**Parent Demographic Form**

**Site ID: \_ \_ \_ \_ \_**

**Please provide some information about yourself by completing this questionnaire. We will not report any of your responses by name. Thank you.**

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| **BACKGROUND** |
| 1. **In what county do you currently live?**
 | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 1. **Do you currently describe yourself as male, female or transgender**
 | * Male
* Female
* Transgender
* None of these
 |
| 1. **Would you describe yourself as Hispanic or Latino?**
 | * Yes
* No
 |
| 1. **How would you describe your racial background? Select all that apply.**
 | * American Indian or Alaska Native
* Asian
* Black or African American
 | * Native Hawaiian or Other Pacific Islander
* White
 |
| 1. **What is your current marital status?**
 | * Single
* Married
* Living with someone
 | * Separated
* Divorced
* Widowed
 |
| 1. **How many children under the age of 18 do you have?**
 | * 1
* 2
* 3
 | * 4
* 5
* 6 or more
 |
| 1. **How many of these children live with you full time**
 | * 1
* 2
* 3
 | * 4
* 5
* 6 or more
 |
| 1. **What is the highest education level completed? Select one.**
 | * 11th grade or less
* 12th grade but no high school diploma
* High school diploma or GED
* Some college or technical school
 | * Associate’s degree
* Bachelor’s degree
* Master’s degree
* Doctoral degree
* Professional degree (MD, JD, etc.)
 |
| 1. **What is your current employment status**
 | * Full-time employment for wages
* Part-time employment for wages
* Self-employed for wages
* Presently not employed outside the home, looking for work
 | * Presently not employed outside the home, not looking for work
* Disabled/unable to work
* Refused/unknown
 |
| 1. **What is your total household income?**
 | * $0 - $3,000
* $3,001 - $16,500
* $16,501 - $24,000
* $24,001 - $34,500
 | * $34,501 - $49,999
* $50,000 - $74,999
* $75,000 - $99,999
* $100,000 - $124,999
* $125,000 and greater
* I prefer not to say
 |
| 1. **Do you currently receive any public government benefits or benefits from “state-specific name” (e.g., Medicaid, food stamps, SSI, or welfare cash assistance)?**
 | * Child care subsidies
* Child Tax Credit
* Disability benefits
* Earned Income Tax Credit
* Education and training assistance
* Housing voucher or public housing
* Medicaid
* Medicare
* Military medical insurance
* Retirement benefits
* Social Security Insurance (SSI)
* State Children’s Health Insurance Program (SCHIP)
* State or local emergency assistance program
* Supplemental Nutrition Assistance Program (SNAP)
* Temporary Assistance to Needy Families (TANF)
* Transportation subsidies
* Unemployment compensation
* Veteran’s benefits
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