Participant ID\_

Date \_

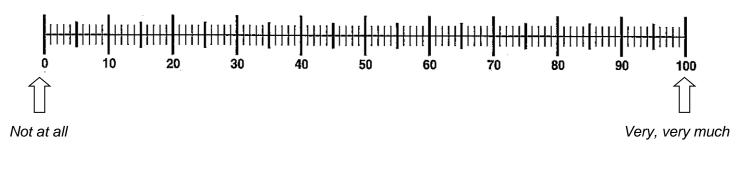
## **Feeling Loved**

Please answer the following questions.

Do you feel loved? [\_] Yes [\_] No

Please indicate how loved you feel today on the scale below. Simply put an "X" on the scale at the point that best captures how loved you feel, on average.

How loved do you feel?



Do you love yourself? [\_] Yes [\_] No

We also want you to indicate how much you love yourself today on the scale below. Again, simply put an "X" on the scale at the point that best captures how much you love yourself, on average.

## How much do you love yourself?

