GENERAL:

Instructions: This inventory is designed to help develop an awareness of your sensitivities to a variety of stimuli in several different areas including the physiological, the immunological, the neurological, the psychological, and the transpersonal. Your results may be useful to you in understanding the ways you react to things, in managing stress, and in making appropriate choices about your lifestyle.

There are two major sections to the inventory; each section has two parts; and each part has its own set of instructions. Begin with Section I, Part A, and proceed through the sections and parts, in the order in which they appear, until you have completed Section II, Part B. Completion time, preferably all in one sitting, should be about twenty minutes.

Read each statement carefully, but don’t spend too much time deciding on your response. Your initial response is likely to be the most accurate one, so please don’t review and “correct” your responses later. There are no “right” or “wrong” responses and it is important that you respond without receiving input from others.

Please respond to all of the statements (by circling a response option in the right-side columns) even if “it depends” and/or you are not absolutely sure of the precisely accurate response. When asked to select among specified response options, pick one and only one of the options. If your most accurate response would fall between two options, pick that one option of the two which is the more accurate. “Accuracy” in responding has more to do with your subjective perception than it does with objective reality. Your responses should reflect only those times when you were not under the influence of drugs or alcohol.

Please mark your responses to each statement clearly. A red ballpoint pen is the ideal writing instrument to use, but is not required. Feel free to make editorial comments if you wish, but they cannot be scored, so be sure to circle the appropriate letter or number response as well.

SECTION I: PERSONAL DATA

Instructions: In this section, which has two parts (A and B), you are asked to respond (by circling a letter or number response option in the right-side columns) to factual statements about yourself. The type of response called for in each part is different, so please read the instructions for each part carefully.
Part A: Demographic and Biological Data:

Instructions: In this part, respond to each statement by circling that single response option letter in the right-side columns which corresponds to that specified option which most accurately applies to you. Not all statements offer the same number of response options.

STATEMENT:                                RESPONSE:
[2] I was born as one of a set of twins/triplets/etc.
   [A = no, C = yes (fraternal), E = yes (identical)].........................................A C E
[3] I was born: [A = less than 4 years after my next older sibling, C = 4 or
   more years after my next older sibling, E = a first-born or only child].............A C E
[4] My biological mother’s age when I was born was:
[5] My pigmentation (complexion, hair color, eye color), on balance, is/was:
   [A = very dark, B = dark, C = medium, D = fair, E = very fair] ......................A B C D E
[6] My natural handedness is/was: [A = fully right, C = fully left, E=mixed] ..........A C E

Part B: Medical History

Instructions: In this part, respond to each statement by circling that single response option number in the right-side columns which most accurately reflects the statement’s applicability to you. The specified meaning for each response option number is as follows:

   0 = Definitely does not apply to me.
   1 = Generally does not apply to me.
   2 = Minimally applies to me.
   3 = Generally applies to me.
   4 = Definitely applies to me.

STATEMENT:                                RESPONSE:
[8] I have/had a chronic food intolerance or food allergy. .................................0 1 2 3 4
[9] I have/had a chronic atopic disorder/allergy (e.g., asthma, hay fever,
   hives, eczema). ...............................................................................................0 1 2 3 4
[10] I have/had chronic low blood pressure. ..........................................................0 1 2 3 4
[11] I have/had chronic low "normal" body temperature. ......................................0 1 2 3 4
[12] I have/had a chronic autoimmune disorder (e.g., myasthenia gravis,
    rheumatoid arthritis, lupus erythematosus). ................................................0 1 2 3 4
[13] I have/had a chronic unusual health problem (e.g., Lyme disease,
    Epstein-Barr virus, chronic fatigue syndrome, fibromyalgia). .......................0 1 2 3 4
[14] I have/had a chronic sleep disorder (e.g., insomnia, hypersomnia,
    myoclonus, sleepwalking, nightmares, narcolepsy, apnea). ..........................0 1 2 3 4
[15] I have/had a chronic developmental learning disorder (e.g., dyslexia,
    Tourette’s disorder, attention deficit disorder). .........................................0 1 2 3 4

CONTINUE ON TO SECTION II.
SECTION II: EXPERIENCES & PREFERENCES

Instructions: In this section, which has two parts (A and B), you are asked to respond, by circling a number in the right-side columns, to statements having to do with your experiences and preferences. The meanings specified for the response option numbers in Part A differ from the meanings specified for the response option numbers in Part B, so be sure to read the instructions for each part carefully.

