Clutter Image Rating

Client initials _____ Date _____

Therapist _____

Using the 3 series of pictures (CIR: Living Room, CIR: Kitchen, and CIR: Bedroom), please select the picture that best represents the amount of clutter for each of the rooms of your home. Put the number on the line below.

Please pick the picture that is closest to being accurate, even if it is not exactly right.

If your home does not have one of the rooms listed, just put NA for "not applicable" on that line.

Room   Number of closest corresponding picture (1–9)

Living Room _____

Kitchen _____

Bedroom #1 _____

Bedroom #2 _____

Also, please rate other rooms in your house that are affected by clutter on the lines below. Use the *CIR: Living Room pictures to make these ratings.*

Dining room _____

Hallway _____

Garage _____

Basement _____

Attic _____

Car _____

Other _____ Please specify _____

CLUTTER IMAGE RATING SCALE*

KITCHEN

Please select the photo below that most accurately reflects the amount of clutter in your room.

LIVING ROOM

Please select the photo below that most accurately reflects the amount of clutter in your room.

BED ROOM

Please select the photo below that most accurately reflects the amount of clutter in your room.