

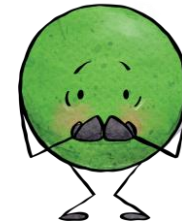
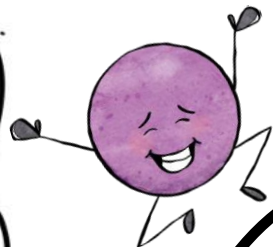
Name: _____

Date: ____/____/____

Class: _____

Change at School

Record the emotions and experiences you shared during Circle Time and the experiences and emotions of 5 other people.



Me

Student 1

Student 2

Student 3

Student 4

Student 5

