

Fam ID: <input type="radio"/> U <input type="radio"/> X <input type="text"/> <input type="text"/> <input type="text"/>		Resp: <input type="radio"/> Father <input type="radio"/> Mother <input type="radio"/> 2nd Male Parent <input type="radio"/> 2nd Female Parent		QM: <input type="checkbox"/>
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"/>	Wave: <input checked="" type="radio"/> 7	Int ID: <input type="text"/> <input type="text"/>		

**INSTRUCTIONS:** There are often a number of people who are important to children as they are growing up. We would like you to list the first and last names of five people who are important to your child and answer some questions about them. Think especially about the last month. Remember, your answers are kept private.

**LIST THE FIVE MOST IMPORTANT PEOPLE IN YOUR CHILD'S LIFE HERE:**

	First name:	Last Name:
<b>Important person #1:</b>	_____	_____
<b>Important person #2:</b>	_____	_____
<b>Important person #3:</b>	_____	_____
<b>Important person #4:</b>	_____	_____
<b>Important person #5:</b>	_____	_____

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Fam ID:  U  X    Resp:  Father  Mother  2nd Male Parent  2nd Female Parent

Please complete the following information about **Important Person #1:**  
 (Please write their first name so you remember who it is)

- a. What is their age?   years old
- b. Are they:  Male  Female
- c. How would you describe his/her ethnic group?
- European American/White
  - African American/Black
  - Native American/American Indian
  - Hispanic American/Latino
  - Asian American
  - Pacific Islander
  - Other (describe): \_\_\_\_\_
  - European African American
  - Other ethnic combination (describe): \_\_\_\_\_
- d. How is this person related to your child?
- Parent
  - Step-parent
  - Parent's partner
  - Adoptive parent
  - Foster parent
  - Natural sibling
  - Step-sibling
  - Half-sibling
  - Adoptive sibling
  - Foster sibling
  - Cousin
  - Grandparent
  - Aunt/Uncle
  - Niece/nephew
  - Distant relative
  - Friend from school
  - Friend from neighborhood
  - Friend from Church
  - Minister
  - Counselor
  - Teacher/Principal/Coach
  - Other: \_\_\_\_\_
- e. Where do they spend the most time together (choose only one answer)?
- At school
  - At your home
  - At other person's home
  - Outside (Park, alley, street)
  - Organized sports
  - Organized after school activity
  - Community center
  - Mall
  - Arcade
  - Movies
  - Church
  - Other: \_\_\_\_\_
- f. Would your child miss this person if they didn't see or hear from them for 2 weeks?  No  Yes

Please describe the relationship between this person (Important person #1) and the other people you listed. Fill in **N/A** if the two people don't know each other. Fill in **D/K** if you don't know what their relationship is.

- g. Between **Important person #1** and:
- Important person #2:**  Good  Bad  Neutral  N/A  D/K
  - Important person #3:**  Good  Bad  Neutral  N/A  D/K
  - Important person #4:**  Good  Bad  Neutral  N/A  D/K
  - Important person #5:**  Good  Bad  Neutral  N/A  D/K



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Please complete the following information about **Important Person #2:**  
*(Please write their first name so you remember who it is)* \_\_\_\_\_

a. What is their age?   years old

b. Are they:  Male  Female

c. How would you describe his/her ethnic group?

- European American/White
- African American/Black
- Native American/American Indian
- Hispanic American/Latino
- Asian American
- Pacific Islander
- Other (describe): \_\_\_\_\_
- European African American
- Other ethnic combination (describe): \_\_\_\_\_

d. How is this person related to your child?

- Parent
- Step-parent
- Parent's partner
- Adoptive parent
- Foster parent
- Natural sibling
- Step-sibling
- Half-sibling
- Adoptive sibling
- Foster sibling
- Cousin
- Grandparent
- Aunt/Uncle
- Niece/nephew
- Distant relative
- Friend from school
- Friend from neighborhood
- Friend from Church
- Minister
- Counselor
- Teacher/Principal/Coach
- Other: \_\_\_\_\_

e. Where do they spend the most time together *(choose only one answer)*?

- At school
- At your home
- At other person's home
- Outside (Park, alley, street)
- Organized sports
- Organized after school activity
- Community center
- Mall
- Arcade
- Movies
- Church
- Other: \_\_\_\_\_

f. Would your child miss this person if they didn't see or hear from them for 2 weeks?  No  Yes

Please describe the relationship between this person (Important person #2) and the other people you listed. Fill in **N/A** if the two people don't know eachother. Fill in **D/K** if you don't know what their relationship is.

g. Between **Important person #2** and:

- Important person #3:**  Good  Bad  Neutral  N/A  D/K
- Important person #4:**  Good  Bad  Neutral  N/A  D/K
- Important person #5:**  Good  Bad  Neutral  N/A  D/K



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Please complete the following information about **Important Person #3:**  
 (Please write their first name so you remember who it is)

a. What is their age?   years old

b. Are they:  Male  Female

c. How would you describe his/her ethnic group?

