INFORMATION AND INSTRUCTIONS

1. This is a survey for people who have not taken part in this program before. If you have been to this program before, please tell a program staff person.

2. DO NOT write your name anywhere on this survey.

3. Please read each question carefully and follow the instructions provided with each question to choose the best answer for you.

4. Your answers will not be shared with anyone. Your answers will all be combined with those of other people to create numerical summary reports.

5. Thank you for doing this survey!
STAFF NOTE: Questions 1 to 3 are not asked at Entry. Enter ‘E’.

The following questions ask about how you have been feeling during the past 30 days. For each question, please check the box that best describes how often you had this feeling.

4. **During the past 30 days**, about how often did you feel...

<table>
<thead>
<tr>
<th></th>
<th>All of the time</th>
<th>Most of the time</th>
<th>Some of the time</th>
<th>A little of the time</th>
<th>None of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. nervous?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. hopeless?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. restless or fidgety?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. so depressed that nothing could cheer you up?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. that everything was an effort?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. worthless?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. **In the past 30 days**, for how many days were you totally unable to do your usual activities or school work because of emotional problems?

NUMBER OF DAYS: _____

6. The next questions are about how true these things have been for you during the past 30 days. For each statement, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not really certain.

<table>
<thead>
<tr>
<th></th>
<th>Not true</th>
<th>Somewhat true</th>
<th>Certainly true</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. I get very angry and often lose my temper.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. I usually do as I am told.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. I fight a lot. I can make other people do what I want.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. I am often accused of lying or cheating.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. I take things that are not mine from home, school or elsewhere.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
7. Please read each sentence and decide how true it is of you in general.

**Please check one box on each row.**

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Almost Never</th>
<th>Sometimes</th>
<th>Fairly Often</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. It is easy for me to stick to my goals and reach them. . . . . . . . . . . . .</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b. I am confident that I could do a good job dealing with unexpected events. . . . . . .</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c. I can solve most problems if I try hard enough. . . . . . . . . . . . .</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d. I stay calm when facing difficulties because I can handle them. . . . . . . .</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e. When I have a problem, I can find several ways to solve it. . .</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

The next three questions ask about how you feel about different things.

**Please check one box on each row.**

<table>
<thead>
<tr>
<th></th>
<th>Do not disapprove</th>
<th>Somewhat disapprove</th>
<th>Strongly disapprove</th>
</tr>
</thead>
<tbody>
<tr>
<td>8. How do you feel about someone your age trying marijuana or hashish once or twice? . . . . . . . . . . . .</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>9. How do you feel about someone your age using marijuana once a month or more? . . . . . . . . . . . .</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>10. How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day? . . . . . . . . . . . .</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

11. The next questions ask about your friends.

**Please check one box on each row.**

<table>
<thead>
<tr>
<th></th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very Good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. How would you rate the amount of togetherness you have with your friends?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b. How would you rate the support and understanding your friends give you?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c. How would you rate the amount you talk things over with your friends?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
12. The next questions are about your parents, meaning parent, guardian or stepparent.

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very Good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>(2)</td>
<td>(3)</td>
<td>(4)</td>
<td>(5)</td>
</tr>
</tbody>
</table>

a. How would you rate the amount of togetherness you have with your parents? . . . . . .

b. How would you rate the support and understanding your parents give you? . . . . . .

c. How would you rate the amount you talk things over with your parents? . . . . . . . .

13. Have you attended any type of school at any time during the past 12 months? By “school,” we mean elementary school, junior high or middle school, high school, or a college or university. Please include home schooling as well.

☐ No (If you answered No, skip to question 15)

☐ Yes

14. During the last month (or if on summer break, the last month you were in school), how often have you:

(If you have not attended any kind of school in the last 12 months, you do not need to answer this question. Skip to question 15 if you have not attended any kind of school in the last 12 months)

a. Come prepared for class?
   ☐ None of the time (1)
   ☐ A little bit of the time (2)
   ☐ Some of the time (3)
   ☐ Most of the time (4)
   ☐ All of the time (5)

b. Been late for class?
   ☐ None of the time (1)
   ☐ A little bit of the time (2)
   ☐ Some of the time (3)
   ☐ Most of the time (4)
   ☐ All of the time (5)

c. Copied your homework off a friend?
   ☐ None of the time (1)
   ☐ A little bit of the time (2)
   ☐ Some of the time (3)
   ☐ Most of the time (4)
   ☐ All of the time (5)

d. Done the homework assigned?
   ☐ None of the time (1)
   ☐ A little bit of the time (2)
   ☐ Some of the time (3)
   ☐ Most of the time (4)
   ☐ All of the time (5)

e. Turned homework in late?
   ☐ None of the time (1)
   ☐ A little bit of the time (2)
   ☐ Some of the time (3)
   ☐ Most of the time (4)
   ☐ All of the time (5)

f. Been absent from class without an excuse?
   ☐ None of the time (1)
   ☐ A little bit of the time (2)
   ☐ Some of the time (3)
   ☐ Most of the time (4)
   ☐ All of the time (5)
The following questions will help us report counts of all people served by our program.

15. How old were you on your last birthday?

Age: __________ □; Decline to answer

16. Here is a list of places of origin or ancestries. *Please check the boxes next to all that apply to you.*

□ Caribbean □ Chinese
□ Central American □ Filipino
□ Mexican America/Chicano □ Japanese
□ Puerto Rican □ Korean
□ South American □ Vietnamese
□ Other Hispanic or Latino ethnicity □ Eastern European
□ African □ European
□ Asian Indian/South Asian □ Middle Eastern
□ Cambodian □ Other
□ Decline to answer

17. What is your race? *Please check the boxes next to all that apply to you.*

□ American Indian or Alaska Native,
□ Asian,
□ Black or African American,
□ Native Hawaiian or other Pacific Islander,
□ White (Caucasian)
□ Decline to answer

18. What is the main language that you use at home? *Please check only one box*

□ English □ Farsi
□ Spanish □ Korean,
□ Chinese (including Cantonese and Mandarin), □ Russian
□ Arabic □ Tagalog
□ Armenian □ Vietnamese
□ Cambodian □ Other
□ Decline to answer
19. Do any of the following describe you? Please check all that apply.

☐. I have a chronic medical condition, like diabetes, heart disease, or chronic pain
☐. I am blind or have serious difficulty seeing, even when wearing glasses
☐. I am deaf or have serious difficulty hearing, or having my speech understood
☐. I have serious difficulty walking or climbing stairs
☐. Because of a physical, mental, or emotional condition, I have serious difficulty concentrating, remembering, or making decisions
☐. None of the above
☐. Decline to answer

20. What sex were you assigned at birth? Please check only one box.

☐. Male
☐. Female
☐. Decline to answer

21. How do you describe yourself? Please check all that apply.

☐. Male
☐. Female
☐. Transgender
☐. Genderqueer/Do not identify as male, female or transgender
☐. Another identity
☐. Questioning or unsure of my gender identity
☐. Decline to answer

22. Do you consider yourself to be... Please check only one box.

☐. Heterosexual or straight,
☐. Gay or Lesbian,
☐. Bisexual,
☐. Questioning or unsure, or
☐. None of the above or other?
☐. Decline to answer

Thank you for doing this survey!