Safe Communities – Safe Schools

CURRENT SCHOOL CLIMATE STUDENT SURVEY
MIDDLE/HIGH SCHOOL

DO NOT COPY

INSTRUCTIONS: We need your help and honesty! This survey is being used to understand what life is like for you and other students in your school. All responses are anonymous; this means that no one will know your answers to the questions. Do not put your name on the survey.

Please check the boxes that best describe you:

1. What grade are you in?
   - [ ] 6
   - [ ] 7
   - [ ] 8
   - [ ] 9
   - [ ] 10
   - [ ] 11
   - [ ] 12

2. How old are you?
   ________ yrs

3. What is your cultural, racial or ethnic background?
   - [ ] Caucasian/White (includes French, German, Irish, etc.)
   - [ ] African American/Black
   - [ ] Asian/Pacific Islander
   - [ ] Latino/Hispanic/Mexican
   - [ ] American Indian/Native American
   - [ ] Bi-racial/Multi-racial
   - [ ] Other. Please specify: ______________________
   - [ ] Do not know

4. Are you female or male?
   - [ ] Female
   - [ ] Male

5. What kind of grades do you usually get?
   - [ ] Mostly A’s
   - [ ] Mostly B’s
   - [ ] Mostly C’s
   - [ ] Mostly D’s
   - [ ] Mostly F’s
   - [ ] My school does not use this type of grading system

The first set of questions asks how you feel about your school and people in your school.

6. I like school. ................................................................. Strongly Disagree Disagree Agree Strongly Agree
   - [ ]

7. I look forward to going to school. ................................................................. Strongly Disagree Disagree Agree Strongly Agree
   - [ ]

8. I try hard in school. ................................................................. Strongly Disagree Disagree Agree Strongly Agree
   - [ ]

9. I can’t wait to drop out of school. ................................................................. Strongly Disagree Disagree Agree Strongly Agree
   - [ ]

10. Finishing high school is important to me. .................................................... Strongly Disagree Disagree Agree Strongly Agree
     - [ ]

11. School is a waste of time. ................................................................. Strongly Disagree Disagree Agree Strongly Agree
     - [ ]

12. There is graffiti at my school (writing on the wall that is not supposed to be there). .................................................... Strongly Disagree Disagree Agree Strongly Agree
     - [ ]

13. My school building is clean. ................................................................. Strongly Disagree Disagree Agree Strongly Agree
     - [ ]

14. I like the way my school looks................................................................. Strongly Disagree Disagree Agree Strongly Agree
     - [ ]

15. Many things are broken or damaged (e.g., windows, computers, outdoor equipment) at my school. .................................................... Strongly Disagree Disagree Agree Strongly Agree
     - [ ]

16. Areas in or around my school could use better lighting for safety reasons................................................................. Strongly Disagree Disagree Agree Strongly Agree
     - [ ]

17. My school is well maintained................................................................. Strongly Disagree Disagree Agree Strongly Agree
     - [ ]

18. I feel safe at my school ................................................................. Strongly Disagree Disagree Agree Strongly Agree
     - [ ]

19. I feel safe on my way to and from school................................................................. Strongly Disagree Disagree Agree Strongly Agree
     - [ ]

20. Between class periods, teachers go into the hallways to supervise student behavior ................................................................. Strongly Disagree Disagree Agree Strongly Agree
     - [ ]

21. Between class periods, teachers go into the bathrooms to supervise student behavior ................................................................. Strongly Disagree Disagree Agree Strongly Agree
     - [ ]
22. There is an anonymous (without anyone knowing it was me) way for me to report unsafe or dangerous behavior. ........................... ☐ ☐ ☐ ☐

23. If another student was involved in unsafe or dangerous behavior I would report it anonymously (without anyone knowing it was me) … ☐ ☐ ☐ ☐

24. If I report unsafe or dangerous behavior, I can be sure that the problem will be taken care of as soon as possible. .............................. ☐ ☐ ☐ ☐

25. During the past 30 days, on how many days did you **not** go to school because you felt you would be unsafe at school or on your way to or from school?. .............. ☐ ☐ ☐ ☐ ☐

The next 2 questions ask about the **past 12 months**.

