2022 AMERICAN COMMUNITY SURVEY CONTENT TEST

	Respondent	Person 2	Person 3	Person 4	Person 5	Person 6
 1a. Let's create a list of everyone living or staying at this address, even if they are not related to you. What is your name? (What is the name of the next person living or staying here?) ❖ Make sure to include the respondent if he/she is staying here. 	First name (or initial):	First name (or initial):	First name (or initial):	First name (or initial):	First name (or initial):	First name (or initial):
The following questions are to make sure everyone is included. 1b. Other than the people you have already mentioned, are there any children living or staying here, such as babies, grandchildren, or foster children? These children could be related or unrelated to you.	Additional Person 1:	Additional Person 2:	Additional Person 3:	Additional Person 4:	Additional Person 5:	Additional Person 6:
 1c. Other than the people you have already mentioned, is there anyone else staying here, such as roommates and other people or families who have no other place to stay? Do not include overnight or weekend guests who have a residence somewhere else. 	Additional Person 7: ———————————————————————————————————	Additional Person 8:ons	Additional Person 9:	Additional Person 10:	Additional Person 11:	Additional Person 12:

Participant ID #:			 	 	 	

❖ Copy names from 1a, 1b, and 1c.	Respondent:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
I have listed ❖ Read all names.						
1d. Do any of these people live somewhere else, such as a college student or someone in the Armed Forces on deployment?						
 MARK "No" for: (1) children in boarding school or summer camp 	Additional Person 1:	Additional Person 2:	Additional Person 3:	Additional Person 4:	Additional Person 5:	Additional Person 6:
 MARK "Yes" for: (1) children in shared custody who are not currently staying at the sample address, regardless of the length of stay; (2) persons who are away NOW for MORE than two 	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No
months^	Additional Person 7:	Additional Person 8:	Additional Person 9:	Additional Person 10:	Additional Person 11:	Additional Person 12:
^ - The two-month period is not anchored by a specific reference date, but can encompass the two months prior to the interview or the two months following the interview date.	 □□Yes □□No	 □□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	 □□Yes □□No

Participant ID #:										
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Copy names from 1a, 1b and 1c, but OMIT anyone with a "Yes" response to 1d.	Respondent:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
I have listed ❖ Read all remaining names.	☐☐Yes ☐☐No	□□Yes □□No	 □□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No
1e. Are any of these people staying here for a short time?						
❖ MARK "No" for:						
(1) children in shared custody who are currently staying at the sample address, regardless of where they usually stay;	Additional Person 1:	Additional Person 2:	Additional Person 3:	Additional Person 4:	Additional Person 5:	Additional Person 6:
(2) commuter workers who stay in some other residence closer to work when their family residence is the sample address.	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No
★ MARK "Yes" for:	Additional Person 7:	Additional Person 8:	Additional Person 9:	Additional Person 10:	Additional Person 11:	Additional Person 12:
(1) commuter workers who stay at the sample address to be closer to work; (2) persons who have some other residence.			 □□Yes □□No		 □□Yes □□No	

❖ Copy names with a "Yes" response to 1e.	Respondent:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
I have listed ❖ Read names with a "Yes" response to 1e.	—————————————————————————————————————					
1f. Are you/Is <name> staying here for MORE than two months^?</name>	□□No	□□No	□□No	□□No	□□No	□□No
MARK "Yes":						
(1) persons who are staying MORE than two months^(2) children in shared custody who are currently staying at the sample address, regardless of where they usually	Additional Person 1:	Additional Person 2:	Additional Person 3:	Additional Person 4:	Additional Person 5:	Additional Person 6:
stay (3) commuter workers who stay at the sample address to be closer to work	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No
^ - The two-month period is not anchored by a specific reference date, but can encompass the two months prior	Additional Person 7:	Additional Person 8:	Additional Person 9:	Additional Person 10:	Additional Person 11:	Additional Person 12:
to the interview or the two months following the interview date.	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No
Generate the final roster using the first 1-6 names remaining in the order they were mentioned.	Respondent:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
- Copy names from 1a, 1b, and 1c OMIT anyone with a "Yes" response to 1d.						
- OMIT anyone with a "No" response to 1f.						

Participant ID #:						

Ask as topic-based, that is, ask question for each person before moving to next question.	Householder:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
Use flash card for relationships.		☐☐Opposite-sex	□□Opposite-sex	□□Opposite-sex	□□Opposite-sex	☐☐Opposite-sex
		husband/wife/	husband/wife/	husband/wife/	husband/wife/	husband/wife/
2a. Of the people you named, who owns or rents this place?		spouse	spouse	spouse	spouse	spouse
		□□Opposite-sex	□□Opposite-sex	□□Opposite-sex	□□Opposite-sex	□□Opposite-sex
Fill in response as Householder. When listing non-		unmarried partner				
householders as Persons 2-6, maintain order established in		□□Same-sex husband/wife/				
final roster.		spouse	spouse	spouse	spouse	spouse
		□□Same-sex	□□Same-sex	□□Same-sex	□□Same-sex	Same-sex unmarried
2b. Using this list on my screen, how is <name>/are you related</name>		unmarried partner	unmarried partner	unmarried partner	unmarried partner	partner
to <fill "you"="" <="" householder="" if="" is="" respondent="" td=""><td></td><td>□□Biological</td><td>□□Biological</td><td>□□Biological</td><td>□□Biological</td><td>□□Biological</td></fill>		□□Biological	□□Biological	□□Biological	□□Biological	□□Biological
HOUSEHOLDER NAME>?		Son/Daughter	Son/Daughter	Son/Daughter	Son/Daughter	Son/Daughter
		□□Adopted Son/Daughter				
Opposite-sex husband/wife/spouse		Stepson/	Stepson/	Stepson/	Stepson/	Stepson/
Opposite-sex unmarried partner		Stepdaughter	Stepdaughter	Stepdaughter	Stepdaughter	Stepdaughter
Same-sex husband/wife/spouse		□□Brother/Sister	□□Brother/Sister	□□Brother/Sister	□□Brother/Sister	□□Brother/Sister
Same-sex unmarried partner		□□Father/Mother	□□Father/Mother	□□Father/Mother	□□Father/Mother	□□Father/Mother
Biological son or daughter		□□Grandchild	□□Grandchild	□□Grandchild	□□Grandchild	□□Grandchild
Adopted son or daughter		□□Parent-in-law □□Son/daughter-law	□□Parent-in-law □□Son/daughter-law	□□Parent-in-law □□Son/daughter-law	□□Parent-in-law □□Son/daughter-law	□□Parent-in-law □□Son/daughter-law
Stepson or stepdaughter		□□Son/daughter-law	□□Son/dadgitter-law	□□Son/dadgnter-law □□Other relative	□□Son/daughter-law □□Other relative	□□Son/daughter-law □□Other relative
Brother or sister		□□Roommate/	□□Roommate/	□□Roommate/	□□Roommate/	□□Roommate/
Father or mother		Housemate	Housemate	Housemate	Housemate	Housemate
Grandchild		□□Foster child				
Parent-in-law		☐☐Other nonrelative	☐☐Other nonrelative	☐☐Other nonrelative	☐☐Other nonrelative	□□Other nonrelative
Son-in-law or daughter-in-law						
Other relative						
Roommate or housemate						
Foster child						
Other nonrelative						
❖ UNRELATED HOUSEHOLD CHECK:	<u> </u>	1	<u> </u>	1	1	1

S ENTIRE HOUSEHOLD UNRELATED (relationships for ALL household members are "Roomer/Boarder"," Housemate/Roommate"," Foster child", or "Other non-relative")?

Yes

No

Participant ID #:											
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❖ Ask or verify:	Householder:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
3. Are you/Is <fill householder="">/Is <fill name="" other=""> male or female?</fill></fill>	☐ Male ☐ Female					
 4a. What is your/<fill householder's="">/<fill name's="" other=""> date of birth?</fill></fill> ❖ Enter birth month. ❖ Enter birth day. ❖ Enter birth year (Enter 4 digits - ex: 1964). 	Birth Month: Birth Day: Birth Year:					
4b. Would you say you are/ <name> is <fill age="">?</fill></name>	☐ Yes					
(If no: What is your best estimate of your/ <name's> age?)</name's>	□ No:					
❖ Make sure the respondent gives the age in completed years as of today. Do not round the age up if the person was close to having a birthday. If the exact age is not known, an estimate will do. Do not enter age in months. For babies less than 1 year old, enter 0 as the age.						

❖ Complete all parts of question 5 (A-C) for each person before	Householder:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
moving on to the next person.	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000
5a. Are you/Is <name> of Hispanic, Latino, or Spanish origin?</name>❖ If response is "Yes, of Hispanic, Latino, or Spanish origin," ask	□□No, not of Hispanic, Latino, or Spanish origin	□□No, not of Hispanic, Latino, or Spanish origin	□□No, not of Hispanic, Latino, or Spanish origin	□□No, not of Hispanic, Latino, or Spanish origin	□□No, not of Hispanic, Latino, or Spanish origin	□□No, not of Hispanic, Latino, or Spanish origin
Question 5b. If not, check appropriate box and move to next person.	☐☐Yes, of Hispanic, Latino, or Spanish origin	☐☐Yes, of Hispanic, Latino, or Spanish origin	☐☐Yes, of Hispanic, Latino, or Spanish origin	☐☐Yes, of Hispanic, Latino, or Spanish origin	☐☐Yes, of Hispanic, Latino, or Spanish origin	☐☐Yes, of Hispanic, Latino, or Spanish origin
5b. Are you/Is <name> Mexican, Mexican American, or</name>	ongin	origin	origin	- Origin	origin	- Origin
Chicano; Puerto Rican; Cuban; or of some other Hispanic, Latino, or Spanish Origin?	☐☐Yes, Mexican, Mexican American, or	□□Yes, Mexican, Mexican American, or	☐☐Yes, Mexican, Mexican American, or			
❖ If response is "Yes, another Hispanic, Latino, or Spanish origin," ask Question 5c. Otherwise, check appropriate box and move to	Chicano UYes, Puerto Rican	Chicano	Chicano """ "Yes, Puerto Rican	Chicano	Chicano """ "Yes, Puerto Rican	Chicano
next person.	□□Yes, Cuban					
5c. What is that origin or origins? For example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.?	☐☐Yes, another Hispanic, Latino, or Spanish origin(s):					
Enter the group(s) provided by the respondent in the "Yes, another Hispanic, Latino, or Spanish origin" write-in box.						

		1		1	1	
❖ Complete all parts of Question 6 (A-G) for each person before	Householder:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
moving on to the next person.		0000000000000000 00	000000000000000000000000000000000000	0000000000000 000		000000000000000000000000000000000000
❖ Flashcard: "RACE"	□□White	□□White	□□White	□□White	□□White	□□White
6a. Using this list, choose one or more races.	□□Black or African American	□□Black or African American	□□Black or African American	□□Black or African American	□□Black or African American	□□Black or African American
Are you/Is <name> White, Black or African American, American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, or Some other race?</name>	□□American Indian or Alaska Native	□□American Indian or Alaska Native	□□American Indian or Alaska Native	□□American Indian or Alaska Native	□□American Indian or Alaska Native	□□American Indian or Alaska Native
Other Facilic Islander, or Some other race:	□□Asian	□□Asian	□□Asian	□□Asian	□□Asian	□□Asian
	□□Native Hawaiian or Other Pacific Islander	□□Native Hawaiian or Other Pacific Islander				
	□□Some other race	□□Some other race	□□Some other race	□□Some other race	□□Some other race	□□Some other race
6a_SKIP❖ If person has a response of "White" to Question 6a, ask Question❖ Otherwise, SKIP to 6b_SKIP.	on 6b for that person.					
6b. What is your/ <name's> White origin or origins? For example, German, Irish, English, Italian, Lebanese, Egyptian,</name's>						
etc.						
Enter the group(s) provided by the respondent in the corresponding write-in box in this row.						

6b_SKIP

- ❖ If person has a response of "Black or African American" to Question 6a, ask Question 6c for that person.
- Otherwise, SKIP to 6c_SKIP.

Person 5:

6c. What is your/<NAME's> Black or African American origin or origins? For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.

❖ Enter the group(s) provided by the respondent in the corresponding write-in box in this row.

Householder:	
Origin(s):	

Person 2: 00000000000000000000000000000000000	
Origin(s):	

Person 3:	Person 4:			
	_			
Origin(s):	Origin(s):			
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rigin(s):	Origin(s):

_	0::()
	Origin(s):

Person 6:

6c SKIP

- ❖ If person has a response of "American Indian or Alaska Native" to Question 6a, ask Question 6d for that person.
- Otherwise, SKIP to 6d_SKIP.

6d. What is your/<NAME's> American Indian or Alaska Native enrolled or principal tribe or tribes? For example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc.

❖ Enter the group(s) provided by the respondent in the corresponding write-in box in this row.

Householder:	
Tribe(s):	

Person 2:
Гribe(s):
30000000000000000000000000000000000000

Person 3:	F
] Tribe(s):	_ [T
)0000000000000000000000000000000000000	

erson 4:	Person 5:			
ribe(s):	Tribe(s):			
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Person 6:
Tribe(s):
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6d_SKIP

- ❖ If person has a response of "Asian" to Question 6a, ask Question 6e for that person.
- ❖ Otherwise, SKIP to 6e_SKIP.

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Participant ID #:				 		

6e. You may choose one or more Asian groups. Are you/Is				∏∏Chinese		
<name> Chinese, Filipino, Asian Indian, Vietnamese, Korean, Japanese, or of some other Asian origin?</name>	□□Chinese	□□Chinese	□□Chinese		□□Chinese	□□Chinese
supulces, of or some other riskin origin.	∏∏Filipino	□□Filipino	□□Filipino	□□Filipino	□□Filipino	□□Filipino
❖ If Chinese, Filipino, Asian Indian, Vietnamese, Korean, or Japanese, check the appropriate box.	□□Asian Indian					
❖ If response is "Other Asian," ask Question 6f. Otherwise, check	□□Vietnamese	□□Vietnamese	□□Vietnamese	□□Vietnamese	□□Vietnamese	□□Vietnamese
appropriate box and move to next person.	∏∏Korean	∏Korean	∏Korean	∏Korean	∏∏Korean	∏Korean
6f. What is that origin or origins? For example, Pakistani,	□□Japanese	□□Japanese	□□Japanese	∏Japanese	∏∏Japanese	∏Japanese
Cambodian, Hmong, etc.?	□□Other Asian:					
Enter the group(s) provided in the corresponding Other Asian write-in space in this row.						

6f_SKIP

- If person has a response of "Native Hawaiian or Other Pacific Islander" to Question 6a, ask Question 6g for that person.
 Otherwise, SKIP to 6g_SKIP.

6g. You may choose one or more Pacific Islander groups. Are you/Is <name> Native Hawaiian, Samoan, Chamorro, or of some other Pacific Islander origin?</name>	Householder:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
 If Native Hawaiian, Samoan, or Chamorro, check the appropriate box. If response is "Other Pacific Islander," ask Question 6h. 	□□Native Hawaiian	□□Native Hawaiian	□□Native Hawaiian	□□Native Hawaiian	□□Native Hawaiian	□□Native Hawaiian
Otherwise, check appropriate box and move to next person.	□□Chamorro	□□Chamorro	□□Chamorro	□□Chamorro	□□Chamorro	□□Chamorro
6h. What is that origin or origins? For example, Tongan, Fijian, Marshallese, etc.?	□□Other Pacific Islander:	□□Other Pacific Islander:	□□Other Pacific Islander:	□□Other Pacific Islander:	□□Other Pacific Islander:	□□Other Pacific Islander:
Enter the group(s) provided in the corresponding Other Pacific Islander write-in space in this row.				_		
 6h_SKIP ❖ If person has a response of "Some Other Race" to Question 0 ❖ Otherwise, SKIP to 6i_SKIP. 	6a, ask Question 6i for tha	at person.				
6i. What is your/<name's> other race or origin?</name's>❖ Enter the group(s) provided by the respondent in the corresponding write-in box in this row.		00000000000000000000000000000000000000	00000000000000000000000000000000000000	00000000000000000000000000000000000000	00000000000000000000000000000000000000	00000000000000000000000000000000000000
6i_SKIP ❖ After asking race questions for all persons on roster, continu	e with detailed person qu	estions.				

