Thank you for agreeing to participate in this study. These questions ask your opinion about a number of things concerning you, your friends, your family, your neighborhood, and your community.

DO NOT write your name on this survey. Your individual answers to the survey are anonymous, which means that no one will know how you answered. Student answers will be summarized in a report that will not include anyone’s name. This survey is completely voluntary. You can skip any questions that you do not want to answer.

Be sure to read the instructions below before you begin. Thank you very much.

INSTRUCTIONS

1. This is not a test, so there are no right or wrong answers.

2. All of the questions should be answered by marking one of the answer spaces unless otherwise noted. If you do not find an answer that fits exactly, use the one that comes closest. If any question does not apply to you, or you are not sure what it means, just leave it blank.

3. For questions that have the following answers: NO!! no yes YES!!

Mark the big YES!! if you think the statement is DEFINITELY TRUE for you.
Mark the little yes if you think the statement is MOSTLY TRUE for you.
Mark the little no if you think the statement is MOSTLY NOT TRUE for you.
Mark the big NO!! if you think the statement is DEFINITELY NOT TRUE for you.

Example: Chocolate is the best ice cream flavor.

Mark the big NO!! if you think the statement is DEFINITELY TRUE for you.
Mark the little yes if you think the statement is MOSTLY TRUE for you.
Mark the little no if you think the statement is MOSTLY NOT TRUE for you.
Mark the big NO!! if you think the statement is DEFINITELY NOT TRUE for you.

Example: Chocolate is the best ice cream flavor.

4. Your answers will be read automatically by a scanner and computer. Please follow these instructions carefully.

MARKING INSTRUCTIONS

a. Use a No. 2 pencil or a blue or black pen only.
b. Do not use pens with ink that soaks through the paper.
c. Make solid marks that fill the response completely.
d. Make no stray marks on this form.

This kind of mark will work:
Correct Mark

These kinds of marks will NOT work:
Incorrect Marks

This is the end of the survey. Thank you for participating.
These questions ask for some general information about the people completing the survey.

Please mark the response that best describes you.

1. How old are you?
   - 10
   - 11
   - 12
   - 13
   - 14 or 15
   - 16
   - 17
   - 18
   - 19 or older

2. What grade are you in?
   - 8th
   - 9th
   - 10th
   - 11th
   - 12th

3. Are you:
   - Female
   - Male

4. What do you consider yourself to be?
   Select ONE only.
   - Hispanic or Latino
   - Not Hispanic or Latino

5. What do you consider yourself to be?
   Select ONE OR MORE
   - American Indian or Alaskan native
   - Asian
   - Black or African-American
   - Native Hawaiian or other Pacific Islander
   - White

6. Think of where you live most of the time. Which of the following people live there with you? Choose ALL that apply.
   - Mother
   - Father
   - Stepfather
   - Grandfather(s)
   - Foster parent
   - Other adults (e.g., aunt, uncle, grandmother, grandfather)
   - Other adult
   - Sister(s)
   - Brother(s)
   - Stepbrother(s)
   - Grandmother(s)
   - Other children

7. What language do you use most often at home?
   - English
   - Spanish
   - Another Language

8. Has your parent or guardian ever served in the military (Army, Navy, Air Force, Marines, Coast Guard, National Guard, and Reserves)?
   - Yes
   - No
   - Not Sure

9. Do you have someone in your family (like a parent, brother, sister) who is currently in the military (Army, Navy, Air Force, Marines, Coast Guard, National Guard, and Reserves)?
   - Yes
   - No
   - Not Sure

The next section asks about your experiences at school.

10. Putting them all together, what were your grades like last year?
    - Mostly As
    - Mostly Bs
    - Mostly Cs
    - Mostly Ds
    - Mostly Fs
    - Mostly As
    - Mostly Bs
    - Mostly Cs
    - Mostly Ds
    - Mostly Fs
    - Mostly As
    - Mostly Bs

11. During the last four weeks, how many days of school have you missed because you skipped or ‘cut’?
    - None
    - 1 day
    - 2 days
    - 3 days
    - 4 to 5 days
    - 6 to 10 days
    - 11 or more days

12. I think sometimes it is okay to cheat at school.
    - NO!
    - no
    - yes
    - YES!

How much do you agree or disagree with the following?

13. I can do well in school if I want to.
    - Strongly Agree
    - Agree
    - Not Sure
    - Disagree
    - Strongly Disagree

The next section asks about your experiences related to civic engagement.

14. Has your support system included any adults you consider to be a mentor or role model?
    - Yes
    - No
    - Not Sure

15. During the last 12 months, how many times have you:
    - Never
    - Once
    - Twice
    - 3-4 times
    - 5 or more times

16. ...have you sexually harassed another student?
    - Never
    - 1 to 2 times
    - 3 to 5 times
    - 6 to 9 times
    - 10 to 19 times
    - 20 to 29 times
    - 30 to 39 times
    - 40 or more times

The next section asks about sexual harassment and sexual discrimination. Sexual harassment is unwanted and unwelcome sexual behavior that interferes with someone’s life at school or any school-sponsored activity (like band, sports, field trips, bus rides, or school activities/clubs). Sexual harassment includes unwelcome sexual advances, regardless of sexual orientation; requests for sexual favors; spreading sexual rumors; and other inappropriate verbal, electronic, or physical conduct of a sexual nature. Sexual harassment is NOT behaviors that a person likes or wants or is agreed to between two people (for example, kissing, touching, flirting that you both agree to). Sexual discrimination is a verbal, electronic or physical action that denigrates or shows hostility towards an individual because of his or her sex, sexual orientation, or gender identification. Both sexual harassment and sexual discrimination may create an intimidating, hostile, or offensive learning environment for the victim and/or bystanders.

How many times in the past year:

161. ...has another student sexually harassed you?
    - Never
    - 1 to 2 times
    - 3 to 5 times
    - 6 to 9 times
    - 10 to 19 times
    - 20 to 29 times
    - 30 to 39 times
    - 40 or more times

162. ...were you aware of sexual rumors being spread at school or at a school-sponsored activity, either verbally or through electronic means such as texting or social media?
    - Never
    - 1 to 2 times
    - 3 to 5 times
    - 6 to 9 times
    - 10 to 19 times
    - 20 to 29 times
    - 30 to 39 times
    - 40 or more times

163. ...have you been a leader in a group or organization?
    - Once
    - Twice
    - 3-4 times
    - 5 or more times

164. If I observed or was a victim of sexual discrimination, including sexual harassment or sexual violence, I would known who to report that information to.
    - Strongly Agree
    - Agree
    - Neutral
    - Disagree
    - Strongly Disagree

165. I would feel comfortable reporting sexual discrimination or sexual harassment or assault to school faculty or staff.
    - Strongly Agree
    - Agree
    - Neutral
    - Disagree
    - Strongly Disagree

166. If you would not feel comfortable reporting an act of sexual discrimination or sexual harassment to school faculty or staff, please indicate why: (Choose ALL that apply)
    - I would be more comfortable handling the situation myself
    - I do not know a trusted adult to tell
    - I would be afraid of retaliation or continued harassment
    - I would be too embarrassed to talk about it to an adult
    - I would be afraid people would think it was my fault
    - I do not think my report would be taken seriously and nothing would be done

Please continue to next page
### Think about the people who know you well. How do you think they would rate you on each of these?

