

* Required Information

NJIT Food Insecurity Survey

ADULT STAGE 1

1. "I worried whether my food would run out before I got money to buy more." Was that often true, sometimes true, or never true for you in the last 30 days? (Select one option)

- Often true
- Sometimes true
- Never True
- Don't know

2. "The food that I bought just didn't last, and I didn't have money to get more." Was that often, sometimes, or never true for you in the last 30 days?

(Select one option)

- Often true
- Sometimes true
- Never true
- Don't know

3. "I couldn't afford to eat balanced meals." Was that often, sometimes, or never true for you in the last 30 days? (Select one option)

- Often true
- Sometimes true
- Never true
- Don't know

* 4. Did you answer "Often True" or "Sometimes True" to any of the three questions in ADULT STAGE 1?

(Select one option)

- Yes
- No

NOTE : IF ANSWER TO Q4 is
Yes Go to Page No. 2
No Go to Page No. 5
If Did Not Answer Then Go to Page No. 2

ADULT STAGE 2

NOTE : Answer the below question only if answer to (Q#4 is Yes)

* 5. In the last 30 days, did you ever cut the size of your meals or skip meals because there wasn't enough money for food?
(Select one option)

- Yes
- No
- Don't know

NOTE : Answer the below question only if answer to (Q#5 is Yes)

6. In the last 30 days, how many days did this happen? (put in number)

NOTE : Answer the below question only if answer to((Q#5 is No OR Don't know))

7. In the last 30 days, did you ever eat less than you felt you should because there wasn't enough money for food? (Select one option)

- Yes
- No
- Don't know

8. In the last 30 days, were you ever hungry but didn't eat because there wasn't enough money for food? (Select one option)

- Yes
- No
- Don't know

9. In the last 30 days, did you lose weight because there wasn't enough money for food? (Select one option)

- Yes
- No
- Don't know

* 10. Did you answer "Yes" to any of the questions in ADULT STAGE 2? (Select one option)

- Yes
- No

NOTE : IF ANSWER TO Q10 is
Yes Go to Page No. 5
No Go to Page No. 7

ADULT STAGE 3

* 11. In the last 30 days, did you ever not eat for a whole day because there wasn't enough money for food? (Select one option)

- Yes
- No
- Don't know

NOTE : IF ANSWER TO Q11 is
Yes Go to Page No. 6
No Go to Page No. 7
Don't know Go to Page No. 7
If Did Not Answer Then Go to Page No. 6

NOTE : Answer the below question only if answer to (Q#11 is **Yes**)

12. In the last 30 days, how many days did this happen? (put in number)

* 13. Do you have any biological, adopted, step or foster children under age 18 who live in your household? (Select one option)

- Yes
- No

NOTE : IF ANSWER TO Q13 is
Yes Go to Page No. 8
No Go to Page No. 11

CHILD STAGE 1

14. "I relied on only a few kinds of low-cost food to feed my children because I was running out of money to buy food." Was that often, sometimes, or never true for you in the last 30 days?

(Select one option)

- Often true
- Sometimes true
- Never true
- Don't know

15. "I couldn't feed my children a balanced meal, because I couldn't afford that." Was that often, sometimes, or never true for you in the last 30 days? (Select one option)

- Often true
- Sometimes true
- Never true
- Don't know

16. "My child was not eating enough because I just couldn't afford enough food." Was that often, sometimes, or never true for you in the last 30 days? (Select one option)

- Often true
- Sometimes true
- Never true
- Don't know

* 17. Did you answer "Often True" or "Sometimes True" to any of the three questions in CHILD STAGE 1? (Select one option)

- Yes
- No

NOTE : IF ANSWER TO Q17 is
Yes Go to Page No. 9
No Go to Page No. 11
If Did Not Answer Then Go to Page No. 9

CHILD STAGE 2

18. In the last 30 days, did you ever cut the size of your children's meals because there wasn't enough money for food?
(Select one option)

- Yes
- No
- Don't know

* 19. In the last 30 days, did your children ever skip meals because there wasn't enough money for food? (Select one option)

- Yes
- No
- Don't know

NOTE : Answer the below question only if answer to((Q#19 is **Yes**)

20. In the last 30 days, how many days did this happen? (Put in a number)

NOTE : Answer the below question only if answer to((Q#19 is **No OR Don't know**))

21. In the last 30 days, were your children ever hungry but you just couldn't afford more food? (Select one option)

- Yes
- No
- Don't know

22. In the last 30 days, did any of your children ever not eat for a whole day because there wasn't enough money for food? (Select one option)

- Yes
- No
- Don't know

23. Comments Welcome

Demographics

24. What is your year in school? (Select one option)

- 1st year undergraduate
- 2nd year undergraduate
- 3rd year undergraduate
- 4th year undergraduate
- 5th year or more undergraduate
- Graduate or professional
- Not seeking a degree
- Other

