



DISCOVERY QUESTIONNAIRE

Hey! It's a questionnaire! There are two good reasons why we are asking you to take some time and fill out this questionnaire. First, it will help us identify areas of your life where you may be doing well or facing difficulties. We want to make sure we do the best possible job for you and provide you with the support you need. In order to do that, we need to **get to know you better**. Second, by tracking how you are doing now and comparing it with how well you are doing when you leave our program, we'll be able to show exactly how and where you have made **positive changes in your life**. We take great pride in our work and in the efforts that are made by the youth that attend our programs. We want to be able to show you exactly what you've accomplished by the time you leave Venture Academy.

Please take the time to fill out this questionnaire in order that we may better understand your **strengths, needs, preferences, interests and abilities**.

You're welcome to fill this out with your parents, a teacher, or someone else who knows you well. This won't be used to judge you or label you, but rather to see how we can best work with you. So be as honest as you can with your answers. Your responses will be kept completely confidential and we promise not to release them without your permission.

Hint: The Questionnaire can be time consuming. Take a break if you need to and come back to it later or even the next day. If there are questions you don't understand or don't wish to answer, then feel free to just leave it blank.

Section One

In this first section, we have provided you with a number of statements about different areas of life such as school, work, family, friends, recreation etc. We'd like you to let us know how much each statement fits you and your situation on a scale of 1 to 5. Make sure you only tick off one box for each statement. Thanks!

- | | |
|----------------------------|--|
| 1 = Very True | That really fits me and my situation. |
| 2 = Mostly True | Applies to me, most of the time. |
| 3 = Somewhat True | Applies to me, but not all of the time. |
| 4 = Somewhat Untrue | Applies to me, but very rarely. |
| 5 = Mostly Untrue | Does not apply to me at all. |

SPARE TIME & LIFESTYLE

<u>STATEMENTS</u>	<u>RESPONSE</u>				
	1	2	3	4	5
1. I know what I like to do for fun, and try to get involved in things that match my interests.					
2. My parents know about my activities, hobbies, and lifestyle.					
3. People are always on my case about the way I live my life.					
4. I know how to avoid getting involved in things that could be hurtful or damaging to me.					
5. My friends and I party, but we know how to keep things under control. It's O.K. to have fun, but we don't let anybody get hurt.					
6. I'm the kind of person who likes to keep an open-mind: I know what I like and I also like trying new things.					
7. I think of some of the things I do, and sometimes, I get scared. One of these days, something bad is going to happen to me.					
8. I know about the resources my school and my community have to offer young people.					
9. I'm involved in recreational programs offered by my school and my community.					
10. I think I have a pretty healthy lifestyle. I think I'd be a good example for someone to follow.					
11. I know how to stay safe.					

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Does not apply to me at all.

FRIENDS

<u>STATEMENTS</u>	<u>RESPONSE</u>				
	1	2	3	4	5
1. I have an easy time making friends with people I don't know.					
2. My friends are a good influence on my life.					
3. People tend to avoid me.					
4. I feel I can turn to my friends for help and support when I need it.					
5. I think my friends would drop me if they thought I wasn't cool.					
6. A good friend is someone who'll look out after you and will not stand by and let you do stupid things to yourself.					
7. I know my friend's parents and families. We hang out at each other's places all the time.					
8. Most of my friends are involved in interesting things. They seem to know what they want out of life.					
9. When I fight with my friends, things can get really ugly.					
10. My friends and I don't like other people. We won't let anybody hang out with us who are not like us.					
11. My friends and I do cool things together regularly. We play sports, go to the movies, and hang out together.					
12. I usually hang out with people who are quite a bit older than me.					
13. A good friend is someone who goes along with whatever you say and do.					
14. My friends are special to me. I've known some of them for a long time					
15. Sometimes, I feel like my friends are pushing me to do things I really don't want to do. But I don't always know how to say no to them.					

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FAMILY & HOME LIFE

<u>STATEMENTS</u>	<u>RESPONSE</u>				
	1	2	3	4	5
1. I get along well with my family.					
2. The people in my family are close to each other.					
3. I feel like I am appreciated in my family.					
4. My parents and I don't agree on anything.					
5. I feel like my parents have time for me.					
6. I feel that I can turn to my family for help when I need it.					
7. The people in my family have a hard time talking to each other; we don't communicate very well.					
8. I'm always fighting with my brother(s)/sister(s).					
9. We do a lot of activities together as a family.					
10. When fights happen in my family, things can really get out of hand.					
11. When we plan activities, I feel that my tastes and ideas are not respected.					
12. I feel like my parents are always on my case about something. It's like I can never do things right.					
13. Sometimes, I feel like I could disappear and my family wouldn't care.					
14. I think my parents are fair in the way they treat me.					
15. When there are problems in my family, we work hard to solve them together.					
16. I don't often feel I have a lot in common with my family.					

