

GENERAL CHECKLIST FOR IDENTIFYING DEPRESSED STUDENTS

Student Name: _____ Grade: _____ Date: _____

Person Completing Form: _____

Check off each observed symptom:

1. Depressed and/or irritable mood lasting more than two weeks. (primary symptom)
2. Change in appetite or weight. In small children, failure to make appropriate weight gain.
3. Too active or not active enough.
4. Deliberately misbehaves in school.
5. Loss of interest in school and school activities.
6. Social withdrawal (example: feels left out, may openly reject friends)
7. Drop in grades.
8. Loss of energy or chronic fatigue and/or sleeping in class.
9. Anxiety, ranging from assorted vague worries about the future to paralyzing delusional fears.
10. Difficulty concentrating on assignments or indecision.
11. Unable to store new information.
12. Unable to retrieve what s/he already knows.
13. Forgotten materials/assignments.
14. Inappropriate guilt (example: believes s/he committed a grave sin when there is no evidence to support the belief)
15. Low self-esteem (example: says s/he 'feels dumb', 'can't do anything right', "disappointment to others").
16. Frequent absences, trips to clinics, comment son not feeling well.
17. Hears voices inside or outside his/her head, when no one else is around (example: hears chorus of voices saying, "You're no good.").
18. Crying in class.
19. Writes about hopelessness, death, and suicide themes in assignments and/or notes, and/or talks about suicide in class.

20. Discloses feelings of desperation, loss of ambition, suicidal thoughts, thoughts of self-harm or running away.

After completing this form, share the results with the school counsellor so that a team approach can be planned to support the child.