<u>Positive Action Student Survey</u> (Secondary). Your answers are confidential.

School name: Grade: Classroom number: ID#:							
For t	the following questions, please use a black or blue	pen to fill Never	n the bubb Rarely	Some	often	All the	_
How	often do you do the following?		•	times		time	
1.	Feel good about yourself	1	2	3	4	5	
2.	Eat fresh fruits and vegetables	1	2	3	4	5	
3.	Drink alcohol (even a sip)	5	4	3	2	1	
4.	Make good choices.	1	2	3	4	5	
5.	Hit others or get into physical fights	5	4	3	2	1	
6.	Manage your time wisely (not waste it)	1	2	3	4	5	
7.	Use or try illegal drugs.	(5)	4	3	2	1	
8.	Care about how others feel.	1	2	3	4	5	
9.	Admit to your mistakes.	1	2	3	4	5	
10.	Get drunk or high.	(5)	4	3	2	1	
11.	Set goals for your self	1	2	3	4	5	
12.	Control your feelings	1	2	3	4	5	
13.	Do physical activities.	1	2	3	4	5	
14.	Take/steal other people's property	5	4	3	2	1	
15.	Make bad decisions.	5	4	3	2	1	
16.	Smoke cigarettes (even a puff)	5	4	3	2	1	
17.	Bully others.	5	4	3	2	1	
18.	Treat others the way you like to be treated.	1	2	3	4	(5)	
19.	Blame others for your mistakes	5	4	3	2	1	
20.	Solve problems well.	1	2	3	4	5	
21.	Do good things.	1	2	3	4	5	