Name: _____ Date: _____

What Do I Feel?

J D E S U C O F N U J Y Q E L D G
C R D A I W N B N Z Y H D H E R O
O J E S D U U A A R U F S S F H V
N G T H A E X R G R P E P R E U E
F N S A M U T N T W E A K C E M R
I I U M D D A A H A I R G S R I W
D V G E E Y H L L R P F T A F L H
E O S D S R A N B O P U S D C I E
N L I Q S E P W S R S L S R X A L
T A D B E T P K O G B I E K V T M
I N H A R T Y U L D X A L S L E E
G X W D T I D K L U F E P O H D D
I I X H S B H Y L E N O L H E A G
C O N T E N T S G N I L E E F R S
M U D E U L A V K Y S V H J I Q B
R S S U R P R I S E D Q O E B I M
Y B P D E S S E R P E D F I O N R

Overwhelmed
Disgusted
Feelings
Despair
Lonely
Free
Humiliated
Surprised
Ashamed
Fearful
Proud
Weak
Unfocused
Isolated
Content
Bitter
Grief
Hurt
Confident
Stressed
Anxious
Loving
Happy
Sad
Depressed
Helpless
Hopeful
Valued
Angry
Bad