

1. Which of the following best describes your gender? (*Check all that apply.*)

*Select all that apply.*

- |                          |              |
|--------------------------|--------------|
| <input type="checkbox"/> | Male         |
| <input type="checkbox"/> | Female       |
| <input type="checkbox"/> | Transgender  |
| <input type="checkbox"/> | I don't know |

2. What is your race or ethnicity? (*Please pick only one answer.*)

*Select one.*

- |                       |                               |
|-----------------------|-------------------------------|
| <input type="radio"/> | African American              |
| <input type="radio"/> | American Indian/Alaska Native |
| <input type="radio"/> | Asian                         |
| <input type="radio"/> | Hispanic/Latino               |
| <input type="radio"/> | Filipino                      |
| <input type="radio"/> | Pacific Islander              |
| <input type="radio"/> | White                         |
| <input type="radio"/> | Two or More Races/Ethnicities |

3. What grade are you in?

*Select one.*

- |                       |            |
|-----------------------|------------|
| <input type="radio"/> | 3rd grade  |
| <input type="radio"/> | 4th grade  |
| <input type="radio"/> | 5th grade  |
| <input type="radio"/> | 6th grade  |
| <input type="radio"/> | 7th grade  |
| <input type="radio"/> | 8th grade  |
| <input type="radio"/> | 9th grade  |
| <input type="radio"/> | 10th grade |
| <input type="radio"/> | 11th grade |
| <input type="radio"/> | 12th grade |
| <input type="radio"/> | Other      |

4. What is your home language?

*Select one.*

<input type="radio"/>	English
<input type="radio"/>	Spanish
<input type="radio"/>	Chinese
<input type="radio"/>	Vietnamese
<input type="radio"/>	Arabic
<input type="radio"/>	Cambodian or Khmer
<input type="radio"/>	Other

5. What best describes where you live? A home includes a house, apartment, trailer, or mobile home.

*Select one.*

<input type="radio"/>	A home with one or more parents or guardian
<input type="radio"/>	Other relative's home
<input type="radio"/>	A home with more than one family
<input type="radio"/>	Friend's home
<input type="radio"/>	Foster home, group care, or waiting placement
<input type="radio"/>	Hotel or motel
<input type="radio"/>	Shelter, car, campground, or other transitional or temporary housing
<input type="radio"/>	Other living arrangement

6. Which of the following best describes your sexual orientation?

*Select one.*

<input type="radio"/>	Heterosexual (straight)
<input type="radio"/>	Gay or Lesbian
<input type="radio"/>	Bisexual
<input type="radio"/>	Not sure

7. How long have you lived in the US?

Select one.

- I was born in the US
- More than 10 years
- 4-10 years
- 1-3 years
- Less than 1 year

8. During the past 12 months, how would you describe the grades you mostly received in school?

Select one.

- Mostly A's
- A's and B's
- Mostly B's
- B's and C's
- Mostly C's
- C's and D's
- Mostly D's
- Mostly F's

9. What is the highest level of education your parents completed? *(Mark the educational level of the parent who went the furthest in school.)*

Select one.

- Elementary school
- Middle/junior high school
- Started but did not finish high school
- Graduated from high school
- Attended college but did not complete four-year degree
- Graduated from college
- Don't know

10. Are you enrolled in a pathway or career academy at your high school?

*Select one.*

<input type="radio"/>	Yes
<input type="radio"/>	No
<input type="radio"/>	Not sure, I don't know, or not applicable



11. How strongly do you agree or disagree with the following statements?

Select one per row.

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree Nor Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
School rules are applied equally to all students.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults at this school help students resolve conflicts through mediation/r estorative justice.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My class lessons include examples of my racial, ethnic, or cultural background .	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have been disrespected by an adult at this school because of my race, ethnicity, or culture.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults get along well with students from different cultural background	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

s.					
Teachers at this school have good relationships with students.	○	○	○	○	○
Adults at school encourage me to work hard in school so I can be successful in college or at the job I choose.	○	○	○	○	○
My teachers work hard to help me with my schoolwork when I need it.	○	○	○	○	○
Teachers give students a chance to take part in classroom discussions or activities.	○	○	○	○	○
This school promotes academic success for all students.	○	○	○	○	○
This school is a supportive and inviting place for students to learn.	○	○	○	○	○

Teachers go out of their way to help students.	<input type="radio"/>				
I feel close to people at this school.	<input type="radio"/>				
I am happy to be at this school.	<input type="radio"/>				
I feel like I am part of this school.	<input type="radio"/>				
The teachers at this school treat students fairly.	<input type="radio"/>				
I feel safe in my school.	<input type="radio"/>				
This school clearly informs students what would happen if they break school rules.	<input type="radio"/>				
Rules in this school are made clear to students.	<input type="radio"/>				
Students know how they are expected to act.	<input type="radio"/>				
Students know what	<input type="radio"/>				

the rules are.					
This school makes it clear how students are expected to act.	<input type="radio"/>				

12. How strongly do you agree or disagree with the following statements?					
<i>Select one per row.</i>					
	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree Nor Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
Adults at this school treat all students with respect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Students treat teachers with respect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The school rules are fair.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
All students are treated fairly when they break school rules.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Next are questions about violence, safety, harassment, & bullying on school property.**

13. How safe do you feel when you are at school?

*Select one.*

- |                       |                         |
|-----------------------|-------------------------|
| <input type="radio"/> | Very Unsafe             |
| <input type="radio"/> | Unsafe                  |
| <input type="radio"/> | Neither Safe nor Unsafe |
| <input type="radio"/> | Safe                    |
| <input type="radio"/> | Very Safe               |

14. During the past 12 months, how many times on school property have you...

Select one per row.

	<i>0 Times</i>	<i>1 Time</i>	<i>2 to 3 Times</i>	<i>4 or More Times</i>
been pushed, shoved, slapped, hit or kicked by someone who wasn't just kidding around?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
been afraid of being beaten up?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
had mean rumors or lies spread about you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
had sexual jokes, comments, or gestures made to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
been made fun of because of your looks or the way you talk?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
had your property stolen, or deliberately damaged, such as your car, clothes, or books?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**We'd like to learn more about your behavior, experiences, and attitudes related to school.**

15. During the past 30 days...

Select one per row.

	<i>Almost Never</i>	<i>Once in a While</i>	<i>Sometimes</i>	<i>Often</i>	<i>Almost All the Time</i>
I came to class prepared.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I remembered and followed directions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I got my work done right away instead of waiting until the last minute.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I paid attention, even when there were distractions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I worked independently with focus.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I stayed calm even when others bothered or criticized me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I allowed others to speak without interruption.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I was polite to adults and peers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I kept my temper in check.	<input type="radio"/>				
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In this section, please think about your learning in general.

16. How true are the following about you?

Select one per row.

	<i>Completely True</i>	<i>Mostly True</i>	<i>Somewhat True</i>	<i>A Little True</i>	<i>Not At All True</i>
My intelligence is something that I can't change very much.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Challenging myself won't make me any smarter.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There are some things I am not capable of learning.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If I am not naturally smart in a subject, I will never do well in it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. How confident are you about the following?

Select one per row.

	<i>Not At All Confident</i>	<i>A Little Confident</i>	<i>Somewhat Confident</i>	<i>Mostly Confident</i>	<i>Completely Confident</i>
I can earn an A in my classes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can do well on all my tests, even when they're difficult.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can master the hardest topics in my classes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can meet all the learning goals my teachers set.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**In this section, please help us better understand your thoughts and actions when you are with other people.**

18. During the past 30 days, how carefully did you listen to other people's points of view?

*Select one.*

- |                       |                      |
|-----------------------|----------------------|
| <input type="radio"/> | Not carefully at all |
| <input type="radio"/> | Slightly carefully   |
| <input type="radio"/> | Somewhat carefully   |
| <input type="radio"/> | Quite carefully      |
| <input type="radio"/> | Extremely carefully  |

19. During the past 30 days, how much did you care about other people's feelings?

*Select one.*

- |                       |                           |
|-----------------------|---------------------------|
| <input type="radio"/> | Did not care at all       |
| <input type="radio"/> | Cared a little bit        |
| <input type="radio"/> | Cared somewhat            |
| <input type="radio"/> | Cared quite a bit         |
| <input type="radio"/> | Cared a tremendous amount |

20. During the past 30 days, how often did you compliment others' accomplishments?

*Select one.*

- |                       |                        |
|-----------------------|------------------------|
| <input type="radio"/> | Almost never           |
| <input type="radio"/> | Once in a while        |
| <input type="radio"/> | Sometimes              |
| <input type="radio"/> | Often                  |
| <input type="radio"/> | Almost all of the time |

21. During the past 30 days, how well did you get along with students who are different from you?

*Select one.*

- |                       |                          |
|-----------------------|--------------------------|
| <input type="radio"/> | Did not get along at all |
| <input type="radio"/> | Got along a little bit   |
| <input type="radio"/> | Got along somewhat       |
| <input type="radio"/> | Got along pretty well    |
| <input type="radio"/> | Got along extremely well |

22. During the past 30 days, how clearly were you able to describe your feelings?

*Select one.*

- |                       |                    |
|-----------------------|--------------------|
| <input type="radio"/> | Not at all clearly |
| <input type="radio"/> | Slightly clearly   |
| <input type="radio"/> | Somewhat clearly   |
| <input type="radio"/> | Quite clearly      |
| <input type="radio"/> | Extremely clearly  |

23. During the past 30 days, when others disagreed with you, how respectful were you of their views?

*Select one.*

- |                       |                       |
|-----------------------|-----------------------|
| <input type="radio"/> | Not at all respectful |
| <input type="radio"/> | Slightly respectful   |
| <input type="radio"/> | Somewhat respectful   |
| <input type="radio"/> | Quite respectful      |
| <input type="radio"/> | Extremely respectful  |

24. During the past 30 days, to what extent were you able to...

Select one per row.

	<i>Not at All</i>	<i>A Little Bit</i>	<i>Somewhat</i>	<i>Quite a Bit</i>	<i>A Tremendous Amount</i>
stand up for yourself without putting others down?	<input type="radio"/>				
disagree with others without starting an argument?	<input type="radio"/>				

Please mark how TRUE you feel each of the following statements is about your SCHOOL and things you might do there.

25. At my school, there is a teacher or some other adult...

Select one per row.

	<i>Not At All True</i>	<i>A Little True</i>	<i>Pretty Much True</i>	<i>Very Much True</i>
who really cares about me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
who tells me when I do a good job.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
who notices when I'm not there.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
who believes that I will be a success.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. During this school year, how often have you participated in Student Leadership clubs or extracurricular activities?

Select one.

<input type="radio"/> 0 times
<input type="radio"/> 1 time
<input type="radio"/> 2 to 3 times
<input type="radio"/> 4 or more times

27. How strongly do you agree or disagree with the following statements?

Select one per row.

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree Nor Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
Students at this school often call each other "dyke," "faggot" or "gay" as an insult.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults at this school intervene when someone is being bullied.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

28. During the past 12 months, how many times on school property have you been harassed or bullied because you are gay or lesbian or someone thought you were?

Select one.

<input type="radio"/> 0 times
<input type="radio"/> 1 time
<input type="radio"/> 2 or 3 times
<input type="radio"/> 4 or more times

29. During the past 30 days, on how many days did you not go to school because you felt unsafe at school?

Select one.

<input type="radio"/> 0 days
<input type="radio"/> 1 day
<input type="radio"/> 2 days
<input type="radio"/> 3 days
<input type="radio"/> 4 days or more

30. Do you consider yourself a member of a gang?

*Select one.*

- No
- Yes

31. I have participated in the following career-related activities at this school. (*Mark all that apply.*)

*Select all that apply.*

- |                          |   |
|--------------------------|---|
| <input type="checkbox"/> | Career exploration like career fairs, job shadowing, field trips to organizations, or career assessments                      |
| <input type="checkbox"/> | Classes focused on preparing students for careers in a specific industry (like construction, business, health care or others) |
| <input type="checkbox"/> | Paid or unpaid internship or apprenticeship at a company or at school   |
| <input type="checkbox"/> | None of the above or don't know   |

32. How much would you agree that school has given you the skills and knowledge you need to get a job after high school, get job training, and/or go to college?

*Select one.*

- |                       |                            |
|-----------------------|----------------------------|
| <input type="radio"/> | Strongly disagree          |
| <input type="radio"/> | Disagree                   |
| <input type="radio"/> | Neither agree nor disagree |
| <input type="radio"/> | Agree                      |
| <input type="radio"/> | Strongly agree             |

33. Do you have someone (like a mentor) who advised and helped you think about your future, such as how to get a job, get job training, and/or go to college?

*Select one.*

- |                       |                        |
|-----------------------|------------------------|
| <input type="radio"/> | Yes, at school         |
| <input type="radio"/> | Yes, outside of school |
| <input type="radio"/> | No                     |

34. What do you plan to do after high school?

*Select one.*

<input type="radio"/>	Go to a 2 year college
<input type="radio"/>	Go to a 4 year college/university
<input type="radio"/>	Attend a trade school or receive other job training
<input type="radio"/>	Go to work
<input type="radio"/>	Enter the military
<input type="radio"/>	Travel for a while
<input type="radio"/>	Volunteer or do an internship
<input type="radio"/>	I don't know yet

35. In my home, there is a parent or some other adult...

Select one per row.

	<i>Not At All True</i>	<i>A Little True</i>	<i>Somewhat True</i>	<i>Mostly True</i>	<i>Completely True</i>
who is interested in my school work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
who believes that I will be a success.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
who listens to me when I have something to say.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

36. I believe I will go to college and graduate from college.

Select one.

<input type="radio"/>	Strongly agree
<input type="radio"/>	Agree
<input type="radio"/>	Disagree
<input type="radio"/>	Strongly disagree
<input type="radio"/>	Not applicable

37. Where do you USUALLY go for health care (to get help from a doctor or nurse)?  
(Check one.)

Select one.

- |                       |  |
|-----------------------|--|
| <input type="radio"/> | The health center or clinic at my school |
| <input type="radio"/> | Kaiser                                   |
| <input type="radio"/> | Hospital or emergency room               |
| <input type="radio"/> | Private doctor                           |
| <input type="radio"/> | Community clinic                         |
| <input type="radio"/> | Some other place                         |
| <input type="radio"/> | I don't have anywhere to go              |
| <input type="radio"/> | I don't know                             |

38. When was the last time you saw a doctor or nurse for a physical exam or check-up when you were not sick or hurt? (Check one.)

Select one.

- |                       |  |
|-----------------------|--|
| <input type="radio"/> | I've never had a physical exam or check-up |
| <input type="radio"/> | Within the last year                       |
| <input type="radio"/> | 1 to 2 years ago                           |
| <input type="radio"/> | More than 2 years ago                      |
| <input type="radio"/> | I don't know/remember                      |



40. Please rate how you feel about the following statements.

Select one per row.

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree nor Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
I know where to go when I have questions or concerns about my health.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I know how to get health care for my family or me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I know where to go for help if I am feeling stressed, nervous, sad, depressed or angry.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

41. In the past year, have you talked to a doctor or nurse about...

Select one per row.

	<i>Yes</i>	<i>No</i>	<i>Don't know or Doesn't Apply</i>
How school is going.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your moods or feelings (about things like feeling stressed, nervous, sad, depressed or angry).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

42. Which of the following services have you received from the School Health Center at your school? (*Mark all that apply.*)

*Select all that apply.*

<input type="checkbox"/>	Does not apply – I have never used the School Health Center or my school doesn't have one
<input type="checkbox"/>	Medical care when I was sick, hurt or needed a check-up
<input type="checkbox"/>	Counseling to help deal with issues like stress, feeling sad, family problems or alcohol or drug use
<input type="checkbox"/>	Information on sexual health issues like birth control/condoms or testing for pregnancy/sexually transmitted diseases (STDs)
<input type="checkbox"/>	Help with diet, nutrition or exercise
<input type="checkbox"/>	Dental care for cleanings, toothaches or cavities
<input type="checkbox"/>	Other

43. How many times have you ever used the School Health Center at your school? (*Check one.*)

*Select one.*

<input type="radio"/>	None, I have never used the School Health Center or my school doesn't have one
<input type="radio"/>	1 or 2 times
<input type="radio"/>	3 to 9 times
<input type="radio"/>	10 times or more

44. Are any of the following reasons why you have NOT used the School Health Center? (*Mark all that apply.*)

*Select all that apply.*

<input type="checkbox"/>	Does not apply – I have used the School Health Center
<input type="checkbox"/>	I didn't need any services
<input type="checkbox"/>	I didn't know there was a School Health Center
<input type="checkbox"/>	I was afraid my parents would find out
<input type="checkbox"/>	I was afraid other students would find out
<input type="checkbox"/>	The wait was too long
<input type="checkbox"/>	I didn't feel like the people who work there would understand me
<input type="checkbox"/>	I couldn't get a pass to leave class
<input type="checkbox"/>	Other reasons



47. Where do you usually get your lunch during school?

*Select one.*

<input type="radio"/>	Bring own food from home
<input type="radio"/>	Eat at home
<input type="radio"/>	Eat off campus other than your home
<input type="radio"/>	Eat food served by the school cafeteria
<input type="radio"/>	Eat food from vending machines at school or the student store
<input type="radio"/>	I usually don't eat lunch
<input type="radio"/>	Other

48. On how many of the past 7 days did you exercise or do physical activity that breaks a sweat, for a total of at least 60 minutes a day?

*Select one.*

<input type="radio"/>	0 days
<input type="radio"/>	1 day
<input type="radio"/>	2 days
<input type="radio"/>	3 days
<input type="radio"/>	4 days
<input type="radio"/>	5 days
<input type="radio"/>	6 days
<input type="radio"/>	7 days

**The next questions ask about the use of alcohol, tobacco, marijuana, and other drugs, including pills or medications, to get “high” or for reasons other than medical (*without a doctor’s order*).**

**Keep the following definitions in mind.**

- One drink of ALCOHOL, or alcoholic drink (beverage), means one regular size can/bottle of beer or wine cooler, one glass of wine, one mixed drink, or one shot glass of liquor.
- Questions about alcohol do not include drinking a few sips of wine for religious purposes.
- DRUG means any substance other than alcohol or tobacco, including pills and medications, used to get “high” (“loaded”, “stoned”, or “wasted”) or for purposes other than they were prescribed by a doctor.



?						
<p>&lt;span style="text-decoration: underline;"&gt;on school property&lt;/span&gt;            did you use an electronic vapor product for tobacco?</p>	<input type="radio"/>					
<p>&lt;span style="text-decoration: underline;"&gt;on school property&lt;/span&gt;            did you have at least one drink of alcohol?</p>	<input type="radio"/>					
<p>&lt;span style="text-decoration: underline;"&gt;on school property&lt;/span&gt;            did you smoke marijuana ?</p>	<input type="radio"/>					

50. During your life, how many times have you used marijuana (pot, weed, grass, hash, bud)?

*Select one.*

- |                       |                 |
|-----------------------|-----------------|
| <input type="radio"/> | 0 times         |
| <input type="radio"/> | 1 time          |
| <input type="radio"/> | 2 times         |
| <input type="radio"/> | 3 times         |
| <input type="radio"/> | 4-6 times       |
| <input type="radio"/> | 7 or more times |

51. During the past 12 months, how many times on school property have you been offered, sold, or given an illegal drug?

*Select one.*

- |                       |                 |
|-----------------------|-----------------|
| <input type="radio"/> | 0 times         |
| <input type="radio"/> | 1 time          |
| <input type="radio"/> | 2 to 3 times    |
| <input type="radio"/> | 4 or more times |

**How strongly do you agree or disagree with the following statement?**

52. It is easy to buy drugs at this school.

*Select one.*

- |                       |                            |
|-----------------------|----------------------------|
| <input type="radio"/> | Strongly disagree          |
| <input type="radio"/> | Disagree                   |
| <input type="radio"/> | Neither agree nor disagree |
| <input type="radio"/> | Agree                      |
| <input type="radio"/> | Strongly agree             |

53. During the past 12 months, did you ever...		
<i>Select one per row.</i>		
	<i>No</i>	<i>Yes</i>
feel so sad or hopeless almost everyday for two weeks or more that you stopped doing some usual activities?	<input type="radio"/>	<input type="radio"/>
seriously consider attempting suicide?	<input type="radio"/>	<input type="radio"/>

54. Have any of your friends or family members ever died by violence?	
<i>Select one.</i>	
<input type="radio"/>	No
<input type="radio"/>	One person
<input type="radio"/>	Two or three people
<input type="radio"/>	More than three people

55. How old were you when you had sex for the first time?

*Select one.*

- |                       |                         |
|-----------------------|-------------------------|
| <input type="radio"/> | I have never had sex    |
| <input type="radio"/> | 11 years old or younger |
| <input type="radio"/> | 12 years old            |
| <input type="radio"/> | 13 years old            |
| <input type="radio"/> | 14 years old            |
| <input type="radio"/> | 15 years old            |
| <input type="radio"/> | 16 years old            |
| <input type="radio"/> | 17 years old            |
| <input type="radio"/> | > 17 years old          |

56. During your life, with whom have you had sexual contact?

*Select one.*

- |                       |                                 |
|-----------------------|---------------------------------|
| <input type="radio"/> | I have never had sexual contact |
| <input type="radio"/> | Females                         |
| <input type="radio"/> | Males                           |
| <input type="radio"/> | Females and males               |
| <input type="radio"/> | Transgender person              |

57. Have you ever been taught about HIV/AIDS in school?

*Select one.*

- |                       |          |
|-----------------------|----------|
| <input type="radio"/> | No       |
| <input type="radio"/> | Yes      |
| <input type="radio"/> | Not Sure |

58. Do you feel confident that you could prevent pregnancy or a sexually transmitted infection in yourself or your partner?

*Select one.*

- |                       |          |
|-----------------------|----------|
| <input type="radio"/> | No       |
| <input type="radio"/> | Yes      |
| <input type="radio"/> | Not sure |

59. Have you ever had sex with someone in exchange for money, drugs, food, place to sleep, etc?

Select one.

- No
- Yes

60. How many times in your life did someone you were dating force you to have sexual contact that you did not want to have?

Select one.

- I have not dated anyone.
- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

61. During your life, with how many people have you had sex?

Select one.

- I have never had sex
- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more people

62. Have you ever been told by a doctor or nurse that you had a sexually transmitted disease?

Select one.

- No
- Yes
- Not sure

63. The last time you had sex, how many years younger or older than you was your partner?

*Select one.*

- I have never had sex
- 5 or more years younger
- 3 to 4 years younger
- About the same age
- 3 to 4 years older
- 5 or more years older
- Not sure

64. How often do you or your partner use protection when you have sex (like condoms or birth control pills)? (*Check one.*)

*Select one.*

- Always
- Sometimes
- Rarely
- Never
- Does not apply – I've never had sex

65. The last time you had sex, did you or your partner use... (*Check one.*)

*Select one.*

- A condom ONLY
- Birth control ONLY (for example, birth control pills, the "patch", the "shot", the "ring")
- Both a condom AND birth control
- Other
- We did not use anything
- Does not apply – I've never had sex

66. How strongly do you agree or disagree with the following statements?

Select one per row.

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree Nor Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
Students from different cultural backgrounds get along well at this school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel comfortable speaking up about school issues with peers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Youth participate in making decisions at this school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel comfortable speaking up about school issues with adults at my school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

67. At my school, there is a teacher or some other adult...

*Select one per row.*

	<i>Not At All True</i>	<i>A Little True</i>	<i>Pretty Much True</i>	<i>Very Much True</i>
who always wants me to do my best.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
who listens to me when I have something to say.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

68. At school...

*Select one per row.*

	<i>Not At All True</i>	<i>A Little True</i>	<i>Pretty Much True</i>	<i>Very Much True</i>
I do interesting activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I do things that make a difference.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

69. In the past year, how many days have you stayed home or cut school because you are bored at school?

*Select one.*

- 0 times
- 1 time
- 2 to 3 times
- 4 or more times

70. How strongly do you agree or disagree with the following statements?

*Select one per row.*

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree Nor Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
This school is clean and pleasant.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Temperature in this school is comfortable year-round.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Students at this school intervene when someone is being bullied.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

71. During the past year, how many times...

Select one per row.

	<i>0 Times</i>	<i>1 Time</i>	<i>2 to 3 Times</i>	<i>4 or More Times</i>
did other students spread mean rumors or lies about you on the internet (i.e., Facebook™, MySpace™, email, instant message)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
did you bring a gun or knife to school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
did you see another student with a gun or knife at school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
did someone threaten you with a gun or knife at school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

72. How strongly do you agree or disagree with the following statements?

Select one per row.

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree Nor Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
I know who I am and am proud of where I come from.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can say no when my friends want me to do something that I don't want to do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Before I make a decision, I think about what might happen afterwards.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If I get angry with a friend, I can talk about it and make things better.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

73. How true do you feel these statements are about you personally?

*Select one per row.*

	<i>Not At All True</i>	<i>A Little True</i>	<i>Pretty Much True</i>	<i>Very Much True</i>
I know where to go for help with a problem.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understand my moods and feelings.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>