

Data Entry Initials: _____
Date: _____
Second Entry: _____
Date: _____

Client's ID # & Initials: _____
Date: _____
Assessment: _____ Session: _____



00801c DDS

UNIVERSITY OF WASHINGTON
BEHAVIORAL RESEARCH & THERAPY CLINICS
BRTC, 1994

- 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

If you were not born in the United States:

- 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."

First Name	Sex	Relationship to you	Your ages when they lived with you	Current age	Current occupation
1. _____					
2. _____					
3. _____					
4. _____					
5. _____					
6. _____					
7. _____					
8. _____					
9. _____					
10. _____					

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.)

	First Name	Relationship to you
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	Mother	Father
(If unknown, please write an X.)	married	_____	_____	_____
	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 spouses 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

	Occupation description	Code
17a. Yourself	_____	_____
17b. Spouse/partner	_____	_____
17c. Parent A	_____	_____
17d. Parent B	_____	_____
17e. Mother	_____	_____
17f. Father	_____	_____

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

	<u>First Name</u>	<u>Age</u>	Sex (Circle)
1.	_____	_____	M F
2.	_____	_____	M F
3.	_____	_____	M F
4.	_____	_____	M F
5.	_____	_____	M F
6.	_____	_____	M F
7.	_____	_____	M F
8.	_____	_____	M F
9.	_____	_____	M F
10.	_____	_____	M F

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