|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Rating** | **Looks/**  **Sounds like** | **What makes me feel this way** | **Feels like** | **I can Try** |
| 5 | Throwing  Yelling  Running | Loud crowded places  Being yelled at | Out of Control  I need to get away | Take 5 long breaths:   * breathe in count 4 * hold breathe count 4 * breathe out count 6   Go to my safe zone  Show an adult I’m at a 5 |
| 4 | Upset  Walking around  Loud voice  Threaten others | Being told “no”  Being touched  Homework  Having a substitute teacher | I might lose control  This can really upset me | Go to a quiet place  Go for a walk  Squeeze my hands together  Count to 10 |
| 3 | Getting worried  Tapping my fingers | Losing a game  Fire drills  Writing  Meeting new people  High pitched voices | I don’t know what to do  I feel nervous | Ask an adult for help  Doodle in my book  Close my eyes and rub my legs |
| 2 | I’m a little bit  worried  I’m a bit upset | Stopping something I like to do  Reading | My tummy is a bit upset  This bothers me | Take an activity break  Slow my breathing  Tell someone safe how I feel |
| 1 | I’m calm  Smiling  Talking nicely | Walking outside  Playing a game  Free time | I feel good | I’m ready to learn |

**My Stress Scale**

Name: