

**School Physical Activity and Nutrition  
(SPAN) Project  
Student Assent**

**STUDENT'S NAME:** \_\_\_\_\_

**SCHOOL:** \_\_\_\_\_

**GRADE:** \_\_\_\_\_

- You will be asked to answer questions about your food choices and physical activity (exercise).
- An adult will weigh you, measure your height, and write the results on the last page of the questionnaire.
- No one at school or at home will see your answers, how tall you are, or what you weigh.
- Taking part in this project is up to you. Your choice about taking part will not affect your grades in school or your ability to take part in any school activities.
- After you complete the questionnaire and are measured for height and weight, the page with your name on it (Student Assent Form) will be removed. Your name will never be used after that.
- By signing below, you agree to take part in this project.

\_\_\_\_\_  
**Signature of Student**

\_\_\_\_\_  
**Date**

# SCHOOL PHYSICAL ACTIVITY AND NUTRITION (SPAN) PROJECT

## STUDENT QUESTIONNAIRE

8<sup>th</sup>/11<sup>th</sup> Grades

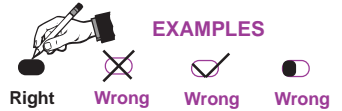
The following questions are about what kids your age eat, what they know about nutrition, and their physical activity (exercise). Your answers will help us learn about students in Texas and will be used to design better health programs. Read each question carefully and pick the answer that is true for you. Mark that answer on your questionnaire as shown in the example below. **This is not a test, and there are no right or wrong answers.** Remember, your answers will be kept private.

### Marking Instruction:

Fill in bubble(s) completely



To change your answer, erase completely



### STUDENT INFORMATION

What School do you go to? \_\_\_\_\_

1A. Bubble in your School ID #

0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9

1B. Bubble in your Student ID #

0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

2. Bubble in your Grade

8th

11th

3. Bubble in today's date.

Jan  2001

Feb  2002

Mar

Apr

May

Jun

Jul

Aug

Sep

Oct

Nov

Dec

0	0
1	1
2	2
3	3
	4
	5
	6
	7
	8
	9

4. Bubble in your age.

8

9

10

11

12

13

14

15

16

17

18

19

20

5. Bubble in your sex.

Male

Female

6. How do you describe yourself? (Fill in only one)

American Indian or Alaska Native

Asian

Black or African American

Hispanic or Latino

Native Hawaiian or Other Pacific Islander

White, non-Hispanic, non-Latino

Other

7. How tall do you think you are?

3 ft.

4 ft.

5 ft.

6 ft.

7 ft.

1 in.

2 in.

3 in.

4 in.

5 in.

6 in.

7 in.

8 in.

9 in.

10 in.

11 in.

8. What do you think you weigh?

0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

lb.

## These questions are about YESTERDAY.

NONE	1 TIME	2 TIMES	3 or More Times
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9. Yesterday, how many times did you eat hamburger meat, hot dogs, sausage (chorizo), steak, bacon, or ribs?	0	1	2	3+
10. Yesterday, how many times did you eat battered or fried chicken, chicken nuggets, chicken fried steak, fried pork chops, or fried fish?	0	1	2	3+
11. Yesterday, how many times did you eat gravy (either on a food or by itself)?	0	1	2	3+
12. Yesterday, how many times did you eat peanuts or peanut butter?	0	1	2	3+
13. Yesterday, how many times did you eat any kind of cheese, cheese spread or a cheese sauce? <i>Include</i> cheese on pizza or in dishes such as tacos, enchiladas, lasagna, sandwiches, cheeseburgers or macaroni and cheese.	0	1	2	3+
14. Yesterday, how many times did you drink any kind of milk? <i>Include</i> chocolate or other flavored milk, milk on cereal, and drinks made with milk.	0	1	2	3+
15. Yesterday, how many times did you eat yogurt or cottage cheese or drink a yogurt drink? <b>Do not count frozen yogurt.</b>	0	1	2	3+
16. Yesterday, how many times did you eat rice, macaroni, spaghetti, or pasta noodles?	0	1	2	3+
17. Yesterday, how many times did you eat any type of bread, bun, bagel, tortilla, or roll?	0	1	2	3+
18. Yesterday, how many times did you eat hot or cold cereal?	0	1	2	3+
19. Yesterday, how many times did you eat French fries or chips? <i>Include</i> potato chips, tortilla chips, Cheetos®, corn chips, or other snack chips.	0	1	2	3+
20. Yesterday, how many times did you eat vegetables? <i>Include</i> all cooked and uncooked vegetables; salads; and boiled, baked and mashed potatoes. <b>Do not count French fries or chips.</b>	0	1	2	3+
21. Yesterday, how many times did you eat beans such as pinto beans, baked beans, kidney beans, refried beans, or pork and beans? <b>Do not count green beans.</b>	0	1	2	3+
22. Yesterday, how many times did you eat fruit? <b>Do not count juice.</b>	0	1	2	3+
23. Yesterday, how many times did you drink fruit juice? <i>Fruit juice</i> is a 100% juice drink like orange juice, apple juice, or grape juice. <b>Do not count punch, Kool-Aid®, sports drinks, and other fruit flavored drinks.</b>	0	1	2	3+
24. Yesterday, how many times did you drink any punch, Kool-Aid®, sports drinks? <b>Do not count fruit juice.</b>	0	1	2	3+
25. Yesterday, how many times did you drink any sodas or soft drinks?	0	1	2	3+
26. Yesterday, how many times did you eat some type of frozen dessert? <i>A frozen dessert</i> is a cold, sweet food like ice cream, frozen yogurt, an ice cream bar, or a Popsicle.	0	1	2	3+
27. Yesterday, how many times did you eat sweet rolls, doughnuts, cookies, brownies, pies or cakes?	0	1	2	3+
28. Yesterday, how many times did you eat chocolate candy? <b>Do not count brownies or chocolate cookies.</b>	0	1	2	3+
29. Yesterday, how many meals did you eat?	0	1	2	3+
30. Yesterday, how many times did you eat or drink a snack? <i>A snack</i> is any food or beverage that you eat or drink before, after, or between meals.	0	1	2	3+

31. What type of milk do you usually drink? (Fill in only ONE)

- Regular (whole) milk
- Low-fat (2%, 1 1/2%, 1%) milk
- Skim, nonfat, or 1/2% milk
- Combination of the above types of milk
- I don't drink milk

32. Are the foods you usually eat:

- High in fat
- Some high in fat, some low in fat
- Low in fat

33. Are you a vegetarian?

- No, I eat meat (beef, pork, fish, or chicken).
- Yes, but sometimes I eat meat (beef, pork, fish, or chicken).
- Yes, I never eat meat (beef, pork, fish, or chicken).

34. Do you usually take a vitamin or mineral pill?

- Yes
- No

35. When you think about the way you usually eat, would you say that your eating habits are:

- Much healthier than those of most people my age
- Somewhat healthier than those of most people my age
- About the same as those of most people my age
- Somewhat less healthy than those of most people my age
- Much less healthy than those of most people my age

36. Do you usually eat or drink something for breakfast?

- Almost Always or Always
- Sometimes
- Almost Never or Never

37. Do you eat the school lunch served in the cafeteria?

- Almost Always or Always
- Sometimes
- Almost Never or Never

38. How often do you read nutrition labels on food packages to decide whether or not to eat a food?

- Almost Always or Always
- Sometimes
- Almost Never or Never

39. How often do you read nutrition labels on food packages to decide whether or not to buy a food?

- Almost Always or Always
- Sometimes
- Almost Never or Never

40. On how many of the past 7 days did you exercise or take part in physical activity that made your heart beat fast and made you breathe hard for at least 20 minutes? (For example: basketball, soccer, running or jogging, fast dancing, swimming laps, tennis, fast bicycling, or similar aerobic activities)

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

41. On how many of the past 7 days did you take part in physical activity or exercise for at least 30 minutes where you did not sweat or breathe hard, such as fast walking, slow bicycling, skating, pushing a lawn mower, or mopping floors?

