ADOLESCENT SELF ASSESSMENT

Check all that apply. PROBLEMS WITH CONCENTRATION I have trouble concentrating on one thing at a time. My mind wanders. I forget what I am supposed to be doing.

I get distracted easily.

I lose my place when I am reading. I am easily distracted by noises. PROBLEMS WITH RESTLESSNESS I cannot sit still for very long. I am jumpy and jittery. I have to get up and move around during homework. I like to play active sports rather than quiet ones. I am a restless sleeper. I feel restless inside even if I am sitting still. PROBLEMS WITH SELF CONTROL I say things without thinking. ___I do things on impulse. __I am easily led to trouble. __I have trouble following rules.
__When I want something, I have trouble stopping myself. PROBLEMS WITH ANGER I have a hot temper. I tend to explode easily. A lot of things irritate me. I throw tantrums. People bug me and get me angry. __I have thoughts of hurting others. I have hurt other people. I have destroyed property when I was angry. PROBLEMS WITH FRIENDS/OTHERS I would like to have more friends. _I have trouble keeping friends. _I am a lonely person. I don't get along well with the opposite sex. I don't have many friends my age. I have been physically hurt by another person. I have been touched in ways that have made me uncomfortable.

PROBLEMS WITH CONFIDENCE
I am not sure of myself. I wish I had more confidence in my abilities. I don't like myself. I have trouble making decisions I don't take credit for my accomplishments. There are a lot of things I dislike about my behavior. I act okay on the outside, but inside I am unsure of myself. I wish I were smarter.
PROBLEMS WITH LEARNING
<pre>I have trouble with reading and spelling. I have bad handwriting. It takes a lot of effort to get my schoolwork done. I tend to learn more slowly than I would like. I forget things I have learned. I have trouble organizing my schoolwork. I am behind in my schoolwork.</pre>
PROBLEMS WITH FEELINGS
I get nervous. I am an anxious person. I feel sad and gloomy a lot. The future seems hopeless to me. I feel like killing myself. I am easily upset. A lot of things scare me even if I wouldn't admit it to others. I have nightmares. I have a lot of aches and pains. I worry a lot about little things. I feel like crying. I am discouraged. I am afraid to be alone. I am nervous unless I am with others. I sometimes hurt myself when I feel overwhelmed by my feelings.
PROBLEMS WITH FAMILY
My parents expect too much from meIt seems like my parents are always criticizing meMy family doesn't do too many fun things togetherI get away with too much at homeMy parents don't always get along very wellI am not very close to my familyMy parents' discipline is too harshMy parents are too strictThe rules in our house are not very clearMy parents don't really care about me very muchNobody is really in charge of things in our houseMy parents don't try to keep track of where I am.

L. P. S. E. V. S. C. S. C.

There is a lot of yelling in our nouse.
I have run away from home. I have been physically hurt by a family member. I have been touched in ways that have made me uncomfortable by a family member.
PROBLEMS WITH DRUGS/ALCOHOL
<pre>I use drugs or alcohol to help me deal with my feelings. I have trouble saying "no" to drugs or alcohol. Using drugs/alcohol have contributed to my problems. It is okay with me if my friends use drugs or alcohol.</pre>
PROBLEMS WITH THINKING
<pre>I have unusual thoughts I have problems remembering things that other people remember easily.</pre>
I hear voices that other people don't hear. I see things that other people don't see. I have fears that I don't understand. I think one thought over and over. I feel confused a lot of the time. I sometimes have to repeat an action over and over.
PROBLEMS WITH THE LEGAL SYSTEM
I have legal charges pending against meI am on probationI have stolen from othersI have been arrested.
PROBLEMS WITH EATING/NUTRITION
I have had one of the following health problems: Cancer Cancer treatment AIDS Diabetes
Gastro-Intestinal problems Kidney problems Liver Disease Malnutrition I have had a recent surgery, broken bone or severe burn.
I have recently lost a lot of weight. I have recently gained a lot of weight. I feel that I am overweight even though others don't agree. I try to control my weight by not eating, by throwing up or taking laxatives. I have eaten very little in the last 7 days or more.
I have problems chewing or swallowing. I have recently had a lot of diarrhea or vomiting.

:

- Section of Sec

S

OTHER PROBLEMS I HAVE:	
MY ASSETS	
I can do a lot when I put my mind I can sit still when I really war My mind is pretty sharp. I have a good head on my shoulder I have overcome a lot of my probl People think I am a pretty good p I am calm and relaxed. I get along well with others. My parents and I get along fine. I tend to look on the bright side I have a lot of self-control when I can be as cool as I need to . I don't get rattled easily. I can really stick to things when I make friends easily. School is a place I now feel pret OTHER STRONG POINTS I HAVE:	nt to. cs. lems. person. e of things. n I need it.
	8
	2
Signature	Date

1 1. 3