

TODAY'S DATE

1. Please fill in today's date:

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Month			Day			Year			

ABOUT YOU

2. Are you an NHATS participant or someone else filling out the questionnaire for an NHATS participant?

- I am an NHATS participant → Please go to Question 5, next page
- I am filling out this questionnaire for an NHATS participant → Please answer Question 3

3. What is your relationship to the NHATS participant?

- Spouse or partner
- Adult child
- Another relative
- I am not related to the NHATS participant

4. What is the reason you are answering for the NHATS participant?
Mark all that apply.

- The NHATS participant has dementia or cognitive impairment
- The NHATS participant is too ill / has physical health issues
- The NHATS participant does not read well enough
- The NHATS participant is temporarily unavailable
- Other reason, *please specify:*