Participant ID #:					

I will now be asking a series of questions about you/ <name>. The next few questions deal with your/<name's> place of birth and citizenship. 7. Where were you/was <name> born? In the United States Outside the United States ❖ If person was born in the United States, ask: In what state were you born? ❖ Enter the abbreviation for the person's state of birth ❖ If U.S. but state unknown, enter US</name></name's></name>	☐ In the United States State: ☐ Outside the United States	☐ In the United States State: ☐ Outside the United States	☐ In the United States State: ☐ Outside the United States	☐ In the United States State: ☐ Outside the United States	☐ In the United States State: ☐ Outside the United States	☐ In the United States State: ☐ Outside the United States
7_SKIP ❖ If person was born in the United States, SKIP to Question 13a. ❖ Otherwise, go to Question 8.						
8. In what country were you/was <name> born?</name>	Country:	Country:	Country:	Country:	Country:	Country:
9. Are you/Is <name> a citizen of the United States? Yes No</name>	☐ Yes ☐ No					
 9_SKIP ❖ If response is "Yes," go to Question 10. ❖ If response is "No," SKIP to Question 12. 						

Participant ID #	:						
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10. Were you/Was <name> born abroad of U.S. citizen parent or parents, or did you/<name> become a citizen by naturalization? Born abroad of U.S. citizen parent or parents Citizen by naturalization</name></name>	☐ Born abroad of U.S. citizen parent or parents ☐ Citizen by naturalization	☐ Born abroad of U.S. citizen parent or parents ☐ Citizen by naturalization	☐ Born abroad of U.S. citizen parent or parents ☐ Citizen by naturalization	☐ Born abroad of U.S. citizen parent or parents ☐ Citizen by naturalization	☐ Born abroad of U.S. citizen parent or parents ☐ Citizen by naturalization	☐ Born abroad of U.S. citizen parent or parents ☐ Citizen by naturalization
11. In what year did you/ <name> become a naturalized citizen of the United States?</name>	00000000000000000000000000000000000000	00000000000000000000000000000000000000	00000000000000000000000000000000000000	00000000000000000000000000000000000000	00000000000000000000000000000000000000	00000000000000000000000000000000000000
12. When did you/ <name> come to live in the United States? If you/<name> came to live in the United States more than once, give the latest year.</name></name>			000000000000000000000000000000000000000		00000000000000000000000000000000000000	00000000000000000000000000000000000000
The next questions are about schooling and education.	☐ Yes ☐ No					
13a. At any time IN THE LAST 3 MONTHS, have you/has <name> attended school or college? Include only nursery or preschool, kindergarten, elementary school, home school, and schooling that leads to a high school diploma or a college degree.</name>						
Yes No						
13a_SKIP ❖ If response is "Yes," go to Question 13b. ❖ If response is "No," SKIP to Question 14.						
13b. Was that a public school or college, a private school or college, or home school?	Public school or college	☐ Public school or college	☐ Public school or college	Public school or college	☐ Public school or college	Public school or college
Public school or college Private school or college or home school	Private school or college or home school	Private school or college or home school	Private school or college or home school	Private school or college or home school	Private school or college or home school	Private school or college or home school

13c. What grade or level were you/was <name> attending?</name>	□□Nursery school or preschool	□□Nursery school or preschool	□□Nursery school or preschool	□□Nursery school or preschool	□□Nursery school or preschool	□□Nursery school or preschool
Nursery school or preschool	□□Kindergarten	□□Kindergarten	□□Kindergarten	□□Kindergarten	□□Kindergarten	□□Kindergarten
Kindergarten	□□Grade 1	□□Grade 1	□□Grade 1	□□Grade 1	□□Grade 1	□□Grade 1
Grade 1	□□Grade 2	□□Grade 2	□□Grade 2	□□Grade 2	□□Grade 2	□□Grade 2
Grade 2	☐☐Grade 3	☐☐Grade 3	☐☐Grade 3	□□Grade 3	☐☐Grade 3	□□Grade 3
Grade 3	□□Grade 4	□□Grade 4	□□Grade 4	□□Grade 4	□□Grade 4	□□Grade 4
Grade 4 Grade 5	□□Grade 5	□□Grade 5	□□Grade 5	□□Grade 5	□□Grade 5	□□Grade 5
Grade 6	□□Grade 5	□□Grade 6	□□Grade 5	□□Grade 6	□□Grade 5	□□Grade 6
Grade 7						
Grade 8	□□Grade 7	Grade 7	Grade 7	Grade 7	□□Grade 7	□□Grade 7
Grade 9	□□Grade 8	□□Grade 8	□□Grade 8	□□Grade 8	□□Grade 8	□□Grade 8
Grade 10	□□Grade 9	□□Grade 9	□□Grade 9	□□Grade 9	□□Grade 9	□□Grade 9
Grade 11	□□Grade 10	□□Grade 10	□□Grade 10	□□Grade 10	□□Grade 10	□□Grade 10
Grade 12	□□Grade 11	□□Grade 11	□□Grade 11	□□Grade 11	□□Grade 11	□□Grade 11
College undergraduate years, that is a college freshman to senior	□□Grade 12	□□Grade 12	□□Grade 12	□□Grade 12	□□Grade 12	□□Grade 12
Graduate or professional school beyond a bachelor's degree, for example a	□□College	□□College	□□College	□□College	□□College	□□College
Master's or PhD program or medical or law school	undergraduate years, that is a college freshman to senior	undergraduate years, that is a college freshman to senior	undergraduate years, that is a college freshman to senior	undergraduate years, that is a college freshman to senior	undergraduate years, that is a college freshman to senior	undergraduate years, that is a college freshman to senior
	Graduate or professional school beyond a bachelor's degree, for example a Master's or PhD program or medical or law school	Graduate or professional school beyond a bachelor's degree, for example a Master's or PhD program or medical or law school	Graduate or professional school beyond a bachelor's degree, for example a Master's or PhD program or medical or law school	☐☐Graduate or professional school beyond a bachelor's degree, for example a Master's or PhD program or medical or law school	Graduate or professional school beyond a bachelor's degree, for example a Master's or PhD program or medical or law school	Graduate or professional school beyond a bachelor's degree, for example a Master's or PhD program or medical or law school