26. During the past 12 months, on how many days did you stay home from school because you were afraid you would not be safe **at school**? .......................................................... ☐ ☐ ☐ ☐ ☐

27. During the past 12 months, on how many days did you stay home from school because you were afraid you would not be safe **traveling to or from school**?. ................... ☐ ☐ ☐ ☐ ☐

These questions ask about students, staff and rules at your school.

The next 4 questions can be tricky for some people. They ask you about students from other cultures or ethnic groups; this means students that are from or have relatives from different cultural or ethnic backgrounds than yours. For example, if you consider yourself Asian, then people from other cultures or ethnic groups would consist of Caucasians/Whites, African Americans/Blacks, Hispanics, etc. Similarly, if you consider yourself Hispanic, then people from other cultures or ethnic groups would consist of Caucasians/Whites, African Americans/Blacks, American Indian, etc.

28. I feel comfortable being around students of other cultures or ethnic groups........................................................................................................... ☐ ☐ ☐ ☐

29. I try hard not to judge people based on their skin color.................................................................................................................. ☐ ☐ ☐ ☐

30. Students in my school respect young people of other cultures or ethnic groups................................................................................. ☐ ☐ ☐ ☐

31. Students of other cultures or ethnic groups can succeed in my school.......................................................................................................................... ☐ ☐ ☐ ☐

32. Do teachers at your school treat students with respect?.......................................................................................... ☐ ☐ ☐ ☐

33. Do teachers at your school show interest in their students as people?.......................................................................................... ☐ ☐ ☐ ☐

34. Do teachers at your school try to help students when they are having problems?.......................................................................................... ☐ ☐ ☐ ☐

35. Do the principal and the rest of the school staff try to make your school a place students like to be?.......................................................................................... ☐ ☐ ☐ ☐
The next questions ask what you and your friends think about violence and aggression.

45. My friends think it is wrong to hit other people. □ No □ Yes
46. My friends think it is OK to push or shove other people if you are mad. □ No □ Yes
47. My friends think it is OK to physically fight to get what you want. □ No □ Yes
48. My friends think it is OK to hit someone back when they hit you first. □ No □ Yes
49. My friends think it is OK to take your anger out on others by using physical force. □ No □ Yes
50. My friends think it is wrong to call other people mean names. □ No □ Yes
51. I think it is wrong to hit other people. □ No □ Yes
52. It is OK to push or shove other people around if you’re mad. □ No □ Yes
53. It is OK to take your anger out on others by using physical force. □ No □ Yes
54. Sometimes you have to physically fight to get what you want. □ No □ Yes
55. I think it is OK to hit someone back if they hit you first. □ No □ Yes
56. It is wrong to call other people mean names. □ No □ Yes

The following questions ask about things you have done.

57. During the past 12 months, have you purposely damaged or destroyed property that did not belong to you (for example, breaking, cutting or marking something)? □ No □ Yes How many times? ____
58. During the past 12 months, have you stolen or tried to steal money or things worth $10 or less? □ No □ Yes How many times? ____
59. During the past 12 months, have you stolen or tried to steal money or things worth more than $10? □ No □ Yes How many times? ____
60. During the past 12 months, have you been suspended or sent home from school for bad behavior? □ No □ Yes How many times? ____
61. During the past 12 months, have you threatened to hit or hurt other students? □ No □ Yes How many times? ____
62. During the past 12 months, have you hit someone with the idea of hurting them? □ No □ Yes How many times? ____
63. During the past 12 months, have you attacked someone with a weapon with the idea of seriously hurting them? □ No □ Yes How many times? ____
64. Have you ever been in trouble with the law? ........................................... □ No □ Yes How many times? _____

65. Have your friends ever been in trouble with the law? .......................... □ No □ Yes

66. During the past 12 months, how many times were you in a physical fight on school property?

   □ 0 times            □ 6 or 7 times
   □ 1 time            □ 8 or 9 times
   □ 2 or 3 times      □ 10 or 11 times
   □ 4 or 5 times      □ 12 or more times

66a. If you were in a physical fight on school property, did you hit the other person first?

   □ I was not in a fight on school property □ No □ Yes

67. During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?

   □ 0 times            □ 4 or 5 times
   □ 1 time            □ 6 or more times
   □ 2 or 3 times

68. During the past 12 months, how many times were you in a physical fight in which the person you were fighting with was injured and had to be treated by a doctor or nurse?

