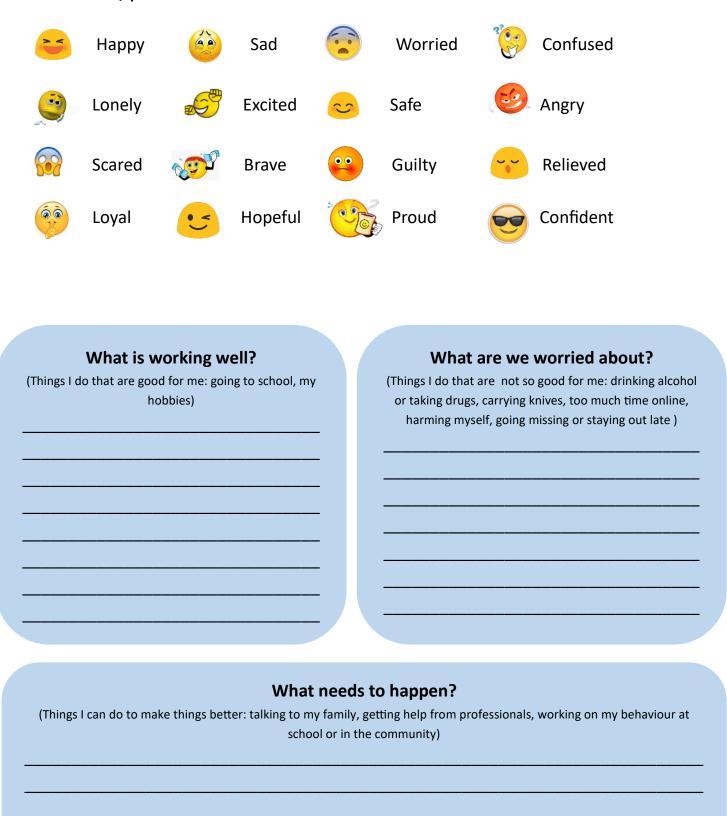
How safe do I feel?

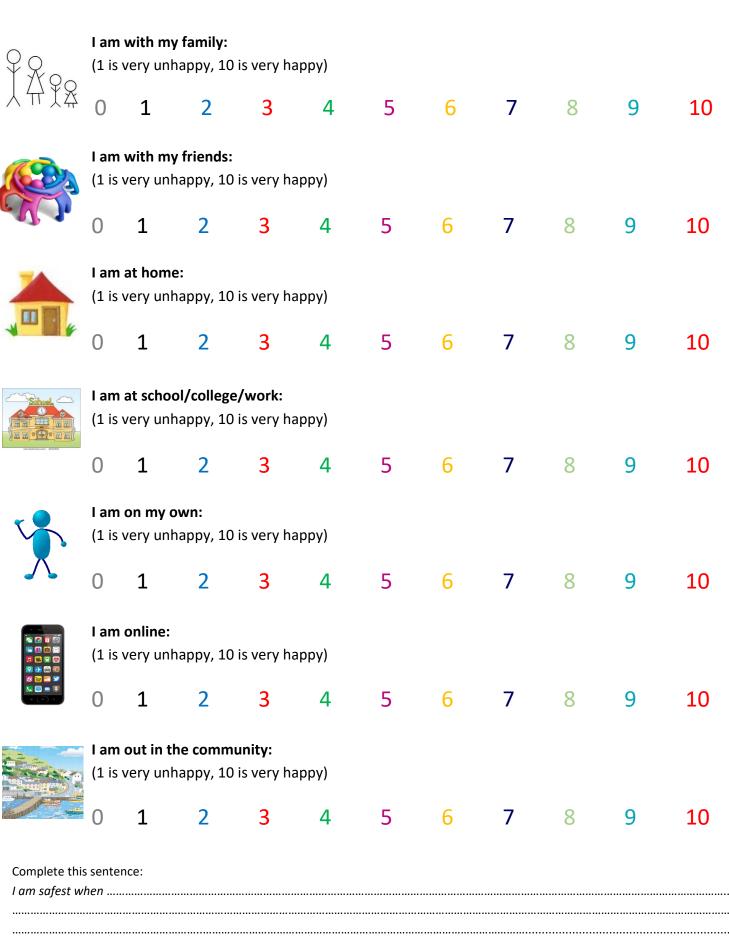
	e: Who are	my friend	ls?		
ho are the mos	t important peop	le to me?			
At sch	nool		At home		In the community
Why?	nents that are mo			My friends use	My family/carers like my friends
My friends offend or commit ASE	friends loknow or My friends l	ends are older me	My friends to school	drugs or alcohol I can say no to my friends	I sometimes feel scared when I am out with my friends
\sim	arties where are people I	I have friend carry weap	s who mostly ons. friends have asked	Vounger	stop me doing silly things

Section Two: How am I feeling?

Circle the words / pictures that I feel are most like me:



How do I feel when:



If I felt unsafe at home or when I was out, I would

Section Three: My future



List 3 goals for my future, what do I want to achieve?

	1.)	
THIS WAY THAT WAY ANOTHER WAY	2.)	
	3.)	
People who	can help me achieve my goals:	
Signatu	re:	Date: