

Intake Questionnaire

Thank you for visiting Aileen's, a community organizing and hospitality space for women working along the Pac Hwy. If you have never filled this form, please answer the following questions to help us collect data about our community and keep our silly funders happy (we gotta hustle). Your information is anonymous – we do not ask for your name – and will not affect services you will receive at Aileen's. Thank you for your cooperation!

Date of enrollment (MM/DD/YY):

What year were you born in?

What is your racial background? Check all that apply.

- American Indian/Native Alaskan
- Asian/Asian American
- Black/African American/African
- Native Hawaiian/Pacific Islander
- White
- Other (_____)
- Unknown
- Prefer not to say

Are you Hispanic?

- Hispanic
- Not Hispanic
- Unknown
- Prefer not to say

How would you describe your gender?

- Woman
- Man
- Other (_____)
- Unknown
- Prefer not to say

Do you identify as transgender?

- Transgender
- Not transgender
- Unknown
- Prefer not to say

How would you describe your sexual orientation? Check all that apply.

- Heterosexual/Straight
- Gay or Lesbian
- Bisexual/Pansexual
- Questioning or unsure
- Other (_____)
- Unknown
- Prefer not to say

Are you currently homeless?

- Yes
- No
- Unknown
- Prefer not to say

What is the zip code of the area you most often stay at?

What city do you live or most often stay in?

What language do you prefer to receive services in?

Do you have a disability (or disabilities)?

- Intellectual and/or developmental disability
- Physical disability
- Sensory or communication disability
- Other (_____)
- Prefer not to say

How many adults are in your household?

How many children are in your household?

How much money does your household bring in in a year?

- Less than \$25,000
- More than \$25,000 (How much? _____)
- Unknown
- Prefer not to say

Have you ever or do you currently serve in the military?

- Yes
- No
- Unknown
- Prefer not to say

If yes, what was your discharge status?

How many years did you serve in the military?

What year was your last year of service in the military?

Are you related to someone who is serving or has served in the military?

If so, what is your relationship to that person?

- Not related
- Minor dependent
- Spouse/partner
- Surviving spouse/partner
- Other dependent adult
- Unknown
- Prefer not to say