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###### Student’s Name:

School:

Date:

Individual Completing Form:

**7**

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| --- | --- | --- | --- |
| **Time of Day &****Activity** | **Antecedent (A)****What occurred before the behavior?** | **Behavior (B) What did he or she do?** | **Consequence (C)****How did you or others respond?** |
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Student’s Name: Alex

Individual Completing Form: Teacher

School: Martin Luther King Day MS

Date:

12-2-17

**8**

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| **Time of Day &****Activity** | **Antecedent (A)****What occurred before the behavior?** | **Behavior (B) What did he or she do?** | **Consequence (C)****How did you or others respond?** |
| Bathroom 10 am | Directed to use bathroom from adult | Scratched adult's arm Layed on floor/took off shirt | Moved away; gave a sensory toy and waited for him to stand-up |
| Individual Work Time (ILP Goals) 9:30 | Asked to identify numbers "Give me 5" | Tried to bite adult's arm and took off shirt | Told, "no biting." Removed the task for a minute then tried again. |
| Individual Work Time (ILP Goals) 10:15 | Asked to sort categories of pictures | Tried to bite and head-butt teacher in arm | Told, "No biting". Removed task and then kept trying and removing task until he ran away. Ended activity. |
| Lunch 12:00 | Given a choice of water or sandwhich | Dropped to floor and laid down | Gave another choice and let eat on floor |
| Bathroom 12:20 | Directed to go to bathroom. | Hit teacher | Told, "We don't hit. No!" Continued to walk him to bathroom. |
| Individual work time (ILP Goals) | Asked to trace his name. | Tried to bite teacher | Allowed to take a brief break and bounce on the ball. |



Student Name:

School:

Grade/Age:

Person Completing Data Sheet: Description of Behaviour(s) (be specific):

Directions: List the student’s daily activities/routines in chronological order in the left column. For each activity, fill in the box according to the key provided. If you were unable to collect data leave the box blank.

Key:

= Behaviour occurred

**X**

= Behaviour did not occur

= No data collected

**NA**

|  |  |
| --- | --- |
|  | **Activity/Routine** |
| **Activity/Routine** |  |
| **M** | **T** | **W** | **TH** | **F** | **M** | **T** | **W** | **TH** | **F** |
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Student Name: Alex

School: Martin Luther King MS

##### Grade/Age:

 8th/14 yrs

Person Completing Data Sheet:

 Teacher and Classroom Assistant

Description of Behaviour(s) (be specific):

1. Aggression - bites or scratches staff on arms; head-butts (bangs head on staff's body); (b) lays on floor (c) disrobes - takes all or part of clothes off

Directions: List the student’s daily activities/routines in chronological order in the left column. For each activity, fill in the box according to the key provided. If you were unable to collect data leave the box blank.

Key:

= Behaviour occurred

**X**

= Behaviour did not occur

= No data collected

**NA**

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| --- | --- |
|  | **Activity/Routine** |
| **Activity/Routine** | **Dec 2nd- 6th and 9th-13th** |
| **M** | **T** | **W** | **TH** | **F** | **M** | **T** | **W** | **TH** | **F** |
| **Arrival Routine** |  |  |  |  |  |  |  |  |  |  |
| **Free Time** |  |  |  |  |  |  |  |  |  |  |
| **Bathroom** |  | X | X | X |  | X | X |  | X | X |
| **Individual Work** |  |  | X | X |  | X | X |  | X | X |
| **Snack** |  |  |  |  |  |  |  |  |  |  |
| **Vocational Work** |  |  |  |  |  |  |  |  |  |  |
| **Free Time** |  |  |  |  |  |  |  |  |  |  |
| **Individual Work** | X | X | X | X | X | X | X | X | X | X |
| **Lunch** | X | X |  | X |  | X | X | X |  |  |
| **Bathroom** |  |  | X | X | X |  |  | X | X | X |
| **Specials (PE/Music)** |  |  |  |  |  |  |  |  |  |  |
| **Individual Work** | X | X | X | X | X | X | X | X | X | X |
| **Departure Routine/Home** |  |  |  |  |  |  |  |  |  |  |
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