   □ 0 times            □ 4 or 5 times
   □ 1 time            □ 6 or more times
   □ 2 or 3 times

The next questions ask about things that have happened to you during the past 12 months.

69. During the past 12 months, has another student threatened to hit or hurt you? ................................................................. □ No □ Yes How many times? _____

70. During the past 12 months, have you been hit by another student trying to hurt you? ................................................................ □ No □ Yes How many times? _____

71. During the past 12 months, has another student attacked you with a weapon trying to seriously hurt you? ............................................. □ No □ Yes How many times? _____

The following questions are about bullying.* You may include behaviors reported in the previous violence and aggression questions if they meet the definition of bullying.

Please be sure to read the definition below before answering the bullying questions!

We say a student is being bullied when another student, or several other students:

- say mean and hurtful things, or make fun of him/her
- completely ignore and exclude him/her from their group of friends or leave him/her out of things on purpose
- hit, kick, push, shove around, or lock him/her inside a room
- tell lies or spread false rumors about him/her or send mean notes and try to make other students dislike him/her

When we talk about bullying, these things happen more than just once, and it is difficult for the student being bullied to defend himself/herself.

We do not call it bullying when the teasing is done in a friendly and playful way. Also, it is not bullying when two students of about equal strength or power argue or fight.

72. Have you ever been bullied at school? .................................................. □ No □ Yes

* Bullying Questions are from the Olweus Student Bullying Questionnaire by Dr. Dan Olweus © 2007 Hazelden Foundation. Reprinted by permission of Hazelden Foundation, Center City, MN.
73. Have you been bullied at school in the **past couple of months** in one or more of the following ways **(If you have never been bullied, mark “Not In The Past Couple of Months”)**:

<table>
<thead>
<tr>
<th></th>
<th>Not In The Past Couple Of Months</th>
<th>Only Once Or Twice</th>
<th>2 or 3 Times A Month</th>
<th>About Once A Week</th>
<th>Several Times A Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) I was called mean names, was made fun of, or teased in a hurtful way.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>B) Other students left me out of things on purpose, excluded me from their group of friends or completely ignored me.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>C) I was hit, kicked, pushed, shoved around, or locked indoors.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>D) Other students told lies or spread false rumors about me and tried to make others dislike me.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>E) I had money or other things taken away from me or damaged.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>F) I was threatened or forced to do things I did not want to do.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>G) I was bullied with mean names or comments about my race or color.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>H) I was bullied with mean names, comments, or gestures with a sexual meaning.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>I) I was bullied with mean or hurtful messages, calls or pictures, or in other ways on my cell phone or over the Internet (computer). <strong>Please remember that it is not bullying when it is done in a friendly and playful way.</strong></td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

If you were bullied on your cell phone or over the internet, how was it done?
☐ I have not been cyber bullied
☐ Only on the cell phone
☐ Only over the internet
☐ In both ways

J) I was bullied in another way. | ☐ | ☐ | ☐ | ☐ | ☐ |

**If you have not been bullied in any of the above ways during the past couple of months, Skip to Q75**

74. **Where** have you been bullied in the **past couple of months**?
☐ I have not been bullied at school
☐ I have been **bullied in one or more of the following places**. **Mark all that apply:**

74a. ☐ On the playground/athletic field (during recess or break times)
☐ In the hallways/stairwells
☐ In class (when the teacher was in the room)
☐ In class (when the teacher was **not** in the room)
☐ In the bathroom
☐ In gym class or the gym locker room/shower
☐ In the lunchroom
☐ On the way to and from school
☐ At the school bus stop
☐ On the school bus
☐ Somewhere else at school
75. Have you **told anyone** that you have been bullied in the **past couple of months**?
   - [ ] I have not been bullied at school
   - [ ] I have been bullied, **but I have not told anyone**
   - [ ] I have been bullied, and I **have told somebody about it**

   **75a. Please mark all the people you have told:**
   - [ ] Your classroom teacher
   - [ ] Another adult at school
   - [ ] Your parent(s)/guardian(s)
   - [ ] Your brother(s) or sisters(s)
   - [ ] Your friend(s)
   - [ ] Somebody else

<table>
<thead>
<tr>
<th></th>
<th>Almost Never</th>
<th>Once In A While</th>
<th>Sometimes</th>
<th>Often</th>
<th>Almost Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>76. How often do the <strong>teachers or other adults at school</strong> try to put a stop to it when a student is being bullied at school?</td>
<td>[ ]</td>
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<tr>
<td>77. How often do <strong>other students</strong> try to put a stop to it when a student is being bullied at school?</td>
<td>[ ]</td>
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</tr>
<tr>
<td>78. Has any adult at home contacted the school to try to stop your being bullied at school in the <strong>past couple of months</strong>?</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
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</tbody>
</table>

- [ ] I have not been bullied at school
- [ ] No, they have not contacted the school
- [ ] Yes, they have contacted the school once
- [ ] Yes, they have contacted the school several times

**The next questions ask about bullying other students.**

79. Have you ever taken part in bullying another student(s) at school? ........... [ ] No [ ] Yes

80. Have you bullied another student(s) at school in the **past couple of months** in one or more of the following ways (If you have never bullied another student, mark **“Not In The Past Couple of Months”**:)

<table>
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<tr>
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<th>Several Times A Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) I called another student(s) mean names and made fun of or teased him/her in a hurtful way</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
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<tr>
<td>B) I kept him/her out of things on purpose, excluded him/her from my group of friends, or completely ignored him/her</td>
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<td>C) I hit, kicked, pushed, and shoved him/her around, or locked him/her indoors</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>D) I spread false rumors about him/her and tried to make others dislike him/her</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
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<td>[ ]</td>
</tr>
<tr>
<td>E) I took money or other things from him/her or damaged his/her belongings</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
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<td>F) I threatened or forced him/her to do things he/she did not want to do</td>
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I) I bullied him/her with mean or hurtful messages, calls or pictures, or in other ways on my cell phone or over the internet (computer) ............................................................

   □ □ □ □ □

   Ia) If you bullied another student(s) on your cell phone or over the internet, how was it done?
   □ I have not cyber bullied another student
   □ Only on the cell phone
   □ Only over the internet
   □ In both ways

J) I bullied him/her in another way ........................................

   □ □ □ □ □

If you have not bullied other student(s) in any of the above ways during the past couple of months, Skip to Q82

81. Has your class or homeroom teacher or any other teacher talked with you about your bullying another student(s) at school in the past couple of months?
   □ I have not bullied another student(s) at school
   □ No, they have not talked with me about it
   □ Yes, they have talked with me about it once
   □ Yes, they have talked with me about it several times

82. Has any adult at home talked with you about your bullying another student(s) at school in the past couple of months?
   □ I have not bullied another student(s) at school
   □ No, they have not talked with me about it
   □ Yes, they have talked with me about it once
   □ Yes, they have talked with me about it several times

The questions below are about smoking, drinking alcohol and drug use. Alcohol includes beer, wine, wine coolers, and liquor such as rum, gin, vodka or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

83. During your life, have you smoked cigarettes? ............................................................... □ No □ Yes

84. During your life, have you drunk wine, beer or other alcohol? ............................... □ No □ Yes

85. During your life, have you used marijuana (sometimes called pot or weed)? .... □ No □ Yes

86. During your life, have you used another illegal drug (ecstasy, methamphetamine, heroin, crack, cocaine, etc.)? .......................................................... □ No □ Yes

87. During your life, have you taken a prescription drug without a doctor's prescription, such as pain killers (like Oxycontin, codeine, or Percocet), stimulants (like Ritalin or Adderall), or depressants (like Valium, Xanax)? .......................................................... □ No □ Yes

88. During the past 30 days, on how many days did you smoke cigarettes?
   □ 0 days  □ 10 to 19 days
   □ 1 or 2 days  □ 20 to 29 days
   □ 3 to 5 days  □ All 30 days
   □ 6 to 9 days
89. During the past 30 days, on how many days did you have at least one drink of alcohol?
- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

90. During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?
- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

91. During the past 30 days, how many times did you use marijuana?
- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

92. During the past 30 days, how many times did you use an illegal drug such as ecstasy, methamphetamines, heroin, crack, cocaine, etc.?
- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

93. During the past 30 days, how many times did you take a prescription drug without a doctor's prescription, such as pain killers (like Oxycontin, codeine, or Percocet), stimulants (like Ritalin or Adderall), or depressants (like Valium, Xanax)?
- 0 times
- 1 or 2 times
- 3 to 9 times
- 10 to 19 times
- 20 to 39 times
- 40 or more times

The next questions ask about smoking, alcohol and other drug use at school.

