



ACTIVITY Student Survey

Student Survey Template

1. The last time you threw something away did you think about what bin to put it in?	Yes	No		
2. Did you think about where that item might go after you threw it away or who/what it might affect?	Yes	No		
3. Did you know that your school is a Zero Waste School?	Yes	No		
4. Do you view recycling/waste reduction as important?	<i>Very Important</i>	<i>Important</i>	<i>No opinion</i>	<i>Not important</i>
5. Why?	<i>Explain:</i>			
6. How often do you recycle?	<i>Always</i>	<i>Sometimes</i>	<i>Rarely</i>	<i>Never</i>
7. What's the reason you don't recycle "always"?	<i>Explain:</i>			
8.				
9.				
10.				