**TIER 2 Intervention Rating Form**

NAME OF THE INTERVENTION

**FEASIBILITY**

**How feasible is it for staff to implement this intervention at your school?**

0 1 2 3

 Not at all feasible Somewhat feasible Feasible Very feasible

**BENEFIT**

**To what extent do you think some students with behavior problems would benefit from this intervention?**

0 1 2 3

 No benefit Minimal benefit Some benefit Significant benefit

**WILLINGNESS**

**How willing do you think staff would be to implement this intervention as a TIER 2 intervention for students who continue to have behavior problems?**

0 1 2 3

 Not willing Somewhat willing Willing Very willing

**TEAM OPINIONS**

**What do you like and dislike about this intervention? Why?**

Like

 Dislike

Diana Browning Wright