

Fam ID: U X
 Resp: Son Daughter
 Int ID:

Date / /
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QM:

INSTRUCTIONS: These questions relate to how you spend time with others. People vary in the number of people they spend time with.

1. What is the total number of people you hang out with? *(Circle one)*

0 1 2 3 4 5 6 7 8 9 10 11 12 More than 12

2. How often do you feel like there is not a group for you to hang out with? *(Fill-in one bubble)*

Never
 Hardly ever
 Sometimes
 Often
 Very often

3. If you could change the number of people that you hang around with, would you *(fill-in one bubble)*:

Hang around more people?
 Not change the number of people you hang out with?
 Hang around with fewer people?

There are often a number of friends who are important to people as they are growing up. Please think of up to five of the friends who are most important to you. Write the first and last names of your closest friends, and on the next pages you will answer some questions about them. For relatives, don't write their names, just write their relationship to you, (i.e. Mom, Dad, Grandma, etc). Think especially about the last month, and remember, your answers will be kept private.

LIST YOUR FIVE MOST IMPORTANT FRIENDS HERE:

First name:

Last Name:

Friend #1:		
Friend #2:		
Friend #3:		
Friend #4:		
Friend #5:		



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Please complete the following information about **Friend #1**:
 (Please write their first name so you remember who it is)

- a. What is their age? years old
- b. Is he/she: Male or Female
- c. How would you describe his/her ethnic group?
- European American/White Pacific Islander
 African American/Black Other (describe): _____
 Native American/American Indian European African American
 Hispanic American/Latino Other ethnic combination (describe): _____
 Asian American
- d. How is this friend related to you (choose only one answer)?
- Natural sibling Cousin Boyfriend/girlfriend
 Step-sibling Distant relative Friend from church
 Half-sibling Friend from school Parent
 Adopted sibling Friend from neighborhood Other (describe): _____
 Foster sibling Friend from club (sports, music, etc)
- e. Where do you spend the most time together (choose only one answer)?
- At school Organized sports Arcade
 At your home Organized after school activity Movies
 At other person's home Community center Church
 Outside (Park, alley, street) Mall Other: _____
- f. Do you get in trouble together? No Yes
- g. Does this friend have contact with gangs (not including positive contact for work)? No Yes
- h. Does this friend use (check all that apply). . .
- Tobacco Alcohol (beer, wine, liquor) Marijuana (pot, weed) Other drugs All None
- i. Would you miss this friend if you didn't see or hear from them for 2 weeks? No Yes

Please describe the relationship between this friend (Friend #1) and the other friends you listed.
 Fill in **N/A** if the two people don't know each other. Fill in **D/K** if you don't know what their relationship is.

- j. Between **Friend #1** and:
- Friend #2:** Good Bad Neutral N/A D/K
- Friend #3:** Good Bad Neutral N/A D/K
- Friend #4:** Good Bad Neutral N/A D/K
- Friend #5:** Good Bad Neutral N/A D/K



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Please complete the following information about **Friend #2:**
 (Please write their first name so you remember who it is)

- a. What is their age? years old
- b. Is he/she: Male or Female
- c. How would you describe his/her ethnic group?
- European American/White
 - African American/Black
 - Native American/American Indian
 - Hispanic American/Latino
 - Asian American
 - Pacific Islander
 - Other (describe): _____
 - European African American
 - Other ethnic combination (describe): _____
- d. How is this friend related to you (choose only one answer)?
- Natural sibling
 - Step-sibling
 - Half-sibling
 - Adopted sibling
 - Foster sibling
 - Cousin
 - Distant relative
 - Friend from school
 - Friend from neighborhood
 - Friend from club (sports, music, etc)
 - Boyfriend/girlfriend
 - Friend from church
 - Parent
 - Other (describe): _____
- e. Where do you spend the most time together (choose only one answer)?
- At school
 - At your home
 - At other person's home
 - Outside (Park, alley, street)
 - Organized sports
 - Organized after school activity
 - Community center
 - Mall
 - Arcade
 - Movies
 - Church
 - Other: _____
- f. Do you get in trouble together? No Yes
- g. Does this friend have contact with gangs (not including positive contact for work)? No Yes
- h. Does this friend use (check all that apply). . .
- Tobacco
 - Alcohol (beer, wine, liquor)
 - Marijuana (pot, weed)
 - Other drugs
 - All
 - None
- i. Would you miss this friend if you didn't see or hear from them for 2 weeks? No Yes

Please describe the relationship between this friend (Friend #2) and the other friends you listed.
 Fill in **N/A** if the two people don't know each other. Fill in **D/K** if you don't know what their relationship is.

