

Taylor County School District  
Functional Behavior Assessment/Positive Behavior Intervention Plan

Student: \_\_\_\_\_

Student number: \_\_\_\_\_

Date of Meeting: \_\_\_\_\_

School: \_\_\_\_\_

**Student's Reinforcers**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Target Behavior**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Antecedents to Behavior**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Specific Interventions to Change Behavior:**

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_

**Persons and Timelines for Interventions**

Position Responsible \_\_\_\_\_ Begin Date \_\_\_\_\_  
Position Responsible \_\_\_\_\_ Begin Date \_\_\_\_\_  
Position Responsible \_\_\_\_\_ Begin Date \_\_\_\_\_  
Position Responsible \_\_\_\_\_ Begin Date \_\_\_\_\_  
Position Responsible \_\_\_\_\_ Begin Date \_\_\_\_\_

**REPLACEMENT BEHAVIOR**

When and how will the student be taught and practice replacement behavior?

\_\_\_\_\_  
\_\_\_\_\_

What is the plan for reinforcing the replacement behavior?

\_\_\_\_\_  
\_\_\_\_\_

Describe the plan for dealing with the student at the first sign of target behavior:

\_\_\_\_\_  
\_\_\_\_\_

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**Guide to Defining the Problem**

Student: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_

Date: \_\_\_\_\_ School: \_\_\_\_\_ Referring Teacher: \_\_\_\_\_

Classroom Teacher (If different from referring teacher): \_\_\_\_\_

**Target the behavior(s) that appear to be interfering with the student's performance on a regular basis  
(Select top 3 Behavioral concerns only)**

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Frequently argues with peers</li> <li><input type="checkbox"/> Frequently argues with staff</li> <li><input type="checkbox"/> Fails to finish things he/she begins</li> <li><input type="checkbox"/> Difficulty concentrating</li> <li><input type="checkbox"/> Poor social skills</li> <li><input type="checkbox"/> Cannot sit still, restless, overly active for age</li> <li><input type="checkbox"/> Clings to adult, very dependent</li> <li><input type="checkbox"/> Cries often</li> <li><input type="checkbox"/> Bullies others</li> <li><input type="checkbox"/> Physically aggressive to others</li> <li><input type="checkbox"/> Acts without thinking</li> <li><input type="checkbox"/> Demands a lot of attention from staff</li> <li><input type="checkbox"/> Seeks attention from peers</li> <li><input type="checkbox"/> Destroys property</li> <li><input type="checkbox"/> Lacks organization, cannot manage materials</li> <li><input type="checkbox"/> Seems fearful</li> <li><input type="checkbox"/> Would rather be alone than with others</li> <li><input type="checkbox"/> Lies, cheats</li> <li><input type="checkbox"/> Steals</li> <li><input type="checkbox"/> Difficulty making/keeping friends</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Difficulty with transition</li> <li><input type="checkbox"/> Does not adapt well to change</li> <li><input type="checkbox"/> Overly shy/withdrawn</li> <li><input type="checkbox"/> Physically harms self</li> <li><input type="checkbox"/> Temper outbursts</li> <li><input type="checkbox"/> Communication difficulties</li> <li><input type="checkbox"/> Often appears nervous or tense</li> <li><input type="checkbox"/> Uses obscene language</li> <li><input type="checkbox"/> Sudden changes in mood, feelings</li> <li><input type="checkbox"/> Difficulty following directions</li> <li><input type="checkbox"/> Frequently avoids tasks</li> <li><input type="checkbox"/> Refuses to talk</li> <li><input type="checkbox"/> Does not show guilt after misbehaving</li> <li><input type="checkbox"/> Consequences have little effect</li> <li><input type="checkbox"/> Avoids groups/peers</li> <li><input type="checkbox"/> Repeats actions over and over</li> <li><input type="checkbox"/> Picks nose, skin, or other body parts</li> <li><input type="checkbox"/> Breaks school/classroom rules frequently</li> <li><input type="checkbox"/> Bothers peers while they are working</li> <li><input type="checkbox"/> Frequently makes careless mistakes</li> </ul> |
|--|---|

**From the list below, indicate antecedents (what happens before the behavior), setting (where the behavior occurs) and consequences (what happens after the behavior).**

<u>Antecedents</u>			
Behavior	1	2	3
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lack of social attention
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Demand/Request
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Difficult task
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Task transition
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Setting transition
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interruption to routine
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Negative peer interaction
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Negative teacher
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Noisy classroom
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Student is off task/restless
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consequences imposed
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

<u>Setting/Concurrent Event</u>			
Behavior	1	2	3
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Independent seat work
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Group instructions
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Crowded seating
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unstructured activity
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unstructured setting
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specific subject/task
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transitional times
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In route to/from school
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special area
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____
			_____

<u>Consequences</u>			
Behavior	1	2	3
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Behavior ignored
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Teacher attention
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Peer attention
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reprimand/Warning
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Teacher talks to student
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff talks to student
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Time out
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Loss of privilege
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Penalty imposed
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Removed from class
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sent to office
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In school suspension
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Out of school suspension
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contact parent
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

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Is the problem believed to be related to:

<u>Academic Deficit</u>	<u>Behavioral Deficit</u>	<u>Communicative Intent</u>
Behavior 1 2 3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Work is too hard  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not enough practice  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not enough help  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not generalized skill	Behavior 1 2 3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Does not know expectation  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Needs practice/modeling  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Requires more structure  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Can't apply across settings	Behavior 1 2 3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> To request assistance  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> To request a break  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> To request preferred activity/item  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> To indicate physical discomfort  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> To indicate frustration

What function(s) does the identified behavior(s) seem to serve for the child?

Escape

- Avoid a demand or request
- Escape/avoid an activity/task
- Escape/avoid a person
- Escape the classroom setting
- Escape the school
- Other: \_\_\_\_\_

Attention/Control

- Gain adult attention
- Gain peer attention
- Get sent to preferred adult
- Gain control of person/activity
- Other: \_\_\_\_\_

Sensory/Perceptual

- Automatic sensory stimulation
- Perceptual reinforcement
- Secondary to a fear of phobia
- Results from poor impulse control
- Related to an obsession or compulsion
- Other \_\_\_\_\_

Gain Desired Item

- Get desired item/activity  
\_\_\_\_\_
- Other \_\_\_\_\_

**Hypothesis of Function of Behavior**

When \_\_\_\_\_ occurs in the context of \_\_\_\_\_ the student displays (behavior) in order to  
antecedents/triggers setting/activity

\_\_\_\_\_  
 Perceived function

What does the student do well? What positive behaviors, activities, and/or roles could replace the problem behavior and still serve the same function for the student? \_\_\_\_\_

\_\_\_\_\_

When, where and with whom is problem behavior typically not displayed? \_\_\_\_\_

\_\_\_\_\_

List some potential incentives or motivators for this student:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_