



ADOLESCENT SYMPTOM INVENTORY – 4 (16-18 Years)

YOUTH'S NAME:	AGE:	GENDER:
SCHOOL:	GRADE:	DATE:

NAME OF PERSON COMPLETING THIS FORM: _____ POSITION: _____

LENGTH OF TIME YOU HAVE KNOWN STUDENT: _____ LENGTH OF TIME EACH DAY WITH STUDENT: _____

TYPE OF CLASS (E.G., 6TH GRADE, RESOURCE ROOM, 8TH GRADE ENGLISH): _____

CURRENT SPECIAL EDUCATION LABEL (E.G., LEARNING DISABILITY): _____

CURRENT SPECIAL EDUCATION SERVICES (E.G., SPEECH THERAPY): _____

CURRENT ACADEMY PERFORMANCE: CHECK APPROPRIATE GRADE LEVEL (G.L.)

SUBJECT	2 OR MORE YRS. BELOW G.L.	1 TO 2 YRS. BELOW G.L.	AT OR ABOUT G.L.	1 TO 2 YRS. ABOVE G.L.	2 OR MORE YRS ABOVE G.L.
READING					
WRITING					
SPELLING					
ARITHMETIC					

DIRECTIONS: CHECK WHICH RATING BEST DESCRIBES THE OVERALL BEHAVIOR. ANSWER EACH QUESTION TO THE BEST OF YOUR ABILITY.

CATEGORY A		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
1.	DOES NOT PAY CLOSE ATTENTION TO DETAILS OR MAKES CARELESS MISTAKES				
2.	HAS DIFFICULTY PAYING ATTENTION TO TASKS				
3.	DOES NOT SEEM TO LISTEN WHEN SPOKEN TO DIRECTLY				
4.	HAS DIFFICULTY FOLLOWING THROUGH ON INSTRUCTIONS AND FAILS TO FINISH THINGS				
5.	HAS DIFFICULTY ORGANIZING WORK AND ACTIVITIES				
6.	AVOIDS DOING TASKS THAT REQUIRE A LOT OF MENTAL EFFORT (SCHOOLWORK, HOMEWORK, ETC.)				
7.	LOSES THINGS NECESSARY FOR ACTIVITIES				
8.	IS EASILY DISTRACTED BY OTHER THINGS GOING ON				
9.	IS FORGETFUL IN DAILY ACTIVITIES				
10.	FIDGETS WITH HANDS OR FEET OR SQUIRMS IN SEAT				
11.	HAS DIFFICULTY REMAINING SEATED WHEN ASKED TO DO SO				
12.	RUNS ABOUT OR CLIMBS ON THINGS WHEN ASKED NOT TO DO SO				
13.	HAS DIFFICULTY PLAYING QUIETLY				
14.	IS 'ON THE GO' OR ACTS AS IF 'DRIVEN BY A MOTOR'				
15.	TALKS EXCESSIVELY				
16.	BLURTS OUT ANSWERS TO QUESTIONS BEFORE THEY HAVE BEEN COMPLETED				
17.	HAS DIFFICULTY AWAITING TURN IN GROUP ACTIVITIES				
18.	INTERRUPTS PEOPLE OR BUTTS INTO OTHER CHILDREN'S ACTIVITIES				

