



Name _____

Date _____ Teacher _____

Arrival _____ Return _____ Host Initials _____

Please check the expectation that was not being followed.

- We are Safe
- We are Respectful
- We are Responsible

What were you doing?

What should you have been doing?

Do you need help following the expectation? YES NO

Student Signature _____

Parent Signature _____
(as needed)



Name _____

Date _____ Teacher _____

Arrival _____ Return _____ Host Initials _____



Draw a picture showing what you did.



Draw a picture showing what you should have done.

In the future you will...



Parent Signature _____
(as needed)

Reflection Sheet

Name:

Date:

Teacher:

What happened?

What were you thinking at the time of the incident?

What have you thought about since?

Who has been affected by what happened, and how?

What about this has been the hardest for you?

What do you think needs to be done to make things as right as possible?

Parent Signature _____
(as needed)