______________________________________________________________________

How can you change these?
LOOKING BACK: A Self-Reflection

Time Management Worksheet

ASSESSING YOUR TIME MANAGEMENT

List your top 4 priorities below:
1.______________________________________________________
2.______________________________________________________
3.______________________________________________________
4.______________________________________________________

The first step in developing successful time management skills is to track both your perception of time and how you actually use it. List all the activities that take up your time in a week. Be sure to include everything (some basic activities to include are listed below). In the space provided, estimate how much time you spend in each activity in a week.

1._____Sleeping
2._____Eating
3._____Classes
4._____Studying
5._____Work
6._____Personal Hygiene
7._____Commuting/Travel
8._____Socializing In Person
9._____Socializing – Computer/Phone
10.____Chores (Meal Prep/Cleaning)
11.____Other Activities

For one week, keep track of the time you spend in each activity.

At the end of the week, total your time in each activity. Compare the estimated time with the actual time. How good an understanding of time and how you spend it do you have?

Does the time spent reflect your priorities?

Are you spending enough time with your priorities to achieve your life goals?

There are 168 hours in a week. How does your time usage reflect a good balance of school, work, relationships and personal care with adequate sleep, exercise, nutrition, and personal time?
MANAGING YOUR TIME

Based on the information you’ve gathered and the tips provided, consider the changes you need to make with respect to how you manage your time.

Based on how you spend your week, are the priorities you gave in the self-reflecting worksheet the right ones?

How can you apportion your time each week so that you are balanced and meet your responsibilities?

Do you need to reduce your responsibilities?

What is likely to distract you from your priorities and time management strategies?

How can you anticipate these distractions? What steps can you take to minimize the distractions or head them off? List some possible solutions below:

1. ___________________________________________________________________
2. ___________________________________________________________________
3. ___________________________________________________________________
4. ___________________________________________________________________

How will you reward yourself when you have been able to establish and follow a schedule that fits for you and takes you in the direction you want to go?

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
When you think about your recent decisions about using tobacco, how satisfied are you?

a. If you are a non-user, how strong are you in your conviction to stay that way?

b. If you are an occasional user of tobacco, how do you feel about that choice?

c. If you are a regular user, is this what you really want? Do you want to quit using tobacco? Or, are you satisfied with your current decision?

How do your decisions about tobacco use or non-use affect your relationships with others? Do you choose friends, and do friends choose you, because of your choices about tobacco? What do you think of this?

How do you believe your decisions affect others’ behavior about tobacco use? What would you like your decisions to do?

What influences your decisions about tobacco use or non-use? To what extent do peers and friends affect this? What role do advertising and marketing efforts play? To what extent are your decisions truly that – your own?

If you want to change your decisions about tobacco use, what might help change them?

In what ways do you believe it is appropriate to talk with others about their decisions about tobacco use or non-use? What circumstances, if any, might warrant this discussion?
When you think about your decisions about tobacco use or non-use, what might you want to change?

When you think about getting involved with others about their decisions about the use or non-use of tobacco, what might you want to do differently with them in the future?

If you want to quit your use of tobacco products, how badly do you really want to quit?

If you are an occasional user of tobacco products, what do you want to do in the future? If you want to maintain your current level, how can you successfully manage that, so that your use does not increase? If you want to lower your use, what specific steps can you make to accomplish that?

If you think about your tobacco use, list specific benefits below regarding your use of tobacco. Now list specific drawbacks regarding your use of tobacco. Compare the two, and see how they relate to one another.

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Drawbacks</th>
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If you are a regular use of tobacco, what is it that you want to do regarding your future behavior – in the next month? In the next year? Within 5 years?

What specific action steps are you willing to think about, what are you willing to seriously consider, and what are you willing to commit yourself to doing in the relatively near future. Use the worksheet below to address these.

Action Step: Willing to…… (✓)

…seriously consider …think about …commit to

a.  
b.  
c.  
d.  
e.  
f.  

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LOOKING BACK: A Self-Reflection

Writing and Study Skills Worksheet

STUDY HABITS

What have your study habits been in the past?

List 5 things you have done particularly well with your study habits:
1.
2.
3.
4.
5.

List 5 things you would like to improve regarding your study habits:
1.
2.
3.
4.
5.

WRITING SKILLS

How skilled do you feel with writing different kinds of papers? Why or why not?

• Research  •Persuasive  •Informative  •Autobiographical  •Critical thinking  •Other

TEST-TAKING

What things are you most apprehensive about when it comes to taking tests or exams?
What kind of tests are you most comfortable with? What kind of tests are you least comfortable with?
How do you prepare for different kinds of tests or exams?

•Essay  •Multiple choice  •Short answer  •True/False  •Matching  •Fill-in  •Open book

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STUDY HABITS

For one week, take an inventory of how you study. Use the grid below to record all your studying habits and results; you'll need to expand this for multiple studying activities. Include every activity, even as short as 10 minutes.

<table>
<thead>
<tr>
<th>Topic / Class</th>
<th>Setting</th>
<th>Amount of Time</th>
<th>Accomplishment</th>
<th>Concern</th>
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At the end of the week, review your study inventory and identify any themes. These include the circumstances under which you did well, and areas where you had concerns. What do you observe? What changes would you like to make for the future?

Try some changes based on your initial inventory, and review the results. What do you conclude?

WRITING SKILLS

In what ways could you improve with your writing on different kinds of papers? Where could you gain assistance to improve your skills on these?

- Research
- Persuasive
- Informative
- Autobiographical
- Critical thinking
- Other

TEST-TAKING

Review your preparation for taking tests or exams. What are your habits? When do you start studying? How do you study? What has gone well and how can you benefit from improvement? What specific changes can you make to be more prepared for exams in the future? Identify 4 changes that you plan to make:

1. 
2. 
3. 
4.
RELATIONSHIP
HEALTH

WORKSHEETS
How do you feel about anger? Is it a negative thing? Can it be used positively?

What situations or issues make you angry? Why do they make you angry? Does anger help to resolve these situations or issues? If anger does help to resolve it, how does it do so? List a few things in life that make you angry:

1.___________________________________________________________
2.___________________________________________________________
3.___________________________________________________________

List a few specific situations in your past in which you got angry:

1.___________________________________________________________
2.___________________________________________________________
3.___________________________________________________________

For each of these situations, what caused you to get angry? What did the other person(s) do or say to make you angry? Do these situations correspond with your answer to the previous question? Was anger a positive or negative force here? Could the situation be resolved without anger? Did you experience regret or guilt?

Anger can be expressed in many different ways. List below the ways in which anger can be internalized. Are these constructive or unconstructive?

1.___________________________________________________________
2.___________________________________________________________

List below the ways in which anger can be outwardly expressed. Are these constructive or unconstructive?

1.___________________________________________________________
2.___________________________________________________________

How do you express your anger? Do you express it in the ways you listed above? Do you internalize or deny it? Do you diffuse it? Do you let it out? How does this make you feel?
Thinking about your self-reflective examples in which anger may have not been the best reaction, how can you prevent yourself from negatively expressing your anger before these situations occur? List possible solutions below:

1. ______________________________________________________
2. ______________________________________________________
3. ______________________________________________________

Make a list of 5 hypothetical situations in which you may encounter negative energy or stress. As you experience these situations, how do you see yourself dealing with them? How likely are you to get angry?

1. ______________________________________________________
2. ______________________________________________________
3. ______________________________________________________
4. ______________________________________________________
5. ______________________________________________________

Concerning how you express your anger (from the self-reflective worksheet), are you happy with your answer? Is there anything that you would like to change? How can you constructively express your anger in the future?
PASSIVE OR AGGRESSIVE?

List a few situations where you have been in disagreement with friends or family members. Depending on how you dealt with that situation, circle either “passive” or “aggressive.” Then, depending on the outcome, circle either “positive” or “negative.”

1. ____________________________ (circle) passive/aggressive | (circle) positive/negative
   Why do you consider your behavior passive or aggressive?

2. ____________________________ (circle) passive/aggressive | (circle) positive/negative
   Why do you consider your behavior passive or aggressive?

3. ____________________________ (circle) passive/aggressive | (circle) positive/negative
   Why do you consider your behavior passive or aggressive?

4. ____________________________ (circle) passive/aggressive | (circle) positive/negative
   Why do you consider your behavior passive or aggressive?

