

Sample Debriefing Form—Student

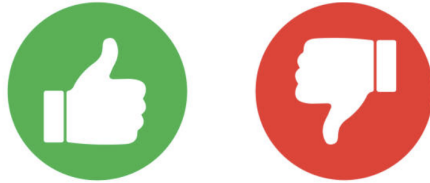
Name: _____

Date: _____

1. What happened?

2. Why did it happen?

3. How did it work out?



4. How did you feel after that?



5. What can you try next time that might work better?

Note: Adapted from Colvin, G. and Scott, T. M., 2015, Managing the Cycle of Acting-Out Behavior in the Classroom (2nd ed.), pp. 225-226.