

A Study of Life After High School

Sponsored by the University of Washington

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UW Beyond High School Project
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UW Beyond High School Project Class of 2005

Senior Questionnaire

This survey is being given by researchers at the University of Washington. We are interested in how your school, friends, and family affect your plans for what to do after high school. We hope our findings will help us to understand students better and allow us to offer suggestions to improve high school programs.

Most of the questions are about your situation and plans for the future. Some questions ask about your parent(s) or guardian(s). When we say this, we mean <u>someone who is most like a parent to you</u>. For example, this could be your parent, step-parent, foster-parent, guardian, parent's live-in partner, grandparent, etc.

We are looking at trends and overall patterns. That means we will never report the responses given by any single student. We promise to protect your privacy. No one outside our research team will ever see your answers to the questionnaire. You may skip any questions that you wish, but we hope you will answer as many questions as you can. The more complete the questionnaires, the better our results will be.

Some of the question numbers are not in order. This has been done for our coding purposes. Please do not worry about it. This survey is not a test. There are no right or wrong answers, only honest ones. Most importantly, thank you for filling out this survey. We couldn't do our work without you.

BEGIN HERE-PAGE 1 OF SURVEY

1) How far would you LIKE to go in school?

| | | | (CIRCLE ONLY ONE) |
|----|-------|------------------------------------|----------------------------------|
| | Less | than High School Graduation | |
| | High | n School Graduation Only | 2 |
| | Less | than 2 Years of College, Vocat | ional, or Business School3 |
| | Two | or More Years of College Includ | ding a 2-Year Degree4 |
| | Finis | h College (4 or 5 Year Degree) . | 5 |
| | Mas | ster's Degree or Equivalent | 6 |
| | Ph.[| D., M.D., or other Professional De | gree7 |
| 2) | Real | istically speaking, how far do yo | ou THINK you will get in school? |
| | | | (CIRCLE ONLY ONE) |
| | Less | than High School Graduation | 1 |
| | High | n School Graduation Only | 2 |
| | Less | than 2 Years of College, Vocat | ional, or Business School3 |
| | Two | or More Years of College Includ | ding a 2-Year Degree4 |
| | Finis | h College (4 or 5 Year Degree) . | 5 |
| | Mas | ster's Degree or Equivalent | 6 |
| | Ph.[| D., M.D., or other Professional De | gree7 |
| 3) | Wha | t is your date of birth? | |
| | a) | Month | |
| | b) | Day | |
| | c) | Year | |
| | | | |

Page 2 of the Survey

3_a) Which of the following best describes you?

| (CIRCLE ONLY ONE) | |
|---|---|
| enior with enough credits to graduate in June1 | |
| enior with too few credits to graduate in June2 | |
| unior3 | |
| xchange Student4 | |
| Other5- | _ |
| 3_b) Write in | |



Dear Student, Did you jump the gun? This is Page 2 of the survey. If you did not answer the questions on Page 1, please go back to that page. Thank you!!!

4) What is your sex?

| Female1 | |
|---------|--|
| | |
| Male2 | |

Have you taken any of the following tests?

| | | CIRCLE ONE ON EACH LINE) | | | | |
|------|--|--------------------------|-----------------------------|---------------------------------|-------------------------------------|------------|
| | | l Have Taken | I am Planning to Take | I am NOT Planning to Take | I Have NOT HEARD OF This Test | Don't Know |
| 5_a) | PSAT, Preliminary Scholastic Assessment Test | 1 | 2 | 3 | 4 | 5 |
| - | PLAN, Preliminary American College Test | 1 | 2 | 3 | 4 | 5 |
| 5_c) | ASVAB, Armed Services Vocational Aptitude Battery | 1 | 2 | 3 | 4 | 5 |
| | | | | | | |
| 6_a) | SAT, College Board Scholastic Assessment Test | 1 | 2 | 3 | 4 | 5 |
| 6_b) | ACT, American College Test | 1 | 2 | 3 | 4 | 5 |
| 6_c) | Any Advanced Placement, or AP tests | 1 | 2 | 3 | 4 | 5 |

| 6_d) | Have you taken or are you currently taking any Advanced Placement, Honors, or |
|------|---|
| | International Baccalaureate <u>COURSES</u> ? |

| Yes1 | |
|--------------------------------------|-----------|
| No2 7 | SKIP TO - |
| School does not offer AP/ IB courses | PAGE 4 |

6_e) Which of the following Advanced Placement (AP), Honors, or International Baccalaureate (IB) courses have you taken or are you currently taking?

(CIRCLE ALL THAT APPLY)

| | AP/Honors/IB COURSES | Have already taken | Currently taking | Have not taken | Not offered |
|----|------------------------------|--------------------------|------------------|-------------------|----------------|
| a) | Science | 1 | 2 | 3 | 4 |
| b) | Mathematics | 1 | 2 | 3 | 4 |
| c) | History | 1 | 2 | 3 | 4 |
| d) | Foreign Language | 1 | 2 | 3 | 4 |
| e) | English | 1 | 2 | 3 | 4 |
| f) | Other AP/ IB course write in | 1 | 2 | 3 | 4 |

6_f) In the past 12 months, how many times did you talk to a school guidance or career counselor about...

| | | (CIRCLE ONE ON EACH LINE) | | | | |
|----|-----------------------------------|---------------------------|------|-------|---------------------------|--|
| | | Never | Once | Twice | Three or more times | |
| a) | High school course selection | 0 | 1 | 2 | 3 | |
| b) | Personal problems | 0 | 1 | 2 | 3 | |
| c) | School discipline problems | 0 | 1 | 2 | 3 | |
| d) | What jobs you're suited for | 0 | 1 | 2 | 3 | |
| e) | Your long-term educational plans | 0 | 1 | 2 | 3 | |
| f) | Choosing a college | 0 | 1 | 2 | 3 | |
| g) | College applications | 0 | 1 | 2 | 3 | |
| h) | Career counseling | 0 | 1 | 2 | 3 | |
| i) | Getting letters of recommendation | 0 | 1 | 2 | 3 | |
| j) | Applying for financial aid | 0 | 1 | 2 | 3 | |
| k) | Arranging job interviews | 0 | 1 | 2 | 3 | |

Please tell us how you feel about the following statements.

| (CIRCLE ONE ON EACH LINE) | | | | |
|-----------------------------|----------------|--|---|--|
| Strongly Agree | Agree | Disagree | Strongly Disagree | |
| 1 | 2 | 3 | 4 | |
| 1 | 2 | 3 | 4 | |
| 1 | 2 | 3 | 4 | |
| 1 | 2 | 3 | 4 | |
| 1 | 2 | 3 | 4 | |
| 1 | 2 | 3 | 4 | |
| 1 | 2 | 3 | 4 | |
| 1 | 2 | 3 | 4 | |
| 1 | 2 | 3 | 4 | |
| 1 | 2 | 3 | 4 | |
| 1 | 2 | 3 | 4 | |
| 1 | 2 | 3 | 4 | |
| | Strongly Agree | Strongly Agree Agree 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 | Strongly Agree Agree Disagree 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 | |

| 19) | Do ' | you have | a job | lined up | o after hi | gh school? |
|-----|------|----------|-------|----------|------------|------------|
|-----|------|----------|-------|----------|------------|------------|

| | (CIRCLE ONLY ONE) |
|--|-------------------|
| Yes, I will continue with the job I have now . | |
| Yes, I will work at a new job that is already li | ined up2 |
| No, but I plan to get a permanent job | 3 |
| No, but I plan to get a temporary summer j | ob4 |
| No, I have no plans of getting a job | |

20) Do you plan to join the Armed Forces (including the Coast Guard, National Guard, Reserves, or ROTC)?

