

# Behavior Reflection Sheet

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

## Staff Member Notes:

What happened?

- Not on task
- Not following directions
- Not using kind words
- Being disrespectful
- Pushing or hitting
- Out of seat/area
- Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Student Reflection:

How are you feeling?



Scared



Angry



Sad



Worried

Draw/write about what happened:

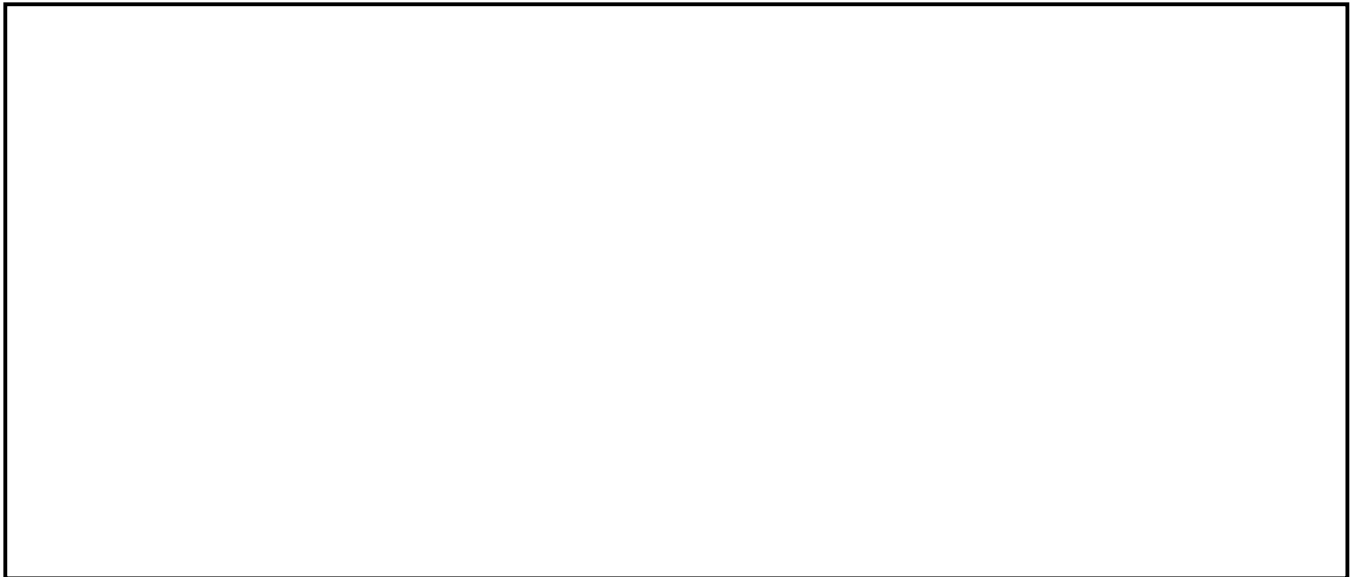
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**Draw/write about plan to fix behavior:**



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