

Demographic Questionnaire Template

A. Personal Information

Full Name: _____

Date of Birth (MM/DD/YYYY): _____

Place of Birth (City, State, Country): _____

B. Cultural Background

Primary Language: _____

Secondary Language(s): _____

C. Academic and Professional Background

Current Educational Level: _____

Field of Study/Major (if applicable): _____

Current Occupation: _____

Employer/Institution: _____

D. Lifestyle Information

Type of Residence: (e.g., apartment, house, dorm) _____

Living Situation: (e.g., alone, with parents, roommates) _____

Number of Dependents: _____