CATEGORY B ADOLESCENT SYMPTOM INVENTORY – Page 2

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
19.	PLAYS HOOKY FROM SCHOOL				
20.	STAYS OUT AT NIGHT WHEN NOT SUPPOSED TO				
21.	LIES TO GET THINGS OR TO AVOID RESPONSIBILITY ('CONS OTHERS')				
22.	BULLIES. THREATENS, OR INTIMIDATES OTHERS				
23.	STARTS PHYSICAL FIGHTS				
24.	HAS RUN AWAY FROM HOME OVERNIGHT				
25.	HAS STOLEN THINGS WHEN OTHERS WERE NOT LOOKING				
26.	HAS DELIBERATELY DESTROYED OTHER'S PROPERTY				
27.	HAS DELIBERATELY STARTED FIRES				
28.	HAS STOLEN THINGS FROM OTHERS USING PHYSICAL FORCE				
29.	HAS BROKEN INTO SOMEONE ELSE'S HOUSE, BUILDING OR CAR				
30.	HAS USED A WEAPON WHEN FIGHTING (BAT, BRICK, BOTTLE, ETC.)				
31.	HAS BEEN PHYSICALLY CRUEL TO ANIMALS				
32.	HAS BEEN PHYSICALLY CRUEL TO PEOPLE				
33.	HAS BEEN PREOCCUPIED WITH OR INVOLVED IN SEXUAL ACTIVITY				
34.	PLAYS HOOKY FROM SCHOOL				
35.	STAYS OUT AT NIGHT WHEN NOT SUPPOSED TO				
36.	LIES TO GET THINGS OR TO AVOID RESPONSIBILITY ('CONS OTHERS')				
37.	BULLIES. THREATENS, OR INTIMIDATES OTHERS				
38.	STARTS PHYSICAL FIGHTS				

CATEGORY C

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
39	LOSES TEMPER				
40	ARGUES WITH ADULTS				
41	DEFIES OR REFUSES WHAT YOU TELL HIM/ HER TO DO				
42	DOES THINGS TO DELIBERATELY ANNOY OTHERS				
43	BLAMES OTHERS FOR OWN MISBEHAVIOR OR MISTAKES				
44	IS TOUCHY OR EASILY ANNOYED BY OTHERS				
45	IS ANGRY AND RESENTFUL				
46	TAKES ANGER OUT ON OTHERS OR TRIES TO GET EVEN				

CATEGORY D ADOLESCENT SYMPTOM INVENTORY – Page 3

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
47	IS OVER CONCERNED ABOUT ABILITIES IN SCHOOL, ATHLETIC, WORK, OR SOCIAL ACTIVITIES				
48	HAS DIFFICULTY CONTROLLING WORRIES				
49	ACTS RESTLESS OR EDGY				
50	IS IRRITABLE FOR MOST OF THE DAY				

CATEGORY D ADOLESCENT SYMPTOM INVENTORY – Page 3

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
51	IS EXTREMELY TENSE OR UNABLE TO RELAX				
52	HAS DIFFICULTY FALLING ASLEEP				

CATEGORY E

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
53	IS OVERLY FEARFUL OF (OR TRIES TO AVOID) SPECIFIC OBJECTS OR SITUATIONS (ANIMALS, HEIGHT, STORMS, GOING PLACES ALONE, BEING “TRAPPED,” ETC.)				
54	COMPLAINS ABOUT HEART POUNDING, SHORTNESS OF BREATH, FEELING DIZZY, TREMBLING, OR FEAR OF DYING				
55	CANNOT GET DISTRESSING THOUGHTS OUT OF HIS/HER MIND (WORRIES ABOUT GERMS OR DOING THINGS PERFECTLY, ETC.)				
56	FEELS COMPELLED TO PERFORM UNUSUAL HABITS (HAND WASHING, CHECKING LOCKS, REPEATING THINGS A SET NUMBER OF TIMES)				
57	HAS EXPERIENCED AN EXTREMELY UPSETTING EVENT AND CONTINUES TO BE BOTHERED BY IT				
58	HAS DISTRESSING MEMORIES OR DREAMS ABOUT AN EXTREMELY UPSETTING EVENT				
59	MAKES TWITCHING OR JERKING MOVEMENT FOR NO APPARENT REASON (EYE BLINKING, NOSE TWITCHING, GRIMACING, LIP LICKING, HEAD JERKING, ETC.)				
60	MAKES VOCAL SOUNDS FOR NO APPARENT REASON (COUGHING, THROAT CLEARING, SNIFFLING, GRUNTING, ETC.)				
61	COMPLAINS ABOUT PHYSICAL PROBLEMS (HEADACHES, UPSET STOMACH, ETC.) FOR WHICH THERE IS NO APPARENT CAUSE				
62	WORRIES ABOUT PHYSICAL HEALTH				

