NI	$\overline{}$	_
IVI	11	_

Name	eDate
	e read each question carefully, and then check the most correct answer in the box provided. Check ne box for each question.
1.	How many times have you been arrested on charges involving alcohol? (Do not count the present DWI arrest.) (Times)
2.	Is someone close to you concerned about your drinking? Yes () No ()
3.	With whom did you do most of your drinking before this arrest? Husband/Wife () Relative () Friends () Strangers () Alone ()
4.	Do you believe your drinking may be causing you problems? Yes () No () No, but it used to cause me problems () Not Sure ()
5.	Do you want help for a drinking problem? Yes () Not Sure ()
6.	Do you feel you are a normal drinker? Yes () No ()
7.	Have you ever awakened the morning after some drinking the night before and found you could no remember a part of the evening before?
	Yes () No ()
8.	Does your wife, husband, a parent, or other near relative ever worry or complain about your drinking?
	Yes () No ()
9.	Can you stop drinking without a struggle after one or two drinks? Yes () No ()
10.	Do you ever feel bad about your drinking? Yes() No ()
11.	Do your friends or relatives think you are a normal drinker? Yes() No ()

12.	Do you ever try to limit your drink Yes ()	ring to certain times of the day or to certain places? No ()
13.	Are you always able to stop drink Yes ()	king when you want to? No()
14.	Have you ever attended a meeting Yes()	ng of Alcoholics Anonymous? No ()
15.	Have you gotten into fights when Yes()	drinking? No ()
16.	relative?	ms between you and your wife, husband, parent, or other near
	Yes ()	No ()
17.	Has your wife, husband, a paren drinking? Yes ()	t, or other near relative ever gone to anyone for help about your No ()
18.	Have you ever lost friends becau	ise of drinking? No()
19.	Have you ever gotten into trouble	e at work because of drinking?
	Yes ()	No ()
20.	Have you ever lost a job because	e of drinking?
21.	Have you ever neglected your ol because you were drinking? Yes ()	oligations, your family, or your work for 2 or more days in a row
22.	Do you drink before noon fairly o	often? No ()
23.	Have you ever been told you have	re liver trouble? Cirrhosis?
24.		No () ver had Delirium Tremens (DT's) or severe shaking?
	Yes ()	No ()
25.	After heavy drinking, have you e Yes ()	ver heard voices or seen things that weren't really there? No ()
	- \ /	` '

26.	Have you ever gone to anyone for Yes ()	r help about your drinking? No ()
27.	Have you ever been in hospital be Yes ()	ecause of drinking? No()
28.	Have you ever been a patient in a Yes ()	psychiatric hospital or on a psychiatric ward of a general hospital?
29.	Have you ever been in a hospital Yes ()	to be "dried out" (detoxified) because of drinking? No ()
29. Hav	re you ever been in jail, even for a f Yes()	few hours, because of drunk behavior? (Count the present arrest) No ()