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EDINBURGH HANDEDNESS INVENTORY

Please indicate your preferences in the use of hands in the following activities by putting + in the appropriate column. Where the preference is so strong that you would never try to use the other hand unless absolutely forced to, put ++. If in any case you are really indifferent, put + in both columns. Some of the activities require both hands. In these cases the part of the task, or object, for which hand-preference is wanted is indicated in brackets. Please try to answer all the questions, and only leave a blank if you have no experience at all of the object or task.

		L	R
		L	10
1	Writing		
2	Drawing		
3	Throwing		
4	Scissors		
5	Toothbrush		
6	Knife (without fork)		
7	Spoon		
8	Broom (upper hand)		
9	Striking Match (match)		
10	Opening box (lid)		