Demographics Questionnaire

To see how many surveys you have left while on a survey, on the top right of the survey click "Survey Queue".

Read the following questions carefully, and respond with the choice(s) that most accurately represents you. Please answer all the questions.

What's your date of birth?

_____

Are you right or left handed?

○ Right handed
○ Left handed
○ Ambidextrous (use right and left hand equally)

What pronouns do you use to refer to yourself?

○ She/her/hers
○ He/him/his
○ They/them
○ Prefer not to say
○ Other (please specify)

_____

What is the biological sex you were assigned at birth?

○ Male
○ Female
○ Intersex
○ Other
○ Unknown
○ Prefer not to say

How do you currently describe your gender identity?

_____

How do you currently describe your sexual identity (sexual orientation/attraction)? If you prefer not to answer, write "prefer not to answer".

_____

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What categories describe you? Select all that apply to you:	☐ American Indian or Alaska Native-For example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community ☐ Asian-For example, Chinese, Filipino, Asian Indian, Vietnamese, Korean, Japanese ☐ Black or African American-For example, Jamaican, Haitian, Nigerian, Ethiopian, Somalian ☐ Hispanic, Latino or Spanish Origin-For example, Mexican or Mexican American, Puerto Rican, Cuban, Salvadoran, Dominican, Columbian ☐ Middle Eastern or North African-For example, Lebanese, Iranian, Egyptian, Syrian, Moroccan, Algerian ☐ Native Hawaiian or Other Pacific Islander-For example, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese ☐ White-For example, German, Irish, English, Italian, Polish, French ☐ Some other race, ethnicity, or origin. (Please specify) ☐ I prefer not to answer

_____

Where do you live?	◯ Midwest-Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, Ohio, North Dakota, South Dakota, Wisconsin ◯ Northeast-Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont ◯ South-Arkansas, Alabama, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia ◯ West-Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, Wyoming ◯ Puerto Rico or other U.S. territories ◯ Other (please specify)

_____

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

_____

Are you currently a student?	◯ Yes, full-time ◯ Yes, part-time ◯ No
If yes, what is your major? (please specify)	_____
Are you currently employed?	◯ Yes, full-time ◯ Yes, part-time ◯ No
Do you have biological, adopted, foster, or step children?	◯ No ◯ No, but I am (or my partner is) pregnant or in the process of adopting ◯ Yes
If yes, what are the ages of any children that live with you? If you prefer not to answer, write "prefer not to answer".	_____
How do you describe your religion, spiritual practice, or existential worldview? If you prefer not to answer, write "prefer not to answer".	_____
Which social class group do you identify with?	◯ Poor ◯ Working class ◯ Middle class ◯ Affluent
Please check the category that tells us your approximate total family income for A 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.	◯ Less than $10,000 ◯ $10,001 to $15,000 ◯ $15,001 to $25,000 ◯ $25,001 to $50,000 ◯ $50,001 to $75,000 ◯ $75,001 to $100,000 ◯ $100,001 to $150,000 ◯ $150,00 to $200,000 ◯ more than $200,000.
How many hours of sleep do you typically get in a night?	_____
How much do you exercise?	◯ Never ◯ Rarely ◯ Sometimes ◯ Often ◯ Every day
How healthy is your diet?	◯ Not very healthy ◯ A bit unhealthy ◯ Average ◯ A bit healthy ◯ Very healthy

Compared to most people, how much caffeine do you typically consume each day?	◯ I do not regularly drink caffeine ◯ Much less than most people ◯ A little less than most people ◯ About the same as most people ◯ A little more than most people ◯ Much more than most people
Are you currently taking any medications?	◯ Yes (please specify) ◯ No
If yes, please specify drug name, dosage, and how long you have been taking this medication at this dosage	_____
Have you currently/previously been diagnosed with a mental health disorder (anxiety, depression, etc.)?	◯ Yes (please specify) ◯ No ◯ I prefer not to answer
If yes, please specify which disorder(s):	_____
Do you have a long-lasting or chronic condition (physical, visual, auditory, cognitive or mental, emotional, or other) that substantially limits one or more of your major life activities (your ability to see, hear, or speak; to learn, remember, or concentrate; to move)?	◯ Yes (please specify) ◯ No
If yes, please specify which disorder(s):	_____