

Date: ____/____/____

Student's Name

Percentage of Activity Time: 1 = 0-25%, 2 = 25-50%, 3 = 50-75%, 4 = 75-100%

Activity	Time	Staff Initials	How I did				Comments	
			Participation	1	2	3		4
Center Time			Participation	1	2	3	4	
			Regulation	1	2	3	4	
Circle Time			Participation	1	2	3	4	
			Regulation	1	2	3	4	
Art			Participation	1	2	3	4	
			Regulation	1	2	3	4	
Snack			Participation	1	2	3	4	
			Regulation	1	2	3	4	
Book			Participation	1	2	3	4	
			Regulation	1	2	3	4	
Group Work			Participation	1	2	3	4	
			Regulation	1	2	3	4	
Playground			Participation	1	2	3	4	
			Regulation	1	2	3	4	
Lunch			Participation	1	2	3	4	
			Regulation	1	2	3	4	
Sensory Time			Participation	1	2	3	4	
			Regulation	1	2	3	4	