Parent Participant ID		Parent Race/Ethnicity							
Unique Identifier for Parent/Caregiver Participating	Optional Household ID	American Indian or Alaskan Native	Asian	Black	Hispanic/Latino	Middle Eastern/North African	Hawaiian or Pacific Islander	White	
parent_id_shared.pare nt_id Data Entry Type: Unique ID per parent/caregiver. Please do not use the parent's name, birthdate, or other private information as the ID.	parent_id_shared.optio nal_household_id If you are able to track a family or household members, please include a unique id for these purposes. This is optional for FY 25- 26 and we hope to get everyone doing this during FY 26-27.	parent_race_shared.ra ce_aian Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.	parent_race_shared.race_asian Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.	ce_black	ce_hispanic	ce_mena	ce_hawaii	parent_race_shared.ra ce_white Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.	

			Parent Location		Parent's Children Un	Parent Requires Interpretation	
Other Race/Ethnicity	Other Race/Ethnicity Text Box	No Response - Race/Ethnicity		County	How many children age 5	Did the Participant Require Interpretation Services Participate?	
parent_race_shared.ra ce_other Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.	ce_other_text	parent_race_shared.ra ce_no_response Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.	ip_code	parentlocationshared.county Data Entry Type: Drop Down, Listing of NC Counties. Indicate county of residence of participant.	pants_children Data Entry Type: Whole Number, Min Value = 1, Max Value = 20 How many children age 5	parentinterpretshare.interpretation Data Entry Type: Drop Down, Yes No Yes indicates that the Participant required an interpreter or bilingual staff to participate in programming. This could be for ASL, Spanish, or any language other than English. No, indicates that the participant has sufficient comfort and fluency to receive programming verbally in spoken English.	

Parent Recruitment		Direct Service Provision	Notes (Optional)
How did the participant learn about this program?	Recruitment Other Text	Is this parent currently receiving mental health services in relation to this activity or have they received mental health services during this FY?	
parentrecruit_shared.recruitm ent	parentrecruit_shared.recruitment_ other text	direct_svc_provision.parent_receiv ing_mhsvcs_this_fy	notes.optional_notes
Data Entry Type: Drop Down, Word of mouth Social Media Referral from Community Partner Traditional Media Outreach Event Other: text input for description in the next field. Select only one.	Data Entry Type: Text box for description of the other method of recruitment that the participant experienced.	Data Entry Type: Drop Down,	Data Entry Type: Text.
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