

“HIV Testing Factors Among Rural Black Men (HiTFARM)”

**Attachment 1a. Screening Form and Contact Form**

Form Approved  
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## **“HIV Testing Factors Among Rural Black Men (HiTFARM)”**

### **Screening Form and Contact Form**

Public reporting burden of this collection of information is estimated to average 5 minutes per response. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attn: OMB-PRA (0920-0840)

1. Age \_\_\_\_\_ (years)

2. Gender:  Male  Female

3. What county do you live in? (Select only one)

- Columbia County
- Hamilton County
- Alachua County

3a. If Alachua County, which city or town? (Select only one)

- Gainesville
- High Springs
- Alachua
- LaCrosse
- Hawthorne
- Newberry
- Jonesville
- Micanopy
- Orange Heights
- Melrose
- Fairbanks
- Waldo

4. How would you describe your ethnicity?

- Hispanic or Latino
- Not Hispanic or Latino

5. How do you describe your race? (Mark all that apply)

- American Indian or Alaskan Native
- Asian
- Black or African/American
- Native Hawaiian or other Pacific Islander
- White

5. How do you usually identify yourself to male or female friends? (Select only one)

- As a straight guy who sleeps with women only
- As a straight guy who sleeps with women & other guys
- As a straight guy who sleeps with other guys only
- I do not label myself, but sleep with other guys
- As bisexual
- As gay
- Transgender
- I do not discuss this with them

When were you last tested for HIV?

- Never
- Within the past three months (please give date)
- Longer than three months age \_\_\_\_\_ (please give date)

C oalition  
for H ealth  
and A dvocacy  
of R ural  
Minorities



**CONTACT INFORMATION**

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Date of Birth: (Month/Day/Year) \_\_\_\_\_

Address: (Street) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_

Is it okay if we leave a message for you at this number? \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_

Is it okay if we leave a message for you at this number? \_\_\_\_\_

Message Phone: (\_\_\_\_) \_\_\_\_\_

Hang out locations: \_\_\_\_\_

**Contact #1: Date of contact** \_\_\_\_\_

**Outcome:** \_\_\_\_\_

**Contact #2: Date of contact:** \_\_\_\_\_

**Outcome:** \_\_\_\_\_

**Contact #3: Date of contact:** \_\_\_\_\_

**Outcome:** \_\_\_\_\_

\_\_\_\_\_