

Multi-Health Systems Inc.

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Child's Name/ID: _____ Gender: M F (Circle One) Birth Date: _____ / _____ / _____
 Parent's Name/ID: _____ Age: _____ Years _____ Months Grade: _____ Today's Date: _____ / _____ / _____
 Month Day Year Month Day Year

CONNERS 3™ – Parent Short

C. Keith Conners, Ph.D.

Instructions: Here are some things parents might say about their children. Please tell us about *your* child and what he/she has been like in the **past month**. Read each item carefully, then mark how well it describes your child or how frequently it has happened in the **past month**.

- 0 = In the past month, this was **not true at all** about my child. It never (or seldom) happened.
- 1 = In the past month, this was **just a little true** about my child. It happened occasionally.
- 2 = In the past month, this was **pretty much true** about my child. It happened often (or quite a bit).
- 3 = In the past month, this was **very much true** about my child. It happened very often (very frequently).

Please circle only one answer for each item. It is important to respond to every item. For items that you find difficult to answer, please give your best guess.

Rating:	0 = Not true at all (Never, Seldom)	2 = Pretty much true (Often, Quite a bit)
<i>In the past month, this was...</i>	1 = Just a little true (Occasionally)	3 = Very much true (Very often, Very frequently)

1. Forgets to turn in completed work.	0	1	2	3
2. Is perfect in every way.	0	1	2	3
3. Fidgets or squirms in seat.	0	1	2	3
4. Is one of the last to be picked for teams or games.	0	1	2	3
5. Restless or overactive.	0	1	2	3
6. Does not know how to make friends.	0	1	2	3
7. Runs or climbs when he/she is not supposed to.	0	1	2	3
8. Cannot grasp arithmetic.	0	1	2	3
9. Is difficult to please or amuse.	0	1	2	3
10. Needs extra explanation of instructions.	0	1	2	3
11. Is hard to motivate (even with rewards like candy or money).	0	1	2	3
12. Makes mistakes.	0	1	2	3
13. Acts as if driven by a motor.	0	1	2	3
14. Starts fights with others on purpose.	0	1	2	3
15. Has trouble getting started on tasks or projects.	0	1	2	3
16. Is happy, cheerful, and has a positive attitude.	0	1	2	3
17. Doesn't pay attention to details; makes careless mistakes.	0	1	2	3
18. Has trouble keeping friends.	0	1	2	3
19. Bullies, threatens, or scares others.	0	1	2	3
20. Loses things (for example, schoolwork, pencils, books, tools, or toys).	0	1	2	3
21. Tells lies to hurt other people.	0	1	2	3
22. I cannot figure out what makes him/her happy.	0	1	2	3
23. Threatens to hurt others.	0	1	2	3
24. Is constantly moving.	0	1	2	3
25. Has trouble with reading.	0	1	2	3
26. Is angry and resentful.	0	1	2	3
27. Has a short attention span.	0	1	2	3
28. Excitable, impulsive.	0	1	2	3
29. Cannot do things right.	0	1	2	3
30. Has trouble concentrating.	0	1	2	3
31. Tells the truth; doesn't even tell "little white lies."	0	1	2	3
32. Has trouble organizing tasks or activities.	0	1	2	3
33. Is fun to be around.	0	1	2	3
34. Inattentive, easily distracted.	0	1	2	3
35. Is messy or disorganized.	0	1	2	3
36. Spelling is poor.	0	1	2	3
37. Is patient and content, even when waiting in a long line.	0	1	2	3
38. Has no friends.	0	1	2	3
39. Does not understand what he/she reads.	0	1	2	3
40. Behaves like an angel.	0	1	2	3
41. Has trouble keeping his/her mind on work or on play for long.	0	1	2	3
42. Has to struggle to complete hard tasks.	0	1	2	3
43. Does not get invited to play or go out with others.	0	1	2	3

Additional Questions:

- 44. Do you have any other concerns about your child? _____
- 45. What strengths or skills does your child have? _____