

Functional Behavior Assessment Family Interview Form

Student: _____

Date: _____

Interviewer: _____

Family Member: _____

Relationship to Student: _____

| Interview Questions | Responses |
|--|-----------|
| 1. Describe a typical day for your child. | |
| 2. What does your child do after school when he or she gets home each day? | |
| 3. Does he or she spend time with friends or people his or her own age? | |
| 4. What does he or she say about what's happening in school? | |
| 5. What are some of your child's challenges? | |
| 6. What are some things your child does very well? | |
| 7. What are your goals for your child at home and school? | |

Notes: