Summary of Employment Questions

The employment questions were optional. Therefore, only the responses from employees that chose to respond to these questions are provided in this summary report.

How would you describe your work arrangement in your job?



Is your job full-time or part-time?





How long have you worked in your job?



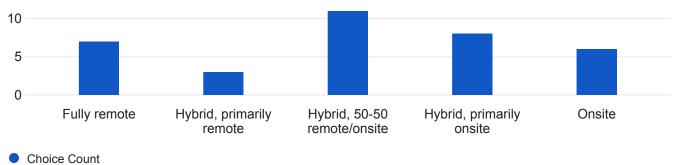
Select the occupation that best describes the kind of work you do in your job.

Field	Choice Count
Architecture and Engineering	0
Arts, Design, Entertainment, Sports, and Media	0
Building and Grounds Cleaning and Maintenance	0
Business and Financial Operations	6
Computer and Mathematical	0
Community and Social Service	0
Construction and Extraction	0
Education Instruction and Library	1
Farming, Fishing, and Forestry	0
Food Preparation and Serving Related	0
Healthcare Practitioners and Technical	5
Healthcare Support	4



Installation, Maintenance, and Repair	0
Legal	0
Life, Physical, and Social Science	0
Management	4
Material Moving	0
Military Specific	0
Office and Administrative Support	3
Personal Care and Service	0
Production	0
Protective Service	1
Sales and Related	4
Transportation	0
Other	4

Which of the following best describes your current work?

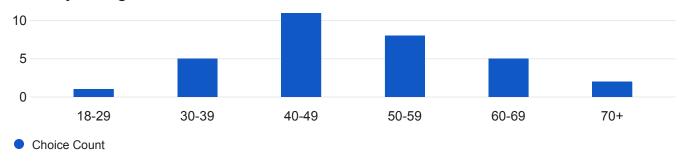




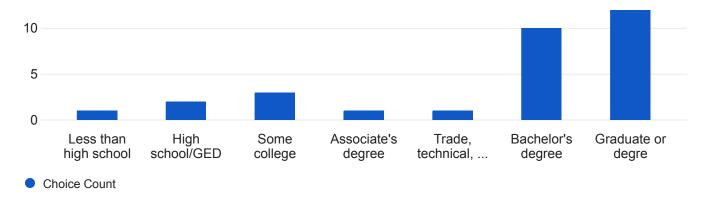
Summary of Demographic Questions

The demographic questions were optional. Therefore, only the responses from employees that chose to respond to these questions are provided in this summary report.

What is your age?

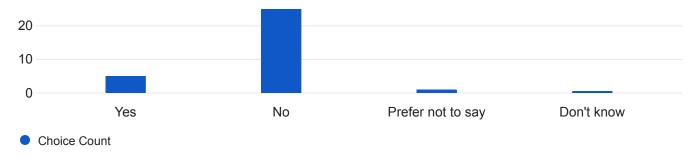


What is the highest level of school you have completed or the highest degree you have received?





Do you consider yourself to be Hispanic or Latino?



What race or races do you consider yourself to be? Please select one or more of these categories.

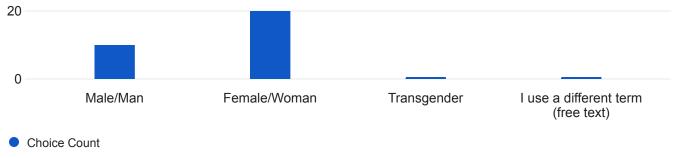


Which sex were you assigned at birth, on your original birth certificate?





How do you currently describe yourself (mark all that apply)?



Which of these best describes your current sexual orientation?



What was your entire household income last year, before taxes?





What is your current marital status?



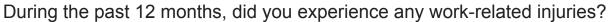
How many dependents currently live in your household?

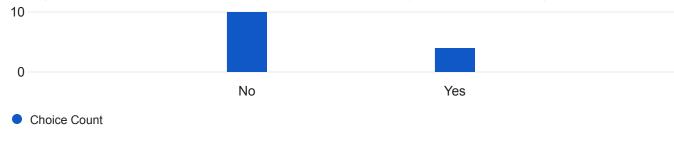
Field	Min	Max	Mean	Responses	Sum
Total number of household members age 0 to 5? - Total number of household members	0.00	2.00	0.36	18	6.50
Total number of household members 6 to 12? - Total number of household members	0.00	0.00	0.00	0	0.00
Total number of household members age 13 to 17? - Total number of household members	0.00	0.00	0.00	0	0.00
Total number of household members 18 or older? - Total number of household members	0.00	0.00	0.00	0	0.00

Summary of Injury questions (Q62 & Q63)

An analysis was performed to provide a summary report for questions 62 and 63 listed on the NIOSH WellBQ. Only the responses from employees that chose to respond to these questions are included in this summary report.







If you experienced any work-related injuries in the past 12 months, did any of them require any first aid or medical treatment, change in job activities, or lost time from work?

