



Positive Behaviour for Learning School-Wide (PB4L-SW) Training Readiness Survey for Staff

Name (optional): _____

School: _____

Complete	Is there a need for PB4L School-Wide in your School?	
<input type="checkbox"/> YES <input type="checkbox"/> NO	1.	Do you believe your school would benefit from PB4L School-Wide?
<input type="checkbox"/> YES <input type="checkbox"/> NO	2.	Do you agree to be an active participant in PB4L School-Wide implementation?
<input type="checkbox"/> YES <input type="checkbox"/> NO	3.	Are you interested in being on the leadership team to facilitate the implementation of PB4L School-Wide in your school?