

**Parent Evaluation**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Completed by: \_\_\_\_\_

Week: 

1	2	3	4	5
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(Circle)**RICHARD S. ADLER, MD**

FORENSIC &amp; CLINICAL PSYCHIATRY

Instructions: Below are a number of common problems that children have. Please rate each item according to your child's behavior in the last two hours. For each item ask yourself, "How much of a problem has this been in the last two hours?" and circle the best answer for each one. If none, not at all, seldom or very infrequently, you would circle 0. If very much true, or it occurs very often or frequently, you would circle 3. You would circle 1 or 2 for ratings in between. Please respond to all of the items.

	Not True at all (Never, seldom)	Just a little true (Occasionally)	Pretty much true (Often, quite a bit)	Very much true (Very often, very frequent)
<b>1. Restless or overactive</b>	0	1	2	3
<b>2. Excitable, impulsive</b>	0	1	2	3
<b>3. Fails to finish things s/he starts</b>	0	1	2	3
<b>4. Inattentive, easily distracted</b>	0	1	2	3
<b>5. Temper outbursts</b>	0	1	2	3
<b>6. Fidgeting</b>	0	1	2	3
<b>7. Disturbs other children</b>	0	1	2	3
<b>8. Demands must be met immediately - easily frustrated</b>	0	1	2	3
<b>9. Cries often and easily</b>	0	1	2	3
<b>10. Mood changes quickly and drastically</b>	0	1	2	3

Conners' Rating Scales - Revised: Technical Manual. C. Keith Conners. Multi-Health Systems Inc. New York. 1997

 Comments/Observations: \_\_\_\_\_  
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