

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

**INSTRUCTIONS:** The following statements describe thoughts, feelings, and experiences that people may have. Please indicate how well each statement describes you, during the past two weeks, from "not at all like me" (0) to "extremely like me" (4), by marking the correct number. Read each statement carefully, select only one answer per statement, and please do not skip any questions.

	Not at all like me	.....	.....	.....	Extremely like me
1. I get sad or angry when I think of my family	0	1	2	3	4
2. I am shy around others	0	1	2	3	4
3. There are many things I am afraid of	0	1	2	3	4
4. My heart races for no good reason	0	1	2	3	4
5. I feel out of control when I eat	0	1	2	3	4
6. I enjoy my classes	0	1	2	3	4
7. I feel that my family loves me	0	1	2	3	4
8. I feel disconnected from myself	0	1	2	3	4
9. I don't enjoy being around people as much as I used to	0	1	2	3	4
10. I feel isolated and alone	0	1	2	3	4
11. My family gets on my nerves	0	1	2	3	4
12. I lose touch with reality	0	1	2	3	4
13. I think about food more than I would like to	0	1	2	3	4
14. I am anxious that I might have a panic attack while in public	0	1	2	3	4
15. I feel confident that I can succeed academically	0	1	2	3	4
16. I become anxious when I have to speak in front of audiences	0	1	2	3	4
17. I have sleep difficulties	0	1	2	3	4
18. My thoughts are racing	0	1	2	3	4
19. I am satisfied with my body shape	0	1	2	3	4
20. I feel worthless	0	1	2	3	4
21. My family is basically a happy one	0	1	2	3	4
22. I am dissatisfied with my weight	0	1	2	3	4
23. I feel helpless	0	1	2	3	4
24. I use drugs more than I should	0	1	2	3	4
25. I eat too much	0	1	2	3	4
26. I drink alcohol frequently	0	1	2	3	4
27. I have spells of terror or panic	0	1	2	3	4
28. I am enthusiastic about life	0	1	2	3	4
29. When I drink alcohol I can't remember what happened	0	1	2	3	4
30. I feel tense	0	1	2	3	4
31. When I start eating I can't stop	0	1	2	3	4
32. I have difficulty controlling my temper	0	1	2	3	4
33. I am easily frightened or startled	0	1	2	3	4

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	Not at all like me	.....	.....	.....	Extremely like me
34. I diet frequently	0	1	2	3	4
35. I make friends easily	0	1	2	3	4
36. I sometimes feel like breaking or smashing things	0	1	2	3	4
37. I have unwanted thoughts I can't control	0	1	2	3	4
38. There is a history of abuse in my family	0	1	2	3	4
39. I experience nightmares or flashbacks	0	1	2	3	4
40. I feel sad all the time	0	1	2	3	4
41. I am concerned that other people do not like me	0	1	2	3	4
42. I wish my family got along better	0	1	2	3	4
43. I get angry easily	0	1	2	3	4
44. I feel uncomfortable around people I don't know	0	1	2	3	4
45. I feel irritable	0	1	2	3	4
46. I have thoughts of ending my life	0	1	2	3	4
47. I feel self conscious around others	0	1	2	3	4
48. I purge to control my weight	0	1	2	3	4
49. I drink more than I should	0	1	2	3	4
50. I enjoy getting drunk	0	1	2	3	4
51. I am not able to concentrate as well as usual	0	1	2	3	4
52. I am afraid I may lose control and act violently	0	1	2	3	4
53. It's hard to stay motivated for my classes	0	1	2	3	4
54. I feel comfortable around other people	0	1	2	3	4
55. I like myself	0	1	2	3	4
56. I have done something I have regretted because of drinking	0	1	2	3	4
57. I frequently get into arguments	0	1	2	3	4
58. I find that I cry frequently	0	1	2	3	4
59. I am unable to keep up with my schoolwork	0	1	2	3	4
60. I have thoughts of hurting others	0	1	2	3	4
61. The less I eat, the better I feel about myself	0	1	2	3	4
62. I feel that I have no one who understands me	0	1	2	3	4