Functional Behavior Assessment

Family Interview Form

Student: Date:

Interviewer:

Family Member: Relationship to Student:

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| --- | --- |
| Interview Questions | Responses |
| 1. Describe a typical day for your child.
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| 1. What does your child do after school when he or she gets home each day?
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| 1. Does he or she spend time with friends or people his or her own age?
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| 1. What does he or she say about what’s happening in school?
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| 1. What are some of your child’s challenges?
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| 1. What are some things your child does very well?
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| 1. What are your goals for your child at home and school?
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**Notes:**