

Child's name Boy / Girl

Child's age

Your relationship to this child (e.g. mother, father, aunt, foster mother, grandfather)

Here are some statements that describe children's behavior and feelings.

For each statement, please circle the number that best describes your child in the **last 4 to 6 months**.

- circle **0** if the statement is **not true** for your child in the last 4 to 6 months.
- circle **1** if the statement is **partly true** for your child in the last 4 to 6 months.
- circle **2** if the statement is **mostly true** for your child in the last 4 to 6 months.

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|-----|----------|----------|----------|---|
| 1. | 0 | 1 | 2 | Can't concentrate, short attention span |
| 2. | 0 | 1 | 2 | Craves affection |
| 3. | 0 | 1 | 2 | Eats too much |
| 4. | 0 | 1 | 2 | Fears you will reject her/him |
| 5. | 0 | 1 | 2 | Hides feelings |
| 6. | 0 | 1 | 2 | Is convinced that friends will reject her/him |
| 7. | 0 | 1 | 2 | Lacks guilt or empathy |
| 8. | 0 | 1 | 2 | Prefers to be with adults, rather than children |
| 9. | 0 | 1 | 2 | Relates to strangers 'as if they were family' |
| 10. | 0 | 1 | 2 | Seems insecure |
| 11. | 0 | 1 | 2 | Startles easily ('jumpy') |
| 12. | 0 | 1 | 2 | Suspicious |
| 13. | 0 | 1 | 2 | Too dramatic (false emotions) |
| 14. | 0 | 1 | 2 | Too friendly with strangers |
| 15. | 0 | 1 | 2 | Too jealous |
| 16. | 0 | 1 | 2 | Treats you as though you were the child and she/he was the parent |
| 17. | 0 | 1 | 2 | Uncaring (shows little concern for others) |

For each of the following statements:

- circle **0** if the behavior **did not occur** in the last 4 to 6 months.
- circle **1** if the behavior **occurred once** in the last 4 to 6 months.
- circle **2** if the behavior **occurred more than once** in the last 4 to 6 months.

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|-----|----------|----------|----------|---|
| 18. | 0 | 1 | 2 | Distressed or troubled by traumatic memories |
| 19. | 0 | 1 | 2 | Does not show pain if physically hurt |
| 20. | 0 | 1 | 2 | Sexual behavior not appropriate for her/his age |

U.S. English version

www.childpsych.org.uk

Office use

ID:

Date:

Score: