Suggested Use: Please complete twice; once at the start of the program, once upon completion of the program.

Day-To-Day Experiences

Instructions: Below is a collection of statements about your everyday experience. Using the 1-6 scale below, please indicate how frequently or infrequently you currently have each experience. Please answer according to what *really reflects* your experience rather than what you think your experience should be. Please treat each item separately from every other item.

1	2	3	4	4 Somewhat Infrequently		5 Very			6 Almost	
Almost	Very	Somewhat								
Always	Frequently	Frequently	Intreque	entiy		Infrequently		Neve	<u>r</u>	
	xperiencing some f it until some tim			1	2	3	4	5	6	
I break or spill things because of carelessness, not paying attention, or thinking of something else				1	2	3	4	5	6	
I find it difficult to stay focused on what's happening in the present				1	2	3	4	5	6	
I tend to walk quickly to get where I'm going without paying attention to what I experience along the way				1	2	3	4	5	6	
	o notice feelings o until they really g	1 0		1	2	3	4	5	6	
	erson's name almost time			1	2	3	4	5	6	
	m "running on au of what I'm doing.			1	2	3	4	5	6	
	igh activities with			1	2	3	4	5	6	
_	ised on the goal I what I'm doing rig			1	2	3	4	5	6	
•	tasks automatica ing	-		1	2	3	4	5	6	
	If listening to som else at the same ti			1	2	3	4	5	6	
I drive place I went there	es on "automatic j	pilot" and then we		1	2	3	4	5	6	
I find mysel	lf preoccupied wit	h the future or th	e past	1	2	3	4	5	6	
I find mysel	lf doing things wit	thout paying atter	ntion	1	2	3	4	5	6	
I snack without being aware that I'm eating				1	2	3	4	5	6	