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Demographics

Please fill in the information below with as much detail as possible.

1. Participant informat	ion:
First Name:	
Last Name:	
Student Number:	
Date of Birth	
(DD/MM/YYYY):	
Preferred email Address:	
Telephone Number:	
Male/Female:	
Age:	
Main Sport:	
Current competitive level	
(e.g., university, county, national, international):	
Highest achieved	
competitive level (e.g., university, county, national,	
international):	
Currently, how many	
hours do you train and/or	
compete per week?	
Have you completed any training session <i>today</i>	
(Yes/No)?	
Have you completed any	
training session within the	
last 24 hours (Yes/No)? If so give details on duration	
and intensity.	
Do you regularly (e.g.	
once per week) perform	
balance exercises in your usual training routine	
(Yes/No)?	

Have you consumed any	
alcohol within the <i>last 24</i>	
hours (Yes/No)? If so how_	
much (approximately).	
much (approximately).	
Are you currently taking	
any medication (Yes/No)?	
If yes, please list.	
ii yes, piease iist.	
Have you ingested any	
caffeine within the <i>last 2</i>	
hours? Yes/No?	
Have you sustained any	
injury in the <i>last 12</i>	
months that caused you	
to modify or stop your	
<i>regular</i> training routine	
(Yes/No)?	
If yes, give details on side	
(left/right), location and	
severity (how many	
days/weeks/months	
before returning to regular	
training).	
Include all injuries.	
L	
Are you <i>currently</i> injured	
(currently missing or	
modyfing your usual	
training routine) Yes/No?	
,	
If yes, give details on side	
(left/right), location and	
severity (how many	
days/weeks/months	
before expecting to return	
to regular training).	
_	

Life Event Survey

Instructions: Listed below are 69 events that sometimes occur in the lives of college athletes. These events often produce change within an individual's life that require some adjustment by the individual. For each event that you have experienced within the last year (12 months), indicate what kind of effect it had on your life when the event occurred.

A rating of -4 would indicate that the event had an extremely negative effect on you.

A rating of +4 would indicate that the event had an extremely positive effect on you.

For those events that have happened more than once, indicate the average effect across all occurrences. If you have not experienced an event within the last year, leave that item blank. The events are listed in no particular order, and there are no right or wrong answers. Please respond to each event honestly as applies to you.

If you have NOT experienced an event listed below (e.g., Marriage) in the past 12 months, leave that item blank.

ONLY respond to items you have experienced.

2. P1	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
Marriage								
Death of mate (boyfriend, girlfriend, spouse, significant other)								
Major change in sleeping habits (increase or decrease in amount of sleep)						\circ		
Death of a close family member(s) - Specify below:								
Father								
Mother								
Brother								
Sister								
Grandfather								
Grandmother								
Other								
Death of close friend(s)								
Outstanding personal achievement								
Male: mate pregnant								
Female: becoming pregnant								

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Life Event Survey

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
Sexual difficulties								
Being fired from job								
Being apart from mate (boy/girlfriend, spouse, etc) due to sport								
Serious injury or illness to close family member(s) - Specify below:								
Father								
Mother								
Brother								
Sister								
Grandfather								
Grandmother								
Other								
Major change in the number (more/less) of arguments with mate								
Major personal injury or illness								
Major change in the frequency (increased or decreased) of social activities due to participation in sport								
Serious injury or illness to close friend								

Data collection 1
Life Event Survey

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
Breaking up with mate (boy/girlfriend, etc)			\bigcirc			\bigcirc		
Beginning a new school experience (beginning university, transferring university etc)	\bigcirc				\circ			
Engagement								
Academic probation/ineligibility								
Being dismissed from halls or other residence								
Failing an important exam								
Major change in relationship with coach (better or worse)								
Failing a course								
Major change in the length and/or conditions of practice/training (better or worse)								
Financial problems concerning school								
Major change in relationship with family member(s) (better or worse)								
Conflict with roommate								
Male: mate having an abortion								
Female: having an abortion								
Major change in the amount (more or less) of academic activity (home work, class time, etc)					0			0

