

OMB control #:

Expiration date:

Student Number: _____

Homerroom Teacher: _____












Draft Middle School Student Survey (Pre)
Evaluation of Pilot Project on Community-based Promotion of Healthful
Recreation in Cuyahoga Valley NP

SCRIPT FOR STUDENT DATA COLLECTION

Good Morning! Before we get started today, we are going to take part in a survey. A survey is way of asking questions to get opinions from people. All 6th and 7th graders are doing this survey about recreation and sport activities they do outside of school.














Questions on the survey will cover things like recreation activities you do, parks you may or may not have visited, and your opinions about your neighborhood. We will complete the survey on the Internet. Take your time and think about each question before giving an answer. This should only take 15 minutes. Let me know when you are finished. Any questions?

1. Below are activities some young people do. For each activity listed below, think about whether you did that activity yesterday and check the correct box. Then, think how often you usually do that activity and check the box that best fits how often you usually do it.

Activity	A. Yesterday, I did it...				B. Usually, I do it...		
Bicycling		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Exercise: push-ups, sit-ups, jumping jacks		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Basketball		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Baseball, softball		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Football		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Soccer		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Volleyball		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Racket sports: badminton, tennis		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Climbing on playground equipment		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Ball playing: four square, dodge ball, kickball, Frisbee		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Water play (swimming pool, lake, or sprinkler)		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •


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Swimming laps		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Jump rope		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Dance		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Outdoor chores: mowing, raking, gardening		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Outdoor play: climbing trees, hide & seek		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Indoor chores: mopping, vacuuming, sweeping		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Walking		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Running or jogging		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Skateboarding, skating, or rollerblading		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Gymnastics		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Hiking on a trail		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Weight lifting/Strength training		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Martial arts		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •

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Cheerleading or drill team		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •
Other _____		Not at all •	Less than 15 minutes •	15 minutes or more •	Not at all •	A little •	A lot •

2. Are there outdoor activities that you like doing other than these? _____

3. What is your favorite outdoor activity? _____

4. For each activity listed below, think about whether you did that activity yesterday and, if so, how much time you spent doing the activity. Please check the box that best fits how much time you spent doing each activity yesterday.

YESTERDAY...







Activity						
Watched TV, videos		None •	Less than 30 minutes •	30 minutes – 1 hour •	1-3 hours •	More than 3 hours •
Played computer games, video games		None •	Less than 30 minutes •	30 minutes – 1 hour •	1-3 hours •	More than 3 hours •
Played board games		None •	Less than 30 minutes •	30 minutes – 1 hour •	1-3 hours •	More than 3 hours •
Did homework, read		None •	Less than 30 minutes •	30 minutes – 1 hour •	1-3 hours •	More than 3 hours •
Talked on the phone, hung out with friends		None •	Less than 30 minutes •	30 minutes – 1 hour •	1-3 hours •	More than 3 hours •
Listened to music, played an instrument		None •	Less than 30 minutes •	30 minutes – 1 hour •	1-3 hours •	More than 3 hours •

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5. For each activity listed below, think about whether you usually do that activity each day. If you don't do the activity each day, check "Don't do." If you usually do the activity, then check the box that best fits how often you usually spend doing that activity each day.

USUALLY...

Activity		Don't do	Less than 30 minutes	30 minutes – 1 hour	1-3 hours	More than 3 hours
Watch TV, videos		•	•	•	•	•
Play computer games, video games		•	•	•	•	•
Play board games		•	•	•	•	•
Do homework, read		•	•	•	•	•
Talk on the phone, hang out with friends		•	•	•	•	•
Listen to music, play an instrument		•	•	•	•	•

6. Are there other indoor activities that you usually do? _____

7. Think about places for recreation, sports, and outdoor activities you have used. During the past 7 days, how many days did you do an activity or sports at these locations? Circle

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the days you went to this place. For example, if you played at the park **Sunday and Monday**, circle "Sunday" and "Monday." If you went every day, circle all of the days. If you didn't go to a place, circle 0 (zero).

	Number of Days							
School grounds	0	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
School field trip	0	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
Field trip, but not related to school	0	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
Public recreation center	0	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
Park or playground	0	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
YMCA/YWCA, Boys and Girls Club	0	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
Neighborhood street near my house	0	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
Other location, describe: _____	0	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday

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8. Below is a list of things that people believe may happen in the woods. Imagine that you are taking a walk or hike in a wooded area nearby. Using the boxes below, circle a number between 0 and 4 to tell how much of a chance you think there is that each situation might happen to you.

