INSTRUCTIONS
- Please answer the following questions as they apply to you.
- Check all the choices that apply. Most of the questions have more than one answer.

Print Name: _________________________________ Date: __________________

1. Who primarily raised you?
   - □ Mother and Father
   - □ Father
   - □ Mother
   - □ Mother and Stepparent
   - □ Father and Stepparent
   - □ Stepmother
   - □ Stepfather
   - □ Maternal Grandparent(s)
   - □ Paternal Grandparent(s)
   - □ Older Sibling(s)
   - □ Adoptive Parent(s)
   - □ Foster Parent(s)
   - □ Institutional Caretaker(s)
   - □ Mother and Mother
   - □ Father and Father
   - □ Mother and Stepparent
   - □ Aunt(s) and/or Uncle(s)
   - □ Adoptive Parent(s)
   - □ Foster Parent(s)
   - □ Institutional Caretaker(s)

2. Were you separated from either or both of your parents during your childhood for any of the following reasons?
   - □ No separations
   - □ Abandoned by parent(s)
   - □ Removed from your home by police or social services
   - □ Parents separated
   - □ Parent(s) long-term hospitalization
   - □ Other:
   - □ Parents divorced
   - □ Parent(s) in military
   - □ Other:
   - □ Parents in prison
   - □ Death of parent(s)
   - □ Parent(s) in military
   - □ Other:

3. How old were you when you first moved away from your parent(s) or primary caretaker(s) home?
   - □ ____ years of age
   - □ I currently live with my parent(s) or primary caretaker(s)

4. What were the circumstances that led you to leave home? Were there circumstances that led you to return?

5. Check the boxes that best characterize your childhood relationship with your mother or primary caregiver:
   - □ No relationship
   - □ Friendly
   - □ Affectionate
   - □ Took care of mother
   - □ Abusive
   - □ Warm
   - □ Anxious
   - □ Afraid of mother
   - □ Idolized
   - □ Gentle
   - □ Consistent
   - □ Unpredictable
   - □ Neglectful
   - □ Smothering
   - □ Distant/Uninvolved
   - □ Full of conflict
   - □ Caring
   - □ Demonstrative
   - □ Superficial
   - □ Relaxed
   - □ Supportive
   - □ Over protective
   - □ Strained
   - □ Loving
   - □ Fun
   - □ Respectful
   - □ Close
   - □ Other:
Check the boxes that best characterize your childhood relationship with your father or primary caregiver:

- No relationship
- Abusive
- Idolized
- Neglectful
- Caring
- Supportive
- Fun
- Friendly
- Warm
- Gentle
- Smothering
- Demonstrative
- Over protective
- Respectful
- Affectionate
- Anxious
- Consistent
- Distant/Uninvolved
- Superficial
- Strained
- Close
- Took care of father
- Afraid of father
- Unpredictable
- Full of conflict
- Relaxed
- Loving
- Other:

If you were not primarily raised by your mother and/or father, which of the following best describes your relationship with your primary caretaker(s)?

- Not applicable
- Abusive
- Idolized
- Neglectful
- Caring
- Supportive
- Fun
- Friendly
- Warm
- Gentle
- Smothering
- Demonstrative
- Over protective
- Respectful
- Affectionate
- Anxious
- Consistent
- Distant/Uninvolved
- Superficial
- Strained
- Close
- Took care of primary caretaker
- Afraid of primary caretaker
- Unpredictable
- Full of conflict
- Relaxed
- Loving
- Other:

Check the boxes that best describe what your childhood experience was like:

- Painful
- Happy
- Fun
- Wonderful
- Exciting
- Unhappy
- Carefree
- Stable
- Confusing
- Frightening
- Chaotic
- Lonely
- Secure
- Sickly
- Traumatic
- Spoiled
- Enjoyable
- Sad
- Stimulating
- Difficult to remember
- Other:

Check the boxes that best describe your parents'/primary caretakers' relationship with each other when you were a child:

- No relationship
- Divorced
- Separated
- Close
- Happy
- Fun and playful
- Distrustful and suspicious
- Cold
- Loving
- Violent
- Fulfilling
- Full of conflict
- Domineering/Submissive
- Tense
- Committed
- Hostile
- On again/Off again
- Supportive
- Relaxed
- Affected by alcohol/drug abuse
- Other:

How would you rate your parents'/primary caretakers' ability to manage their lives?

