**Think It Through**

Personal Reflection on my Behavior

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| What I did… |

Was it:

 **Safe**? Yes No **Respectful**? Yes No **Responsible**? Yes No

|  |
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| How did my choice affect others…  |

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| This is what I will do differently next time… |

Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_