Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_   Date: \_\_\_\_\_\_\_\_\_\_\_     Time: \_\_\_\_\_\_\_\_   Location: \_\_\_\_\_\_\_\_\_

           My Think Sheet

|  |  |
| --- | --- |
| 1. **How are you feeling?**Circle one: | Use Circle Breathing if you need to: |
| 2. **What was the expected behavior?**  Draw a picture:  (Staff member can also write for the student) |  |
| 3. **What was your behavior?**  Draw a picture:  (Staff member can also write for the student) |  |

**Are you feeling calm and ready to Respect yourself, others, and our School?**

**Circle when you are ready:** Yes

Optional debrief with teacher: How did your behavior affect others around you?

For Staff Only:  **Location:\_\_\_\_\_\_\_\_\_\_\_\_\_ Time of Day: \_\_\_\_\_\_\_\_\_\_\_\_       # of Think Time Forms Completed: \_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
| **Unexpected Behavior:** | **Possible Motivation:** |  |  |
| □ Disrespect | □ Avoid Adult(s) | | □ Obtain Adult(s) Attention |
| □ Defiance/Insubord./Non-comp. | □ Avoid Peer(s) | | □ Obtain Items/Activities |
| □ Disruption | □ Avoid Task | | □ Obtain Peer Attention |

**Others Involved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Notes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_