#### People who know me would say this:

<table>
<thead>
<tr>
<th>153. Giving up when things get hard for me is ...</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all like me</td>
<td>A little like me</td>
<td>Somewhat like me</td>
<td>Quite like me</td>
<td>Very much like me</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>154. Knowing how to say &quot;no&quot; when someone wants me to do things I know are wrong or dangerous is ...</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all like me</td>
<td>A little like me</td>
<td>Somewhat like me</td>
<td>Quite like me</td>
<td>Very much like me</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>155. Thinking through the possible good and bad results of different choices before I make decisions is ...</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all like me</td>
<td>A little like me</td>
<td>Somewhat like me</td>
<td>Quite like me</td>
<td>Very much like me</td>
</tr>
</tbody>
</table>

### How much do you agree or disagree with the following statements?:

<table>
<thead>
<tr>
<th>156. I get along well with students who are different from me.</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Not Sure</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>157. I know how to disagree without starting an argument or fight.</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Not Sure</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
</tr>
</tbody>
</table>

### On an average school day, how many hours do you spend:

<table>
<thead>
<tr>
<th>20. ...watch TV?</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all</td>
<td>Less than 1 hour per day</td>
<td>1 hour per day</td>
<td>2 hours per day</td>
<td>3 hours per day</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>21. ...play video or computer games or use a computer for something that is not school work? (Count time spent playing games, watching videos, texting, or using social media on your smartphone, computer, Xbox, PlayStation, iPad, or other tablet.)</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all</td>
<td>Less than 1 hour per day</td>
<td>1 hour per day</td>
<td>2 hours per day</td>
<td>3 hours per day</td>
</tr>
</tbody>
</table>

### How many times have you:

<table>
<thead>
<tr>
<th>22. Are there sports teams or other after-school activities for people your age available in your community?</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No!</td>
<td>No</td>
<td>Yes</td>
<td>YES!!</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>23. ...participated in school or non-school-based activities after the regular school day ended (e.g., sports, clubs, art or music groups, student government, scouting, etc.)?</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>I've done it, but not in the past year</td>
<td>Less than once a month</td>
<td>About once a month</td>
<td>Two or three times a month</td>
</tr>
</tbody>
</table>

### On an average school day, how many hours do you spend:

<table>
<thead>
<tr>
<th>24. ...volunteered to do community service?</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>I've done it, but not in the past year</td>
<td>Less than once a month</td>
<td>About once a month</td>
<td>Two or three times a month</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>25. ...doing homework outside of school?</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>Half hour or less</td>
<td>Between a half hour and an hour</td>
<td>1 hour</td>
<td>2 hours</td>
</tr>
</tbody>
</table>
32. My neighbors notice when I am doing a good job and let me know about it.
   ○ NO!  ○ no  ○ yes  ○ YES!!

33. ... Accepting responsibility for my actions when I make a mistake or get in trouble.
   ○ Extremely Important
   ○ Quite Important
   ○ Not Sure
   ○ Somewhat Important
   ○ Not Important

34. ... Doing my best even when I have to do a job I don't like.
   ○ Extremely Important
   ○ Quite Important
   ○ Not Sure
   ○ Somewhat Important
   ○ Not Important

35. ... When things don't go well for me, I am good at finding a way to make things better.
   ○ Strongly Agree
   ○ Agree
   ○ Not Sure
   ○ Disagree
   ○ Strongly Disagree

36. ... I feel as if I can solve most problems in my life.
   ○ Strongly Agree
   ○ Agree
   ○ Not Sure
   ○ Disagree
   ○ Strongly Disagree

37. ... I have much in life to be thankful for.
   ○ Strongly Agree
   ○ Agree
   ○ Not Sure
   ○ Disagree
   ○ Strongly Disagree

38. I try to find different solutions to the problem.
   ○ A lot
   ○ Sometimes
   ○ A little
   ○ Never

39. How much do you agree or disagree with the following?
   ○ Strongly Agree
   ○ Agree
   ○ Not Sure
   ○ Disagree
   ○ Strongly Disagree

40. How much do you do the following when you have a problem of any kind?
   ○ A lot
   ○ Sometimes
   ○ A little
   ○ Never

41. The next section asks about your feelings and experiences in other parts of your life. Remember, your answers are confidential.

42. I try to find different solutions to the problem.
   ○ A lot
   ○ Sometimes
   ○ A little
   ○ Never

43. I ignore rules that get in my way.
   ○ Very false
   ○ Somewhat false
   ○ Somewhat true
   ○ Very true

44. There are lots of adults in my neighborhood I could talk to about something important.
   ○ NO!  ○ no  ○ yes  ○ YES!!

45. I try to find different solutions to the problem.
   ○ A lot
   ○ Sometimes
   ○ A little
   ○ Never

46. ... I have much in life to be thankful for.
   ○ Strongly Agree
   ○ Agree
   ○ Not Sure
   ○ Disagree
   ○ Strongly Disagree

The next section asks about your feelings and experiences in other parts of your life. Remember, your answers are confidential.

47. I ignore rules that get in my way.
   ○ Very false
   ○ Somewhat false
   ○ Somewhat true
   ○ Very true

48. There are lots of adults in my neighborhood I could talk to about something important.
   ○ NO!  ○ no  ○ yes  ○ YES!!

49. I try to find different solutions to the problem.
   ○ A lot
   ○ Sometimes
   ○ A little
   ○ Never

50. The next section asks about your feelings and experiences in other parts of your life. Remember, your answers are confidential.

51. I ignore rules that get in my way.
   ○ Very false
   ○ Somewhat false
   ○ Somewhat true
   ○ Very true

52. There are lots of adults in my neighborhood I could talk to about something important.
   ○ NO!  ○ no  ○ yes  ○ YES!!
128. How did you get the prescription pain reliever? If you got it in more than one way, please choose ONE of these ways as your best answer.
- I did not take a prescription pain reliever without a doctor's order
- I got a prescription from just one doctor
- I got prescriptions from more than one doctor
- I stole it from a doctor's office, clinic, hospital, or pharmacy
- I got it from a friend or relative for free
- I bought it from a friend or relative without asking
- I bought it from a drug dealer or other stranger
- I got it in some other way

The next section asks about sexual behavior. Remember, your answers are confidential.

129. Have you ever had sexual intercourse?
- Yes
- No

130. How old were you when you had sexual intercourse for the first time?
- 11 years old or younger
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old or older

131. During your life, with how many people have you had sexual intercourse?
- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more people

132. During the past 3 months, with how many people have you had sexual intercourse?
- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more people

133. Did you drink alcohol or use drugs before you had sexual intercourse the last time?
- Yes
- No

134. The last time you had sexual intercourse, did you or your partner use a condom?
- Yes
- No

135. The last time you had sexual intercourse, what one method did you or your partner use to prevent pregnancy? Select only ONE response.
- I never had sexual intercourse
- No method was used to prevent pregnancy
- Birth control pills
- An IUD (such as Mirena or ParaGard) or implant (such as Implanon or Nexplanon)
- A shot (such as Depo-Provera), patch (such as Ortho Evra), or birth control ring (such as NuvaRing)
- Withdrawal or some other method
- Not sure

136. Have you ever had oral sex?
- Yes
- No

137. Which of the following best describes you?
- Heterosexual (straight)
- Gay or lesbian
- Bisexual
- Not sure

The next section asks about your family. When answering these questions, please think about the people you consider to be your family; for example, parents, stepparents, grandparents, aunts, uncles, etc.

45. When I am not at home, one of my parents knows where I am and who I am with.
- NO!!
- no
- yes
- YES!!

46. My family has clear rules about alcohol and drug use.
- NO!!
- no
- yes
- YES!!

47. People in my family often insult or yell at each other.
- NO!!
- no
- yes
- YES!!

48. My parent has had his/her body hurt from actions (such as punching, kicking, choking, shaking, and pulling of hair) by a spouse/partner.
- NO!!
- no
- yes
- YES!!

49. If I had a personal problem, I could ask my mom or dad for help.
- NO!!
- no
- yes
- YES!!

50. My parents ask me what I think before making family decisions affecting me.
- NO!!
- no
- yes
- YES!!

The next section asks about things you might have done, or that might have happened to you. Some of the questions are about bullying. Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again. Bullying is any aggressive and unwanted behavior that is intended to harm, intimidate, or humiliate the victim; involves a real or perceived power imbalance between the aggressor and victim; and is repeated over time or causes severe emotional trauma. It is not bullying when 2 students of about the same strength or power argue or fight or tease each other in a friendly way. “Bullying” does not include ordinary teasing, horseplay, argument, or peer conflict.

Remember, your answers are confidential.

51. During the past 12 months, have you ever bullied someone else on school property?
- Yes
- No

52. During the past 12 months, have you ever bullied someone else away from school property?
- Yes
- No
During the past 12 months, have you ever:

53. ...been bullied on school property?
   - Yes
   - No

54. ...been bullied away from school property?
   - Yes
   - No

55. ...carry a weapon such as a gun, knife, or club?
   - 0 days
   - 1 day
   - 2 or 3 days
   - 4 or 5 days
   - 6 or more days

56. ...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

57. During the past 12 months, on how many days did you:
   - Drive a car or other vehicle during the past 30 days
   - Not drive a car or other vehicle during the past 30 days

How many times in the past year have you:

58. ...said something bad about someone's race or culture?
   - Never
   - 1 to 2 times
   - 3 to 5 times
   - 6 to 9 times
   - 10 to 19 times
   - 20 to 29 times
   - 30 to 39 times
   - 40 or more times

60. ...said something bad about your race or culture?
   - Never
   - 1 to 2 times
   - 3 to 5 times
   - 6 to 9 times
   - 10 to 19 times
   - 20 to 29 times
   - 30 to 39 times
   - 40 or more times

61. ...sexually harassed you?
   - Never
   - 1 to 2 times
   - 3 to 5 times
   - 6 to 9 times
   - 10 to 19 times
   - 20 to 29 times
   - 30 to 39 times
   - 40 or more times

62. How many times in the past year has a parent or adult in your household bullied, taunted, ridiculed, or teased you?
   - Never
   - 1 to 2 times
   - 3 to 5 times
   - 6 to 9 times
   - 10 to 19 times
   - 20 to 29 times
   - 30 to 39 times
   - 40 or more times

63. Have you ever been physically forced to have sexual intercourse when you did not want to?
   - Yes
   - No

64. During the past 30 days, how many times have you driven a car or other vehicle when you had been drinking alcohol?
   - 0 times
   - 1 time
   - 2 or 3 times
   - 4 or 5 times
   - 6 or more times

65. During the past 30 days, on how many days did you text or e-mail while driving a car or other vehicle?
   - 0 days
   - 1 or 2 days
   - 3 to 5 days
   - 6 to 9 days
   - 10 to 19 times
   - 20 to 29 times
   - 30 to 39 times
   - 40 or more times

66. During the past 30 days, on how many days did you carry a gun? (Do not count the days when you carried a gun only for hunting or for a sport, such as target shooting.)
   - 0 days
   - 1 day
   - 2 or 3 days
   - 4 or 5 days
   - 6 or more days

67. Have you ever been physically forced to have sexual intercourse when you did not want to?
   - Yes
   - No

The next section asks about prescription pain relievers that you have used without a doctor's order in your lifetime. Examples of prescription pain relievers include Oxycodone, Vicodin, Percocet, Codeine, Methadone, and Fentanyl.
### 103. … used cabeniferol (cabbies) in your lifetime?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 occasions</td>
<td>0-19</td>
</tr>
<tr>
<td>1-2 occasions</td>
<td>20-39</td>
</tr>
<tr>
<td>3-5 occasions</td>
<td>40 or more</td>
</tr>
<tr>
<td>6-9 occasions</td>
<td></td>
</tr>
</tbody>
</table>

### 104. … used cabeniferol (cabbies) in the past 30 days?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 occasions</td>
<td>0-19</td>
</tr>
<tr>
<td>1-2 occasions</td>
<td>20-39</td>
</tr>
<tr>
<td>3-5 occasions</td>
<td>40 or more</td>
</tr>
<tr>
<td>6-9 occasions</td>
<td></td>
</tr>
</tbody>
</table>

### 105. … used LSD or other hallucinogens (acid, angel dust, special k, shrooms) in the past 30 days?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 occasions</td>
<td>0-19</td>
</tr>
<tr>
<td>1-2 occasions</td>
<td>20-39</td>
</tr>
<tr>
<td>3-5 occasions</td>
<td>40 or more</td>
</tr>
<tr>
<td>6-9 occasions</td>
<td></td>
</tr>
</tbody>
</table>

### 106. … used cocaine or crack in the past 30 days?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 occasions</td>
<td>0-19</td>
</tr>
<tr>
<td>1-2 occasions</td>
<td>20-39</td>
</tr>
<tr>
<td>3-5 occasions</td>
<td>40 or more</td>
</tr>
<tr>
<td>6-9 occasions</td>
<td></td>
</tr>
</tbody>
</table>

### 107. … used methamphetamine (speed, crystal, crank, or ice) in the past 30 days?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 occasions</td>
<td>0-19</td>
</tr>
<tr>
<td>1-2 occasions</td>
<td>20-39</td>
</tr>
<tr>
<td>3-5 occasions</td>
<td>40 or more</td>
</tr>
<tr>
<td>6-9 occasions</td>
<td></td>
</tr>
</tbody>
</table>

### 108. … taken steroids without a doctor’s order in the past 30 days?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 occasions</td>
<td>0-19</td>
</tr>
<tr>
<td>1-2 occasions</td>
<td>20-39</td>
</tr>
<tr>
<td>3-5 occasions</td>
<td>40 or more</td>
</tr>
<tr>
<td>6-9 occasions</td>
<td></td>
</tr>
</tbody>
</table>

### 109. … used heroin in the past 30 days?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 occasions</td>
<td>0-19</td>
</tr>
<tr>
<td>1-2 occasions</td>
<td>20-39</td>
</tr>
<tr>
<td>3-5 occasions</td>
<td>40 or more</td>
</tr>
<tr>
<td>6-9 occasions</td>
<td></td>
</tr>
</tbody>
</table>

### 110. … taken painkillers (such as Oxycontin, Vicodin, Percocet, Codeine, and Opium) without a doctor’s order in the past 30 days?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 occasions</td>
<td>0-19</td>
</tr>
<tr>
<td>1-2 occasions</td>
<td>20-39</td>
</tr>
<tr>
<td>3-5 occasions</td>
<td>40 or more</td>
</tr>
<tr>
<td>6-9 occasions</td>
<td></td>
</tr>
</tbody>
</table>

### 111. … taken a prescription drug other than painkillers (such as Ritalin, Adderall, or Xanax) without a doctor’s order in the past 30 days?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 occasions</td>
<td>0-19</td>
</tr>
<tr>
<td>1-2 occasions</td>
<td>20-39</td>
</tr>
<tr>
<td>3-5 occasions</td>
<td>40 or more</td>
</tr>
<tr>
<td>6-9 occasions</td>
<td></td>
</tr>
</tbody>
</table>

