

Attachment 26

Screenshot Child Posttest - MDF

Audio version of the directions:



### OMB Burden Statement

OMB Control Number: 0925-XXXX Expiration Date:

Public reporting burden for this collection of information is estimated to average 50 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 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.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-XXXX). Do not return the completed form to this address.

[Previous](#) [Next](#)

Audio version of the directions:



### Introduction to the questionnaire

Thank you for agreeing to complete this questionnaire.

Instead of using your name on this questionnaire, you will use a secret number. Because you are using a number instead of your name, your answers will be PRIVATE to the extent permitted by law. Do not worry about your parents, teachers, or anyone else finding out what you said. We don't need names on the questionnaires because we're only interested in how most people your age feel as a group, not any one person's answers.

Be sure to answer ALL of the questions honestly and carefully. If you are unsure of an answer, please give your best guess. However, if you are uncomfortable answering a particular question, you may skip it. THIS QUESTIONNAIRE IS NOT A TEST. You will not be graded and there are no right or wrong answers.

If at any time during this questionnaire you would like to quit, then please click on the button in the bottom center of your screen that says "Exit This Questionnaire" in order to exit the questionnaire.

Please ask a project staff member if you have questions while completing this questionnaire.

**Thanks again for your help!**

First, please have the parent who is with you today enter your secret number here:

To be sure that the number was entered correctly, please enter the secret number again here:

[Previous](#) [Next](#)

### Child Participant Questionnaire (Post)



1. How old are you?

- 7 years old
- 8 years old
- 9 years old
- 10 years old
- 11 years old
- 12 years old



2. What grade are you in? If you are in between grades, what grade will you be in next school year?

- 3rd Grade
- 4th Grade
- 5th Grade

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

 3. What grades did you get on your last report card?  
 Mostly As  Mostly Bs  Mostly Cs  Mostly Ds  Mostly Fs

 Now, we would like to ask you some questions about some conversations you may have had, and behaviors that some people do.

 4. In general, how often has the parent who is with you today talked with you about alcohol use?  
 Never  Rarely  Sometimes  Often  Extremely often

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

▶ 5. How often would you say that the parent who is with you today has done the following specific things?

▶ Has lectured me or given me a speech about drinking alcohol  
 Never  Once  A few times  A lot of times

▶ Has warned me about the dangers of drinking alcohol  
 Never  Once  A few times  A lot of times

▶ Has talked to me about how to handle offers of alcoholic drinks  
 Never  Once  A few times  A lot of times

▶ Has given me rules to obey about drinking alcohol  
 Never  Once  A few times  A lot of times

▶ Will make a comment to me about how drinking alcohol is bad if a character on TV is drinking or drunk  
 Never  Once  A few times  A lot of times

▶ Tells me stories of people who drank alcohol or have been drunk  
 Never  Once  A few times  A lot of times

Previous Page

Exit This Questionnaire

Next Page

### Child Participant Questionnaire (Post)

 Tells me he or she would be disappointed in me if I drink alcohol  
 Never  Once  A few times  A lot of times

 Shows me information on the web, TV, or in the news about the dangers of drinking alcohol  
 Never  Once  A few times  A lot of times

 Asks about my thoughts and opinions about drinking alcohol  
 Never  Once  A few times  A lot of times

 6. In general, how often has the parent who is with you today talked with you about tobacco use (cigarettes, chewing tobacco, or other forms of tobacco)?  
 Never  Rarely  Sometimes  Often  Extremely often

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

-  7. How often would you say that the parent who is with you today has done the following specific things?

