# For CC - Military Panel Replenishment 2025

PARADATA Click to write the question text
Browser (1)
Version (2)
Operating System (3)
Screen Resolution (4)
Flash Version (5)
Java Support (6)
User Agent (7)

DELETE DELETE BEFORE FIELDING. TREATMENT = \${e://Field/TREATMENT}

INTRO First, we will provide you with some information about the Census Military Panel, your rights as a respondent, and how we are going to protect your privacy.

PRA The authority for the collection of this information for the Census Military Panel (0607-1027) is provided under 10 U.S.C. Section 1782. The Census Military Panel is a national survey panel by the U.S. Census Bureau (Census) and the U.S. Department of Defense (DoD). Data collected from active-duty service members and their spouses on a variety of topics through the Panel will be used to improve military life and policies affecting active-service members and their families. Personally identifiable information collected includes Name. Address, Telephone/Cell phone Number, DOB or Age, Email address, and Race or Ethnicity. Your privacy is protected by the Privacy Act (Title 5, U.S. Code, Section 552a). Routine uses of these data are limited to those identified in the Privacy Act System of Record Notice titled. COMMERCE/Census-3 Demographic Survey Collection (Census Bureau Sampling Frame). The Census Bureau can use your responses only to produce statistics and is not permitted to publicly release your responses in a way that could identify you. The Census Bureau, on behalf of the Department of Defense, is conducting this voluntary study under the authority of 10 U.S.C. Section 1782. Your privacy is protected by the Privacy Act of 1974 (5 U.S.C. Section 552a). This collection has been approved by the Office of Management and Budget (OMB). This eight-digit OMB approval number, 0607-1027, confirms this approval and expires on 08/31/2026. Send comments regarding this time estimate or any other aspect of this survey to adrm.pra@census.gov. The uses of your data are limited to those identified in the Privacy Act System of Record Notice titled, COMMERCE/Census-7 Demographic Survey Collection (non-Census Bureau Sampling Frame). The public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

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### WARNING \*\*U.S. Census Bureau Notice and Consent Warning\*\*

You are accessing a United States Government computer network. Any information you enter into this system is confidential. It may be used by the Census Bureau for statistical purposes and to improve the website. If you want to know more about the use of this system, and how your privacy is protected, visit our online privacy webpage at http://www.census.gov/about/policies/privacy/privacy-policy.html.

Use of this system indicates your consent to collection, monitoring, recording, and use of the information that you provide for any lawful government purpose. So that our website remains safe and available for its intended use, network traffic is monitored to identify unauthorized attempts to access, upload, change information, or otherwise cause damage to the web service. Use of the government computer network for unauthorized purposes is a violation of Federal law and can be punished with fines or imprisonment (PUBLIC LAW 99-474).

**End of Block: INTRO** 

# CONFIRM\_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4) CONFIRM Are you \${m://FirstName} \${m://LastName}? O Yes (1) O Yes, but needs to be updated (2) O No (3)

NAME_CORR_TIME Timing	
First Click (1)	
Last Click (2) Page Submit (3)	
Click Count (4)	
	-
Display This Question:	
If Are you \${m://FirstName} \${m://LastName}? = Yes, but needs to be updated	
NAME_CORR What is your name?	
O First Name (1)	
O Last Name (2)	
End of Block: CONFIRM PERSON	
Start of Block: ELIGIBILITY	
DEM14 TIME Timing	
DEM14_TIME Timing First Click (1)	
Last Click (2)	
Page Submit (3)	
Click Count (4)	

response(s). Select all that apply.
No (1)
Yes, I'm serving on active duty (2)
Yes, I'm serving in the Reserve or National Guard (3)
Yes, my spouse is serving on active duty (4)
Yes, my spouse is serving in the Reserve or National Guard (5)
Page Break ————————————————————————————————————

DEM14 Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or National Guard)? Reserve and Guard members/spouses who are full-time active duty (AGR/FTS/AR) or currently "activated" should select the "Reserve or National Guard"

If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = No
CONFIRM To confirm, neither you nor your spouse are currently serving in the military. If that is correct, please select 'Confirm' below. Otherwise, please update your response on the previous page.
Confirm (1)
End of Block: ELIGIBILITY
Start of Block: BRANCH AND GRADE
Display This Question:
If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty
Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard
- Tanasar - Sas, rim add ring in the receive of realiental Stated
BRANCH Which branch of the military are you serving in?
O Army (1)
O Navy (2)
O Marine Corps (3)
O Air Force/Space Force (4)
Other, please specify: (5)

# Display This Question:

Display This Ouestion:

If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, my spouse is serving on active duty

Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, my spouse is serving in the Reserve or National Guard

BRANCH_SP Which branch of the military is your spouse serving in?
O Army (1)
O Navy (2)
O Marine Corps (3)
O Air Force/Space Force (4)
Other, please specify: (5)
Display This Question:
If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty
Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or
Natio = Yes, I'm serving in the Reserve or National Guard
GRADE What is your current grade?
O E1 (1)
O E2 (2)
O E3 (3)
O E4 (4)
Other, please specify: (5)

# Display This Question:

If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, my spouse is serving on active duty

Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, my spouse is serving in the Reserve or National Guard

GRADE_SP What is your spouse's current grade?
O E1 (1)
O E2 (2)
O E3 (3)
O E4 (4)
Other, please specify: (5)
Page Break ————————————————————————————————————
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Display This Question:
If What is your current grade? != E1
And What is your current grade? != E2
And What is your current grade? != E3
And What is your current grade? != E4
And What is your spouse's current grade? != E1
And What is your spouse's current grade? != E2
And What is your spouse's current grade? != E3
And What is your spouse's current grade? != E4
Confirm2 To confirm, neither you nor your spouse are currently serving in grades E1, E2, E3, or E4. If that is correct, please select 'Confirm' below. Otherwise, please update your response on the previous page.
Confirm (1)
End of Block: BRANCH AND GRADE
Start of Block: JOIN THANK YOU
THANKYOU_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
ELIG_CONF By clicking "Next" below, you are agreeing to enroll in the Census Military Panel and receive an invitation to future Census Military Panel surveys. You are eligible to earn \$20 upon completion of this enrollment survey and will be eligible to receive additional incentive payments for participating in future Panel surveys.  End of Block: JOIN THANK YOU
Start of Block: LIVING SITUATION

DR5a_5b_TIME Timing First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
INTRO_LIVING First, we would like to ask some questions about your living situation.
Display This Question:
If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty
Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard
DR5a Where do you live at your permanent duty station?
O Aboard ship (1)
O Government-owned barracks, dorm, bachelor quarters, or unaccompanied enlisted or
officer housing on base (2)
O Government-owned family housing on base (3)
O Government-owned or leased family housing off base (4)
O Privatized housing on base that you rent (5)
O Privatized housing off base that you rent (6)
O Civilian housing off base that you own or pay mortgage on (7)
O Civilian housing off base that you rent (8)
Other, please specify: (9)

\_\_\_\_\_

# Display This Question:

If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... != Yes, I'm serving on active duty

And Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... != Yes, I'm serving in the Reserve or National Guard

### And If

Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, my spouse is serving on active duty

Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, my spouse is serving in the Reserve or National Guard

DR5b Which of the following best describes where you currently live?
O Military housing on base (1)
Military housing off base (2)
O Civilian housing off base that you own or pay mortgage on (3)
O Civilian housing off base that you rent (4)
End of Block: LIVING SITUATION
Start of Block: HOUSEHOLD COUNTS
Page Break ————————————————————————————————————

R4_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
Display This Question:
If Where do you live at your permanent duty station? != Aboard ship
And Where do you live at your permanent duty station? != Government-owned barracks, dorm, bachelor quarters, or unaccompanied enlisted or officer housing on base
*
R4 Including yourself, how many adults 18 years of age or older consider this their primary
residence? Please don't count anyone who lives most of their time somewhere else, even if they are currently staying here.
<del></del>

First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
Display This Question:
If Where do you live at your permanent duty station? != Aboard ship
And Where do you live at your permanent duty station? != Government-owned barracks, dorm, bachelor quarters, or unaccompanied enlisted or officer housing on base
*
DROSTER1 How many <b>children under the age of 18</b> are currently staying here? <i>If none, enter 0.</i>

DROSTER2_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
*
DROSTER2 How many <b>legal dependent</b> children do you have <b>under the age of 18</b> that do NOT currently live here with you? <i>If none, enter 0. Legal dependent children include children who have, or are eligible to have, a Uniformed Services Identification and Privilege card (also called a military ID card) or is eligible for military health care benefits and is enrolled in the Defense Enrollment Eligibility Reporting System (DEERS).</i>
Page Break ————————————————————————————————————

End of Block: HOUSEHOLD COUNTS

Start of Block: HHROSTER - MULTI-PERSON

# HH\_ROSTER\_TIME Timing

First Click (1)

Last Click (2)

Page Submit (3)

Click Count (4)

\_\_\_\_\_\_

Display This Question:

If HHNUMBER >= 2



HH\_ROSTER Please tell us the names of the people currently living in your household, including yourself. **Please list yourself first.** 

Display This Choice:

If HHNUMBER >= 2

Display This Choice:

If HHNUMBER >= 3

Display This Choice:

If HHNUMBER >= 4 Display This Choice: If HHNUMBER >= 5 Display This Choice: If HHNUMBER >= 6 Display This Choice: If HHNUMBER >= 7 Display This Choice: If HHNUMBER >= 8 Display This Choice: If HHNUMBER >= 9 Display This Choice: If HHNUMBER >= 10 Display This Choice: If HHNUMBER >= 11 Display This Choice: If HHNUMBER >= 12 Display This Choice: If HHNUMBER >= 13 Display This Choice: If HHNUMBER >= 14

Display This Choice:			
If HHNUMBER >= 15			
Display This Choice:			
If HHNUMBER >= 16			
Display This Choice:			
If HHNUMBER >= 17			
Display This Choice:			
If HHNUMBER >= 18			
Display This Choice:			
If HHNUMBER >= 19			
Display This Choice:			
If HHNUMBER >= 20			
Display This Choice:			
If HHNUMBER >= 21			
Display This Choice:			
If HHNUMBER >= 22			
Display This Choice:			
If HHNUMBER >= 23			
Display This Choice:			
If HHNUMBER >= 24			
Display This Choice:			
If HHNUMBER >= 25			

	First Name (1)	Last Name (2)
Person 1 (HH_ROSTER_1)		
Display This Choice:		
If HHNUMBER >= 2		
Person 2 (HH_ROSTER_2)		
Display This Choice:		
If HHNUMBER >= 3		
Person 3 (HH_ROSTER_3)		
Display This Choice:		
If HHNUMBER >= 4		
Person 4 (HH_ROSTER_4)		
Display This Choice:		
If HHNUMBER >= 5		
Person 5 (HH_ROSTER_5)		

Display This Choice:	
If HHNUMBER >= 6	
Person 6 (HH_ROSTER_6)	
Display This Choice:	
If HHNUMBER >= 7	
Person 7 (HH_ROSTER_7)	
Display This Choice:	
If HHNUMBER >= 8	
Person 8 (HH_ROSTER_8)	
Display This Choice:	
If HHNUMBER >= 9	
Person 9 (HH ROSTER 9)	
Display This Choice:	
If HHNUMBER >= 10	
Person 10 (HH ROSTER 10)	
Display This Choice:	
If HHNUMBER >= 11	
Person 11 (HH_ROSTER_11)	
Display This Choice:	
If HHNUMBER >= 12	
Person 12 (HH_ROSTER_12)	
Display This Choice:	
If HHNUMBER >= 13	
Person 13 (HH_ROSTER_13)	
Display This Choice:	
If HHNUMBER >= 14	
Person 14 (HH ROSTER 14)	
Display This Choice:	
If HHNUMBER >= 15	
Person 15 (HH_ROSTER_15)	
Display This Choice:	
If HHNUMBER >= 16	
Person 16 (HH ROSTER 16)	
Display This Choice:	
If HHNUMBER >= 17	

Person 17 (HH_ROSTER_17)	
Display This Choice:	
If HHNUMBER >= 18	
Person 18 (HH_ROSTER_18)	
Display This Choice:	
If HHNUMBER >= 19	
Person 19 (HH_ROSTER_19)	
Display This Choice:	
If HHNUMBER >= 20	
Person 20 (HH_ROSTER_20)	
Display This Choice:	
If HHNUMBER >= 21	
Person 21 (HH_ROSTER_21)	
Display This Choice:	
If HHNUMBER >= 22	
Person 22 (HH_ROSTER_22)	
Display This Choice:	
If HHNUMBER >= 23	
Person 23 (HH_ROSTER_23)	
Display This Choice:	
If HHNUMBER >= 24	
Person 24 (HH_ROSTER_24)	
Display This Choice:	
If HHNUMBER >= 25	
Person 25 (HH_ROSTER_25)	

End of Block: HHROSTER - MULTI-PERSON

Start of Block: MULTI-PERSON HOUSEHOLD LOOP

DOB\_TIME Timing First Click (1) Last Click (2)

Page Submit (3)

Click Count (4)

\_\_\_\_\_

Js *	
DOB What is \${lm://Field/2} \${lm://Field/3}'s month and year of birth?	
O Month (1)	
O Year (2)	

AGE_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
Display This Question:
If If What is \${lm://Field/2} \${lm://Field/3}'s month and year of birth? Text Response Is Empty
Or Or What is \${lm://Field/2} \${lm://Field/3}'s month and year of birth? Text Response Is Empty
*
AGE What is \${lm://Field/2} \${lm://Field/3}'s age in years?
Page Break ————————————————————————————————————

SEX_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
SEX Is \${Im://Field/2} \${Im://Field/3}?
O Male (1)
O Female (2)
Page Break ————————————————————————————————————

RELATE\_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4) Display This Question: If Loop 1: Person 1, \${q://QID405/ChoiceTex... Not Current Loop RELATE How is \${lm://Field/2} \${lm://Field/3} related to you? O Spouse (1) O Unmarried partner (2) Biological child (3) O Adopted child (4) O Stepchild (5) Sibling (6) Parent (7) Grandchild (8)

	O Parent-in-law (9)
	O Son-in-law or daughter-in-law (10)
	Other relative (11)
	O Roommate or housemate (12)
	O Foster child (13)
	Other nonrelative (14)
_	
Р	age Break ————————————————————————————————————

DEPENDENT\_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4) Display This Question: If Loop 1: Person 1, \${q://QID405/ChoiceTex... Not Current Loop And If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, I'm serving on active duty Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, I'm serving in the Reserve or National Guard DEPENDENT Is \${\lm://Field/2} \${\lm://Field/3} your legal dependent? Legal dependents include anyone in your family who have, or is eligible to have, a Uniformed Services Identification and Privilege card (also called a military ID card) or is eligible for military health care benefits and is enrolled in the Defense Enrollment Eligibility Reporting System (DEERS). Yes (1) O No (2) End of Block: MULTI-PERSON HOUSEHOLD LOOP Start of Block: HHROSTER - SINGLE PERSON DOB\_S\_TIME Timing First Click (1)

\_\_\_\_\_

Last Click (2)
Page Submit (3)
Click Count (4)

Display This Question:
If HHNUMBER = 1
Or If
Where do you live at your permanent duty station? = Aboard ship
Or Where do you live at your permanent duty station? = Government-owned barracks, dorm, bachelor quarters, or unaccompanied enlisted or officer housing on base
Js *
DOB_S What is your month and year of birth?
O Month (1)
O Year (2)

AGE_S_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
Display This Question:
If If What is your month and year of birth? Text Response Is Empty
Or Or What is your month and year of birth? Text Response Is Empty
And If
HHNUMBER = 1
Or Where do you live at your permanent duty station? = Aboard ship
Or Where do you live at your permanent duty station? = Government-owned barracks, dorm, bachelor quarters, or unaccompanied enlisted or officer housing on base
*
AGE_S What is your age in years?
Page Break ————————————————————————————————————

First Click (1) Last Click (2) Page Submit (3) Click Count (4)
Display This Question:  If HHNUMBER = 1
Or Where do you live at your permanent duty station? = Aboard ship Or Where do you live at your permanent duty station? = Government-owned barracks, dorm, bachelor quarters, or unaccompanied enlisted or officer housing on base
SEX_S Are you?
O Male (1)
O Female (2)
End of Block: HHROSTER - SINGLE PERSON
Start of Block: DEPENDENT CHILDREN
DEP_INTRO_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
Display This Question:  If Loop 1 Current Loop
And And How many legal dependent children do you have under the age of 18 that do NOT currently live here Text Response Is Greater Than 0
DEP_INTRO \${e://Field/dep_intro_fill}

SEX\_S\_TIME Timing

DEP_DEM_TIME Timing  First Click (1)  Last Click (2)  Page Submit (3)  Click Count (4)	
DROSTER6c What is \${lm://Field/2} child's age?	
O Years (1)	
O Months (2)	
DROSTER7c How is \${lm://Field/2} child related to you?  Biological child (1)	
O Adopted child (2)	
O Stepchild (3)	
O Grandchild (4)	
O Foster child (5)	
Other relative (6)	
DROSTER8c What is \${lm://Field/2} child's sex?	
O Male (1)	
O Female (2)	

ENG OT BIOCK: DEPENDENT CHILDREN
Start of Block: LANGUAGE
LANG1_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
LANG1 Do you speak a language other than English at home?
O Yes (1)
O No (2)
Page Break ————————————————————————————————————

LANG2_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
Display This Overtical
Display This Question:
If Do you speak a language other than English at home? = Yes
*
_
LANG2 What language other than English do you speak at home?
Page Break ————————————————————————————————————

LANG3_TIME Timing
First Click (1) Last Click (2)
Page Submit (3)
Click Count (4)
Display This Question:
If Do you speak a language other than English at home? = Yes
II Do you speak a language other than English at home Tes
LANG3 How well do you speak English?
O Very well (1)
Very Well (1)
O Well (2)
O Not well (3)
O Not at all (4)
End of Block: LANGUAGE
Start of Block: TRANSIENCE
TRAN1_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)

# Display This Question:

If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, my spouse is serving on active duty

Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, my spouse is serving in the Reserve or National Guard

And If

Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... != Yes, I'm serving on active duty

And Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... != Yes, I'm serving in the Reserve or National Guard



*		
	e <b>past 2 years</b> , how many times have you moved, either temporarily or? <i>If none, enter 0.</i>	
Page Break		

First Click (1) Last Click (2) Page Submit (3) Click Count (4)  Display This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  TRAN2 In the past 2 years, how many times have you made a Permanent Change of Station (PCS) move? If none, enter 0.  Display This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  The DTRAN3 In the past 2 years, how many times have you been away from your permanent duty station (homeport) for longer than 30 consecutive days because of your military duties? If none, enter 0.	DTRAN2_3_TIME Timing
Page Submit (3) Click Count (4)  Display This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  TRAN2 In the past 2 years, how many times have you made a Permanent Change of Station (PCS) move? If none, enter 0.  Display This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  TRAN3 In the past 2 years, how many times have you been away from your permanent duty station (homeport) for longer than 30 consecutive days because of your military duties? If none, enter 0.	First Click (1)
Click Count (4)  Display This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  TOTRAN2 In the past 2 years, how many times have you made a Permanent Change of Station (PCS) move? If none, enter 0.  Display This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  TOTRAN3 In the past 2 years, how many times have you been away from your permanent duty station (homeport) for longer than 30 consecutive days because of your military duties? If none, enter 0.	Last Click (2)
Display This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  This Question:  DISPLAY This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  This Question:  DISPLAY This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  This Question:  DISPLAY This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  This Question:  DISPLAY This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reser	
If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  **  DTRAN2 In the past 2 years, how many times have you made a Permanent Change of Station (PCS) move? If none, enter 0.  Display This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  **  DTRAN3 In the past 2 years, how many times have you been away from your permanent duty station (homeport) for longer than 30 consecutive days because of your military duties? If none, enter 0.	Click Count (4)
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Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  The past 2 years, how many times have you made a Permanent Change of Station (PCS) move? If none, enter 0.  Display This Question:  If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty  Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard  The past 2 years, how many times have you been away from your permanent duty station (homeport) for longer than 30 consecutive days because of your military duties? If none, enter 0.	Display This Question:
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station (homeport) for longer than 30 consecutive days because of your military duties? <i>If none, enter 0.</i>	
station (homeport) for longer than 30 consecutive days because of your military duties? <i>If none, enter 0.</i>	*
enter 0.	
Dava Drock	
Dava Draek	
David Drook	
David Brook	

