

NAME: _____

DATE: _____

PAWS TEACHER: _____

WEEKLY GOAL
(SKILL/HABIT)

This week I will...

FRIDAY REFLECTION

I went beyond my goal!

I accomplished my goal

I turned it around

I only focused half the time

I did nothing all week

Daily 5
On Time
Materials Ready
Check email
Check Skyward & record
Set a Goal

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

Science Grade:
Math Grade:
English Grade:
Social Studies Grade:
PE/Health Grade:
Elective Grade:

Science Grade:
Math Grade:
English Grade:
Social Studies Grade:
PE/Health Grade:
Elective Grade:

Science Grade:
Math Grade:
English Grade:
Social Studies Grade:
PE/Health Grade:
Elective Grade:

Science Grade:
Math Grade:
English Grade:
Social Studies Grade:
PE/Health Grade:
Elective Grade:

Science Grade:
Math Grade:
English Grade:
Social Studies Grade:
PE/Health Grade:
Elective Grade:

Science

--

--

--

--

--

Math

--

--

--

--

--

English

--

--

--

--

--

Social Studies

--

--

--

--

--

PE/Health

--

--

--

--

--

Electives

--

--

--

--

--

After-school Responsibilities

--

--

--

--

--

Science

Math

English

Social Studies

PE/Health

Electives

--	--	--	--	--	--

Yes, I reviewed my student's Daily 5

Adult Signature: _____

Comments:
