

# Consumer Characteristics

Please complete this form annually for Registered Services under the Older Americans Act. Data is critical for Federal Title III and State Funds. Unauthorized use is strictly prohibited. Information is protected by Privacy and Security Agreements. Names and identifiers are not shared. Updated 11/17/2021

## Basic Information

Name (Last, First, Middle Initial)

Date of Birth

Form Date

Physical Address

City

State

Zip Code

Mailing Address (If different than physical)

City

State

Zip Code

## Contact Information

Phone

Email

Emergency Contact

Name

Relationship

Phone

## Demographics

Race (Check all that apply)

 Alaskan Native/American Indian  
 Asian/Asian American  
 Black/African American  
 Native Hawaiian/Pacific Islander  
 Non-Minority (white, non-hispanic)  
 White Hispanic

Gender

 Female  
 Male  
 Other

Individuals  
in home

Income

	Annual	Monthly
1	\$16,990	\$1,416
2	\$22,890	\$1,908
3	\$28,790	\$2,399
4	\$34,690	\$2,891
5	\$40,490	\$3,383

Minority Status

 Minority  
 Non-Minority

Ethnicity

 Unknown  
 Hispanic or Latino  
 Not Hispanic or Latino

Is household income at or below the above income guide?

 Yes  No

Do you live alone?

 Yes  No

# Consumer Characteristics (Continued)

## Ability and Assistance

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If you use personal or stand-by assistance, supervision, or cues to perform the following activities please check the corresponding box. Check all that apply.

### Instrumental Activities of Daily Living (IADLs)

- Preparing meals
- Shopping for personal items
- Medication management
- Managing Money
- Using telephone
- Doing laundry
- Doing light housework
- Using available transportation

### Activities of Daily Living (ADLs)

- Feeding
- Dressing
- Continence
- Transferring in/out of bed/chair
- Bathing
- Toileting

Has Alzheimer's or Related Dementia/Disorder (ADRD):

Yes      No      Don't Know

Has Traumatic or Acquired Brain Injury (TABI):

Yes      No      Don't Know

Total score from Determine Your Nutritional Health (required for home delivered meals)

### For Adult Day Services (ADS) Consumers Only

Indicate Payment Source:

Adult Day Services (ADS) Grant

Medicaid Waiver

Private Pay