



NACC Participant Enrollment/Transfer Form

ADRC: _____ PTID: _____ Form date: ___/___/_____ Examiner's initials: _____

INSTRUCTIONS: Submit this form to assign NACCIDs for first-time participants at the time of consent or to transfer an existing participant to your center from a different center.

1.	<p>Is this a first time NACCID assignment or a transfer for the participant?</p> <p>NACCIDs must be assigned at the time of consent for all participants that will be a part of the UDS. If a new participant at your center will participate in the UDS (even if this UDS data will be submitted later), you must assign them a NACCID at the time of consent. This NACCID will accompany all data (for any data type - e.g., SCAN, CLARITI, or other data streams) that are submitted to the NACC Data Platform for this participant. A NACCID is assigned at the time of consent regardless of what data type will be submitted to the NACC Data Platform first. To procure a NACCID for this participant using this form, select 1=Assign NACCIDs for first time participants.</p> <p>Transfer a participant from one site to another: ADRCs can transfer existing participants from one ADRC to another using this form. This can be done by the new ADRC that the participant is joining. To transfer a participant to your center, select 2=Transfer a participant to your site.</p>	<input type="checkbox"/> 1 Assign NACCID for first-time participants <input type="checkbox"/> 2 Transfer a participant to your site
2.	Participant's month and year of birth (MM / YYYY)?	____ / ____
3.	How many years of education has the participant completed?	____ (99 = Unknown)
4.	<p>Which term(s) best describes the participant's current gender identity? (Check all that apply)</p> <p>Introduction for the participant: The next question asks about your gender identity. By gender identity, we mean the inner sense that you have of yourself as being a man, woman, or a different gender. Gender identity can be different from your sex assigned at birth or your sexual orientation, and it can change over time.</p>	<p>4a. <input type="checkbox"/> 1 Man</p> <p>4b. <input type="checkbox"/> 1 Woman</p> <p>4c. <input type="checkbox"/> 1 Transgender man</p> <p>4d. <input type="checkbox"/> 1 Transgender woman</p> <p>4e. <input type="checkbox"/> 1 Non-binary/genderqueer</p> <p>4f. <input type="checkbox"/> 1 Two-Spirit</p> <p>4g. <input type="checkbox"/> 1 Uses a different term (SPECIFY): _____</p> <p>4h. <input type="checkbox"/> 1 Don't know</p> <p>4i. <input type="checkbox"/> 1 Prefer not to answer</p>
5.	Does the participant have a NIA GUID? About the NIA GUID.	<input type="checkbox"/> 0 No (SKIP TO QUESTION 6) <input type="checkbox"/> 1 Yes
5a.	Please provide the NIA GUID: (10-digit alpha-numerical format. Ex: NIH012ABC24DE)	_____
6.	Has the participant been previously enrolled at another ADRC?	<input type="checkbox"/> 0 No (SKIP TO QUESTION 7) <input type="checkbox"/> 1 Yes <input type="checkbox"/> 9 Unknown (SKIP TO QUESTION 7)
6a.	At which ADRC was this participant previously enrolled (enter ADCID)? You can view the current list of ADCIDs here .	_____
6b.	Please provide the previous PTID (if known): PTID (may be referred to as Participant ID or local ID) is the ADRC-managed participant ID. Formats vary by each center; this is the ID used for UDS (uniform dataset) identification internally. If unknown, leave blank.	_____
7.	If this is a transfer, is the NACCID for this participant known?	<input type="checkbox"/> 0 No (SKIP TO QUESTION 8) <input type="checkbox"/> 1 Yes <input type="checkbox"/> 8 Not a transfer (SKIP TO QUESTION 8)
7a.	Please provide the NACCID: All NACCIDs begin with "NACC" and are 10 characters long.	_____
8.	Please reenter the participant PTID before completing the form.	_____