Check all that apply:

\bigcirc	I FEEL SAD MUCH OF THE TIME	0	I HAVE TROUBLE CONCENTRATING
0	I FEEL EMPTY OR NUMB	0	I FEEL WORTHLESS
\bigcirc	I FEEL HOPELESS	0	I STRUGGLE TO MAKE DECISIONS
\bigcirc	I HAVE LOW MOTIVATION	0	I HAVE MEMORY PROBLEMS
\bigcirc	I FEEL GUILTY ABOUT LITTLE THINGS	0	I HAVE TROUBLE RELAXING
\bigcirc	I HAVE LOW SELF-CONFIDENCE	0	I HAVE MANY NEGATIVE THOUGHTS
\bigcirc	I HAVE A NEGATIVE ATTITUDE	0	I CRY FREQUENTLY
0	I HAVE UNEXPLAINED PAIN	0	I OFTEN PUT MYSELF DOWN
\bigcirc	I FEEL LESS JOY THAN I USED TO	0	I HAVE TROUBLE FALLING ASLEEP
\bigcirc	I USE SUBSTANCES TO FEEL BETTER	0	I SLEEP TOO MUCH
0	I ISOLATE FROM OTHERS	0	I OFTEN FEEL NERVOUS OR ANXIOUS
\bigcirc	I OFTEN EAT TO COMFORT MYSELF	0	I WORRY ALOT
\bigcirc	I HAVE SELF-HARM THOUGHTS	0	I FEEL SLUGGISH
\bigcirc	I GET IRRITATED EASILY	0	I HAVE GAINED A LOT OF WEIGHT
0	I FEEL TIRED MOST ALL THE TIME	0	I HAVE LOST A LOT OF WEIGHT
\bigcirc	I FEEL OVERWHELMED WITH GRIEF	\bigcirc	I FEEL TENSION IN MY BODY