

SOCIAL MEDIA ASSESSMENT FORM

Name _____

Age _____

Date _____

Please check which social media sites/methods you use and which ones you use most frequently:

	USE	MOST FREQUENTLY
Facebook	_____	_____
Twitter	_____	_____
Instagram	_____	_____
Snapchat	_____	_____
Tumblr	_____	_____
Email	_____	_____
Texting	_____	_____
Other: _____	_____	_____

What times of the day or night, if ever, do you turn off access to social media sites?

What do you like the most about social media sites?

What, if anything, do you not like about social media sites? _____

Are you satisfied with the amount of time you spend on social media sites? Yes _____ No _____

Or, would you like to spend more time? Yes _____ No _____

Or, would you like to spend less time? Yes _____ No _____

If you are a gamer, what games do you play online? _____

About how many hours daily? <1 _____ 1-3 _____ 4-6 _____ 7 or more _____