94. During the past 30 days, on how many days did you smoke cigarettes on school property?
- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

95. During the past 30 days, did you drink alcohol at school? ..........
- No
- Yes
- How many times? _____

96. During the past 30 days, did you use illegal drugs or prescription drugs taken without a doctor's prescription at school? ..............
- No
- Yes
- How many times? _____

97. During the past 30 days, did you go to class under the influence of alcohol? .................................................................
- No
- Yes
- How many times? _____

98. During the past 30 days, did you go to class under the influence of illegal drugs or prescription drugs taken without a doctor's prescription? .................................................................
- No
- Yes
- How many times? _____
99. How many of the students at your school smoke cigarettes? □ Almost None □ A Few □ Some □ Most of Them

100. How many of the students at your school drink alcohol? □ Almost None □ A Few □ Some □ Most of Them

101. How many of the students at your school use marijuana or illegal drugs? □ Almost None □ A Few □ Some □ Most of Them

102. During this school year, did anyone offer, or try to sell or give you an illegal drug other than alcohol or tobacco at your school? □ No □ Yes

103. My friends think it is OK to drink alcohol. □ Strongly Disagree □ Disagree □ Agree □ Strongly Agree

104. My friends drink to get drunk. □ Strongly Disagree □ Disagree □ Agree □ Strongly Agree

105. My friends think that using drugs is a dumb idea. □ Strongly Disagree □ Disagree □ Agree □ Strongly Agree

106. My friends think it is OK to smoke cigarettes. □ Strongly Disagree □ Disagree □ Agree □ Strongly Agree

The following 2 questions are about skipping school.

107. During the past month, I "cut" or skipped classes without an excuse. □ No □ Yes How many times? _____

If you haven’t skipped class in the past month, Go To Q109

108. Why did you cut or skip school in the past month? Mark all that apply
- I wanted to hang out with friends
- I wanted to avoid a bully
- I wanted to avoid a particular teacher
- I didn't want to take a test
- I didn't have my homework done for class
- I wanted to use drugs or alcohol
- I thought it would be fun
- I was talked into it
- I was running late, or missed the bus
- I had a family obligation, or family-related situation
- I felt sick, or had a medical/dental appointment
- I don't like school
- I wanted to eat, or take a longer lunch
- I went to the store/mall
- Other. Please specify: ___________________

The next 5 questions are about gang activity at your school.

109. Are there any gangs at your school? □ No □ Yes □ Don't know

110. Are there gang fights at your school? □ No □ Yes □ Don't know

111. Is there pressure to join gangs at your school? □ No □ Yes □ Don't know

112. Have you been asked/pressured to join a gang at your school? □ No □ Yes

113. Do you belong to a gang? □ No □ Yes

114. Do any of your friends belong to a gang? □ No □ Yes □ Don't know

These questions are about your family and other important people in your life. If you do not live with your parents, answer questions with regard to your guardian.

115. I can tell my parents the way I feel about things. □ Strongly Disagree □ Disagree □ Agree □ Strongly Agree

116. I like to do things with my family. □ Strongly Disagree □ Disagree □ Agree □ Strongly Agree

117. I usually have dinner with my family. □ Strongly Disagree □ Disagree □ Agree □ Strongly Agree

118. My family has rules about where I can go and what I can do. □ Strongly Disagree □ Disagree □ Agree □ Strongly Agree
<table>
<thead>
<tr>
<th></th>
<th>119. When I’m not home, one of my parents knows who I am with</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
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<td>120. When I’m not home, one of my parents knows where I am</td>
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<td>121. My parents know who my friends are</td>
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<td>122. My parents come to activities at my school</td>
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<td>123. My parents make sure I do my homework</td>
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<td>124. My parents notice when I do a good job and let me know</td>
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<td>125. My parents want me to get good grades</td>
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<td>126. My parents talk to me about doing well in school</td>
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<td>127. There will always be people in my life I can count on</td>
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<td>128. Besides my family, there is an adult who I can trust</td>
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<td>129. I believe there is some good in everybody</td>
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<td>130. Important people in my life often let me down</td>
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<td></td>
<td>131. There is someone I can talk to if I have a problem</td>
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</table>

