School Functional Assessment Questionnaire

Student__________________  Age_____  Sex: M F  Respondent__________________

Behavior

1. Write down how often the behavior happens (e.g., 2 times a day, 4 times per period or activity), and/or how long the behavior lasts (e.g., 5-10 minutes). Describe the intensity of the problem behavior by checking one option.

<table>
<thead>
<tr>
<th>Behavior</th>
<th>How Often?</th>
<th>Intensity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>__bothersome  __ disruptive  __ violent</td>
</tr>
</tbody>
</table>

Environmental factors that affect the behavior

2. Please check the factors that may make my student=s behavior worse:

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>sick</td>
<td>parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>lack of sleep</td>
<td>hears loud noise</td>
<td></td>
<td></td>
</tr>
<tr>
<td>hungry/thirsty</td>
<td>a holiday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>on medication</td>
<td>visitors in class</td>
<td></td>
<td></td>
</tr>
<tr>
<td>tired/exhausted</td>
<td>after a seizure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>hot or cold</td>
<td>has schedule changes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>other (list):</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Immediate Environmental Influences/Triggers

3. Check all adjacent school settings where problem behavior is most likely or least likely to occur.

Most likely:  ____ halls  ____ cafeteria  ____ courtyard  ____ Library
            ____ bus  ____ bathroom

Other areas:

Least likely:  ____ halls  ____ cafeteria  ____ courtyard  ____ Library
             ____ bus  ____ bathroom

Other areas:

Comments: ___________________________________________

4. List any specific activities or routines/activities at school in which problem behavior is most likely or least likely to occur. Be specific with subject/activity (e.g., academic classes, P.E., Art, electives, speech, counseling, transitions out or in classroom).

Most likely:

Least likely:

5. Check specific aspects of an activity/subject:

Most likely:

_____ beginning  ____ new materials or concepts  ____ using pen or pencil
_____ long activities  ____ in between activities or assignments  ____ using a computer
_____ waiting  ____ into work or activity (10 + minutes)  ____ transitions between activities
_____ difficult work  ____ getting materials  ____ worksheets w/multiple exercises
_____ sitting next to quiet students  ____ sitting next to noisy students  ____ sitting alone
_____ independent work  ____ group work  ____ other students talking
_____ teacher helping others  ____ teacher talking to another adult  ____ staying w/a task
Least likely:

____ beginning an activity
____ long activities
____ waiting
____ difficult work
____ sitting next to quiet students
____ independent work
____ teacher helping

____ into work or activity (10 or more min.)
____ in between activities or assignments
____ getting materials
____ worksheets w/multiple exercises
____ sitting next to noisy students
____ group work
____ teacher talking to others

____ using a computer
____ using pen or pencil
____ transitions between activities
____ new materials or concepts
____ sitting alone
____ staying w/a task
____ other students talking
____ another adult

Comments: _________________________________

6. List any specific activities or routines in the community in which problem behavior is most likely or least likely to occur if you go into community (e.g., shopping, eating, visits to schools, job sites riding in car/bus).

Most likely:

Least likely:

7. List times of day when problem behavior is most likely to occur. List times of day when problem behavior is least likely to occur.

Most likely:  ____ Before class  ____ Midmorning  ____ Afternoon
____ Just before lunch  ____ end of day  ____ During lunch

Least likely:  ____ Before class  ____ Midmorning  ____ Afternoon
____ Just before lunch  ____ end of day  ____ During lunch

Comments: _________________________________

Communication/Social Skills
8. List the type of social interactions most problematic:

_____ peers  _____ initiating conversations  _____ maintaining conversations
_____ terminating conversations  _____ staying on topic
_____ maintain eye contact  _____ no problem at all

_____ adults  _____ initiating conversations  _____ maintaining conversations
_____ terminating conversations  _____ staying on topic

Comments: _________________________________

9. List all of the forms of independent communication skills.

_____ Requesting attention
   _____ object  _____ gesture  _____ pictures  _____ words  _____ problem behavior
   give example: _________________________________

_____ Requesting objects, materials, activities
   _____ object  _____ gesture  _____ pictures  _____ words  _____ problem behavior
   give example: _________________________________

_____ Rejecting, stopping, or avoiding an activity, transition
   _____ object  _____ gesture  _____ pictures  _____ words  _____ problem behavior
   give example: _________________________________

10. When your student tries to tell you something, or show you something, and you don’t understand, what will your student do? (e.g., repeat action or word, repeat vocalization, change the action or vocalization, get frustrated, say nothing)

Problem Behavior/Responses (actual response and the purpose/function)

11. What do you do in response to each of your student=s problem behaviors? (list behaviors and responses)

<table>
<thead>
<tr>
<th>Problem Behavior/Context</th>
<th>Adult Response to Problem Behavior</th>
<th>What does student get (neg. or pos. attention, activities, Materials, etc.)? Or Avoid (work, demands, etc.)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>_________________________</td>
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</table>

12. List interventions or strategies that have been used in the past as an attempt to reduce
problem behavior.

What=\textbf{s} worked? \hspace{1cm} \textbf{What hasn'}t worked?

\textbf{Student Attributes}

13. Please describe under what circumstances/activities the student’s behavior is most appropriate.

14. List the kinds of food or snacks the student prefers.

15. List the kinds of activities the student prefers.

16. Who does the student prefer to be around? Please list all.

17. List your student’s favorite topics of conversation.

18. Describe your student=s greatest strengths: