

Awakening Forgiveness

Resolving Bitterness

STEP 1: WHO

On a separate sheet of paper, list the names of each person who has offended you in the past.

STEP 2: WHAT

What did they do? Under their name, briefly describe the offense.

STEP 3: HOW

How or what did you feel when you were offended? Using the emotional word list, choose two to three words for each offense.

STEP 4: PRAY

Begin praying through your list, using the Pattern for Prayer on the following page.

Below is a list of possible offenders as well as a sample of how your list might look.

Possible Offenders

- ◆ Father
- ◆ Mother
- ◆ Step-parents
- ◆ Siblings
- ◆ Relative (grandparent, aunt, uncle, cousin, etc.)
- ◆ Friends
- ◆ Neighbor
- ◆ Teacher, fellow classmate, school experience
- ◆ Employer, fellow employee
- ◆ Pastor, church leader, fellow believer, church situation
- ◆ Spouse
- ◆ God
- ◆ Myself
- ◆ Other

Sample

1. Father
 - Never measured up.
 - ◆ Failure
 - ◆ Worthless
 - ◆ Hopeless
2. Mother
 - Slapped me in front of friends.
 - ◆ Embarrassed
 - ◆ Stupid
 - ◆ Disgraced
3. Employer
 - Cheated me out of overtime pay.
 - ◆ Angry
 - ◆ Disrespected
 - ◆ Insignificant
4. ETC.

Pattern for Prayer

Use the following suggestions as a guide and let the Holy Spirit lead as you pray.

- Pray from your heart not your head. Ask the Lord to help you pray from your heart.
- Pray out loud through each offense separately.
- Tell the Lord that you choose to forgive your offender. Tell Him their name, what they did and how the offense made you feel.
- Recognize and acknowledge the pain that you felt.
- Release him or her from the debt of the offense and the pain it caused.
- When you finish your list ask the Lord to show you anything else you need to forgive. Pray through anything He reveals.
- Ask the Lord to take back any ground you gave to the enemy and yield that ground to God's control. (Eph. 4:27)
- The final step, when you can honestly do so, is to ask the Lord to bless your offender. (Ro. 12:14; 1 Cor. 4:12)

Suggested Prayer

This prayer is only a guide.

Allow the Spirit to lead as you pray and put it into your own words.

"LORD Jesus, I choose to forgive (who) for (what) causing me to feel (how).

I am willing to release (who) from the debt that I feel (who) owes me. (Who) has no obligation to me anymore. I gladly transfer all of this pain and the consequences that I have suffered to You, LORD Jesus. Thank you for being willing to take it.

LORD Jesus, I choose to confess my unforgiveness against (who) as sin. I ask You to take back the ground I gave in that area of my heart and I yield it to Your control".

Emotional Words

Mark the words you experience S for sometimes; O for often; or A for always. If you have never experienced the feeling, leave it blank. When answering the positive, DO NOT include your relationship with God.

