

Name: _____ Teacher: _____ Location: _____ Date: _____ Time: ____:____

What happened?

What did you want?

What were you thinking at the time?

Rule(s) **violated?** CHECK



Who was affected by what you have done? **How?** Think about everyone who is involved.

How will you make things right with those involved?

What tool(s) will you use to help you next time? CIRCLE



How will the tool(s) help you next time?

I understand that it is my **responsibility** to follow the rules.

Student Signature: _____

Teacher Notes: Check: ___First Offense ___Second Offense* ___Third Offense* ___Major Violation (admin)*