

2012 ARIZONA YOUTH SURVEY

School Information Form

For Office Use Only District or Group: _____ CTDS: _____

School Name _____

School Phone _____ Fax _____

School Address (Physical) _____

School Address (Mailing) _____

City _____ Zip Code _____ County _____

Number of Students:

8th Grade _____

10th Grade _____

12th Grade _____

Total _____

(1) Primary Contact Person _____ Title _____

Address _____

Phone _____ Fax _____

E-mail _____

(2) Secondary Contact Person: _____ Title _____

Phone _____ Email _____

(3) Principal _____ Email _____

THE SURVEY WILL BE AVAILABLE FOR ADMINISTRATION FROM FEBRUARY – APRIL 2012.

SURVEY ADMINISTRATION DATE _____

Would you like to administer the survey in paper or online? PAPER ONLINE

Do you give permission to send a copy of your school report to the person you have specified as your primary contact person, if that is someone other than yourself?

YES NO

If you do not wish your school name to be given out as a participating school please check here....

Please return form to:
Michelle Neitch, Research Analyst
 Statistical Analysis Center
 Arizona Criminal Justice Commission
 1110 W Washington, Suite 230
 Phoenix, Arizona 85007
 Fax: 602-364-1175
 Phone: 602-364-1173
 mneitch@azcjc.gov

Phillip Stevenson, SAC Director
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 Arizona Criminal Justice Commission
 1110 W. Washington, Suite 230
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