BIP Social Validity Survey for Teachers

Student Name		Teacher _			Date
For each statement, circle one number that best describes how you feel about the Behavior Intervention Plan for this student.					
1. I understood all of the elements of the Behavior Intervention Plan.					
Strongly Disagree	2	3	4	5	Strongly Agree
1	2	3	4	3	O
2. Problem behaviors have decreased since the implementation of the Behavior Intervention Plan.					
Strongly Disagree 1	2	3	4	5	Strongly Agree 6
3. Appropriate classroom behaviors have increased as a result of the implementation of the behavior intervention plan.					
Strongly Disagree 1	2	3	4	5	Strongly Agree 6
4. My participation in the implementation of the Behavior Intervention Plan was relatively easy (e.g. amount of time/effort) to implement.					
Strongly Disagree 1	2	3	4	5	Strongly Agree 6
5. Participation in implementing the Behavior Intervention Plan for this student was worth the time and effort.					
Strongly Disagree 1	2	3	4	5	Strongly Agree

Adapted from Crone, Hawken & Horner (2010)

