

Please print. Be sure to answer all items.



IV. Please list any jobs or chores your child has. For example: paper route, babysitting, making bed, working in store, etc. (Include both paid and unpaid jobs and chores.) None

Compared to others of the same age, how well does he/she carry them out?

	Below Average	Average	Above Average	Don't Know
a. <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

V. 1. About how many close friends does your child have? (Do not include brothers and sisters) None 1 2 or 3 4 or more

2. About how many times a week does your child do things with any friends outside of regular school hours? (Do not include brothers and sisters) Less than 1 1 or 2 3 or more

VI. Compared to others of his/her age, how well does your child:

	Worse	Average	Better	<input type="radio"/> Has no brothers or sisters
a. Get along with his/her brothers and sisters?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
b. Get along with other kids?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
c. Behave with his/her parents?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
d. Play and work alone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

VII. 1. Performance in academic subjects: Not attending school because:

Fill a bubble for each subject that the child takes.

	Failing	Below Average	Average	Above Average
a. Reading, English, or Language Arts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. History or Social Studies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Arithmetic or Math	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Science	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other academic subjects - for example: computer course, foreign language, business. Do not include gym, shop, driver's ed., etc.

2. Does your child receive special remedial services or attend a special class or special school? No Yes — kind of services, class or school:

3. Has your child repeated any grades? No Yes — grades and reasons:

4. Has your child had any academic or other problems in school? No Yes — please describe:

When did these problems start?

Have these problems ended? No Yes — when?

Does your child have any illness or disability (either physical or mental)? No Yes — please describe:

What concerns you most about your child?

Please describe the best things about your child:



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Below is a list of items that describe children and youths. For each item that describes your child *now or within the past 6 months*, please fill in bubble number 2 if the item is *very true* or *often true* of your child. Fill in bubble number 1 if the item is *somewhat* or *sometimes true* of your child. If the item is *not true* of your child, fill in bubble number 0. Please answer all items as well as you can, even if some do not seem to apply to your child.

0 = Not True (as far as you know)

1 = Somewhat or Sometimes True

2 = Very True or Often True

- 0 1 2
 1. Acts too young for his/her age
 2. Drinks alcohol without parents' approval (describe):

3. Argues a lot
 4. Fails to finish things he/she starts
 5. There is very little that he/she enjoys
 6. Bowel movements outside toilet
 7. Bragging, boasting
 8. Can't concentrate, can't pay attention for long
 9. Can't get his/her mind off certain thoughts; obsessions (describe):

10. Can't sit still, restless, or hyperactive
 11. Clings to adults or too dependent
 12. Complains of loneliness
 13. Confused or seems to be in a fog
 14. Cries a lot
 15. Cruel to animals
 16. Cruelty, bullying, or meanness to others
 17. Daydreams or gets lost in his/her thoughts
 18. Deliberately harms self or attempts suicide
 19. Demands a lot of attention
 20. Destroys his/her own things
 21. Destroys things belonging to his/her family or others
 22. Disobedient at home
 23. Disobedient at school
 24. Doesn't eat well
 25. Doesn't get along with other kids
 26. Doesn't seem to feel guilty after misbehaving
 27. Easily jealous
 28. Breaks rules at home, school, or elsewhere

29. Fears certain animals, situations, or places, other than school (describe):
-

30. Fears going to school
 31. Fears he/she might think or do something bad

- 0 1 2
 32. Feels he/she has to be perfect
 33. Feels or complains that no one loves him/her

34. Feels others are out to get him/her
 35. Feels worthless or inferior

36. Gets hurt a lot, accident-prone
 37. Gets in many fights

38. Gets teased a lot
 39. Hangs around with others who get in trouble

40. Hears sounds or voices that aren't there (describe):
-

41. Impulsive or acts without thinking
 42. Would rather be alone than with others
 43. Lying or cheating

44. Bites finger nails
 45. Nervous, highstrung, or tense

46. Nervous movements or twitching (describe):
-

47. Nightmares
 48. Not liked by other kids
 49. Constipated, doesn't move bowels

50. Too fearful or anxious
 51. Feels dizzy or lightheaded

52. Feels too guilty
 53. Overeating

54. Overtired without good reason
 55. Overweight

56. Physical problems *without known medical cause*:
- a. Aches or pains (*not* stomach or headaches)
 b. Headaches
 c. Nausea, feels sick
 d. Problems with eyes (*not* if corrected by glasses) (describe):

- e. Rashes or other skin problems
 f. Stomachaches
 g. Vomiting, throwing up
 h. Other (describe):

57. Physically attacks people

Be sure you answered all items. Then see other side.



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0 = Not True (as far as you know)

1 = Somewhat or Sometimes True

2 = Very True or Often True

0 1 2

0 1 2 58. Picks nose, skin, or other parts of body (describe):

0 1 2 59. Plays with own sex parts in public

0 1 2 60. Plays with own sex parts too much

0 1 2 61. Poor school work

0 1 2 62. Poorly coordinated or clumsy

0 1 2 63. Prefers being with older kids

0 1 2 64. Prefers being with younger kids

0 1 2 65. Refuses to talk

0 1 2 66. Repeats certain acts over and over; compulsions (describe):

0 1 2 67. Runs away from home

0 1 2 68. Screams a lot

0 1 2 69. Secretive, keeps things to self

0 1 2 70. Sees things that aren't there (describe):

0 1 2 71. Self-conscious or easily embarrassed

0 1 2 72. Sets fires

0 1 2 73. Sexual problems (describe):

0 1 2 74. Showing off or clowning

0 1 2 75. Too shy or timid

0 1 2 76. Sleeps less than most kids

0 1 2 77. Sleeps more than most kids during day and/or night (describe):

0 1 2 78. Inattentive or easily distracted

0 1 2 79. Speech problem (describe):

0 1 2 80. Stares blankly

0 1 2 81. Steals at home

0 1 2 82. Steals outside the home

0 1 2 83. Stores up too many things he/she doesn't need (describe):

0 1 2 84. Strange behavior (describe):

0 1 2

0 1 2 85. Strange ideas (describe):

0 1 2 86. Stubborn, sullen, or irritable

0 1 2 87. Sudden changes in mood or feelings

0 1 2 88. Sulks a lot

0 1 2 89. Suspicious

0 1 2 90. Swearing or obscene language

0 1 2 91. Talks about killing self

0 1 2 92. Talks or walks in sleep (describe):

0 1 2 93. Talks too much

0 1 2 94. Teases a lot

0 1 2 95. Temper tantrums or hot temper

0 1 2 96. Thinks about sex too much

0 1 2 97. Threatens people

0 1 2 98. Thumb-sucking

0 1 2 99. Smokes, chews, or sniffs tobacco

0 1 2 100. Trouble sleeping (describe):

0 1 2 101. Truancy, skips school

0 1 2 102. Underactive, slow moving, or lacks energy

0 1 2 103. Unhappy, sad, or depressed

0 1 2 104. Unusually loud

0 1 2 105. Uses drugs for nonmedical purposes (*don't* include alcohol or tobacco) (describe):

0 1 2 106. Vandalism

0 1 2 107. Wets self during the day

0 1 2 108. Wets the bed

0 1 2 109. Whining

0 1 2 110. Wishes to be of opposite sex

0 1 2 111. Withdrawn, doesn't get involved with others

0 1 2 112. Worries

113. Please write in any problems your child has that were not listed above:

0 1 2

0 1 2

0 1 2

PLEASE BE SURE YOU ANSWERED ALL ITEMS