



# Monroe County Intermediate School District

## Informed Consent Form for Level 3 Behavior Intervention Plans

Student: \_\_\_\_\_ BIP Date: \_\_\_\_\_

School: \_\_\_\_\_ Student Age: \_\_\_\_\_ Student Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

BIP Members: \_\_\_\_\_

### Level 3 Checklist

- The FBA has been developed using the ABC analysis and is the basis of the BIP.
- The BIP reflects positive behavioral support interventions.
- The data collection and review procedures are used to formulate the BIP and guide revisions.
- The procedures proposed in the plan are safe and humane for the student.
- The required elements of this student's FBA/BIP are comprehensive.

### Parental Consent

1. The objectives and procedures of the intervention plan were clearly explained to me.
2. I was informed about possible discomforts or risks that could result from this intervention plan.
3. I was informed about the benefits to be expected from this plan.
4. I was informed about possible alternative strategies to this plan, with their advantages and disadvantages.
5. Any questions I had were fully answered.
6. I understand that I may withdraw my consent for this plan at any time by providing the school with a written notice to that effect.
7. I understand that in the event of an emergency, where there is an imminent risk of injury to self or others, staff may use non-violent physical crisis intervention as a last resort to maintain safety of all persons.

I agree with the above statements and give my consent for the attached behavioral intervention plan to be implemented.

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Program Supervisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Behavior Review Representative

\_\_\_\_\_  
Date