



Unique YOU®, formerly I'm Special

Fidelity

Fidelity is the faithful implementation of the program components.

Staff are asked to check YES or NO to fidelity assurance using the following questions.

1. Was the program delivered as it was designed addressing all core concepts?
2. Was there enough time to adequately implement the session?
3. Did you use specific techniques or methods prescribed by the program?
4. Did the delivery engage and involve participants?



Unique YOU®, formerly I'm Special Fidelity Checklist #1

Date: ____/____/____ Session start: _____ Session end: _____

Leader's Name: _____

Classroom Location: _____

Total Number of Students in Class: _____

Number of Students Present Today: _____

Was the room organized to foster comfortable communication? ₁ Yes
₂ No

Please describe any problems with the room: _____

Session One

Key Concept: When we agree on class behavior, we feel safe and create a place for fun and learning. In learning more about self and others, we enhance friendships and begin to build community.

- | | Yes | No |
|---|---------------------------------------|---------------------------------------|
| 1. Did you introduce yourself to the participants? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| 2. Did you introduce the <i>unique YOU®</i> Program to the participants? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| 3. Did you allow participants to introduce themselves? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| 4. Did you conduct the <i>Promises</i> exercise? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| 5. Did you allow the participants to brainstorm classroom behaviors? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| 6. Did you guide the class through a participatory decision making Process to allow them to choose their promises? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| 7. Did you post the final list of promises? | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| 8. Did you guide the class through a participatory decision making Process to allow them to choose consequences if the promises are | | |



Broken?

1

2

9. Which one of the following activities did you facilitate?

- 1 *unique YOU® Folder/ "This is me" Collage*
- 2 *Simon Wants To Know You Better*
- 3 *Identity Game*
- 4 Did not facilitate any additional activities

10. Did you state the goal of this activity?

- 1 Yes
- 2 No

11. How many minutes did you spend processing this activity? _____

12. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

13. If you had time, which other activity did you facilitate?

- 1 *unique YOU® Folder/ "This is me" Collage*
- 2 *Simon Wants To Know You Better*
- 3 *Identity Game*
- 4 Did not facilitate an additional activity

14. Did you state the goal of this activity?

- 1 Yes
- 2 No

15. How many minutes did you spend processing this activity? _____

16. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No



17. How involved were the participants during the processing period?

- 1 Very involved
- 2 Involved
- 3 Disinterested
- 4 Very Disinterested

18. Additional Comments:



Unique YOU®, formerly I'm Special Fidelity Checklist #2

Date: ____/____/____ Session start: _____ Session end: _____

Leader's Name: _____

Classroom Location: _____

Number of students present today: _____

Was the room organized to foster comfortable communication? 1 Yes
 2 No

Please describe any problems with the room: _____

Session Two

Key Concept: The more we discover and acknowledge our strengths and special talents, the more comfortable we become with others.

- | | Yes | No |
|---|----------------------------|----------------------------|
| 1. Did you review the promises at the beginning of the class? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 2. Did you review homework if any was given? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 3. Which one of the following activities did you facilitate? | | |
| <input type="checkbox"/> 1 <i>Are You More Like?</i> | | |
| <input type="checkbox"/> 2 <i>Personal Coat of Arms</i> | | |
| <input type="checkbox"/> 3 <i>Puzzle-Tee and Me</i> | | |
| <input type="checkbox"/> 4 <i>It's Eggstraordinary</i> | | |
| 10. Did you state the goal of this activity? | | |
| <input type="checkbox"/> 1 Yes | | |
| <input type="checkbox"/> 2 No | | |
| 11. How many minutes did you spend processing this activity? | | _____ |



12. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

13. If you had time, which other activity did you facilitate?

- 1 *Are You More Like?*
- 2 *Personal Coat of Arms*
- 3 *Puzzle-Tee and Me*
- 4 *It's Eggstraordinary*
- 5 Did not facilitate an additional activity

14. Did you state the goal of this activity?

- 1 Yes
- 2 No

15. How many minutes did you spend processing this activity? _____

16. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

17. How involved were the participants during the processing period?

- 1 Very involved
- 2 Involved
- 3 Disinterested
- 4 Very Disinterested

18. Additional Comments:



Unique YOU®, formerly I'm Special Fidelity Checklist #3

Date: ____/____/____ Session start: _____ Session end: _____

Leader's Name: _____

Classroom Location: _____

Number of Students Present Today: _____

Was the room organized to foster comfortable communication? 1 Yes
 2 No

Please describe any problems with the room: _____

Session Three

Key Concept: Everybody has feelings. Feelings are not good or bad, but comfortable and uncomfortable. We can practice expressing feelings in a positive way.

