Demographics

STUDY NAME:	
Site Number:_____	**Visit Date:** ____ / _____ / _____ dd mmm yyyy
Pt_ID:_____	
Visit Type (check one): ☐ **Screening**	☐ **Baseline**

1. **Gender:**
   ☐ Female ☐ Male

2. **Date of Birth:** _____ / _____ / _____
   dd mmm yyyy

3. **Race ("X" those with which you identify):**

   ☐ American Indian or Alaska Native
   ☐ Asian
   ☐ Black or African-American
   ☐ Native Hawaiian or Other Pacific Islander
   ☐ White
   ☐ More than one race
   ☐ Unknown or not reported

4. **Ethnicity ("X" ONLY one with which you MOST CLOSELY identify):**

   ☐ Hispanic or Latino
   ☐ Not Hispanic or Latino
   ☐ Unknown or not reported

Date Informed Consent Signed: _____ / _____ / _____
dd mmm yyyy