Alis School Refusal Assessment

Client Name: _____ Date: _____

Section 1

Attendance Concerns

Check all that apply:

□ Frequent absences □ Partial Day Attendance □ Tardies □ Refuses to leave home
□ Leaves school early □ Complains of physical symptoms (e.g. headaches, stomachaches)
□ Emotional distress in mornings □ Stays home unsupervised
□ Parent conflict related to school

Section 2

Contributing Factors

Check all that apply:

□ Anxiety □ Depression
□ Trauma □ Peer conflict or bullying
□ Autism Spectrum □ ADHD
□ Academic struggles □ Recent Transition (e.g. new school) □ Parent Anxiety
□ Family stress (e.g. separation, move)
□ Avoidant behavior reinforced

Section 3

Youth Perspective (Self-Report)

"How do you feel about school?"

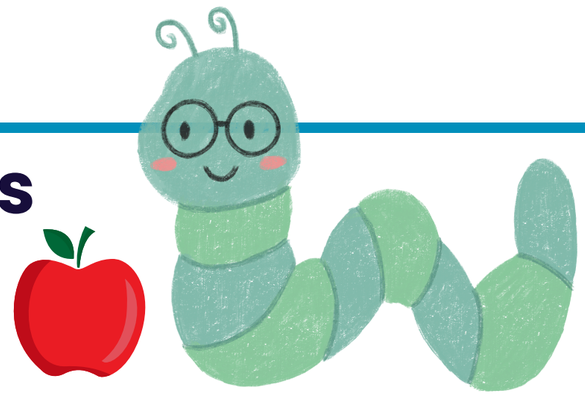
□ I like school □ I feel neutral □ I don't like school
□ I feel scared/stressed by school

"What makes school hard?"

□ Peers □ Staff/Teachers □ Tests/Homework
□ Being away from home □ Noise/crowds □ Other: _____

Trusted adult at school?

□ Yes — Who? _____ □ No



Section 4

School Avoidance Indicators

(1 = Not at all, 5 = Very True)

Statement	1	2	3	4	5
1. Youth feels anxious before school	□	□	□	□	□
2. Youth avoids specific school situations (e.g. tests, peers)	□	□	□	□	□
3. Youth prefers to stay home to access comforts (TV, games)	□	□	□	□	□
4. Youth seeks parent attention by staying home	□	□	□	□	□
5. Youth complains of symptoms that resolve when staying home	□	□	□	□	□
6. Youth has trouble sleeping before school days	□	□	□	□	□
7. Youth uses sickness as an excuse to stay home	□	□	□	□	□
8. Youth only participates in school activities they find exciting	□	□	□	□	□
9. Youth thinks of social situations as scary or intimidating	□	□	□	□	□
10. Youth seeks trusted professionals or support outside of school	□	□	□	□	□

Interested in IOP/PHP or DBT Group Services?

Reach out to talk through your needs and set up an evaluation

888-528-3860 (option #1) | alisbh.com

Family Support Group Sign Up

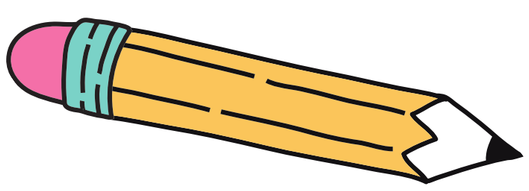
alis Behavioral Health

School Avoidance Statement Totals:

1	2	3	4	5	Total:
☐	☐	☐	☐	☐	☐

Concern Level Guide

- Total Score 6–12: Mild Concern
- Total Score 13–18: Moderate Concern
- Total Score 19–30: High Concern (consider intervention)



Concern Level Guide Result Recommendations

If scoring mild concern, consider...

- working with an individual therapist or school based mental health professional or counselor to discuss your options.
- the DBT program at Alis or another community based provider.
- attending the Alis Family Support Group (see below).

If scoring moderate concern, consider...

- individual therapy or the Alis IOP program.

If scoring high concern, consider...

- scheduling a clinical evaluation with Alis in order to stabilize and plan for gradual reintegration back into school (see below).

Section 5

Readiness to Return

Rate readiness to attend school (circle one):

1 2 3 4 5 6 7 8 9 10

(1 = Not ready at all 10 = Fully ready)

Section 6

Next Steps

Suggested follow-up:

☐ Full clinical assessment ☐ Safety/crisis plan

☐ Coordination with school

☐ Family support/psychoeducation

☐ Gradual reintegration plan ☐ Outside referral (e.g., IOP/PHP)

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