

Functional Behavioral Assessment (FBA) Guardian Interview

Date: _____

Student's Name: _____ Grade: _____

Personal completing the form (relationship): _____

1. What are the student's strengths? What does he/she do well?

2. Primary Behavioral Concerns:

Description of behavior	How often behavior occurs and for how long	Function of the behavior (why does the student do this?)

3. Are there any other behaviors that you are concerned about?

4. What seems to trigger, or cause, the previously mentioned behaviors?

5. Are there situations or settings that seem to increase or decrease the behavior (ie. Number of people, small/large area, structured/unstructured, more/less adults, etc ?

6. What strategies or techniques have you found helpful in preventing or diffusing these behaviors?

7. Is there any other information you have regarding the student's behavior that you feel the school should be aware of (i.e., current medical, physical, or mental health diagnosis, or significant family/social history)?