

Year 9 School Health Questionnaire

Hello, we would like to invite you to complete this questionnaire, the aim is to identify any support and advice you may need. A member of the school health team may contact you following completion of the questionnaire to offer health advice or support if needed.

Please complete the form below

First name:	
Surname:	
Date of birth:	
Name of school:	
Home address:	Postcode:

General Health

Do you have any medical conditions, disability or other health needs? Yes/No
If yes, please tell us about them

Have you been to the dentist in the last 12 months?

Yes
No

Do you brush your teeth twice a day?

Yes
No

Do you have any problems with your vision?

This could include struggling to see the whiteboard in school.
Yes
No

Do you care for someone at home?

(This can be caring for someone who may have a disability, illness or health condition.)

This can include cooking on your own, cleaning or helping someone to get dressed because they are unable do it for themselves)

Yes

No

Do you eat 5 or more fruit and vegetables every day?

Yes

No

Do you eat breakfast before you come to school?

Yes

No

Sometimes

Do you drink water/diluted juice?

I drink water/diluted juice a lot

I drink water/diluted juice sometimes

I do not drink water or diluted juice

How often do you drink sugary, fizzy or energy drinks?

E.g. cola, energy drinks or fruit juices

Often

Sometimes

Never

How often do you eat fast food/take away?

Often

Sometimes

Never

Do you do any exercise or sports outside of school?

E.g. Running, dancing, football, riding a bike or going to the gym.

Yes

No

How many hours a day do you spend on your phone, watching TV or playing electronic games?

Less than 2 hours

2 to 5 hours

5+ hours

Following on from completing this questionnaire would you like a confidential appointment with your school nurse?

This can be to discuss topics such as emotional health, sexual health, body images, life choices or anything else you wish to discuss.

Yes

No

Thank you for completing this questionnaire