

Notice: Undefined index: 47994X190X10928I001 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I002 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I003 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I004 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I005 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I006 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I007 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I008 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I009 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I010 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I011 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I012 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I013 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I014 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I015 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I016 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I017 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I018 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I019 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661 Notice: Undefined index: 47994X190X10928I020 in /var/www/html/NetSense/limesurvey/admin/printablesurvey.php on line 661

In this survey you will be asked questions about your personal contact network. We estimate that it will take around 30 minutes to complete this survey, though for some people it may take a bit longer.

This survey is very similar to surveys you have taken in the past, and its purpose is to obtain a description of how your social network has changed. This is important information that we will need to understand how social networks evolve during college.

All information that your provide to us through this survey is confidential. In all reports and presentations individuals will not be identifiable. Also, no one will see your answers except the researchers involved in the NetSense project.

When taking the survey you can return to previous pages by clicking the "Previous" button at the bottom of a page. Please do not use your browsers "Back" button.

There are 70 questions in this survey

## The Social Network Survey

1 [name.netid]What is your name and your NetID?

Please write your answer(s) here:

First Name

Last Name

NetID

Cell Phone Number

## 2 [List.friends]

In the next section we need to know who you consider to be in your social network.

**2. In the spaces below, please list up to 20 people (friends, family members, acquaintances, or other people) with whom you spend time communicating or interacting. Please input their full name using the "FirstName MiddleInitial LastName" format.**

Please write your answer(s) here:

|    |                      |
|----|----------------------|
| 1  | <input type="text"/> |
| 2  | <input type="text"/> |
| 3  | <input type="text"/> |
| 4  | <input type="text"/> |
| 5  | <input type="text"/> |
| 6  | <input type="text"/> |
| 7  | <input type="text"/> |
| 8  | <input type="text"/> |
| 9  | <input type="text"/> |
| 10 | <input type="text"/> |
| 11 | <input type="text"/> |
| 12 | <input type="text"/> |
| 13 | <input type="text"/> |
| 14 | <input type="text"/> |
| 15 | <input type="text"/> |
| 16 | <input type="text"/> |
| 17 | <input type="text"/> |
| 18 | <input type="text"/> |
| 19 | <input type="text"/> |
| 20 | <input type="text"/> |

### 3 [Number.alter]

**Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names.**

**3. It will help us if you can tell us how many contacts are now in your list.**

**You can change this number later if you add more people to your list. \***

Please choose **only one** of the following:

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ 13
- ☐ 14
- ☐ 15
- ☐ 16
- ☐ 17
- ☐ 18
- ☐ 19
- ☐ 20

Tie relation

In this section you will be asked about your relationship with each of the contact people on your list.

4 [Closeness]Please indicate the option that best describes your relationship with each person.

Are you especially close in the sense that this is one of your closest personal contacts,

or are you merely close, in the sense that you enjoy the person, but don’t count him or her among your closest personal contacts,

or are you less than close in the sense that you don’t mind interacting with the person, but you have no wish to develop a friendship,

or are you distant in the sense that you really don’t enjoy spending time with the person unless it is necessary?

Please choose the appropriate response for each item:

|                                  | Especially close      | Close                 | Less than close       | Distant               |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
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| {INSERTANS:47994X189X10901cn014} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

## 5 [Duration]

Approximately, how long in years have you known each person?

Enter fraction of a year for periods shorter than a year. Here are some examples:

- Since the start of freshman year: 1.42
- 9 months: 0.75
- 5 months: 0.42
- 4 months: 0.33
- 3 months: 0.25
- 2 months: 0.16
- 1 month: 0.08

Duration in years

|                                  |                      |
|----------------------------------|----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="text"/> |
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| {INSERTANS:47994X189X10901cn017} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="text"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="text"/> |

Check any that apply:

|                                  | Loving                   | Exciting                 | Significant              |
|----------------------------------|--------------------------|--------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**On a scale from 1 (not similar at all) to 10 (extremely similar).**

Please choose the appropriate response for each item:

[illegible]

## 8 [Social.context]

Please indicate the social contexts in which you normally interact with this person.  
Check any that apply

Check any that apply:

|                                  | Off<br>campus            | In<br>class              | Outside<br>class         | Your/Their<br>dorm-<br>room | in<br>dorm               | Religious<br>Event       | At<br>Home               | Club<br>or<br>team       | Work                     | Tex<br>Cal |
|----------------------------------|--------------------------|--------------------------|--------------------------|-----------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------------|
| {INSERTANS:47994X189X10901cn001} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn002} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn003} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn004} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn005} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn006} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn007} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn008} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn009} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [          |

## 9 [Freq.fall.2012]On average, how frequently did you interact with each person during the fall semester? Please include phone call, text and email interactions as well as face-to-face interactions.

Please choose the appropriate response for each item:

|                                  | Daily                 | Weekly                | Monthly               | Less often            |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
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| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**10 [Rel.type]What is their relationship to you?**

Please choose the appropriate response for each item:

|                                  | Parent                | Sibling               | Other family          | Significant other     | Co-worker             | Friend                | Acquaintance          | Other                 |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**11 [alter1.other]Please specify the relationship between {INSERTANS:47994X189X10901cn001} and you.**

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**12 [alter2.other]Please specify the relationship between {INSERTANS:47994X189X10901cn002} and you.**

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**13 [alter3.other]Please specify the relationship between {INSERTANS:47994X189X10901cn003} and you.**

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**14 [alter4.other]Please specify the relationship between {INSERTANS:47994X189X10901cn004} and you.**

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**15 [alter5.other]Please specify the relationship between {INSERTANS:47994X189X10901cn005} and you.**

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:



**16 [alter6.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn006} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**17 [alter7.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn007} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**18 [alter8.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn008} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**19 [alter9.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn009} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**20 [alter10.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn010} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**21 [alter11.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn011} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**22 [alter12.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn012} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**23 [alter13.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn013} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**24 [alter14.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn014} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**25 [alter15.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn015} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**26 [alter16.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn016} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**27 [alter17.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn017} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**28 [alter18.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn018} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**29 [alter19.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn019} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

**30 [alter20.other]**Please specify the relationship between {INSERTANS:47994X189X10901cn020} and you.

Only answer this question if the following conditions are met:

\* Answer was type8'Other' at question '10 [Rel.type]' (What is their relationship to you?)

Please write your answer here:

Information on your contacts

In this section you will be asked to provide information about each of your contacts.

31 [Phone.num.email]

In the next question, we will ask for several pieces of confidential information about your existing contacts. Specifically, we will be asking for the phone numbers and email addresses that you use to communicate with those contacts. We are asking for this information in order to measure your level of communication activity with these people.

As you will recall, we are capturing communication activity from your smart-phone containing the numbers and email addresses of the people that you speak with, email and text. By linking the information you provide, we will be able to measure the extent to which you communicate with each of these persons.

It is important to note that we will not contact any of your contacts. All information will be kept strictly confidential on our secure servers that are only accessible by researchers on the NetSense project team.

|                                  | Phone number<br>555-555-5555 | Email |
|----------------------------------|------------------------------|-------|
| {INSERTANS:47994X189X10901cn001} |                              |       |
| {INSERTANS:47994X189X10901cn002} |                              |       |
| {INSERTANS:47994X189X10901cn003} |                              |       |
| {INSERTANS:47994X189X10901cn004} |                              |       |
| {INSERTANS:47994X189X10901cn005} |                              |       |
| {INSERTANS:47994X189X10901cn006} |                              |       |
| {INSERTANS:47994X189X10901cn007} |                              |       |
| {INSERTANS:47994X189X10901cn008} |                              |       |
| {INSERTANS:47994X189X10901cn009} |                              |       |
| {INSERTANS:47994X189X10901cn010} |                              |       |
| {INSERTANS:47994X189X10901cn011} |                              |       |
| {INSERTANS:47994X189X10901cn012} |                              |       |
| {INSERTANS:47994X189X10901cn013} |                              |       |
| {INSERTANS:47994X189X10901cn014} |                              |       |
| {INSERTANS:47994X189X10901cn015} |                              |       |
| {INSERTANS:47994X189X10901cn016} |                              |       |
| {INSERTANS:47994X189X10901cn017} |                              |       |
| {INSERTANS:47994X189X10901cn018} |                              |       |
| {INSERTANS:47994X189X10901cn019} |                              |       |
| {INSERTANS:47994X189X10901cn020} |                              |       |