  -  Has lectured me or given me a speech about tobacco use

Never  Once  A few times  A lot of times
  -  Has warned me about the dangers of tobacco use

Never  Once  A few times  A lot of times
  -  Has talked to me about how to handle offers of tobacco products

Never  Once  A few times  A lot of times
  -  Has given me rules to obey about tobacco use

Never  Once  A few times  A lot of times
  -  Will make a comment to me about how tobacco use is bad if a character on TV is smoking or using other forms of tobacco

Never  Once  A few times  A lot of times
  -  Tells me stories of people who smoke or use other forms of tobacco

Never  Once  A few times  A lot of times

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

 Tells me he or she would be disappointed in me if I smoked cigarettes or used other forms of tobacco  
 Never  Once  A few times  A lot of times

 Shows me information on the web, TV, or in the news about the dangers of using tobacco products  
 Never  Once  A few times  A lot of times

 Asks about my thoughts and opinions about smoking or using other forms of tobacco  
 Never  Once  A few times  A lot of times

[Previous Page](#)

[Next Page](#)

[Exit This Questionnaire](#)

Child Participant Questionnaire (Post)

 8. How much do you agree with the following statements?

 The parent with me today listens to my point of view  
 Disagree a lot    Disagree    Neither agree nor disagree    Agree    Agree a lot

 The parent with me today says it's important to get my ideas across even if others don't like it.  
 Disagree a lot    Disagree    Neither agree nor disagree    Agree    Agree a lot

 The parent with me today asks for my opinion when our family is discussing something.  
 Disagree a lot    Disagree    Neither agree nor disagree    Agree    Agree a lot

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

 The next few questions ask you to think about what you might or might not do in the future.

 9. Before you are 21 years old, do you think you will:

 Drink beer, wine, or liquor (more than just a few sips)?  
 I definitely will    I probably will    I probably will not    I definitely will not

 Get drunk or drink a lot of alcohol at one time?  
 I definitely will    I probably will    I probably will not    I definitely will not

 10. Before you are 18 years old, do you think you will:

 Smoke cigarettes?  
 I definitely will    I probably will    I probably will not    I definitely will not

 Use smokeless tobacco? (This includes chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen.)  
 I definitely will    I probably will    I probably will not    I definitely will not

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

### Child Participant Questionnaire (Post)

-  11. During the next year, do you think you will:
-  Drink beer, wine, or liquor (more than just a few sips)?

I definitely will    I probably will    I probably will not    I definitely will not
-  Get drunk or drink a lot of alcohol at one time?

I definitely will    I probably will    I probably will not    I definitely will not
-  Smoke cigarettes?

I definitely will    I probably will    I probably will not    I definitely will not
-  Use smokeless tobacco? (chewing tobacco, snuff, or dip)

I definitely will    I probably will    I probably will not    I definitely will not

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

 Here are some questions about things that could happen to kids.

 12. Suppose you were with a group of kids and there were some cigarettes you could have if you wanted. How willing would you be to do the following things?

 Take one puff?  
 Not at all willing    Slightly willing    Moderately willing    Very willing

 Smoke a whole cigarette?  
 Not at all willing    Slightly willing    Moderately willing    Very willing

 Take some cigarettes to try later?  
 Not at all willing    Slightly willing    Moderately willing    Very willing

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

▶ 13. Suppose you were with a group of kids and there was alcohol you could have if you wanted. How willing would you be to do the following things?

▶ Take a sip?  
 Not at all willing  Slightly willing  Moderately willing  Very willing

▶ Drink the whole drink?  
 Not at all willing  Slightly willing  Moderately willing  Very willing

▶ Take some alcohol home to try later?  
 Not at all willing  Slightly willing  Moderately willing  Very willing

▶ 14. Suppose you were with a group of kids and there was chewing tobacco or dip you could have if you wanted. How willing would you be to do the following things?

▶ Use the smokeless tobacco (chewing tobacco, snuff, or dip)?  
 Not at all willing  Slightly willing  Moderately willing  Very willing

Previous Page

Exit This Questionnaire

Next Page

Child Participant Questionnaire (Post)

 21. Now we are going to ask you about some behaviors.

 During the past 30 days, how often did you...

 Drink alcohol (more than just a sip)?

- 0 days
- 1-2 days
- 3-5 days
- 6-9 days
- 10-19 days
- 20-29 days
- All 30 days

 Smoke cigarettes?

- 0 days
- 1-2 days
- 3-5 days
- 6-9 days
- 10-19 days
- 20-29 days
- All 30 days

 Use smokeless tobacco? (This includes chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen.)

