



**Checklist for Upper PRTF-Children with Problematic Sexual Behaviors**

**Check any of the sexual behaviors listed below that the child displays:**

- Public or excessive masturbation
- Rubbing private parts against others and/or furniture
- Fondling of other children
- Fondling of adults
- Poor boundaries
- "Accidental" touching of others
- Exposing body or private parts
- Sexual threats
- Interest in pornography
- Sexual contact with animals
- Forced or inappropriate kissing
- "Peeping"/Voyeurism
- Sex and/or sexual acts with other children
- Attempting to initiate sex and/or sexual acts with adults
- Sexually explicit comments, conversation, or gestures
- Simulating intercourse—with other children, with dolls, etc.
- Other \_\_\_\_\_

**When sexual behavior first began or was first noticed:**

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**Date of most recent sexual behavior:** \_\_\_\_\_

**Frequency of sexual behavior(s):**  Daily  Weekly  Monthly

**Child's own history of abuse/neglect: please indicate the perpetrator (s)**

Physical abuse: \_\_\_\_\_

Sexual abuse: \_\_\_\_\_

Mental/Emotional abuse: \_\_\_\_\_

Neglect: \_\_\_\_\_

Exposure to domestic violence: \_\_\_\_\_

Exposure to pornography or adult sexual behavior in home: \_\_\_\_\_

**\*\*For anything reported on this worksheet, please attach any supporting documentation (reports, evaluations, etc.).**