NAME: DATE:

MY SCHOOL BEHAVIOR CHECK-IN

- ☐ Listening carefully
- ☐ Completing assignments
- ☐ Raising my hand before speaking
- ☐ Waiting patiently for my turn
- ☐ Staying in my assigned area
- ☐ Following classroom rules
- ☐ Showing respect to adults
- ☐ Staying on task
- ☐ Treating classmates kindly
- ☐ Following directions the first time
- ☐ Managing my emotions
- ☐ Solving problems peacefully
- ☐ Keeping my workspace organized
- ☐ Using an appropriate voice
- ☐ Asking for help when needed
- ☐ Being prepared for class
- ☐ Staying awake and alert
- ☐ Avoiding distractions
- ☐ Using kind words
- ☐ Cooperating with others

WHAT CAN YOU DO TO MAKE POSITIVE CHANGES?

1. _____
2. _____
3. _____
4. _____
5. _____