Research Project on the Experience of Loneliness amongst older persons

BIOGRAPHICAL QUESTIONNAIRE

Gender: Male: [ ] Female: [ ] Age: [ ]
Marital status: Single: [ ] Divorced: [ ] Widow/Widower: [ ]
Race: Black: [ ] White: [ ] Colored: [ ]

How many children do you have? .................................................................
Where do you stay? ..................................................................................
How long have you been staying there? ..................................................
What is your source of income? .................................................................
What hobbies do you have? .................................................................
What social relationships and networks are you involved in? ..................