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DATE _____

ATTENTION PROFILE

Child's Name: _____ Class Subject: _____
Filled Out By: _____ Time Of Day: _____

Directions: Please check the item that describes the student within the past few weeks, as compared to typical age- related student behavior in the general classroom setting. Please check all items.

	RARELY TRUE	SOMETIMES TRUE	VERY OR OFTEN TRUE
1. Trouble completing assignments			
2. Too active, often out of seat, "driven by a motor"			
3. Fidgets with hands, squirms in seat			
4. Daydreams excessively			
5. Impulsive, acts without thinking			
6. Difficulty listening or following directions			
7. Argumentative or stubborn			
8. Messy work, poor handwriting			
9. Inattentive, easily distracted			
10. Talks excessively			
11. Avoids or refuses to do work			
12. Blurts out answers, has trouble waiting turn			
13. Acts silly "class clown," disrupts class			
14. Easily frustrated or annoyed			
15. Annoys or alienates peers			
16. Forgetful, loses things			
17. Rushes through, careless mistakes			
18. Disorganized			
19. Requires excessive prompting and redirection to start or complete work			

Please write any comments relating to the student's recent behavior and social interaction.
