



Serial Number

Quest Version

REPUBLIC OF MAURITIUS



CONTINUOUS MULTI-PURPOSE HOUSEHOLD SURVEY - 2015

INTERVIEWING OF HOUSEHOLDS

Reference Month	<input type="text"/> <input type="text"/>	Geographical District	<input type="text"/> <input type="text"/>
PSU-RDI	<input type="text"/>	Rotation Group	<input type="text"/>
PSU Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Year of listing	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Enumeration Area	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Sample Number	<input type="text"/>
Household Number	<input type="text"/> <input type="text"/> m m y y	Interview round	<input type="text"/>
Previous interview	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Household selected-1 or replacement-2	<input type="text"/>
Religion of head	<input type="text"/> <input type="text"/>		
Name of Interviewer			

Supervisor's Name
.....
First visit
d d m m y y
Reinterview
Other fieldcheck

Senior Supervisor's Name
.....
Reinterview
d d m m y y
Other fieldcheck

For office use
Edited and coded by
Checked by.....

MODULE 1

1

DEMOGRAPHIC AND EDUCATIONAL CHARACTERISTICS OF HOUSEHOLD MEMBERS

Enter the first name and demographic characteristics of every member of the household. Do not forget to include married children forming part of this household and their families, and members of the household temporarily absent including those abroad.

1.1	1.2	1.3	1.4						1.5	1.6	1.7	1.8	1.9			1.10		1.11	1.12			
Serial number	Name of household member (First name only)	Reason for presence / absence of household member formerly absent / present	Identity Card No.						Relationship to head	Age Last birthday (years)	Sex 1 Male 2 Female	Marital status 1 Married/ in a union 2 Widowed 3 Divorced 4 Separated 5 Single	Preprimary, Primary and Secondary			Level of education If past , insert highest level completed. Specify whether passed or not passed if left school at Std VI, Form V & Upper VI. If now , insert level being attended.	Other educational qualifications		When Studied 1 Now-full time 2 Now-Part time 3 Now-Abroad 4 Past 5 Never	Qualification/Course Insert highest qualification obtained and field of study . If now , specify course being attended		
													School attendance 1 Now 2 Past-WR * 3 Past- None * 4 Never-WR * 5 Never-None * 6 Child not yet at school									
01										1 2	1 2 3 4 5	1 2 3 4 5 6			1 2 3 4 5							
02										1 2	1 2 3 4 5	1 2 3 4 5 6			1 2 3 4 5							
03										1 2	1 2 3 4 5	1 2 3 4 5 6			1 2 3 4 5							
04										1 2	1 2 3 4 5	1 2 3 4 5 6			1 2 3 4 5							
05										1 2	1 2 3 4 5	1 2 3 4 5 6			1 2 3 4 5							

*...-WR : If person can, with understanding, both read and write a simple sentence in his everyday life

....-None: If person cannot, with understanding, both read and write a simple sentence in his everyday life

1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	1.10	1.11	1.12
	Name	Reason	Identity Card No.	Relationship to head	Age	Sex	Marital status	School attendance	Level of education	When studied	Qualification/course
06						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
07						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
08						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
09						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
10						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
11						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
12						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	

*....-WR : If person can, with understanding, both read and write a simple sentence in his everyday life

....-None: If person cannot, with understanding, both read and write a simple sentence in his everyday life

2

MODULE II
LABOUR FORCE (For all persons aged 12 years and over)
PART A - CURRENT ACTIVITY

First name of household member		.....		.....		.....		.....		.....
Serial number of household member as per pages 3 & 4		...		...		...		...		...
2 Interviewer, please state whether information is being collected from respondent (1) or proxy (2)	Circle one answer	1	2	1	2	1	2	1	2	1	2
2.1 During the reference week, did you do any work for pay, profit or family gain, even if it was only for one hour ?	If Yes, go to 2.5	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
2.2 During the reference week , did you do any of the following activities for sale or pay ?	Circle '1' if any one of the listed activities was carried out and go to 2.5										
1. Work or help in a vegetable/fruit/flower cultivation for sale or pay											
2. Rearing of animals (cow, goat, pig, poultry, etc.) for sale or pay											
3. Fishing or other related activities for sale											
4. Preparation of food products (at home) for sale											
5. Dressmaking, tailoring for sale or pay		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
6. Making of baskets/hats/other handicrafts for sale or pay											
7. Work or help in a family shop or other business		1	2	1	2	1	2	1	2	1	2
8. Repair work (shoes, household appliances, etc.) for pay											
9. Sell goods on the street, at fairs or on beaches											
10. Transport of goods or people for pay											
11. Housework or gardening for pay											
12. Care of children/elderly people for pay											
13. Any other small job, specify.....											
2.3 During the reference week , were you temporarily absent from a job or business because of holidays, sickness or any other reason?	If No, go to 2.31 (Part E)	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2

First name of household member		.....	.....	.....	.....	.....	.....
Serial number of household member as per pages 3 & 4		...	...	...	...	...	...
2.4	Why were you away from work during the reference week?						
	Illness or injury..... 1	1	1	1	1	1	1
	Holiday, vacation or on leave 2	2	2	2	2	2	2
	Maternity, leave on birth of a child 3	3	3	3	3	3	3
	Household/family responsibilities 4	4	4	4	4	4	4
	Study/training leave..... 5	5	5	5	5	5	5
	Temporary lay-off with assurance to return to work..... 6	6	6	6	6	6	6
	Temporary disorganisation of work (lack of work, plant or machine repair, bad weather, etc.) 7	7	7	7	7	7	7
	Other, specify 8	8	8	8	8	8	8

PART B - NATURE OF WORK

If the respondent has more than one job or business, questions 2.5 - 2.16 refer to the main job or business, i.e, the job or business in which he/she usually works the most hours.

2.5	What is the name of the establishment, firm, government institution, etc. for which you worked during the reference week?	Record name of employer if there is no trade name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.6	Is the establishment, firm, government institution, employer, etc. for which you work, located in the country?	Circle one answer	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2

First name of household member		.....		.....		.....		.....		.....		.....
Serial number of household member as per pages 3 & 4		...		...		...		...		...		...
2.7 Where is your work place located ?		Circle one											
Fixed place of work outside home.....	1		1	1	1	1	1	1	1	1	1	1	1
Within home premises.....	2		2	2	2	2	2	2	2	2	2	2	2
Along the road : Fixed.....	3		3	3	3	3	3	3	3	3	3	3	3
Mobile.....	4		4	4	4	4	4	4	4	4	4	4	4
On the beach.....	5		5	5	5	5	5	5	5	5	5	5	5
Door to door.....	6		6	6	6	6	6	6	6	6	6	6	6
Other place of work which is not fixed.....	7		7	7	7	7	7	7	7	7	7	7	7
From home.....	8		8	8	8	8	8	8	8	8	8	8	8
Outside Mauritius.....	9		9	9	9	9	9	9	9	9	9	9	9
Other, specify.....	10	10	10	10	10	10	10	10	10	10	10	10	
2.8 How many persons (including yourself) work there?		Circle one answer											
Under 5.....	1		1	1	1	1	1	1	1	1	1	1	
5 to 9.....	2		2	2	2	2	2	2	2	2	2	2	
10 or more.....	3		3	3	3	3	3	3	3	3	3	3	
2.9 What kind of activity is carried out at your place of work?		Record major activity carried out where the person works											
2.10 What kind of work do you do there?		Record main occupation											
2.11 What is your employment status?		Circle one answer. If circled 1,2,4,5,6 go to 2.14 (a)											
Employer.....	1		1	1	1	1	1	1	1	1	1	1	
Own account worker.....	2		2	2	2	2	2	2	2	2	2	2	
Employee.....	3		3	3	3	3	3	3	3	3	3	3	
Apprentice/internship.....	4		4	4	4	4	4	4	4	4	4	4	
Contributing family worker.....	5		5	5	5	5	5	5	5	5	5	5	
Other, specify.....	6	6	6	6	6	6	6	6	6	6	6		

First name of household member								
Serial number of household member as per pages 3 & 4			...		...		...
2.12	What is your type of employment? Permanent (indeterminate duration)..... 1 Contractual (determinate duration)..... 2	Circle one answer. If 1, go to 2.14(a)	1 2	1 2	1 2	1 2	1 2	1 2
2.13 (a)	What is the duration of your actual contract?	Record number of months						
(b)	How long have you been working under contract in your current job?	Record number of months						
2.14 (a)	Do you contribute to the National Pension Scheme?		Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2
(b)	Does your employer contribute to the National Pension Scheme for you?		Yes No NA 1 2 3	Yes No NA 1 2 3	Yes No NA 1 2 3	Yes No NA 1 2 3	Yes No NA 1 2 3	Yes No NA 1 2 3
2.15	How long have you been working for your present employer (if employer or own account worker, in the present business)?	Record number of months						
2.16 (a)	How much did you derive as income, including overtime pay, from your main job/business for last month ?	Record in rupees						
(b)	Of which basic salary							
(c)	Of which overtime pay							
(d)	Of which non-regular income, specify.....							
2.17	In addition to your main occupation, did you have any other job or business during the reference week ?	If No, go to 2.20	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2
2.18	What kind of activity is carried out at your second place of work?	Record major activity carried out there						
2.19	What is your employment status there? Employer..... 1 Own account worker..... 2 Employee..... 3 Apprentice/internship..... 4 Contributing family worker..... 5 Other, specify..... 6	Circle one answer	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6

PART C - HOURS OF WORK

First name of household member		.....		.....		.....		.....		.....		.....
Serial number of household member as per pages 3 & 4		...		...		...		...		...		...
2.20 Main Job (a) During the reference week , how many hours (including overtime) did you work at your main job?	Exclude lunch time and periods of leave/absence * Insert total hours for the week	Mon	Tue	Mon	Tue	Mon	Tue	Mon	Tue	Mon	Tue	Mon	Tue
		Wed	Thu	Wed	Thu	Wed	Thu	Wed	Thu	Wed	Thu	Wed	Thu
		Fri	Sat	Fri	Sat	Fri	Sat	Fri	Sat	Fri	Sat	Fri	Sat
		Sun	Week*	Sun	Week*	Sun	Week*	Sun	Week*	Sun	Week*	Sun	Week*
(b) How many hours do you usually work at your main job per week?	Record number of hours If 2.20(a) is greater or equal to 2.20(b) , go to 2.21												
(c) During the reference week , why did you work less than your usual hours at your main job?	Circle main reason	Illness/Injury..... 1	1	1	1	1	1	1	1	1	1	1	1
On leave..... 2		2	2	2	2	2	2	2	2	2	2	2	2
Studies/training..... 3		3	3	3	3	3	3	3	3	3	3	3	3
Household/family responsibilities 4		4	4	4	4	4	4	4	4	4	4	4	4
Temporary..... 5		5	5	5	5	5	5	5	5	5	5	5	5
Part time job..... 6		6	6	6	6	6	6	6	6	6	6	6	6
Insufficient work..... 7		7	7	7	7	7	7	7	7	7	7	7	7
Bad weather/breakdown..... 8		8	8	8	8	8	8	8	8	8	8	8	8
Shift work/variable hours 9		9	9	9	9	9	9	9	9	9	9	9	9
Public holiday..... 10		10	10	10	10	10	10	10	10	10	10	10	10
Other, specify 11		11	11	11	11	11	11	11	11	11	11	11	11

