

KING'S HIGH SCHOOL
Student Behavior Self-Reflection
Guided Choice

Name _____

Date _____

What did I do? (*acknowledgment*) _____

What can I do to prevent its happening again? (*choice*) _____

What will I do in the future? (*commitment*) _____

(Charles, C.M. *Building Classroom Discipline, Eighth Edition*. "Marvin Marshall's Discipline through Raising Responsibility", 2001)

I, _____, have discussed my action, choice, and commitment with my teacher, Mr. Thompson. He supports my efforts to be responsible for my choices at school by praying and guiding me with love, care, and respect.

Student Signature

Teacher Signature

Dear _____,

I want to let you know *how your student is being responsible for his/her actions, choices, and commitments* at school. What a privilege and joy to have _____ in my class!

Please review and discuss with your child his/her student behavior self-reflection. Please email mhthompson@crista.net, call the school (206) 546-7241 or my home (206) 542-1601 if you want to further discuss your child's behavior self-reflection.

For His Service,
Mr. Mikel Thompson

Dear Mr. Thompson,

We support our child's efforts to be responsible for his/her choices at school.

Date

Parent Signature