Behavior Reflection Form

Name: ________________________________ Date: _______________________

Please answer in complete sentences using your best writing.

1. What did I do?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

2. How often does this happen? Circle one.

very often                  sometimes                  rarely

3. Why was this inappropriate? What problems did it cause?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

4. Two things I will do differently next time to help me are the following:

______________________________________________________________________
______________________________________________________________________

Teacher Signature: ___________________________________________________________

Teacher Comments (optional): __________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Parent Signature: ____________________________________________________________

Parent Comments (optional): __________________________________________________
___________________________________________________________________________
___________________________________________________________________________

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