

Students' Life Satisfaction Scale (SLSS)

Student: _____ Date: _____
 Teacher: _____

Instructions: We would like to know what thoughts about life you've had *during the past several weeks*. Think about how you spend each day and night, and then think about how your life has been during most of this time. Here are some questions that ask you to indicate your satisfaction with life. In answering each statement, circle a number from **1** to **6**, where **1** indicates you **strongly disagree** with the statement and **6** indicates you **strongly agree** with the statement.

	Strongly disagree	Disagree	Slightly disagree	Slightly agree	Agree	Strongly agree
1. My life is going well.	1	2	3	4	5	6
2. My life is just right.	1	2	3	4	5	6
3. I would like to change many things in my life.	1	2	3	4	5	6
4. I wish I had a different kind of life.	1	2	3	4	5	6
5. I have a good life.	1	2	3	4	5	6
6. I have what I want in life.	1	2	3	4	5	6
7. My life is better than most kids'.	1	2	3	4	5	6

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