- 0 days                       2 days                       4 days                       6 days  
 1 day                       3 days                       5 days                       7 days

42. On how many of the past 7 days did you do exercises to strengthen or tone your muscles, such as push-ups, sit-ups, or weight lifting?

- 0 days                       2 days                       4 days                       6 days  
 1 day                       3 days                       5 days                       7 days

43. In an average week when you are in school, on how many days do you go to physical education (PE) classes?

- 0 days                       2 days                       4 days  
 1 day                       3 days                       5 days

44. During an average physical education (PE) class, how many minutes do you spend actually exercising or playing sports?

- I do not take PE       10 to 20 minutes       31 to 40 minutes       51 to 60 minutes  
 Less than 10 minutes       21 to 30 minutes       41 to 50 minutes       More than 60 minutes

45. During the past 12 months, on how many sports teams run by your school did you play (do not include PE classes)? Sports teams include soccer, basketball, baseball, swimming, gymnastics, wrestling, track, football, tennis and volleyball teams.

- 0 teams                       1 team                       2 teams                       3 teams or more

46. During the past 12 months, on how many sports teams run by organizations outside of your school (like the park district or summer leagues) did you play? Sports teams include soccer, basketball, baseball, swimming, gymnastics, wrestling, track, football, tennis and volleyball teams.

- 0 teams                       1 team                       2 teams                       3 teams or more

47. Do you currently participate in any other organized physical activities or take lessons, such as martial arts, dance, gymnastics, or tennis?

- Yes                       No

48. How many hours per day do you usually watch TV or video movies?

- I don't watch TV or video movies                       3-4 hours a day  
 Less than 1 hour a day                       More than 4 hours a day  
 1-2 hours a day

49. How many hours per day do you usually spend on the computer or playing video games like Nintendo®, Sega®, or arcade games?

- I don't play video games or use the computer       3-4 hours a day  
 Less than 1 hour a day                       More than 4 hours a day  
 1-2 hours a day

50. Have you ever tried to lose weight?

Yes

No

51. Are you trying to lose weight now?

Yes

No

52. Would you like to:

Weigh more

Weigh less

Have weight stay about the same

53. Compared to other students in your grade who are as tall as you, do you think you weigh:

The right amount

Too much

Too little (or not enough)

54. Have you ever seen the Food Guide Pyramid?

Yes

No

55. From which food group should you eat the most servings each day? Choose only one group.

Breads, cereals, rice, pasta

Meats, fish, poultry, beans, eggs, nuts

Dairy products (milk, cheese, yogurt)

Vegetables

Fats, oils, sweets

Don't know

Fruits

56. From which food group should you eat the *fewest* servings each day? Choose only one group.

Breads, cereals, rice, pasta

Meats, fish, poultry, beans, eggs, nuts

Dairy products (milk, cheese, yogurt)

Vegetables

Fats, oils, sweets

Don't know

Fruits

57. How many total servings of fruits and vegetables should you eat each day?

At least 2 servings

At least 5 servings

At least 3 servings

Don't know

At least 4 servings

58. What is the recommended amount of Calories from fat that you should get from the foods that you eat?

Not more than 10% of the total food energy (Calories) in your diet

Not more than 20% of the total food energy (Calories) in your diet

Not more than 25% of the total food energy (Calories) in your diet

Not more than 30% of the total food energy (Calories) in your diet

Not more than 35% of the total food energy (Calories) in your diet

59. Which contains the most Calories?

One gram of protein

One gram of fat

One gram of carbohydrate

