INTERRUPTION/TRANSITION DATA SHEET

Name:_____ Date: _____ Time:___ to _____
Target Step: _____ Cold Probe: YES NO
#Y's ____

BEHAVIOR KEY: Designate an abbreviation for the problem behavior in the box.

Hitting = H Bolting = B On Floor = OF Spitting = S Yelling = Y Grabbing = G
Throwing objects = TO Kicking = K

	Location	*Demand*	*Problem Behavior*	*Time to compliance*	*Initial*
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					

Percentage of transitions trials <u>without</u> Problem behavior _____