(CIRCLE ONLY ONE)

| No, I do not plan to join the Armed Forces | 1 |
|---|---|
| Yes, I have already joined | 2 |
| Yes, I plan to join after I leave high school | 3 |
| Yes, I plan to join sometime in the future | 4 |
| Don't know | 5 |

| 23) | a) Have you participated in the "Running Start" program through your | high school? |
|-----|--|-------------------------|
| | No1 → | SKIP TO 24 |
| | Yes2 | |
| b |) What school or college did you attend through Running Start? | |
| - | | |
| | | |
| | ↓ | |
| 24) | Do you plan to go on to college or other additional schooling right after that is, do you plan to be continuing your education THIS FALL ? | er high school? |
| | No1 → | |
| | Don't Know2 | QUESTION 30_a ON PAGE 9 |
| | Yes3 | 0.41/102/ |

Please tell us about the colleges you are likely to attend. $\underline{\text{ORDER THESE SCHOOLS BY}}$ $\underline{\text{PREFERENCE}}.$

(CIRCLE ONLY ONE IN EACH BOX)

| | | b | С | d | е |
|------|-------------|---------------------------------|--------------|------------------------------------|-------------------|
| | | Have you applied to this | | Did you apply for financial | Were you awarded |
| | | school? | this school? | aid? | financial aid? |
| | 1ST CHOICE: | | | | |
| 26) | Name | Yes | Yes | Yes | Yes |
| (an) | | | | | |
| (3) | | No | No | No | No |
| , , | | | 5 11 1 | 5 11 17 | D 11.1/ |
| | City | | Don't Know | Don't Know | Don't Know |
| (a) | State | | | | |
| | 2ND CHOICE: | V | V | V | |
| 27) | Name | Yes | Yes | Yes | Yes |
| (an) | | | | | |
| | | No | No | No | No |
| (ac) | City | | Don't Know | Don't Know | Don't Know |
| | State | | 2011 1141011 | 50111111011 | 150111111011 |
| (G) | | | | | |
| | 3RD CHOICE: | Yes | Yes | Yes | Yes |
| 28) | Name | . 55 | . 00 | . 55 | . 55 |
| (an) | | NI - | NI- | NI - | N.I |
| | | No | No | No | No |
| (ac) | City | | Don't Know | Don't Know | Don't Know |
| (a) | State | | | | |
| | 4TH CHOICE: | | | | |
| | Name | Yes | Yes | Yes | Yes |
| | | | | | |
| (an) | | No | No | No | No |
| | | | | | |
| (ac) | City | | Don't Know | Don't Know | Don't Know |
| (a) | State | | | | |

| Did you apply for a Gates Foun | dation Achiever Scholarship? |
|--------------------------------|--|
| | (CIRCLE ONLY ONE) |
| Yes | 1 |
| No | 2 <u>]</u> |
| Have not heard of it | Skir |
| Don't know | 4 J Pag |
| Ware you calculated to receive | m Cathor Foundation Achiever Scholarchin? |
| were you selected to receive d | a Gates Foundation Achiever Scholarship? (CIRCLE ONLY ONE) |
| Yes | 1 |
| No | 2 |
| Don't know | 3 |
| | |
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In this survey we ask about your "parent(s) or guardian(s)." When we say this, we mean someone who is most like a parent to you. For example, this could be your parent, step-parent, foster-parent, guardian, parent's live-in partner, grandparent, etc.

Please tell us how often the following things happen during this school year.

| | Never | Rarely | Sometimes | Often |
|---|-------|--------|-----------|-------|
| 32) How often do your parent(s) or guardian(s) help with or check on whether you have done your homework? | 1 | 2 | 3 | 4 |
| 33) How often does another adult (like a tutor) help with or check on whether you have done your homework? | 1 | 2 | 3 | 4 |
| 34) How often do your parent(s) or guardian(s) limit the amount of time you go out with friends on school nights? | 1 | 2 | 3 | 4 |
| 35) How often have you and your parent(s) or guardian(s) discussed school activities or events of particular interest to you? | 1 | 2 | 3 | 4 |
| 36) How often have you and your parent(s) or guardian(s) discussed going to college? | 1 | 2 | 3 | 4 |

Please tell us about the plans of your <u>high school friends</u>.

| | (CIRCLE ONE ON EACH LINE) | | | | | |
|---|---------------------------|-------------------|---------------|-------------------|----------------|---------------|
| | None or Some | Less than Half | About Half | More Than Half | Most or All | Don't Know |
| 37) How many left high school without graduating? | 1 | 2 | 3 | 4 | 5 | 6 |
| 38) How many are planning to work full-time instead of continuing their education after high school? | 1 | 2 | 3 | 4 | 5 | 6 |
| 39) How many have taken or will take the SAT or ACT college entrance examination? | 1 | 2 | 3 | 4 | 5 | 6 |
| 40) How many are planning to attend a two-year community college, trade school, or vocational school? | 1 | 2 | 3 | 4 | 5 | 6 |
| 41) How many are planning to join the armed services? | 1 | 2 | 3 | 4 | 5 | 6 |
| 42) How many are planning to attend a four-year college? | 1 | 2 | 3 | 4 | 5 | 6 |

| 43) | What does your <u>FATHER</u> , or the person who is most like a father to you, think is the most important thing for you to do after high school? |
|-----|---|
| | (CIRCLE ONLY ONE) |
| | Go to college1 |
| | Enter a trade school, vocational school or work apprenticeship program2 |
| | Enter military service |
| | Get a job4 |
| | Get married5 |
| | I don't know6 |
| | Does not apply (no male parent/guardian)7 |
| 44) | What does your <u>MOTHER</u> , or the person who is most like a mother to you, think is the most important thing for you to do after high school? |
| | (CIRCLE ONLY ONE) |
| | Go to college1 |
| | Enter a trade school, vocational school or work apprenticeship program2 |
| | Enter military service |
| | Get a job4 |
| | Get married5 |
| | I don't know6 |

