Respiratory Questionnaire for Non-Textile Workers for the Cotton Industry

Identification No.  Interviewer Code

Location  Date of Interview

A. IDENTIFICATION

1. NAME   (Last)   (First)   (Middle Initial)

2. CURRENT ADDRESS (Number, Street, or Rural Route, City or Town, County, State, Zip Code)

3. PHONE NUMBER  AREA CODE  NO.
   (  _ _ _ )  _ _ _ _ _ - _ _ _ _ _

4. BIRTHDATE   (Mo., Day, Yr.)

5. SEX
   1. _____ Male   2. _____ Female

6. ETHNIC GROUP OR ANCESTRY (Check all that apply)
   1. _____ White
   2. _____ Black or African American
   3. _____ Asian