My hard moment

This page is for you. You can fill it in yourself, or tell a grown-up what to write.

Name _____ **Date** _____

The hard time of day

The time of day that feels hardest for me is:

_____

What gets in the way

These are the things that make that time hard for me:

1. _____
2. _____
3. _____

Anything else?

_____

What might make it easier

One thing that might make it easier is:

_____

How our practice will work after we pick a section

1. We pick one hard time of day to work on.
2. My grown-up says the same few words each time.
3. I do the step.
4. Right after, or later when we are calm, we check how it went together.
5. When my check matches my grown-up's check for a few days, I get to do the check by myself.

☐ **All done**