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 [ ]