

Name: _____

Teacher: _____

Week of: _____

For each question below, circle the number to the right that best fits your opinion on the student behavior observed for the week. Use the scale above to match your opinion.

1	NEEDS IMPROVEMENT
2	FAIR
3	GOOD
4	VERY GOOD
5	EXCELLENT

1. PRACTICED GOOD ATTENTION SKILLS IN CLASS <i>DEFINED AS: MAINTAINED FOCUS TO TASK FOR _____ MINUTES DURING WHOLE GROUP</i>	1	2	3	4	5
2. PRACTICED GOOD LISTENING HABITS <i>DEFINED AS: SAT IN SEAT, LOOKED AND LISTENED FOR _____ MINUTES DURING WHOLE GROUP INSTRUCTION</i>	1	2	3	4	5
3. FOLLOWED DIRECTIONS WITH LESS THAN 2 PROMPTS	1	2	3	4	5
4. WORKED INDEPENDENTLY FOR _____ MINUTES	1	2	3	4	5
5. COMPLETED ASSIGNMENTS ON TIME	1	2	3	4	5
6. OVERALL CLAIMED APPROPRIATE SHARE OF TEACHER ATTENTION	1	2	3	4	5
7. GOT ALONG WELL WITH OTHERS ON PLAYGROUND	1	2	3	4	5
8. WORKED WELL WITH OTHERS IN CLASS GROUPS	1	2	3	4	5
9. RESPECTED OTHERS RIGHTS AND FEELINGS	1	2	3	4	5
10. FOLLOWED GENERAL SCHOOL RULES	1	2	3	4	5

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