1. / / Social Security Number
2. Sex: 1=Female, 2=Male
3. / / Date of Birth
4. Age (in years)
5. Were you born in the United States? 0=No 1=Yes
   5a. In what country were you born?
   5b. At what age did you move here?
6. What is your ethnic background?
   1=White/Caucasian
   2=Native American/American Indian or Eskimo
   3=Black/African American
   4=Chinese or Chinese American
   5=Japanese or Japanese American
   6=Korean or Korean American
   7=Other Asian or other Asian American
   8=Mexican, Mexican American or Chicano
   9=Puerto Rican
   10=Other Hispanic/Latino
   11=East Indian
   12=Middle Eastern/Arab
   13=Other (Please specify)
7. In what religion were you raised?
   1. Protestantism (Please specify denomination)
   2. Catholicism
   3. Judaism
   4. Islam
   5. Hindu
   6. Buddhism
   7. Agnosticism or Atheism
   8. Other (Please specify denomination)
   9. None
8. What religion do you now practice?
   1. Protestantism (Please specify denomination)
2. Catholicism
3. Judaism
4. Islam
5. Hindu
6. Buddhism
7. Agnosticism or Atheism
8. Other (Please specify denomination________________________)
9. None

9. ______ Did you ever live in a foster family? 0=no 1=yes

If you lived in a foster family

9a. ______ At what age did you first live in one?
9b. ______ How many different foster families did you have?
9c. ______ How many years altogether did you live with foster families?

10. ______ Were you adopted? 0=no 1=yes

10a. ______ If you were adopted: At what age were you adopted?

11. Please describe your family. If a family member is deceased, please write “deceased” after their name and the age at which they died under the column headed “Current age.”

<table>
<thead>
<tr>
<th>First Name</th>
<th>Sex</th>
<th>Relationship to you</th>
<th>Your ages lived with you</th>
<th>Current age</th>
<th>Current occupation</th>
</tr>
</thead>
<tbody>
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<td>1.</td>
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<td>10.</td>
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</table>

12. Who were your two primary parents when you were growing up? That is, who are the two people who raised you; provided the majority of your care and financial support. Please list their first name and relationship to you (e.g. mother, father, grandparent, foster parent, sibling...). (If you only had one, please put a line through Parent B.)

Parent A:  ________________________________  ________________________________  ________________________________  ________________________________  ________________________________
Parent B:  ________________________________  ________________________________  ________________________________  ________________________________  ________________________________
In the following questions, we ask about Parents A and B as well as your mother and father. If either your mother or father is Person A or Person B, please answer questions about them in the mother or father columns or spaces.

13. How many times was Parent A Parent B

   married ______ ______ ______ ______

   (If unknown, please write an X.)

   divorced ______ ______ ______ ______

   widowed ______ ______ ______ ______

14. ______ What is your current marital status

   1. Single, never married
   2. Widowed
   3. Married
   4. Separated
   5. Divorced

If you have been divorced one or more times, please list the length of each marriage.

   14a. ______ Length of first marriage

   14b. ______ Length of second marriage

   14c. ______ Length of third marriage

   14d. ______ Length of fourth marriage

If you have been widowed one or more times, please list your spouse's age at death and cause of death.

   14d. ______ First spouse's age at death

   14e. ______ First spouse's cause of death

   14f. ______ Second spouse's age at death

   14g. ______ Second spouse's cause of death
15. For each of the following people, please enter the code number that corresponds to the highest grade of formal education completed? (If unknown, please write an X.)

1 = eight grade or less
2 = some high school
3 = GED
4 = high school graduate
5 = business or technical training beyond high school
6 = some college
7 = college graduate
8 = some graduate or professional school beyond college
9 = masters degree
10 = doctoral degree

15a. _______ Yourself
15b. _______ Spouse/Partner
15c. _______ Parent A
15d. _______ Parent B
15e. _______ Mother
15f. _______ Father

16. For each of the following people, please estimate the gross annual income (before taxes) for the last year and enter the corresponding code number. (If unknown, please write an X.)

1 = less than $5,000
2 = $5,000-9,999
3 = $10,000-14,999
4 = $15,000-19,999
5 = $20,000-24,999
6 = $25,000-29,999
7 = $30,000-49,999
8 = $50,000 or more

16a. _______ Yourself
16b. _______ Spouse/Partner
16c. _______ Parent A
16d. _______ Parent B
16e. _______ Mother
16f. _______ Father
17. For each of the following people, please describe his/her occupation for most of last year and also enter the code number from the list which most closely resembles his/her occupation. If the person was unemployed, retired or deceased, use the number that corresponds to the occupation before, unemployment, retirement or death. (If unknown, please write an X.)

1=Professional, technical, e.g., clergy, engineer, teacher, lawyer, physician, nurse
2=Owner, manager, administrator or executive of business (non-farm); also other business position, e.g., accountant, programmer, researcher
3=Sales, e.g., insurance, real estate, auto
4=Clerical, e.g., secretary, retail clerk, typist
5=Skilled worker, craftsperson, foreman (Non-farm)
6=Transport or equipment operator
7=Unskilled worker, laborer (non-farm)
8=Farm workers, e.g., farmer, farm laborer, farm manager or farm foreman
9=Service worker, e.g., custodian, waitress, guard, barber
10=Private household worker
11=Full-time homemaker
12=Full-time student
13=Other

<table>
<thead>
<tr>
<th>Occupation description</th>
<th>Code</th>
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</thead>
<tbody>
<tr>
<td>17a. Yourself</td>
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<tr>
<td>17b. Spouse/partner</td>
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<tr>
<td>17c. Parent A</td>
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<tr>
<td>17d. Parent B</td>
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<tr>
<td>17e. Mother</td>
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<tr>
<td>17f. Father</td>
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</tbody>
</table>

18. Please provide the name, sex and age of any children that you have (include biological, step-children, foster children)

<table>
<thead>
<tr>
<th>First Name</th>
<th>Age</th>
<th>Sex (Circle)</th>
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</tbody>
</table>

19. _____ How many of your immediate family (e.g., children, brothers, parents, spouse) live in your geographic area (within a 50-mile radius)?