

Study Participant Information Sheet

Current Information on File

Please print any corrections to
Address and Phone Number as needed

First Name: _____

Last Name: _____

Mailing Address: _____

City: _____

State and Zip Code: _____

Contact Phone #: () - _____

Best Time to Conduct Survey: Please Check All That Apply

Weekday

Language Preference

Time

_____ Monday

_____ English

_____ Morning

_____ Tuesday

_____ Spanish

_____ Afternoon

_____ Wednesday

_____ After 5:00 pm

_____ Thursday

_____ Friday

_____ I am undecided. Please call me later.

_____ I will not participate in the study.

Reason (please print):

