## I. GENERAL INFORMATION

<table>
<thead>
<tr>
<th>1. Sex:</th>
<th>2. Grade:</th>
<th>3. Age:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>○ 6</td>
<td>○ 10 years old or less</td>
</tr>
<tr>
<td>Female</td>
<td>○ 7</td>
<td>○ 11 years old</td>
</tr>
<tr>
<td></td>
<td>○ 8</td>
<td>○ 12 years old</td>
</tr>
<tr>
<td></td>
<td>○ 9</td>
<td>○ 13 years old</td>
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<tr>
<td></td>
<td>○ 10</td>
<td>○ 14 years old</td>
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<tr>
<td></td>
<td>○ 11</td>
<td>○ 15 years old</td>
</tr>
<tr>
<td></td>
<td>○ 12</td>
<td>○ 16 years old</td>
</tr>
<tr>
<td></td>
<td></td>
<td>○ 17 years old</td>
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<tr>
<td></td>
<td></td>
<td>○ 18 years old</td>
</tr>
<tr>
<td></td>
<td></td>
<td>○ 19 years old or more</td>
</tr>
</tbody>
</table>

## II. 30-DAY USE

During the past 30 days:

1. did you drink one or more drinks of an alcoholic beverage?
2. did you smoke part or all of a cigarette?
3. have you used marijuana or hashish?
4. have you used prescription drugs not prescribed to you?

## III. PERCEPTIONS OF RISK

How much do you think people risk harming themselves physically or in other ways if they...

1. have five or more drinks of an alcoholic beverage (beer, wine, liquor) once or twice a week?
2. take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?
3. smoke one or more packs of cigarettes per day?
4. smoke marijuana once or twice a week?
5. use prescription drugs that are not prescribed to them?

## IV. PERCEPTIONS OF PARENTAL DISAPPROVAL

How wrong do your parents feel it would be for you to...

1. have one or two drinks of an alcoholic beverage nearly every day?
2. smoke tobacco?
3. smoke marijuana?
4. use prescription drugs not prescribed to you?

## V. PERCEPTIONS OF PEER DISAPPROVAL

How wrong do your friends feel it would be for you to...

1. have one or two drinks of an alcoholic beverage nearly every day?
2. smoke tobacco?
3. smoke marijuana?
4. use prescription drugs not prescribed to you?

## VI. ATTITUDE TOWARD PEER USE

1. How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?

## VII. ADDITIONAL QUESTIONS

1. Sex:
   - Male
   - Female

2. Grade:
   - 6
   - 7
   - 8
   - 9
   - 10
   - 11
   - 12

3. Age:
   - 10 years old or less
   - 11 years old
   - 12 years old
   - 13 years old
   - 14 years old
   - 15 years old
   - 16 years old
   - 17 years old
   - 18 years old
   - 19 years old or more

4. Use a No. 2 pencil only

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