



Derby City Council

My Life, My Journey

# At School I Feel

Name ..... Age .....

School .....

Today's Date .....



# How I'm feeling at school

Please tick the words that describe how you feel

1. When I think about school I feel



Happy



Ok



Worried

I am most proud of

.....

2. In school I think I am doing



Ok



Struggling

I am most proud of

.....

3. When I'm with my friends at school I am



Happy



Sad

When I am sad this is what helps me

.....

4. I think my behaviour at school is



Ok



Struggling

When I am struggling this is what helps me

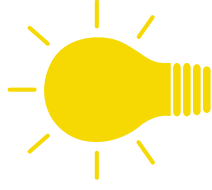
.....

Are you worried about anything else in school – please write below

.....



# Action Plan



Name .....

What is going to help you?	How is it going to help you?	Who is going to help you?	When would you like it to start?
What else might help?			



# Review



Name .....

How much has it helped you?

A lot

A little

Not at all

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