

# Weekly Behavior Log

Student Name: \_\_\_\_\_

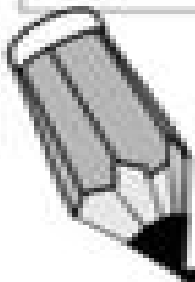
Week of: \_\_\_\_\_

## Daily Report:

Monday	Tuesday	Wednesday	Thursday	Friday
Initials	Initials	Initials	Initials	Initials

## End of the Week Report:

O = Outstanding	S = Satisfactory	N = Needs Practice
Follows directions the first time		Raises hand to speak and takes turns speaking
Works independently and uses time wisely		Produces neat, quality work
Demonstrates self control		Stays in personal space at table and on carpet



Parent Signature: \_\_\_\_\_

\_\_\_\_\_  
Please sign on Friday and return to school. Thank you!