

Behavior Tracking Form for Students

Student's Name: _____

Grade/Class: _____

Date of Tracking: _____

Teacher's Name: _____

Behavior Goal:

Define the behavior the student is working on, such as attentiveness, respect, or participation.

Behavior Frequency

- Participates in Class Discussions: Often Sometimes Rarely
- Completes Assignments on Time: Yes No
- Follows Instructions: Always Occasionally Needs Improvement
- Engages in Positive Peer Interactions: Yes No

Behavior Observations and Notes:

Describe specific incidents or patterns in the student's behavior.

Daily Tracking Table

Date	Subject/Activity	Observed Behavior	Comments

Next Steps/Interventions

List any actions or support strategies that will be used to encourage positive behavior.

Parent/Guardian Signature (if applicable): _____

Date: _____

Teacher's Signature: _____