Narrative Description of Child (IRS)

For these ratings, please mark the points that you believe reflect the impact of your son or daughter's problems at this time and <u>whether he or she needs treatment or special services</u> for the problems, if any, at this time.

1. How your son or daughter's problems affect his or her relationship with other people his or her age

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services

2. How your son or daughter's problems affect his or her relationship with affect his or her relationship with brothers or sisters (__ check if no brothers or sisters)

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services

3. How your son or daughter's problems affect his or her relationship with you (and your parenting partner if present)

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services

4. How your son or daughter's problems affect his or her academic progress at school (__ check if no longer in school)

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services

5a. How your son or daughter's problems affect his or her ability to get and maintain employment

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services

5. How your son or daughter's problems affect his or her performance at work (__ check if not employed)

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services

6. How your son or daughter's problems affect his or her self-esteem

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services

7. How your son or daughter's problems affect your family in general

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services

8a. How your son or daughter's problems affect his or her ability to start and maintain romantic relationships

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services

8. How your son or daughter's problems affect his or her relationship with his or her spouse or significant other (__ check if not applicable)

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services

9. How your son or daughter's problems affect his or her relationship with his or her children (__ check if not applicable)

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services

10. The overall severity of your son or daughter's problem in functioning and overall need for treatment.

No Problem Definitely does not need treatment or special services	0	1	2	3	4	5	6	Extreme Problem Definitely needs treatment or special services