**32 [Notre.Dame]What are your contacts' relationship to Notre Dame? Have they attended Notre Dame, are they currently attending Notre Dame, will they be attending Notre Dame or did they graduate last semester?**

Please choose the appropriate response for each item:

|                                  | Did attend            | Are attending         | Will attend           | Graduated last semester | No relationship to ND |
|----------------------------------|-----------------------|-----------------------|-----------------------|-------------------------|-----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> |

**33 [Gender]Please indicate the gender of each of your contacts.**

Please choose the appropriate response for each item:

|                                  | Female                | Male                  |
|----------------------------------|-----------------------|-----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> |

**34 [whatdormcontacts]**

**Of the individuals you listed, what resident hall do they reside in? Please type 'off campus' or 'does not apply' for individuals who live off campus or do not attend Notre Dame.**

Please write your answer(s) here:

|                                  |  |
|----------------------------------|--|
| {INSERTANS:47994X189X10901cn001} |  |
| {INSERTANS:47994X189X10901cn002} |  |
| {INSERTANS:47994X189X10901cn003} |  |
| {INSERTANS:47994X189X10901cn004} |  |
| {INSERTANS:47994X189X10901cn005} |  |
| {INSERTANS:47994X189X10901cn006} |  |
| {INSERTANS:47994X189X10901cn007} |  |
| {INSERTANS:47994X189X10901cn008} |  |
| {INSERTANS:47994X189X10901cn009} |  |
| {INSERTANS:47994X189X10901cn010} |  |
| {INSERTANS:47994X189X10901cn011} |  |
| {INSERTANS:47994X189X10901cn012} |  |
| {INSERTANS:47994X189X10901cn013} |  |
| {INSERTANS:47994X189X10901cn014} |  |
| {INSERTANS:47994X189X10901cn015} |  |
| {INSERTANS:47994X189X10901cn016} |  |
| {INSERTANS:47994X189X10901cn017} |  |
| {INSERTANS:47994X189X10901cn018} |  |
| {INSERTANS:47994X189X10901cn019} |  |
| {INSERTANS:47994X189X10901cn020} |  |

**35 [classtogether]**For each of your contacts please tell us whether you have had any classes with that person.

Please choose the appropriate response for each item:

|                                  | Yes                   | No                    | Contact is not an ND student |
|----------------------------------|-----------------------|-----------------------|------------------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn011} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn012} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn013} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn014} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn015} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn016} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn017} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        |

Interests and tastes

In this part we will ask some questions about your tastes and preferences as well as those of your contacts.

36 [5.activities]

Please list a total of five activities that you enjoy doing. Examples of activities could be bicycle riding, playing poker, watching soap operas, weight lifting, cooking, hiking, reading science fiction, collecting coins, listening to opera, playing basketball, sewing, Mel Brook films, drinking, listening to The Beatles, etc. Be as specific as you like.

Please write your answer(s) here:

1

2

3

4

5

37 [same.activities]

For each of your contacts, please indicate whether they also enjoy each of activities that you listed in the previous question. Check the appropriate boxes to indicate which activities each of your contacts enjoys. Check any that apply

Check any that apply:

|                                  | {INSERTANS:47994X193X10956act01} | {INSERTANS:47994X193X10956act02} | {INSERTANS:47994X193X10956act03} |
|----------------------------------|----------------------------------|----------------------------------|----------------------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn002} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn003} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn004} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn005} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn006} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn007} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn008} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn009} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/>         |

**38 [Alter.music]Please indicate how much you think each of your contacts enjoys listening to music.**

Please choose the appropriate response for each item:

|                                  | Very much             | Somewhat              | Not that much         | Not at all            | Don't know            |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**39 [Alter.movies]Please indicate how much you think each of your contacts enjoys watching movies.**

Please choose the appropriate response for each item:

|                                  | Very much             | Somewhat              | Not that much         | Not at all            | Don't know            |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**40 [Alter.books]Please indicate how much you think each of your contacts enjoys reading books.**

Please choose the appropriate response for each item:

|                                  | Very much             | Somewhat              | Not that much         | Not at all            | Don't know            |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**41 [Alter.sports]Please indicate how much you think each of your contacts enjoys following sports.**

Please choose the appropriate response for each item:

|                                  | Very much             | Somewhat              | Not that much         | Not at all            | Don't know            |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |



**42 [Alter.games]Please indicate how much you think each of your contacts enjoys playing games.**

Please choose the appropriate response for each item:

|                                  | Very much             | Somewhat              | Not that much         | Not at all            | Don't know            |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**43 [Alter.outdoor]Please indicate how much you think each of your contacts enjoys outdoor activities.**

Please choose the appropriate response for each item:

|                                  | Very much             | Somewhat              | Not that much         | Not at all            | Don't know            |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| {INSERTANS:47994X189X10901cn001} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn002} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn003} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn004} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Relations among your contacts

In this section we ask you to indicate the relations among your contacts

44 [alter1.rel] As far as you know, does {INSERTANS:47994X189X10901cn001} know any of your other contacts that you listed? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn001} does not know that person. \*

Only answer this question if the following conditions are met:  
\* Answer was greater than or equal to A2'2' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

|                                  |                                  |
|----------------------------------|----------------------------------|
|                                  | {INSERTANS:47994X189X10901cn001} |
| {INSERTANS:47994X189X10901cn002} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn003} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn004} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn005} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn006} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn007} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn008} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn009} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/>         |

45 [alter2.rel]As far as you know, does {INSERTANS:47994X189X10901cn002} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn002} does not know that person. \*

Only answer this question if the following conditions are met:  
\* Answer was greater than or equal to A3'3' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

|                                  |                                  |
|----------------------------------|----------------------------------|
|                                  | {INSERTANS:47994X189X10901cn002} |
| {INSERTANS:47994X189X10901cn003} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn004} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn005} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn006} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn007} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn008} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn009} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/>         |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/>         |

**46 [alter3.rel] As far as you know, does {INSERTANS:47994X189X10901cn003} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn003} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to A4'4' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn003}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn004} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn005} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**47 [alter4.rel] As far as you know, does {INSERTANS:47994X189X10901cn004} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn004} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to A5'5' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn004}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn005} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn006} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**48 [alter5.rel]As far as you know, does {INSERTANS:47994X189X10901cn005} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn005} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to A6'6' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn005}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn006} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn007} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**49 [alter6.rel]As far as you know, does {INSERTANS:47994X189X10901cn006} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn006} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to A7'7' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn006}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn007} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn008} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**50 [alter7.rel]As far as you know, does {INSERTANS:47994X189X10901cn007} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn007} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to A8'8' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn007}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn008} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn009} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**51 [alter8.rel]As far as you know, does {INSERTANS:47994X189X10901cn008} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn008} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to A9'9' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn008}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn009} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**52 [alter9.rel]As far as you know, does {INSERTANS:47994X189X10901cn009} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn009} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to AA'10' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn009}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn010} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**53 [alter10.rel]As far as you know, does {INSERTANS:47994X189X10901cn010} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn010} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to AB'11' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn010}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn011} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**54 [alter11.rel]As far as you know, does {INSERTANS:47994X189X10901cn011} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn011} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to AC'12' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn011}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn012} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**55 [alter12.rel]As far as you know, does {INSERTANS:47994X189X10901cn012} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn012} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to AD'13' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn012}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn013} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**56 [alter13.rel]As far as you know, does {INSERTANS:47994X189X10901cn013} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn013} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to AE'14' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn013}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn014} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**57 [alter14.rel]As far as you know, does {INSERTANS:47994X189X10901cn014} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn014} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to AF'15' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn014}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn015} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**58 [alter15.rel]As far as you know, does {INSERTANS:47994X189X10901cn015} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn015} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to AG'16' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn015}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn016} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**59 [alter16.rel]As far as you know, does {INSERTANS:47994X189X10901cn016} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn016} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to AH'17' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn016}

|                                  |                          |
|----------------------------------|--------------------------|
| {INSERTANS:47994X189X10901cn017} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn018} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn019} | <input type="checkbox"/> |
| {INSERTANS:47994X189X10901cn020} | <input type="checkbox"/> |

**60 [alter17.rel]As far as you know, does {INSERTANS:47994X189X10901cn017} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn017} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to AI'18' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn017}

{INSERTANS:47994X189X10901cn018} ☐

{INSERTANS:47994X189X10901cn019} ☐

{INSERTANS:47994X189X10901cn020} ☐

**61 [alter18.rel]As far as you know, does {INSERTANS:47994X189X10901cn018} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn018} does not know that person. \***

