

## Attachment 6: Respondent Data Collection Sheet (face-to-face interviews conducted at NCHS or offsite)

Form Approved  
OMB No. 0920-0222  
Exp. Date: 01/31/2026

**Notice** – CDC estimates the average public reporting burden for this collection of information as 5 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering, and maintaining the data/information needed, and completing and reviewing the collection of information. 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, MS H21-8, Atlanta, GA 30333; ATTN: PRA (0920-0222).

**Assurance of Confidentiality:** We take your privacy very seriously. All information that relates to or describes identifiable characteristics of individuals, a practice, or an establishment will be used only for statistical purposes. NCHS staff, contractors, and agents will not disclose or release responses in identifiable form without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 U.S.C. 242m(d)) and the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. 3561-3583). In accordance with CIPSEA, every NCHS employee, contractor, and agent has taken an oath and is subject to a jail term of up to five years, a fine of up to \$250,000, or both if he or she willfully discloses ANY identifiable information about you. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service  
Centers for Disease Control and Prevention

National Center for Health Statistics  
3311 Toledo Road  
Hyattsville, Maryland 20782

### Respondent Data Collection Sheet

**This form asks for basic information about you. At the end of the study, your information will be combined with information from other people in the study and will help us form a picture of the characteristics the people who participated in our study. For our records we would appreciate it if you would take a minute to fill out this form.**

#### 1. How did you hear about us?

Newspaper	Craigslist	Email list	Facebook/Reddit
Flyer	We called you to come back	Friend	Other

#### 2. What is your gender?

Male    Female    Other \_\_\_\_\_

#### 3. What is your age?

\_\_\_\_\_

#### 4. What is your marital status?

Married    Divorced    Widowed    Separated    Never been married    Living with a partner

#### 5. Are you Hispanic or Latino?

Yes    No

#### 6. What is your race? Mark one or more races to indicate what you consider yourself to be.

American Indian or Alaska Native  
Asian  
Black or African American  
Native Hawaiian or other Pacific Islander  
White

**7. What is the highest level of school you have completed?**

Less than High School (No Diploma or GED)

High School Diploma or GED

Associate Degree

Some College

Bachelor's Degree

Graduate Degree

**8. Are you currently employed?**

Yes

No

**9. What is your total household income?**

\$0-19,999

\$20,000-\$44,999

\$45,000-\$79,999

\$80,000 or more

## Attachment 6: Respondent Data Collection Sheet (virtual interviews)

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DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service  
Centers for Disease Control and Prevention

National Center for Health Statistics  
3311 Toledo Road  
Hyattsville, Maryland 20782

### Respondent Data Collection Sheet

I'd like to gather some basic information about you. At the end of the study, this information will be combined with information from other people in the study and will help us form a picture of the characteristics the people who participated in our study. For our records we would appreciate it if you would take a minute to answer these questions.

#### 1. How did you hear about us?

Newspaper	Craigslist	Email list	Facebook/Reddit
Flyer	We called you to come back	Friend	Other

#### 2. What is your gender?

Male    Female    Other \_\_\_\_\_

#### 3. What is your age?

\_\_\_\_\_

#### 4. What is your marital status?

Married    Divorced    Widowed    Separated    Never been married    Living with a partner

#### 5. Are you Hispanic or Latino?

Yes    No

#### 6. What is your race? Mark one or more races to indicate what you consider yourself to be.

American Indian or Alaska Native  
Asian  
Black or African American  
Native Hawaiian or other Pacific Islander  
White

#### 7. What is the highest level of school you have completed?

Less than High School (No Diploma or GED)  
High School Diploma or GED  
Associate Degree  
Some College  
Bachelor's Degree  
Graduate Degree

**8. Are you currently employed?**

Yes      No

**9. What is your total household income?**

\$0-19,999      \$20,000-\$44,999      \$45,000-\$79,999      \$80,000 or more