**The next 4 questions ask about your views on health.**

<table>
<thead>
<tr>
<th></th>
<th>132. How important is it to you to be in good shape?</th>
<th>Not Too Important</th>
<th>Important</th>
<th>Quite Important</th>
<th>Very Important</th>
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<td></td>
<td>133. How important is it to you to have plenty of energy?</td>
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<td>134. How important is it to you to keep yourself fit even if it takes some extra effort?</td>
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<td></td>
<td>135. How important is it to you to have good health habits about eating, exercise and sleep?</td>
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</table>

**The next section asks about decisions that you make in your daily life.**

<table>
<thead>
<tr>
<th></th>
<th>136. Can you get a teacher to help you when you get stuck on schoolwork?</th>
<th>Almost Never</th>
<th>Once In A While</th>
<th>Sometimes</th>
<th>Often</th>
<th>Almost Always</th>
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<td>137. Can you study when there are other interesting things to do?</td>
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<td>138. Can you study a whole chapter for a test?</td>
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<td>139. Do you succeed in finishing all your homework every day?</td>
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<td>140. Can you pay attention during every class?</td>
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<td>141. Do you succeed in passing all subjects?</td>
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<td>142. Do you succeed in satisfying your parents with your schoolwork?</td>
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<td>143. Do you succeed in passing tests?</td>
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</table>

**These questions ask for your opinions about different behaviors.**

<table>
<thead>
<tr>
<th></th>
<th>144. It's OK to lie if it will keep your friends from getting in trouble with parents, teachers, or police</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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<td>145. It's OK to make fun of &quot;geeks&quot;</td>
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<td>146. Vandalism actually helps the school because the insurance will buy new equipment for the wrecked stuff</td>
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<td>147. If people leave things lying around outside their home, it's their own fault if their things are taken/stolen</td>
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<td>148. Selling marijuana is no worse than selling alcohol to get people drunk.</td>
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<tr>
<td>Question</td>
<td>Strongly Disagree</td>
<td>Disagree</td>
<td>Agree</td>
<td>Strongly Agree</td>
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<tr>
<td>149. It’s OK to get trashed at parties</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>150. A kid shouldn’t be blamed too much for just going along with his friends in stealing something</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
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<tr>
<td>151. It’s OK to beat someone up if they are being obnoxious and won’t stop when you ask them to</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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</table>

Thank you for participating in this survey!
These 5 questions ask about your friends.

1. I have a friend my age who cares about me. ........................................... □  □  □  □  □
2. I spend most of my free time at school with my friends. ....................... □  □  □  □
3. I feel lonely at school............................................................................. □  □  □  □
4. My friends are interested in what I think and how I feel......................... □  □  □  □
5. When I have personal problems, my friends try to understand and let me know they care. .......................................................... □  □  □  □

The following 4 questions ask about violence and dating.

1. During the past 12 months, did you hit, slap or physically hurt your boyfriend or girlfriend on purpose? ........................................... □ No □ Yes How many times? _____
2. During the past 12 months, did you have or try to have sexual relations with somebody against their will? ........................................... □ No □ Yes How many times? _____
3. During the past 12 months, did your boyfriend or girlfriend ever hit, slap or physically hurt you on purpose? ................................. □ No □ Yes How many times? _____
4. During the past 12 months, have you been physically forced to have sexual intercourse when you did not want to? ......................... □ No □ Yes How many times? _____

The next 7 questions ask about your attitudes regarding guns.

1. The people I respect need a handgun to stand up for themselves..... □  □  □  □  □
2. Flashing a handgun would make me feel great. .................................. □  □  □  □
3. I bet it would feel real cool to walk down the street with a handgun in my pocket .................................................................................. □  □  □  □
4. It would be exciting to hold a loaded handgun................................. □  □  □  □
5. I'd like to have a handgun so that people would look up to me ......... □  □  □  □
6. Carrying a handgun would make me feel powerful and strong. .......................................................... □  □  □  □
7. Carrying a handgun would make me feel safe.................................. □  □  □  □
The following 4 questions are about carrying weapons.

