

**CTA GOODMAN ELEMENTARY SCHOOL
SELF-REFLECTION FORM
(Think Time)**

Name _____ **Date** _____

Classroom Teacher _____

☹ What did I **choose** to do?

On what **level** did I act? _____

Did my **choice help me accomplish**
what I need to do?

yes no

4 – DEMOCRACY

- Responsible
- Works Independently
- Helpful and caring to others

3 – COOPERATION

- Listens
- Follows Directions
- Participates

2 – BOSSING/BULLYING

- Bullies others
- Bothers others
- Must be bossed to behave

1– ANARCHY

- Out of control
- Noisy
- Unsafe

☺ What is the **different choice** I will make next time?

(see back)

STUDENT SIGNATURE

CLASSROOM TEACHER SIGNATURE

SPECIALS AREA TEACHER (IF APPLICABLE)

PARENT OR GUARDIAN SIGNATURE

Please self reflect with your child, sign, and return this form to school the next day. Thank you for your support with the Levels of Responsibility Ladder.