- j. Between **Friend #2** and:
- Friend #3:** Good Bad Neutral N/A D/K
 - Friend #4:** Good Bad Neutral N/A D/K
 - Friend #5:** Good Bad Neutral N/A D/K



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Please complete the following information about **Friend #3:**
 (Please write their first name so you remember who it is)

- a. What is their age? years old
- b. Is he/she: Male or Female
- c. How would you describe his/her ethnic group?
- European American/White
 - African American/Black
 - Native American/American Indian
 - Hispanic American/Latino
 - Asian American
 - Pacific Islander
 - Other (describe): _____
 - European African American
 - Other ethnic combination (describe): _____
- d. How is this friend related to you (choose only one answer)?
- Natural sibling
 - Step-sibling
 - Half-sibling
 - Adopted sibling
 - Foster sibling
 - Cousin
 - Distant relative
 - Friend from school
 - Friend from neighborhood
 - Friend from club (sports, music, etc)
 - Boyfriend/girlfriend
 - Friend from church
 - Parent
 - Other (describe): _____
- e. Where do you spend the most time together (choose only one answer)?
- At school
 - At your home
 - At other person's home
 - Outside (Park, alley, street)
 - Organized sports
 - Organized after school activity
 - Community center
 - Mall
 - Arcade
 - Movies
 - Church
 - Other: _____
- f. Do you get in trouble together? No Yes
- g. Does this friend have contact with gangs (not including positive contact for work)? No Yes
- h. Does this friend use (check all that apply). . .
- Tobacco
 - Alcohol (beer, wine, liquor)
 - Marijuana (pot, weed)
 - Other drugs
 - All
 - None
- i. Would you miss this friend if you didn't see or hear from them for 2 weeks? No Yes

Please describe the relationship between this friend (Friend #3) and the other friends you listed.
 Fill in **N/A** if the two people don't know each other. Fill in **D/K** if you don't know what their relationship is.

- j. Between **Friend #3** and: **Friend #4:** Good Bad Neutral N/A D/K
Friend #5: Good Bad Neutral N/A D/K



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Please complete the following information about **Friend #4:**
 (Please write their first name so you remember who it is)

- a. What is their age? years old
- b. Is he/she: Male or Female
- c. How would you describe his/her ethnic group?
- European American/White Pacific Islander
 African American/Black Other (describe): _____
 Native American/American Indian European African American
 Hispanic American/Latino Other ethnic combination (describe): _____
 Asian American
- d. How is this friend related to you (choose only one answer)?
- Natural sibling Cousin Boyfriend/girlfriend
 Step-sibling Distant relative Friend from church
 Half-sibling Friend from school Parent
 Adopted sibling Friend from neighborhood Other (describe): _____
 Foster sibling Friend from club (sports, music, etc)
- e. Where do you spend the most time together (choose only one answer)?
- At school Organized sports Arcade
 At your home Organized after school activity Movies
 At other person's home Community center Church
 Outside (Park, alley, street) Mall Other: _____
- f. Do you get in trouble together? No Yes
- g. Does this friend have contact with gangs (not including positive contact for work)? No Yes
- h. Does this friend use (check all that apply). . .
- Tobacco Alcohol (beer, wine, liquor) Marijuana (pot, weed) Other drugs All None
- i. Would you miss this friend if you didn't see or hear from them for 2 weeks? No Yes

Please describe the relationship between this friend (Friend #4) and the other friends you listed.
 Fill in **N/A** if the two people don't know each other. Fill in **D/K** if you don't know what their relationship is.

- j. Between **Friend #4** and: **Friend #5:** Good Bad Neutral N/A D/K



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Please complete the following information about **Friend #5:**
 (Please write their first name so you remember who it is)

- a. What is their age? years old
- b. Is he/she: Male or Female
- c. How would you describe his/her ethnic group?
- European American/White
 - African American/Black
 - Native American/American Indian
 - Hispanic American/Latino
 - Asian American
 - Pacific Islander
 - Other (describe): _____
 - European African American
 - Other ethnic combination (describe): _____
-
- d. How is this friend related to you (choose only one answer)?
- Natural sibling
 - Step-sibling
 - Half-sibling
 - Adopted sibling
 - Foster sibling
 - Cousin
 - Distant relative
 - Friend from school
 - Friend from neighborhood
 - Friend from club (sports, music, etc)
 - Boyfriend/girlfriend
 - Friend from church
 - Parent
 - Other (describe): _____
-
- e. Where do you spend the most time together (choose only one answer)?
- At school
 - At your home
 - At other person's home
 - Outside (Park, alley, street)
 - Organized sports
 - Organized after school activity
 - Community center
 - Mall
 - Arcade
 - Movies
 - Church
 - Other: _____
- f. Do you get in trouble together? No Yes
- g. Does this friend have contact with gangs (not including positive contact for work)? No Yes
- h. Does this friend use (check all that apply). . .
- Tobacco
 - Alcohol (beer, wine, liquor)
 - Marijuana (pot, weed)
 - Other drugs
 - All
 - None
- i. Would you miss this friend if you didn't see or hear from them for 2 weeks? No Yes