Does not apply (no female parent/guardian)7

| 45) | What do your <u>BROTHERS</u> or <u>SISTERS</u> think is the most important thing for you to do after high school? |
|-----|---|
| | (CIRCLE ONLY ONE) |
| | Go to college1 |
| | Enter a trade school, vocational school or work apprenticeship program2 |
| | Enter military service3 |
| | Get a job4 |
| | Get married5 |
| | I don't know6 |
| | Does not apply (no brothers or sisters)7 |
| 46) | What do your <u>FRIENDS</u> think is the most important thing for you to do after high school? (CIRCLE ONLY ONE) |
| | Go to college1 |
| | Enter a trade school, vocational school or work apprenticeship program2 |
| | Enter military service3 |
| | Get a job4 |
| | Get married5 |
| | I don't know6 |
| 48) | What does your <u>FAVORITE TEACHER</u> think is the most important thing for you to do after high school? |
| | (CIRCLE ONLY ONE) |
| | Go to college1 |
| | Enter a trade school, vocational school or work apprenticeship program2 |
| | Enter military service3 |
| | Get a job4 |
| | Get married5 |
| | I don't know6 |

| 47) | What does AN ADULT WHOSE ADVICE YOU VALUE think is the most important thing for yo |
|-----|--|
| | to do after high school? |

| Go to college | 1 |
|--|---|
| Enter a trade school, vocational school or work apprenticeship program | 2 |
| Enter military service | 3 |
| Get a job | 4 |
| Get married | 5 |
| I don't know | 6 |

49) How far in school do you think your <u>FATHER</u>, or the person who is most like a father to you, wants you to go? Please mark the highest level of schooling you think he wants you to achieve.

(CIRCLE ONLY ONE)Less than High School Graduation1High School Graduation Only2Less than 2 Years of College, Vocational, or Business School32 or More Years of College Including a 2-Year Degree4Finish College (4 or 5 Year Degree)5Master's Degree or Equivalent6Ph.D., M.D., or other Professional Degree7Don't Know8Does not apply (no male parent/guardian)9

| 50) | How far in school do you think your MOTHER, or the person who is most like a mother to |
|-----|--|
| | you, wants you to go? Please mark the highest level of schooling you think she wants |
| | you to achieve. |

| (CIRC | CLE ONLY ONE) |
|---|---------------|
| Less than High School Graduation | • |
| High School Graduation Only | 2 |
| Less than 2 Years of College, Vocational, or Business S | School3 |
| 2 or More Years of College Including a 2-Year Degree | e4 |
| Finish College (4 or 5 Year Degree) | 5 |
| Master's Degree or Equivalent | 6 |
| Ph.D., M.D., or other Professional Degree | 7 |
| Don't Know | 8 |
| Does not apply (no female parent/guardian) | 9 |

51) Have you participated in any of the following school activities during the <u>CURRENT</u> <u>SCHOOL YEAR</u>? How many hours do/did you spend on each activity during a typical week when the activity is/was going on? (FILL IN ALL THAT APPLY)

School Sports, Please Write In:
(Varsity or Intramural)

1
2
3

| Other Activities, Please Write In: | Hours Spent per Week |
|------------------------------------|-------------------------|
| _4 | |
| _5 | |
| _6 | |
| _7 | |
| _8 | |

How do you feel about the following statements about your current school and teachers?

| | | (C | KCLE ONE C | IN EACH LIN | <u>-)</u> |
|-----|--|-------------------|------------|-------------|----------------------|
| | | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 52) | Students make friends with students of other racial and ethnic groups. | 1 | 2 | 3 | 4 |
| 53) | The teaching is good. | 1 | 2 | 3 | 4 |
| 54) | Teachers are interested in students. | 1 | 2 | 3 | 4 |
| 55) | I don't feel safe in this school. | 1 | 2 | 3 | 4 |
| 56) | Disruptions by other students get in the way of my learning. | 1 | 2 | 3 | 4 |
| 57) | Fights often occur between different racial or ethnic groups. | 1 | 2 | 3 | 4 |
| 58) | Students are graded fairly. | 1 | 2 | 3 | 4 |
| 59) | Discipline is fair. | 1 | 2 | 3 | 4 |

| 60) | Were you ever held back (made to repeat) a grade i | n school? |
|-----|--|-----------|
|-----|--|-----------|

| | (CIRCLE ONLY ONE) | | |
|----------------------|-------------------|--|--|
| a) No | 2 | | |
| Yes | 1 — | | |
| b) Write in Grade(s) | | | |

61) Overall, about how much time do you spend on homework <u>EACH WEEK</u>, in school (for example, in study hall, during lunch or free periods, etc.)? Outside of school?

(CIRCLE ONE ON EACH LINE)

| | None | Less than 1 hour | 1 or 2 hours | 3 or 4 hours | 5 or 6 hours | 7, 8, or 9 hours | Over 10 hours |
|--------------------|------|------------------------|-----------------|-----------------|-----------------|---------------------|---------------|
| _a) In school | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| _b) Outside school | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

62) Did you attend any of the following before you went to first grade?

| | | Yes | No | Don't Know |
|----|-----------------------|-----|----|---------------|
| a) | Day care program | 1 | 2 | 3 |
| b) | Nursery or pre-school | 1 | 2 | 3 |
| c) | Head Start | 1 | 2 | 3 |
| d) | Kindergarten | 1 | 2 | 3 |

63) IN GENERAL, what grades do you get?

(CIRCLE ONLY ONE)

| Mostly A's | 1 |
|-----------------------|---|
| Half A's and Half B's | |
| Mostly B's | 3 |
| Half B's and Half C's | |
| Mostly C's | 5 |
| Half C's and Half D's | 6 |
| Mostly D's | 7 |
| Mostly Below D | 8 |

Think about your experiences since the beginning of <u>THIS SCHOOL YEAR</u>. How many times have the following things happened to you since then? (Please remember that all of your answers are confidential.)

| | | | | 1E OI1 E/ | | / |
|-----|--|-------|-----------|-----------|-----------|------------------|
| | | Never | 1-2 Times | 3-6 Times | 7-9 Times | Over 10 Times |
| 64) | I was late for school. | 1 | 2 | 3 | 4 | 5 |
| 65) | I cut or skipped my classes. | 1 | 2 | 3 | 4 | 5 |
| 66) | I was tired in class. | 1 | 2 | 3 | 4 | 5 |
| 67) | I went to class without a pencil, pen, or paper. | 1 | 2 | 3 | 4 | 5 |
| 68) | I went to class without my books. | 1 | 2 | 3 | 4 | 5 |
| 69) | I went to class without my homework completed. | 1 | 2 | 3 | 4 | 5 |
| 70) | I got in trouble for not following school rules. | 1 | 2 | 3 | 4 | 5 |
| 71) | I missed a day of school. | 1 | 2 | 3 | 4 | 5 |
| 72) | I was put on in-school suspension. | 1 | 2 | 3 | 4 | 5 |
| 73) | I was suspended or put on probation from school. | 1 | 2 | 3 | 4 | 5 |

