

**EBD Student Interview: Reinforcement Survey
Middle/High School**

Student's Name: _____ Case Manager: _____
Birth date: _____ Interviewer: _____
School: _____ Grade: _____
Date: _____

Please respond by circling YES or NO:

In school, I LIKE:

- | | | |
|-----|----|---|
| YES | NO | Going to the library |
| YES | NO | Getting good grades |
| YES | NO | When teachers tell me I did well |
| YES | NO | Making models/experiments |
| YES | NO | Playing card games |
| YES | NO | Playing appropriate video games |
| YES | NO | Playing basketball, time in the gym, use of weight room |
| YES | NO | Walking/running in the gym or on the track |
| YES | NO | Playing board games with others |
| YES | NO | Free time to use the internet, computer, or play computer games |
| YES | NO | Free time to write, read, draw, listen to music |
| YES | NO | Free time to watch videos/TV |
| YES | NO | Being able to choose my own group for group work |
| YES | NO | Being assigned to a group by the teacher for group work |
| YES | NO | Helping with small jobs in the classroom of a favorite teacher |
| YES | NO | Teaching/helping students my own age or younger |
| YES | NO | Grading papers in the classroom |
| YES | NO | Typing for the teacher in a classroom |
| YES | NO | Helping with small tasks or errands around the school |
| YES | NO | Helping out the custodians or office staff |
| YES | NO | When teachers display my good work/grades in school for others to see |

Other: Please list: _____

Outside of school, I LIKE:

- | | | |
|-----|----|--|
| YES | NO | Spending fun time alone with a parent |
| YES | NO | Earning a special reward at home |
| YES | NO | Being able to earn extra spending money by helping at home |
| YES | NO | Going shopping |
| YES | NO | Cooking |
| YES | NO | Going to the movies |
| YES | NO | Playing board games or cards with family |
| YES | NO | Playing an instrument |

- | | | |
|-----|----|--|
| YES | NO | Playing sports |
| YES | NO | Going to the park |
| YES | NO | Going out to eat at a restaurant |
| YES | NO | Going to a skate park |
| YES | NO | Going fishing |
| YES | NO | Going swimming |
| YES | NO | Going sliding, skiing, or snowboarding |
| YES | NO | Knitting, sewing, woodworking, or other crafts |

Other: Please list: _____

Some treats/food that I LIKE are:

- | | | |
|-----|----|---|
| YES | NO | Candy: If yes, what kind is your favorite? _____ |
| YES | NO | Fruit: If yes, what kind is your favorite? _____ |
| YES | NO | Drinks: If yes, what kind is your favorite? _____ |
| YES | NO | Snacks: If yes, what kind is your favorite? _____ |