Ethnicity Form

To be completed by the Experimenter

Experimenter: Exp./Participant #: ___________

IRB Protocol: Testing Date: ___/___/___
☐ OC
☐ LNFFC
☐ SCS
☐ ___________
☐ entered into Database

To be completed by the Participant

Completion of this form is voluntary, and any information that you provide will be kept confidential. Our funding agency (National Institute of Health) asks that we obtain the following information from each participant so that NIH can monitor gender and minority inclusion in research studies. Please circle your answers. Thank you.

Gender: Male Female Do not wish to say

Ethnic Category:
Hispanic or Latino
Not Hispanic or Latino
Do not wish to say

Racial Category:
American Indian / Alaskan Native
Asian
Native Hawaiian / Other Pacific Islander
Black / African American
White
More than one
Unknown / Do not wish to say
Other ___________________________

Definitions:
- Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race. The term, "Spanish origin," can be used in addition to "Hispanic or Latino."
- American Indian / Alaskan Native: A person having origins in any of the original peoples of North, Central, or South America, and who maintains tribal affiliation or community attachment.
- Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native Hawaiian / Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Black / African American: A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."
- White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.