30 MINUTE SCATTERPLOT DATA SHEET

Student Name: _____ **School:** _____**Grade:** _____

Observer(s): _____

Describe Behavior: _____

(be specific, ex: list behaviors such as hitting, kicking, spitting, NOT Aggression)

Key:
- ■ = **Behavior Occurred**
- ☒ = **Did not Occur**
- □ = **No Data**

Instructions: Fill in the date at the top of the chart. For each 30 min interval, fill in the box according to the key provided. If you were unable to collect data, leave the box blank.

Time		Date																								
From	To																									
		M	T	W	R	F	M	T	W	R	F	M	T	W	R	F	M	T	W	R	F	M	T	W	R	F
7:00	7:30																									
7:30	8:00																									
8:00	8:30																									
8:30	9:00																									
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4:00	4:30																									
4:30	5:00																									