



insideADHD.org™
Focusing together on ADHD

Classroom Behavior Log

If your teen is working towards meeting particular behavior goals, it's important to have a record of his or her specific behaviors over time. Determine which class(es) your teen has the most behavioral difficulty in, and discuss with that teacher whether a daily classroom behavior log would be a helpful way to target specific behavioral problems. Sometimes, students with ADHD may only have difficulty with their behavior in certain classes, so using a classroom behavior log may not be appropriate for every class.

WHO SHOULD USE THIS TOOL?

This tool is meant to be used by your teen's teacher(s) to track his or her classroom behavior during the course of a week.

HOW SHOULD IT BE USED?

The Classroom Behavior Log can be given to your teen's teacher(s) to update daily, as a record of his or her behavior in class.

Student's Name: _____

Teacher's Name: _____

Classroom Behavior Log

Week of: _____

| | Monday | Tuesday | Wednesday | Thursday | Friday |
|--|---|---|---|---|---|
| Arrived prepared with materials | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: |
| Arrived on time | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: |
| Stayed in seat | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: |
| Raised hand when answering questions | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: |
| Did not socialize excessively w/ classmates | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: |
| Was respectful to teacher | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: |
| Used classroom time efficiently | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: |
| Other behavior: _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: | <input type="checkbox"/> Yes <input type="checkbox"/> No Note: |