Situation	No chance	A little chance	Good chance	Very good chance	Extremely good chance
Seeing a snake	0	1	2	3	4
Stepping on a snake	0	1	2	3	4
Being bitten by a spider	0	1	2	3	4
A spider falling on me	0	1	2	3	4
Getting lost	0	1	2	3	4
Getting separated from my friends	0	1	2	3	4
Getting chased by bees	0	1	2	3	4
Getting stung by bees	0	1	2	3	4
Seeing a frog	0	1	2	3	4
Being attacked by bears or other wild animals	0	1	2	3	4

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9. Like before, imagine that you are taking a walk or hike in a wooded area nearby. This time tell how scary each situation might be if it actually happened to you.

Situation	Not scary	A little scary	Somewhat scary	Very scary	Extremely scary
Seeing a snake	0	1	2	3	4
Stepping on a snake	0	1	2	3	4
Being bitten by a spider	0	1	2	3	4
A spider falling on me	0	1	2	3	4
Getting lost	0	1	2	3	4
Getting separated from my friends	0	1	2	3	4
Getting chased by bees	0	1	2	3	4
Getting stung by bees	0	1	2	3	4
Seeing a frog	0	1	2	3	4
Being attacked by bears or other wild animals	0	1	2	3	4

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10. The following questions ask about your neighborhood. Tell how much each statement describes the area where you live.

	Not at all	A little bit	Some	Quite a bit	A lot
There are stores and shops to buy things	0	1	2	3	4
There is a bus stop close to my house or apartment	0	1	2	3	4
There are sidewalks on most of the streets	0	1	2	3	4
There are places to ride bikes, such as sidewalks or bike paths	0	1	2	3	4
Traffic in my neighborhood makes it hard to walk or ride a bike	0	1	2	3	4
My neighborhood has parks and playgrounds	0	1	2	3	4
There are safe places to hang out with friends	0	1	2	3	4
Gangs are a big problem in my neighborhood	0	1	2	3	4
You see lots of people being active doing things like walking, running, or playing sports	0	1	2	3	4
There are trees along the streets in my neighborhood	0	1	2	3	4

11. Look at the list of parks and places below. Circle the number to show whether you have ever heard of the parks. Also, tell whether you have ever been to the parks for recreation, ridden your bike, played sports, or exercised.

Have you heard of...	Yes, I've heard of this	No, I have not heard of This	Not sure
Towpath Trail	0	1	2
Mustill Store	0	1	2
Indigo Lake	0	1	2
Sand Run MetroPark	0	1	2
Virginia Kendall Park	0	1	2
Cuyahoga Valley Scenic Railroad	0	1	2
Cuyahoga Valley National Park	0	1	2
Have you ever been to...	Yes, I've been to this place	No, I have not been to this place	Not sure
Towpath Trail	0	1	2
Mustill Store	0	1	2
Indigo Lake	0	1	2
Sand Run MetroPark	0	1	2
Virginia Kendall Park	0	1	2
Cuyahoga Valley Scenic Railroad	0	1	2
Cuyahoga Valley National Park	0	1	2

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12. The following questions ask you to think about things you might do next school year and when you are an adult.

	Definitely will not	Probably will not	About a 50/50 chance	Probably will	Definitely will
How likely is it that you will do regular outdoor physical activity next year?	0	1	2	3	4
How likely is it that you will do regular outdoor physical activity when you are an adult?	0	1	2	3	4
How likely is it that you will visit a national park next year?	0	1	2	3	4
How likely is it that you will visit a national park when you are an adult?	0	1	2	3	4
How likely is it that you will walk or ride a bike on a wooded trail by yourself next year?	0	1	2	3	4
How likely is it that you will walk or ride a bike on a wooded trail with friends next year?	0	1	2	3	4

These questions are about you.

13. I am (Check one): **MALE** **FEMALE**

14. What grade are in you in (Check one): **6th** **7th**

15. When were you born? **Month** _____ **Year** _____

Thank You for Completing the Survey!

PRIVACY ACT and PAPERWORK REDUCTION ACT statement:

16 U.S.C. 1a-7 authorizes collection of this information. This information will be used by park managers to better serve the public. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. Your name is requested for follow-up mailing purposes only. When analysis of the questionnaire is completed, all name and address files will be destroyed. Thus the permanent data will be anonymous. Please do not put your name or that of any member of your group on the questionnaire. 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.

Person collecting and analyzing information: Myron Floyd, Dept. of Parks, Recreation and Tourism Management, College of Natural Resources, Box 8004, Biltmore Hall, Raleigh, NC 27695-8004, (919) 513-8026.

Burden estimate statement: Public reporting burden for this form is estimated to average 15 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to: Mary Pat Doorley, Cuyahoga Valley National Park, 15610 Vaughn Road, Brecksville, OH 44141, phone (440) 546-5995.