

EMOTION REGULATION WORKSHEET 14A (p. 1 of 3)

([Emotion Regulation Handout 20a](#))

Target Nightmare Experience Forms (Set of 3)

Due Date: _____ Name: _____ Week Starting: _____

In the space provided below, describe the distressing dream in as many details as possible. Include sensory descriptions (sights, smells, sounds, tastes, etc.). Note the feelings, images, and thoughts associated with this dream, including assumptions about yourself. Be as specific as possible. Note when the dream begins and when it ends. (Use the back of this sheet if necessary.)

In my dream, _____

Changed Dream Experience Form

Due Date: _____ Name: _____ Week Starting: _____

In the space provided below, describe the changed dream in as many details as possible. Include sensory descriptions (sights, smells, sounds, tastes, etc.). Please note the feelings, images, and thoughts associated with this dream, including assumptions about yourself. Be as specific as possible. Be sure the change you put in occurs *before* anything traumatic or bad happens to you or others in the nightmare. Note when the dream begins and when it ends. (Use the back of this sheet if necessary.)

In my dream, _____

(continued on next page)