<table>
<thead>
<tr>
<th>Mother or Primary Caretaker</th>
<th>Father or Primary Caretaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very good</td>
<td>Very good</td>
</tr>
<tr>
<td>Good</td>
<td>Good</td>
</tr>
<tr>
<td>Fair</td>
<td>Fair</td>
</tr>
<tr>
<td>Poor</td>
<td>Poor</td>
</tr>
<tr>
<td>Unknown</td>
<td>Unknown</td>
</tr>
</tbody>
</table>
### SAFE Questionnaire I: Single Applicant

**Consortium for Children, © 2015 all rights reserved — Structured Analysis Family Evaluation Questionnaire I Single Applicant**

#### 11. Check the boxes that best describe the personal characteristics of your mother or primary caretaker when you were a child:

- [ ] Not applicable
- [ ] Loving
- [ ] Perfectionist
- [ ] Domineering
- [ ] Isolated
- [ ] Happy
- [ ] Optimistic
- [ ] Calm
- [ ] Violent
- [ ] Substance Abuser
- [ ] Preoccupied
- [ ] Self-confident
- [ ] Active
- [ ] Outgoing
- [ ] Generous
- [ ] Aggressive
- [ ] Shy
- [ ] Irresponsible
- [ ] Pessimistic/Worrier
- [ ] Temperamental
- [ ] Understanding
- [ ] Nervous/Anxious
- [ ] Fun/Playful
- [ ] Rigid
- [ ] Moody
- [ ] Overly critical
- [ ] Hardworking
- [ ] Flexible
- [ ] Content
- [ ] Serious
- [ ] Compassionate
- [ ] Friendly/Social
- [ ] Warm
- [ ] Supportive
- [ ] Dramatic
- [ ] Irritable
- [ ] Easy going
- [ ] Kind
- [ ] Self centered
- [ ] Unforgiving
- [ ] Stubborn
- [ ] Irrational
- [ ] Manipulative/Controlling
- [ ] Passive
- [ ] Prejudiced
- [ ] Emotional
- [ ] Reassuring
- [ ] Other:

#### 12. Check the boxes that best describe the personal characteristics of your father or other primary caretaker when you were a child:

- [ ] Not applicable
- [ ] Loving
- [ ] Perfectionist
- [ ] Domineering
- [ ] Isolated
- [ ] Happy
- [ ] Optimistic
- [ ] Calm
- [ ] Violent
- [ ] Substance abuser
- [ ] Preoccupied
- [ ] Self-confident
- [ ] Active
- [ ] Outgoing
- [ ] Generous
- [ ] Aggressive
- [ ] Shy
- [ ] Irresponsible
- [ ] Pessimistic/Worrier
- [ ] Temperamental
- [ ] Understanding
- [ ] Nervous/Anxious
- [ ] Fun/Playful
- [ ] Rigid
- [ ] Moody
- [ ] Overly critical
- [ ] Hardworking
- [ ] Flexible
- [ ] Content
- [ ] Serious
- [ ] Compassionate
- [ ] Friendly/Social
- [ ] Warm
- [ ] Supportive
- [ ] Dramatic
- [ ] Irritable
- [ ] Easy going
- [ ] Kind
- [ ] Self centered
- [ ] Unforgiving
- [ ] Stubborn
- [ ] Irrational
- [ ] Manipulative/Controlling
- [ ] Passive
- [ ] Prejudiced
- [ ] Emotional
- [ ] Reassuring
- [ ] Other:

