

Name: _____

Date: _____

CREC Academy of Computer Science & Engineering Restorative Reflection Sheet

1. What happened?

2. What were you thinking at the time?

3. How were you feeling at the time?

<input type="checkbox"/> Angry	<input type="checkbox"/> Excited	<input type="checkbox"/> Confused	<input type="checkbox"/> Sad
<input type="checkbox"/> Anxious	<input type="checkbox"/> Happy	<input type="checkbox"/> Scared	<input type="checkbox"/> Disappointed
<input type="checkbox"/> Embarrassed	<input type="checkbox"/> Tired	<input type="checkbox"/> Irritated	<input type="checkbox"/> Disengaged
Other: _____			

4. How are you feeling now?

5. What did you need at the time?

Name: _____

Date: _____

6. Who did your actions affect? (Check all that apply)

<input type="checkbox"/> Students Name(s) _____
<input type="checkbox"/> Teacher(s) Name(s) _____
<input type="checkbox"/> Administrator(s) Name(s) _____
<input type="checkbox"/> Para(s) Name(s) _____
<input type="checkbox"/> Other Name(s) _____

7. How did your actions affect them?

8. If the situation were to happen again, what would you do differently to have your needs met?

9. What can you do now to make things right?

10. Who should participate in repairing the harm that was caused?
