

Name:

Date:

**Nute High School and Library
Nute Middle School
Reflection Sheet**

What did I do? Please include: what I did, where I was and who else was involved

What was it that I really wanted or needed?

What was the result of what I did? How did it affect the teacher and the class?

What could I have done differently?

1. _____

2. _____

My Signature _____

Office Use Only

Return to class when completed or Stay in ISS for the remainder of the period (circle one)

Length of time to complete _____

Consequence Assigned _____