NCA 2025-2026 Request for Behavioral Assistance

Please complete and return to <u>Amanda Norkoli</u>. This information will be reviewed by members of the Student Success Team and you will be contacted for follow-up.

Student^{*}

	otaaont.		
Grade:	Referring Staff:		
Best time to contac	t you for follow-up:		
Are you looking for address your conce	new ideas/strategies to erns?	• YES	• NO

Behavior(s) of Concern:

Date:

• Disruptive	Out of Seat	 Refuses to do work 	Disrespectful to Teacher
• Refuses to Share	Physical Aggression	 Unprepared 	 Disrespectful to Peers
Talking Out	InappropriateLanguage	Difficulty Taking Turns	
Other:			

Additional notes:

List daily activities and rate how likely problem behavior will occur in each activity (use reverse if necessary).

Activity	Likelihood of Problem Behavior				Specific Problem Behavior		
	Low 1	2	3	4	5	High 6	
	Low 1	2	3	4	5	High 6	
	Low 1	2	3	4	5	High 6	

What is your behavioral goal/expectation for this student?

Share some positive attributes of this student.

What have you tried to change the <u>situations</u> in which the problem behavior(s) occur?

Modified assignments to match the student's skills	Increased supervision and monitoring	• Scheduled breaks	Other:
 Intervention and/or tutoring to improve the student's academic skills 	Posted daily visual schedule	Changed schedule of activities	
Rules are positive and observable	Organized, well-planned transitions	 Environmental engineering (e.g., seating assignment, traffic patterns) 	
What was the result?	No improvement	Slight improvement	Noticeable improvement

What have you tried to <u>teach</u> expected behavior(s)?

 Frequent and direct teaching of rules, routines, and expectations for the whole class 	Acknowledgement of positive behavior 4:1 (i.e., 4 positive : 1 correction)	Contract with student /and parents	Other:
 Pre-teaching/ Reminders about expected behavior when problem behavior is likely 	Systematic feedback about behavior	 Social Skills Training, Second Step, CHAMPS, TRAILS 	
Oral agreement with student	Practiced the expected behaviors within all environments	 Teach organizational skills 	
What was the result?	No improvement	Slight improvement	Noticeable improvement

What <u>consequences</u> have you tried to date for the problem behavior(s)?

Loss of privileges	 Increased home-school communication 	• Reprimand	
• Time-out	Meeting with the parents	 Individual meeting with the student 	• Other:
 Enforce rules immediately and consistently 	Office referral	 Feedback, correct behavior, reteaching, rehearsal 	
What was the result?	No improvement	Slight improvement	Noticeable improvement

Additional notes:

Are there safety concerns? If yes, please describe.

Indicate Preliminary Problem-Solving Steps You Have Taken:

Action	Date(s):	Result/Outcome:				
		Passed Vision screening? Y/N	Passed Hearing screening? Y/N	Known physical/medical problems? Y/N		
l. Reviewed CA-60		S.I.T. Folder on file? Y/N (If Yes, specify in next step)	Retained? Y/N	Acceptable Attendance? Y/N (10+ per yr)		
		Other Important Info:				
2. Implemented prior		Academic plan targeting Progress? Y / N				
Intervention Plan on file		Behavior plan targeting Progress? Y / N				
3. Consulted with other school staff		Describe attempted solution:				
4. Contacted Parent		Describe attempted	solution:			

Additional Notes: