

## Attachment 2: Participant screening form

OMB Control No. 0920-1050

Exp. Date 05/31/2022

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Public reporting burden of this collection of information is estimated to average 5 minutes per respondent. 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 Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia, 30333; ATTN: PRA (0920-1050).

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Thank you for your interest in participating in these focus groups. First, we need to know a few things about you. The information you provide in this form will be kept confidential – only project staff will have access to it, we will store it in a database on a secure server with password protection, and we will destroy all data after focus groups are finished and the study is over.

In order to protect your confidentiality, please do not give us your full name. Instead, please choose a nickname that we can use.

Nickname: \_\_\_\_\_

Prefer to be contacted via phone or email? \_\_\_\_\_ Phone \_\_\_\_\_ Email

**Based on your preferred contact method**, please give EITHER your phone number OR email:

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Are you able to attend a focus group discussion on (date, time) at (location):

\_\_\_\_\_ Yes \_\_\_\_\_ No

Will you need childcare services during this focus group discussion? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can you speak and understand conversations in English? \_\_\_\_\_ Yes \_\_\_\_\_ No

***Please answer the following questions about yourself:***

Please tell us which race/ethnicity you feel best describes you:

\_\_\_\_\_ White \_\_\_\_\_ Black or African American \_\_\_\_\_ Hispanic or Latino \_\_\_\_\_ Asian

\_\_\_\_\_ American Indian or Alaska Native \_\_\_\_\_ Native Hawaiian or Other Pacific Islander

Please check here if respondent prefers not to answer: \_\_\_\_ (for interviewer only)

What sex were you assigned at birth?

\_\_\_\_ Male      \_\_\_\_ Female

Please check here if respondent prefers not to answer: \_\_\_\_ (for interviewer only)

What is your age: \_\_\_\_\_ years

How many children do you have? \_\_\_\_\_

Of these children, how many are boys? \_\_\_\_\_

What are the ages of your sons? (Check all that apply)

\_\_\_\_ 0-4 years      \_\_\_\_ 5-9 years      \_\_\_\_ 10-14 years      \_\_\_\_ 15-19 years

\_\_\_\_ Over 19 years of age

Of these children, how many are girls? \_\_\_\_\_

What are the ages of your daughters? (Check all that apply)

\_\_\_\_ 0-4 years      \_\_\_\_ 5-9 years      \_\_\_\_ 10-14 years      \_\_\_\_ 15-19 years

\_\_\_\_ Over 19 years of age

Are you married or do you live with a romantic partner?      \_\_\_\_ Yes      \_\_\_\_ No

If no, have you ever been married or lived with a romantic partner? \_\_\_\_ Yes      \_\_\_\_ No

What is the highest degree or level of school you have completed? (If you're currently enrolled in school, please indicate the highest degree you have *received*.)

\_\_\_\_ Less than high school diploma      \_\_\_\_ High school degree or equivalent (e.g. GED)

\_\_\_\_ Some college, no degree      \_\_\_\_ Associate or Bachelor's degree

\_\_\_\_\_ More than a Bachelor's degree (e.g. Master's or Doctoral degree)