Teacher’ Name:  Class Time:  Class/Name: 

Today’s date:  Child’s Name:  Grade Level: 

**Directions**: Each rating should be considered in the context of what is appropriate for the age of your child. When completing this form, please think about your child’s behaviors in the past 6 months.  
Is this evaluation based on a time when the child  was on medication  was not on medication  not sure

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| **Symptoms** | | | **Never (0)** | | | **Occasionally (1)** | | | | | **Often (2)** | **Very Often (3)** | | |
| 1. Fails to give attention to details or makes careless mistakes in schoolwork | | |  | | |  | | | | |  |  | | |
| 2. Has difficulty sustaining attention to tasks or activities. | | |  | | |  | | | | |  |  | | |
| 3. Does not seem to listen when spoken to directly | | |  | | |  | | | | |  |  | | |
| 4. Does not follow through when given directions and fails to finish activities (not due to refusal or failure to understand) | | |  | | |  | | | | |  |  | | |
| 5. Has difficulty organizing tasks and activities | | |  | | |  | | | | |  |  | | |
| 6. Avoids, dislikes, or does not want to start tasks that require ongoing mental effort | | |  | | |  | | | | |  |  | | |
| 7. Loses things necessary for tasks or activities (school assignments, pencils, or books) | | |  | | |  | | | | |  |  | | |
| 8. Is easily distracted by extraneous stimuli | | |  | | |  | | | | |  |  | | |
| 9. Is forgetful in daily activities | | |  | | |  | | | | |  |  | | |
| 10. Fidgets with hands or feet or squirms in seat | | |  | | |  | | | | |  |  | | |
| 11. Leaves seat when remaining seated is expected | | |  | | |  | | | | |  |  | | |
| 12. Runs about or climbs too much when remaining seated is expected | | |  | | |  | | | | |  |  | | |
| 13. Has difficulty playing or engaging in leisure activities quietly | | |  | | |  | | | | |  |  | | |
| 14. Is “on the go” or often acts as if “driven by a motor” | | |  | | |  | | | | |  |  | | |
| 15. Talks excessively | | |  | | |  | | | | |  |  | | |
| 16. Blurts out answers before questions have been completed | | |  | | |  | | | | |  |  | | |
| 17. Has difficulty waiting in line | | |  | | |  | | | | |  |  | | |
| 18. Interrupts or intrudes on others (eg, butts into conversation/games) | | |  | | |  | | | | |  |  | | |
| 19. Loses temper | | |  | | |  | | | | |  |  | | |
| 20. Actively defies or refuses to go along with adult’s requests or rules | | |  | | |  | | | | |  |  | | |
| 21. Is angry or resentful | | |  | | |  | | | | |  |  | | |
| 22. Is spiteful and vindictive | | |  | | |  | | | | |  |  | | |
| 23. Bullies, threatens, or intimidates others | | |  | | |  | | | | |  |  | | |
| 24. Initiates physical fights | | |  | | |  | | | | |  |  | | |
| 25. Lies to get out of trouble or to avoid obligations (eg, “cons” others) | | |  | | |  | | | | |  |  | | |
| 26. Is physically cruel to people | | |  | | |  | | | | |  |  | | |
| 27. Has stolen items of nontrivial value | | |  | | |  | | | | |  |  | | |
| 28. Deliberately destroys other’s property | | |  | | |  | | | | |  |  | | |
| **Symptoms (continued)** | | | **Never** | | | **Occasionally** | | | | | **Often** | **Very Often** | | |
| 29. Is fearful, anxious, or worried | | |  | | |  | | | | |  |  | | |
| 30. Is self-conscious or easily embarrassed | | |  | | |  | | | | |  |  | | |
| 31. Is afraid to try new things for fear of making mistakes | | |  | | |  | | | | |  |  | | |
| 32. Feels worthless or inferior | | |  | | |  | | | | |  |  | | |
| 33. Blames self for problems; feels guilty | | |  | | |  | | | | |  |  | | |
| 34. Feels lonely, unwanted, or unloved; complains that “no on loves him or her” | | |  | | |  | | | | |  |  | | |
| 35. Is sad, unhappy, or depressed | | |  | | |  | | | | |  |  | | |
| **Performance**  ***Academic Performance*** | | **Excellent (1)** | | | **Above**  **Average (2)** | | | **Average**  **(3)** | | **Somewhat of a Problem (4)** | | | | **Problematic (5)** | | |
| 36. Reading | |  | | |  | | |  | |  | | | |  | | |
| 37. Mathematics | |  | | |  | | |  | |  | | | |  | | |
| 38. Written expression | |  | | |  | | |  | |  | | | |  | | |
| ***Classroom Behavioral Performance*** | |  | | |  | | |  | |  | | | |  | | |
| 39. Relationship with parents | |  | | |  | | |  | |  | | | |  | | |
| 40. Following directions | |  | | |  | | |  | |  | | | |  | | |
| 41. Disrupting class | |  | | |  | | |  | |  | | | |  | | |
| 42. Assignment completion | |  | | |  | | |  | |  | | | |  | | |
| 43. Organization skills | |  | | |  | | |  | |  | | | |  | | |

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| **Comments:** |

**For Office Use Only**

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Total number of questions scored 2 or 3 in questions 1–9:

Total number of questions scored 2 or 3 in questions 10–18:

Total Symptom Score for questions 1–18:

Total number of questions scored 2 or 3 in questions 19–28:

Total number of questions scored 2 or 3 in questions 29–35:

Total number of questions scored 2 or 3 in questions 36–43:

Average Performance Score: