

# Functional Behavior Assessment Form for Preschoolers

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_

Grade/School: \_\_\_\_\_

Teacher/Case Manager: \_\_\_\_\_

Date of Assessment: \_\_\_\_\_

## Section 1: Observational Data

Briefly describe the problematic behaviors observed and the context.

- **Setting/Environment: (Where does the behavior usually occur?)**

Classroom  Playground  Cafeteria  Home  Other:

\_\_\_\_\_

- **Frequency: (How often does the behavior occur?)**

Daily  Weekly  Occasionally  Rarely

- **Duration: (How long does the behavior last?)**

Seconds  Minutes  Hours

## Section 2: Problematic Behaviors

Identify the problematic behaviors and note the conditions under which they occur.

Problem Behavior	Trigger	Frequency (1-5)	Duration (1-5)
_____	_____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
_____	_____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5

_____	_____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
_____	_____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5

**Section 3: Antecedents**

List the events that happen before the behavior occurs.

- **Type of Antecedent: (What precedes the behavior?)**  
 Request to work  Peer interaction  Unstructured time  Other:  
\_\_\_\_\_
- **Consequences of Behavior: (What typically follows the behavior?)**  
 Removal from the situation  Peer attention  Teacher response   
Other: \_\_\_\_\_

**Section 4: Function of Behavior**

Indicate the purpose or reason for the behavior.

Function	Behavior	Confirmed (Check if yes)
To get attention	_____	<input type="checkbox"/>
To avoid a task	_____	<input type="checkbox"/>
Sensory stimulation	_____	<input type="checkbox"/>
Other: _____	_____	<input type="checkbox"/>

**Section 5: Intervention Plan**

Develop a strategy to address the behavior, focusing on positive reinforcement and behavioral support.

- **Replacement Behavior:** \_\_\_\_\_

- **Reinforcement for Replacement Behavior:**

Verbal Praise  Reward  Extra Playtime  Other:

\_\_\_\_\_

**Section 6: Outcome of Intervention**

**Provide updates on the intervention's effectiveness over time.**