

























## In-School Core Survey

During the past **30 days**, on how many **days** did you use...

	0 Days	1 Day	2 Days	3-9 Days	10-19 Days	20-30 Days
69. <b>one or more</b> drinks of alcohol?	A	B	C	D	E	F
70. <b>five or more drinks of alcohol</b> in a row, that is, within a couple of hours?	A	B	C	D	E	F
71. <b>marijuana</b> (smoke, vape, eat, or drink)?	A	B	C	D	E	F
72. <b>inhalants</b> (things you sniff, huff, or breathe to get “high”)?	A	B	C	D	E	F
73. <b>prescription drugs to get “high” or for reasons other than prescribed?</b>	A	B	C	D	E	F
74. <b>any other drug, pill, or medicine</b> to get “high” or for reasons other than medical?	A	B	C	D	E	F
75. <b>two or more substances at the same time</b> (for example, alcohol with marijuana, ecstasy with mushrooms)?	A	B	C	D	E	F

During the past **30 days**, on how many days **on school property** did you...

	0 Days	1 Day	2 Days	3-9 Days	10-19 Days	20-30 Days
76. <b>smoke cigarettes?</b>	A	B	C	D	E	F
77. use <b>smokeless tobacco</b> (dip, chew, or snuff)?	A	B	C	D	E	F
78. <b>vape?</b>	A	B	C	D	E	F
79. have <b>at least one drink of alcohol?</b>	A	B	C	D	E	F
80. use <b>marijuana</b> (smoke, vape, eat, or drink)?	A	B	C	D	E	F
81. use <b>any other drug, pill, or medicine</b> to get “high” or for reasons other than medical?	A	B	C	D	E	F
82. breathe <b>the smoke or vapor from someone who was using cigarettes or e-cigarettes?</b>	A	B	C	D	E	F

## In-School Core Survey

*How much do people risk harming themselves physically and in other ways when they do the following?*

	How Much Risk or Harm			
	Great	Moderate	Slight	None
83. Smoke cigarettes occasionally	A	B	C	D
84. Smoke 1 or more packs of cigarettes each day	A	B	C	D
85. Vape tobacco or nicotine occasionally	A	B	C	D
86. Vape tobacco or nicotine several times a day (100 puffs or more)	A	B	C	D
87. Drink alcohol (beer, wine, liquor) occasionally	A	B	C	D
88. Have five or more drinks of alcohol once or twice a week	A	B	C	D
89. Use marijuana occasionally (smoke, vape, eat, or drink)	A	B	C	D
90. Use marijuana daily	A	B	C	D

*How difficult is it for students in your grade to get any of the following if they really want them?*

	Very Difficult	Fairly Difficult	Fairly Easy	Very Easy	Don't Know
	91. Cigarettes	A	B	C	D
92. Vape products	A	B	C	D	E
93. Alcohol	A	B	C	D	E
94. Marijuana	A	B	C	D	E
95. Prescription drugs to get "high" or for reasons other than prescribed	A	B	C	D	E

**EACH ITEM APPLICABLE FOR LIFETIME USERS OF THAT SUBSTANCE ONLY**

*How many times have you tried to quit or stop using ...*

Does Not Apply, Don't Use	0 Times	1 Time	2-3 Times	4 or More Times
---------------------------	---------	--------	-----------	-----------------

**[IF Q48 = B, C, D, E, or F; OR Q49 = B, C, D, E, or F; OR Q50 = B, C, D, E, or F]**

96. smoking or vaping tobacco or nicotine?	A	B	C	D	E
--	---	---	---	---	---

## In-School Core Survey

	Does Not Apply, Don't Use	0 Times	1 Time	2-3 Times	4 or More Times
<b>[IF Q51 = B, C, D, E, or F]</b>					
97. alcohol?	A	B	C	D	E
<b>[IF Q52 = B, C, D, E, or F]</b>					
98. marijuana?	A	B	C	D	E
99. Does your school ban tobacco use and vaping on school property and at school sponsored events?					
A) No					
B) Yes					
C) Don't know					

## In-School Core Survey

Next are questions about violence, safety, harassment, & bullying  
on school property.

100. How safe do you feel when you are at school?

- A) Very safe
- B) Safe
- C) Neither safe nor unsafe
- D) Unsafe
- E) Very unsafe

During the past **12 months**, how many times ***on school property*** have you...

	Happened on School Property			
	0 Times	1 Time	2 to 3 Times	4 or More Times
101. been pushed, shoved, slapped, hit, or kicked by someone who wasn't just kidding around?	A	B	C	D
102. been afraid of being beaten up?	A	B	C	D
103. been in a physical fight?	A	B	C	D
104. had mean rumors or lies spread about you?	A	B	C	D
105. had sexual jokes, comments, or gestures made to you?	A	B	C	D
106. been made fun of because of your looks or the way you talk?	A	B	C	D
107. had your property stolen or deliberately damaged, such as your car, clothing, or books?	A	B	C	D
108. been offered, sold, or given an illegal drug?	A	B	C	D
109. damaged school property on purpose?	A	B	C	D
110. carried a gun?	A	B	C	D
111. carried any other weapon (such as a knife or club)?	A	B	C	D
112. been threatened or injured with a weapon (gun, knife, club, etc.)?	A	B	C	D
113. seen someone carrying a gun, knife, or other weapon?	A	B	C	D
114. been threatened with harm or injury?	A	B	C	D
115. been made fun of, insulted, or called names?	A	B	C	D

## In-School Core Survey

During the past **12 months**, how many times **on school property** were you harassed or bullied for any of the following reasons? [You were **bullied** if you were shoved, hit, threatened, called mean names, teased, or had other unpleasant physical or verbal things done to you repeatedly or in a severe way. It is **not bullying** when two students of about the same strength or power quarrel or fight.]

	Happened on School Property			
	0 Times	1 Time	2 to 3 Times	4 or More Times
116. Your race, ethnicity, or national origin	A	B	C	D
117. Your religion	A	B	C	D
118. Your gender	A	B	C	D
119. Because you are gay, lesbian, or bisexual or someone thought you were	A	B	C	D
120. A physical or mental disability	A	B	C	D
121. You are an immigrant or someone thought you were	A	B	C	D
122. Any other reason	A	B	C	D
123. During the past <b>12 months</b> , how many times did other students spread mean rumors or lies, or hurtful pictures, about you online, on social media, or on a cell phone?				
	A) 0 times (never)	B) 1 time	C) 2–3 times	D) 4 or more times
124. Do you consider yourself a member of a gang?				
	A) No	B) Yes		
125. During the past <b>12 months</b> , did you ever feel so sad or hopeless almost every day for <b>two weeks or more</b> that you stopped doing some usual activities?				
	A) No	B) Yes		
126. During the past <b>12 months</b> , did you ever seriously consider attempting suicide?				
	A) No	B) Yes		



## In-School Core Survey

Over the past **30 days**, how true do you feel these statements are about you?

	Not At All True	A Little True	Pretty Much True	Very Much True
127. I had a hard time relaxing.	A	B	C	D
128. I felt sad and down.	A	B	C	D
129. I was easily irritated.	A	B	C	D
130. It was hard for me to cope and I thought I would panic.	A	B	C	D
131. It was hard for me to get excited about anything.	A	B	C	D

Please tell us how true each statement is of you.

	Not At All True	A Little True	Pretty Much True	Very Much True
132. Each day I look forward to having a lot of fun.	A	B	C	D
133. I usually expect to have a good day.	A	B	C	D
134. Overall, I expect more good things to happen to me than bad things.	A	B	C	D

### Please describe your level of satisfaction below

I would describe my satisfaction with...

	Very Dissatisfied	Dissatisfied	A Little Dissatisfied	A Little Satisfied	Satisfied	Very Satisfied
135. my family life as...	A	B	C	D	E	F
136. my friendships as...	A	B	C	D	E	F
137. my school experience as...	A	B	C	D	E	F
138. myself as...	A	B	C	D	E	F
139. where I live as...	A	B	C	D	E	F

## In-School Core Survey

140. How many questions in this survey did you answer honestly?
- A) All of them
  - B) Most of them
  - C) Only some of them
  - D) Hardly any

FOR REFERENCE ONLY  
DO NOT COPY