

DO NOT PUT YOUR NAME ON THIS FORM!

Today's date: _____

1. Last letter of
your first name

Your birth month
(01 – 12)

First letter of your
last name

Number of letters in
your last name

2. Are you... (Check one) ___ Male ___ Female ___ Transgender/Non-conforming

3. Are you... (Check all that apply)

___ African American or Black

___ Native Hawaiian or Pacific Islander

___ Asian

___ White

___ Hispanic / Latino

___ Other (Please specify: _____)

___ Native American or Alaska Native

4. How old are you? ___ Years old

How true are the following statements of you?

<i>Please circle the number that best matches your answer.</i>	Not At All		
	True	Sort Of True	Really True
5. I have a lot of friends.	1	2	3
6. I do very well at my class work.	1	2	3
7. I feel that I am better than others my age at sports.	1	2	3
8. I am happy with myself most of the time.	1	2	3
9. I do things I know I shouldn't do.	1	2	3
10. I really like my looks.	1	2	3

How important are the following to you?

<i>Please circle the number that best matches your answer.</i>	Not			
	important	Somewhat important	Quite important	Extremely important
11. Helping to make the world a better place to live in.	1	2	3	4
12. Accepting responsibility for my actions when I make a mistake or get in trouble.	1	2	3	4

How much do you agree or disagree with the following statements?

<i>Please circle the number that best matches your answer.</i>	Strongly			
	disagree	Disagree	Agree	Strongly agree
13. All in all, I am glad I am me.	1	2	3	4
14. I get a lot of encouragement at my school.	1	2	3	4
15. In my family I feel useful and important.	1	2	3	4
16. Adults in my town or city make me feel important.	1	2	3	4
17. The friends I have are very good friends to me.	1	2	3	4

TURN OVER FOR QUESTIONS ON THE OTHER SIDE

POST PYD - 2021-2022

How much do the following statements describe you?

<i>Please circle the number that best matches your answer.</i>	Strongly disagree	Disagree	Agree	Strongly agree
18. I enjoy being with people who are of a different race/ethnicity than I am.	1	2	3	4
19. When I see someone being taken advantage of, I want to help them.	1	2	3	4
20. When I see someone being picked on, I feel sorry for them.	1	2	3	4
21. When I see another person who is hurt or upset, I feel sorry for them.	1	2	3	4

Thinking back over this class, did any of the following occur?

<i>Please circle the number that best matches your answer.</i>	No	Sort of	Yes
22. I learned about new things during this class.	1	2	3
23. I felt safe during this class.	1	2	3
24. The instructor gave me lots of support during this class.	1	2	3
25. I think I could go to the instructor for advice if I had a serious problem.	1	2	3
26. The instructor listened to what I had to say.	1	2	3
27. The instructor encouraged me to participate.	1	2	3
28. The instructor treated everyone fairly.	1	2	3

29. Was the teacher good at answering student questions?

___ Yes, very good

___ Yes, pretty good

___ No, not so good

30. Did the teacher seem like they knew a lot about the topic?

___ Yes, a lot

___ Yes, some

___ No, not much

31. Was this class better than you expected, about what you expected, or worse than you expected?

___ Better than expected

___ What I expected

___ Worse than expected

32. After taking this class, do you feel more comfortable, about the same, or less comfortable talking with friends about the things you learned?

___ More comfortable

___ About the same

___ Less comfortable

33. After taking this class, do you feel more comfortable, about the same, or less comfortable talking with parents or trusted adults about the things you learned?

___ More comfortable

___ About the same

___ Less comfortable