

## HWS Colleges' Social Norms Surveys Online

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### Survey of Student-Athlete Norms

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## Survey of Student-Athlete Norms

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This is a survey about student-athlete attitudes and experiences in athletics and other extracurricular activities. It also covers a variety of other topics including academics, career interests, social life, daily activities, health and well-being issues. We want you to tell us about yourself and your perceptions of other students. This is an **anonymous survey** -- you will not be asked to submit your name nor your specific team sport. The goal is simply to get a general profile of athletes and their lives as students.

Questions that ask about your perceptions of other athletes are referring to athletes **at your school during the school term**. Please read each question carefully. There are no "right" or "wrong" answers-- just give your best estimate. This survey is **voluntary**. If you do not wish to respond to a question you may leave it blank and continue on.

### ATHLETIC ACTIVITIES

**1. In which years during college have you actively participated in any of the following (include the current year if your sport is currently in season or if you are actively training with your team at this time)?** *(mark as many years as apply.)*

	1st	2nd	3rd	4th	5th
a. Intercollegiate Athletics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Intramural/recreational athletics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Napier Student-Athlete Leadership Seminar or William Smith Core 20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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**2. Have you ever served as an intercollegiate team captain?** *(select one)*

- ☐ a. yes, currently
- ☐ b. yes, but not this year
- ☐ c. no

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**3. Are you participating in an intercollegiate sport that is currently in season?**

- ☐ yes      ☐ no
- 

**4. In considering your college experience so far, how important to you is your participation in intercollegiate athletics? (*select one*)**

- ☐ a. Not very important  
☐ b. Somewhat important  
☐ c. Very important  
☐ d. The most important part of my undergraduate experience
- 

**5. Thinking of your five best friends here at school, how many of them are also intercollegiate athletes?**

- 0            1            2            3            4            5  
☐        ☐        ☐        ☐        ☐        ☐
- 

**OTHER EXTRACURRICULAR ACTIVITIES**

**6. In which years during college so far have you actively participated in any of the following (include the current year if you have participated this term already)? (*if you participated in an activity, mark as many years as apply, otherwise check never.*)**

	Never	1st	2nd	3rd	4th	5th
a. Student government	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Religious group or organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Political club or organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Social Fraternity or Sorority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Performing Arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Student Newspaper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Literary or other magazine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

h. Campus media (TV,radio)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Social action/issues group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Cultural/ethnic group or organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Volunteer service organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Work on faculty research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Independent study/research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Honor society	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Semester or year studying abroad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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**7. During the current academic term how much time do you spend per week, on average, on the following?** *(enter the number of hours per week you participate, or check none, for each activity)*

	None	hrs/week
a. Attending class or labs	<input type="checkbox"/>	<input type="text"/>
b. Studying/preparing for class	<input type="checkbox"/>	<input type="text"/>
c. Working with peers on classwork	<input type="checkbox"/>	<input type="text"/>
d. Talking or meeting with faculty	<input type="checkbox"/>	<input type="text"/>
e. Participating in intercollegiate athletics or team related conditioning	<input type="checkbox"/>	<input type="text"/>
f. Participating in recreational exercise	<input type="checkbox"/>	<input type="text"/>
g. Participating in clubs or organized groups	<input type="checkbox"/>	<input type="text"/>
h. Volunteering	<input type="checkbox"/>	<input type="text"/>
i. Work for pay	<input type="checkbox"/>	<input type="text"/>
j. Watching TV/playing video games	<input type="checkbox"/>	<input type="text"/>
k. Partying	<input type="checkbox"/>	<input type="text"/>
l. Other socializing with friends	<input type="checkbox"/>	<input type="text"/>
m. Reading for pleasure	<input type="checkbox"/>	<input type="text"/>

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#### HEALTH AND WELL-BEING

8. How many hours do you sleep on average per night?

- |                       |                       |                       |                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 4 or<br>less          | 5                     | 6                     | 7                     | 8                     | 9                     | 10                    | 11 or<br>more         |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
- 

9. How many meals do you usually eat per day?

- |                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 0                     | 1                     | 2                     | 3                     | 4 or<br>more          |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
- 

10. What is your current weight and height?

a. Weight

b. Height

pounds

ft.  in.

