

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.

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

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

11. 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.

12. 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

13. 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.

14. 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"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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In this section, please think about your learning in general.

15. 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"/>

16. 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.

17. 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 |

18. 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 |

19. 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 |

20. 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 |

21. 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 |

22. 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 |

23. 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"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
disagree with others without starting an argument?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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

24. 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"/>

25. 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"/>

26. 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

27. 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

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

Select one.

- | | |
|-----------------------|-----|
| <input type="radio"/> | No |
| <input type="radio"/> | Yes |

29. 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"/>

30. 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

31. 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 |

32. 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 |

34. 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"/>

35. 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"/>

36. 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/STDs
<input type="checkbox"/>	Help with diet, nutrition or exercise
<input type="checkbox"/>	Dental care for cleanings, toothaches or cavities
<input type="checkbox"/>	Other

37. 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

38. 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

41. 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

42. 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>on school property did you use an electronic vapor product for tobacco?</p>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<p>on school property did you have at least one drink of alcohol?</p>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<p>on school property did you smoke marijuana ?</p>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

44. 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 |

45. 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 |

46. 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 |

47. 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"/>

48. 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

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

Select one.

- I have never had sex
- 11 years old or younger
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old

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

Select one.

- I have never had sexual contact
- Females
- Males
- Females and males
- Transgender person

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

Select one.

- No
- Yes
- Not Sure

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

Select one.

- No
- Yes
- Not sure

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

Select one.

- No
- Yes

54. 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

55. 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

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

Select one.

- No
- Yes
- Not sure

57. 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

58. 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

59. 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

60. 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"/>

61. 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"/>

62. 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"/>

63. 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

64. 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"/>

65. 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"/>

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>
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"/>

67. 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"/>