

## Reinforcement Inventory

Individual's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

The items in this questionnaire refer to things and experiences that may give a person joy, satisfaction, or pleasurable feelings. Check each item in the column that describes how much the client enjoys the things described.

	Not At All	A Little	A Fair Amount	Much	Very Much
<b>Food:</b>					
1. Candy What Kind?					
a.					
b.					
c.					
2. Ice Cream What Kind?					
a.					
b.					
c.					
3. Nuts					
4. Potato Chips					
5. Cake					
6. Cookies					
7. Beverages What Kind?					
a.					
b.					
8. Other Foods					
a.					
b.					
<b>Toys:</b>					
1. Racing Cars					
2. Electric Trains					
3. Bicycle					
4. Dolls					

	Not At All	A Little	A Fair Amount	Much	Very Much
5. Other Toys					
a.					
b.					
c.					
6. Games					
Legos					
Uno					
Cards					
Other Games					
a.					
b.					
ENTERTAINMENT					
1. Watching Television					
Favorite Programs					
a.					
b.					
2. Movies					
3. Listening to Music					
Favorite Programs?					
a.					
b.					
4. Plays with Toys					
5. Plays with Others					
6. Other Entertainment					
a.					
b.					
c.					

	Not At All	A Little	A Fair Amount	Much	Very Much
SPORTS AND GAMES:					
1. Playing football with others					
2. Playing football with parents					
3. Swimming					
4. Bike Riding					
5. Skating					
6. Skiing					
7. Horseback riding					
8. Tennis					
9. Hiking					
10. Chess					
11. Checkers					
12. Fishing					
13. Baseball					
14. Ping Pong					
15. Pool					
16. Other					
a.					
b.					
c.					

	Not At All	A Little	A Fair Amount	Much	Very Much
<b>LEARNING &amp; SCHOOL WORK:</b>					
1. Learning a new Language					
2. Taking Piano Lessons					
3. Reading					
4. Being Read to					
5. Looking at books					
6. Spelling					
7. Science					
8. Social Studies					
9. Physical Education					
10. Math					
11. Going to school					
12. Riding bus to school					
13. Doing homework					
14. Helping teacher					
15. Other					
a.					
b.					
c.					
d.					
<b>HELPING AROUND THE HOUSE</b>					
1. Setting the table					
2. Making the bed					
3. Baking					
4. Repairing or building					

	Not At All	A Little	A Fair Amount	Much	Very Much
5. Working in the yard					
6. Going on errands					
7. Other					
a.					
b.					
c.					
d.					
PERSONAL APPEARANCE:					
1. Getting new clothes					
2. Putting on makeup					
3. Dressing up in costume					
4. Dressing up in parents clothes					
5. Getting a haircut					
6. Going to beauty parlor					
7. Other					
a.					
b.					
OTHER EVENTS AND ACITIVIES:					
1. Staying up past bedtime					
2. Earning money					
3. Having free time					
4. Having a pet					
5. Having or going to a party					
6. Getting an allowance					
7. Taking a bath					
8. Sleeping with parents					
9. Other					
a.					
b.					
c.					

Reinforcement Inventory

A. How much time does client spend in the following activities? (hours, minutes, etc.)

- 1. Watching TV \_\_\_\_\_
- 2. Listening to music \_\_\_\_\_
- 3. Playing with others \_\_\_\_\_
- 4. Playing with toys \_\_\_\_\_

B. What is clients bedtime? \_\_\_\_\_

C. List below those events that the client does or requests more than:

5 times a day?

10 times a day?

---

---

---

---

---

---

---

---

---

---

15 times a day?

20 times a day?

---

---

---

---

---

---

---

---

---

---