



Head Start/ECEAP/EHS BEHAVIOR TRACKING REPORT

Child ID# _____ Classroom/Site: _____

Date & Time	Problem Behavior	Location	Activity	Engagement Level	Others Involved	Possible Motivation	Possible Motivation	Strategy / Consequence	Comments

*See codes on back

<u>Problem Behavior</u>		
(A) Aggression	(I) Inappropriate Language	(RA) Running Away
(SI) Self-Injury	(NC) Non-compliance	(P) Property Damage
(SS) Self-Stimulation behavior	(T) Teasing	(U) Unsafe Behavior
(D) Disruptive/tantrums	(B) Biting	(O) Other

<u>Location of Incident</u>		
(C) Classroom	(H) Hallway	(AC) Another Classroom
(P) Playground	(B) Bathroom	(O) Other

<u>Activity</u>		
(A) Arrival	(M) Meal Time	(T) Transition
(CJ) Classroom Jobs	(Q/N) Quiet Time/Nap	(IA) Individual Activity
(LG) Large Group Activity	(OD) Outdoors	(D) Departure
(F) Free Choice or Centers	(SG) Small Group Activity	(O) Other

<u>Engagement Level</u>		
(L) Low	(M) Medium	(H) High

<u>Others Involved</u>		
(T) Teacher	(FM) Family Member	(P) Peers
(AS) Associate Teacher	(S) Specialist or Therapist	(O) Other
(PT) Part-time Staff	(Sub) Substitute	

<u>Possible Motivation</u>		
(DI) Obtain Desired Item	(FA) Fear/Apprehension	(A) Anger
(DA) Obtain Desired Activity	(AT) Avoid Task	(AA) Avoid Adults
(GPA) Gain Peer Attention	(AP) Avoid Peers	(D) Don't Know
(GAA) Gain Adult Attention		(O) Other

<u>Strategy/Consequence Used</u>		
(V) Verbal Reminder	(M) Move within group	(I) Ignore Behavior
(RD) Redirection	(S) Sit with Staff	(PG) Physical Guidance
(RI) Removal of item	(FC) Family Contact	(H) Home with parent (with plan)
(CM) Curriculum Modification	(RC) Removal from class (with plan)	(O) Other