

**[COVER PAGE – USE GRAPHICAL ELEMENTS FROM NCVS-R  
BROCHURE]**

## Instructions for Completing this Form

- Please use a black or blue pen to complete this form.
- Mark X to indicate your answer. If you want to change your answer, darken the box and mark the correct answer.

## Commonly Asked Questions

### **What is the National Survey of Crime and Safety (NSCS)?**

The first part of the NSCS asks questions about your household to determine who is eligible for the main study. The main part of the NSCS asks about people's experiences with crime in the last 12 months, regardless of whether these experiences were reported to the police. It also asks people's opinions about neighborhood safety and the local police. The NSCS is asked of adults and youth ages 12 and older in selected U.S. households.

### **Why should I participate?**

This survey will provide a better picture of crime and safety in communities such as yours, and improve the government's understanding of these issues in your area and across the country.

### **How was my address selected for this survey?**

Your address was randomly selected for this study. Because this is a scientific study, your answers represent not only your household, but also thousands of households like yours.

### **How will my information be protected?**

This survey is confidential by law. The information you provide will not be shared with any individual, organization, or agency. Your name and contact information will never appear in any report or be associated with any findings. Your responses will be combined with those of others to produce statistical summaries about crime and safety.

### **How long will the survey take?**

It will take about five minutes to first gather information about your household. Then for each adult and youth ages 12 and older, the actual survey takes between 20 to 40 minutes, depending on each person's answers to the questions. We will mail a separate invitation to each person with the survey website address and a unique login. Each person will receive \$25 for participating in the main survey.

### **Do I have to participate?**

You do not have to participate and if you do participate, you can skip any question you do not want to answer. But we do hope you choose to participate. Your household's cooperation is important to ensure we capture an accurate picture of crime and safety in the United States.

### **Why is this information being collected by Westat and not the Department of Justice?**

Westat has been contracted by the Department of Justice to conduct this survey. Westat is a well-known independent research firm located in Rockville, Maryland.

### **Who can I call with questions?**

If you would like further information about the survey, you can contact NSCS Support at Westat at 1-855-917-0263 or send an email to [NSCS@westat.com](mailto:NSCS@westat.com). You can also visit the BJS website at [www.bjs.gov/content/nscs.cfm](http://www.bjs.gov/content/nscs.cfm). If you have questions about your rights and welfare as a research participant, please call the Westat Human Subjects Protections office at 1-888-920-7631. Please leave a message with your first name, the name of the research study that you are calling about (National Survey of Crime and Safety), and a phone number beginning with the area code. A Westat representative will return your call as soon as possible.

## START HERE

1. Are you age 18 or older?

☐ Yes, age 18 or older

☐ No, less than 18 years old: **STOP** ↘

Please give this survey to the member of this household age 18 or older that was indicated in the letter that came with this survey.

2. What is your age?

|\_|\_|

3. How many people living in this household are in each of the following age groups?

|\_|\_| Number of people ages 18 or older

|\_|\_| Number of people ages 12 to 17

|\_|\_| Number of people ages 0 to 11

Next are some questions about your household's recent experiences with crime.

4. In the past 12 months, has anything been stolen from you or anyone else who lives here?

☐ Yes

☐ No

5. In the past 12 months, has anyone broken in or tried to break into your home?

☐ Yes

☐ No

6. In the past 12 months, has anyone attacked or tried to attack you or anyone else who lives here?

☐ Yes

☐ No

7. On the whole, how much of the time is the community where you live safe?

☐ Always safe

☐ Mostly safe

☐ Sometimes safe

☐ Rarely safe

☐ Never safe

8. Is there any place within a mile of your home where you would be afraid to walk alone at night?

☐ Yes

☐ No

Next are some questions about your household.

9. Are your living quarters owned/being bought, rented, occupied without payment of rent?

☐ Owned or buying

☐ Rented

☐ No payment

10. Which of the following best describes the type of housing where you live?

☐ House

☐ Apartment, condominium, or flat

☐ Mobile home or trailer

☐ Student quarters in college dormitory

☐ Other (Describe) ↘

|\_\_\_\_\_|

- Answer the following questions for all people who currently live at this address, age 12 years or older. Begin with yourself as Person 1.

PERSON 1 (YOU)	
1.	What is your first name, initials or nickname?  _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _
2.	What is your last name?  _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _
3.	Are you... <input type="checkbox"/> Male <input type="checkbox"/> Female
4.	Are you of Hispanic, Latino or Spanish origin? <input type="checkbox"/> Yes <input type="checkbox"/> No
5.	What is your race? [Mark one or more boxes] <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Other (specify:) _____
6.	Are you currently... <input type="checkbox"/> Now married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Never married
► If you indicated more people ages 12 and older live at this address, continue answering about the next person; otherwise, return this form in the postage-paid envelope.	

