
Name of school

**SCHOOL BASED
Behavior Modification Plan**

Student:	School:
Teacher:	Grade:
Date Written:	Date to Review:

IEP team members involved in creating this plan: _____

Target Behavior:#__:(Observable and measurable behaviors observed)
Function/Hypothesis Statement: (What does the student gain from the target behavior)
Replacement Behaviors: (Desired behavior from the student)
Strategies/Interventions: (Teacher will model and teach actions that encourage replacement behaviors)
Positive Reinforcement and Natural Consequences: (Include how and when to <u>progress monitor</u>)

