Participant questionnaire

Thank you for participating in our study

To help us make the best use of your valuable contribution, we would be grateful if you could tell is a little about yourself and your child

This information will be used to tell us about the kind of people who have taken part in this study. It will be kept <u>confidentially</u>.

1. Please answer the following questions in relation to your child who was referred to the First Steps Children's weight management programme.

	a) Age of the child					
	b) Sex of the child (plea	se tick)	boy		girl	
	c) What is your relationship to the child?					
2.	How did you first hear about the First Steps Programme?					
3.	Are you: (please tick)	male		female		
4.	Which of the following best describes your ethnic group (please tick)					
	Bangladeshi	Pakista	ni 门		Other 🗌 (please describ	e)
5.	Please state your religious affiliation (if any)					
6.	Please state your occupation					
7.	Are you: (please tick)	Single Living with part	ner		Married Divorced	
		Widowed			2	