

Targeted Behavior Intervention Documentation

Student: _____ District/Building: _____ Date: _____

Student has the following in place: IEP Yes No
504 Plan Yes No

Target Behavior(s): (Define target behavior(s) in measurable and observable terms.)

Behavior Goal(s): (reduction/long-term desired)

Was this goal(s) added to the student's IEP / 504 Plan? Yes No

Progress Monitoring: (Describe procedures for collecting and analyzing data to monitor progress toward behavior goal(s) listed above.)
(form selected, who/when/how often data will be collected, analysis of data, review of progress, decide on next steps)

Fidelity Checklist: (Describe procedures for collecting and analyzing data to monitor progress toward behavior goal(s) listed above.)
(form selected, who/when/how often data will be collected, analysis of data, review of progress, decide on next steps)

ANTECEDENT INTERVENTIONS

Instructions: Complete one row for each intervention used. Add additional rows if needed.

Intervention	Procedure for Implementation	By whom and where will the intervention be implemented?	Review Date

DIRECT SKILLS INSTRUCTION RELATED TO BEHAVIOR

Instructions: Complete one row for each intervention used. Add additional rows if needed.

Intervention	Procedure for Implementation	By whom and where will the intervention be implemented?	Review Date

CONSEQUENCE INTERVENTIONS

Instructions: Complete one row for each intervention used. Add additional rows if needed.

Intervention	Procedure for Implementation	By whom and where will the intervention be implemented?	Review Date