Individual Classroom Behavior Chart

Name:	Teacher:	
Date:	Class:	

Class Period:	Mon	Tues	Wed	Thu	Fri	Comments
1						
2						
3						
4						
5						
6						
7						
8						
Total Number of Points per Day						Total Number of Points for the Week

Point System:

5 Points	Excellent
4 Points	Good
3 Points	Average
2 Points	Needs Improvement
1 Point	Bad

Parent's Signature:	