



## Demographic Worksheet

County of Residence:		Age:	The data collected on this worksheet is for statistical purposes only and is not considered when determining your eligibility for services rendered by Women Rock, Inc.		
Please check one of the following options:		Insured <input type="checkbox"/>		Underinsured <input type="checkbox"/>	No Insurance <input type="checkbox"/>
Ethnicity		White <input type="checkbox"/>		African American <input type="checkbox"/>	Hispanic <input type="checkbox"/>
		Asian <input type="checkbox"/>		Other <input type="checkbox"/>	Please Specify _____
Please check highest level of education:		High School/GED <input type="checkbox"/>	College (2 YR) <input type="checkbox"/>	University (4 YR) <input type="checkbox"/>	