❖ Complete Question 14 for each person before moving on to the next question.	□□Less than 1 year	□□Less than 1 year	□□Less than 1 year	□□Less than 1 year	□□Less than 1 year	☐☐Less than 1 year
	of school	of school	of school	of school	of school	of school
❖ Use flashcard for highest level of school or degree completed.	completed	completed	completed	completed	completed	completed
	□□Nursery school	□□Nursery school	□□Nursery school	□□Nursery school	□□Nursery school	□□Nursery school
14. Using this list, what is the highest level of school or degree you	or preschool	or preschool	or preschool	or preschool	or preschool	or preschool
have/ <name> has COMPLETED? If you are/<name> is currently enrolled,</name></name>	□□Kindergarten	∏Kindergarten	□□Kindergarten	□□Kindergarten	□□Kindergarten	□□Kindergarten
select the previous grade or highest degree received.	□□Grade 1	Grade 1	□□Grade 1	□□Grade 1	□□Grade 1	Grade 1
Select the previous grade of highest degree received.	□□Grade 2	Grade 2	□□Grade 2	□□Grade 2	□□Grade 2	Grade 2
	Grade 3	Grade 3	Grade 3	Grade 3	Grade 3	Grade 3
Less than 1 year of school completed	Grade 4	Grade 4	Grade 4	Grade 4	Grade 4	Grade 4
Nursery school or preschool	□□Grade 5 □ Grade 6	□□Grade 5 □ Grade 6	□□Grade 5 □ Grade 6	□□Grade 5 □ Grade 6	□□Grade 5 □ Grade 6	□□Grade 5 □ Grade 6
Kindergarten	☐Grade 7	☐Grade 7	☐Grade 7	☐Grade 7	☐Grade 7	☐ Grade 6
Grade 1	□□Grade 7	☐☐Grade 8	□□Grade 8	□□Grade 7	□□Grade 8	□□Grade 8
Grade 2	□□Grade 9	☐☐Grade 9	□□Grade 9	□□Grade 9	☐Grade 9	☐☐Grade 9
Grade 3	□□Grade 10	□□Grade 3	□□Grade 10	□□Grade 10	□□Grade 10	□□Grade 10
Grade 4	□□Grade 11	Grade 11	□□Grade 11	□□Grade 11	Grade 11	☐☐Grade 11
Grade 5	□□Grade 12, no	□□Grade 12, no	□□Grade 12, no	□□Grade 12, no	□□Grade 12, no	□□Grade 12, no
	diploma	diploma	diploma	diploma	diploma	diploma
Grade 6	□□Regular high	□□Regular high	□□Regular high	□□Regular high	□□Regular high	□□Regular high
Grade 7	school diploma	school diploma	school diploma	school diploma	school diploma	school diploma
Grade 8	□□GED or	□□GED or	□□GED or	□□GED or	□□GED or	□□GED or
Grade 9	alternative	alternative	alternative	alternative	alternative	alternative
Grade 10	credential	credential	credential	credential	credential	credential
Grade 11	□□Some college,	□□Some college,	□□Some college,	□□Some college,	□□Some college,	□□Some college,
Grade 12, no diploma	no degree	no degree	no degree	no degree	no degree	no degree
Regular high school diploma	□□1 or more years	□□1 or more years	□□1 or more years	□□1 or more years	□□1 or more years	□□1 or more years
9 9 1	of college credit,	of college credit,	of college credit,	of college credit,	of college credit,	of college credit,
GED or alternative credential	no degree ∏∏Associate's	no degree	no degree	no degree	no degree	no degree
Some college, no degree	degree	□□Associate's degree	□□Associate's degree	□□Associate's degree	□□Associate's degree	□□Associate's degree
Associate's degree (for example: AA, AS)	□□Bachelor's	□□Bachelor's	□□Bachelor's	☐☐Bachelor's	□□Bachelor's	□□Bachelor's
Bachelor's degree (for example: BA, BS)	degree	degree	degree	degree	degree	degree
Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)	☐☐Master's degree	☐☐Master's degree	☐☐Master's degree	☐☐Master's degree	☐☐Master's degree	☐☐Master's degree
Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM,	□□Professional	□□Professional	□□Professional	□□Professional	□□Professional	□□Professional
LLB, JD)	degree beyond a	degree beyond a	degree beyond a	degree beyond a	degree beyond a	degree beyond a
Doctorate degree (for example: PhD, EdD)	bachelor's degree	bachelor's degree	bachelor's degree	bachelor's degree	bachelor's degree	bachelor's degree
Doctorate degree (for example, Fild)	□□Doctorate degree	□□Doctorate degree	□□Doctorate degree	□□Doctorate degree	□□Doctorate degree	□□Doctorate degree
A.D 1/07 1 1. 1. 1.1 1.1 1.1	□□Vocational and	□□Vocational and	□□Vocational and	□□Vocational and	□□Vocational and	□□Vocational and
❖ Do not read "Vocational and technical license."	technical license	technical license	technical license	technical license	technical license	technical license

14 SKIP

❖ If response to Question 14 ranges from "Less than grade 1" to "Grade 10" or is "Associate's degree," SKIP to Question 20.

