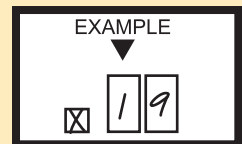


THE VALUES AND BELIEFS OF THE AMERICAN PUBLIC
— A NATIONAL STUDY —

INSTRUCTIONS

Please carefully follow the steps below when completing this survey.

- Use a blue or black ink pen that does not soak through the paper.
- Make solid marks that fit in the response boxes (make no stray marks on the survey).



I. RELIGIOUS BEHAVIORS AND ATTITUDES

1 With what religious family, if any, do you most closely identify? *(Please mark only one box.)*

- Adventist
- African Methodist
- Anabaptist
- Asian Folk Religion
- Assemblies of God
- Baha'i
- Baptist
- Bible Church
- Brethren
- Buddhist
- Catholic/Roman Catholic
- Christian & Missionary Alliance
- Christian Reformed
- Christian Science
- Church of Christ
- Church of God
- Church of the Nazarene
- Congregational
- Disciples of Christ
- Episcopal/Anglican
- Hindu
- Holiness
- Jehovah's Witnesses
- Jewish
- Latter-day Saints
- Lutheran
- Mennonite
- Methodist
- Muslim
- Orthodox (Eastern, Russian, Greek)
- Pentecostal
- Presbyterian
- Quaker/Friends
- Reformed Church of America/Dutch Reformed
- Salvation Army
- Seventh-day Adventist
- Sikh
- Unitarian Universalist
- United Church of Christ
- Non-denominational Christian
- No religion → *Skip to Question 3*
- Other *(please specify)*
- Don't know

2 If possible, please provide the specific name of your denomination. For example, if you are Baptist, are you Southern Baptist Convention, American Baptist Churches in the USA, or some other Baptist denomination?

Name of denomination:

Don't know

3 How religious do you consider yourself to be?

- Not at all religious
- Not too religious
- Somewhat religious
- Very religious
- I don't know

4 How often do you attend religious services at a place of worship?

- Never → *Skip to Question 10*
- Less than once a year
- Once or twice a year
- Several times a year
- Once a month
- 2-3 times a month
- About weekly
- Weekly
- Several times a week

5 What is the full name of your current place of worship? *(Please write your answer in the space below. If you attend more than one place of worship, please refer to the one you attend most often.)*

6 Where is this place of worship located? *(Please write in whatever information you know. If exact address is not known, please give a description of the location, such as the building name or the nearest street or intersection.)*

Street:

City:

State:

ZIP Code:

7 How long have you attended your current place of worship?

- 1 year or less
- 2-4 years
- 5-9 years
- 10-19 years
- 20 or more years

8 During the last year, approximately how much money (if any) did you and other family members in your household contribute to your current place of worship?

- Under \$100
- \$100 - \$499
- \$500 - \$999
- \$1,000 - \$1,999
- \$2,000 - \$2,999
- \$3,000 - \$3,999
- \$4,000 - \$4,999
- \$5,000 - \$5,999
- \$6,000 - \$6,999
- \$7,000 - \$7,999
- \$8,000 - \$8,999
- \$9,000 - \$9,999
- \$10,000 or more

9 On average, how many people attend services at your current place of worship? Just your best estimate will do.

- Less than 100
- 100-299
- 300-799
- 800-999
- 1,000-1,999
- 2,000 or more
- I don't know

10 Outside of attending religious services, about how often do you spend time alone reading the Bible, Koran, Torah, or other sacred book?

- Never
- Less than once a year
- Once or twice a year
- Several times a year
- Once a month
- 2-3 times a month
- About weekly
- Weekly
- Several times a week or more often

11 About how often do you spend time alone praying outside of religious services?

- Never
- Only on certain occasions
- Once a week or less
- A few times a week
- Once a day
- Several times a day

12 How well do the following terms describe your religious identity?

	Very well ▼	Somewhat well ▼	Not very well ▼	Not at all ▼
a. Bible-Believing.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Born-Again	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Charismatic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. New Age.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Evangelical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Fundamentalist.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Mainline Christian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Pentecostal.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Seeker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Spiritual.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Theologically Conservative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Theologically Liberal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Traditional.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13 How often did you participate in the following religious or faith-based activities in the last month?

