

DAILY DISCIPLINE REFLECTION

DATE :

M

W

F

S

T

T

S

GROUNDING FROM _____ TO _____
REASON:

SPANKINGS IMPLEMENT & DURATION

MORNING

EVENING

EXTRA

DEVICE SURVEILLANCE

DID YOU USE ANY DEVICE FOR
UNAUTHORIZED PURPOSES?



IF YES, STOP AND INFORM
DISCIPLINARIAN.

CHORES COMPLETED



CHORE

ADDITIONAL DISCIPLINE

BOTTOM SURVEILLANCE

CAN YOU SIT COMFORTABLY?



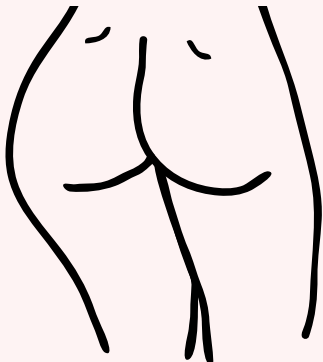
DAILY SKINCARE COMPLETE?



DO YOU FEEL YOU NEED
ADDITIONAL SPANKING TODAY?



DRAW ANY CURRENT BRUISES
OR MARKS BELOW



WHAT BEHAVIOR
IMPROVEMENTS DID YOU
DISPLAY TODAY?

WHAT WILL YOU DO
TOMORROW TO MAINTAIN
GOOD BEHAVIOR?

MOOD



AFTERCARE REQUESTS

DISCIPLINARIAN NOTES

DISCIPLINARIAN SIGNATURE