

ADAPTIVE BEHAVIOR/Short Form

Does (or could do) task completely without help or supervision:

0 — NEVER OR RARELY—even if asked

1 — DOES, BUT NOT WELL—or about $\frac{1}{4}$ of the time—may need to be asked

2 — DOES FAIRLY WELL—or about $\frac{3}{4}$ of the time—may need to be asked

3 — DOES VERY WELL—always or almost always—without being asked

0	1	2	3	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. Makes sounds or gestures to get attention.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2. Reaches for a person whom he or she wants.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3. Picks up small objects with hand.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4. Swallows soft foods.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5. Transfers small objects from one hand to the other hand.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6. Stands for at least 5 seconds by holding on to furniture or other objects.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	7. Pulls self into a standing position.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8. Imitates actions when asked, such as waving or clapping hands.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	9. Puts small objects into containers and takes them out again.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10. Stands alone and walks for at least 6 feet.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	11. Removes socks.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12. Shakes head or otherwise indicates "yes" or "no" in response to a simple question such as, "Do you want some milk?"
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	13. Points to familiar pictures in a book on request.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	14. Says at least 10 words that can be understood by someone who knows him or her.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	15. Eats solid foods with a spoon with little spilling.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	16. Asks simple questions (for example, "What's that?").
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	17. Walks up and down stairs by alternating feet from step to step (may hold handrail).
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	18. Uses the toilet at regular times when placed on the toilet or a toilet chair or when taken to the bathroom.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	19. Says last name when asked.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	20. Uses the toilet, including removing and replacing clothing, with no more than one accident per month.

Sum A Sum B Sum C

Sum A + Sum Bx2 + Sum Cx3 = Raw Score
Page 2

Short Form/ADAPTIVE BEHAVIOR

Does (or could do) task completely without help or supervision:

0 — NEVER OR RARELY—even if asked

1 — DOES, BUT NOT WELL—or about $\frac{1}{4}$ of the time—may need to be asked

2 — DOES FAIRLY WELL—or about $\frac{3}{4}$ of the time—may need to be asked

3 — DOES VERY WELL—always or almost always—without being asked

- | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|--|
| 0 | 1 | 2 | 3 | |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 21. Uses complex sentences containing "because" (for example, "I'm not going outside today because it's raining"). |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 22. Takes appropriate-size portions from serving dishes. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 23. Prints first name, copying from an example. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 24. Changes clothing that is dirty from normal wear. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 25. Ties shoelaces and keeps them tied. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 26. Adjusts the water faucets for proper temperature in the bathtub or shower. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 27. Goes at least 4 blocks (or $\frac{1}{4}$ mile) from home, school, or work alone or with friends of the same age. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 28. Reads and understands materials such as books, comics, or magazines. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 29. Washes and dries dishes and puts them away. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 30. Finds a telephone number in the white pages. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 31. Gives directions to help someone else find his or her way to a place at least $\frac{1}{2}$ mile away. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 32. Accepts criticism of a job without showing anger. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 33. Reads one or more articles in a regular newspaper at least weekly. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 34. Loads and operates a washing machine using an appropriate setting and amount of detergent. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 35. Reaches unfamiliar locations in a city or town with the use of a map. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 36. Makes purchases with a check. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 37. Makes appointments for periodic medical or dental examinations. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 38. Purchases with a credit card, or has loans, and makes payments in a timely manner. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 39. Explains the terms of a written contract, such as an installment purchase agreement. |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 40. Performs interior and exterior maintenance jobs (for example, painting or replacing broken windows). |

Sum A Sum B Sum C

Sum A + Sum Bx2 + Sum Cx3 = Raw Score Page 3 + Raw Score Page 2 = Raw Score Total

Are there any skills that should be improved at this time? _____

PROBLEM BEHAVIOR**Instructions**

Some of the following behaviors are common at certain ages and are not of concern. Sometimes they cause a problem. If an individual does not exhibit problem behaviors in a category, check "No" and score the item "Never" (0) for frequency and "Not serious" (0) for severity. If you check "Yes," describe the major problem and check its frequency and severity.

1. Hurtful to Self

Does (name) injure his/her own body—for example, by hitting self, banging head, scratching, cutting or puncturing, biting, rubbing skin, pulling out hair, picking on skin, biting nails, or pinching self?

NO

YES If yes, describe the MAJOR PROBLEM:

a. FREQUENCY: How often does this behavior usually occur? (check one)

0. Never
 1. Less than once a month
 2. One to 3 times a month
 3. One to 6 times a week
 4. One to 10 times a day
 5. One or more times an hour

b. SEVERITY: How serious is the problem usually caused by this behavior? (check one)

0. Not serious; not a problem
 1. Slightly serious; a mild problem
 2. Moderately serious; a moderate problem
 3. Very serious; a severe problem
 4. Extremely serious; a critical problem

What do you or others typically do when this behavior occurs? _____

2. Hurtful to Others

Does (name) cause physical pain to other people or to animals—for example, by hitting, kicking, biting, pinching, scratching, pulling hair, or striking with an object?