PERSON 2	
1.	What is this person's first name, initials or nickname?  _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _
2.	What is this person's last name?  _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _
3.	How old is this person?  _ _ _
4.	Is this person... <input type="checkbox"/> Male <input type="checkbox"/> Female
5.	Is this person of Hispanic, Latino or Spanish origin? <input type="checkbox"/> Yes <input type="checkbox"/> No
6.	What is this person's race? [Mark one or more boxes] <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Other (specify:) _____
7.	Is this person currently... <input type="checkbox"/> Now married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Never married

## PERSON 2, CONTINUED

8. How is this person related to you?
- ☐ Your husband/wife
- ☐ Your son/daughter
- ☐ Your father/mother
- ☐ Your brother/sister
- ☐ Other relative
- ☐ Other non-relative
9. If this person is a youth under the age of 18, what is the first name of the parent or guardian whom we should ask for permission to include this youth in the study?
- |\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|
- If you indicated more people ages 12 and older live at this address, continue answering about the next person; otherwise, return this form in the postage-paid envelope.

### PERSON 3

1. What is this person's first name, initials or nickname?  
|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|
2. What is this person's last name?  
|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|
3. How old is this person?  
|\_|\_|\_|  
  
☐ Separated  
☐ Never married
4. Is this person...  
☐ Male  
☐ Female

**PERSON 3, CONTINUED**

5. Is this person of Hispanic, Latino or Spanish origin?
- ☐ Yes
- ☐ No
6. What is this person's race? [Mark one or more boxes]
- ☐ White
- ☐ Black or African American
- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ Other (specify): \_\_\_\_\_
7. Is this person currently...
- ☐ Now married
- ☐ Widowed
- ☐ Divorced
- ☐ Separated
- ☐ Never married
8. How is this person related to you?
- ☐ Your husband/wife
- ☐ Your son/daughter
- ☐ Your father/mother
- ☐ Your brother/sister
- ☐ Other relative
- ☐ Other non-relative
9. If this person is a youth under the age of 18, what is the first name of the parent or guardian whom we should ask for permission to include this youth in the study?
- |\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|
- If you indicated more people ages 12 and older live at this address, continue answering about the next person; otherwise, return this form in the postage-paid envelope.

**PERSON 4**

1. What is this person's first name, initials or nickname?  
|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|
2. What is this person's last name?  
|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|
3. How old is this person?  
|\_|\_|\_|
4. Is this person...  
☐ Male  
☐ Female
5. Is this person of Hispanic, Latino or Spanish origin?  
☐ Yes  
☐ No
6. What is this person's race? [Mark one or more boxes]  
☐ White  
☐ Black or African American  
☐ American Indian or Alaska Native  
☐ Asian  
☐ Native Hawaiian or Other Pacific Islander  
☐ Other (specify:) \_\_\_\_\_
7. Is this person currently...  
☐ Now married  
☐ Widowed  
☐ Divorced  
☐ Separated  
☐ Never married

**PERSON 4, CONTINUED**

8. How is this person related to you?  
☐ Your husband/wife  
☐ Your son/daughter  
☐ Your father/mother  
☐ Your brother/sister  
☐ Other relative  
☐ Other non-relative
9. If this person is a youth under the age of 18, what is the first name of the parent or guardian whom we should ask for permission to include this youth in the study?  
  
|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|  
  
▶ If you indicated more people ages 12 and older live at this address, continue answering about the next person; otherwise, return this form in the postage-paid envelope.

**PERSON 5**

1. What is this person's first name, initials or nickname?  
|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|
2. What is this person's last name?  
|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|
3. How old is this person?  
|\_|\_|\_|
4. Is this person...  
☐ Male  
☐ Female

### PERSON 5, CONTINUED

5. Is this person of Hispanic, Latino or Spanish origin?
- ☐ Yes  
☐ No
6. What is this person's race? [Mark one or more boxes]
- ☐ White  
☐ Black or African American  
☐ American Indian or Alaska Native  
☐ Asian  
☐ Native Hawaiian or Other Pacific Islander  
☐ Other (specify:) \_\_\_\_\_
7. Is this person currently...
- ☐ Now married  
☐ Widowed  
☐ Divorced  
☐ Separated  
☐ Never married
8. How is this person related to you?
- ☐ Your husband/wife  
☐ Your son/daughter  
☐ Your father/mother  
☐ Your brother/sister  
☐ Other relative  
☐ Other non-relative
9. If this person is a youth under the age of 18, what is the first name of the parent or guardian whom we should ask for permission to include this youth in the study?

|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|

- Thank you. Please return this form in the postage-paid envelope.

### YOUR MAILING ADDRESS

1. Thank you for completing this part of the survey. We would like to mail you \$10 as a thank you for your participation. Please enter your name and mailing address to ensure it is sent to the correct address.

First Name

Last Name

Street Address Line 1

Street Address Line 2

City

State

Zip Code

Thank you!