Your Name					
Date Month Day Year					
Sun Habits Survey	: Par	rent / C	Child		
Marking Inst	ructions	1			
Please use black or blue ink. Correct Incorrect					
This survey asks about you, your child, and your views and habits when out in the sun. The information you provide will help us understand what people are doing to prevent sun damage and skin cancer. All information will be kept private and confidential. Thank you for your help.					
1. What is your relationship to the child?			<u> </u>		
O mother O father O other					
Information abo	ut yo	our C	hild		
The next questions ask about your child.					
2. On average, how long was your child outdoors in the sun be	etween 1	0 a.m. and 4	p.m. last s	ummer?	
a. Hours per day in the sun (10 a.m. to 4 p.m.) on WEEk O 1 or less O 2 O 3	KDAYS	O 4	O 5	O 6	
b. Hours per day in the sun (10 a.m. to 4 p.m.) on WEE	KENDS				
O 1 or less O 2 O 3		O 4	O 5	O 6	
When you are outdoors in the sun, how often do you have your child do each of the following?		Rarely or never	Sometimes	Usually	Always
3. Wear a shirt with sleeves		0	0	0	0
4. Wear sunglasses		Õ	0	0	0
5. Stay in the shade or under an umbrella		0	0	0	0
6. Wear sunscreen		0	0	0	0
7. Wear a hat		0	0	0	0
8. How often do you or your child apply sunscreen on him/h	er before	e s/he goes t	o outdoor a	activities?	
O Rarely or never O Sometimes O Usually O	Always				
0. When do you (or your shild) yously first put supserson a	" ງ				
9. When do you (or your child) usually first put sunscreen o					
O First thing in the morning O Before going outside	O Afte	er being ou		Do not apply sun	
			P	lease skip to Que	stion 12
10. What brand of sunscreen do you or your child use most o	ften?				
Please specify:					
11. What is the Sun Protection Factor (SPF) number of this sunscreen? (fill in the number)					
12. Have you taught your child how to apply sunscreen?	O Yes	O No			

13. Child's sex:	O Male C	Female				
14. Child's age:	O 5 O	5 O7 O8	09 0	10 O Other		
15. What is this ch	ild's natural hair	color?				
O Red	O Blonde	O Light brown	ı 0	Dark brown	O Black	
16. What is the col O Green	or of this child's O Blue	eyes? O Light brown	OD	ark brown	O Black	
17. Has this child e	ever had a sever	e sunburn?	OYes ONo			
18. What is the col O Very fair	or of this child's O Fair	untanned skin? O Olive	O Dark	O Very dark	O Black	
19. After being in	direct sunlight f	or more than 30 min	nutes, does this	child get:		
O A severe	e burn with blist	ering				
O A severe	e burn without b	listering				
O A mild I	ourn, but then ta	n or darken				
O Tanned	easily					
O Tanned	slowly					

20. How many times last summer did this child get a sunburn?

O None O 1 O 2 O 3 O 4 O 5 or more

Information about You

The next questions ask about YOU and YOUR OWN sun protection habits (not your child's).

When you are outdoors in the sun, how often do you do each of the following?		Rarely or never	Sometimes	Usually	Always
		-		-	-
21. Wear a shirt with sleeves		0	0	0	0
22. Wear sunglasses		0	0	0	0
23. Stay in the shade or under an umb	rella	0	0	0	0
24. Wear sunscreen		0	0	0	0
25. Wear a hat		0	0	0	0
		-	•		•
26. When do you usually first apply su	inscreen?				
O First thing in the morning O	Before going outside O Af	fter being o		o not use sun se skip to Que	
			1 Ica	se skip to Que	5001 27
27. What brand of sunscreen do you u	se most often?				
Please specify:					
28. What is the Sun Protection Factor	(SPF) number of your sunscre	en?	(fill in t	he number)	
29. What is your natural hair color?					
O Red O Blonde	O Light brown	O Dark	brown	O Blac	:k

31. What is the color of your untanned skin? ○ Very fair ○ Dark ○ Fair ○ Very dark ○ Olive ○ Black 32. Have you ever been told by your doctor that you have skin cancer? ○ No ○ Yes If YES, what type? Background Information 33. Your sex: ○ Male ○ Female ○ 34. Your date of birth:	30. Have you ever had a severe sunburn? (i.e. painful and/or blistering) O Yes O No
O No O Yes If YES, what type? Background Information 33. Your sex: O Male ○ Female 34. Your date of birth: Image: Descent of Descent	O Very fair O Dark O Fair O Very dark
33. Your sex: O Male O Female 34. Your date of birth:	O No
34. Your date of birth:	Background Information
Month Day Year 35. Racial/Ethnic background: (Fill in the one best choice) O Caucasian/White O Asian (Japanese, Chinese, Korean, etc.) O Black O Other O Other O Other O Hispanic O ther O Other O Other 36. What was your total household income in the past 12 months? (Optional) S10,000 or less S35,001 to \$50,000 0 \$10,000 or less 0 \$35,001 to \$55,000 S20,001 to \$35,000 O More than \$75,000 37. How much schooling do you have? O Graduated from a 4-year college O completed high school O Graduated school O Completed high school O Other O Other O Other O Other 38. Are you: O Married O Divorced/widowed/separated O Never been married O Part of an unmarried couple	33. Your sex: O Male O Female
 Caucasian/White O Asian (Japanese, Chinese, Korean, etc.) Black O Other Other Other Hispanic 36. What was your total household income in the past 12 months? (Optional) \$10,000 or less \$\$35,001 to \$50,000 \$10,001 to \$20,000 \$\$50,001 to \$75,000 \$20,001 to \$35,000 O More than \$75,000 \$20,001 to \$35,000 O More than \$75,000 37. How much schooling do you have? O Have not completed high school O Graduated from a 4-year college Completed high school O Completed graduate school Completed some college O Other Other	
 O Have not completed high school O Completed high school O Completed some college O Other O Other O Married O Divorced/widowed/separated O Never been married O Part of an unmarried couple 	O Caucasian/White O Asian (Japanese, Chinese, Korean, etc.) O Black O Other O Hispanic O ther 36. What was your total household income in the past 12 months? (Optional) O \$10,000 or less \$35,001 to \$50,000 O \$10,001 to \$20,000 \$50,001 to \$75,000 O \$20,001 to \$35,000 More than \$75,000
O Married O Divorced/widowed/separated O Never been married O Part of an unmarried couple	O Have not completed high school O Graduated from a 4-year college O Completed high school O Completed graduate school
39. How many children do you have?	-
	39. How many children do you have?

Thank you for your assistance!