<table>
<thead>
<tr>
<th>0 days</th>
<th>1 day</th>
<th>2 or 3 days</th>
<th>4 or 5 days</th>
<th>6 or more days</th>
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1. During the past 30 days, on how many days did you carry a gun? .................................................................
   [ ] 0 days [ ] 1 day [ ] 2 or 3 days [ ] 4 or 5 days [ ] 6 or more days

2. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club on school property? [ ]
   [ ] 0 days [ ] 1 day [ ] 2 or 3 days [ ] 4 or 5 days [ ] 6 or more days

3. During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club on school property?
   - 0 times [ ]
   - 6 or 7 times [ ]
   - 1 time [ ]
   - 8 or 9 times [ ]
   - 2 or 3 times [ ]
   - 10 or 11 times [ ]
   - 4 or 5 times [ ]
   - 12 or more times [ ]

4. Would it be hard for you to get a gun if you wanted to? ................................................................. [ ] No [ ] Yes [ ] Don't know

These questions ask about how you've been feeling lately.

<table>
<thead>
<tr>
<th>Not At All</th>
<th>A Little</th>
<th>Some</th>
<th>A Lot</th>
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1. In the past 6 months, have you just felt really down about things? [ ]
   - Not At All [ ] A Little [ ] Some [ ] A Lot

2. In the past 6 months, have you felt pretty hopeless about the future? [ ]
   - Not At All [ ] A Little [ ] Some [ ] A Lot

3. In the past 6 months, have you just felt depressed about life in general? ................................................................. [ ]
   - Not At All [ ] A Little [ ] Some [ ] A Lot

The next 6 questions ask about how you've been feeling about your life.

1. During the past 12 months, did you ever seriously consider attempting suicide? ................................................................. [ ] No [ ] Yes

2. During the past 12 months, did you make a plan about how you would attempt suicide? ................................................................. [ ] No [ ] Yes

3. During the past 12 months, how many times did you actually attempt suicide? ................................................................. [ ] 0 Times [ ] 1 Time [ ] 2 or 3 Times [ ] 4 or 5 Times [ ] 6 or More Times

4. If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?
   - I did not attempt suicide during the past 12 months [ ]
   - No [ ]
   - Yes [ ]

5. During the past 12 months, have any of your friends attempted suicide? ................................................................. [ ] No [ ] Yes

6. During the past 12 months, have any of your friends committed suicide? ................................................................. [ ] No [ ] Yes
These 4 questions ask about participation in school activities.

<table>
<thead>
<tr>
<th>Question</th>
<th>Not At All</th>
<th>1 or 2 Times A Month</th>
<th>Once A Week</th>
<th>2 to 3 Times A Week</th>
<th>4 or More Times A Week</th>
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<tbody>
<tr>
<td>1. I am involved in clubs (foreign language clubs, honor society,</td>
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<td>math club, debate team, hobby groups, etc.) at my school...</td>
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<td>2. I am involved in sport teams at my school...</td>
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<td>3. I am involved in performing arts (cheerleading, dance team,</td>
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<td>band, choir, orchestra, drama, etc.) at my school...</td>
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<td>4. I am involved in other activities (school newspaper, yearbook,</td>
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<td>student government, etc.) at my school.</td>
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The next 4 items ask about participation in community-based activities.

<table>
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<tr>
<th>Question</th>
<th>Not At All</th>
<th>1 or 2 Times A Month</th>
<th>Once A Week</th>
<th>2 to 3 Times A Week</th>
<th>4 or More Times A Week</th>
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</thead>
<tbody>
<tr>
<td>1. I am involved in clubs, sport teams, church groups or</td>
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<tr>
<td>other activities outside of school...</td>
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<td>2. I practice or take lessons in activities like music, art,</td>
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<td>drama, dance, horseback riding or martial arts after school or on</td>
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<td>weekends...</td>
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<td>3. I go to church or other religious or faith-based activities</td>
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<td>regularly...</td>
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<td>4. During the past year, how many times did you perform</td>
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<td>any organized community services as a non-paid volunteer, such as</td>
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<td>serving meals to the elderly, picking up litter, helping out at a</td>
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<td>hospital or building homes for the poor?</td>
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<td></td>
<td>0 Times</td>
<td>1 Time</td>
<td>2 or 3 Times</td>
<td>4 or 5 Times</td>
<td>6 or More Times</td>
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</tbody>
</table>
The next 2 questions ask about things you may have done to yourself.