	Not at all ▼	1-2 times ▼	3-4 times ▼	5 or more times ▼
a. Church social gatherings like fellowships or potlucks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Religious education programs, such as Bible study or Sunday school.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Choir practice or other musical programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Discussion groups about faith in the workplace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Faith-based programs related to starting or running a small business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Witnessing/sharing your faith	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Community prayer group or Bible study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Faith-based programs not affiliated or sponsored by a congregation (e.g., prison ministry, homeless shelter, etc.).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Other kinds of religious or faith-based activities (<i>please specify</i>).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14 How many of your friends:

	All ▼	Most ▼	About half ▼	A few ▼	None ▼
a. Attend your place of worship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Attend a different place of worship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Do not attend religious services.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15 Please indicate your level of agreement with the following statements.

	Strongly agree ▼	Agree ▼	Disagree ▼	Strongly disagree ▼
a. All of the religions in the world are equally true.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. All around the world, no matter what religion they call themselves, people worship the same God.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The earth itself is a living, thinking being.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		Very likely	Somewhat likely	Not at all likely	Do not believe in life after death
		▼	▼	▼	▼
16	How likely is it that life after death is:				
	a. A union with God	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. A reunion with loved ones.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Re-incarnation into another life form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. A life of eternal reward or eternal punishment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17 Which one statement comes closest to your personal beliefs about the Bible? (Please mark only one box.)

The Bible means exactly what it says. It should be taken literally, word-for-word, on all subjects.

The Bible is perfectly true, but it should not be taken literally, word-for-word. We must interpret its meaning.

The Bible contains some human error.

The Bible is an ancient book of history and legends.

I don't know

18 Which one statement comes closest to your personal beliefs about God? (Please mark only one box.)

I have no doubts that God exists

I believe in God, but with some doubts

I sometimes believe in God

I believe in a higher power or cosmic force

I don't know and there is no way to find out

I am an atheist → *Skip to Question 23*

I have no opinion

		Strongly agree	Agree	Disagree	Strongly disagree
		▼	▼	▼	▼
19	Based on your personal understanding, what do you think God is like?				
	a. Concerned with the well-being of the world.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Angered by my sins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Directly involved in world affairs.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Concerned with my personal well-being	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Directly involved in my affairs.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Angered by human sins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		Very well	Somewhat well	Not very well	Not at all
		▼	▼	▼	▼
20	How well do you feel that each of the following words describe God in your opinion?				
	a. Absolute	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Critical.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Fatherly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Punishing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Just.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Wrathful.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	g. Forgiving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	h. Severe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21 Please indicate your level of agreement with the following statements.

Strongly agree Agree Disagree Strongly disagree

- a. I have a warm relationship with God
- b. God knows when I need support.....
- c. I feel that God is generally responsive to me
- d. God seems impersonal to me
- e. God seems to have little or no interest in my personal problems
- f. God seems to have little or no interest in my personal affairs.....
- g. God sometimes seems responsive to my needs, but sometimes not.....
- h. God's reactions to me seem to be inconsistent
- i. I feel loved by God
- j. God loves all living beings.....
- k. God's love is eternal.....
- l. God's love never fails.....
- m. God sometimes seems very warm and other times very cold to me

22 How much would you consider each of the following as a service to God?

Very much Somewhat A little bit Not at all

- a. Volunteering at your place of worship
- b. Spending time with family
- c. Giving money to your place of worship.....
- d. Doing your job
- e. Personal devotional activities (Bible study, prayer, etc.)
- f. Enjoying leisure time or entertainment

23 In your opinion, does each of the following exist?

Absolutely Probably Probably not Absolutely not

- a. The Devil/Satan.....
- b. Heaven
- c. Hell
- d. Purgatory.....
- e. Armageddon.....
- f. Angels.....
- g. Demons.....

