

McLean County Public Schools

Behavior Observation – Written Expression

Student: _____ Grade: _____ Date: _____

Class/Teacher Name: _____ Observer Name/Title: _____ Time: _____

Directions: During the observation, place a check mark next to the behaviors that are *observed* from the list below. These checklists are not exhaustive, so please include notes regarding additional behaviors observed, including strengths and behaviors which may interfere with the student's learning.

I. Area of Concern:

Written Expression

II. Environment

<u>Classroom Setting</u>	<u>Social Environment</u>	<u>Physical Environment</u>
<input type="checkbox"/> General Education <input type="checkbox"/> Resource Setting	<input type="checkbox"/> Large Group <input type="checkbox"/> One other person	<input type="checkbox"/> Small Group <input type="checkbox"/> By self (no interaction) <input type="checkbox"/> At a table <input type="checkbox"/> At a desk <input type="checkbox"/> Other: _____

III. Task/Activity

Task/Activity which the teacher has defined for the student: _____

IV. Typical Performance

In the teacher's judgment, was the student's behavior/performance typical for the student? Yes No
 *If No, please explain: _____

V. Observation based on students: Instructional Level Current Grade Level

<input type="checkbox"/> Does not show understanding of directions for writing assignment	<input type="checkbox"/> Frequently reversals of letters and numbers
<input type="checkbox"/> Difficulty remembering shapes of letters and numbers	<input type="checkbox"/> Difficulty holding writing instrument
<input type="checkbox"/> Does not initiate the assignment	<input type="checkbox"/> Does not work at an appropriate pace compared to peers
<input type="checkbox"/> Fails to ask for assistance if needed	<input type="checkbox"/> Does not complete assignment within allotted time
<input type="checkbox"/> Does not use correct mechanics (spelling, punctuation, and capitalization, grammatical usage, sentence structure)	<input type="checkbox"/> Copies inaccurately (i.e., confuses similar-looking letters and numbers)
<input type="checkbox"/> Uses uneven spacing between letters and words, and has trouble staying on the line	<input type="checkbox"/> Uses incorrect segmentation between words, sentences, lines, and the end of the page
<input type="checkbox"/> Does not display a willing attitude toward writing	<input type="checkbox"/> Unable to brainstorm to select a topic for writing
<input type="checkbox"/> Unable to write an acceptable rough draft	<input type="checkbox"/> Difficulty proof-reading and self-correcting work
<input type="checkbox"/> Spells poorly and inconsistently (i.e., the same word appears differently other places in the same document)	<input type="checkbox"/> Does not demonstrate organization in story form (beginning, middle, and ending)
<input type="checkbox"/> Unable to reread own writing effectively	<input type="checkbox"/> Does not use graphic organizers for writing as appropriate
<input type="checkbox"/> Fails to sequence ideas logically while writing	<input type="checkbox"/> Does not structure a paragraph using a topic sentence
<input type="checkbox"/> Does not write satisfactory endings or conclusions	<input type="checkbox"/> Fails to consult a variety of sources for information while writing if appropriate
<input type="checkbox"/> Writing is messy and incomplete with many cross-outs and erasures	<input type="checkbox"/> Fails to develop ideas in writing so written work is incomplete and too brief
<input type="checkbox"/> Fails to use appropriate transitions in wiring	<input type="checkbox"/> Purpose of writing is unclear
<input type="checkbox"/> Other: _____	

Describe observed behavior (Required): _____

