



# THINK SHEET

NAME:

DATE:

\_\_\_\_\_

1. WHAT EXPECTATION DID I NOT MEET?

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. WHY WAS MY BEHAVIOR A PROBLEM?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. WHAT COULD I HAVE DONE INSTEAD?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. DO YOU NEED TO APOLOGIZE TO ANYONE?  YES  NO

5. DID YOU APOLOGIZE?  YES  NO TO WHOM? \_\_\_\_\_