□□Less than 1 year of

school completed

- ❖ If response to Question 13a is "No" and response to Question 14 is "Grade 11," SKIP to Question 16.
- ❖ If response to Question 13a is "Yes" and response to Question 14 is "Grade 11," SKIP to Question 20.
- ❖ If response to Question 14 is "Grade 12, no diploma" or "Regular high school diploma," SKIP to Question 16.
- ❖ If response to Question 14 is "GED or alternative credential," SKIP to Question 17.
- ❖ If response to Question 14 is "Some college credit, no degree," SKIP to Question 18.
- ❖ If response to Question 14 ranges from "Bachelor's degree" to "Doctorate degree," SKIP to Question 19.
- ❖ If response to Question 14 is "Vocational or technical license," go to Question 15.

15. Other than the vocational or technical license, what is the highest level of school or degree you have/<NAME> has COMPLETED?

∐Nursery school or	∐∐Nursery school or
preschool	preschool
∐Kindergarten	∏∏Kindergarten
□Grade 1	□□Grade 1
□Grade 2	□□Grade 2
□Grade 3	□□Grade 3
□Grade 4	□□Grade 4
∏Grade 5	□□Grade 5
Grade 6	☐ Grade 6
□Grade 7	□□Grade 7
∐Grade 8	∏∏Grade 8
∐Grade 9	∏∏Grade 9
□Grade 10	□□Grade 10
□Grade 11	□□Grade 11
□Grade 12, no diploma	□□Grade 12, no diploma
∏Regular high school	□□Regular high school
diploma	diploma
☐GED or alternative	□□GED or alternative
credential	credential
□Some college, no	∏∏Some college, no
degree	degree
$\square 1$ or more years of	□□1 or more years of
college credit, no degree	college credit, no degree
□Associate's degree	□□Associate's degree
□Bachelor's degree	□□Bachelor's degree
∏Master's degree	□□Master's degree
□Professional degree	□□Professional degree
beyond a bachelor's	beyond a bachelor's
degree	degree
Doctorate degree	□□Doctorate degree

□□Less than 1 year of

school completed

. 10.	
☐Less than 1 year of	
school completed	s
□Nursery school or	
preschool	F
□Kindergarten	
□Grade 1	
□Grade 2	
□Grade 3	
□Grade 4	
□Grade 5	
Grade 6	
□Grade 7	
□Grade 8	
_ □Grade 9	
□Grade 10	
□Grade 11	
☐Grade 12, no diploma	
∏Regular high school	
diploma	c
☐GED or alternative	
credential	c
□Some college, no	
degree	c
☐1 or more years of	
college credit, no degree	C
☐Associate's degree	
□Bachelor's degree	
□Master's degree	
☐Professional degree	
beyond a bachelor's	l b
degree	
Doctorate degree	

☐Less than 1 year of	□□Less than 1 year of
school completed	school completed
□Nursery school or	□□Nursery school or
preschool	preschool
∏Kindergarten	□□Kindergarten
□Grade 1	□□Grade 1
□Grade 2	□□Grade 2
∏Grade 3	□□Grade 3
□Grade 4	□□Grade 4
□Grade 5	□□Grade 5
Grade 6	☐ Grade 6
□Grade 7	□□Grade 7
□Grade 8	□□Grade 8
□Grade 9	□□Grade 9
□Grade 10	□□Grade 10
□Grade 11	□□Grade 11
□Grade 12, no diploma	□□Grade 12, no diploma
∏Regular high school	□□Regular high school
diploma	diploma
☐GED or alternative	□□GED or alternative
credential	credential
□Some college, no	□□Some college, no
degree	degree
☐1 or more years of	□□1 or more years of
college credit, no degree	college credit, no degre
□Associate's degree	□□Associate's degree
□Bachelor's degree	□□Bachelor's degree
∏Master's degree	□□Master's degree
□Professional degree	□□Professional degree
beyond a bachelor's	beyond a bachelor's
degree	degree
□Doctorate degree	□□Doctorate degree

	□□Less than 1 year of
	school completed
	□□Nursery school or
	preschool
	□□Kindergarten
	□□Grade 1
	□□Grade 2
	□□Grade 3
	□□Grade 4
	□□Grade 5
	☐ Grade 6
	□□Grade 7
	□□Grade 8
	□□Grade 9
	□□Grade 10
	□□Grade 11
a	☐☐Grade 12, no diploma
	□□Regular high school
	diploma
	☐☐GED or alternative
	credential
	□□Some college, no
	degree
	□□1 or more years of
ee	college credit, no degree
	□□Associate's degree
	□□Bachelor's degree
	□□Master's degree
	□□Professional degree
	beyond a bachelor's
	degree

