

Study ID# \_\_\_\_\_ Staff ID # \_\_\_\_\_ Date: \_\_\_\_\_

## DATA COLLECTION FORM PARENT/GUARDIAN

☐ Baseline Part 2  
☐ 6-mo Part 2  
☐ 12-mo Part 2



Age  years      Gender: M / F      Birth Month: \_\_\_\_\_

### If FEMALE:

Pregnant? (*circle one*)      YES      NO

If YES, how many weeks/months? \_\_\_\_\_ weeks / months (*circle one*)

(**Note:** Explain to participant that this is a standard question we ask everyone, since it will affect weight and waist circumference results.)

Height (cm) (Record measurement before having the participant step out)	Weight (kg)	BMI (kg/m <sup>2</sup> )
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>

	Measurement 1	Measurement 2	Measurement 3 (If difference between Measurement 1 & 2 is > 1cm)
Waist Circumference (cm)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

TANITA  
PRINTOUT  
GOES HERE