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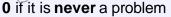
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Version 4.0 Short Form (SF15)

TEEN REPORT (ages 13-18)

On the following page is a list of things that might be a problem for you. Please tell us how much of a problem each one has been for you during the past ONE month by circling DO MOT USE



1 if it is almost never a problem

2 if it is sometimes a problem

3 if it is often a problem

4 if it is almost always a problem

There are no right or wrong answers.

In the past **ONE month**, how much of a **problem** has this been for you ...

ABOUT MY HEALTH AND ACTIVITIES (problems with)	Never	Almost Never	Some- times	Often	Almost Always
It is hard for me to walk more than one block	0	1	2	3	4
2. It is hard for me to run	0	1	2	3	4
3. It is hard for me to do sports activity or exercise	0	1	2	3	4
4. It is hard for me to lift something heavy	0	1	2	3	4
5. It is hard for me to do chores around the house	0	1	2	3	4

ABOUT MY FEELINGS (problems with)	Never	Almost Never	Some- times	Often	Almost Always
I feel afraid or scared	000	1	2 月	~ \$ [
2. I feel sad or blue	Ó	100	MELL	3	4
3. I feel angry	7570 1	DG	2	3	4
4. I worry about what will happen to me	29 -	1	2	3	4
	_		_		

HOW I GET ALONG WITH OTHERS (problems with)	Never	Almost Never	Some- times	Often	Almost Always
1. Thave trouble getting along with other teens	0	1	2	3	4
2. Other teens do not want to be my friend	0	1	2	3	4
3. Other teens tease me	0	1	2	3	4

ABOUT SCHOOL (problems with)	Never	Almost Never	Some- times	Often	Almost Always
1. It is hard to pay attention in class	0	1	2	3	4
2. I forget things	0	1	2	3	4
3. I have trouble keeping up with my schoolwork	0	1	2	3	4

ID#	
Date:_	



PARENT REPORT for TEENS (ages 13-18)

DIRECTIONS

On the following page is a list of things that might be a problem for your teen.

Please tell us how much of a problem each one has been for your teen during the past ONE month by circling:

o if it is never a problem

1 if it is almost never a problem

2 if it is sometimes a problem

3 if it is often a problem

4 if it is almost always a problem

There are no right or wrong answers.

If you do not understand a question, please ask for help.

DO MOT US

In the past ONE month, how much of a problem has your teen had with ...

PHYSICAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Walking more than one block	0	1	2	3	4
2. Running	0	1	2	3	4
Participating in sports activity or exercise	0	1	2	3	4
4. Lifting something heavy	0	1	2	3	4
5. Doing chores around the house	0	1	2	3	4

EMOTIONAL FUNCTIONING (problems with)	Never	Almost	Some-	Often	Almost
		Never	times		Always
Feeling afraid or scared	0	√ 1	2	3 🗟	7
2. Feeling sad or blue	000	1	25	331	4
3. Feeling angry	0		1211	3	4
4. Worrying about what will happen to him or her	750		2	3	4

SOCIAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Getting along with other teens	0	1	2	3	4
2. Other teens not wanting to be his or her friend	0	1	2	3	4
3. Getting teased by other teens	0	1	2	3	4

SCHOOL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Paying attention in class	0	1	2	3	4
2. Forgetting things	0	1	2	3	4
Keeping up with schoolwork	0	1	2	3	4

ID# _	
Date:_	



CHILD REPORT (ages 8-12)

DIRECTIONS

On the following page is a list of things that might be a problem for you. Please tell us how much of a problem each one has been for 1512. during the past CNE month by circling:

0 if it is never a problem

1 it it is almost never a problem

2 if it is sometimes a problem

3 if it is often a problem

DO MOT USE 4 if it is almost always a problem

There are no right or wrong answers.

In the past **ONE month**, how much of a **problem** has this been for you ...

