

Infant-Toddler Action Support Plan

Child's Name: _____ Date Plan Developed _____

Team Members:

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Parent's Name _____ Signature _____

Behavior Hypothesis (the meaning of the behavior):

Prevention Strategies:

Skill to Develop	Strategy to Support Development	Person Responsible	When

Responses to Behavior:

Concerning Behavior	Response	Person Responsible	When

On a scale of 1 to 10, how would you rate the child's behavior?

1 2 3 4 5 6 7 8 9 10

Parent Signature _____