

How often has (your child) done each of the following behaviors:

Please use the following scale for all questions

- 1 = Never
- 2 = Once
- 3 = Twice
- 4 = Three times
- 5 = Four or more times

[Enter 1, 2, 3, 4, or 5 and the cursor will automatically move to the next box]

- 1. Drank alcohol beyond a few sips? _____
- 2. Been drunk in a public place? _____
- 3. Used illegal drugs such as heroin, crack, cocaine, or LSD? _____
- 4. Sold illegal drugs? _____
- 5. Stolen or tried to steal something worth more than \$50? _____
- 6. Attacked someone with a weapon with the idea of seriously hurting them? _____
- 7. Taken some money at home that did not belong to them without asking? _____
- 8. Been suspended or expelled for bad behavior at school? _____
- 9. Been in trouble with the police for something he or she did? _____
- 10. Run away from home? _____



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11. Carried a weapon? _____
12. Purposely set fire to a house, car, or building? _____