REFUSAL TO WORK FORM

FILLABLE PDF





Let's Try Again

Check what got in the way. Pick a plan.

My name _____ **Date** _____

I did not do my work. What got in the way?

- I was sad ☐
- I was mad ☐
- I was confused ☐
- I was worried ☐
- I was tired ☐
- I was hungry ☐
- I wanted to play ☐
- Something else ☐

I will finish my work...

- at recess ☐
- at choice time ☐
- at home ☐
- with help ☐

Next time I will...

- Ask for help ☐
- Take a deep breath ☐
- Try one small part ☐

Me signature _____

Teacher signature _____

Family signature _____

Refusal to Work Form - K-2 Form

Bright Path Sped

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One classroom license

- This file is for one classroom: one teacher, one group of students.
- Please do not share it, post it online, or sell it.
- Extra licenses for a team or a school are available on the product page.

This is a fillable PDF

- Open it in a PDF reader (Adobe Acrobat Reader, Preview, or your browser), click into a name, a box or a line, type, and Save As.
- Every name, date, check square, box and line on the student pages is a type-in field. Type an X in a check square. You can also print a page and check or write by hand.
- It works offline. No account, no subscription, no internet connection needed after you download it.

Student names stay private

These pages can hold your students' names. Keep the file and any printouts with your own records, and follow your school's rules for who may see them. The students in the examples are invented.

Need help?

If a page will not print or fill the way you expect, use Ask a Question on the product page before leaving a review.

Notes

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PREVIEW

Let's Try Again

Check what got in the way. Pick a plan.



My name _____ Date _____

I did not do my work. What got in the way?

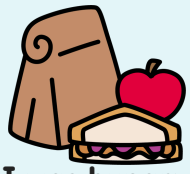

I was sad ☐


I was mad ☐


I was confused ☐


I was worried ☐


I was tired ☐


I was hungry ☐


I wanted to play ☐


Something else ☐

I will finish my work...


at recess ☐


at choice time ☐

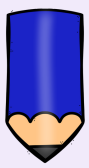

at home ☐


with help ☐

Next time I will...


Ask for help ☐


Take a deep breath ☐


Try one small part ☐

Me signature

_____

Teacher signature

_____

Family signature

_____

PREVIEW

My Work Reflection

My name _____ **Date** _____

Class _____ Assignment _____

Check what got in the way. Make a plan.

I did not complete my work because (check all that fit)

- ☐ I did not understand what to do
- ☐ I felt distracted
- ☐ I was upset about something else
- ☐ I did not want to do it
- ☐ The work felt too hard
- ☐ I was tired or hungry
- ☐ I needed help and did not ask
- ☐ Something else (write below)

What would have helped me?

I will complete it

- ☐ at recess
- ☐ at home
- ☐ with my teacher's help
- ☐ at choice time
- ☐ during lunch

Other place or time _____ Finish by (date) _____

Next time I will...

Student signature

_____

Teacher signature

_____

Parent or guardian signature

_____

PREVIEW

Work Reflection and Restart Plan

My name _____ **Date** _____

Class and period | Assignment | Due date

1 What got in the way? Check all that fit.

- ☐ The directions were not clear to me
- ☐ I was dealing with something outside of class
- ☐ It felt like too much at once
- ☐ I chose not to do it
- ☐ I did not have what I needed to start
- ☐ People or noise pulled my attention
- ☐ I did not see the point of it
- ☐ Something else (write below)

2. What I needed that I did not have

3 My plan to finish

- ☐ during a free period
- ☐ before or after school
- ☐ with my teacher's help
- ☐ at home
- ☐ in class tomorrow

Where I will work _____ Finish by (date) _____

4. One thing I will do differently

What I need from my teacher

Teacher response

Student signature _____

Teacher signature _____

Parent or guardian signature _____

PREVIEW

My Restart Plan

Make a small plan. Start with one piece.



My name _____ Date _____

My work _____

I will finish by _____

My three steps

First

Then

Last

Where I will work _____

Who can help me _____

My teacher can help me by

Student signature

_____

Teacher signature

_____

PREVIEW

My Calm Choice Cards

My name _____

✂ Cut apart your cards. Keep them at your desk.

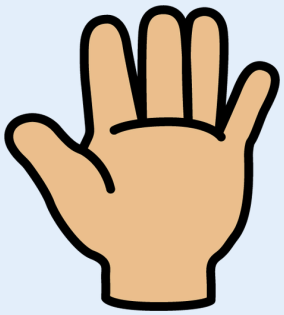
I can...



Take a deep breath

Name _____

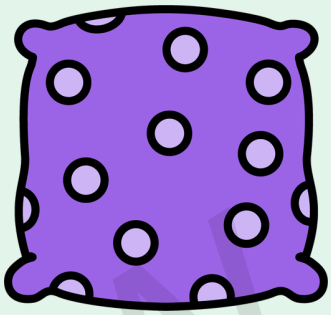
I can...



Ask for help

Name _____

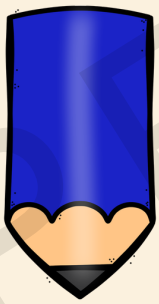
I can...



Ask for a break

Name _____

I can...



Try one small part

Name _____

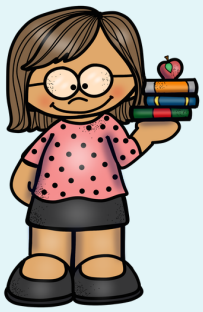
I can...



Draw my feeling

Name _____

I can...



Talk to my teacher

Name _____

PREVIEW

Teacher Note

For the adult. Students do not need this page.

Which page for which students

- K-2: picture form (page 4), read the pictures aloud together.
- 3-5: form (page 6) and restart plan (page 10).
- 6-8: form (page 8) and follow-up (page 11).
- Everyone: calm reset (page 9), cards (page 12), words to help (page 13).

Five ways to use it

- Offer the form at a calm time, when the student is ready to talk. It is a reflection and a plan.
- Read the choices aloud to younger students, or let them point.
- Cross out any "I will complete it" choice your class does not use.
- Send the family note (page 17) when you choose to.
- Use the class tally (page 15) to see what gets in the way most often.

Our class rule for finishing missed work (write your own)

Who we tell, and when (your school's rule)

Where I keep the forms

Notes

PREVIEW

Reflection Tracker: Teacher

One row each time a form is filled in. Keep it with your own records.

Class _____ Teacher _____ Month _____

Date	Student	Assignment	What got in the way	Plan	Finished?

PREVIEW

Binder Cover and Spine

Type your class on it, print, and slide it into a clear binder pocket. The spine strip fits a one-inch binder.



REFLECTION FORMS

Class

_____

Teacher

_____

School year

_____

PREVIEW

SPINE

Class and year

_____