**Demographic Intake Form – Adult 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/a

**○**Black-Latino/a (Afro-Latino/a)

**○**Asian-Latino/a

**○**Indigenous Latino/a

**○**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/a

**○**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) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

10a. How many minor children (under 18 years of age) do you have? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

10b. How many adult children (age 18 or above) do you have? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11a. How many of your minor children (under 18 years of age) live with you? \_\_\_\_\_\_\_\_

11b. How many of your adult children (age 18 or above) live with you? \_\_\_\_\_\_\_\_

12. Have you ever lived in a different country from your minor child(ren) (under 18 years of age) for 6 months or more?

**○**Yes

**○**No

13. [If YES] Country you lived in, country your child lived, child’s age when first separated, and number of years you have lived apart.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Country you lived in | Country child lived in | Child’s age when first separated | Years apart |
| Child 1 |  |  |  |  |
| Child 2 |  |  |  |  |
| Child 3 |  |  |  |  |
| Child 4 |  |  |  |  |

14. Did you ever live in a different country than your parents for 6 months or more when you were a child (under 18 years of age)?

**○**No

**○**Yes, mother

**○**Yes, father

**○**Yes, both

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

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

**○**Spouse **○**Partner/Boyfriend/Girlfriend

**○**Your children **○**Mother/Father

**○**Sister/Brother **○**Son-in-law/Daughter-in-law

**○**Mother-in-law/Father-in-law **○**Aunt/Uncle

**○**Nieces/Nephews **○**Cousin

**○**Grandchildren **○**Grandparent

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

17. Who helps you raise your child(ren)? (Mark all that apply)

**○**Spouse **○**Partner/Boyfriend/Girlfriend

**○**Children **○**Mother/Father

**○**Sister/Brother **○**Son-in-law/Daughter-in-law

**○**Mother-in-law/Father-in-law **○**Aunt/Uncle

**○**Cousin **○**Grandparent

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

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

19. What is the highest grade of school you’ve completed?

**○**No formal education completed

**○**1st to 8th grade

**○**9th to 11th grade

**○**GED (high school equivalent)

**○**High school diploma

**○**Some college/university

**○**College/university degree

20. Are you currently employed?

**○**Yes

**○**No

21. Which of the following best described your work situation in the past month?

**○**Full time (More than 30 hours)

**○**Part time (Less than 30 hours)

**○**Paid leave (temporarily laid off, sick leave, maternity leave)

**○**Seasonal worker

**○**Looking for work

**○**Not employed, not looking for work

**○**Retired

**○**Disability

**○**Housework

**○**Student

22. [If answered NO to currently employed] When was the last time that you had a job?

**○**Less than 1 year ago

**○**More than 1 year ago

**○**Never been employed

23. Last month, what was the total amount of money you and your family lived on, including public assistance (after taxes)?

**○**Less than $200

**○**$200-$499

**○**$500-$999

**○**$1000-$1999

**○**$2000 or more

24. How many people, including yourself, depend on this income? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**○**Always

**○**Usually

**○**Sometimes

**○**Rarely

**○**Never

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

**○**Always

**○**Usually

**○**Sometimes

**○**Rarely

**○**Never

27. In the last 12 months, check the places you have lived or stayed in.

**○**In housing you rented

**○**In housing you owned

**○**In housing you 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.)

28. Do you have health insurance?

**○**Yes

**○**No

29. How do you usually pay for your own healthcare?

**○**Private insurance plan (not provided at work)

**○**Private insurance plan (provided at work)

**○**Medicaid

**○**Medicare

**○**Out of pocket

**○**Don’t pay

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

30. 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

31. 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

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

**○**Very good

**○**Good

**○**Fair

**○**Poor

33. Which of the following best describes your current status in the U.S.?

○US Citizen

**○**Permanent resident

**○**Without papers

**○**Student visa

**○**Dependent on someone else’ visa (husband/wife/parent/guardian)

**○**Asylum

**○**Temporary resident

**○**Temporary work visa

**○**Tourist visa

**○**Expired visa

**○**Temporary protected immigrant (DACA/Dreamer)

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

34. [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

35. [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

36. What religion are you?

**○**Baptist **○**Christian

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

**○**Jehovah’s witness **○**Jewish

**○**Methodist **○**Muslim

**○**Presbyterian **○**Protestant

**○**Roman Catholic **○**None

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

37. Do you consider yourself …?

**○**Not religious/spiritual

**○**Somewhat religious/spiritual

**○**Very religious/spiritual

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

**○**Very much

**○**Somewhat

**○**Not at all

39. What is your current relationship status?

**○**Single (never married)

**○**In a domestic partnership

**○**Married

**○**Separated

**○**Divorced

**○**Widowed

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

**○**Male

**○**Female

**○**Intersex

41. 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: \_\_\_\_\_\_\_\_\_\_\_\_\_

42. What gender is your partner?

**○**Female

**○**Male

**○**Not applicable (not in a relationship)