Attachment 8: CV FGD Screening Form

OMB Control No. 0920-1154

Exp. Date 3/31/2026

The public reporting burden of this collection of information is estimated to average 2 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. 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 Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333 ATTN: PRA (0920-1154).

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

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

Nickname:
Please provide your email:
Are you able to attend a focus group discussion on [insert date, time] via Zoom: Yes No
Can you speak and understand conversations in English? Yes No [If No, skip to the end of the survey]
Please answer the following questions about yourself:
1. Are you: (Mark all that apply) Female Male Transgender, non-binary, or another gender
 2. Please tell us which Ethnicity describes you: Latino or Hispanic Not Latino or Hispanic
 3. Please tell us which Race describes you (select all that apply): American Indian or Alaska Native Asian African American or Black

Native Hawaiian or Other Pacific Islander
White
4. Do you live with another person?
Spouse or romantic partner
Family or friend
I do not live with anyone
Other
5. Do you have, live with, and/or raise any children?
Yes
No
6. Do you own any firearms/guns?
Yes
No
7. What is your age?
a. under 18 years of age
b. 18-24 years of age
c. 25-34 years of age
d. 35-44 years of age
e. 45-54 years of age
f. 55-64 years of age
g. 65-74 years of age
h. 75 years of age or older
8. What is the highest degree or level of school you have completed? (If you're currently enrolled in school
please indicate the highest degree you have <i>received</i> .)
Less than high school diploma
High school degree or equivalent (e.g. GED)
Some college, no degree
Associate or Bachelor's degree
More than a Bachelor's degree (e.g. Master's or Doctoral degree)
9. Generally speaking, do you think of yourself as a Democrat, a Republican, an independent, or something else? Select one.
Democrat
Republican
Independent
Something else
Prefer not to answer
10. How would you describe the community that you live in:
Urban
Suburban
Suburban Rural
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