Self Report of Delinquency

Please indicate how often you engaged in these behaviors in the ***past year.*** Please be honest in answering these questions, and know that all of your answers will be kept ***confidential***.

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| --- | --- | --- | --- |
|  | **Never** | **Once or Twice** | **More Often** |
| *In the past year. . .* | | | |
| 1. Have you ***on purpose*** broken or damaged or destroyed things that did not belong to you? |  |  |  |
| 1. Have you written things or sprayed paint on walls or sidewalks or cars, where you were not supposed to be? |  |  |  |
| 1. Have you purposely set fire to a building, a car, or something else or tried to do so? |  |  |  |
| 1. Have you taken something from a store without paying for it? |  |  |  |
| 1. Have you taken something from a car that did not belong to you? |  |  |  |
| 1. Have you gone into or tried to go into a building to steal something? |  |  |  |
| 1. Have you avoided paying for things such as movies, bus, or subway rides or food? |  |  |  |
| 1. Have you snatched someone's purse or wallet or picked someone's pocket? |  |  |  |
| 1. Have you stolen or tried to steal things worth $5 or less? |  |  |  |
| 1. Have you stolen or tried to steal things worth between $5 and $50? |  |  |  |
| 1. Have you stolen or tried to steal things worth between $50 and $100? |  |  |  |
| 1. Have you stolen or tried to steal things worth $100 or more? |  |  |  |
| 1. Have you knowingly bought, sold, or held stolen goods or tried to do any of these things? |  |  |  |
| 1. Have you gone joyriding, that is, taken a motor vehicle, such as a car or motorcycle, for a ride or drive without the owner's permission? |  |  |  |
| 1. Have you stolen or tried to steal a motor vehicle? |  |  |  |
| 1. Have you used checks illegally or used fake money to pay for something? |  |  |  |
| 1. Have you used or tried to use credit or bank cards without the owner’s permission? |  |  |  |
| 1. Have you tried to cheat someone by selling them something that was worthless or not what you said it was? |  |  |  |
| 1. Have you carried a hidden weapon other than a plain pocket knife? |  |  |  |
| 1. Have you thrown rocks or bottles at people? |  |  |  |
| 1. Have you bullied, threatened, or intimidated someone else? |  |  |  |
| 1. Have you been physically cruel to an animal (causing harm)? |  |  |  |
| 1. Have you threatened anyone with a weapon (like a bat, brick, broken bottle, knife, or gun)? |  |  |  |
| 1. Have you attacked someone with a weapon or with the idea of seriously hurting or killing them? |  |  |  |
| 1. Have you hit someone with the idea of hurting them? |  |  |  |
| 1. Have you used a weapon, force, or strong-arm methods to get money or things from people? |  |  |  |
|  | **Never** | **Once or Twice** | **More Often** |
| *In the past year. . .* | | | |
| 1. Have you consumed beer? |  |  |  |
| 1. Have you consumed wine? |  |  |  |
| 1. Have you consumed liquor? |  |  |  |
| 1. Have you smoked a cigarette, smoked a pipe, or chewed tobacco? |  |  |  |
| 1. Have you smoked marijuana? |  |  |  |
| 1. Have you sniffed glue? |  |  |  |
| 1. Have you tried cocaine or crack? |  |  |  |
| 1. Have you tried LSD? |  |  |  |
| 1. Have you tried heroin? |  |  |  |
| 1. Have you tried ecstasy? |  |  |  |
| 1. Have you tried methamphetamine or speed? |  |  |  |
| 1. Have you ***sold*** marijuana (pot, grass, hash)? |  |  |  |
| 1. Have you ***sold*** hard drugs, such as heroin, cocaine (crack), or LSD? |  |  |  |
| 1. Have you ever tried other drugs that weren’t listed above? If yes, please list: |  |  |  |
| 1. Have you been stopped and questioned by the police? |  |  |  |
| 1. Have you been placed in a police car or brought to the police station? |  |  |  |
| 1. Other than traffic offenses, have you been arrested? |  |  |  |
| 1. Have you been loud, rowdy, or unruly in a public place so that people complained about it or got you in trouble? |  |  |  |
| 1. Have you begged for money or things from strangers? |  |  |  |
| 1. Have you been drunk in a public place? |  |  |  |
| 1. Have you been involved in any gang fights? |  |  |  |
| 1. Have you had unsafe sex (i.e., sex without a condom)? |  |  |  |
| 1. Have you been paid for having sexual relations with someone? |  |  |  |
| 1. Have you forced someone into sexual activity with you? |  |  |  |
| 1. Have you physically hurt or threatened to hurt someone to get them to have sex with you? |  |  |  |
| 1. Have you forced someone to have unsafe sex with you (i.e., sex without a condom)? |  |  |  |
| 1. Have you gotten someone else pregnant? |  |  |  |