Negative

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Abandoned | <input type="checkbox"/> Disgraced | <input type="checkbox"/> Irate | <input type="checkbox"/> Sad |
| <input type="checkbox"/> Afraid | <input type="checkbox"/> Disliked | <input type="checkbox"/> Left out | <input type="checkbox"/> Scared |
| <input type="checkbox"/> Agitated | <input type="checkbox"/> Disrespected | <input type="checkbox"/> Lied to | <input type="checkbox"/> Shameful |
| <input type="checkbox"/> Alarmed | <input type="checkbox"/> Embarrassed | <input type="checkbox"/> Like an | <input type="checkbox"/> Stupid |
| <input type="checkbox"/> Angry | <input type="checkbox"/> Empty | <input type="checkbox"/> Annoyance | <input type="checkbox"/> Terror |
| <input type="checkbox"/> Annoyed | <input type="checkbox"/> Enraged | <input type="checkbox"/> Manipulated | <input type="checkbox"/> Tense |
| <input type="checkbox"/> Anxious | <input type="checkbox"/> Exasperated | <input type="checkbox"/> Misunderstood | <input type="checkbox"/> Trapped |
| <input type="checkbox"/> Apprehensive | <input type="checkbox"/> Exposed | <input type="checkbox"/> Nervous | <input type="checkbox"/> Unacceptable |
| <input type="checkbox"/> Ashamed | <input type="checkbox"/> Failure | <input type="checkbox"/> No good | <input type="checkbox"/> Unappreciated |
| <input type="checkbox"/> Avoided | <input type="checkbox"/> Fearful | <input type="checkbox"/> Not valued | <input type="checkbox"/> Unfit |
| <input type="checkbox"/> Bad | <input type="checkbox"/> Flawed | <input type="checkbox"/> Offended | <input type="checkbox"/> Unlovable |
| <input type="checkbox"/> Can't trust anyone | <input type="checkbox"/> Forgotten | <input type="checkbox"/> Out of control | <input type="checkbox"/> Unnoticed |
| <input type="checkbox"/> Confused | <input type="checkbox"/> Frustrated | <input type="checkbox"/> Overwhelmed | <input type="checkbox"/> Unsafe |
| <input type="checkbox"/> Controlled | <input type="checkbox"/> Good-for-nothing | <input type="checkbox"/> Panic | <input type="checkbox"/> Upset |
| <input type="checkbox"/> Defective | <input type="checkbox"/> Gross | <input type="checkbox"/> Pessimistic | <input type="checkbox"/> Vile |
| <input type="checkbox"/> Dejected | <input type="checkbox"/> Heavyhearted | <input type="checkbox"/> Powerless | <input type="checkbox"/> Violated |
| <input type="checkbox"/> Despairing | <input type="checkbox"/> Helpless | <input type="checkbox"/> Provoked | <input type="checkbox"/> Vulgar |
| <input type="checkbox"/> Desperate | <input type="checkbox"/> Hopeless | <input type="checkbox"/> Put down | <input type="checkbox"/> Worthless |
| <input type="checkbox"/> Despondent | <input type="checkbox"/> I don't belong | <input type="checkbox"/> Rage | <input type="checkbox"/> Worried |
| <input type="checkbox"/> Devastated | <input type="checkbox"/> Ignored | <input type="checkbox"/> Rejected | Other |
| <input type="checkbox"/> Dirty | <input type="checkbox"/> Infuriated | <input type="checkbox"/> Repulsive | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Discouraged | <input type="checkbox"/> Insecure | <input type="checkbox"/> Resentful | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Disgusting | <input type="checkbox"/> Insignificant | <input type="checkbox"/> Revengeful | <input type="checkbox"/> _____ |

Positive

- | | | | |
|--------------------------------------|---------------------------------------|------------------------------------|--|
| <input type="checkbox"/> Abundant | <input type="checkbox"/> Delighted in | <input type="checkbox"/> Merry | <input type="checkbox"/> Strong |
| <input type="checkbox"/> Accepted | <input type="checkbox"/> Desirable | <input type="checkbox"/> Needed | <input type="checkbox"/> Tranquil |
| <input type="checkbox"/> Adored | <input type="checkbox"/> Desired | <input type="checkbox"/> Peaceful | <input type="checkbox"/> Treasured |
| <input type="checkbox"/> Admired | <input type="checkbox"/> Exhilarated | <input type="checkbox"/> Pleasant | <input type="checkbox"/> Trustworthy |
| <input type="checkbox"/> Appreciated | <input type="checkbox"/> Fearless | <input type="checkbox"/> Poised | <input type="checkbox"/> Unconditionally |
| <input type="checkbox"/> Assured | <input type="checkbox"/> Focused on | <input type="checkbox"/> Precious | <input type="checkbox"/> loved |
| <input type="checkbox"/> Authentic | <input type="checkbox"/> Forgiving | <input type="checkbox"/> Protected | <input type="checkbox"/> Valuable |
| <input type="checkbox"/> Belonging | <input type="checkbox"/> Free | <input type="checkbox"/> Pure | <input type="checkbox"/> Valued |
| <input type="checkbox"/> Calm | <input type="checkbox"/> Glad | <input type="checkbox"/> Relaxed | <input type="checkbox"/> Wanted |
| <input type="checkbox"/> Cared for | <input type="checkbox"/> Gentle | <input type="checkbox"/> Respected | <input type="checkbox"/> Whole |
| <input type="checkbox"/> Cheerful | <input type="checkbox"/> Good | <input type="checkbox"/> Safe | <input type="checkbox"/> Worthy |
| <input type="checkbox"/> Cherished | <input type="checkbox"/> Happy | <input type="checkbox"/> Satisfied | Other |
| <input type="checkbox"/> Confident | <input type="checkbox"/> Intelligent | <input type="checkbox"/> Secure | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Content | <input type="checkbox"/> Joyful | <input type="checkbox"/> Serene | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Courageous | <input type="checkbox"/> Lighthearted | <input type="checkbox"/> Smart | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Delighted | <input type="checkbox"/> Loved | <input type="checkbox"/> Special | <input type="checkbox"/> _____ |