

# Wellness Assessment

This self-assessment tool can help you identify the areas of Wellness (emotional, environmental, intellectual, occupational, physical, social, and spiritual) where you thrive and where you may require more attention.

Taking this assessment will also assist you in reflecting on aspects of health that you may not have previously considered.

## Section I. Basic Information

Fill out the table and provide all the information requested.

Basic Information
Full Name:
Date of Birth:
Gender:
Email Address:
Phone Number:
Address:
Emergency Contact Name:
Emergency Contact Phone Number:

## Section II. Areas of Wellness

Answer all the seven wellness dimensions questions, then tally your points for each section and use the guide to interpret the scores.

Statements	Never (0 points)	Rarely (1 point)	Sometimes (2 points)	Usually (3 points)
<b>Category: Emotional Wellness</b> (understanding your feelings and constructively expressing emotions, and having the ability to deal with stress and cope with life's challenges)				
I feel happy and content with my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can manage my stress effectively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have positive coping strategies to deal with difficult emotions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel a sense of purpose and meaning in my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can express my emotions healthily and constructively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Total Score:</b>				

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Statements	Never (0 points)	Rarely (1 point)	Sometimes (2 points)	Usually (3 points)
<b>Category: Physical Wellness</b>				
(making choices to avoid harmful habits and practicing behaviors that support your physical body, health, and safety)				
I engage in regular physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I eat a healthy and balanced diet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get enough sleep regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I engage in healthy habits and avoid risky behaviors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I attend regular medical check-ups and take care of my health.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Total Score:</b>				
<b>Category: Social Wellness</b>				
(building and maintaining a diversity of supportive relationships and dealing effectively with interpersonal conflict )				
I have a support system (friends, family, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel connected to my community and social groups.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have healthy and positive relationships.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can communicate effectively with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I engage in meaningful and enjoyable social activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Total Score:</b>				
<b>Category: Intellectual Wellness</b>				
(engaging in creative and mentally-stimulating activities, expanding your knowledge through cultural, artistic, or skill-based learning, and sharing knowledge and skills with others)				
I am engaged in learning and personal growth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have a sense of curiosity and enjoy exploring new ideas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I engage in creative activities or hobbies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can think critically and solve problems effectively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel intellectually stimulated and challenged.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Total Score:</b>				
<b>Category: Environmental Wellness</b>				
(recognizing the interactions between yourself and your environment (natural and social), responsibly using available resources, and fostering a safer and healthier environment for others)				

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Statements	Never (0 points)	Rarely (1 point)	Sometimes (2 points)	Usually (3 points)
I am aware of and take steps to reduce my environmental impact.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I spend time outdoors and appreciate nature.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I engage in environmentally friendly behaviors (e.g., recycling).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel connected to and responsible for my community and planet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am aware of environmental issues and take steps to address them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Total Score:</b>				
<b>Category: Spiritual Wellness</b>				
(having beliefs and values that provide a sense of purpose and help give meaning and purpose to your life and acting in alignment with those beliefs)				
I feel a sense of purpose and meaning in my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel a connection to something greater than myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I engage in practices that promote inner peace and well-being.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can forgive myself and others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel grateful for my life and the people in it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Total Score:</b>				
<b>Category: Occupational Wellness</b>				
(getting personal fulfillment from your job or academic pursuits, and contributing to knowledge and skills, while maintaining a work-life balance)				
I get personal satisfaction and enrichment from work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can contribute my knowledge, skills, and talents at work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I seek out opportunities to improve my knowledge or skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I effectively handle my stress level related to work responsibilities that interest me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I balance my social life and job responsibilities well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Total Score:</b>				
<b>CALCULATE YOUR SCORE</b>				
<b>Wellness Dimension</b>	<b>Your Score</b>			
<b>Emotional Wellness</b>				
<b>Physical Wellness</b>				

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**CALCULATE YOUR SCORE**

Wellness Dimension	Your Score
Social Wellness	
Intellectual Wellness	
Environmental Wellness	
Spiritual Wellness	
Occupational Wellness	

**SCORE INTERPRETATION**

**Scores of 11- 15:** Your answers demonstrate that you are already taking positive steps in this dimension of Wellness. You are improving your well-being but might also focus on another area with low scores.

**Scores of 6 to 10:** Your behaviors in this area are good, but there is room for improvement.

**Scores of 5 and below:** Your answers indicate potential health and well-being risks. Please look at those areas where you scored lower and review available resources to help you develop and set achievable goals.