

Risk Survey Feb

Record ID

1. Which of the following best describes how you currently socialize with others?

- ☐ Isolate and do not socialize with anyone other than household/family members
- ☐ Maintain a "COVID-19 social bubble," that is, socialize with a few people (other than people in your household/family members), without masks, physical separation (less than 6 feet), or other controls
- ☐ Socialize with others, either indoors or outdoors, but only with masks and social distancing
- ☐ Socialize with others, either indoors or outdoors, without masks or social distancing

1a. How many people would you estimate are in your social bubble? (Count all individuals, including adults, children, and infants)

1b. What are the age ranges of the people in your social bubble? (Select all that apply)

- ☐ 18 years old and under
- ☐ 19-25
- ☐ 26-40
- ☐ 41-55
- ☐ 56+
- ☐ I am not sure

2. These days, how often are you on campus for work or other reasons?

- ☐ Everyday
- ☐ Every week but not every day
- ☐ Only occasionally when needed
- ☐ Never

2a. When you come to campus either every day or less frequently, what modes of transportation do you use to travel to campus? (Select all that apply)

- ☐ Walk
- ☐ Bike
- ☐ Drive in my own vehicle
- ☐ Carpool with 1-3 other people
- ☐ Carpool with more than 3 people
- ☐ Ride the bus
- ☐ Other (please specify below)

2b. Please specify the mode of transportation that you currently use to go to work/campus:

3. In the last seven days, have you spent fifteen or more minutes indoors:

- ☐ At a bar, club, or similar place
- ☐ At the grocery store or pharmacy
- ☐ At a hair salon or barber shop
- ☐ At a friend, neighbor, or relative's residence that is not your own
- ☐ With friends, neighbors, or relatives visiting you at your residence
- ☐ At a gathering with more than 10 people, such as a party, reunion, wedding, funeral, birthday party, concert, or religious service
- ☐ At a hospital or health care facility to seek medical care
- ☐ Attending class or lab in person
- ☐ Working or studying in a public place (e.g., coffee shop, library)
- ☐ Picking up food to-go from a cafeteria or restaurant (not curbside pickup)
- ☐ Eating at a cafeteria or restaurant to eat
- ☐ Exercising inside a gym
- ☐ Playing team sports inside (e.g., intramural, pick-up games)
- ☐ Shopping indoors at mall stores or similar (not curbside pickup)
- ☐ None of these

4. In the last seven days, have you spent fifteen or more minutes outdoors within 6 feet of others:

- ☐ At a bar, club, or similar place
- ☐ At a friend, neighbor, or relative's residence that is not your own
- ☐ With friends, neighbors, or relatives visiting at your residence
- ☐ Attending a gathering with more than 10 people, such as a party, reunion, wedding, funeral, birthday party, concert, or religious service
- ☐ Picking up food to-go from a cafeteria or restaurant
- ☐ Sitting outside a cafeteria or restaurant to eat
- ☐ Exercising outside (e.g. outdoor fitness classes)
- ☐ Playing team sports outside (e.g., intramural, pick-up games)
- ☐ Shopping outdoors (e.g., farmers market)
- ☐ None of these

5. In the past month, how often, in general, did you do the following things while indoors?

5a. Wear a mask/face shield while indoors, other than your residence.

- ☐ Never
- ☐ Not very often
- ☐ Sometimes
- ☐ Very often
- ☐ Always
- ☐ Not sure

5b. Maintain a minimum distance of 6 feet from people, other than those you live with.

- ☐ Never
- ☐ Not very often
- ☐ Sometimes
- ☐ Very often
- ☐ Always
- ☐ Not sure

5c. Wash your hands with soap or use hand sanitizer several times per day, while somewhere other than your residence.

- ☐ Never
- ☐ Not very often
- ☐ Sometimes
- ☐ Very often
- ☐ Always
- ☐ Not sure

6. In the past month, how often, in general, did you do the following things while outdoors?

6a. Wear a mask/face shield.

