Youth Outcome Questionnaire		ID:	Da	ate:	_//_		
Y-OQ®-30.2 English Youth Om	ni-Form		Never or Almost Never	Rarely	Sometimes		Almost Always or Always
PURPOSE: The Y-OQ® 30.2 is	1 71 1			•		_	_
designed to describe a wide range of troublesome situations, behaviors,	1. I have hea	daches or feel dizzy.	0	0	0	0	0
and moods that are common to adolescents. You may discover that	2. I don't par	ticipate in activities that used to be fun		0	Ο	Ο	0
some of the items do not apply to your current situation. If so, <u>please</u>	3. I argue or	speak rudely to others.	0	0	0	0	0
do not leave these items blank but mark the "Never or almost never" category. When you begin to	4. I have a ha	ard time finishing my assignments or I do them	0	0	Ο	0	0
complete the Y-OQ® 30.2 you will see that you can easily make yourself look as healthy or unhealthy as you	•	ons are strong and change quickly.	0	0	0	0	0
wish. <u>Please do not do that</u> . If you are as accurate as possible it is more		rsical fights (hitting, kicking, biting, or scratching)	O	0	Ο	0	Ο
likely that you will be able to receive the help that you are seeking.	•	d can't get thoughts out of my mind.	0	0	0	0	Ο
 Read each statement carefully. Decide how true this statement is during the past 7 days. 	8. I steal or l	ie	O	0	Ο	Ο	Ο
	9. I have a ha	ard time sitting still (or I have too much energy).	0	0	0	0	0
Completely fill the circle that most accurately describes the past week.	10. I use alcol	nol or drugs	. О	0	0	0	0
Fill in only one answer for each statement and erase unwanted	11. I am tense	and easily startled (jumpy).	0	0	0	0	0
marks clearly.	12. I am sad o	r unhappy	. 0	0	0	0	0
PARENTS OR GUARDIANS:							0
If your child is under 12, the parent or other responsible adult is asked to	I have a hadults.	ard time trusting friends, family members, or other	0	0	0	0	0
complete this questionnaire. In this case, respond to the statements as if each began with "My child" or	14. I think tha	t others are trying to hurt me even when they are not	O	0	0	0	0
	15. I have thre	eatened to, or have run away from home.	0	0	0	0	Ο
anaryar as againstaly as nossible	16. I physical	y fight with adults	. О	0	Ο	Ο	Ο
_	17. My stoma	ch hurts or I feel sick more than others my same age.	0	0	Ο	0	0
0 • 0	18. I don't hav	ve friends or I don't keep friends very long	. 0	0	0	0	0
Not like this:	10. I think abo	out quiside or feel I would be better off deed	0	0	0	0	0
A		out suicide or feel I would be better off dead.	_				_
Developed by: GARY M. BURLINGAME, PH.D., M.	20. I have nig waking up	htmares, trouble getting to sleep, oversleeping, or	O	0	0	0	0
		about or question rules, expectations, or	0	0	Ο	0	Ο
	22. I break rul	es, laws, or don't meet others' expectations on purpose	. О	0	0	0	0
Professional Credentialing Services	23. I feel irrita	ated.	0	0	0	0	0
For More Information Contact:	24. I get angry	v enough to threaten others	. 0	0	0	0	0
OQ Measures, LLC P.O. Box 521047		rouble when I'm bored.	0	0	0	0	0
Toll-Free USA: 1-888-MH-SCORE (1-888-647-2673)	26. I destroy p	property on purpose	O	0	0	0	0
Phone: (801) 990-4235				0	0	0	0
Email: INFO@OQMEASURES.COM Website:	tasks.	ard time concentrating, thinking clearly, or sticking to	0	0	0	0	0
HTTP://WWW.OQMEASURES.COM	∠6. I Withdrav	from my family and friends	. O	0	J	0	O
1/05/2007	29. I act without	out thinking and don't worry about what will happen.	0	0	0	0	0
0cm 1 2 3	30. I feel like	I don't have any friends or that no one likes me	0	0	0	0	Ο