**Evaluation For Use Of Positive Discipline**

**& Building Blocks In Your Own Classroom**

Directions: To be completed by a school administrator or supervisor.

|  |  |
| --- | --- |
| Teacher (Classroom Educator or Trainer Candidate): | [Your Name] |
| Grade Level: |  | Number of Students: |  | School: |  |

|  |  |  |
| --- | --- | --- |
|  | Disagree | Agree |
| 1. I was notified enough in advance that I was able to observe several of the Positive Discipline lessons.
 | 1 | 2 | 3 | 4 |
| 1. Building administration was appropriately notified.
 | 1 | 2 | 3 | 4 |
| 1. [Your name] was able to engage the class and get “buy in” to work with them in a successful manner.
 | 1 | 2 | 3 | 4 |
| 1. The class developed a place for self-calming or a “positive time out area.”
 | 1 | 2 | 3 | 4 |
| 1. The class learned about being helpful not hurtful.
 | 1 | 2 | 3 | 4 |
| 1. The class learned how to get in and out of a circle and is able to do that now with minimal supervision.
 | 1 | 2 | 3 | 4 |
| 1. The class learned how to give compliments.
 | 1 | 2 | 3 | 4 |
| 1. The class learned how to use the agenda.
 | 1 | 2 | 3 | 4 |
| 1. The class learned about separate realities.
 | 1 | 2 | 3 | 4 |
| 1. The class learned about focusing on solutions.
 | 1 | 2 | 3 | 4 |
| 1. The class now has class meetings
 |  | times a week. | 1 | 2 | 3 | 4 |

Other comments or suggestions for the associate (feel free to use back of paper):

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_