Please tell us how you feel about the following statements.

| | | (CIRCLE ONE ON EACH LINE) | | | |
|-----|---|---------------------------|-------|----------|----------------------|
| | | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 74) | My schoolwork is a central aspect of my life. | 1 | 2 | 3 | 4 |
| 75) | Kids at school see me as not fitting in. | 1 | 2 | 3 | 4 |
| 76) | I feel I am a person of worth, the equal of other people. | 1 | 2 | 3 | 4 |
| 77) | I feel that it is okay for me to cheat on tests in my classes. | 1 | 2 | 3 | 4 |
| 78) | The opinions of my parent(s) or guardian(s) are very important to me. | 1 | 2 | 3 | 4 |
| 79) | It is difficult to make friends with members of my own sex. | 1 | 2 | 3 | 4 |
| 80) | I feel useless at times. | 1 | 2 | 3 | 4 |
| 81) | I receive high levels of love and support from family members. | 1 | 2 | 3 | 4 |
| 82) | On the whole I am satisfied with myself. | 1 | 2 | 3 | 4 |
| 83) | Most people don't really care what happens to other people. | 1 | 2 | 3 | 4 |

Please tell us how you feel about the following statements.

(CIRCLE ONE ON EACH LINE)

| | | (CIRCLE ONE ON LACIT LINE) | | | |
|-----|--|----------------------------|-------|----------|----------------------|
| | | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 84) | I feel that it is okay for me to work hard for good grades. | 1 | 2 | 3 | 4 |
| 85) | My parent(s) or guardian(s) are usually unhappy or disappointed with what I do. | 1 | 2 | 3 | 4 |
| 86) | I know some adults (who are not my parent(s) or guardian(s)) who I can go to for advice and support. | 1 | 2 | 3 | 4 |
| 87) | I feel that it is okay for me to copy someone else's homework. | 1 | 2 | 3 | 4 |
| 88) | I am not popular with members of the opposite sex. | 1 | 2 | 3 | 4 |
| 89) | My family will support me in whatever I choose to do after high school. | 1 | 2 | 3 | 4 |
| 90) | At times, I think I am no good at all. | 1 | 2 | 3 | 4 |
| 91) | The opinions of my teachers and other adults at school are important to me. | 1 | 2 | 3 | 4 |
| 92) | My parent(s) or guardian(s) know many of the parent(s) or guardian(s) of my closest school friends. | 1 | 2 | 3 | 4 |

93) What grade were you in when you started attending this high school (the high school you are currently enrolled in)?

(CIRCLE ONLY ONE)

| 9 th Grade | 1 |
|-----------------------|---|
| 10th Grade | 2 |
| 11th Grade | 3 |
| 12th Grade | 4 |

| 94) | a) Have you attended any high school(s) other than the one you are in now? | | | | |
|----------|---|--|--|--|--|
| | (CIRCLE ONLY ONE) | | | | |
| | Yes1 | | | | |
| | No | | | | |
| | b) IF YES, please write the name of the previous high school you attended and the cit state/country where it is located. | | | | |
| | a) High School Name: | | | | |
| | b) City: | | | | |
| | c) State or Country: | | | | |
| √ 95) | Where did you begin first grade? | | | | |
| | a) City: | | | | |
| | b) State or Country: | | | | |
| 96) | a) How long have you lived in your current home?years | | | | |
| | b) How many times have you moved from one home to another <u>since you started first</u> <u>grade</u> ? | | | | |
| | times→ IF NEVER MOVED SKIP TO QUESTION 97 ON PAGE 22 | | | | |
| c |) IF YOU HAVE MOVED, did you live in this school district or somewhere else just before | | | | |
| | you moved to your current home | | | | |
| | (CIRCLE 1 OR 2) | | | | |
| | a) This school district1 | | | | |
| | Somewhere else2 | | | | |
| | b) city | | | | |
| | c) state | | | | |
| | d) country | | | | |

97) Does your family own or rent the home you live in?

| Own (with or without mortgage) | 1 |
|--------------------------------|---|
| Rent | 2 |
| Don't know | 3 |

Please tell us how you feel about the following statements.

| | | Strongly Agree | Agree | Disagree | Strongly Disagree |
|------|---|-------------------|-------|----------|----------------------|
| 98) | I feel good about myself. | 1 | 2 | 3 | 4 |
| 99) | My parent(s) or guardian(s) know many of my closest school friends. | 1 | 2 | 3 | 4 |
| 100) | I see myself as not fitting in. | 1 | 2 | 3 | 4 |
| 101) | I have frequent, in-depth conversations with my parent(s) or guardian(s). | 1 | 2 | 3 | 4 |
| 102) | I am able to do things as well as most other people. | 1 | 2 | 3 | 4 |
| 103) | Working hard now will bring important payoffs to me in the future. | 1 | 2 | 3 | 4 |
| 104) | I can go to my parent(s) or guardian(s) for advice and support. | 1 | 2 | 3 | 4 |
| 105) | I don't have enough control over the direction my life is taking. | 1 | 2 | 3 | 4 |
| 106) | Chance and luck are very important for what happens in my life. | 1 | 2 | 3 | 4 |
| 107) | I am optimistic about my future. | 1 | 2 | 3 | 4 |

| Υe | | | | 1 — | \neg |
|----------|---------------------|-----------------|---------------|------|--------|
| N | | | | 2 | |
| | | | | | |
| | | | | | |
| If ves w | at type of school o | r educational r | aroaram was t | nis? | |
| • | at type of school o | • | | | |
| • | at type of school o | • | | | |
| • | | • | | | |

Even if you are not sure, please write in your best guess.

108_) In the last three years have you ever attended an after-school educational program or

For example, accountant, engineer, secretary, janitor, college teacher, truck driver, priest, gardener, electrician, high school teacher, restaurant manager, homemaker, actor or actress, etc.

