



PRE/POST Evaluation
Rosenberg's Self-Esteem Scale

SCHOOL _____ PRE / POST

Date of Birth _____ DATE _____ MALE / FEMALE

PLEASE ANSWER THE FOLLOWING QUESTIONS BY CIRCLING THE ANSWER THAT BEST FITS HOW YOU FEEL ABOUT YOURSELF.
(There are no wrong answers!)

Strongly Agree













Agree





Disagree

























Strongly Disagree



Mark 3, 2, 1, 0 except where an asterisk in the question box
Where there is an asterisk reverse the scale

<p>Most of the time I am happy with myself</p>				
<p>* Sometimes I think I'm no good at all</p>				
<p>I feel I have a number of good qualities</p>				

I am able to do things as well as most other people				
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* I feel I don't have much to be proud of				
* I feel useless at times				
I feel I'm as good as anybody else				
* I wish I could like myself more				
* Basically I think I'm a failure				
I feel pretty good about myself				

Thank you

TOTAL _____ (To be completed by supervisor)

Note items with * are reversed scored

H – 25 – 30

A – 15 – 24

L – 0 - 14