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11. Which statement below about using tobacco (including cigarettes, cigars, and chewing tobacco) do you feel best represents your own attitude? (*select one*)

- ☐ a. Tobacco use is never a good thing to do.
  - ☐ b. Occasional tobacco use is OK, but not daily use.
  - ☐ c. Daily tobacco use is OK if that's what the individual wants to do.
-

**12. Which statement below about using tobacco (including cigarettes, cigars, and chewing tobacco) do you think will be the most common attitude among athletes in general here at your school? (select one)**

- ☐ a. Tobacco use is never a good thing to do.
  - ☐ b. Occasional tobacco use is OK, but not daily use.
  - ☐ c. Daily tobacco use is OK if that's what the individual wants to do.
- 

**13. Which statement below about drinking alcoholic beverages do you feel best represents your own attitude? (select one)**

- ☐ a. Drinking is never a good thing to do.
  - ☐ b. Drinking is all right but a student should never get drunk.
  - ☐ c. An occasional "drunk" is OK as long as it doesn't interfere with academics or responsibilities.
  - ☐ d. An occasional "drunk" is OK even if it does interfere with academics or responsibilities.
  - ☐ e. A frequent "drunk" is OK if that's what the individual wants to do.
- 

**14. Which statement below about drinking alcoholic beverages do you think is the most common attitude among athletes in general here at your school? (select one)**

- ☐ a. Drinking is never a good thing to do.
  - ☐ b. Drinking is all right but a student should never get drunk.
  - ☐ c. An occasional "drunk" is OK as long as it doesn't interfere with academics or responsibilities.
  - ☐ d. An occasional "drunk" is OK even if it does interfere with academics or responsibilities.
  - ☐ e. A frequent "drunk" is OK if that's what the individual wants to do.
-

**15. How often do you think students in each of the following categories at your school typically use tobacco (including cigarettes, cigars and chewing tobacco)?**

Just give your best estimate of what is most typical for each category (a through f).

	Never	1-2 per Year	Once a Month	Twice a Month	Once a Week	Twice a Week	Daily
a. Yourself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Your Friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Students on your team	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Male athletes at your school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Female athletes at your school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Non-athletes at your school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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**16. How often do you think students in each of the following categories at your school typically consume alcohol (including beer, wine, wine coolers, liquor and mixed drinks)?**

Just give your best estimate of what is most typical for each category (a through f).

	Never	1-2 per Year	Once a Month	Twice a Month	Once a Week	Twice a Week	Daily
a. Yourself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Your Friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Students on your team	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Male athletes at your school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Female athletes at your school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Non-athletes at your school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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**17. How many alcoholic drinks, on average, do you think each of the following students typically consumes at parties and bars? (A drink is a bottle of beer, a glass of wine, a wine cooler, a shot of liquor, or a mixed drink.)**

Just give your best estimate of what is most typical for each category (a through f).  
Indicate a number for each or check none.



	None	# drinks
a. Yourself	<input type="checkbox"/>	<input type="text"/>
b. Your Friends	<input type="checkbox"/>	<input type="text"/>
c. Students on your team	<input type="checkbox"/>	<input type="text"/>
d. Male athletes at your school	<input type="checkbox"/>	<input type="text"/>
e. Female athletes at your school	<input type="checkbox"/>	<input type="text"/>
f. Non-athletes at your school	<input type="checkbox"/>	<input type="text"/>

**18. How much time do you typically spend drinking the amount you specified for yourself in #17 above?.**

hours      OR      ☐ I don't typically drink at parties and bars

**19. Think back over the past two weeks: On how many days during these past two weeks did you have one or more drinks (that is, beer, wine, liquor, or mixed drink)?.**

days      OR      ☐ I did not drink at all in the last two weeks

**20. As best as you can estimate, what was the total number of drinks you had during those two weeks? (One drink is defined as a beer, a glass of wine, a shot of liquor, or a mixed drink.)**

drinks      OR      ☐ I did not drink at all in the last two weeks

**21. Overall, what percentage of athletes at your school do you think use NO tobacco products at all? Just give your best estimate (from 0 to 100%).**

%

**22. Overall, what percentage of athletes at your school do you think consume NO alcoholic beverages at all? Just give your best**

**estimate (from 0 to 100%).**

%

**23. How often, if ever, have you been drunk during this current academic term? (select one)**

- ☐ a. Not during this term.
- ☐ b. Once this term.
- ☐ c. Two or three times this term or about once per month.
- ☐ d. About once per week.
- ☐ e. More than once per week.