ABOUT MY HEALTH AND ACTIVITIES (problems with)	Never	Almost Never	Some- times	Often	Almost Always
It is hard for me to walk more than one block	0	1	2	3	4
2. It is hard for me to run	0	1	2	3	4
3. It is hard for me to do sports activity or exercise	0	1	2	3	4
4. It is hard for me to lift something heavy	0	1	2	3	4
5. It is hard for me to do chores around the house	0	1	2	3	4

ABOUT MY FEELINGS (problems with)	Never	Almost Never	Some- times	Often	Almost Always
1. I feel afraid or scared	0	1	2	3	4
2. I feel sad or blue	0	1	2	3	4
3. I feel angry	200	0)}	2	3	3 (B) []
4. I worry about what will happen to me	(C)	1	200		4

How I GET ALONG WITH OTHERS (problems with)	Never	Almost Never	Some- times	Often	Almost Always
1. I have trouble getting along with other kids	0	1	2	3	4
2. Other kids do not want to be my friend	0	1	2	3	4
3. Other kids tease me	0	1	2	3	4

ABOUT SCHOOL (problems with)	Never	Almost Never	Some- times	Often	Almost Always
It is hard to pay attention in class	0	1	2	3	4
2. I forget things	0	1	2	3	4
3. I have trouble keeping up with my schoolwork	0	1	2	3	4

ID# _		
Date:		



PARENT REPORT for CHILDREN (ages 8-12)

On the following page is a list of things that might be a problem for your child. Please tell us how much of a problem each one has been for your child during the past ONE month by circling. DO MOT USE



1 if it is almost never a problem

2 if it is sometimes a problem

3 if it is often a problem

4 if it is almost always a problem

There are no right or wrong answers.

In the past ONE month, how much of a problem has your child had with ...

PHYSICAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Walking more than one block	0	1	2	3	4
2. Running	0	1	2	3	4
3. Participating in sports activity or exercise	0	1	2	3	4
4. Lifting something heavy	0	1	2	3	4
5. Doing chores around the house	0	1	2	3	4

EMOTIONAL FUNCTIONING (problems with)	Never	Almost	Some-	Often	Almost
		Never	times		Always
Feeling afraid or scared	0	_ 1	2	3	4
2. Feeling sad or blue		1	2	3	
3. Feeling angry	0	1	(P)	3	4
4. Worrying about what will happen to him or her	7540 TE	031	2	3	4

SOCIAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Getting along with other children	0	1	2	3	4
2. Other kids not wanting to be his or her friend	0	1	2	3	4
3 Getting teased by other children	0	1	2	3	4

SCHOOL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Paying attention in class	0	1	2	3	4
2. Forgetting things	0	1	2	3	4
Keeping up with schoolwork	0	1	2	3	4

ID#	 	 _
Date:		_



YOUNG CHILD REPORT (ages 5-7)

Instructions for interviewer:

I am going to ask you some questions about things that might be a problem for some children. I want to know how much of a problem any of these things might be for you

Show the child the template and point to the responses as you read

If it is not at all a problem for you, point to the smiling face

If it is sometimes a problem for you, point to the middle face

If it is a problem for you a lot, point to the frowning face

I will read each question. Point to the pictures to show me how much of a problem it is for you. Let's try a practice one first.

	Not at all	Sometimes	A lot
Is it hard for you to snap your fingers	\odot	\odot	

Ask the child to demonstrate snapping his or her fingers to determine whether or not the question was answered correctly. Repeat the question if the child demonstrates a response that is different from his or her action.

Think about how you have been doing for the last few weeks. Please listen carefully to each sentence and tell me how much of a problem this is for you.

After reading the item, gesture to the template. If the child hesitates or does not seem to understand how to answer, read the response options while pointing at the faces.

PHYSICAL FUNCTIONING (problems with)		Some- times	A lot
1. Is it hard for you to walk	0	2	4
2. Is it hard for you to run	0	2	4
3. Is it hard for you to play sports or exercise	0	2	4
4. Is it hard for you to pick up big things	0	2	4
5. Is it hard for you to do chores (like pick up your toys)	0	2	4

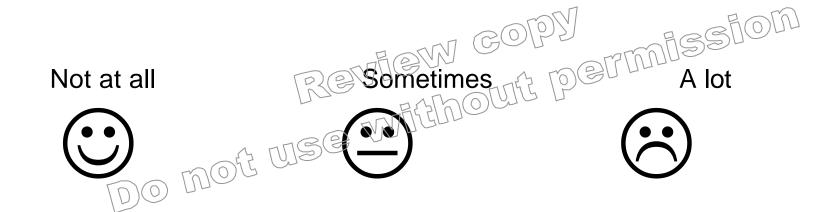
Remember, tell me how much of a problem this has been for you for the last few weeks.

