Demographics Questionnaire

1. What month and year were you born?

    Month: _____

    Year: _____

2. Are you right or left handed?
    a. Right-handed
    b. Left-handed
    c. Ambidextrous (use right and left hand equally)
    d. Other (please specify)_____

3. What is the biological sex that you were assigned at birth?
    a. Male
    b. Female
    c. Intersex
    d. Other
    e. Unknown
    f. Prefer not to say

4. How do you currently describe your gender identity?
    a. (Please specify)_____
    b. Prefer not to answer

5. How do you currently describe your sexual identity (sexual orientation/attraction)?
    a. (Please specify)_____
    b. Prefer not to answer

6. Which categories describe you? Select all that apply to you:
    a. American Indian or Alaska Native—For example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community
    b. Asian—For example, Chinese, Filipino, Asian Indian, Vietnamese, Korean, Japanese
    c. Black or African American—For example, Jamaican, Haitian, Nigerian, Ethiopian, Somalian
    d. Hispanic, Latino or Spanish Origin—For example, Mexican or Mexican American, Puerto Rican, Cuban, Salvadoran, Dominican, Columbian
    e. Middle Eastern or North African—For example, Lebanese, Iranian, Egyptian, Syrian, Moroccan, Algerian
    f. Native Hawaiian or Other Pacific Islander—For example, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese
    g. White—For example, German, Irish, English, Italian, Polish, French
    h. Some other race, ethnicity, or origin, please specify: _____

i. I prefer not to answer.

7. Besides English, do you speak any other languages?
    a. Yes
    b. No

If yes:

- What language(s) other than English do you speak? _____
- Which of the following best describes your language-learning history?
    a. I learned English first and my other language(s) later.
    b. I learned my other language(s) first and English later.
    c. I learned English and my other languages at the same time.
    d. Other: _____

    If (b):
    - How old were you when you started to learn English? _____
    - How old were you when you felt you could effectively communicate in English? _____
    - How would you rate your English language proficiency?
        a. Native
        b. Advanced
        c. Intermediate
        d. Elementary
        e. Not proficient

8. Which category describe your education? Select all that apply to you:
    a. Some high school
    b. High school diploma or equivalent
    c. Vocational training
    d. Some college
    e. Associate's degree (e.g., AA, AE, AFA, AS, ASN)
    f. Bachelor's degree (e.g., BA, BBA BFA, BS)
    g. Some post undergraduate work
    h. Master's degree (e.g., MA, MBA, MFA, MS, MSW)
    i. Specialist degree (e.g., EdS)
    j. Applied or professional doctorate degree (e.g., MD, DDC, DDS, JD, PharmD)
    k. Doctorate degree (e.g., EdD, PhD)
    l. Other, please specify: _____

9. Have you previously read about our work?
    a. Yes
    b. No

10. Which social class group do you identify with?
   a. Poor
   b. Working class
   c. Middle class
   d. Affluent

11. Please check the category that tells us your approximate total family income for YEAR. Consider all sources of income, including earnings, welfare cash assistance, child support alimonies, support from other members of your household who regularly contribute to your household, etc.
   a. Less than $10,000
   b. $10,001 to $15,000
   c. $15,001 to $25,000
   d. $25,001 to $50,000
   e. $50,001 to $75,000
   f. $75,001 to $100,000
   g. $100,001 to $150,000
   h. $150,00 to $200,000
   i. more than $200,000.

12. Are you currently taking any medications?
   a. Yes
        i. If yes, please specify drug name, dosage, and how long you have been taking this medication at this dosage _____
   b. No

13. Have you currently/previously been diagnosed with a neurological disorder?
   a. Yes
        i. If yes, please specify which disorder(s) _____
   b. No

14. Have you ever experienced any severe trauma to the head in which you lost consciousness?
   a. Yes
   b. No

15. Have you currently/previously been diagnosed with a mental health disorder (anxiety, depression, etc.)?
   a. Yes
        i. If yes, please specify which disorder(s) _____
   b. No
   c. I prefer not to answer

16. Have you ever been diagnosed with a communication disorder (e.g., stuttering, language disorders, dyslexia, voice disorders, articulation disorders, pragmatic disorders such as autism):

    As a child?
- a. Yes
- b. No

    If yes:
    What was the diagnosis? _____
    Does this diagnosis currently apply to you?
- a. Yes
- b. No

    As a teenager?
- a. Yes
- b. No

    If yes:
    What was the diagnosis? _____
    Does this diagnosis currently apply to you?
- a. Yes
- b. No

    As an adult?
- a. Yes
- b. No

    If yes:
    What was the diagnosis? _____
    Does this diagnosis currently apply to you?
- a. Yes
- b. No