



Reinforcement Unlimited

Clinical and Behavioral Consultants

15 Minute On/Off Task Interval Recording

DATE: _____ STAFF: _____

- Y = On Task throughout interval
- S = Student appeared to be asleep during interval
- R = Student awake but Off-Task during interval
- S/R = Student both awake and Off-Task and Asleep during interval
- = Student NOT observed during the Interval

TIME	Y S R -	TIME	Y S R -	Comments:
7:00		12:45		
7:15		1:00		
7:30		1:15		
7:45		1:30		
8:00		1:45		
8:15		2:00		
8:30		2:15		
8:45		2:30		
9:00		2:45		
9:15		3:00		
9:30		3:15		
9:45		3:30		
10:00		3:45		
10:15		4:00		
10:30		4:15		
10:45		4:30		
11:00		4:45		
11:15		5:00		
11:30		5:15		
11:45		5:30		
12:00		5:45		
12:15		6:00		
12:30				