1. \*Are you adopted?

[ ] Yes [ ] No

1. Are your parents, cousins, or otherwise biologically related to each other?

[ ] Yes [ ] No

1. \*Has anyone in your family ever been diagnosed with Amyotrophic Lateral Sclerosis (ALS) or Frontotemporal Dementia (FTD)?

[ ] Yes [ ] No

If Yes, attach pedigree and complete the table.

Family History Data Table

| \*Relative | Number of Family Members | Family Member Sample/s in Repository? | Diagnosis |
| --- | --- | --- | --- |
| 1. Mother
 | 1 | [ ] Yes, subject ID[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Father
 | 1 | [ ] Yes, subject ID[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Siblings
 | Data to be filled out by site | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Half Siblings
 | Data to be filled out by site | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Maternal Grandmother
 | 1 | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Maternal Grandfather
 | 1 | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Paternal Grandmother
 | 1 | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Paternal Grandfather
 | 1 | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Maternal Aunt
 | Data to be filled out by site | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Maternal Uncle
 | Data to be filled out by site | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Paternal Aunt
 | Data to be filled out by site | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Paternal Uncle
 | Data to be filled out by site | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Maternal Cousin
 | Data to be filled out by site | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Paternal Cousin
 | Data to be filled out by site | [ ] Yes, subject ID/s[ ] No[ ]  Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |
| 1. Other, specify:
 | Data to be filled out by site | [ ] Yes, subject ID/s[ ] No[ ] Unknown | [ ] Amyotrophic Lateral Sclerosis (ALS)[ ] Frontotemporal Dementia (FTD)[ ] Other Neurological Disorder (specify) |

\* Element is classified as Core

## General Instructions

Information on each disease is gathered for blood relatives based on self-report from the participant/subject or family member.

Important note: The data elements noted with an asterisk on this CRF Module are classified as Core (i.e., required for all ALS studies to collect). The remaining data elements are classified as supplemental (i.e., non Core) and should only be collected if the research team considers them appropriate for their study. Please see the Data Dictionary for element classifications.

## Specific Instructions

Please see the Data Dictionary for definitions for each of the data elements included in this CRF Module.

* Number of family members – Record the number of family members that correspond to the relative listed.

There are no other specific instructions for the data elements not already included on the CRF.