First name of household member													
Serial number of household member as per pages 3 & 4		...		...		...		...		...		...
2.21 Other jobs (applicable if yes at 2.17, else go to 2.22) (a) During the reference week , how many hours (including overtime) did you work at your other job(s) ?	Exclude lunch time and periods of leave/absence * Insert total hours for the week	Mon	Tue	Mon	Tue	Mon	Tue	Mon	Tue	Mon	Tue	Mon	Tue
		Wed	Thu	Wed	Thu	Wed	Thu	Wed	Thu	Wed	Thu	Wed	Thu
		Fri	Sat	Fri	Sat	Fri	Sat	Fri	Sat	Fri	Sat	Fri	Sat
		Sun	Week*	Sun	Week*	Sun	Week*	Sun	Week*	Sun	Week*	Sun	Week*
(b) How many hours do you usually work at your other job(s) per week?	Record number of hours If 2.21(a) is greater or equal to 2.21(b), go to 2.22												
(c) During the reference week , why did you work less than your usual hours at your other job(s) ?	Circle main reason	Illness/Injury..... 1	1	1	1	1	1	1	1	1	1	1	1
On leave..... 2		2	2	2	2	2	2	2	2	2	2	2	2
Studies/training..... 3		3	3	3	3	3	3	3	3	3	3	3	3
Household/family responsibilities 4		4	4	4	4	4	4	4	4	4	4	4	4
Temporary..... 5		5	5	5	5	5	5	5	5	5	5	5	5
Part time job..... 6		6	6	6	6	6	6	6	6	6	6	6	6
Insufficient work..... 7		7	7	7	7	7	7	7	7	7	7	7	7
Bad weather/breakdown..... 8		8	8	8	8	8	8	8	8	8	8	8	8
Shift work/variable hours 9		9	9	9	9	9	9	9	9	9	9	9	9
Public holiday..... 10		10	10	10	10	10	10	10	10	10	10	10	10
Other, specify 11		11	11	11	11	11	11	11	11	11	11	11	11

First name of household member											
Serial number of household member as per pages 3 & 4		...		...		...		...		...
2.22	Total actual hours (at <i>main and other jobs</i>) worked <i>(calculation to be done by interviewer)</i>	2.20(a) + 2.21 (a)									
2.23	In addition to your total actual hours worked (number of hours calculated at 2.22), were you available for extra work during the reference week (if offered and the extra hours were paid)?	If No , go to 2.26 (Part D)		Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	
2.24	How many extra hours (at main and other jobs) could you have worked during the reference week ?	Record number of hours									
2.25	Have you been looking for additional or alternative work (with more hours) during the past 4 weeks ?			Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	

Applicable if coded 1 or 2 at Questions 2.11 and/or 2.19, ELSE go to Question 2.48 (Part F)
PART D - SELF EMPLOYED (Employers and own account workers)

First name of household member		.....		.....		.....		.....		.....		.....
Serial number of household member as per pages 3 & 4		...		...		...		...		...		...
2.26	What is the type of ownership of the enterprise in which you are working? Individual proprietor..... 1 Household members 2 Partnership with members of other households..... 3 Company..... 4 Registered co-operative..... 5 Other, specify 6	Circle one answer	1	1	1	1	1	1	1	1	1	1	1	
			2	2	2	2	2	2	2	2	2	2	2	
			3	3	3	3	3	3	3	3	3	3	3	
			4	4	4	4	4	4	4	4	4	4	4	
			5	5	5	5	5	5	5	5	5	5	5	
			6	6	6	6	6	6	6	6	6	6	6	
2.27	Is the enterprise's expenditure separate from that of the owner's household?		Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	
2.28	Are the enterprise's assets separate from that of the owner's household?		Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	
2.29	What type of accounts do you keep for your enterprise? No accounts..... 1 Informal records for personal use..... 2 Simplified account kept for income tax purposes..... 3 Complete set of accounts with balance sheets..... 4	Circle one answer	1	1	1	1	1	1	1	1	1	1	1	
			2	2	2	2	2	2	2	2	2	2	2	
			3	3	3	3	3	3	3	3	3	3	3	
			4	4	4	4	4	4	4	4	4	4	4	
2.30	How many persons (including yourself) worked in this enterprise during the reference week ? 1. Working proprietor - Male 2. Working proprietor - Female 3. Contributing family worker - Male 4. Contributing family worker - Female 5. Permanent employee - Male 6. Permanent employee - Female 7. Casual employee - Male 8. Casual employee - Female 9. Apprentice/helper - Male 10. Apprentice/helper - Female	Enter number Go to 2.48 (Part F)	1.	1.	1.	1.	1.	1.	1.	1.	1.	1.	1.	
			2.	2.	2.	2.	2.	2.	2.	2.	2.	2.	2.	2.
			3.	3.	3.	3.	3.	3.	3.	3.	3.	3.	3.	3.
			4.	4.	4.	4.	4.	4.	4.	4.	4.	4.	4.	4.
			5.	5.	5.	5.	5.	5.	5.	5.	5.	5.	5.	5.
			6.	6.	6.	6.	6.	6.	6.	6.	6.	6.	6.	6.
			7.	7.	7.	7.	7.	7.	7.	7.	7.	7.	7.	7.
			8.	8.	8.	8.	8.	8.	8.	8.	8.	8.	8.	8.
			9.	9.	9.	9.	9.	9.	9.	9.	9.	9.	9.	9.
			10.	10.	10.	10.	10.	10.	10.	10.	10.	10.	10.	10.