□□Doctorate degree

 15_SKIP ❖ If response to Question 15 ranges from "Less than grade 1" to "Grade 10" or is "Associate's degree," SKIP to Question 20. ❖ If response to Question 13a is "No" and response to Question 15 is "Grade 11," go to Question 16. ❖ If response to Question 13a is "Yes" and response to Question 15 is "Grade 11," SKIP to Question 20. ❖ If response to Question 14 is "Grade 12, no diploma" or "Regular high school diploma," go to Question 16. ❖ If response to Question 14 is "GED or alternative credential," SKIP to Question 17. ❖ If response to Question 14 is "Some college credit, no degree," SKIP to Question 18. ❖ If response to Question 14 ranges from "Bachelor's degree" to "Doctorate degree," SKIP to Question 19. 										
16. Did you/ <name> receive a high school diploma, a GED or alternative credential?</name>	□□Regular high school diploma □□GED or alternative credential □□No diploma or GED	□□Regular high school diploma □□GED or alternative credential □□No diploma or GED	□□Regular high school diploma □□GED or alternative credential □□No diploma or GED	□□Regular high school diploma □□GED or alternative credential □□No diploma or GED	□□Regular high school diploma □□GED or alternative credential □□No diploma or GED	□□Regular high school diploma □□GED or alternative credential □□No diploma or GED				
16_SKIP ❖ If response is "No diploma or GED," SKIP to Question 20. ❖ Otherwise, go to Question 17.										
17. Did you/ <name> complete any college credit? Yes No</name>	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No				
17_SKIP ❖ If response is "No," SKIP to Question 20. ❖ Otherwise, go to Question 18.										
18. Did you/ <name> complete 1 or more years of college credit?</name>	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No				
Yes No										
18_SKIP ❖ If Question 18 was asked, SKIP to Question 20.										

19. This question focuses on your/ <name's> BACHELOR'S DEGREE. What was the specific major or majors of any BACHELOR'S DEGREES you have/<name> has received? For example, chemical engineering, elementary teacher education or organizational psychology. ❖ If this person has more than one major or Bachelor's degree, ask for all major fields. Separate with commas.</name></name's>						
20. What is your/ <name's> ancestry or ethnic origin? (For example: Italian, Jamaican, African-American, Cambodian, Cape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian and so on.)</name's>			000000000000000000000000000000000000000	000000000000000000000000000000000000000		
21a. Do you/Does <name> speak a language other than English at home? Yes No</name>	□□Yes □□No	□□Yes □□No□	□□Yes □□No□	□□Yes □□No□	□□Yes □□No□	□□Yes □□No
 21a_SKIP ❖ If response is "No," SKIP to Question 22a for that person. ❖ Otherwise, go to Question 21b for that person. 						
21b. What is this language? (For example: Korean, Italian, Spanish, Vietnamese)						
21c. How well do you/does <name> speak English- Very well, Well, Not well, or Not at all?</name>	□□Very well □□Well □□Not well □□Not at all	Uvery well Well Not well Not at all	□□Very well □□Well □□Not well □□Not at all	□□Very well □□Well □□Not well □□Not at all	Uvery well Well Not well Not at all	□□Very well □□Well □□Not well □□Not at all

Participant ID #:		l	l	l .		l	l	
Participant III #"	l .	l	I	l .		l	l	
I di dicipulit 1D II.	1	l	I	l .		l	ı	

22a. Did you/ <name> live in this <fill building="" type=""> 1 year ago? Yes No 22a_SKIP ❖ If response is "Yes," SKIP to Question 23a. ❖ Otherwise, go to Question 22b.</fill></name>	□□Yes □□No□	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No
22b. Did you/ <name> live in- the United States, Puerto Rico, or another country?</name>	□□United States □□Puerto Rico □□Another country	□□United States □□Puerto Rico □□Another country	United States UPuerto Rico UAnother country	□□United States □□Puerto Rico □□Another country	□□United States □□Puerto Rico □□Another country	□□United States □□Puerto Rico □□Another country
 22b_SKIP ❖ If response is "United States" or "Puerto Rico," SKIP to Question 22d. ❖ Otherwise, go to Question 22c. 						
22c. What was the foreign country?	Foreign Country:	Foreign Country:	Foreign Country:	Foreign Country:	Foreign Country:	Foreign Country:
22c_SKIP ❖ If response is "Puerto Rico," go to Question 22d. ❖ Otherwise, SKIP to Question 23a.						

22d. What was the street address?	Last Street Address:					
22e. What was the city or town?	Last City Address:					
22f. What was the county/ <fill "municipio"="" if="" puerto="" rico="">?</fill>	Last County:					
 22f_SKIP If person lived in Puerto Rico, SKIP to Question 22h. Otherwise, go to Question 22g. 						
22g. What was the state?	Last State:					
22h. What was the ZIP Code?	Last Zip Code:					

❖ Complete Questions 23a – 24b for each person before moving on to the next person.	☐ Yes ☐ No					
I am now going to ask you some questions about your/ <name's> health insurance and health coverage. Do NOT include plans that cover only one type of service, such as dental, drug or vision plans.</name's>						
23a. Are you/Is <name> currently covered by health insurance through a current or former employer, union, or professional association of yours or another family member/[him/her] or another family member>?</name>						
Yes No						
23b. Are you/Is <name> currently covered by Medicare, for people age 65 or older or people with certain disabilities?</name>	☐ Yes ☐ No					
Yes No						
23c. Are you/Is <name> currently covered by Medicaid, the Children's Health Insurance Program (CHIP) or any kind of government-assistance plan for those with low incomes or a disability?</name>	☐ Yes ☐ No					
Yes No						
23d. Are you/Is <name> currently covered by health insurance purchased directly from an insurance company, through a State or Federal Marketplace, HealthCare.gov, or a similar website by you or another family member/<[him/her] or another family member>?</name>	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	□ Yes □ No	☐ Yes ☐ No	☐ Yes ☐ No
Yes No						

