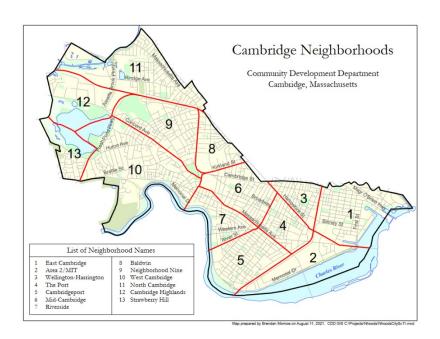
#### **Attachment D**

The following questions are optional. However, by answering them you will help the City to ensure that our Boards and Commissions represent the diversity of the Cambridge population. Thank you for your participation.

### Neighborhood

Which neighborhood do you live in?

- O East Cambridge
- O Area 2/MIT
- O Wellington-Harrington
- O The Port
- O Cambridgeport
- O Mid-Cambridge
- O Riverside
- O Baldwin
- O Neighborhood Nine
- O West Cambridge
- O North Cambridge
- O Cambridge Highlands
- O Strawberry Hill



### Age

What is your age?

# Response Choices (select one)

- O Under 18
- O 18-24
- 0 25-34
- O 35-44
- 0 45-54
- 0 55-64
- O 65-74
- O 75+

#### Gender

What is your gender or gender identity?

# Response Choices (choose all that apply)

- ☐ Female/woman
- □ Male/man

<ul> <li>□ Non-binary/gender non-conforming (Gender is not exclusively female or male and/or does not fit into one gender category)</li> <li>□ Transgender (Sex assigned at birth is different than gender [Not cisgender])</li> <li>□ Cisgender (Sex assigned at birth is the same as gender [Not transgender])</li> <li>□ Self-describe [please enter]</li> <li>□ Choose not to answer</li> </ul>
Race/Origin What is your race/origin?
Response Choices (select one or more)  Asian/East Indian  Black/African American  Hawaiian/Pacific Islander  Hispanic/Latino/Latina/Latinx  Middle Eastern or North African  Native American/Alaskan  White/Caucasian  Self-describe [please enter]
Income What is your household or family income?
Response Choices (select one)
Education What is the highest level of education that you have completed?
Response Choices (select one)  O Less than high school/GED O High school/GED O Some college, no degree O Associate degree or technical certificate O Bachelor's degree

<ul><li>Graduate, professional, or advanced studies; no degree</li><li>Graduate, professional, or advanced degree</li></ul>
Language Spoken at Home What is the primary language you speak at home?
Response Choices (select one or more)  Amharic  Arabic  Bangla  Chinese  English  Haitian Kreyol  Portuguese  Spanish  Other [please enter]
Tenure Do you rent or own your home?
Response Choices (select one) O Rent O Own
Disability Do you experience any of the following difficulties?
Response Choices (select all that apply)  Difficulty seeing, even if wearing glasses Difficulty hearing, even if wearing hearing aids Difficulty walking or climbing steps Difficulty remembering or concentrating Difficulty with self-care, such as washing all over, or dressing Difficulty communicating, for example understanding or being understood None of these
Employment What best describes your current employment status?
Responses (select one)  O Employed full-time

- O Employed part-time
- O Student
- O Retired
- O Homemaker
- O Not employed
- O Other [please enter]

