

## Attachment G. Eligibility Form

1. Are you a resident of Puerto Rico?  
 Yes  No
  
2. Have you previously participated in the ZIKV persistence study?  
 Yes  No
  
3. For asymptomatic contacts only: Have you had fever, rash, red eye or joint pain since November 1, 2015?  
 Yes  No
  
4. For asymptomatic contacts only: Do you have a study coupon?  
 Yes  No

Public reporting burden of 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 CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA 0920-XXXX