



PALO VERDE UNIFIED SCHOOL DISTRICT

Students • Parents • Teachers • Community • UNITED IN EXCELLENCE

BEHAVIOR CONTRACT

Grades 3–5 • One More Chance to Make a Safe Choice

Student: _____

Date: _____

Grade/Class: _____

Teacher/Adult: _____

Contract starts: _____

Review date: _____

1. THE BEHAVIOR THAT MUST STOP

The specific behavior we are concerned about is:

This means I will not: _____

2. MY ONE-MORE-CHANCE AGREEMENT

I understand that this contract gives me one more opportunity to stop the behavior named above.

If I repeat this behavior during the contract period, the administrator will review the new incident and I may be suspended from school.

3. WHAT I WILL DO INSTEAD & HOW ADULTS WILL HELP

I will practice:

☐ Ask for help ☐ Take a calm break ☐ Use kind words ☐ Stop, breathe and think ☐ Use my agreed signal ☐ Other: _____

Adults will help by:

☐ Teach and show me what to do ☐ Remind me quietly ☐ Check in with me ☐ Give me time to reset ☐ Notice my effort and success ☐ Other: _____

4. MY GOAL & CELEBRATION

My goal:

We will check:

When I meet my goal, I can earn/choose:

☐ Daily ☐ Weekly

My progress: ☐ I did it! ☐ Almost ☐ I am still learning

5. IF I NEED HELP

Before the behavior happens, I will use my plan and ask an adult for help.

The support that helps me make a safe choice is: _____

6. COUNSELING SUPPORT OFFERED / ASSIGNED

☐ School Counseling ☐ Latino Counseling ☐ CareSpace Counseling

☐ Blythe Mental Health Counseling ☐ SPED Counseling ☐ BrightLife Counseling

☐ Drug Counseling Referral date: _____ Staff contact: _____ Follow-up: _____

7. OUR AGREEMENT

☐ The student and family were told that repeating the named behavior may result in suspension after administrator review.

Student: _____ Adult: _____ Date: _____

Family acknowledgment/comment: _____ Date: _____