### Census at School – Canada Questionnaire – Grades 4 to 8 2005/06

The province of your school:
1. How many people usually live in your household*? Don't forget to count yourself in!
*Note: Your household means your home. If you live in more than one home, choose the one in which you spend the most time. The term "household" is used in the Census of Canada.
2. What language do you most often speak at home? Choose one:
English • French • Chinese • Punjabi • Italian • Spanish • Arabic • Portuguese • German • Polish • Vietnamese • Other
3. Are you male or female?
4. What is your date of birth? Use digits only, month and year mmyyyy
5. What is your age in years? years
6. What is your height, without shoes, in centimetres? cm
7. What is your arm span in centimetres? (Open arms wide, measure distance from tip of right hand middle finger to tip of left hand middle finger.) cm
8. What is the length of your right forearm, from your elbow bone to your wrist bone, in centimetres?cm
9. What is your wrist circumference in millimetres?mm
10. What is the length from your wrist bone to the tip of the middle finger on your right hand, in centimetres?cm
11. What is the length of your right foot, without a shoe, in centimetres?cm
12. What colour are your eyes?
Blue • Brown • Green • Other
13. Do you have allergies?
Yes • No
14. In most activities, which are you?
Left-handed • Right-handed • Ambidextrous
(Note: The following question can only be answered online.)
<b>15.</b> How fast is your reaction time? Click 'Start'. When the words "Press Stop" appear in the box, click 'Stop' as fast as you can.

	Grain products: (e.g., bread, cereal, toast, mulfin, bagel, rice, pasta) Milk products: (e.g., milk, cheese, yogurt) Vegetables and fruits: (e.g., juice, bananas, oranges, carrots, tomatoes) Meat and alternatives: (e.g., eggs, bacon, chicken, peanut butter, beans) Other: (e.g., tea, coffee, pop, chips, cookies, donuts) No breakfast	
C	17. In the last 24 hours, approximately how much time did you spend, to the nearest hour, on each of the following activities? Make sure that the total does not add up to more than 24 hours.	
	Playing computer or video gameshours Reading (not school work) hours Watching TV, videos or movies hours Playing or listening to music hours Playing board or card games hours Participating in organized sports hours Participating in other hobbies hours Doing homework hours Talking with friends hours Sleeping hours	
	8. How much pressure do you feel because of the schoolwork you have to do? Choose one:  none • very little • some • a lot	
19. What is your favourite physical activity to participate in? Choose one:		
	hiking or walking • running or jogging • cycling • swimming • ice skating • skiing • snowboarding • hockey • tennis • badminton • baseball • basketball • football • volleyball • rugby • soccer • fencing • karate or other martial art • skateboarding • inline skating • dance or drama • other • none	
20. On how many days last week did you do a physical activity that made you huff and puff or made you feel out of breath, tired or warmer than usual? Choose one:		
	0 • 1 • 2 • 3 • 4 • 5 • 6 • 7	
2	21. How do you usually travel to school? Choose one:	
	walk • skateboard • inline skate • cycle • motorcycle • moped • bus • car • train • subway or metro • other	
22. How long does it usually take you to travel to school?		
	minutes	
2	23. What is your favourite subject at school? Choose one:	
	art • English • French • social studies • history • geography • math • science • computers • music • physical education • other	
24. In the last month, how many times have you been bullied* at school? Choose one:		
	0 • 1 to 3 • 4 to 9 • 10 or more	

**16. What do you** *usually* have for breakfast? Choose all the groups that apply:

\* **Note**: Being bullied means when someone does or says something to make you feel uncomfortable or afraid

#### 25. Do you have any of the following? Choose all that apply:

your own calculator • your own cell phone • your own pager • access to a computer at home • access to the Internet at home • your own MP3 or mini disc player

#### 26. Which of the following pets do you have? Choose all that apply:

bird • cat • dog • fish • gerbil • guinea pig • hamster • rabbit • reptile • no pet • other

## 27. If you had \$1,000 to donate to a charity of your choice, what type of organization would you choose? Choose one:

Arts, culture, sports (e.g., community centres, museums, sports teams, music programs) Health (e.g., cancer, AIDS, diabetes research)

Religious (e.g., church or activities related to worship)

Environment (e.g., saving forests, clean air, clean water)

Wildlife, animals (e.g., endangered species, prevention of cruelty to animals)

Education / Youth development (e.g., reading, literacy and skills training, after-school programs)

International aid (e.g., disaster relief, health, education and food aid in poor countries) Other

# 28. Think about someone you most look up to. This could be someone you know personally or have read about or seen on T.V. From the list below, choose the category that best describes this person.

Relative

Actor

Sportsperson

Coach or club leader

Business person

Religious figure

Politician

Teacher

Doctor or nurse

Musician or singer

Friend

Community leader or elder

Other