

Spencer County ECS
Behavioral Observation Form

Student's Name: _____ Date: _____

Location of observation: _____ Observer: _____

Person responsible for student during observation and title: _____

Beginning observation time: _____ Ending observation time: _____

I. Target behavior of concern: _____

II. Physical Environment: _____

III. Learning target – The task the student is expected to perform during the observation:

IV. Monitoring method to be used (choose one):

__ A. Interval recording of __ targeted behavior OR __ academic engaged time

Interval length: __ 15 seconds __ 20 seconds __ 30 seconds

Mark + when student or peer majority is on task or when target behavior occurs.

Mark – when student or peer majority is off task or when the targeted behavior does not occur.

Student																	
Peer																	
Student																	
Peer																	
Student																	
Peer																	

% of + responses for student: _____

% of work completed by student: _____

% of + responses for peer: _____

% of work completed by peer: _____

Observer comments: _____

In the teacher's judgment, was the student's behavior typical?

_____ Yes

_____ No (please explain) _____

