

1. Are you:

Male
☐

Female
☐

2. What grade are you in?

7
☐

8
☐

9
☐

10
☐

11
☐

12
☐

3. Who lives with you? (MARK ALL THAT APPLY)

- ☐ Mother
☐ Father
☐ Step parent
☐ Grandparent
☐ Other adult caregiver

4. How old are you?

11 or
younger
☐

12
☐

13
☐

14
☐

15
☐

16
☐

17
☐

18
☐

19+
☐

5a. Are you Hispanic or Latino?

Yes
☐

No
☐

5b. What is your race? (DARKEN ONE BUBBLE ONLY)

- ☐ American Indian or Alaska Native
☐ Asian
☐ Black or African American
☐ Native Hawaiian or Other Pacific Islander
☐ White
☐ Some other race
☐ More than one race

6. On average, what grades do you get?
(DARKEN ONE BUBBLE ONLY)

Mostly
A's
☐

Mostly
B's
☐

Mostly
C's
☐

Mostly
D's
☐

Mostly
F's
☐

7. Do you have a job?

Yes
☐

No
☐

8. During the current school year, do you qualify
for a free or reduced price school lunch?

- ☐ Yes
☐ No
☐ Don't Know

9. Do you regularly participate in any of the following
extra-curricular activities? (DARKEN ONE BUBBLE FOR EACH
LINE: a-h.)

- | | Yes | No | |
|----|-----------------------|-----------------------|--|
| a. | ☐ | ☐ | School athletics (UIL, Varsity, Junior Varsity) |
| b. | ☐ | ☐ | School band, orchestra, choir and/or theater |
| c. | ☐ | ☐ | Drill team or cheerleading squad |
| d. | ☐ | ☐ | Student government, newspaper, or yearbook |
| e. | ☐ | ☐ | Academic clubs, societies, or competition groups (UIL, Language Club, Math Club, etc.) |
| f. | ☐ | ☐ | Other school clubs or student groups (FFA, NHS, chess or other games, etc.) |
| g. | ☐ | ☐ | Athletic teams OUTSIDE of school |
| h. | ☐ | ☐ | Other clubs or groups OUTSIDE of school |

10. How safe do you feel when you are:

(DARKEN ONE BUBBLE FOR EACH LINE: a-c.)

Very
Safe

Somewhat
Safe

Not Very
Safe

Not Safe
At All

Don't
Know

a. in your home?

☐

☐

☐

☐

☐

b. out in your neighborhood?

☐

☐

☐

☐

☐

c. at school?

☐

☐

☐

☐

☐

The next two questions are about the people who raised you. This could be your parents, foster, stepparents, grandparents, or others. Please answer based on whoever was most involved in raising you.

11. What is the highest level of
schooling completed by...
(DARKEN ONE BUBBLE FOR
EACH LINE: a-b.)

Completed
grade
school or
less

Some high
school

Completed
high school

Some college

Completed
college

Graduate or
professional
school after
college

Don't
know or
doesn't
apply

a. ...your FATHER?

☐

☐

☐

☐

☐

☐

☐

b. ...your MOTHER?

☐

☐

☐

☐

☐

☐

☐

12. Do one or both of your parents usually attend school-sponsored open houses or PTA meetings? ☐ Yes ☐ No

13. How many of your FRIENDS would you say: (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)

	None	A Few	Some	Most	All
a. Feel close to their parents?	☐	☐	☐	☐	☐
b. Care about making good grades?	☐	☐	☐	☐	☐
c. Wish they could drop out of school?	☐	☐	☐	☐	☐
d. Sometimes carry weapons like a knife or gun?	☐	☐	☐	☐	☐
e. Care about you and your wellbeing?	☐	☐	☐	☐	☐

In the following questions, TOBACCO refers to any tobacco/ nicotine product (cigarettes, nicotine pouches, e-cigarettes, etc.) and MARIJUANA refers to any cannabis product (joint, vapes, bongs, edibles, etc.).

14. How recently, if ever, have you used the following TOBACCO, ALCOHOL, and INHALANT products even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a-g.)