HOW DO YOU RESPOND?

In situations where disagreement exists, what is your normal pattern of response? Do you confront others constructively? Do you verbally attack them? Do you internalize by not responding? Do you listen more?

Whatever the answer, are you respecting your own needs? Write your thoughts here:
CHANGING YOURSELF FOR THE BETTER

Concerning your answers in items 1 to 4 of the self-reflective worksheet, for negative outcomes, what could you have done differently to influence a more positive outcome? Is there anything you can do to prevent a negative response in future situations? List a few possible solutions for each:

1. ______________________________________________________________________
2. ______________________________________________________________________
3. ______________________________________________________________________
4. ______________________________________________________________________

If you think you’ve exhibited passive or aggressive behavior in the past, what can you do to change your patterns of communicating?

What are the thoughts that might keep you from being assertive? Are you afraid you might hurt someone’s feelings? Are you afraid you might not get your way or feel in control? Write your thoughts below:

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Identify some healthier thoughts that could help you to be more assertive.
LOOKING BACK: A Self-Reflection
Conflict Resolution Worksheet

DEFINING CONFLICT

What comes to mind when you think of “conflict?” Is your image positive or negative? How do you view conflict? Do you believe it to be healthy or unhealthy? Why or why not? Write your thoughts here:
____________________________________________________________________________________
____________________________________________________________________________________

List a few conflicts that you have been involved in. Was it an external (ex) or internal (in) conflict? Was it a positive (pos) or negative (neg) conflict? Circle the appropriate choices.

1._____________________________________________________________(circle) ex/in (circle) pos/neg
2._____________________________________________________________(circle) ex/in (circle) pos/neg
3._____________________________________________________________(circle) ex/in (circle) pos/neg

Were you a witness to all sides of any external conflicts? Were the conflicts physical, verbal, or writing-based?

REACHING A RESOLUTION

How were each of these external or internal conflicts (identified above) resolved? List below any resolution strategies you used:

1.____________________________________________________________________________________
2.____________________________________________________________________________________
3.____________________________________________________________________________________

When should you avoid conflict?

When should you welcome conflict?
The next time you are involved in a conflict, do nothing – cool down, think about it, then come back to it later. Employ a few resolution strategies as seen in the conflict resolution section. Is the conflict easier to resolve by trying these? How do you feel about this?

ROOMMATE AGREEMENT

Living with others can be challenging at times. By setting boundaries or “house rules” in advance you may be able to avoid most conflicts. Use the following chart as an example.

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Signature 1.___________________________________________Date:_____________
Signature 2.___________________________________________Date:_____________
Signature 3.___________________________________________Date:_____________

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FIRST IMPRESSIONS

How do you define good manners?

How do you feel when you see someone with bad manners?

Name a good and bad manner for each of the following:

1. Correspondence
   • Good manner: ________________________________
   • Bad manner: ________________________________

2. Driving
   • Good manner: ________________________________
   • Bad manner: ________________________________

3. Cell phone use
   • Good manner: ________________________________
   • Bad manner: ________________________________

4. Eating out
   • Good manner: ________________________________
   • Bad manner: ________________________________

In a world of varying cultures, where manners differ from one culture to another, how does this affect your definition of good manners?

List a few situations in which you've seen others exhibit bad manners. Why do you think the manners were bad? Were these, in any way, related to that person's culture or personal experience?

1. __________________________________________________________________________
2. __________________________________________________________________________
3. __________________________________________________________________________
MOVING AHEAD: The Challenge

Etiquette Worksheet

LASTING IMPRESSIONS

List a few areas in which your manners could use some help:
1. ______________________________________________________
2. ______________________________________________________
3. ______________________________________________________

Which of these areas are most difficult for you? Why would you like to change?

What can you do to improve each one of these areas?
1. ______________________________________________________
2. ______________________________________________________
3. ______________________________________________________

Being a good world-citizen, how can you learn what good manners are (in an international context), particularly when you travel?

List a few personal traditions or customs that you have. Then list a corresponding tradition or custom from another country which may or may not be labeled as a “bad manner.” If it is a bad manner, what makes it a bad manner?

