

TRUANCY - STUDENT QUESTIONNAIRE FORM

NAME: _____ AGE: _____

DATE OF BIRTH: _____ SCHOOL: _____

“Why is it difficult for you to attend school on a regular basis?” (check all answers below)

Sick/health problems

Trouble writing

Stay up too late

I can't read very well

No clothes to wear

I can't see very well

I'm depressed

Some subjects are challenging (math, reading, etc.)

Pregnant

My weight bothers me

Problems at home

Gang pressure

Parents do not care if I come to school

Drug abuse

My parent(s) are sick and need my help at home

Peer Pressure

I have to watch my sister/brother

Someone is bullying me

Shy

Other

School is boring

PLEASE WRITE ANY QUESTIONS OR OTHER CONCERNS THAT YOU HAVE ABOUT SCHOOL OR HOME IN THIS BOX: