



DEMOGRAPHICS – Communication Partner

ID
NUM
BER:

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FORM
CODE:

D	E	M	C
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DATE: 09/20/2017
Version 1.0

ADMINISTRATIVE INFORMATION

0a. Completion Date:

		/			/				
Month			Day			Year			

0b. Staff ID:

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Instructions: Enter the answer given by the participant for each response.

A. CONSENT STATUS

1. Agree to participate in ACHIEVE study as described in informed consent document.

- A= Agree → Go to Question 2
 N= do NOT agree

2. What is your relationship to the ACHIEVE participant?

- P= Spouse or partner
 F= Friend
 R= Relative
 O= Other

3. What is your date of birth?

		/			/				
Month			Day			Year			

4. What is your sex?

- F= Female
 M= Male

5. Are you Hispanic or Latino(a)?

- Y= Yes
 N= No

6. Which of the following best describes your racial background?

a. Race #1:

A= Asian

B= Black or African American

I= American Indian/Native American/ Native Hawaiian/Pacific Islander

W= White

b. Race #2:

A= Asian

B= Black or African American

I= American Indian/Native American/ Native Hawaiian/Pacific Islander

W= White

c. Race #3:

A= Asian

B= Black or African American

I= American Indian/Native American/ Native Hawaiian/Pacific Islander

W= White