1. Your tradition/custom:___________________________________________
   Their tradition/custom:___________________________________________

2. Your tradition/custom:___________________________________________
   Their tradition/custom:___________________________________________

3. Your tradition/custom:___________________________________________
   Their tradition/custom:___________________________________________

Which of your manners might be considered “bad manners” by individuals from other countries? Why or why not?
WHAT ARE YOUR SCRIPTS?

What scripts do you use for the following people?
1. Friend
2. Parent
3. Teacher
4. Law Enforcement Agent
5. Grandparent

PICTURE THIS
Scenario #1: Picture yourself in a classroom. There is no teacher at the front of the room. Instead there is a note saying, “Your instructor is at one of the student desks. Can you locate your teacher?” What does the teacher, instructor, or professor look like to you? The images we have of those who know more than us feed into the scripts we use when we are speaking with them.

Scenario #2: Picture yourself in a park at night. You’ve been taking a late night run and decide it’s time for a short rest. Much of the park is poorly lit. In a lit section you notice two benches. There are only two other people in the park that you notice, each occupying one of the benches. A man with a baseball cap, dirty trench coat, and boots occupies one bench. A woman with a fur coat, tennis shoes, and backpack occupies the other. A pit bull sits by her feet. Assuming that you must sit down on one of the benches, which bench will you choose? Based on your decision, what scripts have you used in this scenario?

Scenario #3: Picture yourself driving to the supermarket on a rainy day. You are alone when you see an older woman caught in the rain. She is carrying several grocery bags and appears to be struggling. Based on the fact that you are adamant against picking up hitchhikers due to safety reasons, will you stop to help her? Based on your decision, what scripts have you used in this scenario?

REFLECTING

How has your script for each of the scenarios above evolved over the years? Can you think of any situations or events that may have caused you to perceive any of these people in a unique way? Were the experiences negative or positive? Have you encountered or known other people in any of those groups who exhibit or don’t exhibit the same qualities?
MOVING AHEAD: The Challenge

Interpersonal Relationships Worksheet

SWITCHING THE SCRIPT: EXERCISES

In college, we refer to oral or written communication as “discourse.” Choose a few of the following strategies to improve your interpersonal abilities:

1. Switch your script: Experiment with speaking to everyone you come in contact with the same way, your little brother, your professor, your dog, your boss, your romantic partner, your parent or guardian. It’s tougher than you think.

   What are your reactions?

2. Try not speaking for one full hour. Don’t hide out in your bedroom! Surround yourself with friends, parents, or others you interact with on a daily basis. Gauge how they react. You’ll realize how important words are to communication.

   What are your reactions?

3. Yell everything you say for a few minutes instead of saying things in a normal tone. This will give you an immediate feeling of the emotional carriage that our words travel in and how it affects our “discourse.”

   What are your reactions?

4. Make a list of a person’s body language queues (with their consent) while you are in a conversation with them. Then discuss with them what their body was or was not telling you. It may surprise you both.

   What are your reactions?

5. Apologize for something that is hard for you to be sorry about. The simple and humane act of saying “I’m sorry” can be highly liberating. When was the last time someone got angry at you for saying you were sorry?

   What are your reactions?
LOOKING BACK: A Self-Reflection

Sexual Decision-Making Worksheet

HOW DO YOU FEEL ABOUT SEX?

Have you had sex? Why or why not?

If you've had sex in the past, do you continue to have sex now? Have you chosen to be celibate? Why or why not?

If you have had sex in the past, think back to your first sexual experience. What part(s) of the experience are you happy with? What part(s) of the experience do you regret? What decisions, if any, would you do different now based on what you know? Why?

What feelings do you associate with sex? List them below:

1. _______________________________________________________
2. _______________________________________________________
3. _______________________________________________________
4. _______________________________________________________
5. _______________________________________________________
6. _______________________________________________________

Think back to a situation in which you had been given the chance to have sex but said “no.” How did it make you feel? Do any of these feelings correspond with those in your list above?

If you’ve had sex in the past, think back to a sexual encounter. How did it make you feel? Do any of these feelings correspond with those in your list above?

