KES

Staff Request for Assistance

Student Name: _____ Age: _____ Grade: _____

IEP: Yes No   504 Plan: Yes No

Staff Completing: _____ Date: _____

KES

Problem Behavior Occurrence

When, where, and with whom are problem behaviors most likely?

Schedule (Times)	Activity	Specific Problem Behavior	Likelihood of Problem Behavior (circle one)	With Whom does Problem Occur
			Sometimes Often Almost Always	
			Sometimes Often Almost Always	

Strategies You Have Tried to Address Problem Behavior

Check all that apply:

___Established positive relationship with student   ___Self-monitoring

___Pre-correction and redirection   ___Modified assignments

___Tangible recognition for expected behavior/