

MEN of the BANNER

ADDICTIVE BEHAVIOR

OVERCOMING ADDICTIONS SURVEY

- | YES | NO | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Do you lose time from work with your obsession? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Is your obsession making your home life unhappy? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Does your obsession interfere with your relationship? |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Is your obsession interfering with your reputation? |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Have you ever felt remorseful over your obsession? |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Have you gotten into financial difficulties because of your obsession? |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Does your obsession cause you to turn to lower companions and an inferior environment? |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Does your obsession make you careless of your family's welfare? |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Is your ambition your obsession? |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Do you crave your obsession? |
| <input type="checkbox"/> | <input type="checkbox"/> | 11. Does your obsession interfere with you the next morning? |
| <input type="checkbox"/> | <input type="checkbox"/> | 12. Does your obsession cause you to have difficulty sleeping? |
| <input type="checkbox"/> | <input type="checkbox"/> | 13. Has your efficiency decreased because of your obsession? |
| <input type="checkbox"/> | <input type="checkbox"/> | 14. Is your obsession jeopardizing your job or business? |
| <input type="checkbox"/> | <input type="checkbox"/> | 15. Does your obsession cause you to escape from worries or trouble? |
| <input type="checkbox"/> | <input type="checkbox"/> | 16. Does your obsession include just yourself? |
| <input type="checkbox"/> | <input type="checkbox"/> | 17. Has your obsession ever interfered with your memory? |
| <input type="checkbox"/> | <input type="checkbox"/> | 18. Has your physician ever treated you for your obsession? |
| <input type="checkbox"/> | <input type="checkbox"/> | 19. Does your self-confidence build up because of your obsession? |
| <input type="checkbox"/> | <input type="checkbox"/> | 20. Have you ever been to a hospital or institution for your obsession? |

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F O R G I V E N E S S F R O M T H E H E A R T

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OVERCOMING ADDICTIONS SURVEY INTERPRETATION:

If you checked "Yes" to

One question: ***You may have an addiction***

Two questions: ***You probably have an addiction***

Three questions: ***You definitely have an addiction and need help!***