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

Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Where did it happen?   * Assembly * Bathroom * Café * Classroom * Hallway * Playground * Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | What Happened:  ­­­­­­­­­­­­­­­­­­­­­ | I was (feeling): |
| Before I went to SSR, my teacher tried:   * Take-A- Break * Visit Buddy Teacher * Met with Me * Helped Me Try Again * Visit my We Connect Teacher   **Now I have to:**  ­­­­­­­­­­­­­­­­­­­­­ | I forgot to show:   * PRIDE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * SAFETY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * SELF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Next Time I Feel \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, I will:  ­­­­­­­­­­­­­­­­  ­­­­­­­­­­­­­­­­­­­­­ |