

Developmental Assessment - 9-11 Years Appropriate

Has good self-esteem?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is able to make some choices independently?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has a good relationship with family members?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Helps out at home?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has problems at school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gets 60 minutes a day of activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has hobbies or participates in an activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Eats healthy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has concerns about puberty?	<input type="checkbox"/> Yes <input type="checkbox"/> No