

OP-1 Functional Behavior Assessment (Optional Form)

District Name

Child's Name:
Date of Meeting:

Student ID:
Date of Implementation:

Grade:

Directions: A functional behavioral assessment (FBA) must be conducted when the IEP team determines that the student's behavior is a manifestation of the student's disability. A FBA may be conducted, as determined appropriate by the student's IEP team, if the student's behavior results in disciplinary action that changes the child's placement on the continuum of alternative placement options.

Please fill out a separate copy of this form for each behavior being assessed.

1. Behavior of Concern: Provide a description of the behavior in observable and measurable terms. Include a description of the intensity, frequency and duration of the problem behavior.

2. What Event Triggers the Behavior (Antecedent): Include a description of environmental factors which may contribute to the behavior (e.g., medical conditions, sleep, diet, scheduling and social factors).

3. Setting Where Behavior Most Likely Occurs: Describe the setting in which the behavior occurs (time of day, physical setting, persons involved). Include a description of any relevant events that preceded the target behavior (antecedents).

4. How Often/How Long: Describe the time between the request to stop or change the behavior and the time of the student's response to the request.

5. Who is the student most likely to react negatively to when requested to do something and who is the student least likely to react negatively to when requested to do something?

6. What is the vocal adult response to the student's negative behavior?

7. Consequences: Include a description of the consequences that resulted from the behavior of concern.

8. Why (function or purpose of behavior)? What is the student communicating through the behavior of concern?

Functional Behavioral Assessment Additional Information*

Behavior History Interventions Attempted	Primary Mode of Communication	Other Relevant Information (e.g., medical)

Signatures:

_____	_____
_____	_____
_____	_____
_____	_____