



We have a few questions we want you to answer about yourself and the sun. Thank you for answering these questions. Please use a pencil to fill in the circle for each answer you choose. If you want to change your answer choice, be sure to erase your first choice completely.

1. What month is it?

- January February March April May June
 July August September October November December

2. How old are you? 8 9 10 11 12 13 14

3. Are you a boy or a girl? Boy Girl

4. What is the color of your hair? Blond Red Brown Black

5. Does your skin burn easily in the sun? Yes No I don't know

6. What are some of the ways you can keep your skin safe from the sun?

* Please fill in as many circles as you need to answer this question.

- Eating cereal Using sunscreen Wearing a shirt and hat outside



7. When do you have to use the most sun protection?

When the UV (Ultraviolet) Index is: 1 5 10 or higher I don't know

8. You can get a sunburn on a cloudy day. True False

9. You only need to wear sunscreen when you are at the beach or pool. True False

10. Keeping your skin safe from the sun is: Hard to do Not too hard, not too easy Easy to do

11. Some of the reasons why I do NOT always wear sunscreen when I'm outside are because:

* Please fill in as many circles as you need to answer this question.

- It takes too long to put on sunscreen. It's hard to put sunscreen on my whole body.
 I forget to put on sunscreen. I don't have any sunscreen.
 It stings my eyes. None—I always wear sunscreen!
 Sunscreen feels greasy on my skin.

12. Some of the reasons why I do NOT always wear a hat when I'm outside are because:

* Please fill in as many circles as you need to answer this question.

- I forget to bring a hat. I don't like to wear a hat. I don't have a hat.
 It's too hot to wear a hat. None—I always wear a hat!

13. Do you like to get a tan? Yes No

14. Do you think people look healthier with a tan? Yes No

CONTINUED ON THE BACK—PLEASE TURN OVER.

15. When you wear a bathing suit outside, what are all of the places that you put on sunscreen?

* Please fill in as many circles as you need to answer this question.

- My face My arms My shoulders My legs My back
 My ears My stomach My neck I don't put it on

16. Have you ever reminded a:

Friend to put on sunscreen? Yes No

Sibling (brother or sister) to put on sunscreen? Yes No

Parent or guardian to put on sunscreen? Yes No

Parent or guardian to put sunscreen on you? Yes No

17. When you are outside in the sun this coming summer, will you try to play in the shade instead of in the sun?

- Yes Most likely Probably not No

18. Will you put sunscreen on when you go outside during the day this coming summer?

- Yes Most likely Probably not No

19. Does your school announce the UV Index? Yes No

20. Have you had a school lesson before on sun protection? Yes No

When you were outside in the sun last summer:

21. Did you wear a hat?

- Never Rarely Sometimes Often Always

22. Did you wear a long-sleeved shirt?

- Never Rarely Sometimes Often Always

23. Did you wear sunglasses?

- Never Rarely Sometimes Often Always

24. Did you wear sunscreen?

- Never Rarely Sometimes Often Always

25. If you wore sunscreen, what number sunscreen or SPF (sun protection factor) did you use?

- Less than 15 15-29 30 or higher I don't know

26. How many times did you get sunburned?

- None One or two Three or more

27. IF you got a sunburn, how many of the sunburns were painful?

- None One or two Three or more I did not get sunburned

28. How many days a week did you spend outside during the day between 10 AM and 4 PM?

- 0-1 day per week 2-3 days per week 4-5 days per week 6-7 days per week

29. How many hours a day did you spend outside during the day between 10 AM and 4 PM?

- Less than 1 hour per day 1-2 hours per day 3-4 hours per day 5-6 hours per day