24 Have you ever been protected from harm by a guardian angel?

- Yes
- No → *Skip to Question 26*

25 If yes, would you please briefly describe your experience?

26 Do you practice meditation?

- Yes
- No → *Skip to Question 28*

27 Do you currently practice:

	Yes ▼	No ▼
a. Mindfulness meditation	<input type="checkbox"/>	<input type="checkbox"/>
b. TM (transcendental meditation)	<input type="checkbox"/>	<input type="checkbox"/>
c. Tibetan Buddhist meditation	<input type="checkbox"/>	<input type="checkbox"/>
d. Zen Buddhist meditation	<input type="checkbox"/>	<input type="checkbox"/>
e. Meditation as a part of practicing yoga	<input type="checkbox"/>	<input type="checkbox"/>
f. Jewish meditation	<input type="checkbox"/>	<input type="checkbox"/>
g. Christian meditation	<input type="checkbox"/>	<input type="checkbox"/>
h. Other (<i>please specify</i>)	<input type="checkbox"/>	<input type="checkbox"/>

II. HEALTH AND SPIRITUALITY

28 Overall Health

	None ▼	1-10 days ▼	11-20 days ▼	21-29 days ▼	All 30 days ▼
a. Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. During the past 30 days, for about how many days did pain make it hard for you to do your usual activities, such as self-care, work, or recreation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. During the past 30 days, for about how many days have you felt sad, blue, or depressed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. During the past 30 days, for about how many days have you felt worried, tense, or anxious?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. During the past 30 days, for about how many days have you felt very healthy and full of energy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29 Please indicate how often you have done each of the following.

	Never ▼	Once ▼	Occasionally ▼	Often ▼
a. Prayed to God to receive healing for an illness or injury	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Prayed to God for another person's healing from an illness or injury	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Asked others to pray to God for your healing from an illness or injury	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Given a laying-on-of-hands for an illness or injury	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Participated in a prayer group, prayer chain, or prayer circle that prayed for other people's healing from illness or injury	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

30 Have you ever sought the help of someone, other than a physician/nurse, who calls themselves a "healer"?

- Yes
- No → *Skip to Question 32*

31 If yes, what type of healer was this person?

32 Please indicate your level of agreement with each of the following statements if you were to suffer a serious illness or injury that required care – would you:

	Strongly agree ▼	Agree ▼	Disagree ▼	Strongly disagree ▼
a. Only seek medical care and not prayer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Only seek prayer as a last resort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Only seek medical care as a last resort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Seek both medical care and prayer at the onset	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

33 Over the past month, how often have you:

	Never ▼	Rarely ▼	Sometimes ▼	Often ▼	Very often ▼
a. Felt nervous, anxious, or on edge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Thought too much about pointless matters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Been afraid something terrible would happen if you did not perform certain rituals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Felt that it is not safe to trust anyone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Not been able to stop or control worrying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Felt compelled to perform certain actions, for no justifiable reason	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Became anxious doing things because people were watching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Been plagued by thoughts or images that you cannot get out of your mind ..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Repeated simple actions that realistically did not need to be repeated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Thought too much about things that would not bother other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Feared that you might do something to embarrass yourself in a social situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Endured intense anxiety in social or performance situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Felt that people were taking advantage of you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Worried too much about different things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Felt like you were being watched or talked about by others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