PART E - UNEMPLOYMENT

First name of household member												
Serial number of household member as per pages 3 & 4		...		...		...		...		...
2.31	Have you been looking for work or trying to set up your own business during the past 4 weeks?	If No, go to 2.34	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
2.32	What have you done during the past 4 weeks to obtain work or to start your own business?	Do not read out Circle either Yes (1) or No (2)	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
	1. Applied to prospective employers		1	2	1	2	1	2	1	2	1	2
	2. Checked at factories, worksites, etc		1	2	1	2	1	2	1	2	1	2
	3. Placed or answered advertisements		1	2	1	2	1	2	1	2	1	2
	4. Sought assistance or advice to obtain a paid job		1	2	1	2	1	2	1	2	1	2
	5. Sought assistance or advice to start own business		1	2	1	2	1	2	1	2	1	2
	6. Looked for inputs* to set up own business		1	2	1	2	1	2	1	2	1	2
	7. Applied for permit to set up own business		1	2	1	2	1	2	1	2	1	2
	8. Registered at the Employment Service		1	2	1	2	1	2	1	2	1	2
	9. Other steps, specify.....	1	2	1	2	1	2	1	2	1	2	
2.33	How long have you been continuously without work and looking for work or trying to set up your own business?	Record number of months Go to 2.36										
2.34	Would you have liked to work during the reference week?	If No, go to 2.38	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2

* inputs such as land, building, machinery, equipment or finance

First name of household member													
Serial number of household member as per pages 3 & 4		...		...		...		...		...		...
2.35	Why were you not looking for work or trying to set up your own business?												
	Studying/training..... 1	1		1		1		1		1		1	
	Will resume studies soon..... 2	2		2		2		2		2		2	
	Retired/too old to work..... 3	3		3		3		3		3		3	
	Permanent disability..... 4	4		4		4		4		4		4	
	Temporary illness/injury..... 5	5		5		5		5		5		5	
	Too young to work 6	6		6		6		6		6		6	
	Parents or spouse not agreeable..... 7	7		7		7		7		7		7	
	Household/family responsibilities..... 8	8		8		8		8		8		8	
	Not interested to work 9	9		9		9		9		9		9	
	New job or own business to start soon..... 10	10		10		10		10		10		10	
	Suitable jobs not available..... 11	11		11		11		11		11		11	
	Do not know how and where to look for work..... 12	12		12		12		12		12		12	
	Got tired/frustrated of seeking work..... 13	13		13		13		13		13		13	
	Other, specify..... 14	14		14		14		14		14		14	
2.36	Could you have started to work during the reference week if work was available?	If No, go to 2.38		Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
2.37	Are you willing to accept.....?			Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
	1. Full-time employment	Circle either		1	2	1	2	1	2	1	2	1	2
	2. Part-time employment	Yes (1) or		1	2	1	2	1	2	1	2	1	2
	3. Employment without limit of time (permanent)	No (2)		1	2	1	2	1	2	1	2	1	2
	4. Temporary employment	Go to 2.39		1	2	1	2	1	2	1	2	1	2
	5. Employment in the public sector			1	2	1	2	1	2	1	2	1	2
	6. Employment in the private sector			1	2	1	2	1	2	1	2	1	2
	7. Work below your level of qualification			1	2	1	2	1	2	1	2	1	2
	8. Work outside your training/qualification			1	2	1	2	1	2	1	2	1	2

First name of household member																
			
Serial number of household member as per pages 3 & 4																
2.38	Why did you not like to work or were you not available for work during the reference week ?															
	Studying/training..... 1	1			1			1			1			1		
	Will resume studies soon..... 2	2			2			2			2			2		
	Retired/too old to work..... 3	3			3			3			3			3		
	Permanent disability..... 4	4			4			4			4			4		
	Temporary illness/injury..... 5	5			5			5			5			5		
	Too young to work 6	6			6			6			6			6		
	Parents or spouse not agreeable..... 7	7			7			7			7			7		
	Household/family responsibilities..... 8	8			8			8			8			8		
	Not interested to work 9	9			9			9			9			9		
	New job or own business to start soon..... 10	10			10			10			10			10		
	Suitable jobs not available..... 11	11			11			11			11			11		
	Do not know how and where to look for work..... 12	12			12			12			12			12		
	Got tired/frustrated of seeking work..... 13	13			13			13			13			13		
	Other, specify..... 14	14			14			14			14			14		
2.39	What is your main source of income or support to meet your daily needs?															
	Parents..... 1	1			1			1			1			1		
	Spouse/partner..... 2	2			2			2			2			2		
	Children..... 3	3			3			3			3			3		
	Other relatives/non relatives..... 4	4			4			4			4			4		
	Maintenance alimony (ex-spouse)..... 5	5			5			5			5			5		
	Savings/property income..... 6	6			6			6			6			6		
	Government pension/assistance..... 7	7			7			7			7			7		
	Other pension/work compensation..... 8	8			8			8			8			8		
	Other, specify..... 9	9			9			9			9			9		

First name of household member												
Serial number of household member as per pages 3 & 4			...		...		...		...		...
2.40	Have you ever worked in the past?	If No , go to 2.48 (Part F)	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
2.41	How long is it since you worked for the last time, even for a few days? If the number of months is greater than 120, record number and go to 2.48 (Part F)	Record number of months										
2.42	What kind of activity was carried out at the place where you worked?	Record major activity carried out where person worked										
2.43	What kind of work did you do there most of the time?	Record main occupation										
2.44	What was your employment status? Employer..... 1 Own account worker..... 2 Employee..... 3 Apprentice..... 4 Contributing family worker..... 5 Other, specify..... 6	Circle one answer If circled 1,2,4,5,6 go to 2.47	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	
2.45	Did you work under contract at your last job?	If No , go to 2.47	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
2.46	How long have you been working under contract at your last job?	Record number of months										

First name of household member							
Serial number of household member as per pages 3 & 4		...			...
2.47	Why did you leave your last job?						
	Closure of establishment/firm..... 1	1	1	1	1	1	1
	VRS-Closure of establishment..... 2	2	2	2	2	2	2
	Reduction of workforce..... 3	3	3	3	3	3	3
	VRS-Reduction of workforce..... 4	4	4	4	4	4	4
	Completion of contract/temporary job..... 5	5	5	5	5	5	5
	Health problems..... 6	6	6	6	6	6	6
	Retirement..... 7	7	7	7	7	7	7
	Marriage/childbirth/household responsibilities..... 8	8	8	8	8	8	8
	Not satisfied with job..... 9	9	9	9	9	9	9
	Resumption of studies/training..... 10	10	10	10	10	10	10
	Other, specify 11	11	11	11	11	11	11

Circle
main reason

Applicable to all persons aged between 16 and 65 years inclusive
PART F - REGISTRATION AT EMPLOYMENT INFORMATION CENTRE