- ☐ Never
- ☐ Not very often
- ☐ Sometimes
- ☐ Very often
- ☐ Always
- ☐ Not sure

6b. Maintain a minimum distance of 6 feet from people, other than those you live with.

- ☐ Never
- ☐ Not very often
- ☐ Sometimes
- ☐ Very often
- ☐ Always
- ☐ Not sure

6c. Use hand sanitizer several times per day

- ☐ Never
- ☐ Not very often
- ☐ Sometimes
- ☐ Very often
- ☐ Always
- ☐ Not sure

7. In the past month, how often, in general, did you do the following things?

7a. Travel outside the village, town, or city where you currently live.

- ☐ Never
- ☐ Not very often
- ☐ Sometimes
- ☐ Very often
- ☐ All the time
- ☐ Not sure

7b. Receive visits from people living outside the village, town, or city where you live.

- ☐ Never
- ☐ Not very often
- ☐ Sometimes
- ☐ Very often
- ☐ All the time
- ☐ Not sure

We are interested in knowing more about your housing situation and the people you live with.

8. Which category best describes your housing?

- ☐ Dorm
☐ Apartment
☐ Shared Dwelling/House (such as fraternity, sorority, multi-family residence)
☐ Single family housing
☐ Other

8a. Please specify the category of your housing:

9. Not including yourself, how many people use/share your kitchen or living space?

10. Do you share a bedroom?

- ☐ Yes
☐ No

10a. Not including yourself, with how many people do you share a bedroom?

11. Does your housing have a forced-air heating and air conditioning system?

- ☐ Yes
☐ No
☐ I am not sure

12. Do any of the people you live with attend elementary school?

- ☐ Yes
☐ No
☐ I am not sure

12a. How many of the people you live with attend elementary school?

12b. For the people attending elementary school, what is the format of the classes?

- ☐ Online
☐ In person
☐ Both
☐ I am not sure

13. Do any of the people you live with attend middle or high school?

- ☐ Yes
☐ No
☐ I am not sure

13a. How many of the people you live with attend middle or high school?

13b. For the people attending middle or high school, what is the format of the classes?

- ☐ Online
☐ In person
☐ Both
☐ I am not sure

14. Do any of the people you live with attend day care?

- ☐ Yes
☐ No
☐ I am not sure

14a. How many of the people you live with attend day care? _____

15. Do any of the people you live with attend the University of Illinois at Urbana-Champaign (UIUC)?

- ☐ Yes
☐ No
☐ I am not sure

15a. How many of the people you live with attend UIUC? _____

15b. For the people attending UIUC, what is the format of the classes?

- ☐ Online
☐ In person
☐ Both
☐ I am not sure

16. Do any of the people you live with attend a college or university other than UIUC?

- ☐ Yes
☐ No
☐ I am not sure

16a. How many of the people you live with attend a college or university other than UIUC? _____

16b. For the people attending a college or university other than UIUC, what is the format of the classes?

- ☐ Online
☐ In person
☐ Both
☐ I am not sure

17. Do any of the people you currently live with participate in activities involving groups of more than 10 people, less than 6 feet apart (e.g. social gatherings, religious services, sports activities)?

- ☐ Yes
☐ No
☐ I am not sure

17a. How many of the people you live with participate in activities involving groups of more than 10 people, less than 6ft apart (e.g. social gatherings, religious services, sports activities)? _____

☐ I don't know

We are interested in learning more about your employment situation and the employment situation of the people you live with.

18. Please describe your current employment status:

- ☐ Working full time
☐ Working part-time
☐ Unemployed but looking for work
☐ Unemployed but not looking for work
☐ Retired

18a. What days of the week do you usually work in person (excluding working from home)? (Select all that apply)

- ☐ Monday
☐ Tuesday
☐ Wednesday
☐ Thursday
☐ Friday
☐ Saturday
☐ Sunday

18b. Does your job require you come into close contact (within 6 feet for greater than 15-minute periods) with others on a given day including co-workers, customers, and/or clients?

