

BEHAVIOR RATING SCALE- PARENT FORM

Child's Name _____ D.O.B _____
 Name of person completing this form: _____ Date: _____
 Relationship to child: _____

Questions	Never or Rarely	Sometimes	Often	Very often
Fails to give close attention to details or makes careless mistakes in his/her work	0	1	2	3
Fidgets with hands or feet or squirms in seat	0	1	2	3
Has difficulty sustaining his/her attention in tasks or fun activities	0	1	2	3
Leaves his/her seat in classroom or in other situations in which seated is expected	0	1	2	3
Doesn't listen when spoken to directly	0	1	2	3
Seems restless	0	1	2	3
Doesn't follow through on instructions and fails to finish work	0	1	2	3
Has difficulty engaging in leisure activities or fun things quietly	0	1	2	3
Feels "on the go" or "driven by a motor"	0	1	2	3
Avoids, dislikes, or is reluctant to engage in work that requires sustained mental effort	0	1	2	3
Talks excessively	0	1	2	3
Loses things necessary for tasks or activities	0	1	2	3
Blurts out answers before questions have been completed	0	1	2	3
Is easily distracted	0	1	2	3
Has difficulty awaiting turn	0	1	2	3
Is forgetful in daily activities	0	1	2	3
Interrupts or intrudes on others	0	1	2	3
How old was the child when you noticed the above behaviors	0	1	2	3

To what extent do the behaviors circled above interfere with child's ability to function in each of these areas of school activities *during* the last six (6) months?

Questions	Never or Rarely	Sometimes	Often	Very often
In his/her home life with my immediate family	0	1	2	3
In his/her interactions with other children	0	1	2	3
In his/her activities or dealings in the community	0	1	2	3
In school	0	1	2	3
In sports, clubs, or other organizations	0	1	2	3
In learning to take care of him/herself	0	1	2	3
In his/her play, leisure, or recreational activities	0	1	2	3
In his/her handling of daily chores or other responsibilities	0	1	2	3
In his/her management of time at school	0	1	2	3

BEHAVIOR RATING SCALE- PARENT FORM

Child's Name _____ D.O.B _____

Name of person completing this form: _____ DATE: _____

Relationship to child: _____

Again, please circle the number next to each item that best describes the behavior of this child *during* the last six (6) months.

Questions	Never or Rarely	Sometimes	Often	Very often
Loses temper	0	1	2	3
Argues with adults	0	1	2	3
Actively defies or refuses to comply with adults' requests or rules	0	1	2	3
Deliberately annoys people	0	1	2	3
Blames others for his/her mistakes or misbehavior	0	1	2	3
Is touchy or easily annoyed by others	0	1	2	3
Is angry or resentful	0	1	2	3
Is spiteful or vindictive	0	1	2	3

Please indicate whether this child has engaged in any of the following items in the past twelve (12) months.

Questions	NO	YES
Often bullies, threatens, or intimidates others	NO	YES
Often initiates physical fights	NO	YES
Used a weapon that can cause serious physical harm to others (i.e. bat, knife, brick, gun)	NO	YES
Has been physically cruel to people	NO	YES
Has been physically cruel to animals	NO	YES
Has stolen while confronting a victim (i.e. mugging, purse snatching, armed robbery)	NO	YES
Has forced someone into sexual activity	NO	YES
Has deliberately engaged in fire setting with the intention of causing serious damage	NO	YES
Has deliberately destroyed others property (other than by fire)	NO	YES
Has broken into someone else's home, building, or car	NO	YES
Often lies to obtain goods or favors or to avoid obligations (i.e. "cons" others)	NO	YES
Has stolen items of non-trivial value without confronting a victim (i.e. shoplifting,)	NO	YES
Often stays out at night despite parental prohibitions. If so what age did this begin? _____	NO	YES
Has run away from home overnight at least twice while living in parents, home If so, how many times? _____	NO	YES
Is often truant from school If so, at what age did this begin? _____	NO	YES

BEHAVIOR RATING SCALE- TEACHER FORM

Child's Name _____ D.O.B. _____
 Name of person completing this form: _____ DATE: _____
 Relationship to child: _____

Questions	Never or Rarely	Sometimes	Often	Very often
Fails to give close attention to details or makes careless mistakes in his/her work	0	1	2	3
Fidgets with hands or feet or squirms in seat	0	1	2	3
Has difficulty sustaining his/her attention in tasks or fun activities	0	1	2	3
Leaves his/her seat in classroom or in other situations in which seated is expected	0	1	2	3
Doesn't listen when spoken to directly	0	1	2	3
Seems restless	0	1	2	3
Doesn't follow through on instructions and fails to finish work	0	1	2	3
Has difficulty engaging in leisure activities or fun things quietly	0	1	2	3
Feels "on the go" or "driven by a motor"	0	1	2	3
Avoids, dislikes, or is reluctant to engage in work that requires sustained mental effort	0	1	2	3
Talks excessively	0	1	2	3
Loses things necessary for tasks or activities	0	1	2	3
Blurts out answers before questions have been completed	0	1	2	3
Is easily distracted	0	1	2	3
Has difficulty awaiting turn	0	1	2	3
Is forgetful in daily activities	0	1	2	3
Interrupts or intrudes on others	0	1	2	3
How old was the child when you noticed the above behaviors	0	1	2	3

To what extent do the behaviors circled above interfere with child's ability to function in each of these areas of school activities *during* the last six (6) months?

Questions	Never or Rarely	Sometimes	Often	Very often
In his/her home life with my immediate family	0	1	2	3
In his/her Interactions with other children	0	1	2	3
In his/her activities or dealings in the community	0	1	2	3
In school	0	1	2	3
In sports, clubs, or other organizations	0	1	2	3
In learning to take care of him/herself	0	1	2	3
In his/her play, leisure, or recreational activities	0	1	2	3
In his/her handling of daily chores or other responsibilities	0	1	2	3
In his/her management of time at school	0	1	2	3

BEHAVIOR RATING SCALE- TEACHER FORM

Child's Name _____ D.O.B. _____
Name of person completing this form: _____ DATE: _____
Relationship to child: _____

Again, please circle the number next to each item that best describes the behavior of this child *during* the last six (6) months.

Questions	Never or Rarely	Sometimes	Often	Very often
Loses temper	0	1	2	3
Argues with adults	0	1	2	3
Actively defies or refuses to comply with adults' requests or rules	0	1	2	3
Deliberately annoys people	0	1	2	3
Blames others for his/her mistakes or misbehavior	0	1	2	3
Is touchy or easily annoyed by others	0	1	2	3
Is angry or resentful	0	1	2	3
Is spiteful or vindictive	0	1	2	3

Thank you for your help.