

Program Director/Principal Investigator (Last, First, Middle):

Inclusion Enrollment Report

This report format should NOT be used for data collection from study participants.

Study Title: _____
 Total Enrollment: _____ Protocol Number: _____
 Grant Number: _____

| PART A. TOTAL ENROLLMENT REPORT: Number of Subjects Enrolled to Date (Cumulative) by Ethnicity and Race | | | | |
|--|------------|-------|-------------------------|-------|
| Ethnic Category | Sex/Gender | | | Total |
| | Females | Males | Unknown or Not Reported | |
| Hispanic or Latino | | | | ** |
| Not Hispanic or Latino | | | | |
| Unknown (individuals not reporting ethnicity) | | | | |
| Ethnic Category: Total of All Subjects* | | | | * |
| Racial Categories | | | | |
| American Indian/Alaska Native | | | | |
| Asian | | | | |
| Native Hawaiian or Other Pacific Islander | | | | |
| Black or African American | | | | |
| White | | | | |
| More Than One Race | | | | |
| Unknown or Not Reported | | | | |
| Racial Categories: Total of All Subjects* | | | | * |
| PART B. HISPANIC ENROLLMENT REPORT: Number of Hispanics or Latinos Enrolled to Date (Cumulative) | | | | |
| Racial Categories | Females | Males | Unknown or Not Reported | Total |
| American Indian or Alaska Native | | | | |
| Asian | | | | |
| Native Hawaiian or Other Pacific Islander | | | | |
| Black or African American | | | | |
| White | | | | |
| More Than One Race | | | | |
| Unknown or Not Reported | | | | |
| Racial Categories: Total of Hispanics or Latinos** | | | | ** |

* These totals must agree.

** These totals must agree.