List 3 positive things associated with having sex:

1. _______________________________________________________
2. _______________________________________________________
3. _______________________________________________________

List 3 risks associated with having sex:

1. _______________________________________________________
2. _______________________________________________________
3. _______________________________________________________

How do the “positives” and “risks” compare? Do the positives outweigh the risks? Do the risks outweigh the positives?
MOVING AHEAD: The Challenge

Sexual Decision-Making Worksheet

GETTING INFORMED ABOUT SEX

How can you stay more informed about sex and sexual decisions? List a few ways in which you can be educated in order to avoid making unsafe sexual decisions:

1. ___________________________________________________________
2. ___________________________________________________________
3. ___________________________________________________________

Use the following 12 questions to help you prepare for future sexual decisions. Circle “yes” or “no” to each question.

1. yes/no  Are you sexually active?
2. yes/no  Do you have condoms and know how to use them?
3. yes/no  Do you use condoms when you have sex (if applicable)?
4. yes/no  Do you know how to prevent an infection or unplanned pregnancy?
5. yes/no  Are you comfortable discussing the number of partners you’ve had with your partner?
6. yes/no  Are you comfortable discussing sexually transmitted diseases with your partner.
7. yes/no  Do you feel as if having sex makes you an adult?
8. yes/no  Are you worried that saying “no” to sex will make your partner mad or disappointed?
9. yes/no  Do you trust your partner?
10. yes/no  Do you understand the risk you are taking when you choose to have sex?
11. yes/no  Are you emotionally, mentally, and physically ready for sex?
12. yes/no  Are you making a conscious decision based on facts when you have sex?

How do these questions, and your responses, help you plan for the future? Do they help you look at sex from different angles? How do you look at sex after completing this exercise?

How comfortable would you feel talking about your responses with friends? How about with family members?

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COMMUNITY HEALTH

WORKSHEETS
LOOKING BACK: A Self-Reflection
Campus Involvement Worksheet

ACTION EXERCISE

Get your hands on a copy of the organization contact list from the appropriate department. Pick at least three organizations you are interested in and record information about each one (names and contact phone numbers) here:

1. ____________________________________________________________
2. ____________________________________________________________
3. ____________________________________________________________

Make it your goal to contact each of these organizations and find out more information about meeting times, activities, and membership. Then, get involved!

NARROWING IT DOWN

Out of all the activities/clubs/organizations you participated in after completing the previous action exercise, which ones were you most interested in? Why did these particular activities hold your interest?

1. ____________________________________________________________
2. ____________________________________________________________
3. ____________________________________________________________

GETTING SOMETHING GOOD OUT OF IT

Take a look at your answers to see how they might relate to your future goals and career path. Do some of these activities provide insight into the particular field of work you might like to explore? Did the interactions you had with fellow students help you learn about communicating with a diverse group of people? Make a list of the skills you might gain or develop from taking part in these activities on a regular basis.

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

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MOVING AHEAD: The Challenge

Campus Involvement Worksheet

ACTION EXERCISE

What types of activities have you found most interesting in the past? Why?

1._________________________________________________________________________
2._________________________________________________________________________
3._________________________________________________________________________
4._________________________________________________________________________

Out of all of these activities, are there some that you haven’t been able to do? What roadblocks have you encountered that have kept you from doing these?

1._________________________________________________________________________
2._________________________________________________________________________
3._________________________________________________________________________

FINDING THE RIGHT ORGANIZATION

Which on campus activities and organizations might allow you to explore these particular interests?

1._________________________________________________________________________
2._________________________________________________________________________
3._________________________________________________________________________
4._________________________________________________________________________

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LOOKING BACK: A Self-Reflection

Social Life and Activities Worksheet

IT’S ALL ABOUT WHAT YOU LIKE TO DO

What activities and/or events did you most enjoy in high school?
1. _____________________________________________________
2. _____________________________________________________
3. _____________________________________________________
4. _____________________________________________________

What activities and/or events did you not take part in and now wish you had?
1. _____________________________________________________
2. _____________________________________________________
3. _____________________________________________________
4. _____________________________________________________

GET SOCIAL

What does having a social life mean to you?
What do you want your social life to be like in college?
What activities will help you have the kind of social life you desire?
How can you get involved in these activities?

