



## Functional Behavioral Assessment Consent Form

Dear Parent/Guardian,

As a way to best serve your child, \_\_\_\_\_, we would like to conduct a functional behavior assessment (FBA). A functional behavior assessment is the process of:

- Identifying behavior(s) that negatively impact school performance
- Identifying environmental events that impact these behavior(s)
- Determining the cause/function of the behavior(s)
- Outlining the necessary changes needed to be made by the school, teacher, student, and parent/guardian in order to allow the student to successfully access the general curriculum.

An FBA may include, but is not limited to, the following components:

- Interviews completed by the student (if applicable), teacher(s), and parent(s)/guardian(s) regarding the student's behavior.
- Information gathering tools (e.g., cumulative file review, Motivation Assessment Scale, teacher rating scale and student self-assessment)
- Observations of student behavior in school settings
- Data collection on student behavior
- Interventions to address student behavior, which focus on decreasing negative behavior and teaching new, appropriate replacement behaviors
- Ongoing data collection to evaluate intervention effectiveness
- Safety or crisis plan, if necessary.

We greatly appreciate your involvement in this plan during each step in the process. If you have any questions regarding this process please call \_\_\_\_\_ at \_\_\_\_\_.

Please sign below to indicate whether or not you give consent to conduct a functional behavior assessment (FBA).

---

I give consent for my child, \_\_\_\_\_, to participate in a functional behavior assessment.

I do not give consent for my child, \_\_\_\_\_, to participate in a functional behavior assessment.

---

Parent/Guardian Signature

---

Date