

# RTI

Behavior Documentation  
Form

Freebie

The Helpful Counselor

Fully  
Editable

Student\_\_\_\_\_ Grade:\_\_\_\_\_ Teacher:\_\_\_\_\_

Description of Behavior: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Baseline:

Frequency: \_\_\_\_\_ Duration: \_\_\_\_\_

Intensity:    1       2       3       4       5       6       7       8       9       10

Week 1

Frequency: \_\_\_\_\_ Duration: \_\_\_\_\_

Intensity: 1 2 3 4 5 6 7 8 9 10

Week 2

Frequency: \_\_\_\_\_ Duration: \_\_\_\_\_

Intensity: 1 2 3 4 5 6 7 8 9 10

Week 3

Frequency: \_\_\_\_\_ Duration: \_\_\_\_\_

Intensity: 1 2 3 4 5 6 7 8 9 10

Week 4

Frequency: \_\_\_\_\_ Duration: \_\_\_\_\_

Intensity: 1 2 3 4 5 6 7 8 9 10

Week 5

Frequency: \_\_\_\_\_ Duration: \_\_\_\_\_

Intensity: 1 2 3 4 5 6 7 8 9 10

Week 6

Frequency: \_\_\_\_\_ Duration: \_\_\_\_\_

Intensity: 1 2 3 4 5 6 7 8 9 10

Week 7

Frequency: \_\_\_\_\_ Duration: \_\_\_\_\_

Intensity: 1 2 3 4 5 6 7 8 9 10

Week 8

Frequency: \_\_\_\_\_ Duration: \_\_\_\_\_

Intensity: 1 2 3 4 5 6 7 8 9 10

Student\_\_\_\_\_ Grade:\_\_\_\_\_ Teacher:\_\_\_\_\_

Date	Method			Topic	Response
	Phone	Email	In-Person		
	Phone	Email	In-Person		
	Phone	Email	In-Person		
	Phone	Email	In-Person		

Intervention	Start Date	Week 1	Week 2	Week 3	Week 4	Cont. Y or N
Behavior Chart						
Daily Note Home (w/parent signature)						
Behavior Contract						
<b>Positive Reinforcement:</b> Description & Frequency						

<b>Intervention</b>	<b>Start Date</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Cont. Y or N</b>
Visual Schedule						
Preferential Seating (location)						
<b>Academic Support</b>						
Chunk Assignments						
Individualized Instruction						
Redo Assignment/Retake Tests						
Reduced Assignments						
Extended Time						
Daily Planner Checks						
Copy of Planner Entry (student staples to planner)						
Study Guide						
Unit Outline (support for note taking)						
Color Coded/Labeled Organization System						
Weekly Desk/Backpack Organization Support						

<b>Intervention</b>	<b>Start Date</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Cont. Y or N</b>
Visual Signals						
Timer						
Fidget						
Textured/Ball Seat						
Carpet Square/Defined Sitting Area						
Designated Spot in Line						
Positive Peer Modeling						
Mentoring/Working with Lower Grades						
Safety Patrol						
Adult/Community Mentor						
Special Class Job						
Team Building						
<b>Daily Brain Breaks</b>						
Physical Brain Breaks						
Nonphysical Brain Breaks						

