Appendix No: 1

**RELIGIOUS AND SPIRITUAL PRACTICE INVENTORY**

1. How strong your attachment to the religious belief system is?
   (a) strongly    (b) moderately    (c) weak

2. How frequently do you attend organized services of Church, Mosque and Temple?
   (a) everyday    (b) at least one week    (c) at least one month    (d) several times in a year    (e) rarely    (f) never

3. How is the strength of your religious belief system when compared to others?
   (a) strongly    (b) about same    (c) weak

4. Do you believe in religious practices such as prayer, fasting, pilgrimage etc?
   (a) yes    (b) no

5. Do you practice meditation?
   (a) daily    (b) once in a week    (c) at least one in a month    (d) rarely    (e) never

6. Do you have faith in visiting holy shrines?
   (a) yes    (b) no

7. Do religion and spirituality actually relate to well-being?
   (a) yes    (b) no
Appendix No: 2

Satisfaction with Life Scale

Below are five statements with which you may agree or disagree. Using the 1-7 scale below, indicate your agreement with each item by placing the appropriate number on the line preceding that item. Please be open and honest in your response. The 7-point scale is as follows:

- 7 - Strongly agree
- 6 - Agree
- 5 - Slightly agree
- 4 - Neither agree nor disagree
- 3 - Slightly disagree
- 2 - Disagree
- 1 - Strongly disagree

___ In most ways my life is close to my ideal.
___ The conditions of my life are excellent.
___ I am satisfied with my life.
___ So far I have gotten the important things I want in life.
___ If I could live my life over, I would change almost nothing.

- 31 - 35 Extremely satisfied
- 26 - 30 Satisfied
- 21 - 25 Slightly satisfied
- 20 Neutral
- 15 – 19 Slightly dissatisfied
- 10 – 14 Dissatisfied
- 5 – 9 Extremely dissatisfied
PERSONAL DATA SHEET

Name:........................................................................................................

Age:................

Sex:................

Religion:................

Name of the institution:...........................................................................

Date:......................