**The Adult Developmental Coordination Disorder/ Dyspraxia Checklist (ADC) for Further and Higher Education**

**(Kirby and Rosenblum, 2008)**

**Please complete the following questionnaire giving as much information as you can.**

Please tick boxes as appropriate. It will take you about 10-15 minutes to complete this.

All information given is dealt with in the strictest confidence.

**NAME:**

**COURSE and YEAR of STUDY:**

Please click on the relevant box and a cross should appear

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section 1: As a child, did you:** | | |  |  |
|  | **Never** | **Sometimes** | **Frequently** | **Always** |
| **1.** Have difficulties with self-care tasks, such as tying shoelaces, fastening buttons and zips? |  |  |  |  |
| **2.** Have difficulty eating without getting dirty? |  |  |  |  |
| **3.** Have difficulty learning to ride a bike compared to your peers? |  |  |  |  |
| **4.** Have difficulties with playing team games, such as football, volleyball, catching or throwing balls accurately? |  |  |  |  |
| **5.** Have difficulty writing neatly (so others could read it)? |  |  |  |  |
| **6.** Have difficulty writing as fast as your peers? |  |  |  |  |
| **7.** Bump into objects or people, trip over things more than others? |  |  |  |  |
| **8.** Have difficulty playing a musical instrument (e.g. violin, recorder)? |  |  |  |  |
| **9.** Have difficulties with organising/finding things in your room? |  |  |  |  |
| **10.** Have others comment about your lack of coordination or call you clumsy? |  |  |  |  |
| **Total** |  |  |  |  |

Please click on the relevant box and a cross should appear

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section 2: Do you currently have difficulties with the following items:** | | | | |
|  | **Never** | **Sometimes** | **Frequently** | **Always** |
| **1.** Self-care tasks such as shaving or make up? |  |  |  |  |
| **2.** Eating with a knife and fork/spoon? |  |  |  |  |
| **3.** Hobbies that require good coordination? |  |  |  |  |
| **4.** Writing neatly when having to write fast? |  |  |  |  |
| **5.** Writing as fast as your peers? |  |  |  |  |
| **6.** Reading your own writing? |  |  |  |  |
| **7.** Copying things down without making mistakes? |  |  |  |  |
| **8.** Organising/finding things in your room? |  |  |  |  |
| **9.** Finding your way around new buildings or places? |  |  |  |  |
| **10.** Have others called you disorganised? |  |  |  |  |
| **11.** Do you have difficulties sitting still or appearing fidgety? |  |  |  |  |
| **12.** Do you lose or leave behind possessions? |  |  |  |  |
| **13.** Would you say that you bump into things, spill or break things? |  |  |  |  |
| **14.** Are you slower than others getting up on the morning and getting to work or college? |  |  |  |  |
| **15.** Did it take you longer than others to learn to drive? (if you do not drive, please indicate on the paper and describe why you chose not to drive) |  |  |  |  |
| **16.** Do others find it difficult to read your writing? |  |  |  |  |
| **17.** Do you avoid hobbies that require good coordination? |  |  |  |  |
| **18.** Do you choose to spend your leisure time more on your own than with others? |  |  |  |  |
| **19.** Do you avoid team games/sports? |  |  |  |  |
|  | **Never** | **Sometimes** | **Frequently** | **Always** |
| **20.** If you do a sport, is it more likely to be on your own, e.g. going to the gym, than with others? |  |  |  |  |
| **21.** Do you/did you in your teens/twenties avoid going to clubs/dancing? |  |  |  |  |
| **22.** If you are a driver, do you have difficulty parking a car? |  |  |  |  |
| **23.** Do you have difficulty preparing a meal from scratch? |  |  |  |  |
| **24.** Do you have difficulty packing a suitcase to go away? |  |  |  |  |
| **25.** Do you have difficulty folding clothes to put them away neatly? |  |  |  |  |
| **26.** Do you have difficulty managing money? |  |  |  |  |
| **27.** Do you have difficulties with performing two things at the same time (e.g. driving and listening or taking a telephone message)? |  |  |  |  |
| **28.** Do you have difficulties with distance estimation (e.g. with regard to parking, passing through objects)? |  |  |  |  |
| **29.** Do you have difficulty planning ahead? |  |  |  |  |
| **30.** Do you feel you are losing attention in certain situations? |  |  |  |  |

Can you describe any compensatory strategies or approaches that you have developed over the years in order to deal with coordination difficulties in your everyday life?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please attach a sample of your handwriting to your email, if you can..