Life Events Survey

1. Have you ever experienced a physical assault?
   Yes  No

2. Have you experienced a sexual assault?
   Yes  No

3. When you were younger, did an adult or person at least 5 years older than you ever touch or fondle you or have you touch their body in a sexual way? Or try to have oral, anal, or vaginal sex with you?
   Yes  No

4. Was your home ever set on fire by a person? (Not by a natural disaster, such as lightening).
   Yes  No

5. Have you ever experienced repeated bullying, currently or in the past, and you find that bullying impacts you today? The bullying could be online or in person and could involve emotional, verbal, or physical bullying.
   Yes  No

6. Has your home ever been broken into and items stolen?
   Yes  No

7. Growing up, did you not have enough to eat, had to wear dirty clothes, and/or had no one to protect you. Or were your parents or caregivers too drunk or high to take care of you, or take you to the doctor if you needed it?
   Yes  No

8. Were you often pushed, grabbed, slapped, or had something thrown at you by a parent or caregiver? Or were you often kicked, bitten, hit with a fist, or hit with something hard by a parent or caregiver?
   Yes  No

9. Did an adult or person at least 5 years older than you ever film or take pictures of your body in a sexual way when you were a child?
   Yes  No

10. Was your parent or caregiver often pushed, grabbed, slapped, or had something thrown at them by another parent or caregiver? Or was a parent or caregiver sometimes or often kicked, bitten, hit with a fist, or hit with something hard?
    Yes  No

Please Turn Sheet Over. More Questions are on the Back
11. Have you ever been hit in a car, cycle, or pedestrian accident when the other driver was under the influence of alcohol or other drugs?
   Yes  No

12. Have you experienced any violence or property damage where the perpetrator was motivated to perform this crime based on your identity (gender, sexual orientation, race, ethnicity, religion etc.)?
   Yes  No

13. Has someone ever sold your body or labor for money against your will?
   Yes  No

14. Has anyone ever stolen your identity, credit card, or social security number?
   Yes  No

15. Have you ever been kidnapped?
   Yes  No

16. Have you ever experienced mass violence caused by another human, such as gun violence or an attack on a school?
   Yes  No

17. Have you ever been a survivor of a hit and run vehicle accident?
   Yes  No

18. Have you ever experienced an item being taken by force or threat of force from you? This robbery could include your wallet, phone, or bag.
   Yes  No

19. Have you ever experienced stalking or harassment?
   Yes  No

20. Has a family member or loved one been murdered?
   Yes  No

21. Have you ever experienced emotional, physical, sexual or psychological abuse within a romantic relationship or by a previous romantic partner after the relationship was ended?
   Yes  No