**Note:** This survey is completely voluntary and anonymous. Questions answered on this survey will help assist seniors of the Community Health Education Program in creating a STI Prevention Program for SIUe students.

1. **Gender**:

 Male   Female

1. **Age**: \_\_\_\_\_
2. **What is your race/ethnicity?**
    a. White
    b. Black
    c. Hispanic
    d. Native American
    e. Asian/Pacific Islander
    f. Other
3. **What is your relationship status?**
    a. single
    b. in relationship
    c. in open relationship
    d. married
    e. divorced
4. **Have you ever been sexually active?**
    a. Yes
    b. No
5. **How old were you when you first had sex with another person?**

\_\_\_\_\_

1. **Have you ever had sex without a condom?**
	1. Yes
	2. No
2. **Are you currently sexually active?**
    a. Yes
    b. No
3. **Do you have sex with men, women, or both?**
    a. men
    b. women
    c. both
4. **Do you have vaginal, oral, or anal sex?**
    a. vaginal
    b. oral
    c. anal
    d. all of the above
    e. two of the above (which two?)
5. **In the past 12 months, how many sexual partners have you had?**

\_\_\_\_\_

1. **In the past 12 months, how many of these partners did you use a condom with?**

\_\_\_\_\_

1. **Have you ever had unprotected sex while under the influence of alcohol or drugs?**
	1. Yes
	2. No
2. **Have you ever had an STI before?**
    a. Yes
    b. No
    c. I don’t know
3. **Do you currently have an STI?**
	1. Yes
	2. No
	3. I don’t know
4. **Where would you receive health care services for concerns with STIs?**
	1. private/ personal physician
	2. school health clinic
	3. Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. **Do you feel there is a need for more STI Prevention information on campus?**
	1. Yes
	2. No