

For office use only: Client ID: _____ Date: _____ Timepoint: _____

Parent/Caregiver Name: _____

Approximately how long has your child been receiving services at KUCSFC? _____

What is your relationship to the child? _____

Proactive and Reactive Aggression Questionnaire - Parent/Caregiver

	Never	Very Rarely	Sometimes	Often	Almost Always
1. When my child has been teased or threatened, they get angry easily and strike back.	1	2	3	4	5
2. My child always claims that other children are to blame in a fight and feels they started the trouble.	1	2	3	4	5
3. When someone accidentally hurts my child (such as bumping into them), they assume that the peer meant to do it and then react with anger/fighting.	1	2	3	4	5
4. My child gets other kids to gang up on somebody that they do not like.	1	2	3	4	5
5. My child uses physical force (or threatens to use physical force) in order to dominate other kids.	1	2	3	4	5
6. My child threatens or bullies others in order to get their own way.	1	2	3	4	5