

Name: \_\_\_\_\_

## **Death and Grieving**

### **Activity #1 - Thinking About Death**

*To learn more about your thoughts and feelings about death, complete the following statements:*

1. Death is:
  
2. I would like to die at:
  
3. I don't want to live past:
  
4. When I die, I would like to have at my bedside:
  
5. When I die, I will be proud that when I was living I:
  
6. My greatest fear about death is:
  
7. When I die, I'll be glad that when I was living I didn't:
  
8. If I were to die today, my biggest regret would be:
  
9. When I die, I will be glad to get away from:
  
10. When I die, I want people to say:

### **Activity #2 - Life/Values/Goals**

*As you think about your death and as you see your life now, try to answer the following.*

1. What three things would be said about you and your life if you died today?
  - a.
  - b.

c.

2. Given the likelihood that you will not die today, and have time left to change some things in your

life, what three things would you most like to have said about you and your life?

a.

b.

c.

3. If someone were to witness a week of your life, what assumptions would that person make about

your values?

a.

b.

c.

4. What values do you hold that are not evident from the way you live your life?

a.

b.

c.

5. What three goals are important to you as you plan your life?

a.

b.

c.

6. What keeps you from achieving what you want for your life?

a.

b.

c.