Middle School Survey (4th-8th Grade)
Southeast Michigan Tobacco Counteradvertising Contest

Thank you for finishing this survey AFTER making your Contest project.

Today's date: _____, 2006

What is your grade? ____ 4th ____5th ____6th ____ 7th ____ 8th

What is your age? ____ years

Are you a ____ girl? or ____ boy?

1. Please write down one fact you learned about tobacco or smoking while making your project.

2. Did this project change the way you feel about tobacco or smoking? ____ Yes or ____ No
   If *Yes*, please explain:

3. Do you now smoke: ___every day _____ some days _____not at all

4. Do you think you will try a cigarette any time during the next year? ____ Yes or ____ No

5. Have you ever made anti-tobacco artwork before? ____ Yes or ____ No

6. What, if anything, did you like about this contest?

7. Would you enter a contest like this again? ____ Yes or ____ No *Please explain your answer.*

Thanks for participating!