**BEHAVIOR INTERVENTION PLAN (BIP)**

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| --- | --- |
| **Name**: | **School**: |
| **DOB**: | **Caseload Teacher**: |
| **Age**: | **Grade**: |
| **Eligibility:** N/A | |
|  | |
| **Guardian(s):** | |
| **Address:** | |
| **Phone:** | |
| **Primary Language in Home:** | |
| **Date of BIP:** | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Problem Behavior** | **Desired Behavior** | **Intervention Strategy** | **Person Responsible** | **Review Date** |
|  |  |  |  |  |