	Never heard of/ Never used it	Used at least once in the Past Month	Used at least once Since School Began in the Fall	Used at least once In Your Lifetime
a. Cigarettes?	☐	☐	☐	☐
b. Electronic Cigarettes or E-Cigarettes?	☐	☐	☐	☐
c. Beer?	☐	☐	☐	☐
d. Wine Coolers (hard lemonade, hard sodas, hard cider, etc.)?	☐	☐	☐	☐
e. Wine?	☐	☐	☐	☐
f. Liquor (vodka, rum, whiskey, etc.)?	☐	☐	☐	☐
g. Inhalants (Whiteout, spray paint, glue, gas, etc.) to get high?	☐	☐	☐	☐

15a. How recently, if ever, have you used the following DRUGS even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a-m.)

	Never heard of/ Never used it	Used at least once in the Past Month	Used at least once Since School Began in the Fall	Used at least once In Your Lifetime
a. Marijuana?	☐	☐	☐	☐
b. Cocaine (not crack)?	☐	☐	☐	☐
c. Crack?	☐	☐	☐	☐
d. Dyjenta? (e.g., Dr. J)?	☐	☐	☐	☐
e. Hallucinogens (LSD, Mushrooms, etc.)?	☐	☐	☐	☐
f. Synthetic Cathinones (Bath Salts, MDPV, etc.)?	☐	☐	☐	☐
g. Steroids?	☐	☐	☐	☐
h. Ecstasy?	☐	☐	☐	☐
i. Heroin (black tar, cheese, chiva, brown heroin)?	☐	☐	☐	☐
j. Methamphetamine (speed, crystal meth, ice, or crank)?	☐	☐	☐	☐
k. Synthetic Marijuana (spice, K2)?	☐	☐	☐	☐
l. Delta 8 or 10 (diet weed)?	☐	☐	☐	☐
m. Marijuana/cannabis vaping products?	☐	☐	☐	☐

15b. How recently, if ever, have you used MARIJUANA in the following ways even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)

	Never heard of/ Never used it	Used at least once in the Past Month	Used at least once Since School Began in the Fall	Used at least once In Your Lifetime
a. Smoked it (e.g., joint, blunt, bong, pipe)?	☐	☐	☐	☐
b. Ate or drank it (e.g., brownies, cookies, cakes, chocolates, candies, sodas, tea, alcohol)?	☐	☐	☐	☐
c. Vaporized/Vaped it (flower, oils, etc.)?	☐	☐	☐	☐
d. Dabbed it (e.g., waxes or concentrates)?	☐	☐	☐	☐
e. Some other way?	☐	☐	☐	☐

○○○○○○○○○○○○○○○○○○○○○○○○○○○○○○

16. How recently, if ever, have you taken the following PRESCRIPTION DRUGS not prescribed to you or only for the experience or feeling it caused even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)

DRUGS <u>not</u> prescribed to you or only for the experience or feeling it caused even one time: (DARKEN ONE BUBBLE FOR EACH LINE: a-e.)	Never heard of/ Never used it	Used at least once in the Past Month	Used at least once Since School Began in the Fall	Used at least once In Your Lifetime
a. Codeine cough syrup (Leans, Nods, AC/DC)?	☐	☐	☐	☐
b. OxyContin, Percodan, Percocet, oxycodone, Vicodin, Lortab, Lorcet, or hydrocodone?	☐	☐	☐	☐
c. Valium, Diazepam, Xanax, or other benzodiazepines?	☐	☐	☐	☐
d. Adderall, Ritalin, Dexedrine, Concerta, or Vyvanse?	☐	☐	☐	☐
e. Any other prescription drug not listed above?	☐	☐	☐	☐

Never heard of/ Never used it	Used at least once in the Past Month	Used at least once Since School Began in the Fall	Used at least once In Your Lifetime
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a. DXM, Triple C's, Skittles, or Coricidin? ☐ ☒ ☐ ☐ ☐

a. Tobacco?	☐	☒	☐	☐
b. Alcohol?	☐	☒	☐	☐
c. Inhalants (Whiteout, spray paint, glue, gas, etc.) to get high?	☐	☒	☐	☐
d. Marijuana?	☐	☒	☐	☐
e. Electronic Cigarettes or E-Cigarettes?	☐	☐	☐	☐
f. Marijuana/cannabis vaping products?	☐	☐	☐	☐
g. Hallucinogens (LSD, Mushrooms, etc.)?	☐	☐	☐	☐

