

## Functional Behavior Assessment Consent Form

Dear \_\_\_\_\_:

As a way to best serve your student, \_\_\_\_\_, we would like to conduct a Functional Behavior Assessment (FBA). A Functional Behavior Assessment is the process of collecting information to help identify student behaviors that interfere with learning and to determine why these behaviors occur.

An FBA may include, but is not limited to:

- Interviews completed with teacher(s), parent(s)/guardian(s), and the student (if applicable) regarding the student's behavior
- Information-gathering tools (e.g., cumulative file review, behavior rating scales, teacher rating scales, student self-assessment)
- Observations of student behavior in the school setting
- Data collection on student behavior

The purpose of the FBA is to collect information to help develop a Positive Behavior Support Plan (PBSP) for your student to improve his/her performance and success in school. A PBSP may include, but is not limited to:

- Interventions to prevent and reduce problematic behaviors
- Teaching new, appropriate replacement behaviors
- On-going data collection to evaluate the effectiveness of the plan
- Safety or crisis plan, if necessary

We greatly appreciate your involvement in this process. The FBA should be completed and shared with you within 30 school days or by the expected completion date of \_\_\_\_\_. If you have any questions regarding this process, please call \_\_\_\_\_ at \_\_\_\_\_.

Please check and sign below to indicate whether or not you consent to a Functional Behavior Assessment (FBA) on your student.

- ☐ I give consent to conduct a Functional Behavior Assessment on my student.
- ☐ I do not give consent to conduct a Functional Behavior Assessment on my student.
- ☐ No response to requests to obtain parent consent.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

OFFICE USE ONLY			
Date of Contact	Method of Contact	Result of Contact	Who Made Contact