

UNITY QPE Background Questionnaire for Individuals and Couples

What is your gender?

☐ Female ☐ Male ☐ Prefer not to say ☐ Prefer to self-describe

[If "What is your gender?" answered **Prefer to self-describe, show "If prefer to self describe, please enter details"]**

If prefer to self-describe, please enter details: _____

Are you the partner providing:

☐ Eggs ☐ Sperm

How old are you? _____

What is your ethnic origin? *(Describes where your family originates from and not where you were born)* *Tick one*

☐ Asian or Asian British ☐ Black, Black British, Caribbean or African ☐ Mixed or multiple ethnic groups
☐ Other ethnic group ☐ White

[If "What is your ethnic origin?" answered **Asian or Asian British, show "If Asian/Asian British"]**

If Asian/Asian British

☐ Indian ☐ Pakistani ☐ Bangladeshi ☐ Chinese ☐ Any other Asian background

[If "If Asian/Asian British" answered **Any other Asian background, show "If any other Asian background, please enter details"]**

If any other Asian background, please enter details: _____

[If "What is your ethnic origin?" answered **Black, Black British, Caribbean or African, show "If Black/African/Caribbean/ Black British"]**

If Black/African/Caribbean/Black British

☐ African ☐ Caribbean ☐ Any other Black/African/Caribbean background

[If "If Black/African/Caribbean/Black British" answered **Any other Black/African/Caribbean background, show "If any other Black/African/Caribbean background, please enter details"]**

If any other Black/African/Caribbean background, please enter details: _____

[If "What is your ethnic origin?" answered **Mixed or multiple ethnic groups, show "If Mixed/multiple ethnic groups"]**

If Mixed/multiple ethnic groups

☐ White and Black Caribbean ☐ White and Black African
☐ White and Asian ☐ Any other Mixed/Multiple ethnic background

[If "If Mixed multiple ethnic groups" answered **Any other Mixed/Multiple ethnic background, show "If any other Mixed/Multiple ethnic background, please enter details"]**

If any other Mixed/Multiple ethnic background, please enter details: _____

[If "What is your ethnic origin?" answered **Other ethnic group, show "If Other ethnic group"]**

If Other ethnic group

☐ Arab ☐ Any other ethnic group

[If "If Other ethnic groups" answered **Any other ethnic group, show "If any other ethnic group, please enter details"]**

If any other ethnic group, please enter details: _____

[If "What is your ethnic origin?" answered **White, show "If White"]**

If White

☐ English/Welsh/Scottish/Northern Irish/British ☐ Irish ☐ Gypsy or Irish Traveller ☐ Roma
☐ Any other white background

[If "If White" is answered **Any other white background, show "If any other white background, please enter details"]**

If any other white background, please enter details: _____

What is your first language? _____

What is your preferred language? _____

What is your current relationship status?

☐ Single ☐ Married/Civil Partnership ☐ Partner ☐ Separated ☐ Divorced ☐ Widowed

What is the highest level of education you have completed? *Please tick only one box*

☐ No qualifications ☐ O levels/GCSEs/Foundation Diploma ☐ Apprenticeship
☐ AS or A Levels/Advanced GNVQ ☐ Degree (e.g. BA/BSc) ☐ Higher degree (e.g. MSc/PhD)
☐ Professional Qualification ☐ Other

If "What is the highest level of education you have completed?" answered **Other**, show "If other, please enter details"

If other, please enter details: _____

What is your employment status?

- | | | | |
|---|--|--|--|
| <input type="radio"/> Employed full time | <input type="radio"/> Employed part time | <input type="radio"/> Full time parent | <input type="radio"/> Student |
| <input type="radio"/> Sick leave | <input type="radio"/> Retired | <input type="radio"/> Unemployed | <input type="radio"/> Looking for work |
| <input type="radio"/> Not eligible for work | <input type="radio"/> Other | | |

If "What is your employment status?" is answered **Other**, show "If other, please enter details"

If other, please enter details: _____

If "What is your employment status?" answered **Employed full time** OR **Employed part time**, OR **Other**, show "If you are employed, what is your occupation?"

If you are employed, what is your occupation? _____

Which fertility centre have you been receiving treatment from? _____

Thank you for taking the time to complete this questionnaire.