Observation Questionnaire for 12-17 Age Group

Adolescents are influenced by their peers more than younger age groups. This questionnaire includes questions that will help you to understand the physical, intellectual, social/emotional, and spiritual development of those in the 12-17 age range better. Record the adolescent’s actual responses. To enter data, click on the fillable areas.

Interview date: Click here to enter a date.

Teen’s First Name: Click here to enter text.

Interviewer: Click here to enter text.

Teen’s Date of Birth: Click here to enter a date.

**Physical Characteristics**

1. What is your gender? (Check the appropriate box.) Male  Female  Other comments: Click here to enter text.

2. I believe that gender is primarily based on (select one answer):

The sex a person was born with

What a person feels like

A person’s desires or sexual attraction

The way society sees a person

Not sure

3. What do you like most about yourself physically? Click here to enter text.

4. What, if anything, do you wish you could change about yourself? Click here to enter text.

5. Name a physical achievement you have accomplished. Click here to enter text.

6. Do you enjoy sports? Click here to enter text. Why? Click here to enter text.

7. What is your favorite sport? Click here to enter text. Why? Click here to enter text.

8. What is your favorite outdoor activity? Click here to enter text. Why? Click here to enter text.

9. What time do you usually go to bed at night? Click here to enter text.

10. What time do you usually wake up in the morning? Click here to enter text.

**Intellectual Characteristics**

11. What grade are you in at school? Click here to enter text.

12. What is your favorite class or subject in school? Click here to enter text.

13. What is your least favorite class or subject at school? Click here to enter text.

14. What is your favorite board game? Click here to enter text. Why? Click here to enter text.

15. What is your favorite computer game? Click here to enter text. Why? Click here to enter text.

16. What is your favorite television program? Click here to enter text. Why? Click here to enter text.

17. Do you have personal, private access to any of the following? (Check Yes or No for each.)

Television Yes  No  Comment: Click here to enter text.

Computer Yes  No  Comment: Click here to enter text.

Tablet Yes  No  Comment: Click here to enter text.

Smart Phone Yes  No  Comment: Click here to enter text.

18. How old were you when you first used the internet? Click here to enter text.

19. How often do you use the internet? (Select the best answer.)

Constantly  Comment: Click here to enter text.

Five or more times a day  Comment: Click here to enter text.

Three or four times a day  Comment: Click here to enter text.

Once or twice a day  Comment: Click here to enter text.

I don’t use the internet at all  Comment: Click here to enter text.

20. How much time do you usually spend using the internet in a single day? (Select the best answer.)

I don’t use it at all  Comment: Click here to enter text.

Less than 1 hour  Comment: Click here to enter text.

1-2 hours  Comment: Click here to enter text.

3-4 hours  Comment: Click here to enter text.

5 or more hours  Comment: Click here to enter text.

21. I have clear goals for what I want to be in five years.

Agree strongly  Agree somewhat  Disagree strongly

22. When I think about the future, the most important factor is (select the one best answer):

My parents

My friends

Money

My interests/talents

My religious faith

23. What is the biggest thing you want to accomplish before the age of 30? (Select the best answer.)

Finish my education

Discover who I am

Start a career

Follow my dreams

Become financially independent

Travel to other countries

Get married

Become a parent

Care for the needy

**Social/Emotional Characteristics**

24. Who do you like to spend time with the most? (Select the best answer.)

My mother  Comment: Click here to enter text.

My father  Comment: Click here to enter text.

My family  Comment: Click here to enter text.

My friends  Comment: Click here to enter text.

Myself  Comment: Click here to enter text.

My pet(s)  Comment: Click here to enter text.

25. I have experienced bullying at school. Yes  No

26. I have experienced bullying on social media. Yes  No

27. Looking at other people’s posts makes me feel inferior. Yes  No

28. The person I admire the most is: Click or tap here to enter text. Why? Click or tap here to enter text.

29. My sense of self is determined most by my (Select the one best answer):

Educational achievement

Race/ethnicity

Religion/religious beliefs

Family upbringing

Gender/sexuality

Hobbies/pastimes

Group of friends

Political affiliation

Social/economic class

30. What makes you feel happy? Click here to enter text.

31. What makes you feel sad? Click here to enter text.

32. How have you been affected by COVID-19? Click here to enter text.

33. What is your greatest fear? Click or tap here to enter text.

34. How do you feel about your future? Click here to enter text.

35. The primary mark of adulthood is (Select the one best answer):

Financial independence

Emotional maturity

Reaching the age of 18

Career stability

Finished education

Married

Parenthood

**Spiritual Characteristics**

36. Do you believe that God created the universe? Yes  No  I don’t know

37. Do you believe that the Bible is true? Yes  No  I don’t know

38. What, if anything, can keep you from God? Click here to enter text.

39. What did Jesus do for you? Click here to enter text.

40. What makes it possible for a person to go to Heaven? Click here to enter text.

41. How often do you go to church?

Every week  Comment: Click here to enter text.

About once a month  Comment: Click here to enter text.

Only on holidays  Comment: Click here to enter text.

I don’t go to church at all  Comment: Click here to enter text.

42. How do you think God feels toward you? Click here to enter text.

43. How do you feel about God? Click here to enter text.

44. Do you ever talk to other people about God? Click here to enter text.

45. Most of my friends do not share my beliefs.

Agree  Disagree  Not sure

46. Lying is morally wrong.

Agree  Disagree  Not sure

47. Abortion is morally wrong.

Agree  Disagree  Not sure

48. Sex before marriage is morally wrong.

Agree  Disagree  Not sure

49. Homosexual behavior is morally wrong.

Agree  Disagree  Not sure

50. What is morally right and wrong changes over time, based on changes in society.

Agree  Disagree  Not sure