JCP Youth Questionnaire
(Revised September 2006)

Name ___________________ Age ______ Birth date ________________

Gender  □ Male    □ Female

Race/ethnicity/cultural heritage. What is your race, ethnicity or cultural heritage? Check all that apply.

01. □ Black or African-American  08. □ Vietnamese
02. □ White (Caucasian)        09. □ Native American / Alaskan Native
03. □ Asian                    10. □ Native Hawaiian / Pacific Islander
04. □ Chinese                  11. □ Hispanic / Latino
05. □ Indian                   12. □ Mexican
06. □ Japanese                 13. □ Other (Specify) _________________

1. Do you do any sports or other activities for fun? □ Yes □ No (PF4.5) (PF2.1)
   If yes, what activity?

2. What else do you enjoy doing? ________________________________

3. What are you good at? ________________________________

4. Describe the best thing about yourself ________________________________

5. Do you have any friends who get mostly A’s and B’s? □ Yes □ No (PF3.4)

6. Do you feel close to your parents or other members of your family? □ Yes □ No (PF5.10)

7. In the last 12 months, have you ridden in a vehicle with a teenage driver who had been drinking or using drugs? □ Yes □ No (R4.10)

8. Have you done something dangerous in the last 12 months, □ Yes □ No (R4.10)

9. Do you feel that the rules in your family are clear? □ Yes □ No (R5.2) (PF5.1)

10. Are you currently going to school? □ Yes □ No (R2.3) (R2.4) (R2.2)
    If yes, what are your grades like? Mostly: □ A’s and B’s □ B’s and C’s □ C’s and D’s □ D’s and F’s
    If you are not going to school, why not? ________________________________
11. Do you use alcohol or other drugs that you do not get from your doctor? □ Yes □ No (R6.1)
   If yes, how old were you when you first started using? ________ (R6.3)

12. Have you ever gone to school while you were drunk or high? □ Yes □ No (R6.4)

13. Do you spend at least several days a month with friends who use alcohol and other drugs? □ Yes □ No (T3.5)

14. Have any of the people you hang out with ever been suspended from or dropped out of school? □ Yes □ No (R3.3)

15. Do any of the people you hang out with carry a handgun? □ Yes □ No (R3.2)

16. Would your parents know if you did not come home on time? □ Yes □ No (R5.2)

17. When you are not at home, does your family know where you are or who you are with? □ Yes □ No (R5.2)

18. In the past few months, have you lost your temper or "blown up" easily? □ Yes □ No (R4.12)

19. Is there any adult in your life that you can trust or talk to? □ Yes □ No (PF3.6)

20. If you could meet one actor from the movies or TV, who would you want to meet?
    __________________________________________ Why? __________________________________________

21. Is there anything else you’d like to tell me?
    ______________________________________________
    ______________________________________________

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    ______________________________________________