

## Letter Requesting Functional Behavior Assessment

Parents Name  
Address  
City, State Zip Code  
Telephone Number  
Email Address

Date

(Name of Special Education Director)  
(Name of School District)  
(Address of School)

Dear (Name of Special Education Director):

My child, (child's name) (date of birth) attends (school name). I believe that (child's name) behavior is beginning to interfere with his/her ability to learn and to reach his/her IEP goals and objectives. The following difficulties support my concern:

(List your observations – here are some examples)

- S/he does not know how to respond constructively to name calling or teasing;
- S/he is not cooperative in groups;
- S/he needs assistance to distinguish between socially acceptable and unacceptable behavioral responses to various situations and environments;
- S/he does not recognize situations in his/her self-control is needed;
- S/he does not know how to cope with stress-provoking situations he/she cannot avoid;
- S/he does not understand the consequences of appropriate and inappropriate expressions of his/her feelings.

Please provide (child's name) with a functional assessment of behavior as is required by the Individuals with Disabilities Education Act [IDEA]. Please consider this letter my formal request for and consent for the school district to provide the functional assessment. I understand that a positive behavior support team will be assembled to review the functional assessment of behavior and develop an appropriate behavior intervention plan. I expect to be included in the functional assessment of behavior and as active participant on the team developing the behavior intervention plan Please provide me with copies of all FBA data and results as soon as they become available to you. I hope that this request can be expedited as (child's name) already has been suspended in/from school on (number of times) for a total of (number of days) days.

Thank you for giving this request for a functional assessment of behavior your immediate attention. I will work with you to address and achieve (child's name) educational goals using positive behavior support and an effective behavior intervention plan.

Sincerely,

(Your name)  
(Your address)  
(Your telephone number)