Name:
_____
_____

TALLY METHOD FORM

Behavior observed: _____

Date	Time	Number of times behavior occurred	Total

Used only when the behavior occurs infrequently or lasts only for a short time. *Ex: Concern with the number of times a person inappropriately places objects in his mouth.*

Notes: Pick a time of the day and duration of time for observation. Collect the data at the same time every day for the same amount the time. Insert a mark in the column each time the behavior occur (ex. places objects in his mouse). At the end of observation total the number of time the behavior occur. Continue the process until you can identify a frequency in the behavior.