- | | Yes | No |
|---|----------------------------|----------------------------|
| 1. Did you review last week's activities? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 2. Did you review homework if any was given? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 3. Which one of the following activities did you facilitate? (If more than one activity was used, please identify the one you facilitated first.) | | |
| <input type="checkbox"/> 1 <i>My Feelings</i> | | |
| <input type="checkbox"/> 2 <i>Talking Without Words</i> | | |
| <input type="checkbox"/> 3 <i>Feeling Pictures</i> | | |
| <input type="checkbox"/> 4 <i>Dealing with Feelings</i> | | |
| <input type="checkbox"/> 5 <i>Feelings Charades</i> | | |
| <input type="checkbox"/> 6 <i>The ABCs of Feelings</i> | | |
| 4. Did you state the goal of this activity? | | |
| <input type="checkbox"/> 1 Yes | | |
| <input type="checkbox"/> 2 No | | |



5. How many minutes did you spend processing this activity? _____

6. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

7. Which other activity did you facilitate?

- 1 *My Feelings*
- 2 *Talking Without Words*
- 3 *Feeling Pictures*
- 4 *Dealing with Feelings*
- 5 *Feelings Charades*
- 6 *The ABCs of Feelings*
- 7 Did not facilitate an additional activity

8. Did you state the goal of this activity?

- 1 Yes
- 2 No

9. How many minutes did you spend processing this activity? _____

10. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

11. How involved were the participants during the processing period?

- 1 Very involved
- 2 Involved
- 3 Disinterested
- 4 Very Disinterested

12. Additional Comments:



Unique YOU®, formerly I'm Special Fidelity Checklist #4

Date: ____/____/____ Session start: _____ Session end: _____

Leader's Name: _____

Classroom Location: _____

Number of Students Present Today: _____

Was the room organized to foster comfortable communication? 1 Yes
 2 No

Please describe any problems with the room: _____

Session Four

Key Concept: We can communicate with ourselves and others in positive ways. We have the ability to influence ourselves and the world around us.

Yes No

1. Did you review last week's activities? 1 2

2. Did you review homework if any was given? 1 2

3. Which one of the following activities did you facilitate? (If more than one activity was used, please identify the one you facilitated first.)

- 1 *Warm Fuzzies*
- 2 *Remember When*
- 3 *Finish the Feelings Phrase*
- 4 *Rap up on Feelings*
- 5 *Neggy*

4. Did you state the goal of this activity?

- 1 Yes
- 2 No

5. How many minutes did you spend processing this activity? _____



6. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

7. If you had time, which other activity did you facilitate?

- 1 *Warm Fuzzies*
- 2 *What Do People Do*
- 3 *Remember When*
- 4 *It's All Right To Cry*
- 5 *Finish the Feelings Phrase*
- 6 *Neggy*
- Did not facilitate another activity

8. Did you state the goal of this activity?

- 1 Yes
- 2 No

9. How many minutes did you spend processing this activity? _____

10. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

11. How involved were the participants during the processing period?

- 1 Very involved
- 2 Involved
- 3 Disinterested
- 4 Very Disinterested

12. Additional Comments:



**Unique YOU®, formerly I'm Special
Fidelity Checklist #5**

Date: ____/____/____ Session start: _____ Session end: _____

Leader's Name: _____

Classroom Location: _____

Number of Students Present Today: _____

Was the room organized to foster comfortable communication? 1 Yes
 2 No

Please describe any problems with the room: _____

Session Five

Key Concept: All decisions offer choices. We can carefully consider what we want to do. There is always more than one way. We can make the best choices for ourselves.

Yes No

1. Did you review last week's activities? 1 2

2. Did you review homework if any was given? 1 2

3. Which one of the following activities did you facilitate? (If more than one activity was used, please identify the one you facilitated first.)

- 1 *Don't Give Up*
 2 *Where I Stand*
 3 *Deciding*

4. Did you state the goal of this activity?

- 1 Yes
 2 No

5. How many minutes did you spend processing this activity? _____



6. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

7. Which other activity did you facilitate?

- 1 *Don't Give Up*
- 2 *Where I Stand*
- 3 *Deciding*
- 4 Did not facilitate an additional activity

8. Did you state the goal of this activity?

- 1 Yes
- 2 No

9. How many minutes did you spend processing this activity? _____

10. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

11. How involved were the participants during the processing period?

- 1 Very involved
- 2 Involved
- 3 Disinterested
- 4 Very Disinterested

12. Additional Comments:



Unique YOU®, formerly I'm Special Fidelity Checklist #6

Date: ____/____/____ Session start: ____ Session end: ____

Leader's Name: _____

Classroom Location: _____

Number of Students Present Today: _____

Was the room organized to foster comfortable communication? ₁ Yes
₂ No

Please describe any problems with the room: _____

Session Six

Key Concept: When we cooperate and work as a team, we feel stronger individually and our team is able to accomplish more. We have a personal choice in how we work in a team. Teamwork is part of all aspects of life (i.e. family friendships, neighborhoods, sport teams, etc.)