115) To what extent do you think the things listed below will prevent you from having the kind of work that you would like to have?

| | | (CIRCL | E ONE ON E | ACH LINE) |
|----|------------------------------|------------|------------|-----------|
| | | Not at all | Somewhat | A lot |
| a) | your religion | 1 | 2 | 3 |
| b) | your sex | 1 | 2 | 3 |
| c) | your sexual orientation | 1 | 2 | 3 |
| d) | your race or ethnicity | 1 | 2 | 3 |
| e) | your education | 1 | 2 | 3 |
| f) | your family background | 1 | 2 | 3 |
| g) | a learning disability | 1 | 2 | 3 |
| h) | a physical disability | 1 | 2 | 3 |
| i) | your political views | 1 | 2 | 3 |
| j) | lack of vocational training | 1 | 2 | 3 |
| k) | lack of ability | 1 | 2 | 3 |
| I) | not knowing the right people | 1 | 2 | 3 |
| m) | not wanting to work hard | 1 | 2 | 3 |
| n) | not wanting to conform | 1 | 2 | 3 |
| | | | | |

120) At what age do you <u>EXPECT</u> to have your first child? If you have not thought about this issue, please make your best guess.

| | ILY ONE) |
|--|-------------|
| Before age 18 | 1 |
| Age 18 or 19 | 2 |
| Age 20 or 21 | 3 |
| Age 22 or 23 | 4 |
| Age 24 or 25 | 5 |
| Age 26 to 30 | 6 |
| Age 31 to 35 | 7 |
| Age 36 or Later | 8 |
| I do not expect to have children | 9 |
| Not Applicable because: I am pregnant OR my girlfriend/partner is pregnant | 1 |
| I have a child | |
| (CIRCLE ON | - |
| (CIRCLE ON Biological Father | - |
| • | 1 |
| Biological Father | 2 |
| Biological FatherAdoptive Father | 2 3 |
| Biological Father | 1 2 3 |
| Biological Father Adoptive Father Stepfather Foster Father | 1345 |
| Biological Father Adoptive Father Stepfather Foster Father Partner/ Friend of parent who lives in household | 1345 |
| Biological Father | 13455 |
| Biological Father Adoptive Father Stepfather Foster Father Partner/ Friend of parent who lives in household Brother (including Step/Half/Adopted) | 1 |
| Biological Father | 13568 |
| Biological Father | 1 |
| Biological Father | 135689 |

The following questions refer to your father, or the person who is most like a father to you.

122_) What is the highest degree or level of school that he (your father or father figure) has completed?

(CIRCLE ONLY ONE - THE HIGHEST LEVEL COMPLETED)

| Less than 1st Grade | .1 |
|---|-----|
| 1st, 2nd, 3rd, or 4th Grade | .2 |
| 5th or 6th Grade | .3 |
| 7th or 8th Grade | .4 |
| 9th Grade | .5 |
| 10th Grade | .6 |
| 11th Grade | .7 |
| 12th Grade no diploma | .8 |
| High School Grad-Diploma or Equivalent | .9 |
| Some College But No Degree | .10 |
| Associate Degree-Occupational/Vocational | .11 |
| Associate Degree/ Academic Program | .12 |
| Bachelor's Degree | .13 |
| Master's Degree (i.e. MA, MS) | .14 |
| Professional School (i.e. MD, DDS, DVM) | .15 |
| Doctorate Degree (i.e. PhD, EdD) | .16 |
| Not Applicable (No Father or Father Figure) | .17 |

We are interested in finding out about the kind of work that he (your FATHER or the person most like a father to you) does.

| 123) | profit? | ire) do any work for either pay or | | | |
|---------------|---|---|--|--|--|
| | (CIRCLE ONLY ONE) Yes | | | | |
| | Not applicable (no male parent/father figure) | 2 3- SKIP TO QUESTION | | | |
| desc the l | (your father or the person most like a father to your father one at which he worked the most hours. ast month, give the information for his last job or l | If he had no job or business in business. | | | |
| 124) | For whom did he (your father or father figure) work? Forces, print the branch of the Armed Forces. | , | | | |
| 125) | What kind of business or industry was this? Describe employed. (For example: hospital, military, newsparauto repair shop, bank) | • | | | |
| 126) | Is this mainly – | | | | |
| | Manufacturing? Wholesale trade? Retail trade? Other (agriculture, construction, service, governme | 3 | | | |

| 127) | What kind of work was he (your father or father figure) doing? (For example: registered nurse, personnel manager, supervisor of order department, auto mechanic, accountant) |
|------|---|
| 128) | What were his most important activities or duties? (For example: patient care, directing hiring policies, supervising order clerks, repairing automobiles, reconciling financial records) |
| 129) | Was he (your father or father figure)— |
| | Employee of a private company or business?1 |
| | Government employee (including armed forces)?2 |
| | Self-Employed?3 |
| | Working without pay in a family business or farm?4 |
| 127_ | (CIRCLE ONLY ONE) Biological Mother |
| | Adoptive Mother2 |
| | Step Mother3 |
| | Foster Mother4 |
| | Partner/ Friend of parent who lives in household5 |
| | Sister (including Step/Half/Adopted)6 |
| | Grandmother (including Step/Half/Adopted)7 |
| | Aunt (including Step/Half/Adopted)8 |
| | Other Relative, not listed above9 |
| | 129_b)Who? |
| | Other Non-Relative, not listed above10 |
| | 129_c)Who? |
| | No one |

The following questions refer to your mother or the person most like a mother to you.

130_) What is the highest degree or level of school that she (your mother or mother figure) completed?

| | (CIRCLE ONLY ONE – THE HIGHEST LEVEL COMPLETED |) |
|------|---|----------------------|
| | Less than 1st Grade | |
| | 1st, 2nd, 3rd, or 4th Grade2 | 2 |
| | 5th or 6th Grade | 3 |
| | 7th or 8th Grade | 1 |
| | 9th Grade5 |) |
| | 10th Grade | Ó |
| | 11th Grade | 7 |
| | 12th Grade no diploma | 3 |
| | High School Grad-Diploma or Equivalent |) |
| | Some College But No Degree | 0 |
| | Associate Degree-Occupational/Vocational | 1 |
| | Associate Degree/ Academic Program | 2 |
| | Bachelor's Degree | 3 |
| | Master's Degree (i.e. MA, MS) | 4 |
| | Professional School (i.e. MD, DDS, DVM) | 5 |
| | Doctorate Degree (i.e. PhD, EdD) | 6 |
| | Not Applicable (No Mother or Mother Figure) | 7 |
| | are interested in finding out about the kind of work that she (yo | our mother or mother |
| 131) | IN THE LAST MONTH, did she (your mother or mother figure) do any pay or profit? | work for either |

Yes1

No3

Not applicable (no female parent/mother figure) 2

SKIP TO QUESTION 138

ON PAGE 31

If she (your mother or person most like a mother to you) had more than one job, describe the one at which she worked the most hours. If she had no job or business in the last month, give the information for her last job or business.