### 112. … used Ecstasy in the past 30 days?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 occasions</td>
<td>0-19</td>
</tr>
<tr>
<td>1-2 occasions</td>
<td>20-39</td>
</tr>
<tr>
<td>3-5 occasions</td>
<td>40 or more</td>
</tr>
<tr>
<td>6-9 occasions</td>
<td></td>
</tr>
</tbody>
</table>

### 113. … taken over-the-counter drugs to get high in the past 30 days?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 occasions</td>
<td>0-19</td>
</tr>
<tr>
<td>1-2 occasions</td>
<td>20-39</td>
</tr>
<tr>
<td>3-5 occasions</td>
<td>40 or more</td>
</tr>
<tr>
<td>6-9 occasions</td>
<td></td>
</tr>
</tbody>
</table>

### How old were you when you first:

### 114. … smoked a cigarette, even just a puff?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>12</td>
</tr>
<tr>
<td>10 or younger</td>
<td>13</td>
</tr>
<tr>
<td>11</td>
<td>14</td>
</tr>
</tbody>
</table>

### 115. … had more than a sip or two of beer, wine, or hard liquor (for example, vodka, whiskey, or gin)?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>12</td>
</tr>
<tr>
<td>10 or younger</td>
<td>13</td>
</tr>
<tr>
<td>11</td>
<td>14</td>
</tr>
</tbody>
</table>

### 116. … began drinking alcoholic beverages regularly, that is, at least once or twice a month?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>12</td>
</tr>
<tr>
<td>10 or younger</td>
<td>13</td>
</tr>
<tr>
<td>11</td>
<td>14</td>
</tr>
</tbody>
</table>

### 66. Have you ever belonged to a gang?
<table>
<thead>
<tr>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

### 67. How old were you when you first belonged to a gang?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>0-19</td>
</tr>
<tr>
<td>10 or younger</td>
<td>20-19</td>
</tr>
<tr>
<td>11</td>
<td>20-29</td>
</tr>
<tr>
<td>12</td>
<td>20-39</td>
</tr>
<tr>
<td>13</td>
<td>20-49</td>
</tr>
</tbody>
</table>

### 68. How many of your friends are in a gang?
<table>
<thead>
<tr>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>A lot</td>
</tr>
<tr>
<td>Some</td>
</tr>
<tr>
<td>A few</td>
</tr>
<tr>
<td>None</td>
</tr>
<tr>
<td>Don’t know</td>
</tr>
</tbody>
</table>

### 69. …always wanted to know your whereabouts?
<table>
<thead>
<tr>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

### 70. … called you names or put you down verbally?
<table>
<thead>
<tr>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

### 71. … pressured you into having sex (going all the way) when you didn’t want to?
<table>
<thead>
<tr>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

### During the past 12 months, how many times did someone you were dating or going out with:

### 72. … phisically hurt you on purpose? (Count such things as being hit, slammed into something, or injured with an object or weapon.)
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>I did not date or go out with anyone during the past 12 months</td>
<td></td>
</tr>
<tr>
<td>0 times</td>
<td></td>
</tr>
<tr>
<td>1 time</td>
<td></td>
</tr>
<tr>
<td>2 or 3 times</td>
<td></td>
</tr>
<tr>
<td>4 or 5 times</td>
<td></td>
</tr>
<tr>
<td>6 or more times</td>
<td></td>
</tr>
</tbody>
</table>

### 73. … force you to do sexual things that you did not want to do? (Count such things as kissing, touching, or being physically forced to have sexual intercourse.)
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>I did not date or go out with anyone during the past 12 months</td>
<td></td>
</tr>
<tr>
<td>0 times</td>
<td></td>
</tr>
<tr>
<td>1 time</td>
<td></td>
</tr>
<tr>
<td>2 or 3 times</td>
<td></td>
</tr>
<tr>
<td>4 or 5 times</td>
<td></td>
</tr>
<tr>
<td>6 or more times</td>
<td></td>
</tr>
</tbody>
</table>

### The next section asks about electronic bullying, also known as cyberbullying. Electronic bullying is bullying through e-mail, chat rooms, texting, Instagram, Facebook, or other social media.

### 74. During the past 12 months, have you ever been electronically bullied? (Count being bullied through texting, Instagram, Facebook, or other social media.)
<table>
<thead>
<tr>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

### 75. How many times in the past year have you been cyberbullied by a student who attends your school?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>0-19</td>
</tr>
<tr>
<td>1 time</td>
<td>20-29</td>
</tr>
<tr>
<td>3 times</td>
<td>30-39</td>
</tr>
<tr>
<td>6 or more times</td>
<td>40 or more</td>
</tr>
</tbody>
</table>

### 76. How many times in the past year have you cyberbullied a student attending your school?
<table>
<thead>
<tr>
<th>Options</th>
<th>Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>0-19</td>
</tr>
<tr>
<td>1 time</td>
<td>20-29</td>
</tr>
<tr>
<td>3 times</td>
<td>30-39</td>
</tr>
<tr>
<td>6 or more times</td>
<td>40 or more</td>
</tr>
</tbody>
</table>

### 77. I have the right to say anything I want online, even if what I say hurts someone or violates someone’s privacy.
<table>
<thead>
<tr>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Agree</td>
</tr>
<tr>
<td>Disagree</td>
</tr>
<tr>
<td>Strongly Disagree</td>
</tr>
</tbody>
</table>
The next section asks about your feelings during the past 12 months. Remember, your answers are confidential.

During the past 12 months, did you ever:
80. 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

81. On a scale of 1 to 10 where 1 means you have “little or no stress” and 10 means you have “a great deal of stress,” how would you rate your average level of stress during the past month?
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

The next section asks about your thoughts about and experiences with tobacco, alcohol, and other drugs.

How much do you think people risk harming themselves (physically or in other ways) if they:
82. …smoke one or more packs of cigarettes per day?
- No risk
- Slight risk
- Moderate risk
- Great risk

83. …try marijuana once or twice?
- No risk
- Slight risk
- Moderate risk
- Great risk

84. …smoke marijuana regularly?
- No risk
- Slight risk
- Moderate risk
- Great risk

85. …take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?
- No risk
- Slight risk
- Moderate risk
- Great risk

86. How frequently have you used smokeless tobacco (snuff, plug, dipping tobacco, chew, dissolvable tobacco) during the past 30 days?
- Never
- Once or twice
- Once in a while but not regularly
- About once a day
- More than once a day

87. Have you ever smoked cigarettes in your lifetime?
- Never
- Once or twice
- Once in a while but not regularly
- Regularly in the past
- Regularly now

88. How often have you smoked cigarettes during the past 30 days?
- Not at all
- Less than one cigarette per day
- One to five cigarettes per day
- About one-half pack per day
- About one pack per day
- About one and one half packs per day
- Two or more packs per day

89. To “vape” is to use a device such as a vape-pen, an e-cigarette, an e-hookah, or an e-vaporizer to inhale a mist or vapor into the lungs. Have you ever vaped?
- Yes
- No

90. …vaped nicotine during the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

91. …vaped marijuana during the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

92. …vaped flavoring, without any nicotine or marijuana in it during the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

During the past 30 days, on how many days (if any) have you:
93. …used electronic cigarettes (e-cigarettes)?
- None
- 1-2
- 3-5
- 6-9

94. …taken “synthetic marijuana” (“K2”, “Spice”) to get high?
- None
- 1-2
- 3-5
- 6-9

95. …had beer, wine, or hard liquor in your lifetime (more than just a few sips)?
- None
- 1-2
- 3-5
- 6-9

On how many occasions (if any) have you:
96. …had beer, wine, or hard liquor during the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

97. Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row?
- None
- 1 time
- 2-3 times
- 4 or more times

98. During the past 30 days, how did you usually get the alcohol you drank?
- I did not drink alcohol during the past 30 days
- I bought it in a store such as a liquor store, convenience store, supermarket, discount store, or gas station
- I bought it at a restaurant, bar, or a club
- I bought it at a public event such as a concert or sporting event
- I gave someone else money to buy it for me
- Someone gave it to me
- I took it from a store or family member
- I got it some other way

On how many occasions (if any) have you:
99. …used marijuana in your lifetime?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions

100. …used marijuana during the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

101. …sniffed glue, breathed huffed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high in your lifetime?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

102. …sniffed glue, breathed huffed the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions
The next section asks about your feelings during the past 12 months.
Remember, your answers are confidential.

