

SAMPLE QUESTION FORMATS FOR HISPANIC ORIGIN, RACE, CLASS AND GENDER.
SEXUAL ORIENTATION, DISABILITY, VETERAN STATUS

INSTITUTE FOR THE STUDY OF “RACE” & SOCIAL JUSTICE
NM STATEWIDE RACE, GENDER, CLASS DATA POLICY CONSORTIUM
PLEASE SEND SUGGESTION TO DR. NANCY LOPEZ, (nlopez@unm.edu)
FOR MORE INFORMATION VISIT: race.unm.edu

Last updated: 7/15/17

1. Hispanic Origin: Are you of Hispanic, Latino or Spanish origin? (check all that apply)

No, not of Hispanic or Latino origin

Yes, Mexican, Mexican American, Chicano

Yes, Puerto Rican

Yes, Cuban

Yes, another Hispanic, Latino or Spanish Group (e.g. Argentinean, Colombian,
Dominican, Nicaraguan, Salvadoran, Spaniard, etc.) SPECIFY GROUP

(S): _____

2. Race: What is your race? (check all that apply)

_____ White (Non Hispanic/Latina/o/x)

_____ Black, African American, or Negro (Non Hispanic/Latino)

_____ American Indian or Alaska Native, NAME OF ENROLLED TRIBE:

_____ Asian or Asian American, NAME OF NATIONAL ORIGIN:

-
- Hispanic/Latina(o) White
 Hispanic/Latina(o) Afro-Latina(o)/Black
 Hispanic/Latina(o) Mestiza(o)/Brown
 Hispanic/Latina(o) Indígena / Indigenous Pueblo of Latin America/Brown
 Middle Eastern / Arab/Brown
 Some other Race: (Please write in: _____)

3. What is your ethnicity, national origin (s) or distant ancestry? (Write in: _____ For example: German, Haitian, Italian, Arab, Chinese, Somali, Italian, etc.)

4. What is the highest degree or level of school that you completed? (Mark one box).

- Less than high school
 High School Graduate; high school DIPLOMA or the equivalent (for example: GED)
 Some college credit one or more year of college, no degree
 Associates degree (for example: AA, AS)
 Bachelor's degree (for example: BA, AB, BS)
 Master's degree (for example: MA, MS, MEng, EEd, MSW, MBA)
 Professional Degree (for example: MD, DDS, DVM, LLB, JD)
 Doctorate Degree (for example: PhD, EdD)
 Unknown/Don't Know

5. Was this in the U.S. or somewhere else? If somewhere else write in: _____

6. Think back to the last three jobs you had. Starting from your current occupation and working backwards, Please list occupations and job titles.

- a.) Current Occupation _____ Job Title: _____
- b.) Previous Occupation _____ Job Title: _____
- c.) Previous Occupation _____ Job Title: _____

CLASS ORIGINS: PARENTAL EDUCATIONAL ATTAINMENT AND OCCUPATIONAL STATUS

7. The next questions are about your childhood. Think back to when you were 16 years old. What is the highest degree or level of school that parent or legal guardian #1 completed? (Mark one box).

- Less than high school
- High School Graduate; high school DIPLOMA or the equivalent (for example: GED)
- Some college credit one or more year of college, no degree
- Associates degree (for example: AA, AS)
- Bachelor's degree (for example: BA, AB, BS)
- Master's degree (for example: MA, MS, MEng, EEd, MSW, MBA)
- Professional Degree (for example: MD, DDS, DVM, LLB, JD)
- Doctorate Degree (for example: PhD, EdD)
- Unknown/Don't Know

8. Was this in the U.S. or somewhere else? If somewhere else write in: _____

9. Think back to when you were 16 years old. What is the highest degree or level of school that parent or legal guardian #2 completed? (Mark one box).

- Less than high school
- High School Graduate; high school DIPLOMA or the equivalent (for example: GED)
- Some college credit one or more year of college, no degree
- Associates degree (for example: AA, AS)
- Bachelor's degree (for example: BA, AB, BS)
- Master's degree (for example: MA, MS, MEng, EEd, MSW, MBA)
- Professional Degree (for example: MD, DDS, DVM, LLB, JD)
- Doctorate Degree (for example: PhD, EdD)
- Unknown/Don't Know

10. Was this in the U.S. or somewhere else? If somewhere else write in: _____

GENERATIONAL STATUS

11. What is your place of birth? _____ (City, State, Country)
 a.) If born abroad, at what age did you come to the U.S.?
12. What is the place of birth of parent 1/legal guardian 1? _____ (City, State, Country)
13. What is the place of birth of parent 2/legal guardian 2? _____ (City, State, Country)

PARENTAL STATUS

14. Are you a parent? _____
15. How many children do you have? _____
 a.) Of these, how many are under age 18? _____
 b.) Of these, how many are 18 or older? _____

PARTNER STATUS

16. Are you married, partnered, divorced, widowed? _____

IF PARTNERED/MARRIED/DOMESTIC PARTNERSHIP PLEASE PROVIDE EDUCATIONAL ATTAINMENT AND OCCUPATION OF PARTNER

17. What is the highest degree or level of school that partner/spouse completed? (Mark one box).
- ___ Less than high school
- ___ High School Graduate; high school DIPLOMA or the equivalent (for example: GED)
- ___ Some college credit one or more year of college, no degree
- ___ Associates degree (for example: AA, AS)
- ___ Bachelor's degree (for example: BA, AB, BS)
- ___ Master's degree (for example: MA, MS, MEng, EEd, MSW, MBA)

___ Professional Degree (for example: MD, DDS, DVM, LLB, JD)

___ Doctorate Degree (for example: PhD, EdD)

___ Unknown/Don't Know

18. TOTAL HOUSEHOLD INCOME

What was your total combined household income in 2016 before taxes. This question is completely confidential and just used to help classify the responses, but it is very important for our research. Please circle the appropriate response.

- Less than \$20,000
1
- \$20,000 to \$39,999
2
- \$40,000 to \$59,999
3
- \$60,000 to \$79,999
4
- \$80,000 to \$99,999
5
- \$100,000 to \$149,999
6
- \$150,000 to \$199,999
7
- \$200,000 to \$249,999
8
- Over \$250,000
9
- Don't Know
10
- Refused
11

19. HOUSEHOLD COMPOSITION

How many people live in your household? Total: _____

Of these please breakdown the numbers by age category

Write in #: _____ Adults Ages 18-64

Write in #: _____ Children 0-17

Write in #: _____ Elderly over the age of 65

20. What is your current age: _____

I am required to ask this next question. Again all of these responses are voluntary. You may skip over any question.

GENDER

21. Are you a man or woman?

Woman 1

Man 2

Transgender.....3

Refused99

SEXUAL IDENTITY Source: National Health Interview Survey (NHIS, 2014)

Which of the following best describes how you think of yourself? (for adults 18+)

1. Lesbian or gay
2. Straight, that is not lesbian or gay
3. Bisexual
4. Something else, Write in: _____
5. Don't Know
6. Refused

Preferred Identity (in addition to or not listed above) Write in: _____

SEX ASSIGNED AT BIRTH

What sex were you assigned at birth, on your original birth certificate?

1. Female
2. Male

Just to confirm, you mentioned that on your original birth certificate your sex was assigned as _____, but know you identify as (man, woman, transgendered)?

DISABILITY

Do you have a disability? _____ Yes _____ No _____ Refused

VETERAN STATUS

1. Have you served in the military?
Yes No Refused
2. How long? _____
3. Have you experienced an injury, which has resulted in a disability?
4. Are you using your GI or Veterans benefits to finance your education?

**Ethnic Studies Education and Health (ESEH) Albuquerque Public Schools (APS),
University of New Mexico (UNM) Research Practice Partnership (RPP)
POST INSTITUTE DEMOGRAPHIC FORM**

THIS DEMOGRAPHIC SURVEY IS TO BE COMPLETED AT THE END OF THE INSTITUTE. IF YOU HAVE NOT COMPLETED THE FIRST DEMOGRAPHIC

QUESTIONS DISTRIBUTED AT THE BEGINNING OF THE INSTITUTE PLEASE DO SO BEFORE COMPLETING THIS DEMOGRAPHIC QUESTIONNAIRE.

PARTICIPANT NUMBER: _____

(This should be the same number you used on the original demographic form and survey.)

**PLEASE DO NOT PUT YOUR NAME ON THIS FORM
ONCE COMPLETED PLEASE ENCLOSE IN ENVELOPE PROVIDED AND SEAL.**

1. If you were walking down the street, what race do you think others who do not know you personally would automatically assume you were, based on what you look like? (choose one)

_____ White (Non-Hispanic)

_____ Black (Non-Hispanic)

_____ Native American

_____ Asian

_____ Arab/Middle Eastern

_____ Hispanic/Latino(a)

_____ Some other Race: (Please write in: _____)

2. We are interested in how you would describe your appearance. How would you describe your skin color with 1 being very light and 5 being very dark or some number in between? How would you describe your skin color?

Very light.....1

Light2

Medium.....3

Dark.....4

Very dark5

Don't know.....88

Refused.....99

3. Have you ever been mistaken as being another race? If so, list the top three in order of frequency, starting with the race that you are most often assumed to be.
- a.
 - b.
 - c.

4. If you were walking down the street, how would other Americans who do not know you personally identify your gender based on what you look like? Would you say:

___ Man ___ Woman ___ Transgender ___ Other? Write in: _____

5. If you were walking down the street, how would other Americans who do not know you personally identify your sexual orientation? Would you say: ___ Straight/Heterosexual ___ Gay/Queer ___ Transgender ___ Other? Write in: _____