

## Registration – Community Programs

Date(s) of Program: \_\_\_\_\_

Trainee ID: \_\_\_\_\_

Unless otherwise indicated, please mark only ONE ANSWER for each item.

1. **What is your age?** \_\_\_\_ years
2. **What is your gender?**  
 Female     Male
3. **What race/ethnicity do you MAINLY consider yourself to be?**  
 White  
 Black  
 Hispanic/Latin origin  
 Native American or Alaskan Native  
 Asian  
 Hawaiian Native or Pacific Islander  
 Multiracial  
 Other: \_\_\_\_\_
4. **What language do you understand best?**  
 English  
 Spanish  
 Other: \_\_\_\_\_
5. **What is your HIGHEST LEVEL of education?**  
 Through 8<sup>th</sup>-grade  
 High school  
 Some college/technical schooling  
 Associates degree  
 Bachelor's degree  
 Master's degree  
 Doctoral degree
6. **Have you attended community awareness programs before?**  
 Yes     No
7. **How did you learn about this program?**  
CHECK ALL THAT APPLY.  
 Email  
 Facebook  
 Twitter  
 Advertisement  
 Word of mouth  
 Literature drop  
 Other: \_\_\_\_\_
8. **I came to this program MAINLY because...**  
 I want to learn more about the topic  
 I am concerned about hazardous materials in my community  
 Someone I know is concerned about hazardous materials in my community  
 I want to take action about hazardous materials in my community
9. **Please provide your home zip code:**  
\_\_\_\_\_

THANK YOU FOR YOUR TIME AND INPUT!