Part A: General (Applicability)

Instructions: In this part, respond to each statement by circling that single response option number in the right-side columns that most accurately reflects the statement’s applicability to you. The specified meaning for each response option number is as follows:

0 = Definitely does not apply to me.
1 = Generally does not apply to me.
2 = Minimally applies to me.
3 = Generally applies to me.
4 = Definitely applies to me.

STATEMENT: RESPONSE:
1. I believe I am bothered more by loud noises than is the average person. ...............0 1 2 3 4
2. I tend to have trouble following verbal instructions. ...................................................0 1 2 3 4
3. Growing up, I was not one of the “popular” kids. ......................................................0 1 2 3 4
4. At times, growing up, I was told to ignore or overlook things I knew were true. .......0 1 2 3 4
5. Sometimes, for no apparent reason, I have “attacks” of panic or anxiety. ...............0 1 2 3 4
6. I believe I am more responsive to moving water than is the average person. .........0 1 2 3 4
7. At times, I have heard internal voices or sounds (such as ringing, buzzing, whistling or chirping) with no logical explanation for them. ..............................0 1 2 3 4
8. I have a lot of difficulty doing rote memorization. .....................................................0 1 2 3 4
9. At times, growing up, when I was punished, I understood the reason(s) why..........0 1 2 3 4
10. At times, for no logical reason, a person, place, or thing will seem to me to have suddenly become changed, distorted, or transformed. ..................................0 1 2 3 4
11. At times, I experience colors as having “sounds” or “tonal qualities.” ....................0 1 2 3 4
12. When I’m away from home for more than a day, I tend to get constipated. ...........0 1 2 3 4
13. I am more drawn to “the touching” than I am to “the convincing.” .........................0 1 2 3 4
14. At times, growing up, I experienced traumatic or upsetting sexual experiences that I couldn’t talk about with adults. ..................................................0 1 2 3 4
15. At times, I feel happy and sad all at once. .................................................................0 1 2 3 4
16. I believe I react more to thunderstorms than does the average person. ...............0 1 2 3 4
17. I have done “inspirational writing” (i.e., poems, prayers, songs, etc.) and felt it wasn’t I who was doing the writing. .................................................................0 1 2 3 4
18. I can easily recapture an event in memory and relive it as if I were there. ..........0 1 2 3 4
19. When emotionally drained, I can best recharge by spending time with a group of friends. .................................................................0 1 2 3 4
STATEMENT:  
20. My dreams are often so vivid as to later be virtually indistinguishable from waking reality. ........................................................................................................0 1 2 3 4
21. At times, for no apparent reason, feelings of extreme heat or cold move through my body. ........................................................................................................0 1 2 3 4
22. I tend to be highly distractible and/or easily sidetracked. ........................................................................................................0 1 2 3 4
23. Daydreaming has been an effective tool in solving many of my problems. ..................................................0 1 2 3 4
24. I have experienced one or more traumas with significant psychological consequences (e.g., being raped, seeing somebody killed, being in a fire). ........................................................................................................0 1 2 3 4
25. At times, I have sensed, with no “ordinary” way of knowing, that someone I cared about was in danger, or hurt, and I later found out it was true. ..................0 1 2 3 4
26. At times, I have experienced episodes of twitching, jerking, shaking, or vibrating in my body and/or extremities. .................................................................................................0 1 2 3 4
27. At times, for no logical reason, I have experienced the sensation of smelling a strong unpleasant odor (e.g., sewage, ammonia, “rotten eggs”). .................................................................................................0 1 2 3 4
28. I have/had trouble counting change and/or balancing a checkbook. .................................................................................................0 1 2 3 4
29. At times, growing up, I was physically mistreated. .................................................................................................0 1 2 3 4
30. At times, for no apparent reason, my body seems to change size and/or shape. .................................................................................................0 1 2 3 4
31. I believe I am more responsive to colors than is the average person. .................................................................................................0 1 2 3 4
32. I tend to have trouble organizing my thoughts and/or setting priorities. .................................................................................................0 1 2 3 4
33. I am more likely to be personal than objective in my approach to others. .................................................................................................0 1 2 3 4
34. At least once, from a medical perspective, I almost died. .................................................................................................0 1 2 3 4
35. At times, I have experienced unexplained episodes of dizziness and/or loss of balance. .................................................................................................0 1 2 3 4
36. I believe I am more bothered by fluorescent lights than is the average person. .................................................................................................0 1 2 3 4
37. I vividly “remember” things I know couldn’t “really” have happened. .................................................................................................0 1 2 3 4
38. When I’m speaking, my mind sometimes goes blank, and/or I lose my train of thought. .................................................................................................0 1 2 3 4
39. I am more a practical sort of person than I am an imaginative sort. .................................................................................................0 1 2 3 4
40. At times, I have experienced the feeling that I was actually flying through the air, although I didn’t know why or how. .................................................................................................0 1 2 3 4
41. My senses tend to get jumbled up together (e.g., sounds seem to have a color, textures to have a tone, tastes to have a shape). .................................................................................................0 1 2 3 4
42. In reading, I tend to mix up letters like “p” and “q,” or numbers like “2” and “5.” .................................................................................................0 1 2 3 4
<table>
<thead>
<tr>
<th>STATEMENT</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>43. Within my group, I'm among the last to know what everybody is doing.</td>
<td>0</td>
</tr>
<tr>
<td>44. At times, growing up, my relationship with a parent or primary caretaker involved a sexual experience.</td>
<td>0</td>
</tr>
<tr>
<td>45. I can sense another person’s thoughts or feelings with nothing being said.</td>
<td>0</td>
</tr>
<tr>
<td>46. I have/had unusual reactions to caffeine, alcohol and/or marijuana.</td>
<td>0</td>
</tr>
<tr>
<td>47. At times, I have seen lights, or balls of light, without knowing what was causing them or where they came from.</td>
<td>0</td>
</tr>
<tr>
<td>48. I can vividly re-experience physical sensations in my imagination (e.g., a gentle breeze, soft fur, cool grass, the warmth of the sun).</td>
<td>0</td>
</tr>
<tr>
<td>49. In making decisions, I tend to be guided more by reason, logic, and objective standards than by subjective feelings and personal values.</td>
<td>0</td>
</tr>
<tr>
<td>50. At times, I have experienced a period of an hour or more, in which I was apparently lost, but I could not remember why or where I had been.</td>
<td>0</td>
</tr>
<tr>
<td>51. I believe I am more reactive to bright lights and/or flashing lights than is the average person.</td>
<td>0</td>
</tr>
<tr>
<td>52. I have a tendency to get confused between left and right.</td>
<td>0</td>
</tr>
<tr>
<td>53. I am more interested in possibilities than I am in facts and data.</td>
<td>0</td>
</tr>
<tr>
<td>54. I have experienced one or more electrical shocks sufficiently severe to have physiological consequences (i.e., knockdown, unconsciousness, etc.).</td>
<td>0</td>
</tr>
<tr>
<td>55. I believe I am more affected by psychological stress than is the average person.</td>
<td>0</td>
</tr>
<tr>
<td>56. At times, I experience noticeable physical sensations around electrical transmission lines, electrical equipment, or electronic equipment.</td>
<td>0</td>
</tr>
<tr>
<td>57. At times, I have experienced episodes of staring off into space, thinking of nothing, and being unaware of the passage of time.</td>
<td>0</td>
</tr>
<tr>
<td>58. At times, I have experienced “flashbacks” (i.e., where memories come flooding back all at once—sometimes in ways that are overwhelming).</td>
<td>0</td>
</tr>
<tr>
<td>59. At times, growing up, when punished, I felt “the punishment fit the crime.”</td>
<td>0</td>
</tr>
<tr>
<td>60. At times, in the early morning hours (@2:00 AM to 4:00 AM), I have unusual experiences that are especially meaningful to me.</td>
<td>0</td>
</tr>
<tr>
<td>61. I believe I am more attuned to rhythmic sounds than is the average person.</td>
<td>0</td>
</tr>
<tr>
<td>62. In reading, I tend to make mistakes like reading “unclear” as “nuclear.”</td>
<td>0</td>
</tr>
<tr>
<td>63. I tend to identify with other people so strongly that I take on their emotions, problems or illnesses as my own.</td>
<td>0</td>
</tr>
<tr>
<td>64. I believe I’ve had more serious accidents, injuries, illnesses, and/or hospitalizations than has the average person.</td>
<td>0</td>
</tr>
</tbody>
</table>
STATEMENT:  
RESPONSE:
65. At times, for no apparent reason, I experience sudden intense feelings of  
   ecstasy, bliss, peace, love, devotion, joy or cosmic harmony. .............................0 1 2 3 4
66. At times, electrical or electronic equipment will malfunction in my presence. ....0 1 2 3 4
67. At times, for no apparent reason, I have experienced a strong, unpleasant  
   taste in my mouth. ...............................................................................................0 1 2 3 4
68. At times, I don’t know if I have actually done something, or have just  
   thought about doing it (e.g., mailing a letter). ................................................0 1 2 3 4
69. At times, growing up, my parent(s) or primary caretaker(s) accused me of  
   lying when I knew I was not. ............................................................................0 1 2 3 4
70. At times, I have had the feeling that I was no longer real, or not the same  
   person, or that I had suddenly become changed, distorted or transformed ......0 1 2 3 4
71. At times, a piece of music will stimulate a “light show” in my mind. .................0 1 2 3 4
72. I regularly engage in a discipline involving meditation or an altered state  
   of consciousness. ...............................................................................................0 1 2 3 4
73. I believe there are times when “common sense” is anything but. ......................0 1 2 3 4
74. At times, growing up, I felt disliked, unwanted, or emotionally neglected  
   by one or both of my parents or primary caretakers. .......................................0 1 2 3 4
75. I believe I am more reactive to crowds than is the average person. ....................0 1 2 3 4
76. At times, electric lights mysteriously turn on, turn off or blow out  
   in my presence. ...............................................................................................0 1 2 3 4
77. At times, I experience things as if they were “more real than real.” .................0 1 2 3 4
78. At times, I have gone from one room to another, then forgotten why I went. ......0 1 2 3 4
79. I have a very clear and distinct sense of time. ....................................................0 1 2 3 4
80. At times, I have had the experience of waking up paralyzed with a sense  
   of a strange person, or presence, or something else in the room. ....................0 1 2 3 4
81. I believe I am more aware of smells and/or tastes than is the average  
   person. .................................................................................................................0 1 2 3 4
82. I have trouble following directions and/or I often get lost. ...............................0 1 2 3 4
83. I have deep friendships with very few people, rather than broad friendships with  
   many different people. .......................................................................................0 1 2 3 4
84. At times, I engaged in sexual activity with an adult before I was 14 years old.......0 1 2 3 4
85. At times, for no apparent reason, I have experienced the sensation of  
   tickling, itching or crawling under my skin. .....................................................0 1 2 3 4
86. I have/had a well-developed talent/ability in one or more of the arts  
   (e.g., musical, graphic, literary, dramatic). ......................................................0 1 2 3 4