During the past 12 months, did you ever:

78. ...feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?
- Yes
- No

79. ...seriously consider attempting suicide?
- Yes
- No

80. 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

81. On a scale of 1 to 10 where 1 means you have "little or no stress" and 10 means you have "a great deal of stress," how would you rate your average level of stress during the past month?
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

82. ...smoke one or more packs of cigarettes per day?
- No risk
- Slight risk
- Moderate risk
- Great risk

83. ...try marijuana once or twice?
- No risk
- Slight risk
- Moderate risk
- Great risk

84. ...smoke marijuana regularly?
- No risk
- Slight risk
- Moderate risk
- Great risk

85. ...take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?
- No risk
- Slight risk
- Moderate risk
- Great risk

86. How frequently have you used smokeless tobacco (snuff, plug, dipping tobacco, chewing tobacco, snus, dissolvable tobacco) during the past 30 days?
- Never
- Once or twice
- Once in a while but not regularly
- About once a day
- More than once a day

87. Have you ever smoked cigarettes in your lifetime?
- Never
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- Regularly now

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- Not at all
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- About one-half pack per day
- About one pack per day
- About one and one half packs per day
- Two or more packs per day

89. To "vape" is to use a device such as a vape-pen, an e-cigarette, an e-hookah, or an e-vaporizer to inhale a mist or vapor into the lungs. Have you ever vaped?
- Yes
- No

90. ...vaped nicotine during the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

91. ...vaped marijuana during the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

92. ...vaped flavoring, without any nicotine or marijuana in it during the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

During the last 30 days, on how many days (if any) have you:

93. ...used electronic cigarettes (e-cigarettes)?
- None
- 1-2
- 3-5
- 6-9
- 10-19
- 20-39
- 40 or more

94. ...taken "synthetic marijuana" ("K2", "Spice") to get high?
- None
- 1-2
- 3-5
- 6-9
- 10-19
- 20-39

On how many occasions (if any) have you:

95. ...had beer, wine, or hard liquor in your lifetime (more than just a few sips)?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

96. ...had beer, wine, or hard liquor during the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

97. Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row?
- None
- 1-2
- 3-5
- 6-9
- 10 or more

98. During the past 30 days, how did you usually get the alcohol you drank?
- I did not drink alcohol during the past 30 days
- I bought it in a store such as a liquor store, convenience store, supermarket, discount store, or gas station
- I bought it at a restaurant, bar, or a club
- I bought it at a public event such as a concert or sporting event
- I gave someone else money to buy it for me
- I stole it from a store or family member
- I got it some other way

99. ...used marijuana in your lifetime?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

100. ...used marijuana during the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

101. ...sniffed glue, breathed (huffed) the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high in your lifetime?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

102. ...sniffed glue, breathed (huffed) the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions
103. … used cabeniferol (cabbies) in your lifetime?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

104. … used cabeniferol (cabbies) in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

105. … used LSD or other hallucinogens (acid, angel dust, special k, shrooms) in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

106. … used cocaine or crack in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

107. … used methamphetamine (speed, crystal, crank, or ice) in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

108. … taken steroids without a doctor’s order in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

109. … used heroin in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

110. … taken painkillers (such as Oxycodin, Vicodin, Percocet, Codeine, and Opium) without a doctor’s order in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

111. … taken a prescription drug other than painkillers (such as Ritalin, Adderall, or Xanax) without a doctor’s order in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

112. … used Ecstasy in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

113. … taken over-the-counter drugs to get high in the past 30 days?
- 0 occasions
- 1-2 occasions
- 3-5 occasions
- 6-9 occasions
- 10-19 occasions
- 20-39 occasions
- 40 or more occasions

How old were you when you first:

114. … smoked a cigarette, even just a puff?
- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

115. … had more than a sip or two of beer, wine, or hard liquor (for example, vodka, whiskey, or gin)?
- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

116. … began drinking alcoholic beverages regularly, that is, at least once or twice a month?
- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

66. Have you ever belonged to a gang?
- Yes
- No

67. How old were you when you first belonged to a gang?
- Never have
- 10 or younger
- 11
- 12
- 13
- 14
- 15
- 16
- 17 or older

68. How many of your friends are in a gang?
- A lot
- Some
- A few
- None
- Don’t know

Have you ever had a partner in a dating or serious relationship who:

69. … always wanted to know your whereabouts?
- Yes
- No

70. … called you names or put you down verbally?
- Yes
- No

71. … pressured you into having sex (going all the way) when you didn’t want to?
- Yes
- No

During the past 12 months, how many times did someone you were dating or going out with:

72. … physically hurt you on purpose? (Count such things as being hit, slapped, kicked, choked, or injured with an object or weapon.)
- Never
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

73. … forced you to do sexual things that you did not want to do? (Count such things as kissing, touching, or being physically forced to have sexual intercourse.)
- Never
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

The next section asks about electronic bullying, also known as cyberbullying. Electronic bullying is bullying through e-mail, chat rooms, texting, Instagram, Facebook, or other social media.

74. During the past 12 months, have you ever been electronically bullied? (Count being bullied through texting, Instagram, Facebook, or other social media.)
- Yes
- No

75. How many times in the past year have you been cyberbullied by a student who attends your school?
- Never
- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40 or more times

76. How many times in the past year have you cyberbullied a student attending your school?
- Never
- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40 or more times

77. I have the right to say anything I want online, even if what I say hurts someone or violates someone’s privacy.
- Strongly Agree
- Agree
- Disagree
- Strongly Disagree
During the past 12 months, have you ever:

<table>
<thead>
<tr>
<th>53.</th>
<th>been bullied on school property?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td><strong>54.</strong> been bullied away from school property?</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
</tbody>
</table>

During the past 30 days, on how many days did you:

<table>
<thead>
<tr>
<th>55.</th>
<th>carry a weapon such as a gun, knife, or club?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 days</td>
</tr>
<tr>
<td></td>
<td>1 day</td>
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<tr>
<td></td>
<td>2 or 3 days</td>
</tr>
<tr>
<td></td>
<td>4 or 5 days</td>
</tr>
<tr>
<td></td>
<td>6 or more days</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>56.</th>
<th>carry a weapon such as a gun, knife, or club on school property?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 days</td>
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<td>2 or 3 days</td>
</tr>
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<td></td>
<td>4 or 5 days</td>
</tr>
<tr>
<td></td>
<td>6 or more days</td>
</tr>
</tbody>
</table>

How many times in the past year have you:

<table>
<thead>
<tr>
<th>58.</th>
<th>said something bad about someone’s race or culture?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>1 to 2 times</td>
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<tr>
<td></td>
<td>1 to 5 times</td>
</tr>
<tr>
<td></td>
<td>6 to 9 times</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>59.</th>
<th>been suspended from school?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never</td>
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<tr>
<td></td>
<td>1 to 2 times</td>
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<tr>
<td></td>
<td>1 to 5 times</td>
</tr>
<tr>
<td></td>
<td>6 to 9 times</td>
</tr>
</tbody>
</table>

How many times in the past year has anyone done any of the following to you?

