



FUNCTIONAL ASSESSMENT INTERVIEW (Parent and Teacher)

Student: _____ Grade: ____ Age: _____ Sex: M F

Interviewer: _____ Date of Interview: _____

Respondents: _____

A. DESCRIPTION OF BEHAVIORS:

1. For each of the behaviors of concern, define how the behavior is performed, how often it occurs, how long it lasts when it occurs, and how severe it is when it occurs.

Behavior	How often?	How long?	How severe?
a. _____			
b. _____			
c. _____			
d. _____			
e. _____			

2. Which of the behaviors described above are likely to occur together in some way? Do they occur about the same time? In some kind of predictable sequence or “chain”? In response to the same type of situation? _____

B. SETTING EVENTS

1. What medications is the student taking, and how do you believe these may affect his/her behavior? _____

2. What medical or physical conditions does the student experience that may affect his/her behavior? (e.g. asthma, allergies, seizures, etc.) _____

3. Describe any effects sleep patterns may have on the student's behavior: _____

4. Describe any effects eating routines or diet of the student may affect his/her behavior:

5a. Briefly list below the student's typical daily schedule of activities, and indicate which activities go well, and which are associated with problem behavior.

Enjoys	Problem	Time	Enjoys	Problem	Time
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____

5b. To what extent are the student's daily activities predictable for the student in terms of what will be happening, when it will occur, with whom, and for how long? _____

6. Does the student typically seem bothered by situations that are more crowded or noisy?
 yes no

7. What is the staff to student ratio in the various settings? Do you believe that the number of staff, training of staff or their social interactions with the student affect the problem behavior?

C. PREDICTORS

1. Times of day: When are the behaviors most and least likely to happen?

Most likely: _____

Least likely: _____

2. Settings: Where are the behaviors most and least likely to happen?

Most likely: _____

Least likely: _____

3. People: With whom are the behaviors most and least likely to happen?

Most likely: _____

Least likely: _____

4. Activity: What activities are most and least likely to produce the behavior?

Most likely: _____

Least likely: _____

5. Are there particular situations not listed above that sometimes seem to “set off” the behaviors, such as particular demands, noises, lights, clothing? _____

6. What one thing could you do that would most likely make the undesirable behaviors occur? _____

7. Briefly describe how the student’s behavior would be affected if . . .

a. You asked him/her to perform a difficult task. _____

b. You interrupted a desired activity, such as drawing or working on the computer _____

c. You unexpectedly changed his/her typical routine or schedule of activities _____

d. He/She wanted something, but wasn’t able to get it (e.g. time on the computer, recess activities) _____

e. You didn’t pay attention to the student or left him/her alone for a while (e.g. 15 minutes) _____

D. CONSEQUENCES

1. On the chart below, list each of the problem behaviors identified in Section A, and then try to identify the specific consequences or outcomes the student gets when the behavior occurs. Think about what the student either obtains or avoids by demonstrating the behavior.

Behavior	What does he/she get?	What does he/she avoid?
a. _____		
b. _____		
c. _____		
d. _____		
e. _____		

E. EFFICIENCY OF THE BEHAVIOR

1. Consider the amount of effort the student needs to exert in order to obtain the desired consequence for each behavior. This includes the physical effort, the number of times the behavior needs to be demonstrated, and how long it takes to get the reward.

Behavior	Low effort					High effort
a. _____	1	2	3	4	5	5
b. _____	1	2	3	4	5	5
c. _____	1	2	3	4	5	5
d. _____	1	2	3	4	5	5
e. _____	1	2	3	4	5	5

F. STRENGTHS

1. What socially appropriate behaviors or skills can or does the student currently perform that could obtain the same rewards as the problem behaviors? (e.g. Asking appropriately for help rather than tantruming or asking appropriately for a break rather than acting out in class to get thrown out.)

G. DO'S AND DON'TS

1. What things can you do to improve the likelihood that a teaching session, class or other activity will go well with this student? _____

2. What things should you avoid that might interfere with or disrupt a teaching session, class or other activity with this student? _____

H. POSSIBLE REWARDS

1. Food items: _____

2. Toys/objects: _____

3. Activities: _____

4. Other: _____

I. HISTORY OF BEHAVIOR

1. What interventions have you or others tried to decrease or eliminate the problem behaviors, and how effective have these interventions been?

Behavior	Intervention	Effectiveness
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a. _____

b. _____

c. _____

d. _____

e. _____

