

Pickens County Board of Education

Functional Behavioral Assessment

Name _____ School _____ Grade _____

Teacher _____ Position _____ Date _____

Describe the inappropriate behavior(s) including Frequency, Intensity (1 being slight to 5 being severe), and Length of Time.

1. _____

Frequency: _____ Intensity: _____ Length of Time: _____

2. _____

Frequency: _____ Intensity: _____ Length of Time: _____

3. _____

Frequency: _____ Intensity: _____ Length of Time: _____

Perceived reason(s) for the inappropriate behavior(s):

- ↑ Seeking Attention from Teacher
- ↑ Seeking Attention for Peers
- ↑ Seeking Attention from Parents
- ↑ Escape/Avoidance from an Activity/Task
- ↑ Escape/Avoidance from a Person _____
- ↑ Excess focus on tangibles (food, toys, computer, etc.)
- ↑ Gratification (self-reward)
- ↑ Justice Revenge
- ↑ Power/Control over Teachers
- ↑ Power/Control over Peers
- ↑ Power/Control over Parents
- ↑ Escape/Avoidance from the classroom
- ↑ Escape/Avoidance from the school
- ↑ Expression of self
- ↑ Sensory Stimulation
- ↑ Other _____

Activity/Event appeared to trigger/set off or precede the inappropriate behavior(s):

- ↑ Task Explanation
- ↑ Teacher Reprimand
- ↑ Lack of Attention
- ↑ Teacher Request
- ↑ Transition (routine)
- ↑ Transition (unexplained)
- ↑ Fatigue
- ↑ Excess Motor Activity
- ↑ Other _____
- ↑ Lesson Presentation
- ↑ Individual Attention
- ↑ Off Task
- ↑ Task Demands
- ↑ Elevated Noise Level
- ↑ Social Issues
- ↑ Negative Feedback
- ↑ Appears Drowsy/Sleepy
- ↑ Other _____
- ↑ Consequences Imposed for Negative Behavior
- ↑ Presence of unfamiliar adult
- ↑ Directive/Request from Adult
- ↑ Redirected from Inappropriate Activity
- ↑ Unstructured Environment (hallway, cafeteria, etc.)
- ↑ Provocation by Peers
- ↑ Time of Day
- ↑ Disturbed Affect (sad, angry, etc.)
- ↑ Other _____

