

<b>Child Information:</b>	Name: _____ Classroom: _____	Age: _____ Date: _____
<b>BIP Report By:</b>		
<b>Problem Behavior:</b> <i>Inappropriate Behavior(s)</i>		
<b>Replacement Behavior:</b> <i>What is expected of the student?</i>		
<b>Method of Teaching Replacement Behavior and By Whom:</b> <i>How will we teach the desired behavior and who will teach it?</i>	<input type="checkbox"/> direct instruction, by: _____ <input type="checkbox"/> role playing, by _____ <input type="checkbox"/> modeling, by _____ <input type="checkbox"/> other: _____ <input type="checkbox"/> social skills training, by _____ <input type="checkbox"/> providing visual cues, by _____ <input type="checkbox"/> providing verbal cues, by _____	
<b>Accommodations, Interventions, and Who's Responsible for Them:</b> <i>What help will we give the student to help him/her succeed?</i>	<b>Accommodations to assist the child in displaying the replacement behavior:</b> <input type="checkbox"/> clear, concise directions <input type="checkbox"/> visual reminders <input type="checkbox"/> frequent reminders/prompts <input type="checkbox"/> communicate regularly with parents <input type="checkbox"/> other: _____ <input type="checkbox"/> modify activities <input type="checkbox"/> provide quiet time <input type="checkbox"/> predictable routine/schedule <input type="checkbox"/> preferential seating	
It is VERY important that these accommodations and/or recommendations be followed consistently by teacher(s), assistants and all staff.	<b>Interventions &amp; Who's Responsible for Them:</b> 1. 2. 3. 4.	
<b>Method of Measuring Progress:</b> <i>How will we know if it's working or not?</i>	<input type="checkbox"/> direct observation/notes <input type="checkbox"/> daily behavior record/tally <input type="checkbox"/> other: _____	
<b>Length of behavior plan</b>	<input type="checkbox"/> 2 weeks <input type="checkbox"/> 3 weeks <input type="checkbox"/> other: _____	
<b>Positive Consequences for Appropriate Behavior</b> <i>What can the child earn?</i>	<input type="checkbox"/> verbal praise <input type="checkbox"/> immediate feedback <input type="checkbox"/> favorite activity _____ <input type="checkbox"/> earned privileges _____ <input type="checkbox"/> earn sticker/token <input type="checkbox"/> positive call/note home <input type="checkbox"/> other: _____	
<b>Negative Consequences for Inappropriate Behavior:</b> <i>What happens if the child doesn't comply?</i>	<input type="checkbox"/> verbal <input type="checkbox"/> loss of privileges <input type="checkbox"/> moved to different area <input type="checkbox"/> lose sticker/token <input type="checkbox"/> phone call home <input type="checkbox"/> other: _____	
<b>Results:</b>		
<b>Next Steps:</b>		