

Name: _____

Pupil Daily Well-being Assessment

Date: _____

Presentation

Good Average Poor

Engagement

Good Average Low

Anxiety

Low Average High

Self-Regulation

Good Average Poor

Comments: (Including any particular highs and lows)

Date: _____

Presentation

Good Average Poor

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Good Average Poor

Comments: (Including any particular highs and lows)

Please mark A for wellbeing on arrival in school and D for wellbeing just before departure