A FEW HELPFUL SUGGESTIONS

1. Next time a Faculty member announces an activity or an event that they will attend, try to make con-
tact with that faculty member.
2. Ask various upperclassmen to suggest one activity/event that you shouldn’t miss out on before you
graduate.
3. Go to an educational program, or an athletic or cultural performance that you wouldn’t normally
choose to go to at least once a month.
MOVING AHEAD: The Challenge
Social Life and Activities Worksheet

WORKSHEET

What’s a reasonable number of activities or events you could participate in per week given your class, studying, work schedule and other time commitments? Notice that “0” is not an option!

1____ 2____ 3____ 4 or more_____

Keep track over the next few weeks what activities and events you plan on attending and which ones you actually attended. Pay attention to what kept you from attending things you wanted to attend and what helped you go to the things you ended up going to.

<table>
<thead>
<tr>
<th>Activity/Event</th>
<th>Plan on attending:</th>
<th>Actually attended:</th>
<th>Recommend/Will go again: If not, why?</th>
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Take a look at the six areas of the wheel mentioned in this section. Which areas will help you move toward your future goals?

1.____________________  3.____________________
2.____________________  4.____________________

How will each of these areas help you move toward your future goals?

1.________________________________________________________________________________________________________
2._________________________________________________________________________________________________________
3._________________________________________________________________________________________________________
4._________________________________________________________________________________________________________

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LOOKING BACK: A Self-Reflection
Engaging in the Natural World Worksheet

1. When you think of “the natural world”…
   a. What words come to mind?
   b. What images come to mind?
   c. What feelings come to mind?

2. How would you describe your relationship with the natural world? To what extent do you sense its beauty, its power, its awe, its delicateness, and its resilience? In what ways might you be able to strengthen your relationship with the natural world?

3. Think about the greatest joys that you have experienced in life. What are these? What settings or elements are most common among these? How often do you get to enjoy these? How do you feel about this frequency – is it too little, too great, or just about right?

4. During the past week, on how many occasions did you think specifically about the natural world around you? When you think of the most recent occasions, identify whether your view was generally positive, generally neutral, or generally negative. What do you conclude from this observation?

Recent Thoughts About the Natural World
Reaction (positive, neutral, negative)

5. How do you think others would describe you if they talked about your relationship with the natural world? Would they say that you respect nature? Why? How do you feel about this?

6. On how many occasions in the last year have you intentionally sought out something awe-inspiring in nature? This may have included a sunrise, a sunset, a walk on the beach or in the woods, or something similar. Identify these below.

Awe-Inspiring Event When
MOVING AHEAD: The Challenge
Engaging in the Natural World Worksheet

1. What are your definitions of success? What is the role of nature in this?

2. What is your favorite place in the world? Why? What qualities make it a special place for you? How can you bring some of these qualities around you into your current life?

3. What can you do to increase the joys in your life? Think about the types of joys you can experience, how often you can experience them, and the quality of them.

4. Name three things you would like to change about the world. What, specifically, can you do to help this change occur? Where can you learn more, how can you get involved, and what can you do?

5. In the section about the natural world, three specific activities were identified. Think about each of these, and identify what you think is most appropriate for you during the next three months.

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<th>Willing to Consider</th>
<th>Planning to Do</th>
<th>Did It – Reaction</th>
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<tr>
<td>Keep a Nature Journal:</td>
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<td>Do a Solo Sit:</td>
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<tr>
<td>Take a Discovery Hike:</td>
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6. A common saying when hiking a trail is to “Leave only footprints; take only memories.” How might this apply to your daily life on campus? How might this apply to the daily routines in your life, including transportation, use of facilities, recycling, conservation, and more?

7. What is the most important environmental issue to you? What, specifically, are you willing to commit yourself to do about it?
SERVICE

WORKSHEETS
LOOKING BACK: A Self-Reflection
Career Planning Worksheet

WHAT CAREERS INTEREST YOU?

Of all of the people you’ve come into contact with, are there professions or careers that stand out? Which of these professions or careers interest you? Once you find a few interesting careers, do they seem satisfying to you? Make a list of your top five career/profession interests, then assign the major that you think best fits:

1. ___________________________ Major: _________________________
2. ___________________________ Major: _________________________
3. ___________________________ Major: _________________________
4. ___________________________ Major: _________________________
5. ___________________________ Major: _________________________

WHAT ARE YOU SKILLED AT?

