

First Name: _____ Last Name: _____ Date: _____ Age: _____

COMMON PROBLEMS

No single question is critical. Feel free to skip items that are not significant.

Attention Problems	None/ Very Mild	Mild	Moderate	Severe/ Very Severe	Comments
Misses important info					
Has trouble listening					
Makes careless errors					
Short attention span					
Disorganized/can't prioritize					
Procrastinates					
Easily distracted					
Difficulty staying on task					
Avoids initiating mental effort					
Lacks interest in activities					
Loses things					
Is easily bored					
Daydreams/spaces-out					
Low energy/sleepy during the day					
Apathetic/unmotivated					
Dislikes sustained mental effort					
Underachiever					
Trouble following directions					
Difficulty remembering					
Easily frustrated					
Acts before thinking/impulsive					
Trouble changing focus					
Inflexible/avoids change					
Doesn't anticipate consequences of behavior					
Frequently repeats thoughts and words					

First Name: _____ Last Name: _____ Children's Checklist (cont'd)

Emotion/Behavior	None/ Very Mild	Mild	Moderate	Severe/ Very Severe	Comments
Disruptive					
Hyper, fidgets, squirms, can't sit still					
Tics/repetitive behavior					
Difficulty working quietly					
Talks excessively/interrupts others					
Teases or tricks peers					
Impatient/difficulty waiting turn					
Risk-taking behavior					
Blurts out comments inappropriately					
Grouchy, irritable					
Immature behavior/silly					
Sad or moody					
Nervous/jumpy/fearful					
Easily upset/tearful					
Explosive/angry/lashes out					
Loses temper easily					
Oppositional/argues					
Defies rules					
Spiteful/vindictive					
Lies, cheats, steals					
Deliberately annoys others					
Resists authority or discipline					
Blames others for difficulty					
Frequently in trouble					
Aggressive toward peers					
Cruel to animals/destroys objects					
Poor eye contact					
Sensitive to clothing or touch					
Lacks empathy					
Excessive worry or fearful					

First Name: _____ Last Name: _____ Children's Checklist (cont'd)

Other Problems	None/ Very Mild	Mild	Moderate	Severe/ Very Severe	Comments
Poor reading comprehension					
Poor handwriting					
Difficulty copying from the board					
Difficulty writing notes in class					
Slow to process information					
Difficulty expressing/getting the right words out					
Difficulty with expressive writing					
Can't summarize or explain simply					
Auditory processing issues					
Difficulty telling left from right					
Nail biting or nervous habits					
Lack of body awareness					
Stutters					
History of earaches					
History of sinus issues					
History of stomach complaints					
History of seizures					
Neurological disorders					
Vision problems					
Food sensitivities					
Constipation					
Poor appetite					
Mold exposure					
Asthma					
Allergies					
Poor coordination, clumsy, poor motor skills					
Restless sleep					
Bad dreams or nightmares					
Teeth grinding					
Bed wetting					
Sleepwalking					
Talking in sleep					
Night terrors					
Wakes early					
Difficulty going into bed					