Control Log

Name: _____

Date: _____

1. **ACTIONS:** Briefly describe the situation and the actions you used to control your partner (statements, gestures, tone of voice, physical contact, facial expressions).
_____

2. **INTENTS AND BELIEFS:** What did you want to happen in this situation?
_____

   What beliefs do you have that support your actions and intents?
_____

3. **FEELINGS**: What feelings were you having?
_____

4. **MINIMIZATION, DENIAL, AND BLAME**: In what ways did you minimize or deny your actions or blame?
_____

5. **EFFECTS**: What was the impact of your action?
   On you_____
   On the other person _____
   On others_____

6. **PAST VIOLENCE**: How did your past use of violence affect this situation?
_____

7. **NON-CONTROLLING BEHAVIORS**: What could you have done differently?
_____