Parent Observation Form Symptom List

Spotting any of these behaviors may be a serious concern. However, understanding adolescent behavior can be confusing. Before coming to any conclusions, consult your school counselor, a drug/alcohol counselor, or another knowledgeable professional.

Student Name	Grade
Parent Name	
Please rate the following behaviors	s on a scale of 0–5:
(0=Not present; 1=Present	but least prominent; 5=most pervasive)
-	nis could be a slow decrease in the past six months to a year or ease in absence or tardiness in school. Dropping courses. halls.
object to? Not meeting a school, quit jobs frequen	re you seeing a different set of friends? More friends that you any friends? Older friends? Friends who have dropped out of ntly, have no job? Hostile or negative peers as a pattern? benly about drugs and alcohol?
<u> </u>	Lows (ugly mood swings, unreasonable resentments)—Easily hanges rapidly, doesn't seem as happy as she/he used to be.
	Regulations —Pushing limits around the home and at school; missing curfew; selective skipping, truancy.
5. Becoming More Secret stance.	tive—Personal problems, strange phone calls, incommunicado
school absence a pattern hygiene, long sleeves in	is energy, sleeping more than usual; always late for curfew; in; not where they are supposed to be; change in appearance; in hot weather; becoming more sloppy; wearing some clothes dominantly dark, black clothing; inattentiveness; lethargy in
7. Many Excuses and Alil coming home at all, com	bis for Missing Curfew—Not coming home on time, not stant excuses.
8. Isolating Her/Himself	-Withdrawn, chronically unhappy, moping, irritability,

9	Selling Possessions—Clothing, records, gifts, jewelry; seems to have money but no
	job. Suspicious exchanges of money, gambling or debt repayment in school.
10	O. Parents Feeling Manipulated/Bargained With—Playing one parent/family member
	against another.
1	1. Weight Changes—Drastic loss or gain; eating disorder behavior.
1	2. Short-Tempered —Becomes angry often, short fuse, takes aggressions out on others, fights in school/home, poor impulse control, cursing, threatening.
1	3. Legal Problems —Driving while intoxicated, being at parties that get broken up by police, being brought home by police for stealing or vandalism, trespassing, etc.
1	4. Wearing Pro-drug Clothing—Hats, T-shirts, jewelry.
1:	5. Calls to Home from School —Regarding poor attendance, poor performance, poor attitude.
1	6. Coming Home Drunk or High —Smelling of pot or alcohol, seems unusually giddy, slurred speech, red and glassy eyes, avoids contact with you, goes directly to room.
1	7. Finding Paraphernalia —Papers, pipes, clips, drugs, bottles, pills, <i>High Times</i> magazine or doodlings that are drug or alcohol specific.
1	8. Abusive Behavior —Verbally or physically abusive to family members, history of physical, verbal abuse in the home.
1	9. Running Away From Home
20	O. Boys Dating Girls That Are Much Younger —A 19-year-old "going out" with a 15-year-old, or a 22-year-old dating a 16-year-old, etc.
2	1. Preoccupation —With heavy metal music, rap music, or reggae music.
2	2. Involvement With The Occult—Black bible, black candles, satanic doodlings, upside
	down crosses, pentagrams, goat heads, witches spells, etc.
2	3. Frequent Vague Physical Complaints—Looking unwell, unhealthy.
2	4. A Family Predisposition For Alcoholism/Chemical Dependency
2	5. Talks Openly About Drugs—In a bragging way about drug-using prowess.
	TOTAL SCORE

Interpretation of Total Score

- **0-7** Low risk; continued monitoring recommended, no formal action required at this time.
- **8-13** Your son or daughter is in a "need to rule it out category." Please consult your pediatrician and school drug counselor, school counselor, or assistant principal today.
- **14-20** Your son or daughter has begun to show some traditional red flags for a high-risk student. Close scrutiny of peer interactions and evening and unsupervised activities is warranted.
- 21+ Indicates a high proclivity for drug involvement and a need for counseling and/or formal drug and alcohol intervention. Run, do not walk, to your School Drug and Alcohol Counselor's office to request a formal drug and alcohol evaluation. In addition, ask your pediatrician to perform a supervised urine screen and/or hair follicle test to check for mood-altering agents.