What creative skills do you possess? Are you good at working with your hands, are you an artist, do you enjoy writing, or are you an incredible cook? What technical skills do you possess? Are you good at math? Do you enjoy working with computer software, circuits, or mechanical devices? Are you good at memorizing things? Make a list of your top five skills, whether creative or technical, then assign a career that you think best fits:

1. ___________________________ Career: _________________________
2. ___________________________ Career: _________________________
3. ___________________________ Career: _________________________
4. ___________________________ Career: _________________________
5. ___________________________ Career: _________________________

Linking interests with careers and careers with majors can help you make sense of everything. Use this information to determine what major is best for you. Do you have an academic advisor or professional mentor who can help you sort all of this out?

Academic advisor’s name: __________________________________________

Professional mentor’s name: _________________________________________

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DEVELOP NEW SKILLS

Learning new skills and finding new interests is something we all continue to do throughout our lives. What skills would you like to learn from an internship, work, volunteer, campus activity, or other experience? List the new skills you would like to develop in the future:

1. ______________________________________________________
2. ______________________________________________________
3. ______________________________________________________
4. ______________________________________________________

ACHIEVE YOUR GOALS

Everyone has goals that he or she would like to achieve in life. Whether it is to write a book, find the cure for cancer, raise a family, or build the tallest skyscraper in the world, everyone has at least one goal that he or she would like to achieve in life. What would bring you personal satisfaction? What would keep you challenged? List your life goals:

1. ______________________________________________________
2. ______________________________________________________
3. ______________________________________________________
4. ______________________________________________________

Do your life goals correspond with your ideal career? Will the skill set you develop assist you to achieve your goals?

Where do you see yourself in 5 years? 10 years? 20 years? When do you see yourself achieving your goals? Will your career assist you to achieve your goals?

What professions would you like to get more information about? What resources might you use to get this information (career services/academic department/internet)?

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LOOKING BACK: A Self-Reflection
Leadership and Volunteerism Worksheet

What does volunteering mean to you?  What do you expect to get out of volunteering?
________________________________________________________

What does leadership mean to you?  In your opinion, what qualities must a leader possess?
________________________________________________________

List any volunteer projects you have participated in:
1. _____________________________________________________
2. _____________________________________________________

List any leadership positions that you have held:
1. _____________________________________________________
2. _____________________________________________________

Why did you get involved? What appeals to you the most – getting involved locally, nationally, or internationally?
________________________________________________________

Were these experiences positive or negative? What benefits did you get from volunteering? For each of your previously stated experiences, determine whether it was positive or negative, and list any benefits you received:
1. (circle) positive/negative benefits gained:_________________________
2. (circle) positive/negative benefits gained:_________________________

What skills do you think you have that makes you a leader? What are some areas that you can develop in to be a better leader?
________________________________________________________
________________________________________________________

With respect to volunteering now, what are your biggest challenges? Are you low on time? Does volunteering seem overwhelming? Do you not know how to get involved?
________________________________________________________

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MOVING AHEAD: The Challenge
Leadership and Volunteerism Worksheet

How important is it for you to be involved in the community? What motivates you to lead and volunteer?
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

What skills, benefits, or experience would you like to gain from volunteering? List your goals here:
Goal 1. ________________________________________________________________________________
Goal 2. ________________________________________________________________________________

If volunteering is important to you, what type of volunteer experience are you looking for? What type of agency would you like to work with? Make a list of the types of agencies you are interested in:
1. __________________________________________________________________________________
2. __________________________________________________________________________________
3. __________________________________________________________________________________
4. __________________________________________________________________________________

What specific changes do you wish to create once you are an influential leader? How will this help the community that you are trying to influence?
________________________________________________________________________________________
________________________________________________________________________________________

How can you get started? Using the information you gather for each group above, contact each one and inquire about opportunities. Discuss with your contact each of your goals to determine whether or not the opportunity is a good match. List your prospects here:
Prospect 1. _____________________________________________________________________________
Prospect 2. _____________________________________________________________________________
Prospect 3. _____________________________________________________________________________
Prospect 4. _____________________________________________________________________________

You may even want to see how this experience can help you with your academics. Can you get credit for volunteering? Can you use your experience to write a good paper for class?

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