

**Positive Behavior Tracking Form**  
**Complete one day per week**

Classroom: \_\_\_\_\_ Date: \_\_\_\_\_ am pm

**Tally Behaviors:**

Initiating play with peer	
Turn Taking/ Sharing	
Follow Directions	
Participate in Group Activity	
Self Management	
Other:	

*(use child's initials to tally behavior incidents)*

**Comments and/or notes:**