

BEHAVIOR INTERVENTION PLAN/INCENTIVE PLAN REQUEST FORM

Dear Counselor/So	ocial Worker of My Child/My Child's School,	
This is	, Parent/Legal Guardian/Educational D	ecision Maker of
,;	a child at your school (my child).	
Behavior Interven needs a BIP or In learning of others behavior before, d	ruggling in school and I am hoping you can help ation Plan (BIP) or an Incentive Plan be developmentive Plan because my child's behavior is important that we have a systemal suring, and after my child's behavior occurs. It help all of us be on the same page and active a school.	pped for my child. I believe my child pending their learning and the tic way of dealing with my child's think that having a BIP or
to help create the I	e data and/or use a Functional Behavioral Assess BIP/Incentive Plan, I understand and please let n hen we will meet to discuss the data/FBA results	ne know how long you need to take
and let me know o	like my child needs a BIP/Incentive Plan, please ther options and accommodations to support my ter for my child at this time.	± • • • • • • • • • • • • • • • • • • •
Finally, please tell	w if there are any other programs or supports at solution in the support of the s	at home/as their parent and how I
	can succeed at your school if given the proper s d and help change their challenging behaviors in	11 1
Thank you for you	r time and effort in considering my request. Ple	ase contact me to discuss my request
to discuss my requ	est for a BIP/Incentive Plan via phone at	and/or via email
at		
Respectfully,		