



Considerations/Key Questions



Learner's Name: _____ **Date/Time:** _____

Observer(s): _____

Target Goal/Behavior/Skill: _____

Directions: Collect information child and family characteristics, teacher and/or team characteristics, clues found in the goal, and what other resources are available to inform your selection of an EBP.

LEARNER AND FAMILY PRIORITIES, PREFERENCES, & CHARACTERISTICS

Learner strengths:	Learner challenges:
Has worked before at home:	Has worked before at school:
Learner/Family's needs and/or priorities for target goal:	
Learner/Family's preferences for which EBP(s) to use:	

TEACHER/TEAM CHARACTERISTICS

Knowledge level:	Successfully used EBPs:
Past EBP trainings:	EBP trainings needed:

CLUES FOUND IN THE TARGET GOAL/SKILL/BEHAVIOR:

Goal domain:	Potential EBPs (Refer to the Domain Matrix):
Additional EBPs mentioned in the goal:	

OTHER RESOURCES

Current Learner supports:	Available equipment:
Team members:	Additional learning experiences: