

## Request for Behavior Outreach Services

Please refer to Behavior Outreach Process Flowchart

<b>Student Name:</b> _____	<b>Grade:</b> _____	<b>Requesting Teacher:</b> _____
<b>Teacher's Email:</b> _____		
<b>School:</b> _____	<b>504 Plan:</b> YES _____ NO _____	<b>Special Ed. Eligible:</b> YES _____ NO _____
<b>Is there an ASD consultant or are there ASD services in place for this student?</b> YES _____ NO _____		
<b>Describe the behavior of concern</b> – required: attach data (frequency, duration, intensity, ABCs, SWIS Big 5 report, etc.)		
<b>Describe related academic concerns</b> – required: attach data (DIBELS, AIMSweb, CBMs, etc.)		
<b>Check Tier I (Universal) Interventions in place</b>		
<input type="checkbox"/> Teach appropriate behavior	<input type="checkbox"/> Frequent feedback	<input type="checkbox"/> Pre-teach expectations
<input type="checkbox"/> Correct inappropriate behavior	<input type="checkbox"/> Posted daily schedule	<input type="checkbox"/> Rules are positive & observable
<input type="checkbox"/> Encourage appropriate behavior 4:1	<input type="checkbox"/> Frequently teach rules and routines	<input type="checkbox"/> Accommodations/modifications
<input type="checkbox"/> Warn only once	<input type="checkbox"/> Posted rules	<input type="checkbox"/> Clear consequences for rule violations
<input type="checkbox"/> Organized/well-planned transitions	<input type="checkbox"/> Environmental engineering (i.e. desk placement, traffic patterns)	<input type="checkbox"/> Enforce rules immediately & consistently
<b>Check Tier II Interventions in place:</b>		
<input type="checkbox"/> Check in check out	<input type="checkbox"/> Mentoring	<input type="checkbox"/> Permit process time
<input type="checkbox"/> Social Emotional Learning	<input type="checkbox"/> School counseling	<input type="checkbox"/> School social worker
<input type="checkbox"/> Increased supervision & monitoring	<input type="checkbox"/> Strength-based strategies	<input type="checkbox"/> After school tutoring
<input type="checkbox"/> Teach organizational skills	<input type="checkbox"/> Showcase talents	<input type="checkbox"/> Increased home-school communication
<b>Describe other interventions:</b>		
<b>Principal Signature:</b> _____		<b>Date:</b> _____

Please call Outreach if you have questions 482-7260

Submit to the Director of Special Education:

Copper Country ISD 809 Hecla St. Hancock, MI. 49930 Fax 906-482-1931

Outreach services range from consultation to Practical FBAs. Services will be based on student need.