- 0 days
- 1-2 days
- 3-5 days
- 6-9 days
- 10-19 days
- 20-29 days
- All 30 days

 Drink an energy drink (like Red Bull, Monster, or Rock Star), which are drinks with high amounts of caffeine? This does not include sports drinks (like Gatorade) or vitamin waters.

- 0 days
- 1-2 days
- 3-5 days
- 6-9 days
- 10-19 days
- 20-29 days
- All 30 days

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

-  22. **[If yes to cigarettes]** How much do you usually smoke per day?
- Less than 1 cigarette per day
  - 1-5 cigarettes per day
  - About ½ a pack per day
  - 1 pack per day
  - More than 1 pack per day
-  23. **[If yes to smokeless tobacco]** How much do you usually use smokeless tobacco per day?
- 1-2 times a day
  - 3-4 times a day
  - 5-6 times a day
  - 7-8 times a day
  - 9-10 times a day
  - More than 10 times a day
-  24. **[If yes to energy drinks]** How much do you usually drink energy drinks per day?
- 1 drink
  - 2 drinks
  - 3 drinks
  - 4 drinks
  - 5 or more drinks

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

▶ 25. In your LIFETIME have you ever:

▶ Had a drink of alcohol (more than just a few sips)?

Yes  No

▶ Smoked a cigarette?

Yes  No

▶ Used smokeless tobacco? (This includes chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen.)

Yes  No

▶ Drunk an energy drink (like Red Bull, Monster, or Rock Star), which are drinks with high amounts of caffeine? This does not include sports drinks (like Gatorade) or vitamin waters.

Yes  No

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

### Child Participant Questionnaire (Post)

▶ 26. How much do you agree with the following statements?

▶ I can resist pressure from friends to use alcohol or tobacco.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ I won't feel pressured to use alcohol or tobacco even if my friends are doing it.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ I know what things I can say to refuse alcohol or tobacco.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ I can say no to someone who is pressuring me to use alcohol or tobacco.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ If all my friends were using alcohol or tobacco, I probably would too.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

Previous Page

Exit This Questionnaire

Next Page

Child Participant Questionnaire (Post)

 27. Please look at the advertisement on the next screen and answer the questions about it that follow. To answer the questions, you will type in your responses (words or sentences).

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

### Child Participant Questionnaire (Post)



▶ Tell me about this advertisement (Ad #1) in the space below (the more detail the better).

▶ A. What is being sold in this ad?

▶ B. What type of person do you think would like this ad (male or female, kid or adult)? Explain your answer.

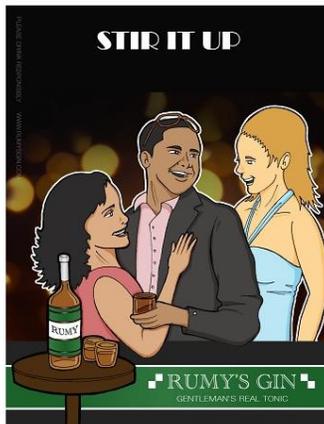
▶ C. What is the purpose of this ad?

[Previous Page](#)

[Next Page](#)

[Exit This Questionnaire](#)

Child Participant Questionnaire (Post)



▶ D. What did the people who made this ad do to make people stop and look at this ad?

▶ E. What do they want you to think about this product? Finish this sentence: If I get this product, then...

▶ F. Is there anything this ad is not telling you about the product that you would need to know before buying or using it? Explain your answer.

Previous Page

Exit This Questionnaire

Next Page

Child Participant Questionnaire (Post)

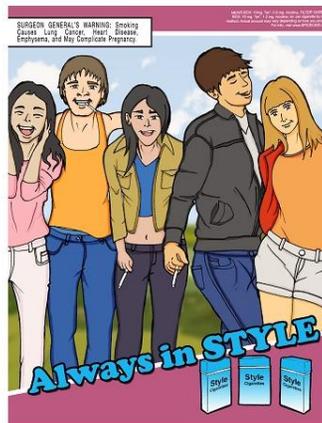
 28. Now, please look at a different advertisement on the next screen and answer the questions about it that follow. Again, you will type in your responses (words or sentences).

