

Responsible Thinking Refocus Form

Tuba City Elementary School

Grade K - 2

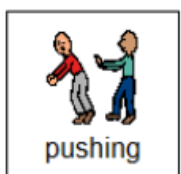
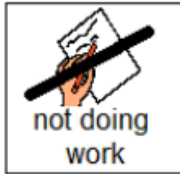
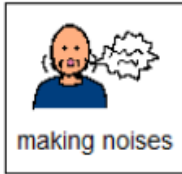
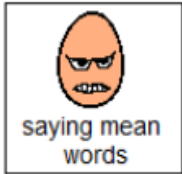
Student/Grade: _____

Date/Time: _____

Homeroom Teacher: _____

Referred by: _____

I was:



Other: _____

It made OTHERS feel:



sad



hurt



mad



scared

How I felt:



Sad



hurt



mad

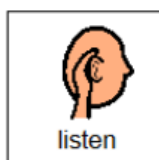
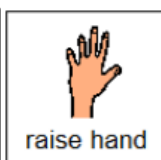
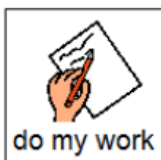


scared

I did it because _____

Is this okay to do in school? Yes No

What I can do next time:



Other: _____

Student Signature: _____

Date: _____

Responsible Thinking Refocus Form

Tuba City Elementary School

Grade K - 2

Date: _____

Dear Parent of _____

The purpose of the Refocus form is to allow students time to reflect on issues and behaviors that affect the classroom learning environment. A student issued this form must complete it and have it signed by his/her parents. We would like you to talk to your child about their behavior and what they could have done to prevent this incident. This form must be returned to the school within the following day.

Thank you, _____, Classroom Teacher

This is what we have planned at home to help my child.

Parent Signature: _____

Date: _____