TRAN2_TIME Timing	
First Click (1)	
Last Click (2)	
Page Submit (3)	
Click Count (4)	
TRAN2 How long have you lived at your current address?	
O Years (1)	
O Months (2)	
Page Break ————————————————————————————————————	

DTRAN5_TIME Timing
First Click (1)
Last Click (2) Page Submit (3)
Click Count (4)
Chick Count (4)
DTRAN5 In the <b>past 2 years</b> , have you had to live apart from your spouse permanently or temporarily for any reason other than deployment?
O Yes (1)
O No (2)
O Not applicable - I am not married (4)
End of Block: TRANSIENCE
Start of Block: INTERNET ACCESS
INT1_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
INTERNET_INTRO Now, we have some questions about your access to and use of the internet.

INT1 Do you use the Internet at home? This includes accessing the Internet with a cellphone, computer, tablet, or other device.
O Yes (1)
O No (2)
Page Break ————————————————————————————————————

INT2_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
Display This Question:  If Do you use the Internet at home? This includes accessing the Internet with a cellphone, computer, = No
INT2 What are the reasons why you do not use the Internet at home? Select all that apply.
Don't need it or not interested (1)
Can't afford it (2)
Not worth the cost (3)
Can use it elsewhere (4)
Not available in area (5)
No computing device, or device inadequate or broken (6)
Online privacy or cybersecurity concerns (7)
Personal safety concerns (8)
Household moved or is in the process of moving (9)
Other, please specify: (10)
Page Break

INT3_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
Display This Question:
If Do you use the Internet at home? This includes accessing the Internet with a cellphone, computer, = Yes
computer, = res
INT3 How frequently do you use the Internet in your home? This includes accessing the Internet through a cellphone, computer, or tablet.
O Daily (1)
O At least once a week (2)
O At least once a month (3)
O Less than once a month (4)
O Never (5)
Page Break

INT4_5_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
Display This Question:
If How frequently do you use the Internet in your home? This includes accessing the Internet through = Daily
Or How frequently do you use the Internet in your home? This includes accessing the Internet through = At least once a week
Or How frequently do you use the Internet in your home? This includes accessing the Internet through = At least once a month
Or How frequently do you use the Internet in your home? This includes accessing the Internet through = Less than once a month
INT4 Which of the following devices do you usually use to access the internet? Select all that apply.
A computer (1)
A tablet (2)
Smartphone or cellphone (3)
Other device, please specify: (4)
Display This Question:
Display This Question:
If How frequently do you use the Internet in your home? This includes accessing the Internet through = Daily
Or How frequently do you use the Internet in your home? This includes accessing the Internet through = At least once a week
Or How frequently do you use the Internet in your home? This includes accessing the Internet through = At least once a month
Or How frequently do you use the Internet in your home? This includes accessing the Internet through = Less than once a month

INT5 Do you have access to the Internet using a? Select all that apply.
Cellular data plan for a smartphone or other mobile device (1)
Broadband (high speed) Internet service such as cable, fiber optic, or DSL service installed in this household (2)
Satellite Internet service installed in this household (3)
Dial-up Internet service installed in this household (4)
Some other service, please specify: (5)
Page Break ————————————————————————————————————

INT6_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
INT6 Overall, would you say you can access the internet whenever you need to?
O Yes (1)
O No (2)
End of Block: INTERNET ACCESS
Start of Block: DIGITAL AFFINITY
DIG1_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
Display This Question:
If Do you use the Internet at home? This includes accessing the Internet with a cellphone, computer, = No
Or How frequently do you use the Internet in your home? This includes accessing the Internet through = Less than once a month
Or How frequently do you use the Internet in your home? This includes accessing the Internet through = Never
X-
DIG1 Do you regularly access the internet outside of your home?
O Yes (1)
O No (2)

Page Break			

DIG2A_2E_TIME Timing  First Click (1)
First Click (1) Last Click (2)
Page Submit (3)
Click Count (4)
DIG2a For which of the following communication purposes have you used the internet in the past 6 months? Select all that apply.
Email (1)
Texting or instant messaging (2)
Social media (e.g., Facebook, X formerly Twitter, Instagram, LinkedIn) (3)
Video or voice calls or conferencing (4)
None of the above (5)
DIG2b For which of the following entertainment purposes have you used the internet in the <b>past</b>
6 months? Select all that apply.
Streaming or watching videos (1)
Streaming or downloading music, radio programs, or podcasts (2)
Posting or uploading blog posts, videos, or other content you created (3)
None of the above (4)

DIG2c For which of the following work purposes have you used the internet in the <b>past 6</b> months? Select all that apply.
Telecommute or working from home (1)
Search or apply for a job (2)
Online classes or job training (3)
None of the above (4)
DIG2d For which of the following retail or service purposes have you used the internet in the past 6 months? Select all that apply.
Request services provided by other people (e.g., Lyft, Uber, Airbnb, Angie's List) (1)
Advertise products or services (2)
Online shopping, travel reservation, or other consumer services (3)
Sell goods (e.g., Etsy or eBay) (4)
Banking, investing, or paying bills online (5)
■ None of the above (6)

DIG2e For which of the following other purposes have you used the internet in the <b>past 6</b> months? Select all that apply.
Interact with appliances connected to the Internet, such as a thermostat, light bulb, or security system (1)
Communicate with a doctor or other health professional (2)
Accessing health records or health insurance records online (3)
Accessing news or information (4)
None of the above (5)
End of Block: DIGITAL AFFINITY
Start of Block: ATTENTION CHECK
ATTNCHK_TIME Timing  First Click (1)  Last Click (2)  Page Submit (3)  Click Count (4)
Display This Question:

important that participants are paying attention. Please select "Some" to show you are paying attention.				
O A great dea	(1)			
O Quite a lot	(2)			
O Some (3)				
O Very little (4	4)			
End of Block: ATT	ENTION CHECK			
Start of Block: NE	WS SOURCES			
NEWS_TIME Timin First Click (1) Last Click (2) Page Submit (3) Click Count (4)	ng			
NEWS_INTRO The next several questions will ask about your use of various media outlets, your participation in your community, and your opinion of government institutions.				
NEWS How often d	o you get news fror Never (1)	n? Rarely (2)	Sometimes (3)	Often (4)
Television (1)	0	0	0	0
Radio (2)	0	0	0	0
Print publications (3)	0	0	0	0
A smartphone, computer, or tablet (4)	О	0	0	0

ATTNCHK Data quality is important to us. For us to get the most accurate measures, it is

End of Block: NEWS SOURCES
Start of Block: VOLUNTEER
VOI1_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
VOLUNTEER_INTRO The next questions will ask about volunteer activities you have participated in during the past year. For these questions, please include <i>any</i> volunteering you have done for an organization as well as any informal donations of time to help with an event or project.
X-
VOL1 In the <b>last 12 months</b> , have you done any volunteer activities through or for an organization?
O Yes (1)
O No (2)
Page Break —

VOL2_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3) Click Count (4)
Click Count (4)
Display This Question:
If In the last 12 months, have you done any volunteer activities through or for an organization? = No
VOL2 Sometimes people don't think of activities they do infrequently or activities they do for
children's schools or youth organizations as volunteer activities. In the <b>last 12 months</b> , have you done any of these types of volunteer activities?
O Yes (1)
O No (2)
End of Block: VOLUNTEER
Start of Block: TRUST IN GOVERNMENT
TRUCTAA TIME T'
TRUST1A_TIME Timing
First Click (1) Last Click (2)
Page Submit (3)
Click Count (4)

TRUST1A These next questions are about institutions in American society. Please indicate how much confidence you, yourself, have in each one.

	A great deal (1)	Quite a lot (2)	Some (3)	Very little (4)
The military (TRUST1_1)	0	0	0	0
The police (TRUST1_2)	O	0	0	0
The U.S. Supreme Court (TRUST1_3)	0	0	0	0
The presidency (TRUST1_4)	O	0	0	0
Public Schools (TRUST1_5)	O	0	0	0
The criminal justice system (TRUST1_6)	0	0	0	0
Congress (TRUST1_7)	O	0	0	0
U.S. Census Bureau (Q174_8)	0	0	0	0

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Page Break ----

TRUST1B_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)

\_\_\_\_\_



TRUST1B Please indicate how much confidence you, yourself, have in each one.

	A great deal (1)	Quite a lot (2)	Some (3)	Very little (4)
Small businesses (TRUST2_1)	0	0	0	0
The church or organized religion (TRUST2_2)	0	0	0	0
The medical system (TRUST2_3)	0	0	0	0
Banks (TRUST2_4)	0	0	0	0
Newspapers (TRUST2_5)	O	0	0	0
Organized labor (TRUST2_6)	O	0	0	0
Big business (TRUST2_7)	O	0	0	0
News on the internet (TRUST2_8)	0	0	0	0
News on social media (TRUST2_9)	0	0	0	0
Television news (TRUST2_10)	0	0	0	0

End of Block: TRUST IN GOVERNMENT

Start of Block: DEMOGRAPHICS

DDEM13_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
X-
DDEM13 Now, we have some more questions about you and your background. What is your marital status?
O Married (1)
O Domestic partnership (2)
O Widowed (3)
O Divorced (4)
O Legally separated (5)
O Never married (6)
Page Break ————————————————————————————————————

DEM3_4_TIME Timing
First Click (1) Last Click (2)
Page Submit (3)
Click Count (4)
JS X-
Race_sp What is your race and/or ethnicity? Select all that apply.
American Indian or Alaska Native For example, Navajo Nation, Blackfeet Tribe of the
Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc. (5)
Asian For example, Chinese, Asian Indian, Filipino, Vietnamese, Korean, Japanese, etc.
(4)
Black or African American For example, African American, Jamaican, Haitian,
Nigerian, Ethiopian, Somali, etc. (3)
Hispanic or Latino For example, Mexican, Puerto Rican, Salvadoran, Cuban,
Dominican, Guatemalan, etc. (2)
Middle Eastern or North African For example, Lebanese, Iranian, Egyptian, Syrian,
Iraqi, Israeli, etc. (6)
Native Hawaiian or Pacific Islander For example, Native Hawaiian, Samoan,
Chamorro, Tongan, Fijian, Marshallese, etc. (7)
White For example, English, German, Irish, Italian, Polish, Scottish, etc. (1)
Page Break ————————————————————————————————————

DDEM5_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
DDEM5 What is the highest level of education that you have completed? Select ONE response. If currently enrolled, select the previous grade or highest degree received.
Less than high school completion/diploma (1)
O High school degree/GED/or equivalent (2)
O Some college, no degree (3)
O Associate's degree (4)
O Bachelor's degree (5)
Master's, doctorate, or professional degree (6)

Page Break ————

DEM6\_7\_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4) Display This Question: If What is the highest level of education that you have completed? Select ONE response. If currently... = High school degree/GED/or equivalent Or What is the highest level of education that you have completed? Select ONE response. If currently... = Some college, no degree Or What is the highest level of education that you have completed? Select ONE response. If currently... = Associate's degree Or What is the highest level of education that you have completed? Select ONE response. If currently... = Bachelor's degree Or What is the highest level of education that you have completed? Select ONE response. If currently... = Master's, doctorate, or professional degree DEM6 In what month and year was your highest degree/diploma awarded? Month (1) Display This Question: If What is the highest level of education that you have completed? Select ONE response. If currently... = Associate's degree Or What is the highest level of education that you have completed? Select ONE response. If currently... = Bachelor's degree Or What is the highest level of education that you have completed? Select ONE response. If currently... = Master's, doctorate, or professional degree DEM7 What was the major field of study for your **highest** degree?

**End of Block: DEMOGRAPHICS** 

**DEM8 TIME Timing** First Click (1) Last Click (2) Page Submit (3) Click Count (4) Display This Question: If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, my spouse is serving on active duty Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, my spouse is serving in the Reserve or National Guard And If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... != Yes, I'm serving on active duty And Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... != Yes, I'm serving in the Reserve or National Guard DEM8 LAST WEEK, did you do any work for pay? O Yes (1) No (2)

Start of Block: SPOUSE - WORK

Page Break —

DEM9_TIME Timing
First Click (1) Last Click (2)
Page Submit (3)
Click Count (4)
Display This Question:
If LAST WEEK, did you do any work for pay? = No
DEM9 What was your main reason for not working LAST WEEK?
O Retired (1)
Tremed (1)
On layoff from a job (2)
O Student (3)
O Chronic illness or permanent disability (4)
O Did not need or want to work (5)
Other (6)
Display This Question:
If LAST WEEK, did you do any work for pay? = No
LOOKWORK_SP Are you currently looking for work?
O Yes (1)
O No (2)
Page Break ————————————————————————————————————

DDEM10\_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)

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Display This Question:

If LAST WEEK, did you do any work for pay? = Yes

kind of work you are doing at your current job.
O Administrative services (e.g., administrative assistant, secretary) (1)
O Childcare and child development (e.g., attend to children at schools, businesses, private households, and childcare institutions) (2)
O Communications and marketing (e.g., writer/editor, call center, film/TV, social media, web development) (3)
O Community and social services (e.g., mental health counselor, social worker, probation officers and correctional treatment specialists, school bus monitor) (4)
Education (e.g., teacher, teacher's assistant) (5)
O Financial services (e.g., claim adjuster, credit analyst, accountant, financial counselor, banker, insurance agent) (6)
O Health care practitioners and technical occupations (e.g., nurse, dental hygienist, pharmacist, medical records specialist, dentist, doctor, paramedic, optician, veterinarian) (7
O Health care support (e.g., home health aide, nursing assistant, occupational or physical therapy aid) (8)
O Information technology (e.g., network analyst, database administrator) (9)
O Legal (e.g., lawyer, paralegal, legal assistant, mediator, magistrate) (10)
O Protective services (e.g., correctional officer, firefighter, police officer, animal control worker, security guard) (11)
Recreation and hospitality (e.g., restaurant, hotel business/management, personal trainer, ticket agent) (12)
Retail and customer service (e.g., cashier, salesperson, customer service representative, manager) (13)
O Skilled trades (e.g., electrician, cosmetology, plumber, construction, welder) (14)
O Software development (e.g., coding) (15)

DDEM10 Please review the list below and select the broad job category that **best** describes the

	O Transportation and material moving occupations (e.g., aircraft service attendant; parking
	attendant; bus, taxi or truck driver) (16)
	Other occupations which require a state license (17)
	Other occupations which do NOT require a state license (18)
P:	age Break

DDEM10a\_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)

\_\_\_\_\_

Display This Question:

If LAST WEEK, did you do any work for pay? = Yes

DDEM10a What kind of professional license/certification/credential does your career field require?
O Accounting (1)
O Architecture (2)
O Counseling (e.g., professional counselor, marriage and family therapist) (3)
O Dentistry/Dental hygiene (4)
O Law (e.g., attorney) (5)
O Massage therapy (6)
O Medicine (7)
O Nursing (8)
Occupational therapy (9)
O Pharmacy/Pharmacy technician (10)
O Physical therapy (11)
O Professional engineer (12)
O Skilled trade (e.g., master electrician, plumber, heating, air conditioning, ventilation and refrigeration) (13)
O Social work (14)
Teaching (elementary and secondary) (15)
Other, please specify: (16)
None / Not Applicable (17)

Page Break			

End of Block: SPOUSE - WORK
Start of Block: ADDITIONAL DEMOS
DEM11_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
DEM11 Are you currently enrolled in a college or university either full-time or part-time? If you are on a holiday break from school, but plan to return when the break is over, please select "Yes".
O Yes (1) O No (2)
Page Break
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DEM15_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3) Click Count (4)
Click Count (4)
Display This Question:
If Where do you live at your permanent duty station? != Aboard ship
And Where do you live at your permanent duty station? != Government-owned barracks, dorm,
bachelor quarters, or unaccompanied enlisted or officer housing on base
DEM1E How many outemphiles were and trucke of one ton conscitu or less (i.e., for
DEM15 How many automobiles, vans, and trucks of one-ton capacity or less (i.e., for noncommercial or regular use) are kept at home for use by members of this household?
Tioncommercial of regular use) are kept at nome for use by members of this household?
O None (1)
0 1 (2)
0 2 (3)
O <sub>3</sub> (4)
O 4 (5)
4 (3)
O 5 (6)
<b>3</b> (0)
O 6 or more (7)
6 or more (7)

Page Break -

DEM16\_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)

\_\_\_\_\_

## Display This Question:

If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, I'm serving on active duty

Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, I'm serving in the Reserve or National Guard

Or If

LAST WEEK, did you do any work for pay? = Yes

DEM16 How did you usually get to work LAST WEEK? Select the method of transportation used for most of the distance.
Car, truck, or van (1)
O Bus (2)
O Subway or elevated rail (3)
O Long-distance train or commuter rail (4)
O Light rail, streetcar, or trolley (5)
O Ferryboat (6)
O Taxicab (7)
O Motorcycle (8)
O Bicycle (9)
O Walked (10)
O Worked from home (11)
Other method (12)
Page Break

Fir La: Pa	est Click (1) st Click (2) age Submit (3) ck Count (4)
du sai rer	EM12 Which category represents the total combined income of all members of your family ring the past 12 months? <i>Include as family any related individuals who currently live in the me household as you. This includes money from jobs, net income from business, farm or not, pensions, dividends, interest, social security payments and any other money income delived by members of your family who are 15 years of age or older.</i>
	O Less than \$10,000 (1)
	O \$10,000 to \$14,999 (2)
	O \$15,000 to \$24,999 (3)
	O \$25,000 to \$34,999 (4)
	O \$35,000 to \$49,999 (5)
	O \$50,000 to \$74,999 (6)
	O \$75,000 to \$99,999 (7)
	O \$100,000 to \$149,999 (8)
	O \$150,000 to \$199,999 (9)
	O \$200,000 or more (10)

Start of Block: HEALTH AND STRESS

**End of Block: ADDITIONAL DEMOS** 

HEALTH_TIME Timing  First Click (1)  Last Click (2)  Page Submit (3)  Click Count (4)
HEALTH Next, we have some questions about your health. In general, would you say your health is?
O Excellent (1)
O Very good (2)
O Good (3)
O Fair (4)
O Poor (5)
Page Break ————————————————————————————————————

DSTRESS1_TIME Timing
First Click (1) Last Click (2)
Page Submit (3)
Click Count (4)
Display This Question:
If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty
Or Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving in the Reserve or National Guard
DSTRESS1 Overall, how would you rate the current level of stress in your work life?
Much less than usual (1)
O Less than usual (2)
O About the same as usual (3)
O More than usual (4)
O Much more than usual (5)

Page Break -

DSTRESS2_TIME Timing
First Click (1) Last Click (2)
Page Submit (3)
Click Count (4)
DSTRESS2 Overall, how would you rate the current level of stress in your <b>personal life</b> ?
Much less than usual (1)
O Less than usual (2)
O About the same as usual (3)
O More than usual (4)
O Much more than usual (5)
End of Block: HEALTH AND STRESS
Start of Block: RETENTION
DRET1_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)

