ID#	_
Date:	



Version 4.0 – UK English

PARENT REPORT for TODDLERS (ages 2-4)

DIRECTIONS

On the following page is a list of things that might be a problem for **your child**. Please tell us **how much of a problem** each one has been for **your child** during the **PAST MONTH** by circling:

0 if it is never a problem

1 if it is almost never a problem

2 if it is sometimes a problem

3 if it is often a problem

4 if it is almost always a problem

There are no right or wrong answers.

If you do not understand a question, please ask for help.

In the **PAST MONTH**, how much of a **problem** has your child had with ...

PHYSICAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
1. Walking	0	1	2	3	4
2. Running	0	1	2	3	4
3. Participating in active play and exercise	0	1	2	3	4
4. Lifting heavy things	0	1	2	3	4
5. Bathing	0	1	2	3	4
6. Helping to pick up his or her toys	0	1	2	3	4
7. Having aches or pains	0	1	2	3	4
8. Feeling tired	0	1	2	3	4

EMOTIONAL FUNCTIONING (problems with)		Almost Never	Some- times	Often	Almost Always
Feeling afraid or scared	0	1	2	3	4
2. Feeling sad	0	1	2	3	4
3. Feeling angry	0	1	2	3	4
4. Having trouble sleeping	0	1	2	3	4
5. Worrying	0	1	2	3	4

SOCIAL FUNCTIONING (problems with)	Never	Almost Never	Some- times	Often	Almost Always
Playing with other children	0	1	2	3	4
2. Other children not wanting to play with him or her	0	1	2	3	4
3. Getting teased by other children	0	1	2	3	4
4. Not able to do things that other children his or her age can do	0	1	2	3	4
5. Keeping up when playing with other children	0	1	2	3	4

*Please complete this section if your child attends nursery or day care

Nursery/day care Functioning (problems with)		Almost Never	Some- times	Often	Almost Always
1. Doing the same nursery/day care activities as peers	0	1	2	3	4
Missing nursery/day care because of not feeling well	0	1	2	3	4
Missing nursery/day care to go to the doctor or hospital	0	1	2	3	4