CATEGORY F

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
63	IS MORE ANXIOUS IN SOCIAL SITUATIONS THAN MOST OTHER YOUTH				
64	IS EXCESSIVELY SHY WITH PEERS				

CATEGORY G

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
65	GETS VERY UPSET WHEN HE/SHE EXPECTS TO BE SEPARATED FROM HOME OR PARENTS				
66	WORRIES THAT PARENTS WILL BE HURT OR LEAVE HOME AND NOT COME BACK				
67	WORRIES THAT SOME DISASTER (GETTING LOST, KIDNAPPED, ETC.) WILL SEPARATE HIM/ HER FROM PARENTS				
68	TRIES TO AVOID GOING TO SCHOOL IN ORDER TO STAY HOME WITH PARENT				
69	WORRIES ABOUT BEING LEFT AT HOME ALONE				
70	AFRAID TO GO TO SLEEP UNLESS NEAR PARENT				
71	HAS NIGHTMARES ABOUT BEING SEPARATED FROM PARENT				
72	COMPLAINS ABOUT FEELING SICK WHEN HE/SHE EXPECTS TO BE SEPARATED FROM HOME OR PARENTS				

CATEGORY H

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
73	PREFERS TO BE ALONE RATHER THAN WITH FRIENDS OR FAMILY				
74	SHOWS LITTLE INTEREST IN HAVING CLOSE RELATIONSHIPS				
75	IS EMOTIONALLY COLD OR INDIFFERENT TOWARD PEOPLE				

CATEGORY I ADOLESCENT SYMPTOM INVENTORY – Page 4

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
76	HAS STRANGE IDEAS OR BELIEFS THAT ARE NOT REAL (FOOD IS POISONED; PEOPLE ARE TRYING TO GET HIM/ HER, ETC.)				
77	HAS AUDITORY HALLUCINATIONS-HEARS VOICES TALKING TO OR TELLING HIM/HER TO DO THINGS				
78	HAS DISORGANIZED SPEECH (E.G., IDEAS DON'T MAKE SENSE, THOUGHTS RUN TOGETHER, LOSES TRAIN OF THOUGHT)				
79	BEHAVES IN EXTREMELY STRANGE WAYS (E.G., UNPREDICTABLE OUTBURSTS, ACTS AS IF IN SLOW MOTION SEEMS TO FORGET HOW TO TAKE CARE OF SELF)				
80	LAUGHS OR CRIES AT INAPPROPRIATE TIMES OR SHOWS NO EMOTION IN SITUATIONS WHERE MOST OTHERS OF SAME AGE WOULD REACT				
81	SEEMS TO HAVE LOST INTEREST IN DOING THINGS OR TALKING TO PEOPLE				

CATEGORY J

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
82	WETS BED AT NIGHT				
83	WETS OR SOILS UNDERWEAR DURING DAYTIME HOURS				

CATEGORY K

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
84	IS DEPRESSED FOR MOST OF THE DAY				
85	SHOWS LITTLE INTEREST IN (OR ENJOYMENT OF) PLEASURABLE ACTIVITIES				
86	TALKS ABOUT DEATH OR SUICIDE				
87	FEELS WORTHLESS OR GUILTY				
88	HAS LOW ENERGY LEVEL OR IS TIRED FOR NO APPARENT REASON				
89	HAS LITTLE CONFIDENCE OR FEELS INFERIOR TO OTHERS				
90	FEELS THAT THINGS NEVER WORK OUT RIGHT				

(CIRCLE YES OR NO)

