

DISRUPTIVE BEHAVIOR DISORDERS RATING SCALE – PARENT FORM

Child's name _____ Age _____ Date _____

Form completed by _____

Relationship to child: (circle one) Mother Father Stepparent Other: _____ (explain)

Instructions: Circle the number that *best describes* your child's behavior at home during the past 6 months:

	Never or rarely	Sometimes	Often	Very often
1. Fails to give close attention to details or makes careless mistakes in work	0	1	2	3
2. Has difficulty sustaining attention in tasks or activities	0	1	2	3
3. Does not seem to listen when spoken to directly	0	1	2	3
4. Does not follow through on instructions and fails to finish work	0	1	2	3
5. Has difficulty organizing tasks and activities	0	1	2	3
6. Avoids tasks (e.g., schoolwork, homework) that require mental effort	0	1	2	3
7. Loses things necessary for tasks and activities	0	1	2	3
8. Is easily distracted	0	1	2	3
9. Is forgetful in daily activities	0	1	2	3
10. Fidgets with hands or feet or squirms in seat	0	1	2	3
11. Leaves seat in classroom or in other situations in which remaining seated is expected	0	1	2	3
12. Runs about or climbs excessively in situations in which it is inappropriate	0	1	2	3
13. Has difficulty engaging in leisure activities quietly	0	1	2	3
14. Is "on the go" or acts as if "driven by a motor"	0	1	2	3
15. Talks excessively	0	1	2	3
16. Blurts out answers before questions have been completed	0	1	2	3
17. Has difficulty awaiting turn	0	1	2	3
18. Interrupts or intrudes on others	0	1	2	3
19. Loses temper	0	1	2	3
20. Argues with adults	0	1	2	3
21. Actively defies or refuses to comply with adults' requests or rules	0	1	2	3
22. Deliberately annoys people	0	1	2	3
23. Blames others for his/her mistakes or misbehavior	0	1	2	3
24. Is touchy or easily annoyed by others	0	1	2	3
25. Is angry and resentful	0	1	2	3
26. Is spiteful or vindictive	0	1	2	3

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Instructions: Please indicate whether your child has done any of these activities in the past 12 months.

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| 1. Often bullied, threatened, or intimidated others | No | Yes |
| 2. Often initiated physical fights | No | Yes |
| 3. Used a weapon that can cause serious physical harm to others (e.g., a bat, brick, broken bottle, knife or gun) | No | Yes |
| 4. Has been physically cruel to people | No | Yes |
| 5. Has been physically cruel to animals | No | Yes |
| 6. Has stolen while confronting a victim (e.g., mugging, purse snatching, extortion, armed robbery) | No | Yes |
| 7. Has forced someone into sexual activity | No | Yes |
| 8. Has deliberately engaged in fire setting with the intention of causing serious damage | No | Yes |
| 9. Has deliberately destroyed others' property (other than by fire setting) | No | Yes |
| 10. Has broken into someone else's house, building, or car | No | Yes |
| 11. Often lies to obtain goods or favors or to avoid obligations | No | Yes |
| 12. Has stolen items of nontrivial value without confronting a victim (e.g., shoplifting, but without breaking and entering; forgery) | No | Yes |
| 13. Often stays out at night despite parental prohibitions.
If so, at what age did this begin? _____ | No | Yes |
| 14. Has run away from home overnight at least twice while living in parent's home, foster care, or group home.
If so, how many times? _____ | No | Yes |
| 15. Is often truant from school
If so, at what age did he/she begin doing this? _____ | No | Yes |