

Student:

Date:

Time:

Staff Member:

Check all that apply in each section.

Antecedents	Behavior	Consequences
<input type="checkbox"/> student is asked to do something <input type="checkbox"/> student is asked <i>not</i> to do something <input type="checkbox"/> preferred activity ends <input type="checkbox"/> non-preferred activity begins <input type="checkbox"/> group instruction <input type="checkbox"/> one-on-one instruction <input type="checkbox"/> student is alone <input type="checkbox"/> preferred object is removed <input type="checkbox"/> other: _____ _____ _____	<input type="checkbox"/> hits _____ <input type="checkbox"/> throws object(s) at _____ _____ <input type="checkbox"/> spitting on _____ <input type="checkbox"/> kicking _____ <input type="checkbox"/> screams/makes other sound <input type="checkbox"/> property destruction <input type="checkbox"/> what: _____ <input type="checkbox"/> runs away from staff <input type="checkbox"/> other: _____ _____ _____	<input type="checkbox"/> verbal reprimand (told "no"; "stop that") <input type="checkbox"/> activity ends/demand is removed <input type="checkbox"/> request is repeated until student complies <input type="checkbox"/> behavior is ignored <input type="checkbox"/> preferred object is removed <input type="checkbox"/> preferred object is given <input type="checkbox"/> student is escorted outside to "cool-off": length of time until student is calm: _____ <input type="checkbox"/> other: _____ _____

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