NO

YES If yes, describe the MAJOR PROBLEM:

a. FREQUENCY: How often does this behavior usually occur? (check one)

0. Never
 1. Less than once a month
 2. One to 3 times a month
 3. One to 6 times a week
 4. One to 10 times a day
 5. One or more times an hour

b. SEVERITY: How serious is the problem usually caused by this behavior? (check one)

0. Not serious; not a problem
 1. Slightly serious; a mild problem
 2. Moderately serious; a moderate problem
 3. Very serious; a severe problem
 4. Extremely serious; a critical problem

What do you or others typically do when this behavior occurs? _____

3. Destructive to Property

Does (name) deliberately break, deface, or destroy things—for example, by hitting, tearing or cutting, throwing, burning, or marking or scratching things?

NO

YES If yes, describe the MAJOR PROBLEM:

a. FREQUENCY: How often does this behavior usually occur? (check one)

0. Never
 1. Less than once a month
 2. One to 3 times a month
 3. One to 6 times a week
 4. One to 10 times a day
 5. One or more times an hour

b. SEVERITY: How serious is the problem usually caused by this behavior? (check one)

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 3. Very serious; a severe problem
 4. Extremely serious; a critical problem

What do you or others typically do when this behavior occurs? _____

4. Disruptive Behavior

Does (name) interfere with the activities of others—for example, by clinging, pestering or teasing, arguing or complaining, picking fights, laughing or crying without reason, interrupting, or yelling or screaming?

NO

YES If yes, describe the MAJOR PROBLEM:

a. FREQUENCY: How often does this behavior usually occur? (check one)

0. Never
 1. Less than once a month
 2. One to 3 times a month
 3. One to 6 times a week
 4. One to 10 times a day
 5. One or more times an hour

b. SEVERITY: How serious is the problem usually caused by this behavior? (check one)

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 3. Very serious; a severe problem
 4. Extremely serious; a critical problem

What do you or others typically do when this behavior occurs? _____

5. Unusual or Repetitive Habits

Does (name) have any unusual behaviors that he/she may do over and over—for example, pacing, rocking, twirling fingers, sucking hands or objects, twitching (nervous tics), talking to self, grinding teeth, eating dirt or other objects, eating too much or too little, staring at an object or into space, or making odd faces or noises?

NO

YES If yes, describe the MAJOR PROBLEM: _____

a. FREQUENCY: How often does this behavior usually occur? (check one)

0. Never
 1. Less than once a month
 2. One to 3 times a month
 3. One to 6 times a week
 4. One to 10 times a day
 5. One or more times an hour

b. SEVERITY: How serious is the problem usually caused by this behavior? (check one)

0. Not serious; not a problem
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 4. Extremely serious; a critical problem

What do you or others typically do when this behavior occurs? _____

6. Socially Offensive Behavior

Does (name) behave in ways that are offensive to others—for example, talking too loudly, swearing or using vulgar language, lying, standing too close or touching others too much, threatening, talking nonsense, spitting at others, picking nose, belching, expelling gas, touching genitals, or urinating in inappropriate places?

NO

YES If yes, describe the MAJOR PROBLEM: _____

a. FREQUENCY: How often does this behavior usually occur? (check one)

0. Never
 1. Less than once a month
 2. One to 3 times a month
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b. SEVERITY: How serious is the problem usually caused by this behavior? (check one)

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What do you or others typically do when this behavior occurs? _____

7. Withdrawal or Inattentive Behavior

Does (name) have difficulty being around others or paying attention—for example, keeping away from other people, expressing unusual fears, showing little interest in activities, appearing sad or worried, showing little concentration on a task, sleeping too much, or talking negatively about self?

NO

YES If yes, describe the MAJOR PROBLEM: _____

a. FREQUENCY: How often does this behavior usually occur? (check one)

0. Never
 1. Less than once a month
 2. One to 3 times a month
 3. One to 6 times a week
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 5. One or more times an hour

b. SEVERITY: How serious is the problem usually caused by this behavior? (check one)

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 4. Extremely serious; a critical problem

What do you or others typically do when this behavior occurs? _____

8. Uncooperative Behavior

Does (name) have any behavior that is uncooperative—for example, refusing to obey, do chores, or follow rules; acting defiantly or pouting; refusing to attend school or go to work; arriving late at school or work; refusing to take turns or share; cheating; stealing; or breaking laws?

NO

YES If yes, describe the MAJOR PROBLEM: _____

a. FREQUENCY: How often does this behavior usually occur? (check one)

0. Never
 1. Less than once a month
 2. One to 3 times a month
 3. One to 6 times a week
 4. One to 10 times a day
 5. One or more times an hour

b. SEVERITY: How serious is the problem usually caused by this behavior? (check one)

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What do you or others typically do when this behavior occurs? _____