

Appendix C
Demographic Data Questionnaire

Code _____

1) Age: _____

2) Gender: Male: _____ Female: _____

3) Race/Ethnicity: White ___ Latino ___ Black ___ Asian ___ Unknown ___

American Indian ___ Hawaiian ___

4a) Highest Rank/Rate attained: _____ 4b) Branch of Service: _____

4c) Service Type: _____ 4d) Years Served: _____

5) How many amputations have you had? _____

6) Location of Amputations:

Toes: _____ # _____ Fingers: _____ # _____ Foot: _____ L or R Hand: _____ L or R

Below the Knee: ___ Above the Knee: ___ Below the Elbow: ___ Above the Elbow: ___

7) Where do you live right now? (Ex: rented apartment; single family home, etc.)

8) Currently, how many people do you share a home with?

9) Currently, are you employed and/or do you attend school or other training programs?

Employed only ___ Attend school only ___ Employed and attend school ___

10) What would be your *ideal* living environment? _____

Any additional comments you would like to add? _____