Never used it
8 or younger
9
10
11
12
13
14
15
16
17
18 or older

[illegible]

Never heard of/
None A few Some Most All

a. Tobacco?	☐	☐	☐	☐	☐
b. Alcohol?	☐	☐	☐	☐	☐
c. Inhalants (Whiteout, spray paint, glue, gas, etc.)?	☐	☐	☐	☐	☐
d. Marijuana?	☐	☐	☐	☐	☐
e. Electronic Cigarettes or E-Cigarettes?	☐	☐	☐	☐	☐
f. Marijuana/cannabis vaping products?	☐	☐	☐	☐	☐
g. Hallucinogens (LSD, Mushrooms, etc.)?	☐	☐	☐	☐	☐

[illegible]

23. When you drink alcoholic beverages, how many drinks do you usually have AT ONE TIME, on average: (DARKEN ONE BUBBLE FOR EACH LINE: a-d.)

		Never heard of it	Impossible	Very difficult	Somewhat difficult	Somewhat easy	Very easy
a.	Tobacco?	☐	☒	☒	☒	☒	☒
b.	Alcohol?	☐	☒	☒	☒	☒	☒
c.	Inhalants (Whiteout, spray paint, glue, gas, etc.)?	☐	☒	☒	☒	☒	☒
d.	Marijuana?	☐	☒	☒	☒	☒	☒
e.	Dyjenta? (e.g., Dr. J)?	☐	☒	☒	☒	☒	☒
f.	Steroids?	☐	☒	☒	☒	☒	☒
g.	Synthetic Marijuana (spice, K2)?	☐	☒	☒	☒	☒	☒
h.	Delta 8 or 10 (diet weed)?	☐	☒	☒	☒	☒	☒
i.	Electronic Cigarettes or E-Cigarettes?	☐	☒	☒	☒	☒	☒
j.	Marijuana/cannabis vaping products?	☐	☒	☒	☒	☒	☒
k.	Hallucinogens (LSD, Mushrooms, etc.)?	☐	☒	☒	☒	☒	☒

[illegible]

24. IN THE PAST 30 DAYS, on how many days have you had 5 or more drinks of alcohol in a two-hour period?

[illegible]

a. Alcohol ☐ Never had 5 or more drinks in a two-hour period ☐ Zero days ☐ 1 day ☐ 2 days ☐ 3 to 5 days ☐ 6 to 9 days ☐ 10 or more days

25a. How often do you get alcoholic beverages from the following sources?

(DARKEN ONE BUBBLE FOR EACH LINE: a-f.)

	Do Not Drink	Never	Seldom	Most of the time	Always
a. At home	☐	☐	☐	☐	☐
b. From friends	☐	☐	☐	☐	☐
c. From a store	☐	☐	☐	☐	☐
d. At parties	☐	☐	☐	☐	☐
e. The internet or social media	☐	☐	☐	☐	☐
f. Other source	☐	☐	☐	☐	☐

25b. How often do you get marijuana/cannabis, Delta 8 or Delta 10 from the following sources:

(DARKEN ONE BUBBLE FOR EACH LINE: a-g.)

	Do Not Use These	Never	Seldom	Most of the time	Always
a. At home	☐	☐	☐	☐	☐
b. From friends	☐	☐	☐	☐	☐
c. From a store	☐	☐	☐	☐	☐
d. At parties	☐	☐	☐	☐	☐
e. The internet or social media	☐	☐	☐	☐	☐
f. A dealer	☐	☐	☐	☐	☐
g. Other source	☐	☐	☐	☐	☐

26. How dangerous do you think it is for kids your age to use:

(DARKEN ONE BUBBLE FOR EACH LINE: a-l.)