#### 13. Who primarily disciplined you during your childhood?

- [ ] Both parents equally
- [ ] Mother
- [ ] Father
- [ ] Stepmother
- [ ] Stepfather
- [ ] Older sibling(s)
- [ ] Other:
- [ ] Maternal grandparent(s)
- [ ] Paternal grandparent(s)
- [ ] Aunt and/or uncle
- [ ] Foster parent(s)
- [ ] Legal guardian(s)
- [ ] Primary caretaker(s)
Check the boxes that best describe the way your parent(s)/primary caretaker(s) disciplined you during your childhood:

<table>
<thead>
<tr>
<th>Mother or Primary Caretaker</th>
<th>Father or Primary Caretaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Not applicable</td>
<td>□ Not applicable</td>
</tr>
<tr>
<td>□ Consistently</td>
<td>□ Consistently</td>
</tr>
<tr>
<td>□ Fairly</td>
<td>□ Fairly</td>
</tr>
<tr>
<td>□ Strictly</td>
<td>□ Strictly</td>
</tr>
<tr>
<td>□ Leniently</td>
<td>□ Leniently</td>
</tr>
<tr>
<td>□ Made idle threats</td>
<td>□ Made idle threats</td>
</tr>
<tr>
<td>□ Lectured</td>
<td>□ Lectured</td>
</tr>
<tr>
<td>□ Used time outs</td>
<td>□ Used time outs</td>
</tr>
<tr>
<td>□ Reasoned with me</td>
<td>□ Reasoned with me</td>
</tr>
<tr>
<td>□ Spanked</td>
<td>□ Spanked</td>
</tr>
<tr>
<td>□ Family Meetings</td>
<td>□ Family Meetings</td>
</tr>
<tr>
<td>□ Other:</td>
<td>□ Other:</td>
</tr>
</tbody>
</table>

*Note:* (other than spanking)

Check the boxes that represent the personal values held by your parent(s)/primary caretaker(s):

<table>
<thead>
<tr>
<th>Mother or Primary Caretaker</th>
<th>Father or Primary Caretaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Not applicable</td>
<td>□ Not applicable</td>
</tr>
<tr>
<td>□ Religious beliefs</td>
<td>□ Religious beliefs</td>
</tr>
<tr>
<td>□ Compassion</td>
<td>□ Compassion</td>
</tr>
<tr>
<td>□ Social conscience</td>
<td>□ Social conscience</td>
</tr>
<tr>
<td>□ Strong work ethic</td>
<td>□ Strong work ethic</td>
</tr>
<tr>
<td>□ Being responsible</td>
<td>□ Being responsible</td>
</tr>
<tr>
<td>□ Freedom of expression</td>
<td>□ Freedom of expression</td>
</tr>
<tr>
<td>□ Leading a balanced life</td>
<td>□ Leading a balanced life</td>
</tr>
<tr>
<td>□ Being a parent</td>
<td>□ Being a parent</td>
</tr>
<tr>
<td>□ Patriotism</td>
<td>□ Patriotism</td>
</tr>
<tr>
<td>□ Spiritual/Cultural Practice</td>
<td>□ Spiritual/Cultural Practice</td>
</tr>
<tr>
<td>□ Honesty</td>
<td>□ Honesty</td>
</tr>
<tr>
<td>□ Family closeness</td>
<td>□ Family closeness</td>
</tr>
<tr>
<td>□ Family support</td>
<td>□ Family support</td>
</tr>
<tr>
<td>□ Social status</td>
<td>□ Social status</td>
</tr>
<tr>
<td>□ Education</td>
<td>□ Education</td>
</tr>
<tr>
<td>□ Self respect</td>
<td>□ Self respect</td>
</tr>
<tr>
<td>□ Independence</td>
<td>□ Independence</td>
</tr>
<tr>
<td>□ Making money</td>
<td>□ Making money</td>
</tr>
<tr>
<td>□ Fidelity</td>
<td>□ Fidelity</td>
</tr>
<tr>
<td>□ Healthy life style</td>
<td>□ Healthy life style</td>
</tr>
<tr>
<td>□ Other:</td>
<td>□ Other:</td>
</tr>
</tbody>
</table>

How do your own personal values compare to those of your parent(s)/primary caretaker(s)?

