Important: You are not required to answer the following questions. Providing the following information is optional. Your personal information will remain confidential. Only the responses you provide will be combined with others so that we may better understand the impact of the program you are participating in.

☐ Check this box if you do not want to provide answers to any of the following questions.

### What is your Age?

- ☐ 0-5
- ☐ 6-18
- ☐ 19-59
- ☐ 60 and over
- ☐ Decline to answer

### What is your primary language?

- ☐ English
- ☐ Spanish
- ☐ Other:
- ☐ Decline to answer

### What is your Ethnicity?

(please select all that apply)

- ☐ African American
- ☐ Asian
<table>
<thead>
<tr>
<th>Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Latina/o</td>
</tr>
<tr>
<td>□ Multi-racial</td>
</tr>
<tr>
<td>□ Native American/Alaskan</td>
</tr>
<tr>
<td>□ Native Hawaiian/Pacific Islander</td>
</tr>
<tr>
<td>□ White</td>
</tr>
<tr>
<td>□ Other:</td>
</tr>
<tr>
<td>□ Decline to answer</td>
</tr>
</tbody>
</table>

**What gender do you identify as?**

(please select all that apply)

- □ Female
- □ Male
- □ Nonbinary
- □ Transgender – Female
- □ Transgender - Male
- □ Other:
- □ Decline to answer

**What city and zip code do you live in?**

Please write city and zip code:

- □ Decline to answer