25. What is your major? (Select one option)

- Applied Physics
- Architecture
- Biochemistry
- Bioinformatics
- Biology
- Biomedical Engineering
- Biophysics
- Business
- Business & Information Systems
- Chemical Engineering
- Chemistry
- Civil Engineering
- Communication
- Computer Engineering
- Computer Science
- Computer Technology
- Computing & Business
- Concrete Industry Management
- Concrete Industry Management
- Construction Engineering Tech
- Construction Management Tech
- Digital Design
- Electrical & Computer Eng Tech
- Electrical Engineering
- Engineering Science
- Environmental Engineering
- Environmental Science
- Forensic Science
- General Engineering
- History
- Human Computer Interaction
- Industrial Design
- Industrial Engineering
- Information Systems
- Information Technology
- Interior Design
- Law, Technology, & Culture
- Manufacturing Engr Tech
- Materials Science & Engineering (EN)
- Materials Science & Engineering (SL)
- Mathematical Sciences
- Mechanical Engineering
- Mechanical Engineering Tech
- Medical Informatics Tech
- Science, Technology & Society
- Surveying Engineering Tech
- Technology Education
- Theater Arts and Technology
- Transportation
- Urban Systems
- Web & Information Systems

26. What is your enrollment status? (Select one option)

- Full-time (12 credits or more)
- Part-time (less than 12 credits)
- Other

27. What is/are your gender identity/identities? Select all that apply.

- Man (1)
- Woman (2)
- Gender queer/gender variant (3)
- Transgender (4)
- Non Binary (5)
- Other (6)

28. What year were you born?

(Enter a value between 1900 and 2020)

29. How do you describe your race? (Select one option)

- White
- Black or African American
- Hispanic or Latino/a/x
- Asian or Pacific Islander
- American Indian, Alaskan Native, or Native Hawaiian
- Biracial or Multiracial
- Other (Please specify) _____

30. Have you ever served in the U.S. Armed Forces, military Reserves, or National Guard? (Select one option)

- Yes
- No

31. Are you a first-generation college student (i.e. neither of your parents have a college degree from a 4-year institution)? (Select one option)

- Yes
- No

32. Which of the following ways do you pay for the expenses associated with attending college? (check all that apply)
[Please select at most 13 options.]

- Federal Grant/Scholarships
- Federal Student Loan(s)
- State Grant/Scholarship
- Outside Grant/Scholarship
- Institutional Grant/Scholarship/Tuition Remission
- HESAA Loan(s) (NJCLASS)
- Outside private loans
- Self Paying- Cash
- Self Paying- Credit Cards
- Parents Paying- Cash
- Parents Paying- Credit Cards
- Employer Tuition Remission
- Other (Please specify) _____

33. How would you describe your current relationship status? (Select one option)

- Single
- In a relationship
- Married or domestic partnership
- Divorced
- Widowed

34. Where do you currently live? (Select one option)

- Campus residence hall
- Fraternity or sorority house
- Other college/university housing
- Parent/guardian's home
- Other off-campus housing
- With a friend until I find other housing
- Houseless
- Other (Please specify) _____

35. Did you receive free or reduced price lunch in high school? (Select one option)

- Yes, I received free lunch (1)
- Yes, I received reduced price lunch (2)
- No (3)

36. Are you currently employed? (Select one option)

- Yes (1)
- No (2)

NOTE : IF ANSWER TO **Q36** is
Yes (1) Go to Page No. 14
No (2) Go to Page No. 15
If Did Not Answer Then Go to Page No. 14

Empolymnt Hours

37. About how many hours do you work each week? Include all of your jobs.
(Select one option)

- 1-4 (1)
- 5-9 (2)
- 10-14 (3)
- 15-19 (4)
- 20-24 (5)
- 25-29 (6)
- 30-34 (7)
- 35-39 (8)
- 40 or more (9)

38. In the past 12 months, from which of the following programs did you receive assistance? (SELECT Yes or No) (From the list of answer option below, select one for each sub-question.)

- Yes
- No

(a) 1. SNAP (food stamps) (Select one option from the above list)

(b) 2. WIC (nutritional assistance for pregnant women and children) (Select one option from the above list)

(c) 3. TANF (public cash assistance) (Select one option from the above list)

(d) 4. SSI (supplemental security income) (Select one option from the above list)

(e) 5. SSDI (social security disability income) (Select one option from the above list)

(f) 6. Medicaid (NJFamilyCare or Public health insurance) (Select one option from the above list)

(g) 7. Child care assistance (Select one option from the above list)

(h) 8. Unemployment compensation/insurance (Select one option from the above list)

(i) 9. Utility assistance (e.g. help paying for heat or water) (Select one option from the above list)

(j) 10. Housing assistance (Select one option from the above list)

(k) 11. Transportation assistance (Select one option from the above list)

(l) 12. Tax refunds (including EITC) (Select one option from the above list)

(m) 13. Veterans benefits (Veteran's Administration benefits for a servicemen's, widow's, or survivor's pension, service disability or the GI bill) (Select one option from the above list)

39. Do you receive household benefits on your own or are they shared with other household members? (Select one option)

- Yes, receive household benefits on my own
- Yes, they are shared with other household members.
- No