

Mental Health Checklist & Referral for Adolescents aged 11-18 years

Please check all of the following behaviors you have recognized red flags for in the student you are concerned with, and then complete the attached student referral. Use the supporting information section to note any concerns not listed here or to add pertinent details, and then share this form with your school's designated mental health professional.

Behaviors that may indicate social or emotional problems:

- Refusal to go to school, or constantly asks to leave class, or has frequent absence
- Many physical complaints or frequent visits to the nurse's office
- Bullying, cruelty to animals or people
- Is the target of bullying or abuse
- Oppositional to authority, discipline referrals
- Angry outbursts or verbally abusive
- Destroys property
- Preoccupation with weight and diet
- Noticeable changes in appetite or eating practices
- Sexual acting out, provocative dressing or sudden change in style of dress
- Sustained or intense sad or irritable mood
- Difficulty staying alert or awake in class
- Noticeable change in school performance or poor grades
- Excessive fidgeting or constant movement
- Art, stories, or other creative work depicting extreme aggression or victimization
- Puzzling swings in affect (display of emotion) or extreme highs & lows in emotion
- Difficulty accepting or acknowledging mistakes
- Changes in peer group or frequent social conflict
- Conversation, notes, or essays preoccupied with thoughts of death
- Threatens to run away/ running away
- Avoids friends/ family or wants to be alone much of the time
- Alcohol, drug, or tobacco use
- Odd, disjointed speech/ difficulty organizing thoughts
- Unexplained wounds, frequent "accidents" superficial cuts (mostly arms & legs) , covering up (i.e. long sleeves in hot weather)

Risk factors that can impact adjustments, health, functioning, and academics:

- Youth is new to school/neighborhood
- Youth has had major changes at home (i.e. divorce, new sibling, job loss, etc)
- Youth's family moves frequently
- Youth has been rejected by peers
- Youth is Involved with a negative peer group
- Youth has had difficult teacher/ authority relationships
- Alcohol or drug abuse among family/peer group
- Incarcerated parent
- Youth has been involved with the juvenile Justice system
- Youth has experienced a major trauma such as witnessing domestic violence or being a victim of physical or sexual abuse
- Gay, lesbian, or transgendered sexual orientation
- Obesity, physical disability, or chronic health problems
- Pregnancy

Follow your building's crisis protocol if youth:

- Talks of hints of suicide or wanting to die
- Talks or hints of injuring self
- Threatens to harm or injure someone else
- Reveals injuries inflicted by self or other

Warren County Schools Teacher/Staff Student Behavioral Health Referral

Student: _____

Date: _____ D.O.B.: _____ Grade: _____

Person making referral: _____

Referral To:

School Counselor School Psychologist Building Principal Other: _____

Parent/Guardian information: _____

Supporting information:
