



Office Use Only
SOF ID#

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Acrostic

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Staff ID#

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① What is your current marital status? **V8MARRY**

- Married or living in a married-like relationship
- Divorced
- Widowed
- +** Single, never married
- +** Separated

V8ALYRS

② What type of residence do you currently live in? **V8RESID**

- Private home or apartment
- Retirement home or senior complex
- ++** Nursing home
- ++** Personal care home (Adult foster home, assisted living)
- ++** Other → Please describe: _____

③ Do you live alone? **V8ALONE**

- Yes
- No

V8ALYRS

Who do you live with? Check all that apply.

- Spouse **V8SPOUSE**
- Child/children **V8CHILD**
- Other family members **V8FAMILY**
- Friends **V8FRIEND***
- Nonrelatives **V8NONREL***

V8RESNH*

V8PRVHM

** not released for AA cohort*

④ How long have you been in this current living arrangement?

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years **V8CRLVYR**

V8LVYRS

+ combined

++combined for AA only

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