

Youth Group Planning Survey

Thanks for taking the time to fill out this survey. Your answers will help the youth group decide what activities to do this school year. We want to increase the number of students involved, and need your help to do that. Please feel free to share your thoughts and ideas to help make this year great!

1. How do you feel about doing these things in the youth group?

	This is great	This is okay	This is not my favorite thing
a. Presentations	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
b. Organizing (behind the scenes work)	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
c. Working on media (posters, flyers, radio ads)	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³

2. How else would you like to participate in the youth group?

3. What topics and activities are you most interested in doing this school year?

	Definitely	Maybe	We could skip this year
a. Changing perceptions of youth about alcohol and drug use	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
b. Changing perceptions of adults and the community about alcohol and drug use	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
c. Health fairs	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
d. Town Hall meetings	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
e. Parades	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
f. Work with younger children in schools	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
g. School poster campaign	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
h. Promotional items at school	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
i. Youth Leadership training (two-day offsite workshop)	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
j. Changing local alcohol policies at school or in the community	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
k. Helping conduct a community assessment of alcohol issues in the community	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³

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4. What other topics or projects would you like to do this year?

5. What is your favorite part of being in the youth group?

6. How could we make the youth group more interesting?

7. We hope to get more students involved in the youth group. How important are the following factors to increasing youth involvement in activities and meetings?

	Very important	Kind of important	Not very important
a. Time of meetings/activities	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
b. Location of meetings/activities	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
c. Food and beverages provided	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³
d. The activities of the group	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³

8. What days and times are best for you to meet?

9. What location(s) are best for you to meet at?

10. What are some other things we could do to get more students interested and involved in our group?

Thank you for your feedback!