



TASK SHEET



STUDENT'S NAME: _____

DATE: _____

TASK

SUN	MON	TUES	WED	THR	FRI	SAT
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STUDENT'S SIGNATURE: _____

PARENT'S SIGNATURE: _____

Parents, we understand not all children are the same. Fill in the empty boxes with tasks that would encourage your child to improve his/her behavior or routine. Some suggestions include: "I show courtesy to my sibling(s).", "I went to bed without a fuss.", "I practiced my musical instrument.", "I was helpful to my parents.", "I made my bed." — Please let a staff member know if there are other ways we can help encourage your child.