Screener

We are looking for students to take a survey after school. If you are selected and agree to take part in the research activities, you will receive a \$25 gift card. Please answer the questions on the following pages to see if you qualify. You will find out during your last period class today if you have been selected. If so, you will be asked to stay after school for about 20 minutes to take the main survey.

Only the researchers will know how you answer. We will not share the answers you give with anyone outside of the research study. There are no right or wrong answers to these questions.

Paperwork Reduction Act Statement: The public reporting burden for this information collection has been estimated to average 4 minutes per response to complete this survey (the time estimated to read and complete). Send comments regarding this burden estimate or any other aspects of this information collection, including suggestions for reducing burden, to PRAStaff@fda.hhs.gov.

First Name:			Last Name:					
Email Address:			Ph	Phone: (Circle One: CELL or HOME)				
Email Address (confirmation):								
Last Classroom #/Teacher Today:			Last Classroom #/Teacher on :					
a. 11 years old or younger b. 12 years old c. 13 years old d. 14 years old e. 15 years old f. 16 years old g. 17 years old h. 18 years old or older	2) During the past 7 days, did yo drink a can, bottle, or glass of soda or pop, such as Coke, Pepor Sprite? (Do not count diet soor diet pop.) a. Yes b. No 4) Have you ever tried cigarette smoking, even one or two puffs a. Yes b. No b. No		esi, da	3) During the past 7 days, how many times did you drink a can, bottle, or glass of soda or pop, such as Coke, Pepsi, or Sprite? (Do not count diet soda or diet pop.) a. I did not drink soda or pop during the past 7 days b. 1 to 3 times during the past 7 days c. 4 to 6 times during the past 7 days d. 1 time per day e. 2 times per day f. 3 times per day g. 4 times or more per day				
you smoked in your entire life? Your best guess is fine.		will smoke a cigarette soon?		7) Do you think that you we smoke a cigarette in the respect to th				
a. I have never smoked cigarettes, not even one or two puffs b. 1 or more puffs but never a whole cigarette c. 1 cigarette		a. Definitely yes b. Probably yes c. Probably not d. Definitely not				you will drink a can, bottle, or glass of soda or pop, such as Coke, Pepsi, or Sprite, in the next week? (Do not count		
d. 2 to 5 cigarettes e. 6 to 15 cigarettes (about 1/2 pack total) f. 16 to 25 cigarettes (about 1 pack		9) Have you ever been curious about smoking a cigarette?		10) If one of your best friend were to offer you a cigarette would you smoke it?			diet soda or diet pop.)	
g. 26 to 99 cigarettes (more than 1 pack, but less than 5 packs)		a. Definitely yes b. Probably yes		a. Definitely yes b. Probably yes			b. Probably yes c. Probably not d. Definitely not	
h. 100 or more cigarettes (5 or more packs)		c. Probably not d. Definitely not		c. Probably not d. Definitely not			d. Delinitely not	
11) What is your sex?		12) Are you Hispanic, L more than one answer)		o/a, or Spanish	origin? (You	can ch	noose one answer or	
a. Female b. Male		a. No, not of Hispanic, Latino/a.b. Yes, Mexican, Mexican Amer		•	d. Yes, Cuban e. Yes, another Hispanic, Latino/a, or Spanish			
13) What race or races do you consider yourself to be? (You can		Chicana origin c. Yes, Puerto Rican						
choose one answer or more than one answer) a. American Indian or Alaska Native b. Asian c. Black or African American d. Native Hawaiian or Other Pacific Islander e. White		14) Do you or any member of your immediate famor a close friend work for? (Select all that apply) a. A market research company b. A tobacco company (manufacturer or importer of tobacco products) c. An advertising agency or public relations firm d. The media (TV/radio/newspapers/magazines) e. A healthcare professional (doctor, nurse, pharmacist, dietician, etc.)		of tobacco	15) Have you ever received money or gift cards from a company for sharing your opinions in a discussion group, interview, or survey? a. Yes, within the past 6 months b. Yes, more than 6 months ago c. No			
		f. None of these				d. I'm not sure		

16) RANK THE 3 PEOPLE THAT WOULD **BEST FIT** IN YOUR MAIN GROUP OF FRIENDS, STARTING WITH THE BEST FIT.

Rank #1:

Rank #2:

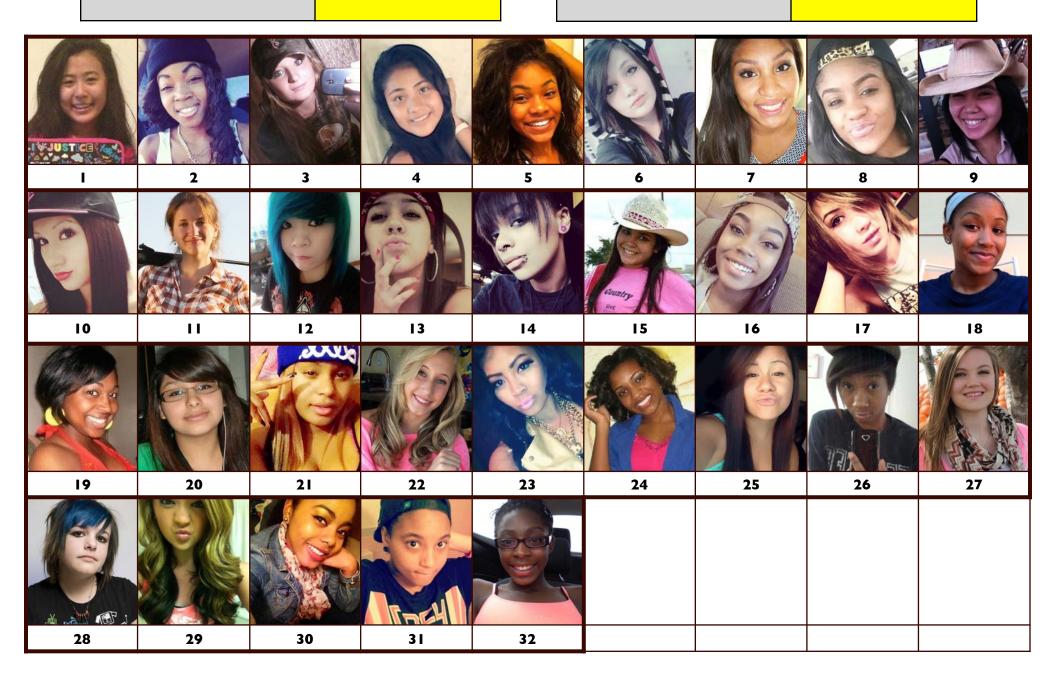
Rank #3:

17) RANK THE 3 PEOPLE THAT WOULD **LEAST FIT** IN YOUR MAIN GROUP OF FRIENDS, STARTING WITH THE WORST FIT.

Rank #1:

Rank #2:

Rank #3:



18) RANK THE 3 PEOPLE THAT WOULD **BEST FIT** IN YOUR MAIN GROUP OF FRIENDS, STARTING WITH THE BEST FIT.

Rank #1:

Rank #2:

Rank #3:

19) RANK THE 3 PEOPLE THAT WOULD **LEAST FIT** IN YOUR MAIN GROUP OF FRIENDS, STARTING WITH THE WORST FIT.

Rank #1:

Rank #2:

Rank #3:

