

Elderly Care Research Recruitment Screener

Full Name

Age

Email Address

Phone Number

Are you currently a caregiver for an elderly individual?

☐ Yes ☐ No

Relationship to the elderly individual (if applicable)

What best describes your current living arrangement?

Which of the following care tasks do you assist with? (Select all that apply)

☐ Medication Management ☐ Mobility Assistance ☐ Personal Hygiene ☐ Meal Preparation
☐ Household Tasks ☐ Other

Are you available for a research interview?

☐ Yes ☐ No

Additional Comments