

## **Cigarette Smoking Risk Survey**

Developed with Respect to Icek Ajzen's Theory of Planned Behavior

Date: \_\_\_\_\_

Your Name: \_\_\_\_\_

Age: \_\_\_\_\_

Grade in School: \_\_\_\_\_

School where you attend: \_\_\_\_\_

The present survey is an assessment tool that tries to discover reasons why adolescents' start or resist smoking cigarettes. Specifically, we are interested in your personal opinions regarding smoking cigarettes. Please read each question carefully and answer it to the best of your ability. There are no correct or incorrect responses. We are interested in your personal opinion. All responses to this survey are completely confidential. Thank you for your participation.

### **Instructions**

All questions in this questionnaire use yes or no answers. Circle the answer that best describes your opinion. When answering, please remember the following points:

- *Be sure to answer all items – do not omit any.*
- *Never circle more than one answer on a single scale.*
- *Some of the questions may appear to be similar, but they do address somewhat different issues.*

### **Intention**

I intend to smoke cigarettes. Yes or No

I will never smoke cigarettes. Yes or No

I think about smoking. Yes or No

### **Attitude**

I think it is okay for a young person of my age to smoke cigarettes. Yes or No

I think daily smoking is disgusting. Yes or No

### **Social Norms**

Most people who are important to me think that smoking cigarettes are disgusting. Yes or No

I do not have friends who smoke cigarettes? Yes or No

