

**I am calling to verify (your/your household's) responses to the 2018 End-to-End Census Test so that we may evaluate how well our questions help us collect the correct information. Some of the questions I will ask are similar to what you were previously asked.**

**This interview is authorized by Title 13 of the US Code and should take approximately 10 minutes. All of the information you provide will be confidential.**

**This interview may be recorded for quality assurance purposes. Do I have your permission to record this interview?**

If the respondent indicates they do not wish to be recorded, please click the XXXX stop recording button located in your CTI Toolkit Agent Desktop. Click "Next" to continue.

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I would like you to confirm the names of the people who were living or staying at <ADDRESS> on <REFDATE>.

The names I have listed are:

Kristen Ann Hughes [Delete](#)

Grady Canine Hughes [Delete](#)

Do you need to add more people or remove names from this list?

No change necessary

[+ Add another person](#)

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ROSTER VERIFY

I would like you to confirm the names of the people who were living or staying at <ADDRESS> on <REFDATE>.

The names I have listed are:

Kristen Ann Hughes

Grady Canine Hughes

Do you need to add more people or remove names from this list?

No change necessary

First Name

Middle Name

Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="button" value="Delete"/>
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If "Add another person" is selected, display name fields as shown above.

ROSTER VERIFY

I would like you to confirm the names of the people who were living or staying at <ADDRESS> on <REFDATE>.

The names I

Kristen A

Grady C

Do you need

No chan

[+ Add anot](#)

### Delete Household Member

What is the reason you would like to remove <NAME#>?

- This person was added in error/never lived at this address
- This person sometimes lives or stays somewhere else

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If name is selected to be deleted, display "Delete Household level modal (see "Special instructions" in user story.)

ROSTER VERIFY

Based on what you've told me so far, the names I have listed are:

Kristen Ann Hughes [Delete](#)

Grady Canine Hughes [Delete](#)

No change necessary

[+ Add another person](#)

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ROSTER REVIEW

Based on what you've told me so far, the names I have listed are:

Kristen Ann Hughes

Grady Canine Hughes

No change necessary

What is the name of the person you want to add?

First Name

Middle Name

Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="button" value="Delete"/>
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If "Add another person" is selected, display name fields as shown above.

ROSTER REVIEW

Based on

## Delete Household Member

Kris  
 Gra

No C

[+ Add](#)

What is

**What is the reason you would like to remove <NAME#>?**

- This person was added in error/never lived at this address
- This person sometimes lives or stays somewhere else

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First Name	Middle Name	Last Name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<a href="#">Delete</a>

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[Next >>](#)

If "Delete" is selected, display the modal as shown above.

ROSTER REVIEW

I'd like to make sure that we are not missing anyone who lived or stayed at <ADDRESS> on <REFDATE>.

Were there any babies, children, grandchildren, or foster children that you did not mention yet?

- Yes
- No

If Yes, display:

First Name

Middle Name

Last Name

 Delete

[+ Add another person](#)

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**Were there any other additional people living or staying there that you did not mention yet, such as nonrelatives, roommates, or anyone without a permanent place to live?**

- Yes**
- No**

If Yes, display:

**First Name**

**Middle Name**

**Last Name**

 **Delete**

**+ Add another person**

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**UC OTHER**

Please provide the full address of the place where <NAME#> sometimes lives or stays with a parent, grandparent, or other person.

*Fist time an alternate street address is asked:*

Please provide the complete street address you would use to have a package delivered directly to your residence, rather than a rural route or P.O. Box address used for mailing purposes. A street address is the most helpful for processing your response.

*When entering an address, you must provide an Address Number and Street Name. You must also provide a City and State or a ZIP Code. If the address is for a group living facility, please provide the name of the facility in the "Facility Name" field.*

*If the respondent indicates that they do not have a city-style address, select "The other place does not have a street address."*

**Address Number**

*Ex: 101*

**Street Name**

*Ex: N Main St*

**Apt/Unit**

*Ex: Apt 23*

**City**

**State**

**ZIP Code**

**Facility Name (if applicable)**

The other place does not have a street address.

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Can you provide a rural route address for the other place where <NAME> sometimes lives or stays?

- Yes
- No

If yes, display:

Please provide the complete rural route address, and then describe the physical location of that place?

*For the location description, please provide as much information as possible about the location, such as "The apartment over the gas station" or "The brick house with the screened porch on the northeast corner of Farm Road and Highway 46."*

*When entering an address, you must provide a Rural Route Descriptor, Rural Route number, Rural Route Box ID number. You must also provide a City and State or a ZIP Code. If the address is for a group living facility, please provide the name of the facility in the "Facility Name" field.*

*If the respondent indicates that they do not have a rural route address, select "Next".*

RR Descriptor



Rural Route #

RR Box ID #

City

State

ZIP Code

Physical Location Description

Facility Name (if applicable)

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We need to know as much information as possible about the other place where <NAME> sometimes lives or stays. Please tell me the City and State, or the ZIP Code. Then describe the physical location.

*For the description, provide as much information as possible about the location. For example, you could say "The apartment over the gas station" or a name of a park, street intersection or shelter, if you were experiencing homelessness.*

*You must provide at least a City and State or a ZIP Code. If the other place is a group living facility, please provide the name of the facility in the "Facility Name" field.*

City

State

ZIP Code

Physical Location Description

Facility Name (if applicable)

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# OC

(Some people live or stay in more than one place, and we would like to make sure everyone is only counted once.) *1<sup>st</sup> time/person asked*

Does <NAME#> sometimes live or stay somewhere else, other than <ADDRESS>, (such as with a parent, grandparent, or other person, while attending college, to be closer to a job or military assignment, in a nursing home or group home, in a jail or prison, at a seasonal or second residence, or for another reason?)

*1<sup>st</sup> and 2<sup>nd</sup> time asked*

Select all that apply.

- No
- Yes, with a parent, grandparent, or other person
- Yes, while attending college
- Yes, for a military assignments
- Yes, to be closer to a job
- Yes, in a nursing home or a group home
- Yes, in a jail or prison
- Yes, at a seasonal or second residence
- Yes, for another reason
- Don't know
- Refused