Age as per column 1.6									
First name of household member		.....		.....		.....		.....
Serial number of household member as per pages 3 & 4		.....		.....		.....		.....
2.48 Are you registered at the Employment Information Centre?	If No (2), go to 2.50	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
2.49 How long have you been registered at the Employment Information Centre?	Record number of months								

Applicable to all persons aged between 16 and 30 years inclusive
PART G - CAREER GUIDANCE

Age as per column 1.6							
First name of household member		.....		.....		.....
Serial number of household member as per pages 3 & 4		.....		.....		.....
2.50 Have you ever benefitted from the services of career guidance?	If No (2), go to Module III	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
2.51 How would you rate the guidance obtained?							
Very useful	1	1		1		1	
Useful	2	2		2		2	
Not useful	3	3		3		3	

MODULE III
Section 1. ENTREPRENEURSHIP CULTURE

All persons aged 16 years and above

First name of household member		.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Serial number of household member as per pages 3 & 4		...		...		...		...		...		...
3.1 Do you think that the young should be encouraged		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
(a) by their parents to participate in the family business?	If No to both 3.1(a) and (b), go to 3.3	1	2	1	2	1	2	1	2	1	2	1	2
(b) to set up their own business?		1	2	1	2	1	2	1	2	1	2	1	2
3.2 What are your reasons for favouring entrepreneurship?													
Limited paid jobs	1	Do not read out.	1	1	1	1	1	1	1	1	1	1	1
Personal independence	2	(More than one answer possible)	2	2	2	2	2	2	2	2	2	2	2
Avoid risks related to paid employment	3	Go to Q4.1	3	3	3	3	3	3	3	3	3	3	3
Better income prospects	4		4	4	4	4	4	4	4	4	4	4	4
More interest in own business	5		5	5	5	5	5	5	5	5	5	5	5
Other, specify	6		6	6	6	6	6	6	6	6	6	6	6
3.3 What are your reasons for not supporting entrepreneurship?													
Income is not regular	1	Do not read out	1	1	1	1	1	1	1	1	1	1	1
Limited access to finance	2	(More than one answer possible)	2	2	2	2	2	2	2	2	2	2	2
Lengthy procedures to obtain necessary permits	3		3	3	3	3	3	3	3	3	3	3	3
Difficulty in finding working space	4		4	4	4	4	4	4	4	4	4	4	4
Must market own product	5		5	5	5	5	5	5	5	5	5	5	5
Inadequate assistance to set up own business (non-financial)	6		6	6	6	6	6	6	6	6	6	6	6
Land constraint (agricultural activities)	7		7	7	7	7	7	7	7	7	7	7	7
Other, specify.....	8		8	8	8	8	8	8	8	8	8	8	8

Section 2. SPORTS

All household members aged 7 years and above

First name of household member															
Serial number of household member as per pages 3 & 4															
4.1	During last month , did you do any physical exercise (jogging, yoga, swimming, football, aerobics, etc.)	If No (2), go to 4.6		Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2		
4.2	How much time did you spend on your physical exercise per week and where* did you practice the activities?	Read out	Minutes	M O H P *	Minutes	M O H P *	Minutes	M O H P *	Minutes	M O H P *	Minutes	M O H P *	Minutes	M O H P *	
	1. Aerobic	Record time in minutes and infrastructure as per footnote	1												
	2. Athletics		2												
	3. Badminton		3												
	4. Basketball		4												
	5. Body building		5												
	6. Cycling		6												
	7. Football		7												
	8. Jogging		8												
	9. Swimming		9												
	10. Table tennis		For students, record time spent on physical activities outside school hours	10											
	11. Tai-chi			11											
	12. Tennis			12											
	13. Volley ball			13											
	14. Brisk Walking			14											
	15. Weightlifting			15											
	16. Yoga			16											
	17. Other, specify		17												
4.3	How many times per week did you practice?														

* M - Public (Ministry of Youth & Sports) O - Public (Other) H - Private (Home) P - Private (other)

Section 2. SPORTS (contd.)

