**FUNCTIONAL BEHAVIOR ASSESSMENT**

*(Information from the Teacher)*

Student: Grade: Date:

Teacher:

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| **A Functional Behavior Assessment** is the process of coming to an understanding of why a student engages in challenging behavior. The information you provide will assist in the development of interventions and a behavior plan for the student. Your time and feedback is greatly appreciated.  **Please return the form to:** |

1. What is the behavior of concern? How long has this behavior been a concern?
2. When is the student likely to engage in this behavior and how long does it last?
3. What happens right before the behavior occurs?
4. What do you do when this behavior occurs?
5. What do you think the student gets by behaving in this way?
6. When is the student most successful and therefore less likely to engage in the behavior?
7. What other factors might be contributing to the student’s problem behavior? (influence of peers, skill deficits, attendance, tardies, health/sleep problems, medications, home/community concerns)

8. What do you see as the student’s strengths, interests, and learning preferences?