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

### Child Participant Questionnaire (Post)



▶ Tell me about this advertisement (Ad #2) in the space below (the more detail the better).

▶ A. What is being sold in this ad?

▶ B. What type of person do you think would like this ad (male or female, kid or adult)? Explain your answer.

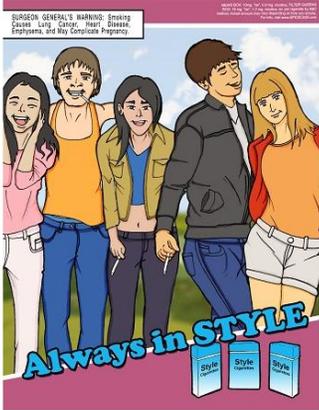
▶ C. What is the purpose of this ad?

[Previous Page](#)

[Next Page](#)

[Exit This Questionnaire](#)

Child Participant Questionnaire (Post)



▶ D. What did the people who made this ad do to make people stop and look at this ad?

▶ E. What do they want you to think about this product? Finish this sentence: If I get this product, then...

▶ F. Is there anything this ad is not telling you about the product that you would need to know before buying or using it? Explain your answer.

Previous Page

Exit This Questionnaire

Next Page

Child Participant Questionnaire (Post)

 The next question is about advertising in general.

 29. How much do you agree with the following statements?

 Advertisers want you to buy the product even if it isn't good for you to have.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

 Advertisers care more about making money than about what is good for you.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

 Advertising doesn't change the way I think.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

 Now we are going to ask you some questions about advertisements for alcohol and tobacco products.

 30. How much do you agree that people in ALCOHOL advertisements:

 Do things that most people who drink alcohol do.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

 Look like most people who drink alcohol.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

 Act like most people act when they drink alcohol.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

▶ 31. How much do you agree that people in TOBACCO advertisements:

▶ Do things that most people who use tobacco do.

- Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ Look like most people who use tobacco.

- Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ Act like most people act when they use tobacco.

- Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

Previous Page

Exit This Questionnaire

Next Page

Child Participant Questionnaire (Post)

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

▶ I want to do the things that people in alcohol advertisements do.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ I want to look like the people I see in alcohol advertisements.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ I would like to be like the people I see in alcohol advertisements.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ I want to do the things that people in tobacco advertisements do.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ I want to look like the people I see in tobacco advertisements.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ I would like to be like the people I see in tobacco advertisements.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

Previous Page

Exit This Questionnaire

Next Page

Child Participant Questionnaire (Post)

-  I like the kinds of things that people in alcohol advertisements like.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree
-  People in alcohol advertisements are similar to people in my family.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree
-  I like the kinds of things that people in tobacco advertisements like.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree
-  People in tobacco advertisements are similar to people in my family.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree
-  Alcohol ads get my attention.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree
-  The things I see in alcohol ads seem like fun.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree

Previous Page

Exit This Questionnaire

Next Page

Child Participant Questionnaire (Post)

 **The people in alcohol ads are attractive.**  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

 **Tobacco ads get my attention.**  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

 **The things I see in tobacco ads seem like fun.**  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

 **The people in tobacco ads are attractive.**  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

 The next few questions ask about alcohol and tobacco.

 33. How many of the kids at school or in the neighborhood have tried a drink of alcohol (beer, wine, or hard liquor)?

- None  Some  Most  All

 34. Do you have any friends who drink alcohol?

- Yes  No

 35. How many of the kids at school or in the neighborhood smoke or have tried smoking cigarettes or cigars?

- None  Some  Most  All

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

 36. Do you have any friends who smoke cigarettes or cigars?  
 Yes  No

 37. How many of the kids at school or in the neighborhood have used smokeless tobacco (chewing tobacco, snuff, or dip)?  
 None  Some  Most  All

 38. Do you have any friends who have used smokeless tobacco (chewing tobacco, snuff, or dip)?  
 Yes  No

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

- ▶ 39. How would your best friend act toward you if you...
  - ▶ Drank alcohol?
    - Very friendly
    - Friendly
    - Unfriendly
    - Very unfriendly
  - ▶ Smoked cigarettes?
    - Very friendly
    - Friendly
    - Unfriendly
    - Very unfriendly
  - ▶ Used smokeless tobacco (chewing tobacco, snuff, or dip)?
    - Very friendly
    - Friendly
    - Unfriendly
    - Very unfriendly

Previous Page

Exit This Questionnaire

Next Page

Child Participant Questionnaire (Post)

▶ 40. How angry would your parent(s) be if they found out you...