## Display This Question:

If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, my spouse is serving on active duty

## And If

Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... != Yes, I'm serving on active duty

And Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... != Yes, I'm serving on active duty

DRET1 Do you think your spouse should stay on or leave active duty?
I strongly favor staying (1)
O I somewhat favor staying (2)
I have no opinion one way or the other (3)
O I somewhat favor leaving (4)
O I strongly favor leaving (5)
Page Break ————————————————————————————————————

DRET2_TIME Timing First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
Display This Question:
If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty
DRET2 Suppose that you have to decide whether to stay on active duty. Assuming you could stay, how likely is it that you would choose to do so?
O Very likely (1)
O Likely (2)
O Neither likely nor unlikely (3)
O Unlikely (4)
O Very unlikely (5)
Dogo Produ
Page Break ————————————————————————————————————

DRET3_4_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
Display This Question:
If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio = Yes, I'm serving on active duty
And If
Now, we have some more questions about you and your background. What is your marital status? = Married
Or Now, we have some more questions about you and your background. What is your marital status = Legally separated
DRET3 Does your <b>spouse or significant other</b> think you should stay on or leave active duty?
O Strongly favors staying (1)
O Somewhat favors staying (2)
O Has no opinion one way or the other (3)
O Somewhat favors leaving (4)
O Strongly favors leaving (5)

## Display This Question:

If Are you or your spouse currently serving in the U.S. Armed Forces (Active Duty, Reserve, or Natio... = Yes, I'm serving on active duty

DRE14 Does your <b>family</b> think you should stay on or leave active duty?
O Strongly favors staying (1)
O Somewhat favors staying (2)
O Has no opinion one way or the other (3)
O Somewhat favors leaving (4)
O Strongly favors leaving (5)
Page Break ————————————————————————————————————

DSAT1_TIME Timing  First Click (1)  Last Click (2)  Page Submit (3)
Click Count (4)
DSAT1 Overall, how satisfied are you with the military way of life?
O Very satisfied (1)
O Satisfied (2)
O Neither satisfied nor dissatisfied (3)
O Dissatisfied (4)
O Very dissatisfied (5)
End of Block: RETENTION
Start of Block: FINANCIAL
DFIN1_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)

DFIN1 Which of the following best describes \${e://Field/fill_your_hh} financial condition?
O Very comfortable and secure (1)
O Able to make ends meet without much difficulty (2)
Occasionally have some difficulty making ends meet (3)
O Tough to make ends meet but keeping your head above water (4)
O In over your head (5)
End of Block: FINANCIAL
Start of Block: FOOD ACCESS
FOOD1_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
Display This Question:
If Where do you live at your permanent duty station? != Aboard ship  And Where do you live at your permanent duty station? != Government-owned barracks, dorm, bachelor quarters, or unaccompanied enlisted or officer housing on base
FOOD1 Are you the person who does most of the <b>shopping for food</b> in your household? <i>If</i> shopping for food is split evenly between you and other household members, select "Yes."
O Yes (1)
O No (2)
Page Break

DFOOD2_3_TIME Timing  First Click (1)  Last Click (2)  Page Submit (3)  Click Count (4)
DFOOD2 These next questions ask about the availability of food in your household over the <b>past 12 months</b> . In the past 12 months, the food that \${e://Field/fill_i_we} bought didn't last, and \${e://Field/fill_i_we} didn't have money to buy more.
Often true (1)
O Sometimes true (2)
O Never true (3)
O Don't know (4)
DFOOD3 In the <b>past 12 months</b> , \${e://Field/fill_i_we} couldn't afford to eat balanced meals.  Often true (1)
O Sometimes true (2)
O Never true (3)
O Don't know (4)
Page Break

DFOOD4_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
DFOOD4 In the <b>past 12 months</b> , did you or other adults in your household ever cut the size of your meals or skip meals because there was not enough money for food?
O Yes (1)
O No (2)
O Don't know (3)
Display This Question:
If In the past 12 months, did you or other adults in your household ever cut the size of your meals = Yes
DFOOD5 In the <b>past 12 months</b> , how often did you or other adults in your household cut the size of your meals or skip meals because there was not enough money for food?
O Almost every month (1)
O Some months, but not every month (2)
Only 1 or 2 months (3)
O Don't know (4)
Page Break

DFOOD6_7_TIME Timing  First Click (1)
First Click (1) Last Click (2)
Page Submit (3)
Click Count (4)
DFOOD6 In the <b>past 12 months</b> , did you ever eat less than you felt you should because there was not enough money for food?
O Yes (1)
O No (2)
O Don't know (3)
DFOOD7 In the <b>past 12 months</b> , were you ever hungry but did not eat because there was not enough money for food?
O Yes (1)
O No (2)
O Don't know (3)
Page Break ————————————————————————————————————

GOOD3_4_TIME Timing First Click (1) ast Click (2) Page Submit (3) Click Count (4)
OOD3 Do you or anyone in your household receive benefits from the Supplemental Nutrition assistance Program (SNAP) or the Food Stamp Program?
O Yes (1)
O No (2)
OOD4 The WIC program - the Women, Infants, and Children program - provides healthy foods and other services to low-income pregnant and breastfeeding women, infants, and children up age 5. Is anyone in your household now receiving benefits from WIC?
O Yes (1)
O No (2)
and of Block: FOOD ACCESS
tart of Block: ADMINISTRATIVE RECORDS
ADMIN1_TIME Timing First Click (1) ast Click (2) Page Submit (3) Click Count (4)

ADMIN1_INTRO We now have a few questions about government data on individuals and your privacy opinions.
ADMIN1 As you may know, different government departments and services collect data about individuals, for example your tax records and health records. People have different views about whether this data should be used for new purposes after it has been collected. Using this data can bring benefits, such as finding more effective medical treatments or using information about local communities to plan local schools or roads. But some people worry that other uses for data risk their privacy and security, by linking different types of data together and potentially allowing them to be identified. Overall, which of the following statements comes closest to your opinion?
O Government should find new ways to use data already collected because it benefits public services and society. (1)
O Government should not use data already collected in new ways due to the risks to people's privacy and security. (2)
I agree equally with both. (3)  I don't agree with either. (4)
Page Break
1 090 21000

ADMIN2_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
ADMIN2 The government already collects data about people's jobs, earnings, and participation in government programs. If these separate data sources could be combined while keeping them strictly confidential, the information could be used to better understand the US population. Would you be?
O Strongly in favor of it (1)
O Somewhat in favor of it (2)
O Neither in favor nor against it (3)
O Somewhat against it (4)
O Strongly against it (5)
Page Break ————————————————————————————————————

