

FAST TRACK PROJECT

COHORT	SITE	CHILD'S ID	YEAR OF PARTICIPATION	INTERVIEWER NO.
<input type="radio"/> 1st	<input type="radio"/> NC	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 1st	<input type="text"/> <input type="text"/>
<input type="radio"/> 2nd	<input type="radio"/> TN	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 2nd	<input type="text"/> <input type="text"/>
<input type="radio"/> 3rd	<input type="radio"/> WA	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 3rd	<input type="text"/> <input type="text"/>
	<input type="radio"/> PA	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 4th	<input type="text"/> <input type="text"/>
		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 5th	<input type="text"/> <input type="text"/>
		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 6th	<input type="text"/> <input type="text"/>
		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 7th	<input type="text"/> <input type="text"/>
		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 8th	<input type="text"/> <input type="text"/>
		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 9th	<input type="text"/> <input type="text"/>

Child's Name _____ Date _____

MARKING INSTRUCTIONS

- Use #2 pencil only.
- Make dark heavy marks.
- Erase cleanly to change answer.

Right
 Wrong

SUPERVISION - PRIMARY CAREGIVER

I'd like to talk with you about how often you and your child talk about different things, like his/her friends, where she/he goes out and when she'll/he'll be back, etc. for the past 6 months.

Not Applicable
 Almost Always
 Often
 Sometimes
 Once in a While
 Almost Never

1. In the <u>past 6 months</u> , how often have you discussed with your child his/her plans for the coming day?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. In the <u>past 6 months</u> about how often have you talked with your child about what he/she had <u>actually</u> done during the day?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Does your child have a set time to be home on <u>school nights</u> ? (IF NO SET TIME (RESPONDS "ALMOST NEVER" OR "NOT APPLICABLE"), BUBBLE 'NOT APPLICABLE' FOR QUESTION 4 AND GO TO QUESTION 5.)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. What is the time that your child has to be home on <u>school nights</u> ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="radio"/> pm								
	<input type="radio"/> am								
	<input type="radio"/> Not Applicable								
5. Does your child have a set time to be home on <u>weekend nights</u> ? (IF NO SET TIME (RESPONDS "ALMOST NEVER" OR "NOT APPLICABLE"), BUBBLE 'NOT APPLICABLE' FOR QUESTION 6 AND GO TO QUESTION 7.)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. What is the time that your child has to be home on <u>weekend nights</u> ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="radio"/> pm								
	<input type="radio"/> am								
	<input type="radio"/> Not Applicable								
7. If your child did not come home by the time that was set, would you know? (Score 8 if both Q3 & Q5 were 8 or 1.)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8. If you or another adult are not at home, is your child allowed to leave the house? (IF THE CHILD IS NOT ALLOWED TO LEAVE THE HOUSE IN THAT SITUATION (ANSWERED "ALMOST NEVER" OR "NOT APPLICABLE"), BUBBLE 'NOT APPLICABLE' FOR QUESTION 9 AND GO TO QUESTION 10.)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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(OVER)

	1	2	3	4	5	8
9. Does your child leave a note or call to let you know where he/she is going?						
10. Do you know who your child's companions are when he/she is not at home?						
11. When you are not at home, does your child know how to get in touch with you?						
12. When your child is out, do you know what time he/she will be home?						
13. Is it important to you to know what your child is doing when he/she is outside of the home?						
14. Where does your child <u>usually</u> go right after school? (FILL IN ONE ANSWER CODE ONLY. IF MULTIPLE RESONSES ARE GIVEN, CODE THE MOST FREQUENTLY OCCURING RESPONSE.)						
① Home, supervised (adult or responsible minor present) ② Home, unsupervised ③ Somewhere else, supervised (adult or responsible minor present) (DESCRIBE) _____ ④ Somewhere else, unsupervised (DESCRIBE) _____ ⑤ Somewhere else, don't know if supervised (DESCRIBE) _____ ⑥ Other (DESCRIBE) _____ ⑧ Don't Know ⑨ Don't Know - child not in my custody						
15. Where is your child <u>usually</u> in the evening? (FILL IN ONE ANSWER CODE ONLY IF MULTIPLE RESPONSES ARE GIVEN, CODE THE MOST FREQUENTLY OCCURING RESPONSE.)						
① Home, supervised (adult or responsible minor present) ② Home, unsupervised ③ Somewhere else, supervised (adult or responsible minor present) (DESCRIBE) _____ ④ Somewhere else, unsupervised (DESCRIBE) _____ ⑤ Somewhere else, don't know if supervised (DESCRIBE) _____ ⑥ Other (DESCRIBE) _____ ⑧ Don't Know ⑨ Don't Know - child not in my custody						
16. Where is your child <u>usually</u> on the weekends? (FILL IN ONE ANSWER CODE ONLY IF MULTIPLE RESPONSES ARE GIVEN, CODE THE MOST FREQUENTLY OCCURING RESPONSE.)						
① Home, supervised (adult or responsible minor present) ② Home, unsupervised ③ Somewhere else, supervised (adult or responsible minor present) (DESCRIBE) _____ ④ Somewhere else, unsupervised (DESCRIBE) _____ ⑤ Somewhere else, don't know if supervised (DESCRIBE) _____ ⑥ Other (DESCRIBE) _____ ⑧ Don't Know ⑨ Don't Know - child not in my custody						
17. Do you feel that your child's friends have a good influence on his/her behavior?						
18. Do you feel that your child's friends have a bad influence on his/her behavior?						
19. When you and your child are both at home, do you know what he/she is doing?						
20. How many of your child's friends do you know?						
① None ② Several ③ Most ④ All ⑧ Don't Know						