



Behavior Data Cover Page

Person Served: _____

DOB: _____

Please attach **1** completed "Cover Page" to the backup. The backup should show a year's worth of behavior data tracking and should itemize the combined totals of observed behaviors from all settings including but not limited to day, residential, and SHC.

Note: **Row 14** should show the page numbers supporting the monthly scores in the backup data in chronological order. For example January data is on pages 1-4, February is on 5-9 and so on. *Do not count cover page in total page count.*

Monthly Frequency by Behavior

Behavior	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Behavior Score
1 Tantrum/ Emotional Outburst													
2 Property Damage													
3 Physically Assault Others													
4 Disrupt Other's Activities													
5 Verbally or Gesturally Abusive													
6 Self-Injurious													
7 Tease or Harass Peers													
8 Resist Supervision													
9 Run or Wander Away													
10 Steal													
11 Eat Inedible Objects													
12 Sexually Inappropriate Behavior													
13 Smear Feces													
14 BACKUP DATA BY LOCATION BY PAGE(S)													

General Rules for Judging Behavior Frequency	
1	Not at All means the behavior did not happen this month.
3	Monthly means the behavior occurred at least 1 day in the month.
4	Weekly occurs at least 1 day each week of the month.
5	Frequently occurs 3 to 6 days each week during the month.
6	Daily behaviors occur 365 days per year or every day of the month

Completed By CDDO of Butler County	
Agency	
Date of BASIS	
# of Pages Received	
Months with backup	Jan Feb Mar April May June July Aug Sept Oct Nov Dec
Assessor	

This information will be reviewed by the CDDO and signed at the functional assessment meeting.

Signature: _____ Title: _____ Date: _____