



The ACT Project
Demographics Form
University of Washington
July 22, 2004

SUBJECT ACT No.: 4 5 6 7 8 9

CHARSUB Char ID: 10 11 12

DATE_MO

DATE_DAY, Date: 13 14 / 15 16 / 17 18

DATE_YR

SSN SS#: 19 20 21 / 22 23 / 24 25 26 27

1. Name: _____ ******DO NO KP 'SSN' OR**
2. Address: _____ **'BIRTHDATE'; LEAVE COLUMNS**

_____ **19-33 BLANKS**
3. Date of birth: **28 29 / 30 31 / 32 33**
B_MONTH / B_DAY / B_YEAR



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SUBJECT ACT No.: 4 5 6 7 8 9
CHARSUB Char ID: 10 11 12
 DATE_MO
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CODER: CODE FROM THIS COLUMN AND FROM TABLES

Education

4a. Please circle the highest grade or year of regular school that **you** have completed. (Circle only one).

Elementary	0	1	2	3	4	5	6	7	8
High School	9	10	11	12					
Technical School									
Or College	13	14	15	16					
Master	17	18							
Doctorate	19	20	21						

← CODE FROM TABLES

34 35 DEMO4A

4b. What is the highest degree **you** have earned?

None	0
GED	1
High School Diploma	2
Bachelor's	3
Master's	4
Doctorate	5
Other (Specify): _____	6

36 DEMO4B

5. **Gender** (circle one):

Male	1
Female	2

← CODE FROM TABLES

37 DEMO5

Ethnic Heritage:

6. Of the following selections which ones do you consider to be your racial group?

White, not of Hispanic origin.....	1
Black not of Hispanic origin.....	2
Asian or Pacific Islander.....	3
American Indian or Alaskan native.....	4
Hispanic.....	5
Other (please specify).....	6

DEMO6

Ethnic Heritage:

6a. Are you Hispanic or Latino? 1=Yes 0=No 9=Unknown **86 DEMO6A**

Racial Heritage (circle all that apply):

6b. Of the following selections which ones do you consider to be your racial group?

	YES	NO	
White.....	1	0	87 DEMO6B1
Black/African American.....	1	0	88 DEMO6B2
Asian.....	1	0	89 DEMO6B3
American Indian/Alaskan native.....	1	0	90 DEMO6B4
Native Hawaiian or Pacific Islander.....	1	0	91 DEMO6B5
Unknown or Unreported.....	1	0	92 DEMO6B6

6c. Are you from more than one race? 1=Yes 0=No 9=Unknown **93 DEMO6C**

7. Name of primary doctor (last name, first initial):

8. _____ Q. 7-8 removed 10/21/2015

9. Clinic: _____ Q. 10 removed 10/21/2015

OFFICE USE
<u>39 40</u>
(CODE CLINIC)

DEMO8

9. **Marital Status (circle one):**

Never married.....	1
Living as married.....	2
Married (not separated).....	3
Separated.....	4
Widowed.....	5
Widowed and remarried.....	6
Divorced.....	7
Divorced and remarried.....	8
Other (specify): _____	9

← CODE FROM TABLES

41 DEMO9

10. If you have been married and are currently widowed, divorced, or separated, in what year did this occur?..... 42 43 44 45
DEMO10
11. Do you live alone or with other people?

Live with spouse only.....	1
Live with spouse and other relatives.....	2
Live with other relatives or friends.....	3
Live with other unrelated individuals (e.g. paid help)....	4
Live in nursing home.....	5
Live alone.....	6

46 DEMO11

12. How many people live in your household?..... 47 48 **DEMO12**

Q. 13-16 removed 10/21/2015

Childhood History

13. How many other children lived in the same house with you when you were less than 6 years old?..... 49 50 **DEMO13**
14. Including yourself, how many people lived in your house when you were less than 6 years old?..... 51 52 **DEMO14**
15. How many bedrooms were in this house?..... 53 54 **DEMO15**
16. During most of your growing up years, did you live on a farm, in a rural area, small town or large city? (circle the number next to the appropriate answer)

On a farm with animals (cattle, horses, pigs, etc.).....	1
In a rural area (for example, and orchard or berry farm or non-farm).....	2
In a small town or suburb (less than 10,000 people).....	3
In a large city.....	4

55 DEMO16

Q. 17-19 removed 10/21/2015

17. On a scale from 1 to 10, can you rate your family's financial situation when you were less than 15 years old, with 1 being no financial difficulty and 10 being extremely difficult? (Circle the number next to the appropriate answer).

