

Case Number: *Numerals only please*

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Clinician ID:

Today's date: 

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Session Number: 

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**Value Options Case:**  Yes  No      **EAP Case:**  Yes  No      **Sex:**  Male  Female

Completing this questionnaire will help you and your counselor to plan your sessions and monitor your improvement. Please think about your experience in the past two weeks. If you are a parent or caretaker completing this questionnaire for a younger child, please respond as to how you see the child.

Please shade circles like this       **Completed by:**  Youth  Other

**In the past two weeks, how often did you (your child)...**

	Never	Rarely	Some- times	Often	Very often
1. ...annoy other people on purpose?.....	<input type="radio"/>				
2. ...worry about a lot of things?.....	<input type="radio"/>				
3. ...feel nervous and/or shy around other people?.....	<input type="radio"/>				
4. ...argue with adults?.....	<input type="radio"/>				
5. ...cry easily?.....	<input type="radio"/>				
6. ...get into fights with family members or friends?.....	<input type="radio"/>				
7. ...feel unhappy or sad?.....	<input type="radio"/>				
8. ...think that he/she doesn't have any friends?.....	<input type="radio"/>				
9. ...get into trouble?.....	<input type="radio"/>				
10. ...lie to get things he/she wanted?.....	<input type="radio"/>				
11. ...have a hard time controlling his/her temper?.....	<input type="radio"/>				
12. ...interrupt others?.....	<input type="radio"/>				
13. ...have a hard time waiting his/her turn?.....	<input type="radio"/>				
14. ...have a hard time paying attention?.....	<input type="radio"/>				
15. ...lose things he/she needs?.....	<input type="radio"/>				
16. ...have a hard time sitting still?.....	<input type="radio"/>				

**Feedback on your last session: Skip 17-19 if you have not yet had a session with this counselor**

	Agree	Somewhat agree	Not sure	Somewhat disagree	Do not agree
17. The counselor and I worked well together.....	<input type="radio"/>				
18. The counselor understood me.....	<input type="radio"/>				
19. We talked about the things that were important to me...	<input type="radio"/>				

