

KERN COUNTY



COMMUNITY LIFESTYLE SURVEY

INSTRUCTIONS:

DO NOT MARK YOUR NAME on this paper. This survey asks for your opinions about a number of different things, including your attitudes toward health and drugs. Keep in mind that there are no "right" or "wrong" answers. Your honest answers are greatly appreciated. We think you will find this survey interesting and fun to answer.

If you need help answering any questions, please ask the teacher or supervisor who handed out the questionnaire for assistance. Read each question carefully and check or circle the *BEST* answer that comes to mind.

BEFORE YOU START, HERE IS AN EXAMPLE OF ONE TYPE OF QUESTION...

1. Things change too quickly in today's world.

- a. Disagree
- b. Mostly disagree
- c. Don't know

- d. Mostly agree
- e. Agree

Which answer fits you best? Do you feel that the world is changing too quickly, then check letter "e". If you are not sure how you feel, you would check letter "c". If you disagree with this statement you would check letter "a". Go ahead and put a *CHECK NEXT TO THE LETTER* that describes how you feel. We will use this question as part of the survey.