

A1. Site/Study ID #: \_\_\_\_\_ /G \_\_\_\_\_ A2. Date of Interview: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year A3. Staff Initials: \_\_\_\_\_  
 To DCC

A5. This form is to be completed by interview with the participant, participant's parent(s) or guardian(s). Please indicate below the source(s) of information for this form (check all that apply).

- a.  Biological Mother DMG2AA5A V2(2)
- b.  Mother, not biological DMG2AA5B V2(2)
- c.  Biological Father DMG2AA5C V2(2)
- d.  Father, not biological DMG2AA5D V2(2)
- e.  Guardian(s) DMG2AA5E V2(2)
- f.  Medical Record DMG2AA5F V2(2)
- g.  Participant DMG2AA5G V2(2)
- h.  Other (Specify: DMG2AA5H V2(2) DMG2AA5HSP V2(300)\_\_\_\_\_)

A6. This source speaks English adequately: 1.  Yes DMG2AA06 V2(3) 2.  No

A7. There was a translator who interpreted: 1.  Yes DMG2AA07 V2(3) 2.  No

**SECTION B: PARTICIPANT DEMOGRAPHICS**

B1. What is the participant's place of birth:

- a. City \_\_\_\_\_ DMG2AB1CI V2(30)
- b. State \_\_\_\_\_ DMG2AB1ST V2(2)
- c. Zip Code \_\_\_\_\_ DMG2AB1ZC V2(10)
- d. Country \_\_\_\_\_ DMG2AB1CO V2(2)

B2. What is the participant's gender? 1.  Male DMG2AB02 V2(3) 2.  Female

B3. What is the participant's ethnicity? (check one) DMG2AB03 V2(3)

- 1.  Hispanic, Latino, or Spanish origin
- 2.  Not Hispanic, Latino, or Spanish origin
- 66.  Unknown or not reported
- 9.  Refused

B4. What is the participant's racial background? (check all that apply)

- a.  American Indian or Alaska Native DMG2AB04A V2(2)
- b.  Asian DMG2AB04B V2(2)
- c.  Black or African American DMG2AB04C V2(2)
- d.  Native Hawaiian or Other Pacific Islander DMG2AB04D V2(2)
- e.  White DMG2AB04E V2(2)
- f.  Unknown or not reported DMG2AB04F V2(2)
- 9.  Refused DMG2AB04G V2(2)