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DRUGS & ALCOHOL

<u>STATEMENTS</u>	<u>RESPONSE</u>				
	1	2	3	4	5
1. I don't mind having a few drinks or getting high once in a while.					
2. My parents are always on my back about my drinking or drug use.					
3. People know me as the person at the party who is likely really high or drunk.					
4. I know how to avoid getting involved with drugs that could be hurtful or damaging to me.					
5. My friends and I party, but we know how to keep things under control.					
6. Come to think of it, I get high about once a week.					
7. I think of some of the things I've done while intoxicated and sometimes I get scared. One of these days, something bad is going to happen to me.					
8. Drugs or alcohol, I never touch the stuff.					
9. I actually use a lot. I'm usually doing it daily.					
10. There is nothing wrong with drinking or getting high. It's nobody else's business.					
11. I use now but I'll quit at a later date when I feel like it.					
12. Some people are concerned about my drinking or drug use.					
13. I could use some help to get my habit under control.					

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DAILY ROUTINES

<u>STATEMENTS</u>	<u>RESPONSE</u>				
	1	2	3	4	5
1. I can never get up in the morning.					
2. I keep room and my personal space clean.					
3. I get bored easily.					
4. My parents and I often argue over curfews. I don't like to be told when I have to be somewhere.					
5. I know how to get myself to where I need to be (I know how to use public transportation, or how to get a safe ride).					
6. In my day to day life, I have an easy time making decisions.					
7. I know how to do laundry. I look after my own clothes.					
8. I'm not really good with money. If I have it, I spend it.					
9. I get my chores done on time.					
10. I can plan a schedule to get things done.					
11. I don't have a problem keeping myself busy.					
12. I know how to prepare myself a nutritious meal when I need to look after myself.					
13. I know where to go if I get sick, or have health problems.					
14. I know how to keep myself and the house safe when I'm alone.					
15. I have a hard time keeping appointments.					

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PERSONAL

<u>STATEMENTS</u>	<u>RESPONSE</u>				
	1	2	3	4	5
1. Sometimes, the stress just gets to be too much: I just feel I'm going to explode!					
2. I know how to make smart decisions about how to deal with different situations.					
3. Generally speaking, I feel good about myself.					
4. I know I'm not perfect. Sometimes, I do things that I regret. But I try to understand why I did those things.					
5. I often feel like my life is completely different from anybody else's. I just don't get the sense I fit in anywhere.					
6. I often stay up at night worrying about things. Things overwhelm me pretty quickly.					
7. Generally speaking, I don't really have mood swings.					
8. Sometimes, I just can't seem to make up my mind on my own. It's so much easier to have someone else make decisions for me.					
9. Not too many things bother me. I don't usually fly off the handle over small things.					
10. Generally speaking, I feel pretty good about the future.					
11. I understand that some things are more delicate than others. I'm careful about who I share things with.					
12. When things get to be too much to deal with, I get drunk or use drugs. It helps me cope.					
13. I can talk about my feelings (both happy and sad) with people I trust.					
14. I know what my strengths and weaknesses are. Overall, I think I have a pretty fair opinion of myself.					
15. Sometimes, I wish I'd never been born.					

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EDUCATION

<u>STATEMENTS</u>	<u>RESPONSE</u>				
	1	2	3	4	5
1. I enjoy school and feel comfortable there.					
2. I ask for help when I run into problems with my subjects or homework.					
3. I do well in math and sciences.					
4. I do well in English and the social sciences.					
5. I don't like to read.					
6. I know what topics I have to choose to meet my long-term education or career goals.					
7. I have no problems expressing my ideas in writing.					
8. I don't like the art classes.					
9. I love PE . I'm good in sports.					
10. I generally make an effort to make sure my work is well done.					
11. I often get in trouble for disturbing other people in the classroom.					
12. I can't stand my teachers.					
13. I feel like other people make all the decisions when it comes to my education.					
14. I never have a problem getting to class on time.					
15. I attend my school program and generally don't skip classes.					

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WORK & CAREER

<u>STATEMENTS</u>	<u>RESPONSE</u>				
	1	2	3	4	5
1. I have a pretty good idea of what I'd like to do when I finish school.					
2. I know how to look for part-time work or summer jobs.					
3. I don't really like being told what to do. Bosses get on my nerves					
4. I've looked into the kind of training I'll need to get to do the job I'd like to have after I finish school.					
5. The only reason I want to work is to have money. I don't care what I end up doing as long as it pays well.					
6. I have a resume. I know how to put a resume together.					
7. Job interviews freak me out. I never know how to act.					
8. It's important to like what you do for a living.					
9. Work gives you independence. I want to work because I don't want to be dependent on my parents forever.					
10. I pick my courses to make sure I get the right subjects for the work I'd like to do.					