34 Please indicate how strongly you agree or disagree with the following statements.

	Strongly agree ▼	Agree ▼	Disagree ▼	Strongly disagree ▼
a. I desire to discover who I really am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I seldom think about the meaning of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. There is more to life than physical well-being	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. It is useless to try to discover the purpose of my life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I believe in ultimate truth in life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. It is important to have a significant philosophy of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. I do not believe there is any ultimate meaning in life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. I seek out opportunities to attain eternal wisdom for life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Material well-being is essential to find fulfillment in life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Finding answers to the mysteries of life is not relevant to my life's goal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III. WORK

35 Are you currently employed full-time, part-time, or do any work as a volunteer?

- Yes → *Continue with Question 36*
- No → *Skip to Question 39*

36 Please indicate how often the following statements apply to you.

	Never ▼	Seldom ▼	Sometimes ▼	Often ▼	Always ▼
a. I view my work as a partnership with God.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I see connections between my worship and my work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I view my work as a mission from God	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I pursue excellence in my work because of my faith	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I view my work as part of God's plan to care for the needs of people.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

37 To what extent do you agree with the following statements about your work?

	Strongly agree ▼	Agree ▼	Disagree ▼	Strongly disagree ▼
a. I often approach my tasks in unique ways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. In general, I do not like my job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I rarely question the value of established procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I rarely put myself in positions in which I might lose something important to me.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I don't mind taking chances with things that are important to me.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. All in all, I am satisfied with my job.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. I am proud of the work I do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

38 The following are statements an individual may have about the organization for which they work. Regarding your current employer:

	Strongly agree ▼	Agree ▼	Disagree ▼	Strongly disagree ▼
a. I really feel as if this organization's problems are my own.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I do not feel a strong sense of "belonging" to my organization.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I do not feel "emotionally attached" to my organization.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. This organization has a great deal of personal meaning to me.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

39 Have you ever started a new business?

Yes

No

40 Are you currently trying to start a new business?

Yes

No

IF YOU HAVE STARTED A NEW BUSINESS (YES IN Q. 39) OR IF YOU ARE CURRENTLY TRYING TO START A NEW BUSINESS (YES IN Q. 40), PLEASE ANSWER QUESTION 41. OTHERWISE, SKIP TO QUESTION 42.

41 Which one of the following best describes your primary reason for starting or trying to start a new business?

Take advantage of a business opportunity

No better choices for work

Respond to a social need

Work for yourself

Other (*please specify*)

42 By your best guess, to what extent does your place of worship encourage its participants to do the following?

	Strongly discourages ▼	Discourages ▼	Encourages ▼	Strongly encourages ▼	Is not concerned ▼	Does not apply ▼
a. Start a business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Make a profit in business.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IV. MORALITY AND POLITICS

43 If you were unsure of what was right or wrong in a particular situation, how would you decide what to do?

Would you: *(Please mark only one box.)*

- Do what would make you feel happy
- Do what would help you to get ahead
- Follow the advice of an authority, such as a parent, relative, or person you respect
- Do what you think God or scripture tells you is right

44 How do you feel about the morality of the following?

	Always wrong ▼	Almost always wrong ▼	Only wrong sometimes ▼	Not wrong at all ▼
a. Abortion, if the pregnancy is the result of rape	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Sexual relations between two adults of the same sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Government bailout of major banks and corporations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Divorce, if children are present.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Adoption of children by homosexual couples	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Embryonic stem cell research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. War	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

45 For whom did you vote in the 2008 presidential election?

- John McCain
- Barack Obama
- Someone else
- Did not vote

46 How would you describe yourself politically?

- Extremely conservative
- Conservative
- Leaning conservative
- Moderate
- Leaning liberal
- Liberal
- Extremely liberal

47 Do you think of yourself as Republican, Democrat, or Independent?

- Strong Republican
- Moderate Republican
- Leaning Republican
- Independent
- Leaning Democrat
- Moderate Democrat
- Strong Democrat

48 How much would you say that you trust the following people or groups?

	A lot ▼	Some ▼	Only a little ▼	Not at all ▼
a. People in general	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your neighbors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your coworkers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Strangers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. People who do not believe in God.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

49 Some people think that the government in Washington is trying to do too many things that should be left to individuals and private businesses. Others disagree and think that the government should do even more to solve our country's problems. Still, others have opinions somewhere in between. Which one of the following statements best applies to you?