Yes No

1. Did you review last week's activities? ₁ ₂

2. Did you review homework if any was given? ₁ ₂

3. Which one of the following activities did you facilitate? (If more than one activity was used, please identify the one you facilitated first.)

- ₁ *Linking Together*
- ₂ *Tinker Toys*
- ₃ *Building Blocks of Teamwork*
- ₄ *Cooperation Game*

4. Did you state the goal of this activity?

- ₁ Yes
- ₂ No

5. How many minutes did you spend processing this activity? _____



6. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

7. Which other activity did you facilitate?

- 1 *Linking Together*
- 2 *Tinker Toys*
- 3 *Building Blocks of Teamwork*
- 4 *Cooperation Game*
- 1 Did not facilitate additional activity

8. Did you state the goal of this activity?

- 1 Yes
- 2 No

9. How many minutes did you spend processing this activity? _____

10. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

11. How involved were the participants during the processing period?

- 1 Very involved
- 2 Involved
- 3 Disinterested
- 4 Very Disinterested

12. Additional Comments:



Unique YOU®, formerly I'm Special Fidelity Checklist #7

Date: ____/____/____ Session start: _____ Session end: _____

Leader's Name: _____

Classroom Location: _____

Number of Students Present Today: _____

Was the room organized to foster comfortable communication? 1 Yes
 2 No

Please describe any problems with the room: _____

Session Seven

Key Concept: Alcohol, tobacco and other drugs are unhealthy, illegal and affect our lives. We can say "yes" to healthy choices and say "no" to alcohol, tobacco and other drugs.

- | | Yes | No |
|---|----------------------------|----------------------------|
| 1. Did you review last week's activities? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 2. Did you review homework if any was given? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| 3. Which one of the following activities did you facilitate? (If more than one activity was used, please identify the one you facilitated first.) | | |
| <input type="checkbox"/> 1 <i>Healthy Habits</i> | | |
| <input type="checkbox"/> 2 <i>"The Cat Who Drank and Used Too Much"</i> | | |
| <input type="checkbox"/> 3 <i>Staying Healthy</i> | | |
| <input type="checkbox"/> 4 <i>Saying "No, Thank You"</i> | | |
| 4. Did you state the goal of this activity? | | |
| <input type="checkbox"/> 1 Yes | | |
| <input type="checkbox"/> 2 No | | |
| 5. How many minutes did you spend processing this activity? | | _____ |



6. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

7. Which other activity did you facilitate?

- 1 *Healthy Habits*
- 2 *“The Cat Who Drank and Used Too Much”*
- 3 *Staying Healthy*
- 4 *Saying “No, Thank You”*
- 6 *Did not facilitate additional activity*

8. Did you state the goal of this activity?

- 1 Yes
- 2 No

9. How many minutes did you spend processing this activity? _____

10. Did you tie the activity to the goal and key concept during processing?

- 1 Yes
- 2 No

11. How involved were the participants during the processing period?

- 1 Very involved
- 2 Involved
- 3 Disinterested
- 4 Very Disinterested

12. Additional Comments:



Unique YOU®, formerly I'm Special Fidelity Checklist #8

Date: ____/____/____ Session start: _____ Session end: _____

Leader's Name: _____

Classroom Location: _____

Number of Students Present Today: _____

Was the room organized to foster comfortable communication? 1 Yes
 2 No

Please describe any problems with the room: _____

Session Eight

Key Concept: We can take with us what we've learned in "I'm Special" to other areas of our lives. We know how to affirm ourselves and others, how to express feelings in a positive way, how to make healthy choices and how to cooperate. We are strong.

Yes No

1. Did you review last week's activities? 1 2

2. Did you review homework if any was given? 1 2

3. Which one of the following activities did you facilitate? (If more than one activity was used, please identify the one you facilitated first.)

- 1 *"On the Air"*
- 2 *"There's No Group Like Ours" Poster*
- 3 *Group Review*
- 4 *Together We Stand*

4. Did you state the goal of this activity?

- 1 Yes
- 2 No



5. How many minutes did you spend processing this activity? _____

6. Did you tie the activity to the goal and key concept during processing?

₁ Yes ₂ No

7. Which other activity did you facilitate?

- ₁ *“On the Air”*
- ₂ *“There’s No Group Like Ours” Poster*
- ₃ *Group Review*
- ₄ *Together We Stand*
- ₅ Did not facilitate additional activities

8. Did you state the goal of this activity?

₁ Yes
₂ No

9. How many minutes did you spend processing this activity? _____

10. Did you tie the activity to the goal and key concept during processing?

₁ Yes
₂ No

11. How involved were the participants during the processing period?

- ₁ Very involved
- ₂ Involved
- ₃ Disinterested
- ₄ Very Disinterested

12. Additional Comments:
