



# Functional Behavior Assessment and Positive Behavior Intervention and Support Planning Form

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School District: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Team Members: \_\_\_\_\_

**1. Student strengths, interests and preferences: 3 minutes**

- Strengths: \_\_\_\_\_
- Interests: \_\_\_\_\_
- Preferences \_\_\_\_\_

**2. Data Collection Checklist: 3-4 minutes**

- | <u>Indirect</u>   | <u>Direct</u>  |
|---|--|
| <input type="checkbox"/> Record Review                      | <input type="checkbox"/> Observation _____                                     |
| <input type="checkbox"/> Behavioral Logs/Discipline Records | _____  |
| <input type="checkbox"/> Structured Interviews              | <input type="checkbox"/> Data Collection _____                                 |
| <input type="checkbox"/> Reports from _____                 | _____  |
| <input type="checkbox"/> Rating Scales _____                | <input type="checkbox"/> Assessment of Lagging Skills and<br>Unsolved Problems |
| <input type="checkbox"/> SWIS Data                          |  |

**3. Problem Identification (Describe behaviors of concern): 5-10 minutes**

List and prioritize-do not dwell on stories, behavior needs to be observable and measurable.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



**6. Positive Behavior Analysis:**

**15 minutes**

(When, where, with whom does Positive Behavior occur?)

<b>Settings/Situations</b>	<b>Behavior Most Likely Occurs</b>	<b>Behavior Least Likely Occurs</b>
<b>Adults?</b> (personality characteristics, approaches, teaching style, gender, disciplinary style, etc., <b>no names</b> )		
<b>Peers?</b> (personality characteristics, gender, etc., <b>no names</b> )		
<b>Certain Activities?</b> (independent work, lecture, writing activities, small group)		
<b>Settings?</b> (playground, math, science, lunch, school bus, unstructured time)		
<b>Time of Day or Class?</b> (morning, end of class, afternoon)		
<b>Other?</b> (home issues, bus, medication, health, sleep, developmental or cognitive abilities, etc.)		

**7. List of Teaching Strategies Implemented:**

**15 minutes**

<b>What are the student’s concerns?</b>	<b>What are the adult concerns?</b>	<b>How were these concerns addressed? (Please indicate teaching strategy used, environments addressed, and how long the strategy was implemented.)</b>

8. What **function** might the behavior be serving? (What is the student **getting** or **avoiding** by engaging in the behavior?) (15 minutes)

	Internal	External
<b>ACCESS/GET</b> Something	<input type="checkbox"/> Emotional _____ <input type="checkbox"/> Communication <input type="checkbox"/> Control <input type="checkbox"/> Sensory <input type="checkbox"/> Auditory <input type="checkbox"/> Revenge <input type="checkbox"/> Visual <input type="checkbox"/> Other _____	<input type="checkbox"/> Attention _____ <input type="checkbox"/> Tangibles _____ <input type="checkbox"/> Activities _____ <input type="checkbox"/> Other _____
<b>AVOID/ESCAPE</b> Something	<input type="checkbox"/> Emotional _____ <input type="checkbox"/> Sensory <input type="checkbox"/> Auditory <input type="checkbox"/> Visual <input type="checkbox"/> Other _____	<input type="checkbox"/> Setting _____ <input type="checkbox"/> Task _____ <input type="checkbox"/> Activity _____ <input type="checkbox"/> Person(s) _____ <input type="checkbox"/> Academic _____ <input type="checkbox"/> Other _____

9. Based on the information collected, fill in/edit the following to develop a **HYPOTHESIS STATEMENT:** (5 minutes)

When (this) occurs (antecedents/setting events), the student does (this) (describe the behavior), in order to get or avoid (this) (function of the behavior). (Be sure to include other relevant factors that may be having an impact on the behavior.)

When \_\_\_\_\_ occurs, the student does \_\_\_\_\_

in order to get or avoid \_\_\_\_\_.

Other factors that impact this student's behavior include: \_\_\_\_\_

\_\_\_\_\_.