



Summary of Behavior

Student's Name:	School:
Completed by:	Date Completed:

The following information is based on a review of the seven (7) school days of ABC (antecedent, behavior, and consequence) data collected.

1. Check the **three most frequently occurring problem behaviors** noted on ABC data:

- | | |
|--|---|
| <input type="checkbox"/> Fidgets | <input type="checkbox"/> Talks about suicide or death |
| <input type="checkbox"/> Impulsive | <input type="checkbox"/> Exhibits unwarranted self-blame/self-criticism |
| <input type="checkbox"/> Unable to interact with minimal friction | <input type="checkbox"/> Performs obsessive/compulsive behaviors |
| <input type="checkbox"/> Easily frustrated | <input type="checkbox"/> Changes mood for no apparent reason |
| <input type="checkbox"/> Prefers to be alone/withdrawn/isolated | <input type="checkbox"/> Rarely laughs or smiles |
| <input type="checkbox"/> Difficulty staying on task | <input type="checkbox"/> Engages in self destructive behavior |
| <input type="checkbox"/> Mute/refuses to speak | <input type="checkbox"/> Shows excessive fear of specific objects |
| <input type="checkbox"/> Difficulty paying attention | <input type="checkbox"/> Unresponsiveness |
| <input type="checkbox"/> Fails to complete work | <input type="checkbox"/> Tells of extremely strange/illogical thoughts |
| <input type="checkbox"/> Rarely interacts with classmates | <input type="checkbox"/> Creates imaginary/fantasy situations in an attempt to escape reality |
| <input type="checkbox"/> Is frequently alone during lunch/recess | <input type="checkbox"/> Experienced significant changes in activity levels/concentration/school grades |
| <input type="checkbox"/> Does not join in with group | <input type="checkbox"/> Aggression |
| <input type="checkbox"/> Upset by any change in routine | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Pronounced fear of failure | |
| <input type="checkbox"/> Depressed for most of the day | |
| <input type="checkbox"/> Little interest in pleasurable activities | |

2. **Antecedents** to problem behaviors include:

- | | |
|---|---|
| <input type="checkbox"/> Given Instruction/Prompt to Work | <input type="checkbox"/> Food removed/denied |
| <input type="checkbox"/> Transition/Interruption | <input type="checkbox"/> Other request denied |
| <input type="checkbox"/> Ignored by staff/staff walked away | <input type="checkbox"/> Provoked by peer |
| <input type="checkbox"/> Leisure materials removed/denied | <input type="checkbox"/> Other: _____ |

3. **Consequences** for problem behaviors include:

- | | |
|--|--|
| <input type="checkbox"/> Warning | <input type="checkbox"/> Loss of PBIS: _____ |
| <input type="checkbox"/> Verbal redirection | <input type="checkbox"/> Loss of time on recess/activity |
| <input type="checkbox"/> Conference with teacher | <input type="checkbox"/> Loss of access to items |
| <input type="checkbox"/> Time-out in room (duration _____) | <input type="checkbox"/> Parent phone call |
| <input type="checkbox"/> Time out in another room (duration _____) | <input type="checkbox"/> Parent Conference |
| <input type="checkbox"/> Separation of students | <input type="checkbox"/> Detention |
| <input type="checkbox"/> Prompt to participate | <input type="checkbox"/> ISS |
| <input type="checkbox"/> Assigned to work with a peer | <input type="checkbox"/> OSS |
| <input type="checkbox"/> Behavior ignored | <input type="checkbox"/> Conference with Principal |
| <input type="checkbox"/> Physical prompt used to redirect | <input type="checkbox"/> Other: _____ |

4. Problem behaviors **occur** in the following settings:

- | | |
|--|---|
| <input type="checkbox"/> English/Language Arts | <input type="checkbox"/> Cafeteria |
| <input type="checkbox"/> Math | <input type="checkbox"/> Hallway |
| <input type="checkbox"/> Social Studies | <input type="checkbox"/> Playground |
| <input type="checkbox"/> Science | <input type="checkbox"/> Restroom |
| <input type="checkbox"/> Other Academic Area _____ | <input type="checkbox"/> Dismissal area |
| <input type="checkbox"/> Other Academic Area _____ | <input type="checkbox"/> Bus loading zone |

☐ Car loading zone

☐ Other: _____

5. Problem behaviors **do not occur** in the following settings:

☐ English/Language Arts

☐ Math

☐ Social Studies

☐ Science

☐ Other Academic Area _____

☐ Other Academic Area _____

☐ Cafeteria

☐ Hallway

☐ Playground

☐ Restroom

☐ Dismissal area

☐ Bus loading zone

☐ Car loading zone

☐ Other: _____

Description of what has been done to address the problem behavior (e.g., sticker chart, use of timer, time with preferred activity after work completion, etc.) that is not a typical accommodation for students:

Provide a description of how the identified problem behaviors are not typical for the student's age, setting, circumstances, and peer group:

Provide a description of problem behaviors in narrative form:

(continue on back if needed)