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	5	6
Almost Always	Very Frequently	Somewhat Frequently	Somewhat Infrequently	Very Infrequently	Almost Never

	1	2	3	4	5	6
1. It seems I am "running on automatic," without much awareness of what I'm doing.	☐	☐	☐	☐	☐	☐
2. I rush through activities without really being attentive to them.	☐	☐	☐	☐	☐	☐
3. I get so focused on the goal I want to achieve that I lose touch with what I'm doing right now to get there.	☐	☐	☐	☐	☐	☐
4. I do jobs or tasks automatically, without being aware of what I'm doing.	☐	☐	☐	☐	☐	☐
5. I find myself doing things without paying attention.	☐	☐	☐	☐	☐	☐