

Name: \_\_\_\_\_

Date: \_\_\_\_\_

# How are you feeling today?



happy



frustrated



tired



silly



sad



excited



embarrassed



confused



angry



scared



proud



sick

Choose an emotion that matches how you're feeling today.

\_\_\_\_\_

Why do you feel this way?

\_\_\_\_\_

\_\_\_\_\_

Is there anything you would like to share with your teacher?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Would you like to talk about this with your teacher?

Circle:

YES

NO

MAYBE