| 132) | For whom did she (your mother or mother figure) work? If now on active duty in the Armed Forces, print the branch of the Armed Forces. | | | |
|------|---|--|--|--|
| | (Name of Company or Business) | | | |
| 133) | What kind of business or industry was this? Describe the activity at location where employed. (For example: hospital, military, newspaper publishing, mail order house, auto repair shop, bank) | | | |
| 134) | Is this mainly — | | | |
| | (CIRCLE ONLY ONE) | | | |
| | Manufacturing?1 | | | |
| | Wholesale trade?2 | | | |
| | Retail trade?3 | | | |
| | Other (agriculture, construction, service, government, military)?4 | | | |
| 135) | What kind of work was she (your mother or mother figure) doing? (For example: registered nurse, personnel manager, supervisor of order department, auto mechanic, accountant) | | | |
| 136) | What were her most important activities or duties? (For example: patient care, directing hiring policies, supervising order clerks, repairing automobiles, reconciling financial records) | | | |
| | | | | |

| 137) | Was she (your mother or mother figure)— (CIRCLE ONLY ONE) |
|------|--|
| | Employee of a private company or business?1 |
| | Government employee (including armed forces)?2 |
| | Self-Employed?3 |
| | Working without pay in a family business or farm?4 |
| | |
| 138) | a) Are you currently employed or have you ever been employed? |
| | Please include work that you have done for pay. However, <u>do not include</u> work that you do around your own home (like mowing your lawn, taking care of younger brothers or sisters, or other chores) or volunteer work. |
| | (CIRCLE ONLY ONE) I have <u>never</u> been employed |
| | I <u>have</u> been employed, but I am <u>not</u> employed now |
| | I <u>am currently</u> employed |
| | ▼ |
| | b) What are your plans for your current job? |
| | I will continue to work at this job after high school |
| | I plan to stop working at this job |
| | ▼ |
| | When do you plan to stop working at this job? |
| | c) d) |
| | Month Year |

Now we would like to ask about work that you have done for pay on your <u>current</u> or <u>most recent</u> job. If you work/worked at more than one job, think about your <u>main</u> or <u>most important</u> job.

| n average week, D | DURING THE SCHOOL YEAR, how many of is, on Friday night, anytime on Saturdo | |
|----------------------------------|---|--|
| ne WEEKEND – that ng the day? | is, on Friday night, anytime on Saturdo | |
| | la a come un a vecca a la | |
| | nours per week | |
| vhom do/did you | work? | |
| | (Name of Co | ompany or Business) |
| vas this mainly – | | |
| · | (CIRCLE ON | |
| _ | | |
| | | |
| All TRAMES | | |
| | isitoction, service, government, militar | |
| | l trade? | I trade?(agriculture, construction, service, government, militar |

| 144) | | are/were your most important activities | | • | ample: ins | stall |
|-------|----------|---|-------------------|-----------|------------|----------------------|
| | alom | inum siding, change diapers, mow lawns | s, clean g | JI III J | | |
| | | | | | | |
| 145) | Are/v | were you – | | (QIDQI 5 | OME) | |
| | Emp | oloyee of a private company or business? | ? | (CIRCLE | _ | |
| | Gov | ernment employee (including armed for | ces)? | | 2 | |
| | Self- | Employed? | | | 3 | |
| | Worl | king without pay in a family business or fo | arm? | | 4 | |
| | | | | | | |
| | | | | | | |
| Pleas | e tell (| us how you feel about the following state | ements. | | | |
| | | | (CIR | CLE ONE | ON EACH | I LINE) |
| | | | Strongly Agree | Agree | Disagree | Strongly Disagree |
| | 146) | How well I do/did on my job is/was an important part of who I am as a person. | 1 | 2 | 3 | 4 |
| | 147) | My job is/was more important to me than my schoolwork. | 1 | 2 | 3 | 4 |
| | 148) | In the long run doing well in school will pay off more than doing well on my | 1 | 2 | 3 | 4 |
| | | job. | | _ | | |
| | | • • | ' | | | |
| | | • • | | _ | | |
| 149) | In wh | • • | urrent/m | | t job? | |
| 149) | a) | job. | | ost recen | t job? | |

| a) | b) | |
|--|--|--------------------|
| Month | Year | |
| i1) How much do/did recent job? | you earn per hour including tips (if applicable) on yo | ur curre |
| | dollars per hour | |
| everal of the following | a questions are about your ethnicity race, and id | entity |
| | g questions are about your ethnicity, race, and idem repetitive, please try to answer all of them. | entity. |
| Although they may see | em repetitive, please try to answer all of them. lispanic/Latino? | |
| Although they may see | em repetitive, please try to answer all of them. | v NE) |
| Sta) Are you Spanish/H | em repetitive, please try to answer all of them. lispanic/Latino? (CIRCLE ON | NE) |
| Ithough they may see 58a) Are you Spanish/H No, not Spanish/Hi Yes, Mexican, Mex | em repetitive, please try to answer all of them. lispanic/Latino? (CIRCLE ON | NE) 1 |
| Ithough they may see 58a) Are you Spanish/H No, not Spanish/Hi Yes, Mexican, Mex Yes, Puerto Rican. | lispanic/Latino? (CIRCLE ON Spanic/Latino) | NE) 1 2 |
| Sta) Are you Spanish/H No, not Spanish/Hi Yes, Mexican, | lispanic/Latino? (CIRCLE ON Spanic/Latino) | NE) 1 2 3 |

159) What is your race?

| Circle one or more races to indicate what race you | consider | yourself to b | e. |
|--|----------|---------------|----|
|--|----------|---------------|----|

| а | White |
|---|---|
| b | Black or African American |
| С | American Indian or Alaska Native |
| | print name of enrolled or principal tribe |
| | → d) |
| е | Asian Indian |
| f | Cambodian |
| g | Chinese |
| h | Filipino |
| i | Japanese |
| j | Korean |
| k | Laotian |
| I | Vietnamese |
| m | Other Asian |
| | print race. → n) |
| 0 | Native Hawaiian |
| р | Guamanian or Chamorro |
| q | Samoan |
| r | Other Pacific Islander |
| | print race. →s) |
| t | Some other race |
| | print race → u) |

| 160) | What is your ancestry or ethnic origin? | | | | |
|------|---|--|--|--|--|
| | (For example: Italian, Jamaican, Russian, African Am., Cambodian, Cape Verdean, Norwegian, Cuban, Puerto Rican, Amer. Indian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.) | | | | |
| 161) | Considering all the ethnic and racial categories, what is your primary ethnic and/or racial identity? | | | | |
| 162) | What ethnic and/or racial category do others put you in? | | | | |
| 163) | Where were you born? State or Country | | | | |
| 164) | If you were not born in the United States, when did you arrive in the United States? How old were you when you arrived in the United States? a) Year of Arrival: b) Age at Arrival: | | | | |
| 175 | | | | | |
| 105) | Are you a United States citizen? | | | | |
| | Yes1 | | | | |
| | No2 | | | | |
| | Don't Know 3 | | | | |

