Interview Record:
Talk to the child and/or someone who knows the child well. As this person the following questions about the problem behavior, asking additional questions until you fully understand his or her perspective.
What are _____ greatest strengths and interests? (e.g. What does _____ do well, enjoy?
What specifically is _____ doing that is of concern to you?
Under what circumstances (when, where, with whom) do these behaviors occur most?
Under what circumstances (when, where, with whom) do these behaviors occur least?
What do you think _____ gets or avoids through these behaviors?
Is there anything else you think might be affecting _____ behavior?

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TIME CHART

Problem behavior : _____

List the time periods and/or activities in a typical day in the left-handed in the left-hand column and record the dates in the boxes to the right. Mark the block if the behavior occurs during that time period or activity. Use the column for each recorded day. Record for enough days to notice a pattern in when the behaviors are occurring.

Activity or time of day	**Date:**						

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Behavioral Log

Name: _____ **Date:** _____

Situation (witnessed behavior): _____

What happened before the behavior?:	What he or she did?	What happened after?

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