1	2	3	4	5	6	7	8	9	10
No Financial Difficulty					Extreme Financial Difficulty				

56 57 **DEMO17**

18a. When you were a child, how many of your basic needs: (a) food, (b) housing, (c) clothing, (d) medical care were met?

All.....	1
Three.....	2
Two or less.....	3

58 **DEMO18A**

18b. Could your family afford small luxuries?

No.....	0
Yes.....	1

59 **DEMO18B**

19. When you were a child, did either of your parents smoke?

Neither.....	1
Father.....	2
Mother.....	3
Both.....	4

60 **DEMO19**

Q. 20b. removed 10/21/2015

Q. 22b-c. removed 10/21/2015

Occupation

20a. Do you currently do work for pay?

No.....	0
Yes.....	1

61 DEMO20A

20b. If YES, about how many hours per week?..... *62 63 DEMO20B*

21. Have you ever worked for pay?

No.....	0
Yes.....	1

64 DEMO21

22a. Do you consider yourself retired?

No.....	0
(If NO, skip to question 23a)	
Yes.....	1

65 DEMO22A

22b. If so, at what age did you retire?..... *66 67 DEMO22B*

22c. What was the main reason for retirement?

Voluntary.....	1
Employer regulation.....	2
Ill health.....	3
Other (specify): _____	4

68 DEMO22C

Q. 23b-c removed 10/21/2015

Q. 24b removed 10/21/2015

Q. 24a Added new range table. Using Alpha A-F, 9 10/21/2015

23a. Do you do regular volunteer work?

No.....	0
Yes.....	1

69 DEMO23A

23b. If YES, what is the average number of hours per week that you do volunteer work?.....

70 71 DEMO23B

23c. Please specify the type of volunteer work (i.e. clerical, etc.)

OFFICE USE
<u>72 73 74</u>
(CODE OCCUPATION)

DEMO23C

24a. If you don't mind answering, what is the approximate yearly income for you and your spouse? (circle one)

75 DEMO24A

Yearly	Monthly	Yearly	Monthly
1. Under \$5000	Under \$416	A. Under \$10,000	Under \$832
2. \$5000 - \$9999	\$417 – 833	B. \$10,000 - \$19,999	\$833 - \$1,666
3. \$10,000 - \$14,999	\$834 - \$1249	C. \$20,000 - \$29,999	\$1,667 – \$2,499
4. \$15,000 - \$19,000	\$1250 - \$1666	D. \$30,000 - \$59,999	\$2,500 – \$4,999
5. \$20,000 - \$29,999	\$1667 - \$2499	E. \$60,000 - \$99,999	\$5,000 – \$8,332
6. \$30,000 or more	\$2500 or more	F. \$100,000 or more	\$8,333 or more
9. Don't know/refused		9. Don't know/refused	

24b. How many people are supported by this income?.....

76 77 DEMO24B

24c. Currently, how many of your basic needs: (a) food, (b) housing, (c) clothing, (d) medical care are met?

All.....	1
Three.....	2
Two or less.....	3

78 DEMO24C

24d. Are you able to afford small luxuries?

79 DEMO24D

No.....	0
Yes.....	1

Parent's Education

25a. Using your best estimate, what was the highest grade or year of regular school *that your father completed?* (Circle one number corresponding to the appropriate answer)

← CODE FROM TABLES

80 81 DEMO25A

Elementary	0	1	2	3	4	5	6	7	8
High School	9	10	11	12					
College/ Technical School	13	14	15	16					
Master	17	18							
Doctorate	19	20	21						
Don't know	99								

25b. What is the highest degree your *father* earned?

← CODE FROM TABLES

82 DEMO25B

None.....	0
GED.....	1
High School Diploma.....	2
Bachelor's.....	3
Master's.....	4
Doctorate.....	5
Other (Specify: _____)	6

Don't know.....	9

26a. Using your best estimate, what was the highest grade or year of regular school *that your mother completed*? (Circle one number corresponding to the appropriate answer)

Elementary	0	1	2	3	4	5	6	7	8
High School	9		10		11		12		
College/ Technical School	13		14		15		16		
Master	17		18						
Doctorate	19		20		21				
Don't know	99								

← CODE FROM TABLES

83 84 DEMO26A

26b. What is the highest degree your *mother* earned?

None.....	0
GED.....	1
High School Diploma.....	2
Bachelor's.....	3
Master's.....	4
Doctorate.....	5
Other (Specify: _____)	6

Don't know.....	9

← CODE FROM TABLES

85 DEMO26B