| 166) | What is your biological/ birth mother's ancestry or ethnic origin? | | | | | | |
|------|--|--|--|--|--|--|--|
| | (For example: Italian, Jamaican, Russian, African Am., Cambodian, Cape Verdean, Norwegian, Cuban, Puerto Rican, Amer. Indian, Dominican, French Canadian, Haitiar Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.) | | | | | | |
| | Where was she born? | | | | | | |
| | State or Country | | | | | | |
| 169) | What is your biological/ birth father's ancestry or ethnic origin? | | | | | | |
| | (For example: Italian, Jamaican, Russian, African Am., Cambodian, Cape Verdean, Norwegian, Cuban, Puerto Rican, Amer. Indian, Dominican, French Canadian, Haitiar Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.) | | | | | | |
| 170) | Where was he born? | | | | | | |
| | | | | | | | |

| | Yes | $1 \rightarrow$ GO TO QUESTION 173 | |
|------|------------------------|------------------------------------|--|
| | No | | |
| 173) | What language is that? | | |

174) If a language other than English is spoken at home, how well do you...

(CIRCLE ONE ON EACH LINE)

| | | Very Well | Well | Not Well | Not at all |
|----|--------------------------|-----------|------|----------|------------|
| a) | understand the language? | 1 | 2 | 3 | 4 |
| b) | speak the language? | 1 | 2 | 3 | 4 |
| c) | read the language? | 1 | 2 | 3 | 4 |
| d) | write the language? | 1 | 2 | 3 | 4 |

175) How often do you use your home language with...

(CIRCLE ONE ON EACH LINE)

| | | (5.11.512.511.211.2) | | | | |
|----|---------------------------------|----------------------------------|---------------------|-----------|-------|----------------|
| | | Always or most of the time | About half the time | Sometimes | Never | Does not apply |
| a) | Your mother or female guardian? | 1 | 2 | 3 | 4 | 5 |
| b) | Your father or male guardian? | 1 | 2 | 3 | 4 | 5 |
| c) | Your brothers and/or sisters? | 1 | 2 | 3 | 4 | 5 |
| d) | Your friends? | 1 | 2 | 3 | 4 | 5 |
| e) | Other people in your community? | 1 | 2 | 3 | 4 | 5 |

176) How well do you...

(CIRCLE ONE ON EACH LINE)

| | | Very Well | Well | Not Well | Not at all |
|----|---|-----------|------|----------|------------|
| a) | Understand spoken English? | 1 | 2 | 3 | 4 |
| b) | Speak English? | 1 | 2 | 3 | 4 |
| c) | Read English? | 1 | 2 | 3 | 4 |
| d) | Write English? | 1 | 2 | 3 | 4 |
| e) | How well do others think you speak English? | 1 | 2 | 3 | 4 |

| 177) W | /hat language d | lo you prefer t | to speak most | of the time? |
|--------|-----------------|-----------------|---------------|--------------|
|--------|-----------------|-----------------|---------------|--------------|

177_51) How well does your FATHER (or father figure)...

(CIRCLE ONE ON EACH LINE)

| | | Very Well | Well | Not Well | Not at all |
|----|----------------------------|-----------|------|----------|------------|
| a) | Understand spoken English? | 1 | 2 | 3 | 4 |
| b) | Speak English? | 1 | 2 | 3 | 4 |
| c) | Read English? | 1 | 2 | 3 | 4 |
| d) | Write English? | 1 | 2 | 3 | 4 |

177_52) How well does your MOTHER (or mother figure)...

(CIRCLE ONE ON EACH LINE)

| | | Very Well | Well | Not Well | Not at all |
|----|----------------------------|-----------|------|----------|------------|
| a) | Understand spoken English? | 1 | 2 | 3 | 4 |
| b) | Speak English? | 1 | 2 | 3 | 4 |
| c) | Read English? | 1 | 2 | 3 | 4 |
| d) | Write English? | 1 | 2 | 3 | 4 |

| | | (CIRCLE ONLY ONE) |
|------|--|---|
| | Often | 1 |
| | Sometimes | 2 |
| | Rarely | 3 |
| | Never | 4 |
| | | |
| 179) | Have you ever experienced prejudice or religion? | or discrimination based on your <u>nationality or</u> |
| | | (CIRCLE ONLY ONE) |
| | Often | 1 |
| | Sometimes | 2 |
| | Rarely | 3 |
| | Never | 4 |
| | | |
| 180) | Have you ever experienced prejudice o | or discrimination based on your gender? |
| | | (CIRCLE ONLY ONE) |
| | Often | 1 |
| | Sometimes | 2 |
| | Rarely | 3 |
| | Never | 4 |
| | | |
| 181) | Have you ever experienced prejudice of disability? | or discrimination based on a physical or mental |
| | | (CIRCLE ONLY ONE) |
| | Often | 1 |
| | Sometimes | 2 |
| | Rarely | 3 |
| | Never | 4 |
| | 116161 | 4 |

178) Have you ever experienced prejudice or discrimination based on your race or ethnicity?

| 182) | _ | Have you ever experienced prejudice or discrimination based on <u>another personal</u> <u>characteristic</u> ? | | | |
|------|----------|--|--|--|--|
| | a) (ple | ease write in the characteristic(s):) | | | |
| | | (CIRCLE ONLY ONE) | | | |
| | b) | Often1 | | | |
| | | Sometimes | | | |
| | | Rarely3 | | | |
| | | Never4 | | | |
| | | | | | |
| 183) | | u think <u>people of your race/ethnicity/national origin group</u> have a harder time or sier time <u>getting into a four-year college or university</u> than they used to? | | | |
| | | (CIRCLE ONLY ONE) | | | |
| | Easier : | than before1 | | | |
| | About | the same as before2 | | | |
| | Harder | r than before3 | | | |
| | Don't I | Know4 | | | |
| 184) | | u think <u>people of your race/ethnicity/national origin group</u> have a harder time or sier time <u>getting financial aid to go to college</u> than they used to? | | | |
| | | (CIRCLE ONLY ONE) | | | |
| | Easier : | than before1 | | | |
| | About | the same as before2 | | | |
| | Harder | r than before3 | | | |
| | Don't I | Know4 | | | |
| | | | | | |

