Functional Behavior Assessment Worksheet

DETERMINATION OF NEED FOR FUNCTIONAL ANALYSIS

Student: ___________________________ Date(s): ___________________________

Attendees: ___________________________

Behavior of Concern [describe in objective terms]: ____________________________________________________________

Resulted in emergency Intervention: Yes, date of report: ________________
                                           No

Setting(s) and Time(s) when behavior occurs/occurred: ____________________________________________________________

How often has this behavior occurred? ____________________________________________________________

Consequences which have occurred as a result of this behavior: ____________________________________________________________

"Serious Behavior Problem" [as defined in CCR Title V.3001.(aa)]:

☐ No
☐ Assaultive
☐ Significant Property Damage
☐ Other Pervasive and Maladaptive
☐ Self-Injurious

DOES THIS BEHAVIOR REQUIRE A REFERRAL FOR A FUNCTIONAL ANALYSIS TO DEVELOP A SYSTEMATIC BEHAVIOR INTERVENTION PLAN:

☐ Yes  ☐ No
☐ Student performing the behavior has a current IEP.
☐ Behavior is interfering with achievement of IEP goals.
☐ Behavior is a serious behavior problem as defined in CCR Title V. 3001.(aa)
☐ Although a serious problem, consensus is that the selected consequences or changes are likely to solve the problem and the behavior is not expected to reoccur - attach document (e.g. Goal/Objectives, BSP, modified/accommodations to classroom)
☐ Current Behavior Support Plan.
☐ Behavior Support Plan to be modified.
☐ If yes, would modification address the current behavior needs.
☐ Behavior requires a systematic behavior intervention plan following a functional analysis of the behavior.

Rationale:

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Determination of Need for Functional Analysis - Form A  May 2018
San Mateo County SELPA