

# Ada Harris Reflection Form

"THE CARDIFF WAY: EVERY STUDENT, EVERY DAY"

Student:

Teacher:

Date:

## Reason for Reflection Form (completed by staff)

- ☐ Disrupting Learning ☐ Refusing Work ☐ Peer Conflict ☐ Safety/Physical ☐ Disrespectful  
☐ Other \_\_\_\_\_  
☐ Parent Signature Required \_\_\_\_\_

## Describe what happened in your own words:

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## How were you feeling:

- ☐ Frustrated ☐ Angry ☐ Embarrassed ☐ Trying to be funny ☐ Impulsive ☐ Left Out ☐  
Other \_\_\_\_\_

What did you want to happen?

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## Who was affected?

- ☐ Me ☐ Another student ☐ My teacher ☐ The class ☐ My friends ☐ Staff Member

How do you think this made them feel?

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How can you make this better?

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- ☐ I am ready to rejoin my class and uphold the Cardiff Way.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature:\_\_\_\_\_Date:\_\_\_\_\_