- Government should do more
- Government does too much
- Agree with both

50 Please describe how you feel about homosexuality for the following statements.

	Strongly agree ▼	Agree ▼	Disagree ▼	Strongly disagree ▼
a. Homosexuals should have equal employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Homosexuals should be allowed to legally marry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. People choose to be homosexuals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Homosexuals should be allowed civil unions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. People are born either as homosexual or heterosexual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I personally know someone who is homosexual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. This country needs a law banning gay marriage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

V. MEDIA

51 On an average day, about how many hours per day do you:

	Less than 1 hour per day ▼	1-3 hours per day ▼	4-7 hours per day ▼	8-10 hours per day ▼	More than 10 hours per day ▼
a. Watch television	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Surf the Internet (not including e-mail)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Listen to talk radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Read newspapers/magazines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Listen to music on the radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

52 When watching television, have your religious beliefs ever been offended by negative comments made on:

	Yes ▼	No ▼
a. Crime dramas (e.g., <i>CSI</i>)	<input type="checkbox"/>	<input type="checkbox"/>
b. Medical dramas (e.g., <i>House</i> , <i>Grey's Anatomy</i>)	<input type="checkbox"/>	<input type="checkbox"/>
c. Reality TV shows (e.g., <i>American Idol</i> , <i>The Bachelor</i> , or <i>The Biggest Loser</i>)	<input type="checkbox"/>	<input type="checkbox"/>
d. Comedic "news" shows (e.g., <i>The Daily Show</i> or <i>The Colbert Report</i>)	<input type="checkbox"/>	<input type="checkbox"/>
e. Comedic sitcoms (e.g., <i>The Office</i>)	<input type="checkbox"/>	<input type="checkbox"/>
f. Cable news shows (e.g., Bill O'Reilly, Keith Olbermann)	<input type="checkbox"/>	<input type="checkbox"/>
g. Religious programming (e.g., the <i>700 Club</i>)	<input type="checkbox"/>	<input type="checkbox"/>
h. Evening news programs (e.g., CBS Evening News)	<input type="checkbox"/>	<input type="checkbox"/>

53 Media portrayals of religious traditions and beliefs have made you:

	Yes ▼	No ▼
a. Believe more in evolution than creationism	<input type="checkbox"/>	<input type="checkbox"/>
b. Believe in medical miracles that cannot be explained by science	<input type="checkbox"/>	<input type="checkbox"/>
c. Believe that Muslims are more likely to be terrorists	<input type="checkbox"/>	<input type="checkbox"/>
d. Vote in an election	<input type="checkbox"/>	<input type="checkbox"/>
e. Believe that Evangelical Christians are intolerant of others	<input type="checkbox"/>	<input type="checkbox"/>
f. A supporter of gay marriage	<input type="checkbox"/>	<input type="checkbox"/>

VI. DEMOGRAPHICS

54 What is your gender?

- Male
 Female

55 What is your date of birth?

/ /
M M D D Y Y Y Y

56 Are you a citizen of the United States of America?

- Yes
 No

57 Which of the following **BEST** describes the place where you now live?

- A large city
 A suburb near a large city
 A small city or town
 A rural area
 Don't know

58 If you are employed, which of the following best describes your place of employment?

- A for-profit private company, business, or individual
 A non-profit, tax-exempt, or charitable organization
 Local, state, or federal government
 Self-employed
 Working without pay in a family business or farm
 Not currently employed → *Skip to Question 63*

59 What is your job title?

60 How many hours did you work last week?

- If none, mark here
 (*Write in a number*)

