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AutoScore™ Form

Directions

Please answer the questions on this form based on your child's typical behavior during the past month. Use the following rating scale:

- Never: the behavior never or almost never happens
Occasionally: the behavior happens some of the time
Frequently: the behavior happens much of the time
Always: the behavior always or almost always happens

Circle the one answer that best describes how often the behavior happens. Try your best to answer all of the questions.

Several questions ask whether your child shows "distress" in certain situations. Showing distress may include verbal expressions (whining, crying, yelling) or nonverbal expressions (withdrawing, gesturing, pushing something away, running away, wincing, striking out).

You may use the space provided on the left to add any comments on your child's behavior or functioning.

Parent/Guardian Information

Your Name/ID#: \_\_\_\_\_

Your Relationship to Child: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Child Information

Child's Name/ID#: \_\_\_\_\_

Child's Gender: [ ] M [ ] F Child's Age: \_\_\_\_\_ Years \_\_\_\_\_ Months

Race/Ethnicity:

- [ ] American Indian/Alaska Native [ ] Asian [ ] Black/African American
[ ] Hispanic/Latino [ ] Native Hawaiian/Pacific Islander [ ] White [ ] Other

Comments on child's behavior/functioning: \_\_\_\_\_

PLEASE PRESS HARD WHEN CIRCLING YOUR RESPONSES.

Never Occasionally Frequently Always

SOCIAL PARTICIPATION This child...

- N.....O.....F.....A..... 1. Plays with friends cooperatively.
N.....O.....F.....A..... 2. Shares things when asked.
N.....O.....F.....A..... 3. Joins in play with others without disrupting the ongoing activity.