▶ Drank alcohol?  
 Very angry  Angry  Somewhat angry  Not angry at all

▶ Smoked cigarettes?  
 Very angry  Angry  Somewhat angry  Not angry at all

▶ Used smokeless tobacco (chewing tobacco, snuff, or dip)?  
 Very angry  Angry  Somewhat angry  Not angry at all

Previous Page

Exit This Questionnaire

Next Page

Child Participant Questionnaire (Post)

-  41. How much do you agree with the following statements:
-  If I were to drink alcohol, I would have fun.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree
-  If I were to drink alcohol, I would be invited to more activities or parties.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree
-  If I were to drink alcohol, I would be better at sports.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree
-  If I were to drink alcohol, other kids would think I'm tough.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree
-  If I were to use tobacco, I would have fun.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree
-  If I were to use tobacco, I would be invited to more activities or parties.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

### Child Participant Questionnaire (Post)

 If I were to use tobacco, I would be better at sports.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree

 If I were to use tobacco, other kids would think I'm tough.  
 Strongly disagree    Disagree    Neither agree nor disagree    Agree    Strongly agree

[Previous Page](#)

[Next Page](#)

[Exit This Questionnaire](#)

Child Participant Questionnaire (Post)

▶ 42. How much do you agree with the following statements:

▶ If I were to use alcohol, I would feel sick.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ If I were to use alcohol, it would slow me down.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ If I were to use tobacco, I would feel sick.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

▶ If I were to use tobacco, I would have bad breath.  
 Strongly disagree  Disagree  Neither agree nor disagree  Agree  Strongly agree

Previous Page

Exit This Questionnaire

Next Page

Child Participant Questionnaire (Post)

 Finally, we would like to get your opinions about the Media Detective Family program.

 43. Would you say that the length of the Media Detective Family program (5 cases) was...

- Too short    Too long    Just right

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

 44. Please answer the following questions about the Media Detective Family program.

 Did you learn anything new in the program?  
 Yes, a lot    Very much    A little    Not at all

 Were the cases interesting?  
 Yes, a lot    Very much    A little    Not at all

 Are you glad you learned the material in the program?  
 Yes, a lot    Very much    A little    Not at all

 Would you tell your friends to try the program?  
 Yes, a lot    Very much    A little    Not at all

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

### Child Participant Questionnaire (Post)

 45. Please answer the following questions about the extension activities of Media Detective Family.

 Did you like the extension activities—the activities where you and your parent took what you learned and investigated advertising that you see?

- Yes, a lot    Very much    A little    Not at all

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

Child Participant Questionnaire (Post)

 46. Did you use Media Detective Family with just the parent who is with you today, or with other people, too?  
Mark all the people who did Media Detective Family with you:

- This parent
- My other parent (mom, dad, stepmom, stepdad)
- My parent's boyfriend or girlfriend
- My grandparent (grandmother or grandfather)
- My aunt or uncle
- My brother or sister
- My friends
- Other (please specify):

Previous Page

Exit This Questionnaire

Next Page

Child Participant Questionnaire (Post)

▶ 47. What did you like best about Media Detective Family?

▶ 48. What did you like least about Media Detective Family?

[Previous Page](#)

[Exit This Questionnaire](#)

[Next Page](#)

### Survey Complete

Thank you for completing this Survey.

[Previous Page](#)

[Exit This Questionnaire](#)

Copyright © 2013 by Innovation Research and Training, Inc. All rights reserved