61 About how many people work for your employer (including part-time and full-time employees at all locations)?

- 1-49
 50-499
 500-1,999
 2,000 or more

62 Is your current employer a locally-owned business?

- Yes
 No
 I'm not sure

63 What is your race? <i>(You can mark "yes" to more than one.)</i>	Yes ▼	No ▼
a. White	<input type="checkbox"/>	<input type="checkbox"/>
b. Black or African-American	<input type="checkbox"/>	<input type="checkbox"/>
c. American Indian or Alaska Native	<input type="checkbox"/>	<input type="checkbox"/>
d. Asian	<input type="checkbox"/>	<input type="checkbox"/>
e. Native Hawaiian or other Pacific Islander	<input type="checkbox"/>	<input type="checkbox"/>
f. Some other race <i>(please specify)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<input style="width: 300px; height: 20px;" type="text"/>		

64 If you are Hispanic or Latino, which of the following are you?

- I am not Hispanic or Latino
- Mexican, Mexican-American, Chicano
- Puerto Rican
- Cuban
- Other Hispanic, Latino, or Spanish origin group
- I don't know

65 What is the highest level of education you have completed? *(Please mark only one box.)*

- 8th grade or less
- 9th-12th grade (no high school diploma)
- High school graduate
- Some college
- Trade/Technical/Vocational training
- College graduate
- Postgraduate work/Degree

66 If you did not do any work last week for pay or profit, what is the reason?

- I am a homemaker
- I am a student
- I am retired
- I have a disability or injury
- I am looking for work
- I was on vacation or leave
- Other

67 How many children do you have?

- If none, mark here
- (Write in a number)*

68 How many children under the age of 18 currently live in your household?

- If none, mark here
- (Write in a number)*

69 What is your current marital status?

- Married
- Living as married
- Separated
- Divorced
- Widowed
- Never married

70 By your best estimate, what was your total household income last year, before taxes?

- \$10,000 or less
- \$10,001 - \$20,000
- \$20,001 - \$35,000
- \$35,001 - \$50,000
- \$50,001 - \$100,000
- \$100,001 - \$150,000
- \$150,001 or more

VII. DESTINY

71 Would your friends and family most likely describe you as:

	Very much so ▼	A little bit ▼	No so much ▼	Not at all ▼
a. Creative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Outgoing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Shy.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Humble	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Giving.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Upbeat.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Curious.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

72 In general, how happy are you with your life as a whole these days?

- Very happy
- Somewhat happy
- Somewhat unhappy
- Very unhappy

73 Please describe your feelings for each of the following statements about people's life chances in general.

	Strongly agree ▼	Agree ▼	Disagree ▼	Strongly disagree ▼
a. Some people are meant to be rich, and some people are meant to be poor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Anything is possible for those who work hard.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Some people are born lucky.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Everyone starts out with the same chances in life.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. God has a plan for all of us.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The world is controlled by a few powerful people.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. It makes no difference which political party is in power.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Success is achieved by ability rather than luck.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

74 The following questions are about how much control you have over your life.

	Strongly agree ▼	Agree ▼	Disagree ▼	Strongly disagree ▼
a. Usually, I know how to get around the rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. My failures are usually due to a lack of effort on my part	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. My choices in life are very limited right now.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I know God has a plan for me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. My future is in my hands.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I am searching for my purpose in life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Most days, I awaken with a sense of excitement about the day's possibilities.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. I am in control of my own fate and fortune.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

75 Please answer the following.

	Strongly agree ▼	Agree ▼	Disagree ▼	Strongly disagree ▼
a. Most of the people I know have jobs that make a real contribution to society	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. People who go into careers like nursing, teaching, or ministry should be admired for that career choice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Able-bodied people who are out of work shouldn't receive unemployment checks if they are passing up jobs they can do.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Finance (banking, investment, etc.) is a field where people get rich without making a real contribution to society.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This completes the survey. Please make sure you have answered all of the questions relevant to you and then send the survey back in the envelope provided. Thank you for your participation!