

SDQ

Client Legal Name - _____ Date _____ Today's Date _____
 First, Last _____ e of _____
 Birth _____

SDQ 4-10 years

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain. Please give your answers on the basis of the child's behavior over the last six months or this school year.

1. Considerate of other people's feelings Answer ▼

2. Restless, overactive, cannot stay still for long Answer ▼

3. Often complains of headaches, stomach-aches or sickness Answer ▼

4. Shares readily with other children, for example toys, treats, pencils Answer ▼

5. Often loses temper Answer ▼

6. Rather solitary, prefers to play alone Answer ▼

7. Generally well behaved, usually does what adults request Answer ▼

8. Many worries or often seems worried

Answer 

9. Helpful if someone is hurt, upset or feeling ill

Answer 

10. Constantly fidgeting or squirming

Answer 

11. Has at least one good friend

Answer 

12. Often fights with other children or bullies them

Answer 

13. Often unhappy, depressed or tearful

Answer 

14. Generally liked by other children

Answer 


15. Easily distracted, concentration wanders

Answer 

16. Nervous or clingy in new situations, easily loses confidence

Answer 

17. Kind to younger children

Answer 

18. Often lies or cheats Answer

19. Picked on or bullied by other children Answer

20. Often offers to help others (parents, teachers, other children) Answer

21. Thinks things out before acting Answer

22. Steals from home, school or elsewhere Answer

23. Gets along better with adults than with other children Answer

24. Many fears, easily scared Answer

25. Good attention span, sees work through to the end Answer

Title of assessor