

**Host Data Reporting Form**  
***Gambling Disorder Screening Day***  
**March 12, 2019**

Thank you for hosting Gambling Disorder Screening Day. Please complete this **optional** form about the individuals whom you or your organization invited to participate and screened today. This information will help us estimate progress in our outreach efforts and need for additional efforts.

Total number of individuals invited to be screened: \_\_\_\_\_

Total number of individuals screened: \_\_\_\_\_

Total number of individuals with a positive screen (i.e., answered “yes” to at least one question): \_\_\_\_\_

Among those with a positive screen, please record the following information:

Gender: \_\_\_\_\_ Males \_\_\_\_\_ Females \_\_\_\_\_ Other/Unknown

Age: \_\_\_\_\_ 18 – 25 \_\_\_\_\_ 26 – 40 \_\_\_\_\_ 41 – 55 \_\_\_\_\_ 56+

Please send completed forms to [info@divisiononaddiction.org](mailto:info@divisiononaddiction.org).