Participant ID #:					

23e. Are you/Is <name> currently covered by TRICARE or other military health care?</name>	☐ Yes ☐ No					
Yes No						
23f. Are you/Is <name> currently covered through the VA or enrolled for VA health care?</name>	☐ Yes ☐ No					
Yes No						
23g. Are you/Is <name> currently covered through the Indian Health Service?</name>	☐ Yes ☐ No					
Yes No						
23h. Are you/Is <name> currently covered by any other health insurance or health coverage plan?</name>	☐ Yes ☐ No					
Yes No						
23h_SKIP ❖ If response was not "Yes" to any questions 23a through 23h, SKIP to Questio ❖ Otherwise, go to Question 24a.	n 25a.					
24a. Is there a premium for this plan? A premium is a fixed amount of money paid on a regular basis for health coverage. It does not include copays, deductibles, or other expenses such as prescription costs.	☐ Yes ☐ No					
Yes No						

24a_SKIP

- ❖ If response is "No," SKIP to Question 25a.
- Otherwise, go to Question 24b.

24b. Do you/does <name> or another family member receive a tax credit or subsidy based on family income to help pay the premium?</name>	☐ Yes ☐ No					
Yes No						
Complete all parts of Questions 25 (A-B), 26 (A-D), and 27 for each person before moving on to the next person.	□□No difficulty □□Some difficulty	□□No difficulty □□Some difficulty	□□No difficulty □□Some difficulty			
The next questions ask about difficulties you/ $<$ NAME $>$ may have doing certain activities.	☐☐A lot of difficulty ☐☐Cannot do at	□□A lot of difficulty □□Cannot do at	☐A lot of difficulty ☐Cannot do at	☐☐A lot of difficulty ☐☐Cannot do at	☐☐A lot of difficulty ☐☐Cannot do at	□□A lot of difficulty □□Cannot do at
25a. Do you/does <name> have difficulty seeing, even if wearing glasses?</name>	all	all	all	all	all	all
No difficulty Some difficulty A lot of difficulty Cannot do at all						
25b. Do you/does <name> have difficulty hearing, even if using a hearing aid? No difficulty Some difficulty A lot of difficulty Cannot do at all</name>	☐☐No difficulty ☐☐Some difficulty ☐☐A lot of difficulty ☐☐Cannot do at all	☐☐No difficulty ☐☐Some difficulty ☐☐A lot of difficulty ☐☐Cannot do at all	☐☐No difficulty ☐☐Some difficulty ☐☐A lot of difficulty ☐☐Cannot do at all	☐☐No difficulty ☐☐Some difficulty ☐☐A lot of difficulty ☐☐Cannot do at all	☐☐No difficulty ☐☐Some difficulty ☐☐A lot of difficulty ☐☐Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all

25b_SKIP

- ❖ If person is at least 5 years old, ask Questions 26a through 26d for that person.
- Otherwise, the interview is closed.

26a. Do you/does <name> have difficulty walking or climbing steps? No difficulty Some difficulty A lot of difficulty Cannot do at all</name>	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all
26b. Do you/does <name> have difficulty remembering or concentrating? No difficulty Some difficulty A lot of difficulty Cannot do at all</name>	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all
26c. Do you/does <name> have difficulty with self care, such as washing all over or dressing? No difficulty Some difficulty A lot of difficulty Cannot do at all</name>	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	☐☐No difficulty ☐☐Some difficulty ☐☐A lot of difficulty ☐☐Cannot do at all	☐ No difficulty ☐ Some difficulty ☐ A lot of difficulty ☐ Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	☐ No difficulty ☐ Some difficulty ☐ A lot of difficulty ☐ Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all
26d. Using your/ <his her=""> usual language, do you/does <name> have difficulty communicating, for example understanding or being understood? No difficulty Some difficulty A lot of difficulty Cannot do at all</name></his>	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all

201	CIZID
26d	SKIP

- If person is at least 15 years old, ask Question 27 for that person.Otherwise, move on to next person.

	_					_
27. Because of a physical, mental, or emotional condition, do you/does <name> have difficulty doing errands alone such as visiting a doctor's office or shopping? No difficulty Some difficulty A lot of difficulty Cannot do at all</name>	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all	□□No difficulty □□Some difficulty □□A lot of difficulty □□Cannot do at all
28. I will now be asking about your/ <name's> marital status. Are you/Is <name>-</name></name's>	☐☐Married ☐☐Widowed ☐☐Divorced ☐☐Separated ☐☐Never married	☐Married ☐Widowed ☐Divorced ☐Separated ☐Never married	☐ Married ☐ Widowed ☐ Divorced ☐ Separated ☐ Never married	☐☐Married ☐☐Widowed ☐☐Divorced ☐☐Separated ☐☐Never married	☐☐Married ☐☐Widowed ☐☐Divorced ☐☐Separated ☐☐Never married	☐☐Married ☐☐Widowed ☐☐Divorced ☐☐Separated ☐☐Never married
Married, Widowed, Divorced, Separated, or Never married?						