**OMB BURDEN STATEMENT**:  According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0524. The time to complete this information collection is estimated as part of the 5 minutes for recruitment, including time to review the instructions and completing the information.

**Attachment A: Screener for Parents/Caregivers (English Version)**

**Please choose the option that best answers each question for you.**

1. **Are you the parent or guardian of any children who live at home with you?**

( ) yes

( ) no

1. **How many children are there in your home for whom you are the parent or legal guardian?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **How old are each of these children?**
   1. Child #1\_\_\_\_\_\_\_\_
   2. Child #2\_\_\_\_\_\_\_\_
   3. Child #3\_\_\_\_\_\_\_\_
   4. Child #4\_\_\_\_\_\_\_\_
   5. Child #5­\_\_\_\_\_\_\_\_
   6. Child #6\_\_\_\_\_\_\_\_
3. **Federal Poverty Level Adjusted for Household Size (see Table 3).**
   1. What is the size of your household (Including yourself) \_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| *Table 4 Internal Use Only – Income Threshold for Participation* | |
| Household Size | Maximum Annual  Household Income |
| 1 | $21,589.00  $29,100.00  $36,611.00  $44,122.00  $51,633.00  $59,144.00  $66,655.00  $74,166.00 |
| 2 |
| 3 |
| 4 |
| 5 |
| 6 |
| 7 |
| 8 |

* 1. What is your annual household income \_\_\_\_\_\_\_\_\_\_\_\_\_

1. **What is your gender**

( ) Male

( ) Female

1. **What is your primary language? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Ethnicity**

( ) Hispanic or Latino

( ) Not Hispanic or Latino

1. **Race (select one or more)**

( ) American Indian or Alaskan Native

( ) Asian

( ) Black or African American

( ) Native Hawaiian or Other Pacific Islander

( ) White

1. **What is your country of origin? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Does anyone in your household work in any of the following industries?**

( ) Nutrition/Food Service

( ) Fitness

( ) Food manufacturing

( ) School Food Service

( ) Food/Nutrition Assistance Programs