

1933 E Second Street Defiance, OH 43512 PH: 419-784-2150 Fax: 419-784-5048

Date:

Functional Behavioral Assessment: Part 1 (Description)

Name:	DOB:	Site:	Teacher:	
Data Sources: ☐ Observation ☐ Teacher	r Interview 🗆 Parent Interviev	w		
Description of Behavior (No	_):			
Setting(s) in which behavior occurs:				
Frequency:				
rrequency:				
Intensity (Consequences of problem behavior on student, peers, instructional environment):				
Duration:				
Describe Previous Interventions:				
Educational impact:				
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Name:	Functional Behavioral Assessment: Part 2 (Function)	Date:
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Function of Behavior (No): Specify hypothesized function for each area checked below.
☐ Affective Regulation/Emotional Reactivity (Identify emotional factors; anxiety, depression, anger, poor self-concept; that play a role in organizing or directing problem behavior):
□ Cognitive Distortion (Identify distorted thoughts; inaccurate attributions, negative self-statements, erroneous interpretations of events; that play a role in organizing or directing problem behavior):
□ Reinforcement (Identify environmental triggers and payoffs that play a role in organizing and directing problem behavior): Antecedents:
Consequences:
☐ <i>Modeling</i> (Identify the degree to which the behavior is copied, who they are copying the behavior from, and why they are copying the behavior):
□ Family Issues (Identify family issues that play a part in organizing and directing problem behavior):
□ <i>Physiological/Constitutional</i> (Identify physiological and/or personality characteristics; developmental disabilities, temperament; that play a part in organizing and directing problem behavior):
□ Communicate need (Identify what the student is trying to say through the problem behavior):
□ Curriculum/Instruction (Identify how instruction, curriculum, or educational environment play a part in organizing and directing problem behavior):
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