

My AHA+ Apology Form

Name: _____

Date: _____

1. AHA Moment

What did I do?

- ☐ I hurt someone's feelings
- ☐ I didn't follow directions
- ☐ I wasn't kind

2. How did it affect others?

(How do you think the other person felt?)

- ☐ Sad
- ☐ Angry
- ☐ Embarrassed
- ☐ Left out

3. My Apology

I am sorry for: _____

4. My Positive Plan

Next time I will:

Student Signature: _____

Teacher Signature (optional): _____