



BOTVIN'S EL LIFE SKILLS -PRE SURVEY

Facilitator _____ Location _____ Date _____

My First Name Initial _____

My Last Name Initial _____

1. What is your gender? Girl Boy
2. How old are you? 5-11 12-14
3. Race (Choose all that apply)
 Asian African American Hispanic/Latino
 Native American White Many Races
Other _____

Please answer the questions below about how you feel *right now*. There are no right or wrong answers. We want to know what you *truly* think.

Statement	True	False
1. I understand how to change negative thoughts to positive ones.	<input type="checkbox"/>	<input type="checkbox"/>
2. Smoking/vaping makes people my age look cool.	<input type="checkbox"/>	<input type="checkbox"/>
3. Commercials/advertisements always tell the truth.	<input type="checkbox"/>	<input type="checkbox"/>
4. I know how to make good choices.	<input type="checkbox"/>	<input type="checkbox"/>
5. I understand what non verbal communication is and how to "read" someone's body language.	<input type="checkbox"/>	<input type="checkbox"/>