Student Name:_____ Date of Intervention:_____

Type Of Intervention

Restraint:

▢   Medium Level Seated/Standing Position
▢   High Level Seated/Standing Position
▢   Child Control Position
▢   Team Control Position

Seclusion:

▢   The student is placed in an enclosed area by school personnel.
▢   The student is purposefully isolated from adults and peers.
▢   The student is prevented from leaving, or the student reasonably believes that the student will be prevented from leaving, the enclosed area.

The length of time the intervention was used:

Restraint Minute(s)	Seclusion Minute(s)

The school personnel who participated:_____

Supervised the Intervention:_____

Student has an IEP and/or BIP

▢ IEP	▢ Behavior Intervention Plan

Activity/Task	Trigger/Antecedent
☐**Large group instruction**	☐**Given task/asked question**
☐**Small group work**	☐**Given directive/correction**
☐ **Independent work**	☐ **Isolated (No attention)**
☐**Unstructured time**	☐ **No activity/unclear directions**

Specify:	☐**Peer Comment** ☐**With Peers** ☐**Preferred activity removed** ☐**Transition: Change in activity** **Other/Notes:**

Behavior:

☐ Student was a reasonable and immediate danger of physical harm to themselves with the present ability to effect such physical harm.
☐ Student was a reasonable and immediate danger of physical to others with the present ability to effect such physical harm.
☐ Student demonstrated violent action that is destructive of property

Outcome/Consequence
☐**Adult Attention Provided** ☐**Peer Attention Provided** ☐**Got Preferred Activity/Item** ☐**Got Other** _____ ☐**Adult Attention Avoided** ☐**Peer Attention Avoided** ☐**Task/Activity Avoided** ☐**Avoided Other** _____ **Other/Notes:**

Steps taken to transition the student back into the educational setting:

Postvention:
☐ CPI COPING Model
☐ Debriefing
☐ Other:

Parent/Guardian Contact:
Call Time:_____ Email Time:_____
School Participant Signature:_____ Date:_____

Supervisor:_____Date:_____
Principal:_____Date:_____