1. Education level: (select the highest level attained)

Never attended/ Kindergarten only

1st Grade

2nd Grade

3rd Grade

4th Grade

5th Grade

6th Grade

7th Grade

8th Grade

9th Grade

10th Grade

11th Grade

12th Grade, no diploma

High school graduate

GED or equivalent

Some college, no degree

Associate degree: occupational, technical, or vocational program

Associate degree: academic program

Bachelor's degree (e.g., BA, AB, BS, BBA)

Master's degree (e.g., MA, MS, MEng, MEd, MBA)

Professional school degree (e.g., MD, DDS, DVM, JD)

Doctoral degree (e.g., PhD, EdD)

Unknown

1. Employment status(choose one):

Working now

Only temporarily laid off, sick leave, or maternity leave

Looking for work, unemployed

Retired

Other, specify:

Disabled, permanently or temporarily

Keeping house

Student

Unknown

1. Full-time employment (Work 35 hours or more per week):

Yes

No

Hours vary

Unknown

Not reported

1. Marital/partner status (choose one):

Never Married

Married

Domestic Partnership

Separated

Divorced

Widowed

1. Number of people the participant/subject lives or stays with:
2. Persons living with (Choose all that apply):

Husband or wife

Biological son or daughter

Adopted son or daughter

Stepson or stepdaughter

Brother or sister

Father or mother

Stepfather or stepmother

Grandchild

Grandparent

Parent-in-law

Son-in-law or daughter-in-law

Other relative

Roomer or boarder

Housemate or roommate

Unmarried partner

Foster child

Other patient/ resident in care facility

Personal care attendant

Military unit member

Other nonrelative

N/A – Homeless

N/A – Alone

Unknown

How many hours in a typical 24-hour day do you have someone with you (paid assistance) to provide physical assistance for personal care activities such as eating, bathing, dressing, toileting and mobility (hours paid assistance):

How many hours in a typical 24-hour day do you have someone with you (unpaid assistance) to provide physical assistance for personal care activities such as eating, bathing, dressing, toileting and mobility(hours unpaid assistance family, others):

How much time is someone with you in your home to assist you with activities that require remembering, decision making, or judgment?

Someone is always with me to observe or supervise.

Someone is always around, but they only check on me now and then.

Sometimes I am left alone for an hour or two.

Sometimes I am left alone for most of the day.

I have been left alone all day and all night, but someone checks in on me.

I am left alone without anyone checking on me.

1. Family size (including yourself, number of people supported by family income):

## GENERAL INSTRUCTIONS

This form contains data elements that are collected to describe the social status of the study population. The items are used to compare baseline characteristics among study groups and to identify confounding variables.

## SPECIFIC INSTRUCTIONS

*Please see the Data Dictionary for definitions for each of the data elements included in this CRF Module.*

Responses to the demographic elements should be obtained from self-report when possible.

* Education – Choose highest level attained.
* Marital Status – Choose one. Response is obtained by report of the participant/subject or a reliable proxy.
* Persons living with – Skip this data element if the participant/ subject lives alone. If he/she lives with one or more people, choose all that apply.
* How many hours in a typical 24-hour day do you have someone with you (paid assistance) to provide physical assistance for personal care activities such as eating, bathing, dressing, toileting and mobility - Record hours paid assistance
* How many hours in a typical 24-hour day do you have someone with you (unpaid assistance) to provide physical assistance for personal care activities such as eating, bathing, dressing, toileting and mobility - Record hours unpaid assistance