**Functional Behavioral Assessment (FBA)**

**Record Review Notes**

Make an “X” in the box indicating the forms that were available and reviewed and write down the major themes and important notes that were retrieved from the record review.

Student:      Date of review:

Name of team member reviewing records:

Medical Documents

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |

Mental Health Documents

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |

Past Behavior Support Plans/Interventions/Behavior Support Strategies

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |

School Attendance History

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |

**Functional Behavioral Assessment (FBA)**

Record Review Notes – continued

Office Referrals and Disciplinary Actions

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |

Academic History (Grades, Test Scores, Credits Earned, GPA, etc.)

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |

Educational Programs and Plans

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |

Other School Services

(e.g. social worker, behavior consultant, Systems of Care, occupational therapy, speech and language therapy, nursing)

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |

Other Agency Involvement

(e.g. child protective services, probation, church, clubs)

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |