№	Item	1	2	3	4	5	6	7
1	Are you feeling nervous and/or stressed?	◯	◯	◯	◯	◯	◯	◯
2	Are you feeling that things are going your way?	◯	◯	◯	◯	◯	◯	◯
3	Do you think you can cope with all the things that you have to do?	◯	◯	◯	◯	◯	◯	◯
4	Are you able to control current irritations?	◯	◯	◯	◯	◯	◯	◯
5	Are you feeling to be on top of things?	◯	◯	◯	◯	◯	◯	◯
6	Are you angry because of things that are happening are outside of your control?	◯	◯	◯	◯	◯	◯	◯
7	Are you feeling difficulties to reach your goal?	◯	◯	◯	◯	◯	◯	◯