



Participant ID:

Participant Initials:

Site:

Visit Number:

CRF Date:

RC ID:

## RELIGIOSITY AND SPIRITUALITY

### Display Name- 24 Hours: Religiosity and Spirituality

The following questions refer to activities you may or may not do. For each question, please choose the closest answer.

	Never	Once or twice a year	Monthly	Weekly	Daily
1. How often do you attend religious services or otherwise participate in organized religion (such as watching services on TV, listening to services on the radio, participating in Bible study groups, etc.)?					
2. Within your religious or spiritual tradition, how often do you pray or meditate?					
Thank You for Completing this Questionnaire!					