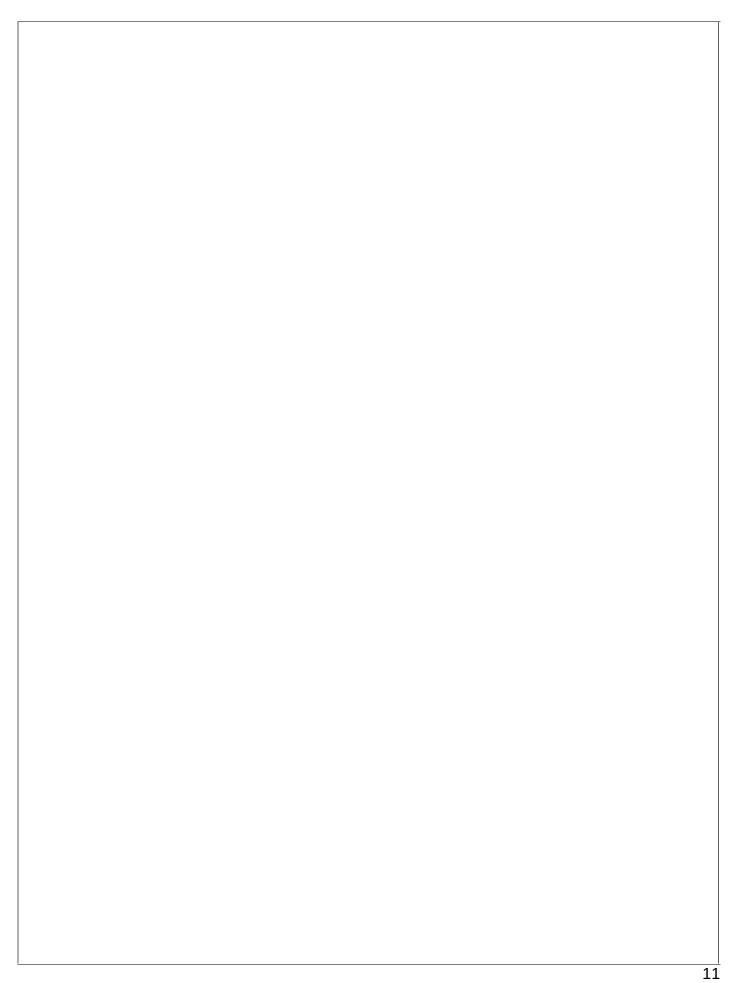
Life Event Survey

5. P4								
	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
Pressure to gain/lose weight-due to participation in sport								
Discrimination from teammates/coaches								
Major change in relationship(s) with team-mate(s) (better/worse)								
Suspended from team for non-academic reasons								
Trouble with academic counsellor								
Major change in use of alcohol/drugs (increased or decreased)								
Beginning sexual activity								
Major change in relationship(s) with friend(s) (better or worse)								
Recovery from illness/injury/operation								
Major change in level of athletic performance in actual competition (better or worse)								
Divorce or separation of your parents								
Major change in level of responsibility on team (increased/decreased)						\bigcirc		
Receiving an athletic scholarship								

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
Not attaining personal goals in sport								
Major change in playing status on team								

Life Event Survey

6. P5								
	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
Injury to team-mates								
Being absent from university (classes) because of participation in sport								
Troubles with athletic association and/or athletic director								
Difficulties with trainer/physician								
Major change in playing time (playing more or less) – due to injury								
Major errors/mistakes in actual competition								
Losing your athletic scholarship								
No recognition/praise of accomplishments from coaching staff								
Pressure from family to perform well								
Loss of confidence due to injury								
Unable to find a job								
Change in coaching staff								
Female: menstrual period/PMS								
Major change in level of academic performance (doing better or worse)								
Making career decisions (applying for Masters degree, interviewing for jobs, etc)								



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Life Event Survey

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
Being cut/dropped from the team								
Continual poor performance of team								
Change in graduation schedule								
Major change in family finances (increased or decreased)								
Major change in attitude toward sport (like/enjoy more or less)								
Victim of harassment/abuse (sexual, emotional, physical)								
Victim of personal attack (rape, robbery, assault, etc)								

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extrem Positi +4
Other A								
Other (ple	ease specify)							
Other B			\bigcirc	\circ	0			
Other (ple	ease specify)							
Other C								
Other (ple	ease specify)							
Other D			\circ		\circ			
Other (ple	ease specify)							
Other E			0	0	0			
Other (ple	ease specify)							

