

INCLUSION TABLE

This report format should NOT be used for data collection from study participants.

Principal Investigator/Project Director _____
(Last, First, Middle)

Grant Number (if known): _____

STUDY TITLE: _____

Total Enrollment: _____ **Protocol Number:** _____

| | American Indian or Alaskan Native | Asian or Pacific Islander | Black, not of Hispanic Origin | Hispanic | White, not of Hispanic Origin | Other or Unknown | Total |
|---------|-----------------------------------|---------------------------|-------------------------------|----------|-------------------------------|------------------|-------|
| Female | | | | | | | |
| Male | | | | | | | |
| Unknown | | | | | | | |
| Total | | | | | | | |