

Client Name: _____ Primary Language Spoken in Household: _____ Date: _____

HOUSEHOLD DEMOGRAPHICS

FIRST NAME AND MI	LAST NAME	RELATION TO HEAD OF HOUSEHOLD	DATE OF BIRTH Month/day/year	SEX (M or F)	RACE	HISPANIC (YES OR NO)	EDUCATION LEVEL	MARITAL STATUS	DISABLED (YES or NO)	SPECIAL NEEDS	PREGNANT (YES or NO)	MONTHLY INCOME	INCOME SOURCES
		HEAD											

HOUSEHOLD DEMOGRAPHIC CODES

RELATION TO HEAD OF HOUSEHOLD

- Individual
- Child
- Grandchild
- Parent
- Non-relative
- Spouse
- Stepchild
- Foster Child
- Partner

RACE

- Asian-A
- Bi-racial or multiracial-BR or MR
- Black or African American-B
- Caucasian or White-W
- Native American-NA
- Pacific Islander-PI
- Asian (India)-AI

EDUCATION LEVEL

- Adult-college degree
- Adult-grade 10, 11, 12

- Adult-High School Graduate/ GED
- Adult-grade 9 or less
- Youth-preschool
- Youth-head start
- Youth-grade 7-8
- Youth-grade 9-12
- Child-grade 1-6

MARITAL STATUS

- Divorced-D
- Legally separated-LS
- Married-M
- Partner-P
- Single-S
- Widowed-W

CHILDREN'S SPECIAL NEEDS

- Developmental Disability-DD
- Emotional Impairment-EI
- Learning Disability-LD
- Physical Disability-PD
- None