<table>
<thead>
<tr>
<th>60.</th>
<th>said something bad about your race or culture?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>1 to 2 times</td>
</tr>
<tr>
<td></td>
<td>6 to 9 times</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>61.</th>
<th>sexually harassed?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>1 to 2 times</td>
</tr>
<tr>
<td></td>
<td>6 to 9 times</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>62.</th>
<th>How many times in the past year has a parent or adult in your household bullied, taunted, ridiculed, or teased you?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>1 to 2 times</td>
</tr>
<tr>
<td></td>
<td>6 to 9 times</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>63.</th>
<th>Have you ever been physically forced to have sexual intercourse when you did not want to?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>64.</th>
<th>During the past 30 days, how many times have you driven a car or other vehicle when you had been drinking alcohol?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>I did not drive a car or other vehicle during the past 30 days</td>
</tr>
<tr>
<td></td>
<td>0 times</td>
</tr>
<tr>
<td></td>
<td>1 time</td>
</tr>
<tr>
<td></td>
<td>2 or 3 times</td>
</tr>
<tr>
<td></td>
<td>6 or more times</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>65.</th>
<th>During the past 30 days, on how many days did you text or e-mail while driving a car or other vehicle?</th>
</tr>
</thead>
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<tr>
<td></td>
<td>I did not drive a car or other vehicle during the past 30 days</td>
</tr>
<tr>
<td></td>
<td>0 days</td>
</tr>
<tr>
<td></td>
<td>1 to 2 days</td>
</tr>
<tr>
<td></td>
<td>6 to 9 days</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>66.</th>
<th>How many times in the past year has anyone done any of the following to you?</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>1 to 2 times</td>
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<td></td>
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<tr>
<td></td>
<td>6 to 9 times</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>67.</th>
<th>During the past 30 days, how many times have you used illegal drugs?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>I used it for some other reason</td>
</tr>
<tr>
<td></td>
<td>To increase or decrease the effect(s) of some other drug</td>
</tr>
<tr>
<td></td>
<td>To help with my sleep</td>
</tr>
<tr>
<td></td>
<td>To feel good or get high</td>
</tr>
<tr>
<td></td>
<td>To experim ent or to see what it’s like</td>
</tr>
<tr>
<td></td>
<td>To relieve physical pain</td>
</tr>
<tr>
<td></td>
<td>Because I am “hooked” or I have to have it</td>
</tr>
<tr>
<td></td>
<td>I did not take a prescription pain reliever without a doctor’s order</td>
</tr>
</tbody>
</table>

How easy or hard would it be for you to get:

<table>
<thead>
<tr>
<th>68.</th>
<th>some beer, wine, or hard liquor (for example, vodka, whiskey, or gin)?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very hard</td>
</tr>
<tr>
<td></td>
<td>Sort of hard</td>
</tr>
<tr>
<td></td>
<td>Sort of easy</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>69.</th>
<th>cigarettes?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very hard</td>
</tr>
<tr>
<td></td>
<td>Sort of hard</td>
</tr>
<tr>
<td></td>
<td>Sort of easy</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>70.</th>
<th>drugs like cocaine, LSD, or amphetamines?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very hard</td>
</tr>
<tr>
<td></td>
<td>Sort of hard</td>
</tr>
<tr>
<td></td>
<td>Very easy</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>71.</th>
<th>marijuana?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very hard</td>
</tr>
<tr>
<td></td>
<td>Sort of hard</td>
</tr>
<tr>
<td></td>
<td>Very easy</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>72.</th>
<th>How wrong do you think it is for someone your age to:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>drink beer, wine, or hard liquor (for example, vodka, whiskey, or gin) regularly (at least once or twice a month)?</td>
</tr>
<tr>
<td></td>
<td>Very wrong</td>
</tr>
<tr>
<td></td>
<td>A little bit wrong</td>
</tr>
<tr>
<td></td>
<td>Not wrong at all</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>73.</th>
<th>smoke cigarettes?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very wrong</td>
</tr>
<tr>
<td></td>
<td>A little bit wrong</td>
</tr>
<tr>
<td></td>
<td>Not wrong at all</td>
</tr>
</tbody>
</table>

The next section asks about prescription pain relievers that you have used without a doctor’s order in your lifetime. Examples of prescription pain relievers include Oxycontin, Vicodin, Percocet, Codeine, Methadone, and Fentanyl.

117. **smoked marijuana?**

<table>
<thead>
<tr>
<th>Never have</th>
<th>12</th>
<th>15</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 or younger</td>
<td>13</td>
<td>16</td>
</tr>
<tr>
<td>17 or older</td>
<td>14</td>
<td></td>
</tr>
</tbody>
</table>

118. **How easy or hard would it be for you to get:**

119. **some cigarettes?**

120. **drugs like cocaine, LSD, or amphetamines?**

121. **some marijuana?**

122. **How wrong do you think it is for someone your age to:**

123. **smoke cigarettes?**

124. **smoke marijuana?**

125. **use LSD, cocaine, amphetamines, or another illegal drug?**

126. **How wrong would most adults in your neighborhood, or the area around where you live, think it is for kids your age to use marijuana?**

127. **What were the reasons you took a prescription pain reliever without a doctor’s order the last time? Choose ALL that apply.**

| I did not take a prescription pain reliever without a doctor’s order |
| To relieve physical pain |
| To relax or relieve tension |
| To experiment or to see what it’s like |
| To feel good or get high |
| To help with my sleep |
| To help me with my feelings or emotions |
| To increase or decrease the effect(s) of some other drug |
| Because I am “hooked” or I have to have it |
| I used it for some other reason |
The next section asks about sexual behavior. Remember, your answers are confidential.

128. How did you get the prescription pain reliever? If you got it in more than one way, please choose ONE of these ways as your best answer.
○ I did not take a prescription pain reliever without a doctor's order
○ I got a prescription from just one doctor
○ I got prescriptions from more than one doctor
○ I stole it from a doctor's office, clinic, hospital, or pharmacy
○ I got it from a friend or relative for free
○ I bought it from a friend or relative
○ I took it from a friend or relative without asking
○ I bought it from a drug dealer or other stranger
○ I got it in some other way

129. Have you ever had sexual intercourse?
○ Yes
○ No

130. How old were you when you had sexual intercourse for the first time?
○ I have never had sexual intercourse
○ 11 years old or younger
○ 12 years old
○ 13 years old
○ 14 years old
○ 15 years old
○ 16 years old
○ 17 years old or older

131. During your life, with how many people have you had sexual intercourse?
○ I have never had sexual intercourse
○ 1 person
○ 2 people
○ 3 people
○ 4 people
○ 5 people
○ 6 or more people

132. During the past 3 months, with how many people have you had sexual intercourse?
○ I have never had sexual intercourse
○ I had sexual intercourse but not during the past 3 months
○ 1 person
○ 2 people
○ 3 people
○ 4 people
○ 5 people
○ 6 or more people

133. Did you drink alcohol or use drugs before you had sexual intercourse the last time?
○ I have never had sexual intercourse
○ Yes
○ No

The next section asks about things you might have done, or that might have happened to you. Some of the questions are about bullying. Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again. Bullying is any aggressive and unwanted behavior that is intended to harm, intimidate, or humiliate the victim; involves a real or perceived power imbalance between the aggressor or aggressors and victim; and is repeated over time or causes severe emotional trauma. It is not bullying when 2 students of about the same strength or power argue or fight or tease each other in a friendly way. “Bullying” does not include ordinary teasing, horseplay, argument, or peer conflict.