Personality Questionnaire	9								
Below are a list of statements about everyday feelings and behaviours. Please rate how accurately each statement describes you in general.									
	Select only one response per question.								
Do not spend too much time thinking about the questions and please answer honestly. Your answers will remain confidential.									
Make sure to answer all of	Make sure to answer all of the questions.								
* 9. P1	Not at all	Slightly	Moderately	Highly					
I feel sad when I suffer even minor setbacks.	\circ	\circ	\circ	\bigcirc					
I am often preoccupied with unpleasant thoughts.									
Sometimes even little things in life can give me great pleasure.									
I am especially sensitive to reward.									
I put in a big effort to accomplish important goals in my life.			0						
I sometimes feel 'blue' for no good reason.									
When feeling 'down', I tend to stay away from people.									
I often experience a surge of pleasure running through my body.									
I would be frozen to the spot by the sight of a snake or spider.									

	Not at all	Slightly	Moderately	Highly
I have often spent a lot of time on my own to "get away from it all".	\bigcirc	\bigcirc		\bigcirc
I am a very active person.				
I'm motivated to be successful in my personal life.				
I am always 'on the go'.				
I regularly try new activities just to see if I enjoy them.		\bigcirc		
get carried away by new projects.				
Good news makes me feel over-joyed.				
The thought of mistakes in my work worries me.				
When nervous, I sometimes find my thoughts are interrupted.				
would run quickly if fire Alarms in a shopping nall started ringing.				
often overcome hurdles a achieve my ambitions.				

Da	ta collection 1				
Pe	rsonality Questionnaire	е			
*	10. P2		Q!; . I. i.		
	I often feel depressed.	Not at all	Slightly	Moderately	Highly
	I think I should 'stop and think' more instead of jumping into things too quickly.	0			0
	I often feel that I am on an emotional 'high'.				
	I love winning competitions.				
	I get a special thrill when I am praised for something I've done well.				
	I take a great deal of interest in hobbies.				
	I sometimes cannot stop myself talking when I know I should keep my mouth closed.	0			
	I often do risky things without thinking of the consequences.				
	My mind is sometimes dominated by thoughts of the bad things I've done.				
	I get very excited when I get what I want.				
	I feel driven to succeed in my chosen career.				
	I'm always finding new and interesting things to do.	\bigcirc			
	I'm always weighing-up the risk of bad things happening in my life.	\circ	0		

	Not at all	Slightly	Moderately	Highly
People are often telling me not to worry.				
I am very open to new experiences in life.				
I always celebrate when I accomplish something important.				\bigcirc
I find myself reacting strongly to pleasurable things in life.				
I find myself doing things on the spur of the moment.				
I would instantly freeze if I opened the door to find a stranger in the house.				
I'm always buying things on impulse.				
I am very persistent in achieving my goals.	\circ	\bigcirc		
When trying to make a decision, I find myself constantly chewing it over.				
I often worry about letting down other people.				
I would go on a holiday at the last minute.				
I would run fast if I knew someone was following me late at night.				
I would leave the park if I saw a group of dogs running around barking at people.				
I worry a lot.				
I would freeze if I was on a turbulent aircraft.				

Da	ta collection 1				
Pe	rsonality Questionnair	e			
*	11. P3				
		Not at all	Slightly	Moderately	Highly
	My behavior is easily interrupted.				
	It's difficult to get some things out of my mind.	\bigcirc			
	I think the best nights out are unplanned.				
	There are some things that I simply cannot go near.				
	If I see something I want, I act straight away.		\bigcirc		
	I think it is necessary to make plans in order to get what you want in life.				
	When nervous, I find it hard to say the right words.				
	I find myself thinking about the same thing over and over again.				
	I often wake up with many thoughts running through my mind.				
	I would not hold a snake or spider.				\bigcirc
	Looking down from a great height makes me freeze.				
	I often find myself 'going into my shell'.				
	My mind is dominated by recurring thoughts.		\circ	\circ	
	I am the sort of person who easily freezes-up when scared.	\bigcirc			
	I take a long time to				

	Not at all	Slightly	Moderately	Highly
I often find myself lost for words.				
I will actively put plans in place to accomplish goals in my life.	0	0		0