

Interrupted: Marijuana Evaluation

Would you describe yourself as:

- | | | |
|---------------------------------------|--|---|
| <input type="radio"/> Asian | <input type="radio"/> American Indian/Alaskan Native | <input type="radio"/> Black or African American |
| <input type="radio"/> Caucasian/White | <input type="radio"/> Native Hawaiian/Other Pacific Islander | <input type="radio"/> More Than One Race |
| <input type="radio"/> Unknown | | |

Ethnicity:

- | | |
|--|--|
| <input type="radio"/> Hispanic or Latino | <input type="radio"/> Not Hispanic or Latino |
|--|--|
-

1. I felt this session was helpful.

- | | | |
|--------------------------------|----------------------------------|-------------------------------|
| <input type="radio"/> Very | <input type="radio"/> Somewhat | <input type="radio"/> Neutral |
| <input type="radio"/> Not much | <input type="radio"/> Not at all | |

2. This session has made me think twice about marijuana use.

- | | | |
|------------------------------------|----------------------------------|---|
| <input type="radio"/> Very much so | <input type="radio"/> Somewhat | <input type="radio"/> Neither yes or no |
| <input type="radio"/> Not much | <input type="radio"/> Not at all | |

3. I learned from this program.

- | | | |
|---------------------------------|-----------------------------------|-------------------------------|
| <input type="radio"/> Very much | <input type="radio"/> Some things | <input type="radio"/> Neutral |
| <input type="radio"/> Not much | <input type="radio"/> Nothing | |

4. I would recommend this class to my family or friends.

- | | | |
|---------------------------|-----------------------------|--------------------------|
| <input type="radio"/> Yes | <input type="radio"/> Maybe | <input type="radio"/> No |
|---------------------------|-----------------------------|--------------------------|

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	Very much so	Somewhat	Neutral	Not really	Not at all
5. The instructor seemed knowledgeable about the materials.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. The instructor was open to questions and listening.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. The materials were easy to understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. The materials were appropriate to help me learn about the effects of marijuana.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. The materials were persuasive towards quitting marijuana use.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. What did you like most about the class?

11. What did you like least about the class?

	Yes	No
12. I have quit using marijuana since taking this class.	<input type="radio"/>	<input type="radio"/>
If you have not quit, would you like further help with quitting?	<input type="radio"/>	<input type="radio"/>

If you do not want to quit, what is your reason for continued marijuana use?
