

TEMPORAL ANALYSIS AND RANKING FORM

Student _____ Rater _____ Week of ____/____/____

Dimension being rated: Frequency Duration Intensity Other _____

Target behavior(s) observed _____

Directions: Rank the student's target behavior(s) for the designated time period.

All scales rated from 1 (low) to 10 (high)

TIME (Increments should align with distinct changes in settings/activities.)												
DAY												
Mon												
Tues												
Wed												
Thur												
Fri												

1. In what situation(s) are the rankings of the target behavior(s) highest?

- | | | | |
|---|--|--|--|
| <p>Location</p> <ul style="list-style-type: none"> <input type="radio"/> In class <input type="radio"/> Hallways <input type="radio"/> Cafeteria <input type="radio"/> Special classes <input type="radio"/> Bus <input type="radio"/> Other | <p>Time</p> <ul style="list-style-type: none"> <input type="radio"/> Arrival to school <input type="radio"/> Morning <input type="radio"/> Lunch <input type="radio"/> Afternoon <input type="radio"/> Recess/break <input type="radio"/> Other | <p>Person(s)</p> <ul style="list-style-type: none"> <input type="radio"/> Teacher(s) <input type="radio"/> Specialist(s) <input type="radio"/> Support staff <input type="radio"/> Bus driver <input type="radio"/> Peer(s) <input type="radio"/> Other | <p>Instructional Context</p> <ul style="list-style-type: none"> <input type="radio"/> Entire group <input type="radio"/> Small group <input type="radio"/> Individual <input type="radio"/> Transition <input type="radio"/> Other |
|---|--|--|--|

Comments: _____

2. In what situations are the rankings of the target behaviors lowest?

- | | | | |
|---|--|--|--|
| <p>Location</p> <ul style="list-style-type: none"> <input type="radio"/> In class <input type="radio"/> Hallways <input type="radio"/> Cafeteria <input type="radio"/> Special classes <input type="radio"/> Bus <input type="radio"/> Other | <p>Time</p> <ul style="list-style-type: none"> <input type="radio"/> Arrival to school <input type="radio"/> Morning <input type="radio"/> Lunch <input type="radio"/> Afternoon <input type="radio"/> Recess/break <input type="radio"/> Other | <p>Person(s)</p> <ul style="list-style-type: none"> <input type="radio"/> Teacher(s) <input type="radio"/> Specialist(s) <input type="radio"/> Support staff <input type="radio"/> Bus driver <input type="radio"/> Peer(s) <input type="radio"/> Other | <p>Instructional Context</p> <ul style="list-style-type: none"> <input type="radio"/> Entire group <input type="radio"/> Small group <input type="radio"/> Individual <input type="radio"/> Transition <input type="radio"/> Other |
|---|--|--|--|

Comments: _____

3. Are they consistent with other information collected? Consistent Inconsistent

Comments: _____