

Name Date Teac	her		
Think about your feelings and actions for each sentence below. Check the box you feel best describes you.			
1. I like myself.	Always	Sometimes	Never
2. Kids my own age like me.			
3. I like the way I look.			
4. I get along with everyone.			
5. I like to meet new people.			
6. I am nice to people who are not popular.			
7. I am popular.			
8. People think I am cool.			
9. I care about the way I look.			
10. I am responsible.			
11. I can keep a secret.			
12. I am honest.			
13. I am fun to be with.			
14. I have good self control.			
15. I am curious what others think of me.			
16. I can make up my mind without too much trouble.			
17. My friends try to get me to do things I know are wrong.			
18. I feel no one understands me.			
19. I like to be alone.			
20. I need help getting along with kids my own age.			
21. I wish I were someone else.			
22. My feelings get hurt easily.			
23. It is pretty tough to be me.			
24. I like my teacher.			
25. I feel like my teacher likes me.			
26. I like coming to school.			
27. I do well in school.			
28. I get upset easily at school.			
29. I have a hard time paying attention at school.			
30. I get in trouble at school.			
31. I need help with the way I study.			
32. I have trouble with reading.			
33. I have trouble with math.			
34. I do my homework.			
35. I live with a step-parent and have problems with him/her.			1
36. My parents are divorced and I have trouble accepting that.			
37. There are many times I would like to leave home.			
38. There are problems at home I would like to talk about.			
39. I get upset easily at home.			
40. My parents and I get along.			