Family Development Training and Credentialing Program

Worker/Student Skill Practice Reflection

Name: _____ Chapter:_____ Skill#: _____

Please document the full Skill Practice from the text):

_____
_____
_____
_____

Skill Practice Response:

1. A **description** of what I did to practice this skill.
2. My response that follows the specific Skill Practice directions for information to include in my written response.
3. My statement of what I did well, what I learned, and what I might do differently next time.

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____