□ Basically share the same values
□ Share most of their values
□ Share some of their values
□ Do not share any of their values
□ Don’t know
Check the boxes that best describe your parents' / primary caretakers' attitudes about sexuality when you were a child:

<table>
<thead>
<tr>
<th>Mother or Primary Caretaker</th>
<th>Father or Primary Caretaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>Open about sexuality</td>
<td>Open about sexuality</td>
</tr>
<tr>
<td>Comfortable discussing</td>
<td>Comfortable discussing</td>
</tr>
<tr>
<td>Old fashioned</td>
<td>Old fashioned</td>
</tr>
<tr>
<td>Never discussed sex</td>
<td>Never discussed sex</td>
</tr>
<tr>
<td>No sex before marriage</td>
<td>No sex before marriage</td>
</tr>
<tr>
<td>Condemned</td>
<td>Condemned</td>
</tr>
<tr>
<td>Homosexuality</td>
<td>Homosexuality</td>
</tr>
<tr>
<td>Knowledgeable</td>
<td>Knowledgeable</td>
</tr>
<tr>
<td>Awkward discussing</td>
<td>Awkward discussing</td>
</tr>
<tr>
<td>Believed sex was sinful</td>
<td>Believed sex was sinful</td>
</tr>
<tr>
<td>Liberal sexual attitudes</td>
<td>Liberal sexual attitudes</td>
</tr>
<tr>
<td>Conservative attitudes</td>
<td>Conservative attitudes</td>
</tr>
<tr>
<td>Sexually repressed</td>
<td>Sexually repressed</td>
</tr>
<tr>
<td>Sexually irresponsible</td>
<td>Sexually irresponsible</td>
</tr>
<tr>
<td>Supported</td>
<td>Supported</td>
</tr>
<tr>
<td>Sex education</td>
<td>Sex education</td>
</tr>
<tr>
<td>Other:</td>
<td>Other:</td>
</tr>
</tbody>
</table>

Check the boxes that best describe what you were like as a child (pre-teenage years):

- Happy
- Temperamental
- Stubborn
- Unhappy
- Aggressive
- Fearful
- Awkward
- Self-confident
- Friendly
- Calm
- Serious
- Hyperactive
- Responsible
- Sad
- Irresponsible
- Anxious/Nervous
- Active
- Funny
- Rebellious
- Disobedient
- Outgoing
- Sickly
- Insecure
- Obedient
- Shy
- Curious
- Compliant
- Quiet
- Thoughtful

Check the boxes that best describe what you were liked as a teenager:

- Happy
- Temperamental
- Stubborn
- Unhappy
- Aggressive
- Fearful
- Awkward
- Self-confident
- Friendly
- Calm
- Serious
- Hyperactive
- Responsible
- Sad
- Irresponsible
- Anxious/Nervous
- Active
- Funny
- Rebellious
- Disobedient
- Outgoing
- Sickly
- Insecure
- Obedient
- Shy
- Curious
- Compliant
- Quiet
- Thoughtful

When you were a child, with whom would you confide?

- Mother
- Father
- Sibling(s)
- Grandparent(s)
- Aunt(s)/Uncle(s)
- Stepparent
- Primary Caretaker(s)
- Cousin(s)
- Counselor(s)/Teacher(s)
- Psychiatrist(s)/Psychologist(s)/Social Worker(s)
- Clergy
- Friends
- No One
- Others:

When you were a child or adolescent, did you require counseling or psychiatric care?

- No
- Yes

Are there issues, traumatic incidents or accidents from your childhood that currently cause you distress?

- No
- Yes
How often do you argue with others?