Remember, your answers are confidential.

134. The last time you had sexual intercourse, did you or your partner use a condom?
○ I have never had sexual intercourse
○ Yes
○ No

135. The last time you had sexual intercourse, what one method did you or your partner use to prevent pregnancy? Select only ONE response.
○ I have never had sexual intercourse
○ No method was used to prevent pregnancy
○ Birth control pills
○ Condoms
○ An IUD (such as Mirena or ParaGard) or implant (such as Implanon or Nexplanon)
○ A shot (such as Depo-Provera), patch (such as Ortho Evra), or birth control ring (such as NuvaRing)
○ Withdrawal or some other method
○ Not sure

136. Have you ever had oral sex?
○ Yes
○ No

137. Which of the following best describes you?
○ Heterosexual (straight)
○ Gay or lesbian
○ Bisexual
○ Not sure

138. During the past 30 days, did you or your partner use a condom each time? (Select one answer)
○ Yes
○ No

139. How many times have you changed homes since kindergarten?
○ None
○ 1-2 times
○ 3-4 times
○ 5-6 times
○ 7 or more times

140. How did you get the prescription pain reliever?
○ I got a prescription from just one doctor
○ I got prescriptions from more than one doctor
○ I stole it from a doctor's office, clinic, hospital, or pharmacy
○ I got it from a friend or relative for free
○ I bought it from a friend or relative
○ I took it from a friend or relative without asking
○ I bought it from a drug dealer or other stranger
○ I got it in some other way

141. During the past 30 days, how often did you go hungry because there was not enough food in your home?
○ Never
○ Rarely
○ Sometimes
○ Most of the time
○ Always

142. During the past 30 days, how often did you go hungry because there was not enough money to pay for things you needed?
○ Never
○ Rarely
○ Sometimes
○ Most of the time
○ Always

143. During the past 60 days, have you had sexual intercourse with someone new?
○ Yes
○ No

144. I feel safe in my neighborhood, or the area around where I live.
○ No

145. When I am not at home, one of my parents knows where I am and who I am with.
○ Yes
○ No

146. My family has clear rules about alcohol and drug use.
○ Yes
○ No

147. People in my family often insult or yell at each other.
○ Yes
○ No

148. My parents have had his/her body hurt from assault, or been a witness to it.
○ Yes
○ No

149. If I had a personal problem, I could ask my mom or dad for help.
○ Yes
○ No

150. My parents ask me what I think before most family decisions affecting me are made.
○ Yes
○ No

151. During the past 12 months, have you ever bullied someone else on school property?
○ Yes
○ No

152. During the past 12 months, have you ever bullied someone else away from school property?
○ Yes
○ No

How wrong do your parents feel it would be for you to:

39. ...drink beer, wine, or hard liquor (for example, vodka, whiskey, or gin) regularly (at least once or twice a month)?
○ Very wrong
○ Wrong
○ A little bit wrong
○ Not wrong at all

40. ...smoke cigarettes?
○ Very wrong
○ Wrong
○ A little bit wrong
○ Not wrong at all

41. ...smoke marijuana?
○ Very wrong
○ Wrong
○ A little bit wrong
○ Not wrong at all

42. Did you drink alcohol or use drugs before you had sexual intercourse the last time?
○ Yes
○ No

43. During the past 30 days, how often did you feel safe in your neighborhood, or the area around where you live?
○ Never
○ Rarely
○ Sometimes
○ Most of the time
○ Always
### How important is each of the following to you in your life?

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Not Sure</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>33. ... Accepting responsibility for my actions when I make a mistake or get in trouble.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>34. ... Doing my best even when I have to do a job I don’t like.</td>
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<td></td>
<td></td>
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<td></td>
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<tr>
<td>35. ... When things don’t go well for me, I am good at finding a way to make things better.</td>
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</tr>
<tr>
<td>36. ... I feel as if I can solve most problems in my life.</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>37. ... I have much in life to be thankful for.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>38. I try to find different solutions to the problem.</td>
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</tbody>
</table>

### How much do you agree or disagree with the following?

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Agree</th>
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<th>Not Sure</th>
<th>Disagree</th>
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<td></td>
<td></td>
<td></td>
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</tbody>
</table>

### How much do you do the following when you have a problem of any kind?

<table>
<thead>
<tr>
<th>Question</th>
<th>1 tim e per day</th>
<th>2 tim es per day</th>
<th>3 tim es per day</th>
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</tbody>
</table>

### The next section asks about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

#### During the past 7 days, how many times did you:

<table>
<thead>
<tr>
<th>Question</th>
<th>1 tim e per day</th>
<th>2 tim es per day</th>
<th>3 tim es per day</th>
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### How much do you agree or disagree with the following?

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<th>Not Sure</th>
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### How much do you do the following when you have a problem of any kind?

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<th>2 tim es per day</th>
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147. Drink a can, bottle, or glass of a sports drink, such as Gatorade or Powerade? (Do not count low-calorie sports drinks such as Propel or G2.)

- I did not drink sports drinks during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

During the past 30 days, did you:

148. ...go without eating for 24 hours or more (also called fasting) to lose weight or to keep from gaining weight?

- Yes
- No

149. ...take any diet pills, powders, or liquids without a doctor’s advice to lose weight or to keep from gaining weight? Do not include meal replacement products (such as Slim Fast).

- Yes
- No

150. ...vomit or take laxatives to lose weight or to keep from gaining weight?

- Yes
- No

The next section asks about physical activity.

151. During the past 7 days, on how many days were you physically active for a total of 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

152. On an average school night, how many hours of sleep do you get?

- 4 or less hours
- 5 hours
- 6 hours
- 7 hours
- 8 hours
- 9 hours
- 10 or more hours
- 11 hours

Think about the people who know you well. How do you think they would rate you on each of these?

People who know me would say this:

153. Giving up when things get hard for me is ...

- Not at all like me
- A little like me
- Somewhat like me
- Quite like me
- Very much like me

154. Knowing how to say “no” when someone wants me to do things I know are wrong or dangerous is ...

- Not at all like me
- A little like me
- Somewhat like me
- Quite like me
- Very much like me

155. Thinking through the possible good and bad results of different choices before I make decisions is ...

- Not at all like me
- A little like me
- Somewhat like me
- Quite like me
- Very much like me

How much do you agree or disagree with the following statements?

156. I get along well with students who are different from me.

- Strongly Agree
- Agree
- Not Sure
- Disagree
- Strongly Disagree

157. I know how to disagree without starting an argument or fight.

- Strongly Agree
- Agree
- Not Sure
- Disagree
- Strongly Disagree

14. Do you agree or disagree that harassment and bullying by other students is a problem at your school?

- Strongly Agree
- Agree
- Neutral
- Disagree
- Strongly Disagree

15. My teacher notices when I am doing a good job and lets me know about it.

- NO!
- no
- yes
- YES!!

16. I feel safe at my school.

- NO!
- no
- yes
- YES!!

17. There are lots of chances for students at my school to talk with a teacher one-on-one.

- NO!
- no
- yes
- YES!!