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MY OPINIONS

<u>STATEMENTS</u>	<u>RESPONSE</u>				
	1	2	3	4	5
1. My life is in pretty good shape right now.					
2. People who get involved with drugs are weak and stupid.					
3. Adults have no right to tell me what to do. My parents and my teachers should just butt out and let me do my own thing.					
4. Having nice things, like cool clothes and a cool car, are important.					
5. There are things in my life that I want to change. I'm just not too sure where to start.					
6. People are equal, no matter what their race, religion, or gender is.					
7. My friends are the most important thing in my life. I don't want to leave them.					
8. Sex is no big deal. It's just something you do for fun.					
9. I have control over my life. It's up to me to decide the kind of person I want to be.					
10. Along with freedom and rights come responsibilities as well.					

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Section Two

Now here's your chance to describe yourself directly!

This is the last section of the questionnaire and it includes questions where you get to tell us in your own words about yourself and other things that might be on your mind. Once you've completed this questionnaire, please submit it to us.

By the way, thanks for filling out the check boxes on the previous pages.

Again, the Questionnaire can be time consuming. Take a break if you need to and come back to it later or even the next day. If there are questions you don't understand or don't wish to answer, then feel free to just leave it blank.

SPARE TIME & LIFESTYLE

Please describe what an average day and evening is like for you (during the week and on weekends).

What types of things are do you like to do? Is there anything that you'd like to do that you haven't had a chance to try yet?

Tell us about a time when you took part an activity that was interesting to you. What did you like about it?

FRIENDS

What do you and your friends do when you are together?

How long have you known your best friend?

What do you think is important in a friend?

FAMILY & HOME LIFE

How are things going at home?

How would you describe your relationship with your family?

Who would you say is the person you are closest to, or most comfortable with, in your family? Why?

Think of a time when you disagreed with your parents about something (curfews, house rules, etc.). How did you deal with the situation?

How do you think your family feels about you?

If you could change anything about your family or your parents, what would it be?

What would a really good family life look like to you?

DRUGS & ALCOHOL

Please fill in the chart below:

Substance	Age of first use	Current frequency	Current Dosage
Tobacco			
Alcohol			
Marijuana			
Hallucinogens (LSD or acid mushrooms)			
Stimulants (cocaine, crack, crystal meth, ecstasy)			
Depressants (sedatives, etc.)			
Opiates (heroin, methadone)			
Inhalants (glue, gasoline, paint)			
Prescription drugs (ritalin, pain killers)			
Other drugs			

Have you ever had any problems because of drinking or getting high? (getting suspended from school, caught by police, family conflict etc.?) Please describe.

If somebody offered you help to cut down or quit altogether, would you accept the help?
Why or why not?

What would your life look like without drugs or alcohol?

DAILY ROUTINES

How do you feel about the rules at home around chores, the cleaning of your room, meals, people's personal belongings, etc.?

If you were given the opportunity to live on your own, how well prepared do you think you would be? What do you know how to do? What would you need help with?

If you were given the opportunity to live somewhere other than home, would you want to do it? Why or why not?

In your every day life, what would you say are your biggest assets or qualities? What would you say are the things you have to work on?

PERSONAL

How do you deal with stress? For example do you ignore it, talk to somebody or yell at people etc.?

Are there areas in your life that you would like to look into or work through such as anger, being able to talk to your parents, negative feelings about yourself or somebody else?

Think of a time when you had a problem in your life. How were you able to work through it?

Who do you turn to in a time of crisis? Who do you turn to when you really want to share a great experience?

EDUCATION

In your own words, tell us how you feel about school? How do you feel about studying, homework, teachers, etc.?

How would you describe an average school week for you?

Please describe what you would like to change, if anything, about your education?

In your own words, please describe where you see yourself two years from now, as far as education and school are concerned?

WORK & CAREER

If you could have any job in the world, what would it be? What do you think you would have to do to get this job?

Have you ever looked for a job on your own before? What were the results?

Have you ever had a summer job or part-time job before? Please Describe.

What do you think are your best qualities as an employee?

SUMMARY STATEMENTS

Why do you think it has been suggested you attend the Venture Academy program?

What are some of your personal goals?

Please describe what you'd like your life to look like six months from now.

Please describe what you'd like your life to look like a year from now.
