

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Behavior: \_\_\_\_\_

Type of Interval Recording: Full \_\_\_\_ Partial \_\_\_\_ Trial \_\_\_\_ Momentary Time Sample \_\_\_\_

Record ✓ if behavior occurred **Never** 😞, **Sometimes** 😐, **Always** 😊

Interval (9:00, 9:15, 9:30...)	😞	😐	😊
Number of 😊 ✓			
Number of intervals			
(# of ✓/# of intervals) x 100	<b>Percent Complete</b>		

This is part of the Self-Monitoring chapter in the *PBIS Tier 3 Manual*, available from Amazon, Apple Books, or <https://www.koi-education.com/books>.