**24. Overall, what percentage of athletes at your school do you think have been drunk on at least once per week during the current term? Again, just give your best estimate (from 0 to 100%).**

%

**25. During this academic term which, if any, of the following has occurred as a consequence of your drinking? (Choose a response for each category a through o.)**

☐ check here if you have not consumed alcohol during this term and scroll down to the next page

	No, not during this academic year	Yes, <u>occurred once</u> due to drinking during this academic year	Yes, <u>occurred more than once</u> due to drinking during this academic year
a. Physical injury to yourself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Physical injury to others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Fighting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Damage to property	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Cutting class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Inefficiency in homework, classroom, or lab work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- |  |                       |                       |                       |
|--|-----------------------|-----------------------|-----------------------|
| <b>g. Late papers, missed exams, failure to study for exams</b>  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>h. Damaged friendships or relationships</b>   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>i. After drinking could not remember events or actions that occurred while drinking</b>                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>j. Impaired driving</b>   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>k. Rode with an impaired driver</b>   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>l. Attempted intimate physical/sexual contact not desired by the other person</b>                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>m. Were sexually active when otherwise might not have chosen to be</b>                                  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>n. Engaged in intercourse unprotected (from pregnancy or disease) when you otherwise might not have</b> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>o. Missed or performed poorly in an athletic event</b>  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

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Click the "Next" button to go to the FINAL page.

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#### ACADEMICS AND CAREER INTERESTS

**26. What is your approximate cumulative grade point average in college based on a 4.0 scale?**

☐ Check here for no grades if this is your first term in college.

A/A+	A-	B+	B	B-	C+	C	C-	D+	D	D-	F
4.0	3.7	3.3	3.0	2.7	2.3	2.0	1.7	1.3	1.0	0.7	0.0
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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**27. Mark the area of your undergraduate major or primary concentration. (select all that apply)**

- ☐ a. Arts and Humanities
  - ☐ b. Business
  - ☐ c. Education
  - ☐ d. Engineering
  - ☐ e. Natural Sciences
  - ☐ f. Social Sciences
  - ☐ g. Allied Health (e.g. nursing, pharmacy, physical therapy)
  - ☐ h. Interdisciplinary
  - ☐ i. Other field
  - ☐ j. Undecided
- 

**28. Do you plan to pursue any of the following graduate or professional degrees after you graduate? (select one)**

- ☐ a. Master's Degree in Arts and Sciences (M.A. or M.S.)
- ☐ b. Master's of Business Administration (M.B.A.)

- ☐ c. Other Professional Master's Degree (M.S.W., M.S.E., M.S.N., M.A.T.)
  - ☐ d. Law Degree (J.D. or L.L.B.)
  - ☐ e. Medical Degree (M.D., D.O., D.D.S., D.V.M.)
  - ☐ f. Ph.D.
  - ☐ g. Other doctoral degree (Ed.D., Sci.D., D.B.A.)
  - ☐ h. Other degree or certificate
  - ☐ i. No, I am not currently planning to pursue graduate education
- 

**29. When thinking about a career, how important to you is each of the following considerations?** *(mark one answer on each line)*

	Not Important	Somewhat Important	Very Important	Essential
a. Intellectual challenge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Work for social change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. High income potential	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Stable, secure future	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Creativity and initiative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Expression of personal values	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Interesting daily work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Leadership Potential	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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### **BACKGROUND INFORMATION**

(This information will help assure that a broad diversity of athletes have participated in the survey.)

### **30. Gender**

- ☐ a. male
  - ☐ b. female
- 

### **31. What is your age?**

- |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|
| less than 21          | 21 - 24               | greater than 24       |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

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**32. What is your class rank?**

- ☐ 1st year    ☐ Sophomore    ☐ Junior    ☐ Senior
- 

**33. In which type of residence do you currently live? (*select one*)**

- ☐ a. Residence hall floor
- ☐ b. College-owned house, Co-op, or college owned apartment
- ☐ c. Fraternity
- ☐ d. Sorority
- ☐ e. Off campus private housing
- 

Click "Finish" to record your answers.

Finish >

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The background of the page features a collage of student athletes in various sports. On the left, a basketball player in a white jersey with the number 17 is shown. In the center, a soccer player in a white jersey with the number 14 is visible. To the right, a football player in a white jersey with the number 8 is depicted. Below these, a group of athletes is shown sitting on the ground, possibly during a team meeting or a break. The entire image is overlaid with a semi-transparent blue and green gradient.

### Survey of Student-Athlete Norms

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**Thank you for taking the survey!**

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Submit Query