



Residential History Questionnaire

It is **VERY** important to our research to know if your child has had fluoride in their drinking water and for how long. To do this we need to know **everywhere** your child has lived and the type of water supply (public mains, group scheme or private well) at each address.

Please tell us **everywhere** your child has lived **since starting primary school (Junior Infants)**.

Child's name: _____ Date of birth: _____

School: _____ Class: _____

Current Address

House/Apartment no.: _____ Street/Estate: _____

Area/Town: _____ City/County: _____

Type of water supply at this address now: Public mains ₁ Group scheme ₂ Own Well ₃

Are you aware of any change to the water supply at this address while your child has lived there? For example, changing from well water to a group water scheme or mains water; getting a well and stopping mains water; fitting a reverse osmosis system; a boil notice or other interruption to normal supply? If yes, please describe: _____

My child lived here from: _____ to: _____
Month and Year Month and Year

Has your child always lived at this address since starting primary school?

Yes ₁ Please proceed to **Parent Survey**

No ₂ Please continue overleaf



Previous Address 1

House/Apartment no.: _____ Street/Estate: _____

Area/Town: _____ City/County: _____

Type of water supply at this address: Public mains ₁ Group scheme ₂ Own Well ₃**My child lived here from:** _____ **to:** _____
Month and Year Month and Year**Previous Address 2**

House/Apartment no.: _____ Street/Estate: _____

Area/Town: _____ City/County: _____

Type of water supply at this address: Public mains ₁ Group scheme ₂ Own Well ₃**My child lived here from:** _____ **to:** _____
Month and Year Month and Year**Previous Address 3**

House/Apartment no.: _____ Street/Estate: _____

Area/Town: _____ City/County: _____

Type of water supply at this address: Public mains ₁ Group scheme ₂ Own Well ₃**My child lived here from:** _____ **to:** _____
Month and Year Month and Year**Previous Address 4**

House/Apartment no.: _____ Street/Estate: _____

Area/Town: _____ City/County: _____

Type of water supply at this address: Public mains ₁ Group scheme ₂ Own Well ₃**My child lived here from:** _____ **to:** _____
Month and Year Month and Year

Please use a separate page if your child has lived at more addresses since starting primary school (Junior Infants).

Thank you for completing this questionnaire! Now please proceed to the Parent Survey!