**Demographic Intake Form – Adolescent English**

1. Do you consider yourself to be Hispanic/Latino/a?

**○**Yes

**○**No

2. Where were you born?

**○**United States **○**Guatemala

**○**Argentina **○**Honduras

**○**Bolivia **○**Mexico

**○**Brazil **○**Nicaragua

**○**Chile **○**Panama

**○**Colombia **○**Paraguay

**○**Costa Rica **○**Peru

**○**Cuba **○**Puerto Rico

**○**Dominican Republic **○**Uruguay

**○**Ecuador **○**Venezuela

**○**El Salvador **○**Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. What country/place/nationality do you identify with the most? (Check all that apply)

**○**United States **○**Guatemala

**○**Argentina **○**Honduras

**○**Bolivia **○**Mexico

**○**Brazil **○**Nicaragua

**○**Chile **○**Panama

**○**Colombia **○**Paraguay

**○**Costa Rica **○**Peru

**○**Cuba **○**Puerto Rico

**○**Dominican Republic **○**Uruguay

**○**Ecuador **○**Venezuela

**○**El Salvador **○**Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. [If Latino] Which of the following categories would you use to describe yourself? (Check all that apply)

**○**White-Latino

**○**Black-Latino (Afro-Latino)

**○**Asian-Latino

**○**Indigenous Latino

**○**Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. [If NOT Latino] Which of the following categories would you use describe yourself?

**○**White (Non-Hispanic)

**○**Black or African-American

**○**Asian

**○**American Indian or Alaskan Native

**○**Native Hawaiian or Other Pacific Islander

**○**Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. If you were walking down the street, what race do you think other Americans who do not know you personally would assume you were based on what you looked like?

**○**White

**○**Black

**○**Asian American

**○**Native American/American Indian

**○**Hispanic or Latino

**○**Mexican

**○**Middle Eastern/Arab

**○**Some other race (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**○**Don’t know

7. [If NOT U.S. born] How many years have you lived in the U.S.? \_\_\_\_\_\_\_\_\_

8. What is your preferred language?

**○**English

**○**Spanish

**○**Indigenous language (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**○**Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. What is your native language?

**○**English

**○**Spanish

**○**Indigenous language (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**○**Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

10. Have you ever lived in a different country from your parents for 6 months or more?

**○**Yes

**○**No

11. [If YES] Specify whether you were separated from your mother or father, what country you lived in, what country your parents lived in, and your age during the time of separation.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Country you lived in | Country your parent lived in | Your ages during the separation(s) – For example, Age 7-10 |
| Separated from Mother |  |  |  |
| Separated from Father |  |  |  |

12. How many people live in your household, including yourself? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

13. Who lives with you? (Mark all that apply)

**○**Partner/Boyfriend/Girlfriend

**○**Your children

**○**Mother/Father

**○**Sister/Brother

**○**Mother-in-law/Father-in-law

**○**Aunt/Uncle

**○**Nieces/Nephews

**○**Cousin

**○**Grandparent

**○**Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

14. Who helps raise you? (Mark all that apply)

**○**Mother/Father

**○**Sister/Brother

**○**Mother-in-law/Father-in-law

**○**Aunt/Uncle

**○**Cousin

**○**Grandparent

**○**Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

15. Who do you live with most of the time?

**○**Mother and father together

**○**Mother and father equally, at separate homes

**○**Mother mostly

**○**Father mostly

**○**Grandparent

**○**Other relative

**○**Foster parents

**○**Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16. What is your current age in years? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

17. Are you currently in school?

**○**Yes

**○**No

18. [If YES] What grade are you in? \_\_\_\_\_\_\_\_\_\_

19. How often in the past 12 months would you say you or your family were worried or stressed about having enough money to buy nutritious meals?

**○**Always

**○**Usually

**○**Sometimes

**○**Rarely

**○**Never

20. How often in the past 12 months would you say you or your family were worried or stressed about having enough money to pay your rent/mortgage?

**○**Always

**○**Usually

**○**Sometimes

**○**Rarely

**○**Never

21. In the last 12 months, check the places you or your family has lived or stayed in.

**○**In housing you or your family rented

**○**In housing you or your family owned

**○**In housing you or your family shared with others, but did not own

**○**In a hotel/motel

**○**In an emergency shelter

**○**In an institution (hospital, jail, prison, nursing home, etc.)

**○**In a place not meant for human habitation (car, unsheltered on the street, under a bridge, etc.)

22. When was the last time you saw a doctor or healthcare provider?

**○**Less than 6 months ago

**○**More than 6 months ago but less than a 1 year ago

**○**More than 1 year ago but less than 2 years ago

**○**More than 2 year ago

**○**Never

23. When was the last time you saw a dentist?

**○**Less than 6 months ago

**○**More than 6 months ago but less than a 1 year ago

**○**More than 1 year ago but less than 2 years ago

**○**More than 2 year ago

**○**Never

24. How would you describe your health in the past three months?

**○**Very good

**○**Good

**○**Fair

**○**Poor

25. [If born outside the U.S.] Did you ever leave your country because of violence or threats to the health and safety of yourself or your family?

**○**Yes

**○**No

26. [If born outside the U.S.] Did you experience violence or threats to you or your family during the process of leaving your country?

**○**Yes

**○**No

27. What religion are you?

**○**Baptist **○**Christian

**○**Episcopalian **○**Evangelist/Pentecostal

**○**Jehovah’s witness **○**Jewish

**○**Methodist **○**Muslim

**○**Presbyterian **○**Protestant

**○**Roman Catholic **○**None

**○**Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

28. Do you consider yourself …?

**○**Not religious/spiritual

**○**Somewhat religious/spiritual

**○**Very religious/spiritual

29. How strongly do the beliefs of your religion/spirituality influence your life?

**○**Very much

**○**Somewhat

**○**Not at all

30. What sex were you assigned at birth, on your original birth certificate?

**○**Male

**○**Female

**○**Intersex

31. Which of the following commonly used terms best describes your sexual orientation? (Check all that apply)

**○**Straight or heterosexual

**○**Gay

**○**Lesbian

**○**Bisexual

**○**Queer

**○**Pansexual

**○**Asexual

**○**Unsure/Questioning/Exploring

**○**Not listed; specify: \_\_\_\_\_\_\_\_\_\_\_\_\_