- Never
- Rarely
- Once or twice a week
- Once or twice a year
- Once or twice a month
- Almost daily
- Once a day
- Several times a day

Check the boxes that best describe your early dating experiences:

- Didn't date
- Fun
- Unremarkable
- Chaperoned
- Traumatic
- Too much too soon
- Dull
- In groups
- Extensive
- Unusual
- Pressured
- Friendly
- Frightening
- Exciting
- Limited
- Other:

Check the boxes that best describe your early sexual experiences:

- Limited
- Traumatic
- Awkward
- Exciting
- Unremarkable
- Unusual
- Romantic
- Regretful
- Frightening
- Confusing
- Romantic
- Shameful
- Amusing
- Other:

If you were previously in a domestic partnership(s), how did your partnership(s) end?

- Not applicable
- Terminated partnership without legal agreement(s)
- Terminated partnership with legal agreement(s)

If you went through a divorce or terminated a domestic partnership, check the boxes that best describe what the experience was like for you:

- Not applicable
- Easy
- Expensive
- Frightening
- Painful
- Unfair
- Bitter
- Amiciable
- Crazy
- Frustrating
- Fair
- Devastating
- A relief
- Long and drawn out
- Depressing
- Other:

Have you ever been in a custody dispute?

- No
- Yes

Are you currently in a relationship?

- No
- Yes

If yes, please characterize the nature of the relationship(s):

- Long term
- New
- Intimate
- Casual
- Multiple Relationships
### 31. Check the boxes that best describe the major areas of conflict between you and others:

<table>
<thead>
<tr>
<th>Conflict Area</th>
<th>Not applicable</th>
<th>Personal habits</th>
<th>Sexual relations</th>
<th>Personal expectations</th>
<th>Discipline of children</th>
<th>Household chores</th>
<th>Politics</th>
<th>Values</th>
<th>Separate activities</th>
<th>Time apart</th>
<th>Travel</th>
<th>Friends</th>
<th>Leisure time</th>
<th>Shared activities</th>
<th>Time together</th>
<th>Other:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### 32. Check the boxes that best describe the way you typically react when you have a major disagreement with others:

<table>
<thead>
<tr>
<th>Reaction</th>
<th>Not applicable</th>
<th>Agree to disagree</th>
<th>Sometimes yell and shout</th>
<th>Leave the house to cool off</th>
<th>Become silent</th>
<th>Try to outwit them</th>
<th>Things get physical (pushing, shoving, hitting)</th>
<th>Other:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 33. Check the boxes that best describe your current relationship with your mother and father/primary caregivers:

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Mother or Primary Caretaker</th>
<th>Father or Primary Caretaker</th>
<th>Other:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mother deceased</td>
<td>Father deceased</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No contact</td>
<td>No contact</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Strained</td>
<td>Strained</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Distant</td>
<td>Distant</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Caring</td>
<td>Caring</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Emotionally intense</td>
<td>Emotionally intense</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Flexible</td>
<td>Flexible</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hostile</td>
<td>Hostile</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Understanding</td>
<td>Understanding</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Argumentative</td>
<td>Argumentative</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Manipulative</td>
<td>Manipulative</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Positive</td>
<td>Positive</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Supportive</td>
<td>Supportive</td>
<td></td>
</tr>
<tr>
<td></td>
<td>I am caretaker for</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 34. How helpful and supportive do you feel members of your extended family are/will be to you as a parent?

<table>
<thead>
<tr>
<th>Level of Support</th>
<th>Not applicable</th>
<th>All family members are helpful and supportive</th>
<th>Most family members are helpful and supportive</th>
<th>About half are helpful and supportive</th>
<th>Few are helpful and supportive</th>
<th>No family members are helpful and supportive</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
In some families, different viewpoints concerning such things as life-style, personal values, religion, socio/economic status, sexual orientation, politics, etc., interfere with family relationships. To what degree is that the case in your family?

☐ Issues such as these do not interfere with relationships within my family
☐ Issues such as these seldom interfere with relationships within my family
☐ Occasionally issues such as these interfere with relationships within my family
☐ Frequently issues such as these interfere with relationships within my family

How comfortable are members of your extended family when it comes to being around and relating to children?

