

Child Mental Health Assessment Form

The **child mental health assessment form** sample for schools is designed to systematically evaluate the emotional and psychological well-being of students. It helps educators and counselors identify potential mental health concerns early, ensuring timely support and intervention. This form promotes a supportive school environment fostering student resilience and academic success.

Student Information

Student Name:

Age:

Grade/Class:

School Name:

Teacher/Counselor:

Date of Assessment:

Behavioral and Emotional Assessment

Area of Concern	Not Observed	Sometimes	Often
Shows signs of sadness or depression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Withdraws from friends or activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Displays excessive worry or anxiety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Has sudden changes in mood	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shows difficulty paying attention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Expresses thoughts of self-harm or harming others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional Observations

Student Strengths:

Specific Concerns or Notes:

Recommendations

Suggested Support/Interventions:

Assessor's Name:

Signature: _____

Date:

Submit Assessment