

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							