**Student’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Rules:** Be respectful.

 Be responsible.

**0 checks- E 1 check- S**  Be safe.

**2 checks- N 3 checks- U**  Be positive.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| August | Monday | Tuesday | Wednesday | Thursday | Friday |
| 8-12 |  |  |  |  |  |
| 15-19 |  |  |  |  |  |
| 22-26 |  |  |  |  |  |
| 29- Sept. 2 |  |  |  |  |  |

**Parents: Please initial (in the box) on each day a conduct grade is given.**

**Parent Comments/ Questions- Write on the back and please write the date as well.**