| 185) | Do you think <u>people of your race/ethnicity/national origin group</u> have a harder time or an easier time <u>getting a good job</u> than they used to? | | |
|------|---|--|--|
| | (CIRCLE ONLY ONE) | | |
| | Easier than before1 | | |
| | About the same as before2 | | |
| | Harder than before3 | | |
| | Don't Know4 | | |
| 108) | In general, how is your health? | | |
| | (CIRCLE ONLY ONE) | | |
| | Poor1 | | |
| | Fair2 | | |
| | Good3 | | |
| | Very Good4 | | |
| | Excellent5 | | |
| 109) | Have you ever smoked cigarettes regularly, that is, at least 1 cigarette every day for 30 days? (CIRCLE ONLY ONE) | | |
| | I smoke regularly now1 | | |
| | I used to smoke, but I do not smoke now2 | | |
| | I have never smoked regularly3 | | |
| 110) | What is your height (in feet and inches) when you take off your shoes? a) feet b) inches | | |
| 111) | What is your weight (in pounds)? pounds | | |

| 112) | when did you last have a dental exam | ination? | |
|------|---|---------------------------------------|--|
| | | (CIRCLE ONLY ONE) | |
| | Within the last 12 months | 1 | |
| | 1 to 2 years ago | 2 | |
| | More than 2 years ago | 3 | |
| | I do not remember | 4 | |
| | I have never had a dental exam | 5 | |
| 186) | Are you living with both your mother a | nd your father (biological or ado | ptive)? |
| | | (CIRCLE ONLY ONE) | |
| | Yes | 1 | |
| | No | 2 | |
| 187) | a) Are they married to each other? | | |
| | | (CIRCLE ONLY ONE) | |
| | Yes | 1 → | GO TO —————————————————————————————————— |
| | No | 2 | QUESTION 100 |
| b) | IF YOUR MOTHER AND FATHER ARE <u>NO</u> | <u>I</u> CURRENTLY MARRIED, please te | ll us why. |
| | | (CIRCLE ONLY ONE) | |
| | They were divorced | 1 | |
| | They are separated | 2 | |
| | My biological father has died | 3 | |
| | My biological mother has died | 4 | |
| | They were never married | 5 | |
| | I do not know my biological paren | ts6 | |
| | I do not know the reason | 7 | |
| 188) | How many people usually live in the sc | ame household as you? | |
| | | people (includin | g yourself) |

| 189) | How many brothers and/ or sisters have you ever had? Please include all full-, step-, half-foster-, and adopted-siblings, even if they are no longer alive. (Do not include yourself in this number) |
|------|--|
| | Brothers and/or Sisters |

190) Now we would like to know a little more about these brothers and/or sisters. Please include all full-, step-, half-, foster-, and adopted-siblings. Please tell us about <u>EACH ONE WHO IS STILL ALIVE</u>.

| | S | t | а | b | r | SC | е |
|------|------------|-------------|--------------------|-------------------------------|------------------------|-------------------|--|
| | Sex M/F | Twin Y/N | Age in years | Birthplace (state/country) | Relationship to you | In School? Y/N | Total Education and Last Degree |
| e.g. | М | Ν | 29 | Mexico | Step-Brother | Ν | Two years of college, Associates degree |
| e.g. | F | Ν | 8 | Colorado | Sister | Y | In 3 rd grade |
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |

| | | | o that we can contact you. part of this research project |
|---------------------------------------|---------------------------------------|----------------------------|---|
| | (| MAILING LABEL GOES H | IERE) |
| If the abo | ove information ab | out you is not correct and | complete, please write the co |
| | on below. | (b) First | |
| informati | (a) Last (d) Number | Street | (c) Middle Apt. Number (g) Zip Code |
| information NAME: | (a) Last (d) Number (e) City | Street | (c) |
| information NAME: ADDRESS What is y | (a) Last (d) Number (e) City | Street(f) State | (c)Middle Apt. Number (g)Zip Code ddress (if applicable)? |

EMAIL ADDRESS: (c)_____

(d) I do not have an email address ____

| NAME: | (a) | (b) First | (C) |
|---------------------|---------------------|--|--------------------------------|
| | Last | FIRST | Middle |
| a) Is you yours? | ur mother's or femo | ale guardian's address and te | elephone number the same |
| | | (CIRCLE ON | LY ONE) |
| Yes | | | 1 |
| No | | | 2 |
| Don't k | now | | 3 |
| No fem | ale parent/guardi | an | 4 |
| | | yours, what is your mother's mail (if applicable)? | or female guardian's addr |
| ADDRES | | | |
| | | Street | |
| | Number | Street | Apt. Number |
| | Number | Street (c) State | Apt. Number |
| (b) | Number | Street | Apt. Number (d) Zip Code |

| NAME: (a) | (b) First | (c) |
|--|--|----------------------------|
| Last | First | Middle |
| a) Is your father's or mo | ale guardian's address and te | lephone number the same as |
| | (CIRCLE C | ONLY ONE) |
| Yes | | 1 |
| No | | 2 |
| Don't know | | 3 |
| No male parent/guare | dian | 4 |
| | | |
| telephone number, ar | as yours, what is your father's nd email (if applicable)? | |
| telephone number, ar | - | |
| telephone number, ar ADDRESS: (a) Number | nd email (if applicable)? Street | Apt. Number |
| telephone number, ar ADDRESS: (a) Number | nd email (if applicable)? | Apt. Number |
| ADDRESS: (a) | Street (c) State | Apt. Number(d) Zip Code |

| who | Please write in the name, address, and telephone number of a relative or close friend who does not live with you and who will always know how to contact you (for example your grandmother, your best friend, or your aunt). | | | | |
|------|--|----------------------|---|--|--|
| NA | ME: | | | | |
| (a) | | (b) | (c) | | |
| , , | Last | First | Middle | | |
| ADI | DRESS: (d) | | | | |
| | Number | Street | Apt. Number | | |
| (e)_ | | (f) | (g) | | |
| | City | State | Zip Code | | |
| TELE | | ode Telephone Number | (i) He/she does not have a telephone | | |
| EMA | AIL ADDRESS: (j) | | (k) He/she does not have an email address | | |

198) What is this person's relationship to you?

| What is this person's relationship to you? | | | |
|--|--------------------------------|--|--|
| | (CIRCLE ONE) | | |
| A close friend | 1 | | |
| A relative | 2 | | |
| | ↓ Relationship: (a) | | |
| | For example: grandmother, aunt | | |

| 199) | seniors? If you do n | ne <u>first and last names</u> of your three best friends <u>in this school</u> who are do not have three close senior friends, write the names of three people time with who are seniors. | |
|------|----------------------|--|-----|
| | Name of Friend #1 | (a) FIRST NAME | (b) |
| | Name of Friend #2 | (a) FIRST NAME | (b) |
| | Name of Friend #3 | (a) FIRST NAME | (b) |

| We appreciate any additional comments: |
|--|
| |
| |
| |
| |
| |
| |
| |

<u>Thank you</u> for completing this survey. We appreciate your cooperation. Please <u>put the survey in the envelope</u> and turn in the survey now.