First name of household member													
Serial number of household member as per pages 3 & 4													
4.4	Why did you practice the above physical activities?												
	Leisure..... 1	Record main reason	1	1	1	1	1	1	1	1	1	1	1
	Health & fitness..... 2	For 1,2 & 4,	2	2	2	2	2	2	2	2	2	2	2
	Competition..... 3	end of section	3	3	3	3	3	3	3	3	3	3	3
	Other, specify..... 4		4	4	4	4	4	4	4	4	4	4	4
4.5	Did you train under the supervision of a coach?	End of section	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1
4.6	Why did you not practice any physical activities?												
	Lack of time due to work..... 1	Do not read out	1	1	1	1	1	1	1	1	1	1	1
	Lack of time due to study..... 2		2	2	2	2	2	2	2	2	2	2	2
	Lack of facilities/accessibility..... 3	Record main reason	3	3	3	3	3	3	3	3	3	3	3
	Lack of motivation..... 4		4	4	4	4	4	4	4	4	4	4	4
	Injury..... 5		5	5	5	5	5	5	5	5	5	5	5
	Age..... 6	End of section	6	6	6	6	6	6	6	6	6	6	6
	Disability/illness..... 7		7	7	7	7	7	7	7	7	7	7	7
	Other, specify..... 8		8	8	8	8	8	8	8	8	8	8	8

5

HOUSEHOLD INCOME AND EXPENDITURE

5.1 What was your total household expenditure

for the **last month**?

Rs.....

5.2 What was your household expenditure on the following items **last month**?

Amount (Rs)

1. Food and non-alcoholic beverages		
2. Medical care (including health related items)		
3. Rent (if any)		
4. Gas		
5. Educational expenses		
6. Travelling and transport		
7. Clothing and footwear		
8. Water bill and waste water bill		
9. Electricity bill (including MBC TV licence)		
10. Telephone bill (excluding internet bill)		
11. Internet/e-mail		
12. Mobile phone		
13. Restaurants and hotels bills		
14. Recreation and culture		
15. Household appliances and furniture		
16. Routine house maintenance		
17. Life insurance and pension contributions		
of which (i) National Pension Fund		
(ii) Other private pension fund		
(iii) Civil Service Family Pension Scheme		
(iv) Pension contribution (PRB 2008)		
18. Debt repayment: Land/house		
Vehicle		
Credit purchase		
Educational loan		
Other, specify		
Total		

5.3 For the calendar **year 2014**, what was the total amount paid for the following items?

Amount (Rs)	
1. Income tax	
2. Municipal tax	

5.4 **Applicable if no rent at question 5.2(3) has been declared, i.e, for owned and free accomodation only**

What would be the monthly rent payable for your housing unit,
if rented unfurnished ?

Rs

6 5.5 Income from work last month

Source	Serial number of household member as per pages 3 & 4											
		
Paid employment (including bonus, overtime, etc.)												
Income from self-employment (trade, business, plantation, etc.)												
Income from backyard-produced goods (vegetables, fruits, eggs, fish, etc.)												
Total												
Total 5.5												

7 5.6 Income from property last month

Source	Serial number of household member as per pages 3 & 4											
		
Rent from land and buildings/machinery/equipment, etc												
Dividends/Interests												
Other, specify.....												
Total												
Total 5.6												

8 5.7 Transfer Income

	If applicable, please state amount received last month											
	Serial number of household member as per pages 3 & 4											
		
Pension from former employer												
NPF retirement/old age pension												
Widow's and children pension												
Other social security benefits												
Maintenance allowance/alimony												
Regular allowance from parents/relatives												
Regular allowance from social/religious organisations												
Other regular income, specify.....												
Total												
Total 5.7												

Total (5.5+ 5.6+ 5.7)

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9

Telephone number of respondent

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Collected under the provisions of the Statistics Act and in accordance with the sections 22, 23, 24, 25, 26, 27, 28 and 29 of the Data Protection Act.