- European American/White
- African American/Black
- Native American/American Indian
- Hispanic American/Latino
- Asian American
- Pacific Islander
- Other (describe): \_\_\_\_\_
- European African American
- Other ethnic combination (describe): \_\_\_\_\_

d. How is this person related to your child?

- Parent
- Step-parent
- Parent's partner
- Adoptive parent
- Foster parent
- Natural sibling
- Step-sibling
- Half-sibling
- Adoptive sibling
- Foster sibling
- Cousin
- Grandparent
- Aunt/Uncle
- Niece/nephew
- Distant relative
- Friend from school
- Friend from neighborhood
- Friend from Church
- Minister
- Counselor
- Teacher/Principal/Coach
- Other: \_\_\_\_\_

e. Where do they spend the most time together (choose only one answer)?

- At school
- At your home
- At other person's home
- Outside (Park, alley, street)
- Organized sports
- Organized after school activity
- Community center
- Mall
- Arcade
- Movies
- Church
- Other: \_\_\_\_\_

f. Would your child miss this person if they didn't see or hear from them for 2 weeks?  No  Yes

Please describe the relationship between this person (Important person #3) and the other people you listed. Fill in **N/A** if the two people don't know each other. Fill in **D/K** if you don't know what their relationship is.

g. Between **Important person #3** and:

**Important person #4:**  Good  Bad  Neutral  N/A  D/K

**Important person #5:**  Good  Bad  Neutral  N/A  D/K



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Please complete the following information about **Important Person #4:**  
 (Please write their first name so you remember who it is)

a. What is their age?   years old

b. Are they:  Male  Female

c. How would you describe his/her ethnic group?

- European American/White
- African American/Black
- Native American/American Indian
- Hispanic American/Latino
- Asian American
- Pacific Islander
- Other (describe): \_\_\_\_\_
- European African American
- Other ethnic combination (describe): \_\_\_\_\_

d. How is this person related to your child?

- Parent
- Step-parent
- Parent's partner
- Adoptive parent
- Foster parent
- Natural sibling
- Step-sibling
- Half-sibling
- Adoptive sibling
- Foster sibling
- Cousin
- Grandparent
- Aunt/Uncle
- Niece/nephew
- Distant relative
- Friend from school
- Friend from neighborhood
- Friend from Church
- Minister
- Counselor
- Teacher/Principal/Coach
- Other: \_\_\_\_\_

e. Where do they spend the most time together (choose only one answer)?

- At school
- At your home
- At other person's home
- Outside (Park, alley, street)
- Organized sports
- Organized after school activity
- Community center
- Mall
- Arcade
- Movies
- Church
- Other: \_\_\_\_\_

f. Would your child miss this person if they didn't see or hear from them for 2 weeks?  No  Yes

Please describe the relationship between this person (Important person #4) and the other people you listed. Fill in **N/A** if the two people don't know eachother. Fill in **D/K** if you don't know what their relationship is.

g. Between **Important person #4** and:

**Important person #5:**  Good  Bad  Neutral  N/A  D/K



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Please complete the following information about **Important Person #5:**  
 (Please write their first name so you remember who it is)

a. What is their age?   years old

b. Are they:  Male  Female

c. How would you describe his/her ethnic group?

- European American/White
- African American/Black
- Native American/American Indian
- Hispanic American/Latino
- Asian American
- Pacific Islander
- Other (describe): \_\_\_\_\_
- European African American
- Other ethnic combination (describe): \_\_\_\_\_

d. How is this person related to your child?

- Parent
- Step-parent
- Parent's partner
- Adoptive parent
- Foster parent
- Natural sibling
- Step-sibling
- Half-sibling
- Adoptive sibling
- Foster sibling
- Cousin
- Grandparent
- Aunt/Uncle
- Niece/nephew
- Distant relative
- Friend from school
- Friend from neighborhood
- Friend from Church
- Minister
- Counselor
- Teacher/Principal/Coach
- Other: \_\_\_\_\_

e. Where do they spend the most time together (choose only one answer)?

- At school
- At your home
- At other person's home
- Outside (Park, alley, street)
- Organized sports
- Organized after school activity
- Community center
- Mall
- Arcade
- Movies
- Church
- Other: \_\_\_\_\_

f. Would your child miss this person if they didn't see or hear from them for 2 weeks?  No  Yes