CONTINUE ON TO PART B
Part B: Transpersonal Experiences (Frequency)

Instructions: In this part, you are asked to provide information about your experiences of the “transpersonal” (“metaphysical,” “paranormal,” or “psychic”) kind. Respond to each statement by circling that single response option number in the right-side columns that most accurately reflects the frequency with which you have had the experience. Spontaneous experiences should be weighted more heavily than those which were deliberately cultivated — use your best judgment in responding. Each statement should be read as if it were preceded by the words “With respect to...” and each response should be read as if it were preceded by the words “I have (had) this experience...” The specified meaning for each response option number is as follows:

[“I have (had) this experience...”]
0 = Never
1 = Rarely
2 = Occasionally
3 = Often
4 = Regularly

STATEMENT: RESPONSE:

[“With respect to...”] [“I have (had) this experience...”]

87. Extra-Sensory Perception including: (a) Telepathy (transmission and/or reception of thoughts with another person without “normal” communication or clues), (b) Precognition (accurate knowledge of an event that will take place in the future and that could not be predicted by logical means), (c) Psychic dream (a dream that matches in detail an event the dreamer did not know about, or have reason to expect, at the time of the dream), (d) Clairvoyance (accurate awareness of events that are not available to “normal” sensory impressions). .................................0 1 2 3 4

88. Psychic healing: healing of an injury or illness through non-physical means such as prayer, meditation, laying on of hands, therapeutic touch, etc. .................................................................0 1 2 3 4

89. Psychokinesis: the causing of changes in the location or state of a physical object (metal bending, fire starting, things falling to the floor, etc.) and/or the influencing of electrical and/or electronic equipment (causing lights to go on or off, causing malfunctions in watches, calculators, computers, etc.) through no “natural” physical means. .................................................0 1 2 3 4

90. Out-of-body experience: the sense that one’s awareness or mind has moved outside the physical body to a different location, and the body can actually be seen from that location — other than during a near-death experience (covered below). .................................................................................0 1 2 3 4

91. Past-life recall: the recollection of details and/or emotions of what apparently was another lifetime occurring before the experiencer was born into her/his current body. ......................................................................................0 1 2 3 4

92. Contact with spirit guides: mental contact with “spirits” or “higher beings” in which the individual receives information or guidance while remaining aware of what is happening. ..................................................................................0 1 2 3 4

93. Mediumistic episode: communication of information or guidance by a “spirit” using the voice (“trance channeling”), or hand (“automatic writing”), of the experiencer who is in an altered state of consciousness and has little awareness afterwards of what was communicated. .........................................................0 1 2 3 4
0 = never; 1 = rarely; 2 = occasionally; 3 = often; 4 = regularly

STATEMENT:  

"With respect to …"

RESPONSE:  

"I have (had) this experience …"

94. Apparition: a vision, while awake, of another person, living or dead, who is not physically, or objectively, present. .................................................................0 1 2 3 4

95. UFO sighting: the observation of an unidentified flying object ("UFO," “flying saucer,” etc.), and/or its occupants without actual contact taking place. ...............................................................................................................0 1 2 3 4

96. Alien contact: actual contact with (what are often called) “extraterrestrial beings,” sometimes involving being taken aboard a UFO (frequently against the experiencer’s will). .................................................................................................0 1 2 3 4

97. Spirit possession: the feeling that another mind (demon, spirit, soul of someone living or dead) is attempting to take (or has taken) over control of the experiencer’s body and will. .................................................................................................................................0 1 2 3 4

Instructions: For the following item only, circle “0” if you have never had the experience, circle “3” if you have had the experience once, and circle “4” if you have had the experience two or more times.

98. Near-death experience: coming very close to death (actually dying according to clinical criteria), and experiencing classical NDE events (such as leaving the body, journeying through a tunnel, entering a world of light, perceiving a presence, etc.) — but ultimately surviving.................................0 3 4

Instructions: In the space below, please make whatever comments and/or suggestions you feel are appropriate about your experience of completing this inventory:

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

THE END — THANK YOU!

Return the completed questionnaire with your check in the amount of $15.00 [payable to Headline Books] to:

The ASP Project
c/o Headline Books, P O Box 52, Terra Alta, WV 26764
ASPPProject@headlinebooks.com

Your scores and an explanation of their significance will be mailed to you in two or three weeks.

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