OMB NUMBER: 0925-XXXX EXPIRATION DATE: XX/XX/XXXX

ID CODE

Cognitive Interview Screener

Public reporting burden for this collection of information is estimated to average 2 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 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: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-XXXX). Do not return the completed form to this address.

A little **Pretty Well** Not at all **Extremely Well** English Proficiency Low English Proficiency 4. Were you born in the United States? [] YES [] NO **5.** Were your parents born in the United States? MOTHER [] YES [] NO FATHER [] YES []NO **6.** What is the highest degree or level of school that you have completed? Less than a high school diploma or GED High school diploma or GED ☐ Some college but no degree Associate Degree Bachelor's degree ☐ Post-graduate degree Refused Don't know

3. How well would you say you speak English?