91	HAS EXPERIENCED A BIG CHANGE IN HIS/ HER NORMAL APPETITE OR WEIGHT		NO	YES	
92	HAS EXPERIENCED A BIG CHANGE IN HIS/ HER NORMAL SLEEPING HABITS – TROUBLE SLEEPING OR SLEEPS TOO MUCH		NO	YES	
93	HAS EXPERIENCED A BIG CHANGE IN HIS/ HER NORMAL ACTIVITY LEVEL – OVERACTIVE OR INACTIVE		NO	YES	
94	HAS EXPERIENCED A BIG CHANGE IN HIS/ HER ABILITY TO CONCENTRATE OR MAKE DECISIONS		NO	YES	
95	HAS EXPERIENCED A BIG DROP IN SCHOOL GRADES OR SCHOOLWORK		NO	YES	
96	HAS BECOME MORE SENSITIVE OR TEARFUL THAN USUAL		NO	YES	
97	HAS EXPERIENCED A VERY STRESSFUL EVENT SUCH AS PARENTS DIVORCE, DEATH OF A FRIEND OR RELATIVE, SERIOUS ILLNESS		NO	YES	

Comments:

CATEGORY L: ADOLESCENT SYMPTOM INVENTORY – Page 5

HAVE THERE BEEN PERIODS LASTING AT LEAST SEVERAL DAYS WHEN THERE HAVE BEEN PERSONALITY CHANGES AND DOES THE FOLLOWING: (CIRCLE YES OR NO)			
98	IS MUCH MORE CHEERFUL THAN USUAL	NO	YES
99	IS MUCH MORE IRRITABLE OR EXPLOSIVE THAN USUAL	NO	YES

IF ANSWER TO 98 OR 99 IS "YES," DURING THESE PERIODS DOES HE/ SHE ALSO DO THE FOLLOWING? (CIRCLE YES OR NO)			
100.	BECOME MUCH MORE ACTIVE OR BUSY THAN USUAL	NO	YES
101.	NEED FAR LESS SLEEP THAN USUAL	NO	YES
102.	MUCH MORE TALKATIVE THAN USUAL	NO	YES
103.	FAR MORE DISTRACTIBLE THAN USUAL	NO	YES
104.	DO FAR MORE RECKLESS OR SILLY THINGS THAN USUAL	NO	YES
105.	SWITCH RAPIDLY FROM ONE TOPIC TO ANOTHER	NO	YES
106.	BELIEVE THAT HE/ SHE SPECIAL ABILITIES OR CAN THINGS THAT ARE OBVIOUSLY UNREALISTIC	NO	YES

CATEGORY M

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
107	UNUSUALLY THIN OR UNDERWEIGHT				
108	REFUSES TO EAT ENOUGH FOOD TO KEEP A HEALTHY BODY WEIGHT				
109	HAS EXCESSIVE WORRIES ABOUT GETTING FAT OR BECOMING OVERWEIGHT				
110	THINK HE/ SHE IS FAT OR OVERWEIGHT BUT REALLY ISN'T-				

CATEGORY N

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
111	HAS EATING BINGES (EATS AN EXCESSIVE AMOUNT OF FOOD IN A SHORT PERIOD OF TIME)				
112	CANNOT STOP EATING OR CONTROL HOW MUCH HE/ SHE EATS				
113	USES VERY STRICT DIET, VOMITING, LAXATIVES, OR EXCESSIVE EXERCISE TO CONTROL WEIGHT				
114	SEEMS OVER CONCERNED ABOUT HIS/ HER WEIGHT OR FIGURE				

CATEGORY O

		NEVER	SOME-TIMES	OFTEN	VERY OFTEN
115	SMOKES TOBACCO CIGARETTES				
116	DRINKS ALCOHOL BEVERAGE (BEER, WINE, LIQUOR)				
117	GETS INTO TROUBLE BECAUSE OF ALCOHOL USE				
118	SMOKES MARIJUANA				
119	USES OTHER ILLEGAL DRUGS (COCAINE, GLUE, SPEED, LSD, ETC.)				
120	GETS INTO TROUBLE BECAUSE OF ILLEGAL DRUG USE				

OTHER PROBLEMS OR COMMENTS: _____