	Very Dangerous	Somewhat Dangerous	Not Very Dangerous	Not Dangerous At All	Don't Know
a. Tobacco?	☐	☐	☐	☐	☐
b. Alcohol?	☐	☐	☐	☐	☐
c. Inhalants (Whiteout, spray paint, glue, gas, etc.)?	☐	☐	☐	☐	☐
d. Marijuana?	☐	☐	☐	☐	☐
e. Dyjenta (e.g., Dr. J)?	☐	☐	☐	☐	☐
f. Steroids?	☐	☐	☐	☐	☐
g. Synthetic Marijuana (spice, K2)?	☐	☐	☐	☐	☐
h. Delta 8 or 10 (diet weed)?	☐	☐	☐	☐	☐
i. Any prescription drug not prescribed to you?	☐	☐	☐	☐	☐
j. Electronic Cigarettes or E-Cigarettes?	☐	☐	☐	☐	☐
k. Marijuana/cannabis vaping products?	☐	☐	☐	☐	☐
l. Hallucinogens (LSD, Mushrooms, etc.)?	☐	☐	☐	☐	☐

27. SINCE SCHOOL BEGAN IN THE FALL, on how many DAYS have you . . .

(DARKEN ONE BUBBLE FOR EACH LINE: a-e.)

	None	1-3 days	4-9 days	10+ days
a. missed a whole day of school because you "skipped" or "cut"?	☐	☐	☐	☐
b. missed a whole day of school because you were ill?	☐	☐	☐	☐
c. missed a whole day of school for some other reason?	☐	☐	☐	☐
d. been sent by a teacher to someone like the Principal, Dean, or Guidance Counselor because of your conduct or attitude?	☐	☐	☐	☐
e. had someone from your home be called to school because of your conduct or attitude?	☐	☐	☐	☐

28. DURING THE PAST 12 MONTHS, how many TIMES (if any) have you . . .

(DARKEN ONE BUBBLE FOR EACH LINE: a-d.)

	None	1-3 times	4-9 times	10+ times
a. gotten into difficulties of any kind with your friends because of your drinking?	☐	☐	☐	☐
b. driven a car when you've had a good bit to drink?	☐	☐	☐	☐
c. gotten into difficulties of any kind with your friends because of your drug use?	☐	☐	☐	☐
d. driven a car when you've felt high from drugs?	☐	☐	☐	☐

(DARKEN ONE BUBBLE FOR EACH LINE: a-d.)

(DARKEN ONE BUBBLE FOR EACH LINE: a-d.)	None	1-3 days	4-9 days	10+ days
a. beer, wine coolers (hard lemonade, hard sodas, hard cider), wine, or hard liquor?	☐	☐	☐	☐
b. marijuana?	☐	☐	☐	☐
c. inhalants?	☐	☐	☐	☐
d. some other drug(s)?	☐	☐	☐	☐

(DARKEN ONE BUBBLE FOR EACH LINE: a-d.)

[illegible]

Yes ☐ No ☐

(DARKEN ONE BUBBLE FOR EACH LINE: a-i.)

	Yes	No
a. A counselor or program in school?	☐	☐
b. A school nurse?	☐	☐
c. Another adult in school (such as a teacher or coach)?	☐	☐
d. Your parents?	☐	☐
e. A medical doctor?	☐	☐
f. Your friends?	☐	☐
g. Another adult (such as a relative, clergyman, or other family friend)?	☐	☐
h. A counselor or program outside of school?	☐	☐
i. I wouldn't go to anyone.	☐	☐

(DARKEN ONE BUBBLE FOR EACH LINE: a-h.)

	Yes	No
a. A school health class?	☐	☐
b. An assembly program at school?	☐	☐
c. A school guidance counselor?	☐	☐
d. A school nurse?	☐	☐
e. A science or social studies class?	☐	☐
f. A student group or club meeting at school?	☐	☐
g. An invited school guest?	☐	☐
h. Another source at school?	☐	☐

[illegible]

SUPPLEMENTAL SURVEY QUESTIONS

S-1 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-2 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-3 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-4 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-5 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-6 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-7 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-8 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-9 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-10 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)
S-11 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-12 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-13 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-14 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-15 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-16 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-17 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-18 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-19 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-20 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)
S-21 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-22 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-23 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-24 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-25 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-26 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-27 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-28 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-29 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)	S-30 (A) (B) (C) (D) (E) (F) (G) (H) (I) (J)

PROOF

THANK YOU FOR BEING PART OF THIS
IMPORTANT PROJECT

V4

☐○○

SERIAL #

PLEASE DO NOT WRITE IN THIS AREA