

St. Martin Parish School System
FUNCTIONAL BEHAVIORAL ASSESSMENT (FBA)

Student: _____ School _____ Grade _____ DOB _____ Age _____
 Today's Date: _____ Date of Incident : _____ Exceptionality: _____
 Current Use: ___ General ___ Suspension Placement: ___ Reg.Ed ___ Inclusion ___ Resource ___ Self-Contained

Describe the **BEHAVIOR/incident** that prompted this FBA (what did the student do?): _____

 How long did the behavior last (**duration**)? _____ **Intensity**:(how damaging) ___ Mild ___ Severe
 How many times was the behavior observed - **frequency**: (Ex: 5 times per class period, 10 per minute, ___ times/hour, etc)

ANTECEDENTS

What is likely to "set off" or precede the problem behavior?
WHEN did the behavior occur?

- Morning Afternoon
- Time: _____

WHERE did the problem occur?

- Reg Ed Classroom Hallway Bus
- SPED Classroom Cafeteria Gym

During what **SUBJECT/ACTIVITY** did the behavior occur?

- Subject(s) _____
- Unstructured Activities _____

WHO was present when the behavior occurred:

- Teacher
- Peers
- Other _____

WHAT EVENT or **CONDITION** preceded this problem behavior?

- A demand or request
- Change in schedule or routine.
- Consequences given for behavior.
- Comments from peers/staff.
- Provoked
- Appears angry.
- Frustrated
- No medication
- Home factor
- Not interested in lesson
- Unstructured time
- Curriculum and Instruction (inadequate assistance, unclear expectations)
- Isolated Incident
- Other: _____

When is the student most successful? _____

HYPOTHESIS/FUNCTION (choose only one)

Why is the student acting his way?

- Gains Attention, Power, Control**
(over teacher, peer, item, activity, control over others or situation)
- Avoidance/Escape**
(from task, activity or person)
- Self-Stimulation, Sensory, Physiological Needs**
(anxiety, illness, medication, senses)

Has student participated in PBIS?: _____

INTERVENTIONS:

What has been tried thus far to change the problem behavior?

- This is a first occurrence
- Behavior , academic contract or BIP **Date:** _____
- Rules/consequences reviewed with student.
- Contacted parent _____
- Modified instruction/curriculum. How? _____

- Adjusted Schedule. How? _____

- Conferences with parent/student- Dates: _____

- Sent to office/Suspensions. Dates: _____

- Loss of incentive/privileges/rewards. What? _____

- Revised BIP. Date: _____

CONSEQUENCES:

Committee Members: _____

Replacement Behavior(s): (to be implemented on BIP): **I want** _____ **to** _____
