

Student: _____

Date: _____

Interviewer: _____

Section1

- | | | | |
|--|--------|-----------|-------|
| 1. My work is too hard for me. | Always | Sometimes | Never |
| 2. My work is too easy for me. | Always | Sometimes | Never |
| 3. When I ask for help appropriately, I get it. | Always | Sometimes | Never |
| 4. I think work periods for each subject are too long. | Always | Sometimes | Never |
| 5. I think work periods for each subject are too short. | Always | Sometimes | Never |
| 6. I do better work when someone works with me. | Always | Sometimes | Never |
| 7. I have an opportunity to work with someone. | Always | Sometimes | Never |
| 8. I think people notice me when I do a good job. | Always | Sometimes | Never |
| 9. I think I get rewards I deserve when I do good work. | Always | Sometimes | Never |
| 10. I think I would do better in school if I received more rewards or incentives. | Always | Sometimes | Never |
| 11. In general, I find my work interesting. | Always | Sometimes | Never |
| 12. There are things in the classroom That distracts me. | Always | Sometimes | Never |
| 13. My work is challenging enough for me. | Always | Sometimes | Never |

Student Assisted Functional Assessment Interview

Section 2

Rate how much you like the following subjects:

| | Not at all | | Fair | | Very Much |
|--------------------|------------|---|------|---|-----------|
| Reading | 1 | 2 | 3 | 4 | 5 |
| Math | 1 | 2 | 3 | 4 | 5 |
| Spelling | 1 | 2 | 3 | 4 | 5 |
| Science | 1 | 2 | 3 | 4 | 5 |
| Social Studies | 1 | 2 | 3 | 4 | 5 |
| Language Arts | 1 | 2 | 3 | 4 | 5 |
| Music | 1 | 2 | 3 | 4 | 5 |
| Physical Education | 1 | 2 | 3 | 4 | 5 |
| Computers | 1 | 2 | 3 | 4 | 5 |
| Art | 1 | 2 | 3 | 4 | 5 |
| Other _____ | 1 | 2 | 3 | 4 | 5 |

From the list above, what do you like about the subjects you scored 4's and 5's?

From the list above, what don't you like about the subject you scored 1's and 2's?

Section 3

1. When you think you have the fewest problems with _____
in school?

Why do you not have problems during this/these time(s)? _____

2. What changes could be made so you would have fewer problems with _____

3. What kind of rewards/incentives would you like to earn for good behavior or good school work? _____

Student Assisted Functional Assessment Interview

Eating/sleeping patterns, misc.

1. Do you have trouble sleeping at night? _____

2. Do you feel you get enough sleep at night? Too little? Too much? _____

3. Is it ever difficult to concentrate on your school work? Why? _____

4. Do you worry a lot about things? What kind of things? _____

5. Have you been eating regularly? _____
6. Have you ever experimented with drugs/alcohol? _____
7. Are you taking any medications? Which ones? _____

Section 5

1. What other schools have you attended? When? _____

2. What concerns do you have about yourself? _____

3. What do you plan to do when you finish school? _____

4. Is there anything else you would like us to know about you? Do you have any other important information you think we should know? _____

Student Assisted Functional Assessment Interview

Social Activities

1. What are your favorite activities at school? _____

2. What are your hobbies or interests? _____

3. If you had the chance, what activities would you like to do that you don't have the opportunity to do now? _____

4. How do you spend your free time when you are not at school? _____

5. What are some things you like to do on the weekend? _____

Peer Relationships

1. What are some things you like to do with a friend? _____

2. Do you have close friends? _____
3. Do these friends go to the same school? _____
4. How do you get along with your classmates? _____

Family Relationships

1. Who do you live with at home? _____

2. Do you have brothers/sisters? _____

3. What are your responsibilities/chores at home? _____

4. How well do you get along with your siblings/parents? _____
