## **Sensory Processing Disorder Behavioral Observation**

## Student Name:\_\_\_\_\_ Date: \_\_\_\_\_

## Present Conditions and Diagnosis: \_\_\_\_\_

Describe all pertinent behaviors and note the time of occurrence. The longer the observation, the better your results. After completing the observation, use highlighters to mark behaviors that are similar in nature with the same color to determine patterns. Compare the colors with the time of occurrence to find repetition that may indicate when the student requires intervention. Compare the findings of this observation to interviews and other data to determine consistency.

## **Significant Observation Description** Time


Time	Significant Observation Description