



≡ BOUNDARY BUILDER ≡

DATE _____

TIME _____

Notice what felt wrong. Name your limit. Say it clearly.

1. WHAT HAPPENED?

2. WHAT FELT OFF?

- | | |
|--|--|
| ☐ Tone / disrespect | ☐ Pressure |
| ☐ Too much contact | ☐ Privacy crossed |
| ☐ Boundary ignored | |
| ☐ Other: _____ | |

3. WHAT AM I PROTECTING?

- | | |
|----------------------------------|---|
| ☐ Peace | ☐ Recovery |
| ☐ Time | ☐ Money |
| ☐ Energy | ☐ Body |
| ☐ Privacy | ☐ Emotional safety |

4. WHAT BOUNDARY DO I NEED?

5. HOW CAN I SAY IT CLEARLY?

I am not available for... _____

I need... _____

If this happens again, I will... _____

6. IF THEY IGNORE IT, WHAT WILL I DO NEXT TIME?

7. SUPPORT I MAY NEED

- | | | | | |
|-----------------------------------|--|--|-----------------------------------|---|
| ☐ A script | ☐ A safe person | ☐ Time to think | ☐ Distance | ☐ Professional support |
|-----------------------------------|--|--|-----------------------------------|---|



A boundary is not punishment. It is protection.



LET'S HEAL TOGETHER!

Nova Wellness Collection Inc.

For reflection and self-support; not a substitute for professional care.