ADMIN3_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
Display This Question:
If The government already collects data about people's jobs, earnings, and participation in governme = Neither in favor nor against it
Or The government already collects data about people's jobs, earnings, and participation in governme = Somewhat against it
Or The government already collects data about people's jobs, earnings, and participation in governme = Strongly against it
ADMIN3 Which of the following are reasons you are not in favor of combining these data sources to generate information? Select all that apply.  Combined data sources are a violation of my privacy (1)  Combined data won't be accurate (2)  Combined data will give the government too much information (about me) (3)  I don't trust the government to use my information correctly (4)  I am concerned about the security of my information (5)

Page Break ———

TRUST3_TIME Timing  First Click (1)  Last Click (2)  Page Submit (3)  Click Count (4)	
TRUST3 Personally, how much trust do you have in the federal statistics in the United States? Would you say that you tend to trust federal statistics or tend not to trust them?	
O Tend to trust (1)	
O Tend not to trust (2)	
End of Block: ADMINISTRATIVE RECORDS	
Start of Block: PRIVACY AND CONFIDENTIALITY	
PRIV1_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)	
PRIV1 In general, how concerned would you say you are about your personal privacy?	
Extremely concerned (1)	
O Very concerned (2)	
O Somewhat concerned (3)	
O A little concerned (4)	
O Not at all concerned (5)	

Page Break			

PRIV2_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)
PRIV2 What about while using the internet? How concerned are you about your privacy while you are using the internet?
O Extremely concerned (1)
O Very concerned (2)
O Somewhat concerned (3)
O A little concerned (4)
O Not at all concerned (5)
Page Break ————————————————————————————————————

PRIV3_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)

\_\_\_\_\_

PRIV3 Have you done any of these things to protect your data OR avoid intrusion into your privacy? Select "Yes" or "No" to each statement.

	Yes (1)	No (2)
Signed up for the Do Not Call Registry, which removes your number from marketing call lists (PRIV3_1)	0	Ο
Blocked a smartphone app or stopped an app from accessing other details on your phone, such as GPS location or your contacts (PRIV3 2)	0	0
Changed the default settings on your computer or browser (PRIV3 3)	Ο	0
Stopped or avoided using a social media service (PRIV3 4)	0	0
Changed the privacy settings on your social media accounts (PRIV3_5)	0	O
Started using more secure methods of communication, such as encrypted emails (PRIV3_6)	0	O
Asked a government department, public service, or private company to delete any information they hold about you (PRIV3_7)	0	0

End of Block: PRIVACY AND CONFIDENTIALITY

**Start of Block: CONTACT** 

CON1_TIME TIMING
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
CON1 We usually send updates, notifications, and survey links via email. Do you have an email
address you can use for this purpose?
O Yes (1)
O No (2)
Page Break

CON2_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
Display This Question:
If We usually send updates, notifications, and survey links via email. Do you have an email address = Yes
*
CON2 What is the best email address for us to reach you?
CONZ What is the best email address for us to reach you:
Page Break ————————————————————————————————————
raye break

CON3_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
CONSTANT
CON3 We can also send updates, notifications, and survey links via text message. Do you have a cellphone you can use for this purpose?
O Yes (1)
Yes (1)
O No (2)
Page Break

CON4_TIME TIMING
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
Display This Question:
If We can also send updates, notifications, and survey links via text message. Do you have a cellpho = Yes
*
CON4 What is the best cellphone number for us to reach you?
Page Break ————————————————————————————————————

ON5_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
Display This Quastion:
Display This Question:
If If What is the best email address for us to reach you? Text Response Is Not Empty
And And What is the best cellphone number for us to reach you? Text Response Is Not Empty
CON5 How would you prefer we contact you? Select all that apply.
Email (1)
Text message (2)
Text message (2)
Page Break ————————————————————————————————————

CON6_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3)
Click Count (4)
Display This Question:
If If What is the best email address for us to reach you? Text Response Is Empty
And And What is the best cellphone number for us to reach you? Text Response Is Empty
CON6 We need to be able to contact you for future surveys, please provide a cellphone number, email or landline phone number where we can reach you:
Cellphone (1)
O Email (2)
<b>O</b> Landline (3)
End of Block: CONTACT
Start of Block: ADDRESS VERIFICATION
INCENT2_TIME Timing
First Click (1)
Last Click (2)
Page Submit (3) Click Count (4)
Click Count (4)
INCENT INTRO Thenk you for engaging our greations. You will receive \$20 for extenditions
INCENT_INTRO Thank you for answering our questions. You will receive \$20 for completing this survey.

Display This Question: *If TREATMENT = 1* And EmailFill Is Not Empty INCENT1 Within two weeks of survey closing, you will receive an email containing a link to redeem your \$20 at a variety of vendors. The email we have on file is \${e://Field/EmailFill}. Is this the email to which you would like us to send your electronic gift card? O Yes (1) O No (2) Display This Question: If Within two weeks of survey closing, you will receive an email containing a link to redeem your \$2... INCENT2 What is the email address where we should send your incentive? Display This Question: If TREATMENT = 2 And AddressMissing != 1 Or If TREATMENT = 1 And Within two weeks of survey closing, you will receive an email containing a link to redeem your \$2... != Yes And And What is the email address where we should send your incentive? Text Response Is Empty

And AddressMissing != 1

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U Yes (1)
O No (2)
Page Break ————————————————————————————————————

INCENT3_TIME Timing
First Click (1)
Last Click (2) Page Submit (3)
Click Count (4)
Display This Question:
If The address we have on file is: \${e://Field/BestAddress1} \${e://Field/BestAddress2} = No
Or If
TREATMENT = 2
And AddressMissing = 1
Or If
AddressMissing = 1
And TREATMENT = 1
And Within two weeks of survey closing, you will receive an email containing a link to redeem your \$2!= Yes
And And What is the email address where we should send your incentive? Text Response Is Empty
Js
INCENT4 Please provide the mailing address to which we should send your payment.
O Address 1 (2)
O Address 2 (3)
O City (4)
O State (5)
O ZIP Code (6)
End of Block: ADDRESS VERIFICATION
Start of Block: Submit
JULI VI DIVON JUDIIIL

SUBMIT\_TIME Timing First Click (1) Last Click (2) Page Submit (3) Click Count (4)

\_\_\_\_\_\_

## Display This Question:

If Thank you for your responses, but unfortunately you are not eligible to participate. This survey...

Not Displayed

SUBMIT Those are all the questions we have for you today. Thank you for your participation. Please use the "Submit" button below to record your response. Thank you for agreeing to join this panel. Your participation in this survey and other surveys you receive as a panel member will provide valuable information to the Department of Defense.

If you have any questions about the Census Military Panel, please contact us at addp.military.panel@census.gov or call 1-888-329-5895.

**End of Block: Submit**