18. The school lets my parents know when I have done something well.

- NO!
- no
- yes
- YES!!

19. My teachers praise me when I have done well in school.

- NO!
- no
- yes
- YES!!

The next section asks about how you spend your time after school.

On an average school day, how many hours do you:

20. ...watch TV?

- Not at all
- Less than 1 hour per day
- 1 hour per day
- 2 hours per day
- 3 hours per day
- 4 hours per day
- 5 or more hours per day

21. ...play video or computer games or use a computer for something that is not school work? (Count time spent playing games, watching videos, texting, or using social media on your smartphone, computer, Xbox, PlayStation, iPad, or other tablet.)

- Not at all
- Less than 1 hour per day
- 1 hour per day
- 2 hours per day
- 3 hours per day
- 4 hours per day
- 5 or more hours per day

22. Are there sports teams or other after-school activities for people your age available in your community?

- NO!
- no
- yes
- YES!!

How many times have you:

23. ...participated in school or non-school-based activities after the regular school day ended (e.g., sports, clubs, art or music groups, student government, scouting, etc.)?

- Never
- I've done it, but not in the past year
- Less than once a month
- About once a month
- Two or three times a month
- Once a week or more

24. ...volunteered to do community service?

- Never
- I've done it, but not in the past year
- Less than once a month
- About once a month
- Two or three times a month
- Once a week or more

On an average school day, how many hours do you spend:

25. ...doing homework outside of school?

- None
- Half hour or less
- Between a half hour and an hour
- 1 hour
- 2 hours
- 3 hours or more
These questions ask for some general information about the people completing the survey.

Please mark the response that best describes you.

### 1. How old are you?
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19 or older

### 2. What grade are you in?
- 8th
- 9th
- 10th
- 11th
- 12th

### 3. Are you:
- Female
- Male

### 4. What do you consider yourself to be?
Select ONE only.
- Hispanic or Latino
- Not Hispanic nor Latino
- American Indian or Alaskan native
- Asian
- Black or African-American
- Native Hawaiian or other Pacific Islander
- White

### 5. What do you consider yourself to be?
Select ONE OR MORE.
- Mother
- Father
- Stepmother
- Stepfather
- Grandmother(s)
- Grandfather(s)
- Sister(s)
- Brother(s)
- Stepister(s)
- Stepbrother(s)
- Foster parent
- Other adults
- Other children

### 6. Where do you live most of the time?
Which of the following people live there with you? Choose ALL that apply.

### 7. What language do you use most often at home?
- English
- Spanish
- Another Language

### 8. Has your parent or guardian ever served in the military (Army, Navy, Air Force, Marines, Coast Guard, National Guard, and Reserves)?
- Yes
- No
- Not Sure

### 9. Do you have someone in your family (like a parent, brother, sister) who is currently in the military (Army, Navy, Air Force, Marines, Coast Guard, National Guard, and Reserves)?
- Yes
- No
- Not Sure

### 10. Putting them all together, what were your grades like last year?
- Mostly As
- Mostly Bs
- Mostly Cs
- Mostly Ds
- Mostly Fs
- Mostly As
- Mostly Bs
- Mostly Cs
- Mostly Ds
- Mostly Fs

### 11. During the last four weeks, how many days of school have you missed because you skipped or 'cut'?
- None
- 1 day
- 2 days
- 3 days
- 4-5 days
- 6-10 days
- 11 or more days

### 12. I think sometimes it is okay to cheat at school.
- NO!
- no
- yes
- YES!!

### 13. I can do well in school if I want to.
- Strongly Agree
- Agree
- Not Sure
- Disagree
- Strongly Disagree

### The next section asks about your experiences related to civic engagement.

### During the last 12 months, how many times have you:

158. ...been a leader in a group or organization?
- Never
- Once
- Twice
- 3-4 times
- 5 or more times

159. ...helped make sure that all people are treated fairly?
- Never
- Once
- Twice
- 3-4 times
- 5 or more times

160. ...stood up for what you believed, even when it was unpopular to do so?
- Never
- Once
- Twice
- 3-4 times
- 5 or more times

### The next section asks about your experiences related to sexual harassment and sexual discrimination. Sexual harassment is unwanted and unwelcome sexual behavior that interferes with someone's life at school or any school sponsored activity (like band, sports, field trips, bus rides, or school activities/clubs). Sexual harassment includes unwelcome sexual advances, regardless of sexual orientation; requests for sexual favors; spreading sexual rumors; and other inappropriate verbal, electronic, or physical conduct of a sexual nature. Sexual harassment is NOT behaviors that a person likes or wants or is agreed to between two people (for example, kissing, touching, flirting that you both agree to). Sexual discrimination is a verbal, electronic or physical action that denigrates or shows hostility towards an individual because of his or her sex, sexual orientation, or gender identification. Both sexual harassment and sexual discrimination may create an intimidating, hostile, or offensive learning environment for the victim and bystanders.

### How many times in the past year:

161. ...has another student sexually harassed you?
- Never
- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40 or more times

### 162. ...have you sexually harassed another student?
- Never
- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40 or more times

### 163. ...were you aware of sexual rumors being spread at school or at a school-sponsored activity, either verbally or through electronic means such as texting or social media?
- Never
- 1 to 2 times
- 3 to 5 times
- 6 to 9 times
- 10 to 19 times
- 20 to 29 times
- 30 to 39 times
- 40 or more times

### 164. If I observed or was a victim of sexual discrimination, including sexual harassment or sexual violence, I would know who to report that information to.
- Strongly Agree
- Agree
- Neutral
- Disagree
- Strongly Disagree

### 165. I would feel comfortable reporting sexual discrimination or sexual harassment to school faculty or staff.
- Strongly Agree
- Agree
- Neutral
- Disagree
- Strongly Disagree

### 166. If you would not feel comfortable reporting an act of sexual discrimination or sexual harassment to school faculty or staff, please indicate why: (Choose ALL that apply)
- I would be too embarrassed to talk about it to an adult
- I would be afraid I would get in trouble
- I do not think my report would be taken seriously and nothing would be done
- I would be afraid I would get in trouble
- I do not think my report would be taken seriously and nothing would be done
- I would be afraid I would get in trouble
- I do not think my report would be taken seriously and nothing would be done

Please continue to next page.
Thank you for agreeing to participate in this study. These questions ask your opinion about a number of things concerning you, your friends, your family, your neighborhood, and your community.

DO NOT write your name on this survey. Your individual answers to the survey are anonymous, which means that no one will know how you answered. Student answers will be summarized in a report that will not include anyone’s name. This survey is completely voluntary. You can skip any questions that you do not want to answer.

Be sure to read the instructions below before you begin. Thank you very much.

1. This is not a test, so there are no right or wrong answers.

2. All of the questions should be answered by marking one of the answer spaces unless otherwise noted. If you do not find an answer that fits exactly, use the one that comes closest. If any question does not apply to you, or you are not sure what it means, just leave it blank.

3. For questions that have the following answers: NO!! no yes YES!!
Mark the big YES!! if you think the statement is DEFINITELY TRUE for you.
Mark the little yes if you think the statement is MOSTLY TRUE for you.
Mark the little no if you think the statement is MOSTLY NOT TRUE for you.
Mark the big NO!! if you think the statement is DEFINITELY NOT TRUE for you.

Example: Chocolate is the best ice cream flavor.
Mark the big NO!! no yes YES!!

4. Your answers will be read automatically by a scanner and computer. Please follow these instructions carefully.

This kind of mark will work:
Correct Mark

These kinds of marks will NOT work:
Incorrect Marks