☐ Not applicable
☐ All family members are comfortable
☐ Most family members are comfortable
☐ About half are comfortable
☐ Few are comfortable
☐ No family members are comfortable

List your siblings according to how close or distant your relationship is with them:

☐ I don’t have any brothers or sisters
☐ I am very close to:
☐ I am somewhat close to:
☐ I am distant from:
☐ I am in conflict with:

How many members of your immediate and extended family are ready, willing and able to fully accept an unrelated child into the family?

☐ All family members are ready, willing and able to fully accept
☐ Most family members are ready, willing and able to fully accept
☐ About half are ready, willing and able to fully accept
☐ Few are ready, willing and able to fully accept
☐ No family member is ready, willing and able to fully accept

How many people in your life, outside of your family, are ready, willing and able to provide you support as a parent?

☐ There are numerous people who are ready, willing and able to be supportive
☐ There are several people who are ready, willing and able to be supportive
☐ There are a few select people who are ready, willing and able to be supportive
☐ There is one person who is ready, willing and able to be supportive
☐ There is nobody who is ready, willing and able to be supportive
40 How many people in your life cause you serious conflict and stress?
□ There are numerous people who cause me serious conflict and stress
□ There are several people who cause me serious conflict and stress
□ There are a few select people who cause me serious conflict and stress
□ There is one person who causes me serious conflict and stress
□ There is nobody who causes me serious conflict and stress

41 Check the boxes that best describe your community involvement:
□ Have no friends that I socialize with
□ Have a few friends that I socialize with
□ Have many friends that I socialize with
□ Regular involvement in social organizations
□ Occasional involvement in social organizations
□ Rarely get involved in social organizations
□ No involvement in social organizations
□ Other:
□ Active in politics
□ Regular attendance at religious services
□ Occasional attendance at religious services
□ Rarely/Never attend religious services
□ Active in community organizations
□ Occasional involvement in community organizations
□ Cultural events

42 If you are employed outside of the home, how many hours per week do you work?
□ Not applicable
□ Less than 20 hours
□ 20 - 30 hours
□ 31 - 40 hours
□ 41 - 50 hours
□ More than 50 hours

43 If you are employed outside of the home, how long have you worked at your current job?
□ Not applicable
□ ________ years and ________ months

44 Whether you work inside or outside the home, do you enjoy your work?
□ No
□ Most of the time
□ Some of the time
□ All of the time

45 Have you ever been fired?
□ No
□ Yes

46 Do you plan any career or job changes in the near future?
□ No
□ Yes
Have you or any of the family members listed below had any of the following conditions? Indicate which family member by using the following code, placing the appropriate number in front of the condition:

1 = SELF  2 = PARENT(S)  3 = SIBLING(S)  4 = CHILDREN

- Diabetes
- Cancer
- Asthma
- Ulcers
- Colitis
- Alcoholism
- Depression
- Schizophrenia
- Arthritis
- Frequent headaches
- Hearing loss
- Insomnia
- Tuberculosis
- Drug addiction
- Bipolar illness
- Eating disorder
- Seizures
- Kidney disease
- Impaired sight
- Sickle cell anemia
- Thyroid condition
- Developmental disability
- Attention deficit disorder
- Sexually transmitted disease
- High blood pressure
- High cholesterol
- Allergies
- Heart condition
- Intellectual disability
- Anxiety/Panic attacks
- Infertility/Sterility

Other condition(s) not listed:

Are you currently taking any medication(s)?

- No
- Yes

Have you ever been hospitalized or had surgery?

- No
- Yes

What is the overall condition of your health?

- Excellent
- Good
- Fair
- Poor

How do/will you discipline a child in your care?

- Spanking
- Lecturing
- Rational discussion
- Ignore the child's misbehavior
- Physical restraint, e.g., strap down in crib
- Make rules and consequences clear in advance
- Take away privileges
- Physical punishment other than spanking
- Use "time outs"
- Raise my voice
- Send child to their room
- Tell child they are grounded
- Tell child they should be ashamed
- Threaten punishment in the future
- Tell child how angry they make me
- Other:

I affirm that the information given in this questionnaire is correct to the best of my ability.

Signature: ___________________________  Date: ___________________________