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to AJ'19' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn018}

{INSERTANS:47994X189X10901cn019} ☐

{INSERTANS:47994X189X10901cn020} ☐

**62 [alter19.rel]As far as you know, does {INSERTANS:47994X189X10901cn019} know any of your other contacts that are listed below? If you think they do, please check the boxes to indicate which of your other contacts they know. Leave boxes blank if you think {INSERTANS:47994X189X10901cn019} does not know that person.**

**Only answer this question if the following conditions are met:**

\* Answer was greater than or equal to AK'20' at question '3 [Number.alter]' ( Now you have a list of your contacts. Is anyone significant missing? Is there someone important whom you are close to or interact with regularly but you forget to input the name in the first question. Please do not hesitate to click the "Previous" button at the bottom of each page to go back so you can add their names. 3. It will help us if you can tell us how many contacts are now in your list. You can change this number later if you add more people to your list. )

Check any that apply:

{INSERTANS:47994X189X10901cn019}

{INSERTANS:47994X189X10901cn020} ☐



Romantic Relationships

63 [listromance]

Please list 10 individuals whom you have had an emotional, romantic or physical relation with and/or toward whom you have had romantic or sexual feelings since arriving at Notre Dame in August 2011.

Please input their full name using the "FirstName, MiddleInitial Lastname" format.

Please consider individuals whom you had brief or long, reciprocated/non-reciprocated, purely emotional or purely physical, heterosexual or homosexual crush, attraction towards, the hots towards, often flirted with, had serious or non-serious interest in, went on dates with, was in a relationship with, hooked-up or were in a marriage with. It is not necessary that the listed individual was aware of this or had the same feelings towards you.

(Reminder: All information that your provide to us through this survey is confidential. In all reports and presentations individuals will not be identifiable. Also, no one will see your answers except the researchers involved in the NetSense project. )

Please write your answer(s) here:

|    |                      |
|----|----------------------|
| 1  | <input type="text"/> |
| 2  | <input type="text"/> |
| 3  | <input type="text"/> |
| 4  | <input type="text"/> |
| 5  | <input type="text"/> |
| 6  | <input type="text"/> |
| 7  | <input type="text"/> |
| 8  | <input type="text"/> |
| 9  | <input type="text"/> |
| 10 | <input type="text"/> |

64 [romancecalls]

Please provide the cell number for each of these contacts.

|                                 |                      |
|---------------------------------|----------------------|
|                                 | Cell                 |
| {INSERTANS:47994X206X12838sq01} | <input type="text"/> |
| {INSERTANS:47994X206X12838sq02} | <input type="text"/> |
| {INSERTANS:47994X206X12838sq03} | <input type="text"/> |
| {INSERTANS:47994X206X12838sq04} | <input type="text"/> |
| {INSERTANS:47994X206X12838sq05} | <input type="text"/> |
| {INSERTANS:47994X206X12838sq06} | <input type="text"/> |
| {INSERTANS:47994X206X12838sq07} | <input type="text"/> |
| {INSERTANS:47994X206X12838sq08} | <input type="text"/> |
| {INSERTANS:47994X206X12838sq09} | <input type="text"/> |
| {INSERTANS:47994X206X12838sq10} | <input type="text"/> |

**Please place the dates in approximate dd/mm/yyyy format.**

|                                 | Short Description of the nature of the Relationship | When did this relationship begin? | When did this relationship end? |
|---------------------------------|-----------------------------------------------------|-----------------------------------|---------------------------------|
| {INSERTANS:47994X206X12838sq01} |                                                     |                                   |                                 |
| {INSERTANS:47994X206X12838sq02} |                                                     |                                   |                                 |
| {INSERTANS:47994X206X12838sq03} |                                                     |                                   |                                 |
| {INSERTANS:47994X206X12838sq04} |                                                     |                                   |                                 |
| {INSERTANS:47994X206X12838sq05} |                                                     |                                   |                                 |
| {INSERTANS:47994X206X12838sq06} |                                                     |                                   |                                 |
| {INSERTANS:47994X206X12838sq07} |                                                     |                                   |                                 |
| {INSERTANS:47994X206X12838sq08} |                                                     |                                   |                                 |
| {INSERTANS:47994X206X12838sq09} |                                                     |                                   |                                 |
| {INSERTANS:47994X206X12838sq10} |                                                     |                                   |                                 |

Check any that apply:

[illegible]

Check any that apply:

[illegible]

**68 [relationshipstart]**

First consider the beginning or courting phases of these relationships. Please provide a short response.

