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Behavior Checklist

Name: _____

Date: _____

Name of person completing this form: _____

Relationship to child (circle one): Mother Father Teacher Guardian

	Not at all	Just a little	Pretty much	Very much
1. Often fails to give close attention to details or makes careless mistakes in schoolwork, work or other activities.				
2. Often has difficulty sustaining attention in tasks or play activities.				
3. Often does not seem to listen when spoken to directly.				
4. Often does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace (not due to oppositional behavior or failure to understand direction).				
5. Often has difficulty organizing tasks and activities.				
6. Often avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort (such as schoolwork or homework).				
7. Often loses things necessary for tasks or activities (e.g. toys, school assignments, pencil, books or tools).				
8. Is often easily distracted by extraneous stimuli.				
9. Is often forgetful in daily activities.				

PLEASE TURN OVER →

1. Often fidgets with hands or feet or squirms in seat.
2. Often leaves seat in classroom or other situations in which remaining seated is expected.
3. Often runs about or climbs excessively in situations in which it is inappropriate (in adolescents or adults, may be limited to subject's feelings of restlessness).
4. Often has difficulty playing or engaging in leisure activities quietly.
5. Is often "on the go" or often acts as if "driven by a motor".
6. Often talks excessively.
7. Often blurts out answers before questions have been completed.
8. Often has difficulty awaiting turn.
9. Often interrupts or intrudes on others (e.g. bursts into conversations or games).

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Additional Questions:

1. At what age did these symptoms become a problem?
2. Do these symptoms occur at home _____ at school _____ both _____ at work _____
3. For how long has this been a problem?