

BEHAVIOR INTERVENTION PLAN

STUDENT _____ SCHOOL _____ DATE _____

YES NO The student can understand and follow the general student code of conduct and be subject to the normal range of consequences.

If NO, please cite rationale for this determination.

- Student has significant cognitive deficits.
- Student has a significantly limiting emotional condition (e.g., schizophrenia).
- Student has been determined to be autistic.
- Other: _____

TARGET BEHAVIORS TO BE INCREASED (need to be observable, measurable, and repeatable):

1. _____
2. _____
3. _____
4. _____

TARGET BEHAVIORS TO BE DECREASED (need to be observable, measurable, and repeatable):

5. _____
6. _____
7. _____
8. _____

Designate the behavior intervention and positive support that will be applied by placing the number of the identified behavior beside the corresponding intervention listed below. (A behavior may have more than one intervention.)

- | | |
|--|--|
| _____ Ignore behavior | _____ Refer to the office |
| _____ Increase academic support | _____ Call parents |
| _____ Provide seating change | _____ Teach social skills |
| _____ Allow free time | _____ Coach appropriate behaviors |
| _____ Allow brief break in classroom activities | _____ Pair with positive peer |
| _____ Allow for a cooling off period | _____ Provide praise and/or recognition |
| _____ Increase supervision during problematic activities/times | _____ Reduce stressful events (e.g., test anxiety, speaking in front of a group, etc.) |
| _____ Provide tangible reinforcer: | _____ Give a choice of behavior options (e.g., "You may finish your work now or during your free time.") |
| _____ | |
| _____ | |
| _____ | |

_____ Other: _____

_____ Other: _____

_____ Other: _____