

Student's Name _____ Gender _____ DOB _____ Grade _____

Person Completing this Form _____ Relationship to Student _____

Date of Rating _____ School/Organization _____ Classroom/Program _____

This form describes a number of behaviors seen in some students. Read the statements that follow the phrase: *During the past 4 weeks, how often did the student...* and place a check mark in the box underneath the word that tells how often you saw the behavior. Please answer each question carefully. There are no right or wrong answers. If you wish to change your answer, put an X through it and fill in your new choice as shown to the right. A "Never" response can mean that you have never observed the student engaging in that behavior or that the student does not engage in that behavior.

Never	Rarely	Sometimes	Often	Almost Always
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Item #	<i>During the past 4 weeks, how often did the student...</i>	Never	Rarely	Sometimes	Often	Almost Always
1.	contribute to creating a positive learning environment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	listen to others?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	do the right thing in a difficult situation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	express high expectations for themselves?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	show a willingness to examine their beliefs and opinions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	persist to achieve a goal?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	make others feel welcome or included?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	speak positively about their future potential?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Recommendations _____