- ☐ Yes
☐ No
☐ I am not sure

18c. How many people (including co-workers, customers, and /or clients) do you come into close contact (within 6 feet for greater than 15-minute periods) with on a given day during your time at work? _____

19. Are any of the people you live with working full or part time?

- ☐ Yes
☐ No

19a. How many of the people you live with are working full or part time? _____

19b. Do any of the people you live with have a job that requires them to come in close contact (within 6 feet for greater than 15-minute periods) with others on a given day including co-workers, customers, and/or clients?

- ☐ Yes
☐ No
☐ I am not sure

19c. How many of the people you live with have such a job? _____

☐ I don't know

We would like to know more about your perceptions of and experience with COVID-19.

20. Have you ever tested positive for coronavirus?

- ☐ Yes, I have tested positive for coronavirus
☐ No, I have not tested positive for coronavirus
☐ I am not sure

21. Have you ever received an inconclusive test result?

- ☐ Yes, I have received an inconclusive test result
☐ No, I have not received an inconclusive test result
☐ I am not sure

22. In general, how concerned do you feel about COVID-19?

- ☐ Not at all concerned
☐ A little concerned
☐ Moderately concerned
☐ Very concerned
☐ Extremely concerned

23. Have you been vaccinated for COVID-19?

- ☐ Yes
☐ No

23a. How many doses have you received?

- ☐ One
☐ Two

23b. Which vaccine did you receive?

- ☐ Pfizer
☐ Moderna
☐ Other
☐ I don't know

23b. Which vaccine(s) did you receive?

- ☐ Pfizer
☐ Moderna
☐ Other
☐ I don't know

23c. Please specify "Other" above:

23a. How likely are you to get vaccinated for COVID-19 once a vaccine is publicly available?

- ☐ Very unlikely
☐ Somewhat unlikely
☐ Somewhat likely
☐ Very likely
☐ Unsure

24. Have you heard about the Safer Illinois app?

- ☐ Yes, I have heard about the Safer Illinois app
☐ No, I have not heard about the Safer Illinois app

25. Are you using the Safer Illinois app?

- ☐ Yes, am using the Safer Illinois app
☐ No, I am not using the Safer Illinois app
☐ I am not sure

25a. How likely are you to use the Safer Illinois app?

- ☐ Very unlikely
☐ Somewhat unlikely
☐ Somewhat likely
☐ Very likely
☐ Unsure

26. Are you currently living in Champaign-Urbana or the vicinity (within commuting distance) of Champaign-Urbana?

- ☐ Yes, I live in Champaign-Urbana or vicinity
☐ No, I do not live in Champaign-Urbana or vicinity

26a. Are you planning on living in Champaign-Urbana or the vicinity of Champaign-Urbana during the next month?

- ☐ Yes, I plan to live in Champaign-Urbana next month
☐ Yes, I plan to live in the vicinity of Champaign-Urbana next month
☐ No, I do not plan to live in Champaign-Urbana or the vicinity next month

26b. Where would you be moving from? (City, state, etc.)

(City, State, Etc.)

26b. Where are you planning to live? (City, state, etc.)

(City, State, Etc.)

Month

- ☐ January
☐ February
☐ March
☐ April
☐ May
☐ June
☐ July
☐ August
☐ September
☐ October
☐ November
☐ December

Year

28. What gender do you most identify with?

- ☐ Female/Woman
- ☐ Male/Man
- ☐ Nonbinary
- ☐ Prefer to self-describe
- ☐ Prefer not to answer

28a. Please self-describe your gender:

29. Please describe with which racial group(s) you identify: (Select all that apply)

- ☐ White/European American
- ☐ Black/African American
- ☐ Latino/Latina
- ☐ Asian
- ☐ Pacific Islander/Native Hawaiian
- ☐ Native American/Alaskan Native
- ☐ Prefer to self-describe
- ☐ Prefer not to answer

29a. Please self-describe your racial group(s):

30. What is your role at the university? (Select all that apply)

- ☐ Faculty
- ☐ Staff
- ☐ Graduate/professional student
- ☐ Undergraduate student
- ☐ Other

30a. Please specify "Other" above:

31. What is your college, department, or unit?