EMOTIONAL FUNCTIONING (problems with)	Not at all	Some- times	A lot
1. Do you feel scared	0	2	4
2. Do you feel sad	0	2	4
3. Do you feel mad	0	2	4
4. Do you worry about what will happen to you	0, 1	2	4

SOCIAL FUNCTIONING (problems with	Not at all	Some- times	Alot
1. Is it hard for you to get along with other kids	12 62	2	4
2. Do other kids say they do not want to play with you	0	2	4
3. Do other kids tease you	0	2	4

SCHOOL FUNCTIONING (problems with)	Not at all	Some- times	A lot
Is it hard for you to pay attention in school	0	2	4
2. Do you forget things	0	2	4
3. Is it hard to keep up with schoolwork	0	2	4

How much of a problem is this for you?



ID# _	
Date:	



PARENT REPORT for YOUNG CHILDREN (ages 5-7)

DIRECTIONSO

On the following page is a list of things that might be a problem for your child. Please tell us how much of a problem each one has been for your child during the past ONE month by dircling: DO MOE USE



1 if it is almost never a problem

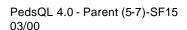
2 if it is sometimes a problem

3 if it is often a problem

4 if it is almost always a problem

There are no right or wrong answers.

If you do not understand a question, please ask for help.



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In the past ONE month, how much of a problem has your child had with ...

PHYSICAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Walking more than one block	0	1	2	3	4
2. Running	0	1	2	3	4
3. Participating in sports activity or exercise	0	1	2	3	4
4. Lifting something heavy	0	1	2	3	4
5. Doing chores, like picking up his or her toys	0	1	2	3	4

EMOTIONAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always		
Feeling afraid or scared	0		2	3	4		
2. Feeling sad or blue	~00\	53	2	H3=(
3. Feeling angry	0	1	N727	13	4		
4. Worrying about what will happen to him or her	7957	(a) C	ラ ^山 2	3	4		

SOCIAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Getting along with other children	0	1	2	3	4
2. Other kids not wanting to be his or her friend	0	1	2	3	4
Getting teased by other children	0	1	2	3	4

SCHOOL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Paying attention in class	0	1	2	3	4
2. Forgetting things	0	1	2	3	4
3. Keeping up with school activities	0	1	2	3	4

ID#	
Date:_	



PARENT REPORT for TODDLERS (ages 2-4)

DIRECTIONS

[SS]OM On the following page is a list of things that might be a problem for your child. Please tell us how much of a problem each one has been for your child during the past ONE month by circling DO MOE US

0 if it is never a problem

1 if it is almost never a problem

2 if it is sometimes a problem

3 if it is often a problem

4 if it is almost always a problem

There are no right or wrong answers.

In the past ONE month, how much of a problem has your child had with ...

PHYSICAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
1. Walking	0	1	2	3	4
2. Running	0	1	2	3	4
3. Participating in active play or exercise	0	1	2	3	4
4. Lifting something heavy	0	1	2	3	4
5. Helping to pick up his or her toys	0	1	2	3	4

EMOTIONAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Feeling afraid or scared	0		2	3	==4
2. Feeling sad or blue	(GO)	PD	2	133	540
3. Feeling angry	0	10	2/72/11	3	4
4. Worrying	7/9/57		2	3	4

SOCIAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Playing with other children	0	1	2	3	4
2. Other kids not wanting to play with him or her	0	1	2	3	4
3. Getting teased by other children	0	1	2	3	4

*Please complete this section if your child attends school or daycare

SCHOOL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Doing the same school activities as peers	0	1	2	3	4
2. Missing school/daycare because of not feeling well	0	1	2	3	4
Missing school/daycare to go to the doctor or hospital	0	1	2	3	4