Physiology and behaviour - task 2

  Thank you for your interest in participating in the University of Edinburgh Brain Imaging study.   Please take a moment to complete the following information to assist us in scheduling and conducting the study.   This process only takes about 2 minutes and can be completed using a mobile device.

What is your age?

* 18 (1)
* 19 (2)
* 20 (3)
* 21 (4)
* 22 (5)
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* 93 (76)
* 94 (77)
* 95 (78)
* 96 (79)
* 97 (80)

What is your gender?

* Male (1)
* Female (2)
* Transgender (3)

How many years have you been living in Scotland?

* Less than 1 year (2)
* 1 (3)
* 2 (4)
* 3 (5)
* 4 (6)
* 5 (7)
* 6 (8)
* 7 (9)
* 8 (10)
* 9 (11)
* 10 (12)
* 11 (13)
* 12 (14)
* 13 (15)
* 14 (16)
* 15 (17)
* 16 (18)
* 17 (19)
* 18 (20)
* 19 (21)
* 20 (22)
* More than 20 years (23)

If you were forced to choose only one, you would identify yourself as...

* Scottish (1)
* British (2)
* European (3)
* Other (4)
* English (5)
* Welsh (6)
* Northern Irish (7)

If Other Is Selected, Then Skip To Thank you for taking the time to comp...If English Is Selected, Then Skip To Thank you for taking the time to comp...If Welsh Is Selected, Then Skip To Thank you for taking the time to comp...If Northern Irish Is Selected, Then Skip To Thank you for taking the time to comp...If British Is Selected, Then Skip To Thank you for taking the time to comp...If European Is Selected, Then Skip To Thank you for taking the time to comp...

Are you right or left handed?

* Right (1)
* Left (2)
* Both (3)

What is your height (known or estimated)?

What is your current weight (known or estimated)?

  Are you currently taking any of the following medications?   Antidepressant medicationAntipsychotic medicationBenzodiazepines (eg diazepam, lorazepam)Mood stabilisers (eg lithium, sodium valproate, lamotrigine)

* Yes (1)
* No (2)

If Yes Is Selected, Then Skip To Thank you for taking the time to comp...

Do you suffer from any neurological conditions, such as epilepsy?

* Yes (1)
* No (2)

If Yes Is Selected, Then Skip To Thank you for taking the time to comp...

Do you currently suffer from a mental illness?

* Yes (1)
* No (2)

If Yes Is Selected, Then Skip To Thank you for taking the time to comp...

Do you have, or have you ever had, metal fragments in your eyes?

* Yes (1)
* No (2)

If Yes Is Selected, Then Skip To Thank you for taking the time to comp...

Do you have any electrical or metal implants or prostheses (eg cardiac pacemaker, metal plate)?

* Yes (1)
* No (2)

If Yes Is Selected, Then Skip To Thank you for taking the time to comp...

Do you have dentures, braces or a hearing aid that cannot be removed?

* Yes (1)
* No (2)

If Yes Is Selected, Then Skip To Thank you for taking the time to comp...

Do you have any body piercing that cannot be removed?

* Yes (1)
* No (2)

If Yes Is Selected, Then Skip To Thank you for taking the time to comp...

Have you ever had surgery of any kind? If so, please give details.

Do you have any tattoos? If so, where?

Answer If What is your gender? Female Is Selected

Are you, or could you be, pregnant?

* Yes (1)
* No (2)

Answer If What is your gender? Female Is Selected

Do you currently have an intrauterine device (IUD)?

* Yes (1)
* No (2)

Answer If Do you currently have an IUD? Yes Is Selected

What type of IUD do you have?

Thank you for taking the time to complete the information. Please note the answers you have provided will only be used to pre-screen prospective participants. You will be assigned a participant number to maintain your privacy and we will contact you directly to schedule the experiment if you meet our sampling requirements.   Even if you are not a suitable candidate for this study, there may be other studies in which you can participate. Do you wish to be added to the School of Social and Political Science participant pool and receive invitations to participate in future studies?

* Yes (1)
* No (2)

What is your full name (this will only be used for contacting you)?

Please enter a contact email adress for scheduling purposes only

Email (1)