

[← Household Eligibility Results Summary](#)

Additional Demographic Information

The following information is optional and confidential. It will not be used to determine eligibility.

What is your gender?

(check the box that best describes your current gender identity)

- Female
- Male
- Transgender: male to female
- Transgender: female to male
- Non-Binary (neither male nor female)
- Another gender identity

What sex was listed on your original birth certificate?

- Female
- Male

Do you think of yourself as:

- Straight or heterosexual
- Gay or lesbian
- Bisexual
- Queer
- Another sexual orientation
- Unknown