

DAILY POSITIVE BEHAVIOR TRACKING FORM

Student Name: _____ Date: _____

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| <p>Instructions:</p> <ol style="list-style-type: none"> The student carries this form to selected settings each day. The teacher in each selected setting completes the rating and initials the form at the end of each tracking period in the appropriate box. Indicators for each number have been attached. Additional Teacher comments may be made on the back of this form. The student reviews this form each day with _____ who initials the bottom row of this form. | <p>1= Poor 2= Fair 3 = Average 4 = Very Good 5 = Outstanding</p> <p>My goal is 80% points for the day.</p> |
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- Target behavior 1:** Completing and Turning in assignments on time
Target behavior 2: Staying on task for the duration of the assignment or class period with 2 or less redirections.
Target Behavior 3: Bring all appropriate materials to class (pen, pencil, paper, and planner)

| | Date: | Comments |
|------------------------|---|----------|
| 1 st period | TB 1: 1 2 3 4 5 TB 2: 1 2 3 4 5 TB 3: 1 2 3 4 5 | |
| 2 nd period | TB 1: 1 2 3 4 5 TB 2: 1 2 3 4 5 TB 3: 1 2 3 4 5 | |
| 3 rd period | TB 1: 1 2 3 4 5 TB 2: 1 2 3 4 5 TB 3: 1 2 3 4 5 | |
| 4 th period | TB 1: 1 2 3 4 5 TB 2: 1 2 3 4 5 TB 3: 1 2 3 4 5 | |
| 5 th period | TB 1: 1 2 3 4 5 TB 2: 1 2 3 4 5 TB 3: 1 2 3 4 5 | |
| 6 th period | TB 1: 1 2 3 4 5 TB 2: 1 2 3 4 5 TB 3: 1 2 3 4 5 | |
| 7 th period | TB 1: 1 2 3 4 5 TB 2: 1 2 3 4 5 TB 3: 1 2 3 4 5 | |
| Reviewed By: | _____/ 105 = _____ % | |

MET GOAL Y/N: _____

Parent Signature and Comments: _____
