**CDI**

**Parent**

**Instructions:**

For each of the statements below, select one response that best describes your observations of your child **in the past two weeks.**

Indicate your response for each item by **circling** the number that best corresponds to your choice. You may change an item response by drawing an X through your original choice and selecting a new response.

Remember, for each statement, pick **one** answer that best describes your observations of your child in the PAST TWO WEEKS.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| My Child… | Not at all | Some of the time | Often | Much or most of the time |
| 1. Looks sad. | 0 | 1 | 2 | 3 |
| 2. Has fun. | 0 | 1 | 2 | 3 |
| 3. Does not like himself or herself. | 0 | 1 | 2 | 3 |
| 4. Blames himself or herself for things. | 0 | 1 | 2 | 3 |
| 5. Cries or looks tearful. | 0 | 1 | 2 | 3 |
| 6. Is cranky or irritable. | 0 | 1 | 2 | 3 |
| 7. Enjoys being with people. | 0 | 1 | 2 | 3 |
| 8. Thinks that he or she is ugly. | 0 | 1 | 2 | 3 |
| 9. Has to push himself or herself to do homework. | 0 | 1 | 2 | 3 |
| 10. Has trouble sleeping at night. | 0 | 1 | 2 | 3 |
| 11. Looks tired or fatigued. | 0 | 1 | 2 | 3 |
| 12. Seems lonely. | 0 | 1 | 2 | 3 |
| 13. Enjoys school. | 0 | 1 | 2 | 3 |
| 14. Spends time with friends. | 0 | 1 | 2 | 3 |
| 15. Is showing worse school performance than before. | 0 | 1 | 2 | 3 |
| 16. Does what he or she is told. | 0 | 1 | 2 | 3 |
| 17. Has disagreements and conflicts with others. | 0 | 1 | 2 | 3 |