

# Problem Solving Conference

Student name \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Location \_\_\_\_\_ Teacher \_\_\_\_\_ Others Involved \_\_\_\_\_

I felt.....CIRCLE ONE.



Excited



Nervous



Mad



Tired



Sad

What did I do? \_\_\_\_\_

The logical consequence of what I did was:

I \_\_\_\_\_

I \_\_\_\_\_

Next time I feel \_\_\_\_\_, I will \_\_\_\_\_

and then I can \_\_\_\_\_.

Student Signature: \_\_\_\_\_

Staff Signature: \_\_\_\_\_

Parent contact through Administration

