+ Reflection Sheet



Name:				
Date:				
How were you feeling?				
Proud	Excited	Loving	Giving	Нарру
What happene	d? What did I do	o well?		
Should there b	pe a reward for	my behaviour?		
	Yes		No	
	affected others	g D	No	
What other wo	onderful things o	can vou do?	ı	