

# Hurricanes Research Project

## Responder Data Form

This form must accompany each interview to be included in the database. PLEASE PRINT. Use back for more space.

Name \_\_\_\_\_  Male;  Female  
First Middle Last Nickname

Address \_\_\_\_\_  
Mail/Street Address City State ZIP

Phone(s) \_\_\_\_\_ Email \_\_\_\_\_

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### RESPONSE

Which hurricane(s) did you respond to? Check all that apply:  Katrina,  Rita,  Other \_\_\_\_\_

What dates did you respond? \_\_\_\_\_

Where did you respond? \_\_\_\_\_  
City State

If you responded to a community other than your home, how long were you there? \_\_\_\_\_

Were you paid for your response work?  Yes  No. If yes, give employer: \_\_\_\_\_

Special training related to your response \_\_\_\_\_

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### TYPE/NATURE OF RESPONSE

How did you respond to the hurricane survivors? Check appropriate boxes and answer appropriate sections.

Public official during a storm (job/title) \_\_\_\_\_

Firefighters,  Police,  EMT,  Other \_\_\_\_\_

Volunteer rescuer (describe) \_\_\_\_\_

Military (describe) \_\_\_\_\_

Medical (describe) \_\_\_\_\_

Mental health (describe) \_\_\_\_\_

Artist/art therapist (describe) \_\_\_\_\_

FEMA staff (capacity/job) \_\_\_\_\_

Assessment Team (Role) \_\_\_\_\_

Red Cross worker (capacity/job) \_\_\_\_\_

Shelter volunteer (shelter name/job) \_\_\_\_\_

Veterinarian,  Pet rescuer,  Pet adopter  Pet shelter volunteer \_\_\_\_\_

Other \_\_\_\_\_

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**HOST TO EVACUEE(S) AND/OR RESPONDERS:** in  home, or  in other property?

**Hosted** (check all that apply):

relative(s)? How many? \_\_\_\_\_ How long? \_\_\_\_\_ Relationship(s) \_\_\_\_\_

friend(s)? How many? \_\_\_\_\_ How long? \_\_\_\_\_ Relationship(s) \_\_\_\_\_

How long had you known them? \_\_\_\_\_

stranger(s)? How many? \_\_\_\_\_ How long? \_\_\_\_\_ How did you come to host the evacuee? \_\_\_\_\_

From where did the evacuees come? \_\_\_\_\_

What was your estimated added expense in dollars? \_\_\_\_\_

Did you receive any outside help? If so, describe: \_\_\_\_\_

**BACKGROUND**

Birthplace \_\_\_\_\_ If not U.S., # of yrs. in US \_\_\_\_\_ Birthdate \_\_\_\_\_  
City State Country month/day/year

Race/Ethnicity: Check all that apply  White/Caucasian,  Black/African descent,  Creole,  Cajun,  
 American Indian/Alaska Native (specify) \_\_\_\_\_,  Italian,  Slav (specify) \_\_\_\_\_  
 Hispanic (specify) \_\_\_\_\_,  Asian (specify) \_\_\_\_\_  Other: \_\_\_\_\_

Cultural/Ethnic Identification \_\_\_\_\_

Religious affiliation \_\_\_\_\_ Languages spoken \_\_\_\_\_

Education completed:  Elementary School,  High School/GED,  Some College,  Bachelor's,  
 Master's,  Ph.D., J.D., etc.  Attending college: \_\_\_\_\_ Schools attended \_\_\_\_\_

Family Income 2004 0-19,999, 20,000-40,999, 41,000-60,999, 61,000-80,999, 81,000-120,999, above

Current employment:  Employed,  Unemployed,  Retired?

Occupation(s) \_\_\_\_\_

Military experience \_\_\_\_\_

**COMPLETE THIS SECTION FOR HURRICANE SURVIVOR (if not previously interviewed):**

Displaced:  Yes;  No. If yes, check all that apply:  Hotel/motel,  Rental apt./trailer,  State Park,  
 Red Cross shelter,  Other shelter (type): \_\_\_\_\_,  Relative's home,  Friend's home,  
 Stranger's home,  RV,  Tent,  Temp. gov't housing: \_\_\_\_\_,  Other \_\_\_\_\_

Pre-storm Address \_\_\_\_\_  
Mail/Street Address City State ZIP

Neighborhood name \_\_\_\_\_  Homeowner,  Renter No. of years: \_\_\_\_\_

Future Address \_\_\_\_\_ Email \_\_\_\_\_  
Mail/Street Address (if known) City State ZIP

Other Contact/Address \_\_\_\_\_  
Name Relation Mail/Street Address City State ZIP

Pre-storm phone(s) \_\_\_\_\_

Other cities lived/dates (5 years or more) \_\_\_\_\_

Mother's name/birthplace \_\_\_\_\_

Father's name/birthplace \_\_\_\_\_

Length of time family has lived in region (generations or years) \_\_\_\_\_

single,  married - Spouse's name and birthplace \_\_\_\_\_

Number of children/ages \_\_\_\_\_

Post-storm Occupation(s) \_\_\_\_\_

Social groups, club, civic, professional memberships \_\_\_\_\_

Interviewer: \_\_\_\_\_  
First Name Last Affiliation (if any)

Are photographs included?  Yes,  No (If yes, complete the Photograph Log.)

Are manuscripts included?  Yes,  No (If yes, complete the Manuscript Data Sheet.) 11/05

**INSTRUCTIONS FOR COMPLETING THIS DATA FORM:** This form is designed to be filled out by the interviewer. Some of the information may be obtained from the general interview questions, but some of the above questions must be asked directly. Use the back of the form (or other pages) to add information on any item above; be sure to note the category of the information.