Peer Network Weekly Meeting Checklist - Facilitator

Student: __________________________ Facilitator: ______________
Date: ________________ Total number of students at meeting: ______
Network Members Present: ____________________________________________________
__________________________________________________________________________

Circle Y (yes) or N (no) based on whether or not these behaviors occurred during the meeting.

1. **Are partners and the student interacting during the meeting?**
   - Y N Did the student stay for the majority of the meeting?
   - Y N Does the student initiate interactions with partners?
   - Y N Do partners initiate interactions with the student?
   - Y N Do students engage in a game or activity together?
   - Y N Do students engage in conversation together?
   - Y N Was the targeted social-related goal(s) addressed?

2. **Are you (facilitator) supporting partners and the student?**
   - Y N Do you provide structure and facilitate the meetings as needed?
   - Y N Do you monitor interactions during the meeting?
   - Y N Do you provide praise and feedback to students during the meeting?
   - Y N Did you discuss the date of the next meeting? ________________________
   - Y N Did you discuss the activity for the next meeting? ________________________

3. **Are partners and the student reporting that interactions occurred during the week (outside of the meeting)?**
   - Y N Does the student ever initiate interactions outside of the meeting?
   - Y N Do partners initiate interactions outside of the meeting?
   - Y N Are interactions occurring between more than one partner and the student outside of the meeting?

1) How many students report interactions during the week? # of students: ______

2) When were interactions reported as occurring (circle all that apply):
   - Before school
   - Between classes
   - In class
   - Lunch
   - After school
   - Weekend

Additional Notes From Meeting/Weekly Contacts:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
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