1. Have you ever hurt or injured yourself on purpose, without meaning to end your life?
   - [ ] No
   - [ ] Yes

2. Have you ever done any of the following things to your body: **Mark all that apply**
   - [ ] Put yourself in an extremely dangerous situation, such as racing cars on the street or drinking enough alcohol to pass out.
   - [ ] Used laxatives, diuretics (water tablets), or self-induced vomiting to control your weight
   - [ ] Went on a very strict diet or gone for 24 hours or more without eating anything at all to control your weight
   - [ ] Cut or burned yourself on purpose, without meaning to end your life
   - [ ] Took performance enhancing drugs such as steroids
   - [ ] Other. Please specify: ____________________________________________________________

   *If you feel upset after answering these questions, please contact your school counselor, school social worker or psychologist. Or, you may call the following help lines:*

   **1-800-273-TALK (1-800-273-8255)**
   **1-800-SUICIDE (1-800-784-2433)**

The following 3 questions ask about your health and exercise.

1. In general, how is your health? ..............................................
   - [ ] Poor
   - [ ] Fair
   - [ ] Good
   - [ ] Very Good
   - [ ] Excellent

2. On how many of the **past 7 days** did you exercise or participate in physical activity for **at least 20 minutes** that made you sweat and breathe hard, such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing or similar aerobic activity?
   - [ ] 0 days
   - [ ] 1 day
   - [ ] 2 days
   - [ ] 3 days
   - [ ] 4 days
   - [ ] 5 days
   - [ ] 6 days
   - [ ] 7 days

3. During the **past 7 days**, on how many days were you physically active for **at least 60 minutes per day**? (Add up all the time you spend in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time)?
   - [ ] 0 days
   - [ ] 1 day
   - [ ] 2 days
   - [ ] 3 days
   - [ ] 4 days
   - [ ] 5 days
   - [ ] 6 days
   - [ ] 7 days
These 4 questions ask about safety.

1. **When you rode a bicycle** during the past 12 months, how often did you wear a helmet?
   - [ ] I did not ride a bicycle during the past 12 months
   - [ ] Never wore a helmet
   - [ ] Rarely wore a helmet
   - [ ] Sometimes wore a helmet
   - [ ] Most of the time wore a helmet
   - [ ] Always wore a helmet

2. How often do you wear a seat belt when riding in a car driven by someone else?
   - [ ] Never
   - [ ] Rarely
   - [ ] Sometimes
   - [ ] Most of the time
   - [ ] Always

3. During the past 30 days, how many times did you ride in a car or other vehicle **driven by someone who had been drinking alcohol**?
   - [ ] 0 Times
   - [ ] 1 Time
   - [ ] 2 or 3 Times
   - [ ] 4 or 5 Times
   - [ ] 6 or More Times

4. During the past 30 days, how many times did you drive a car or other vehicle **when you had been drinking alcohol**?
   - [ ] Never
   - [ ] Rarely
   - [ ] Sometimes
   - [ ] Most of the time
   - [ ] Always

The next 8 questions ask about how you respond to pressures in your life.

1. Can you resist peer pressure to do things in school that can get you into trouble?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

2. Can you stop yourself from skipping school when you feel bored or upset?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

3. Can you resist peer pressure to smoke cigarettes?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

4. Can you resist peer pressure to drink beer, wine, or liquor?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

5. Can you resist peer pressure to smoke marijuana?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

6. Can you resist peer pressure to use pills (uppers, downers)?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

7. Can you resist peer pressure to have sexual intercourse?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

8. Can you control your temper?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

The following 8 questions ask about how you deal with feelings.

1. Are you able to succeed in cheering yourself up when an unpleasant event has happened?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

2. Are you able to succeed in becoming calm again when you are very scared?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

3. Can you prevent yourself from getting nervous?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

4. Can you control your feelings?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

5. Can you give yourself a pep talk when you feel low?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

6. Can you tell a friend that you don’t feel well?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

7. Do you succeed in suppressing unpleasant thoughts?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

8. Do you succeed in not worrying about things that might happen?
   - [ ] Almost Never
   - [ ] Once In A While
   - [ ] Sometimes
   - [ ] Often
   - [ ] Almost Always

Thank you for participating in this survey!