

My Behavior Reflection

Name: _____ Date: _____ Teacher: _____

What Happened Today?

Check the box that matches what happened:

- | | |
|---|--|
| <input type="checkbox"/> I talked when I should have been quiet | <input type="checkbox"/> I got out of my seat without asking |
| <input type="checkbox"/> I didn't follow directions | <input type="checkbox"/> I was unkind to a classmate |
| <input type="checkbox"/> I didn't keep my hands to myself | <input type="checkbox"/> I interrupted the teacher or a friend |
| <input type="checkbox"/> I didn't do my work | <input type="checkbox"/> Other: _____ |

When Did This Happen?

- | | | |
|---------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Morning work | <input type="checkbox"/> Reading time | <input type="checkbox"/> Math time |
| <input type="checkbox"/> Lunch/Recess | <input type="checkbox"/> Specials (PE, Art, Music) | <input type="checkbox"/> Other: _____ |

Why Did I Make This Choice?

Circle the face that shows how you felt:



I made this choice because: (Check one or write your own)

- | | |
|--|---|
| <input type="checkbox"/> I was bored | <input type="checkbox"/> I wanted attention |
| <input type="checkbox"/> I forgot the rule | <input type="checkbox"/> I was frustrated |
| <input type="checkbox"/> I wanted to talk to my friend | <input type="checkbox"/> I didn't understand what to do |
| <input type="checkbox"/> Other: _____ | |

Who Did My Choice Affect?

My choice affected: (Check all that match)

- | | | |
|--------------------------------------|--|--|
| <input type="checkbox"/> Me | <input type="checkbox"/> My teacher | <input type="checkbox"/> My classmates |
| <input type="checkbox"/> My learning | <input type="checkbox"/> Other people's learning | |

What Should I Have Done Instead?

Next time, I should:

- Raise my hand and wait
- Keep my hands to myself
- Follow directions the first time
- Stay in my seat

- Ask permission before getting up
- Listen when others are talking
- Use kind words
- Ask for help when I'm confused

My Plan for Tomorrow

Tomorrow I will:

If I start to make the same choice again, I will:

- Take 3 deep breaths
- Count to 10
- Ask for a break
- Remember this reflection

I Can Do Better!

I am ready to:

- Apologize to anyone I hurt
- Try again tomorrow
- Follow the rules
- Make good choices

Student Signature: _____ Date: _____

Teacher Signature: _____ Date: _____

Parent Signature: _____ (Please sign and return tomorrow)

Parent/Guardian Section

Dear Family, Your child completed this reflection today. Please discuss their choices and plan with them at home. We're working together to help them make better choices!

Parent Comments:
