Form approved OMB Control No: 0970-0536 Expiration Date: 12/31/2025 Revised: 01/06/2022

SEXUAL RISK AVOIDANCE EDUCATION PROGRAM (SRAE)

PARTICIPANT ENTRY SURVEY HIGH SCHOOL AND OLDER

Thank you for your help with this important study. This survey includes questions about your family, friends, school, and also your attitudes and behaviors. Your name will not be on the survey and your responses will remain private to the extent permitted by law. We want you to know that:

- 1. Your participation in this survey is voluntary.
- 2. We hope that you will answer all of the questions, but you may skip any questions you do not wish to answer.
- 3. The answers you give will be kept private to the extent permitted by law.

Public reporting burden for this collection of information is estimated to average 8 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The information collected will help policy makers, program providers and other stakeholders understand the experiences of youth today and identify ways to reduce risky behaviors. This information will also inform programs on how best to serve their participants. The collection of this information is voluntary and responses will be kept private to the extent allowed by law. The OMB number for this information collection is 0970-0536 and the expiration date is 12/31/2025.

THE PAPERWORK REDUCTION ACT OF 1995

General Instructions				
	CAREFULLY: There are different ways to answer the ortant that you follow the instructions when Here are some examples.			
PLEASE MARK ALL ANSWUSE A PEN OR PENCIL.	ERS WITHIN THE WHITE BOXES PROVIDED.			
1. EXAMPLE 1: MARK ONLY (ONE ANSWER			
What is the color of your ey	yes?			
MARK ONLY ONE ANSWER Brown Blue Green Another color				
2. <u>EXAMPLE 2: MARK ALL TH</u>	AT APPLY			
Do you plan to do any of the f	ollowing next week?			
MARK ALL THAT APPLY Watch a movie Go to a baseball game Study at a friend's house	If you plan to watch a movie <u>and</u> go to a baseball game next week, you would mark (X) both boxes.			

Please answer the following questions as best you can. This first set of questions are about you.

1. How old are you?

MARK ONLY ONE ANSWER

- □ 10
- □ 11
- □ 12
- □ 13
- □ 14
- □ 15
- □ 16
- □ 17
- □ 18
- □ 19
- □ 20

2. What grade are you in? (If you are currently on vacation or in summer school, indicate the grade you will be in when you go back to school.)

MARK	ONLY	ONE	ANSV	VER

- 🗆 9th
- □ 10th
- 🗆 11th
- □ 12th
- $\hfill\square$ My school does not assign grade levels
- □ I dropped out of school, and I am not working on getting a high school diploma or GED
- $\hfill\square$ I am working toward a GED
- □ I have a high school diploma or GED but I am <u>not</u> currently enrolled in college or technical school
- □ I have a high school diploma or GED and I am currently enrolled in college or technical school

3. When you are at home or with your family, what language or languages do you usually speak?

MARK ONLY ONE ANSWER

- □ English
- □ Spanish
- Other (specify): _____

4.	Are you Hispanic or Latino?			
	MARK ONLY ONE ANSWER			
5.	What is your race?			
	ARK ALL THAT APPLY			
	American Indian or Alaska Native			
	Asian			
	Black or African American			
	Native Hawaiian or Other Pacific Islander			
	White or Caucasian			
	Other (specify):			
6.	What is your sex?			
0.	MARK ONLY ONE ANSWER			
7.	Are you currently?			
	MARK ALL THAT APPLY			
	\Box Living with family [parent(s), guardian, grandparents, or other relatives]			
	\square In foster care, living with a family			
	□ In foster care, living in a group home			
	Couch surfing or moving from home to home			
	Living outside, in a tent city or homeless camp, in a car, in an abandoned vehicle or in an abandoned building			
	□ Staying in an emergency shelter or transitional living program			
	□ Staying in a hotel or motel			
	□ In juvenile detention center, juvenile group home, and/or under the supervision of a probation officer			
	□ None of the above			
	Thank you for participating in this survey!			