

<h2>BEHAVIORAL PLAN</h2>

Student Name: _____ Grade: ____ Teacher(s): _____

Date Implemented ___/___/___ Date of Review ___/___/___

Description of Behavior/ Learning Concern: _____

Environmental Adjustments

- Student is placed in a separate facility and a self-contained classroom with an associate teacher.
- Therapeutic environment is provided through teacher/counselor and associate teacher.
- Individualized academic instruction
- Structured classroom level system with behavioral criteria and individual student goals.
- Student has the opportunity to study and learn in separate area outside of the classroom.

Reinforcement

- Earned privileges through level system in classroom.
- Earned goal activity on designated goal day.
- Progression on class level system.
- Reintegration into home school.
- Return to home school full time.

Programming

- Anger management & aggression replacement training
- Remediation of behaviors that resulted in alternative school placement
- Acceptance and management of emotional and/or medical disabilities.
- Social skills training for interdependence with others.

Strategies:

- Mediation counseling and training.
- Structured role-playing for social skill development.
- Modeling and rehearsal of appropriate behavior.
- Individual therapeutic counseling

Situational Management

- Student is asked to take a quiet time out at desk for disruptive behavior
- Student is asked to take a quiet time out in the classroom
- Student is asked to take a time out in the hall directly outside the classroom
- Should a student possess a threat to themselves or others they may be restrained using (TCI) Therapeutic Crisis Intervention.
- Student may be removed from school with a parent escort for behaviors that are in violation of the school policy.
- Student may be removed from school by the local police without parent permission for behaviors that are in severe violation of school rules and/or are criminal

This authorization remains in effect for the duration of placement at Re-Education Services, Inc.

Staff Signature: _____

Date: ____/____/____

Student Signature: _____

Date: ____/____/____

Parent/Guardian
Signature: _____

Date: ____/____/____