

# WEEKLY BEHAVIOR TRACKER

WEEK OF: \_\_\_\_\_

Student Name: \_\_\_\_\_

Grade/Class: \_\_\_\_\_

Behavioral Goals	MON	TUE	WED	THU	FRI
Follows directions promptly	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
Respects peers and staff	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
Stays focused on tasks	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
Uses appropriate language	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
Transitioning between activities	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5

**Rating Scale:** 1 - Needs Improvement 2 - Satisfactory 3 - Good 4 - Great 5 - Exceptional

## Teacher Comments:

Write notes here regarding weekly progress...

## Parent/Guardian Comments:

Sign and return by Monday...

Teacher Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_