

# Social Skills Practice Work

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

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

**Fill in this part during group:**

1). The name of the Social Skill you will be practicing: \_\_\_\_\_

2). The skill steps are:

1.

\_\_\_\_\_

2.

\_\_\_\_\_

3.

\_\_\_\_\_

4.

\_\_\_\_\_

5.

\_\_\_\_\_

6.

\_\_\_\_\_

3). Where- I will try this skill at/in: \_\_\_\_\_

4). Who- I will try this skill with: \_\_\_\_\_

5). When- I will try this skill on: \_\_\_\_\_

.....  
**Fill in this part after you tried the skill:**

1) Describe the situation in which you used the skill \_\_\_\_\_

\_\_\_\_\_

2) Rate yourself based on how well you followed the steps:

Excellent

Good

OK

Need Improvement

3) If you were to try this skill again, what would you do differently?

\_\_\_\_\_