

**Teacher's Interview**

**Functional Assessment Interview Form**

<b>Student Name:</b>	<b>Date:</b>	
<b>School:</b>	<b>Interviewer:</b>	
<b>Grade:</b>	<b>Interviewee:</b>	
<b>Describe the student's strengths.</b>		
<b>What are the top two most concerning problem behaviors? What do they look like? <i>Star the behavior of greatest concern.</i></b>		
<b>Are there other behaviors of concern?</b>		
<b>How often do these "top" behaviors occur (e.g., hourly, daily, weekly, or less often)? How long do they last (e.g., seconds, minutes, hour)?</b>		
	<b>How often?</b>	<b>How long?</b>
<b>Behavior #1</b>	<input type="checkbox"/> Hourly <input type="checkbox"/> Daily <input type="checkbox"/> Weekly	<input type="checkbox"/> less than 1 min. <input type="checkbox"/> 1-5 minutes <input type="checkbox"/> 6-10 minutes <input type="checkbox"/> 11-20 minutes <input type="checkbox"/> over 20 minutes

<b>Behavior #2</b>	<input type="checkbox"/> Hourly <input type="checkbox"/> Daily <input type="checkbox"/> Weekly	<input type="checkbox"/> less than 1 min. <input type="checkbox"/> 1-5 minutes <input type="checkbox"/> 6-10 minutes <input type="checkbox"/> 11-20 minutes <input type="checkbox"/> over 20 minutes
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**How intense are these behaviors (mild: disruptive but little risk to property or health, moderate: property damage or minor injury, severe: significant threat to health or safety)? List the intensity of each behavior.**

<b>Behavior 1</b>	<b>Mild:</b>  <b>Moderate:</b>  <b>Severe:</b>
<b>Behavior 2</b>	<b>Mild:</b>  <b>Moderate:</b>  <b>Severe:</b>

**What typically happens right before each of the problem behaviors occurs? What conditions are most likely to precipitate (“set off”) the targeted behaviors? Is the student trying to avoid something? Is the student trying to communicate a need to us? What might that be?**

<b>Behavior 1</b>	
<b>Behavior 2</b>	

**How do you and others react or respond to the problem behavior? What do you and others do to calm him/her down once he/she engaged in the problem behavior? What do you and others do to distract him/her from engaging in the problem behavior?**

<b>Behavior 1</b>	
<b>Behavior 2</b>	

Describe situation in which the problem behavior is most likely to occur. Do the problem behaviors reliably occur during any particular activities?

Behavior #1	Days/Time of Day: Setting/Activities: Person present:
Behavior #2	Days/Time of Day: Setting/Activities: Person present:

Describe situations in which the problem behavior is least likely to occur

Behavior #1	Days/Time of Day: Setting/Activities: Person present:
Behavior #2	Days/Time of Day: Setting/Activities: Person present:

Do the different types of behavior tend to occur in burst or clusters and/or does any type of problem behavior typically precede another type of problem behaviors (e.g., yells preceding hits)? Are there behaviors that seem to indicate that the severe behavior is about to occur?

**Physical issues that may be affecting the student's behavior? (*Medication, diagnoses, sleeping, diet, etc.*)**

**Describe student's language abilities**

**Describe student's play skills and preferred toys or leisure activities.**

**Describe the student's peer relationships.**

**What do you think he/she is trying to communicate with his/her problem behavior, if anything?**

**Do you think this problem behavior is a form of self-stimulation? If so, what gives you that impression?**

**Does any of the statement below set-off any of the behavior/s you reported?**

	Yes	No	Sometimes	Describe
A certain <u>type</u> of task/request is given?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
An <u>easy</u> task/request is given?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A <u>difficult</u> task/request is given?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<u>Certain</u> activities are presented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<u>New</u> activities are presented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A request is made during an <u>activity</u> ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The child is asked to <u>start</u> a task?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The child is asked to <u>stop</u> a task?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The child's <u>request</u> has been denied?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The normal routine is disrupted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Please list interventions that have been tried with the student.**

THANK YOU!