- By courting, we mean the period of trying to 'woo' or 'impress' or 'get their attention' or 'hanging out alot' that preceeds a relationship becoming more intimate, either physically or emotionally.

|                                 | In the beginning, who pursued who? | How long did the courting period last? | How did the courting period end? |
|---------------------------------|------------------------------------|----------------------------------------|----------------------------------|
| {INSERTANS:47994X206X12838sq01} | <input type="text"/>               | <input type="text"/>                   | <input type="text"/>             |
| {INSERTANS:47994X206X12838sq02} | <input type="text"/>               | <input type="text"/>                   | <input type="text"/>             |
| {INSERTANS:47994X206X12838sq03} | <input type="text"/>               | <input type="text"/>                   | <input type="text"/>             |
| {INSERTANS:47994X206X12838sq04} | <input type="text"/>               | <input type="text"/>                   | <input type="text"/>             |
| {INSERTANS:47994X206X12838sq05} | <input type="text"/>               | <input type="text"/>                   | <input type="text"/>             |
| {INSERTANS:47994X206X12838sq06} | <input type="text"/>               | <input type="text"/>                   | <input type="text"/>             |
| {INSERTANS:47994X206X12838sq07} | <input type="text"/>               | <input type="text"/>                   | <input type="text"/>             |
| {INSERTANS:47994X206X12838sq08} | <input type="text"/>               | <input type="text"/>                   | <input type="text"/>             |
| {INSERTANS:47994X206X12838sq09} | <input type="text"/>               | <input type="text"/>                   | <input type="text"/>             |
| {INSERTANS:47994X206X12838sq10} | <input type="text"/>               | <input type="text"/>                   | <input type="text"/>             |

**69 [relationshippend]**

For the following questions we are interested in the ending phases of these relationships. Please provide a short response.

- By relationship end, we mean the point in which the individuals in the relationship stopped interacting, or interaction significantly changed.
- By grieving period, we mean the period following the end of the relationship in which it had an effect on your mood and your desire/ability to interact with other people.

|                                 | How did the relationship end? | Who ended it?        | how long did you grieve after the relationship ended? |
|---------------------------------|-------------------------------|----------------------|-------------------------------------------------------|
| {INSERTANS:47994X206X12838sq01} | <input type="text"/>          | <input type="text"/> | <input type="text"/>                                  |
| {INSERTANS:47994X206X12838sq02} | <input type="text"/>          | <input type="text"/> | <input type="text"/>                                  |
| {INSERTANS:47994X206X12838sq03} | <input type="text"/>          | <input type="text"/> | <input type="text"/>                                  |
| {INSERTANS:47994X206X12838sq04} | <input type="text"/>          | <input type="text"/> | <input type="text"/>                                  |
| {INSERTANS:47994X206X12838sq05} | <input type="text"/>          | <input type="text"/> | <input type="text"/>                                  |
| {INSERTANS:47994X206X12838sq06} | <input type="text"/>          | <input type="text"/> | <input type="text"/>                                  |
| {INSERTANS:47994X206X12838sq07} | <input type="text"/>          | <input type="text"/> | <input type="text"/>                                  |
| {INSERTANS:47994X206X12838sq08} | <input type="text"/>          | <input type="text"/> | <input type="text"/>                                  |
| {INSERTANS:47994X206X12838sq09} | <input type="text"/>          | <input type="text"/> | <input type="text"/>                                  |
| {INSERTANS:47994X206X12838sq10} | <input type="text"/>          | <input type="text"/> | <input type="text"/>                                  |

**Thank you for participating in this Survey**

We, at the NetSense team, want to thank you again for your participation in this study. The data that you have provided us has given us an unprecedented look into the formation of personal networks, never before understood at this detail. This only possible because your commitment to this study, throughout its complications and problems.

We want to extend our deepest gratitude and wish you luck on your spring semester.

Go Irish,  
The NetSense Team

**70 [thankyougoodbye]Please leave any comments you may have**

Please write your answer here:

31.12.1969 – 19:00

Submit your survey.  
Thank you for completing this survey.