**FUNCTIONAL BEHAVIOR ASSESSMENT**

**STUDENT:** **DOB:** **SCHOOL:** **GRADE:** **DATE:**

**Primary Mode of Communication (i.e. verbal, non-verbal, gestural):**

**Information provided by:**

Step 1: Review Current Evaluation Team Report/Individualized Education Program/History of Interventions

Step 2: Complete Functional Behavior Assessment (collect information/data here)

Step 3: FBA Summary Statement/Function of the Behavior/Why? (on back)

Step 4: Behavior Intervention Plan (see attached form)

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| BEHAVIOR OF CONCERN  (Measurable, Observable, Specific) | ANTECEDENTS/TRIGGERS  (What happened before?) | CONSEQUENCES  (What happened after?) | FREQUENCY/  DURATION | WHEN? WHERE? WITH WHOM? |
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| CURRENT STRATEGIES  (Are they effective?) | | STRENGTHS  (Skills, pro-social behaviors, family and community supports) | SETTING EVENTS  (Underlying factors: relative weaknesses, issues, challenges, diagnoses) | INTERESTS AND MOTIVATORS |
| Strategy | Y/N |  |  |  |
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| FUNCTION OF THE BEHAVIOR (What is the student trying to achieve or avoid? Why?) |
|  |

**Completed by:**