

THE REPUBLIC



OF THE GAMBIA

Strictly Confidential

POPULATION AND HOUSING CENSUS, APRIL 1993

FORM A HOUSEHOLD QUESTIONNAIRE PART 1

Name	L.G.A.	District	Town / Village	E.A. No.	Compound No.	Normal/ Group	Household No. in Compound	Head of Household

GPC-3 Usual Members Present on Census Night

Srl No	Full Name	Sex	Relationship to Head of Household
1			
2			
3			
4			
5			
6			
7			
8			
9			
0			

Total No. of Persons in GPC-3	Total No. of Persons in GPC-4	Total No. of Persons in GPC-5
<input type="text"/>	<input type="text"/>	<input type="text"/>
	Total No. of Persons in GPC-3 & 4	Total No. of Persons in GPC-3 & 5
	<input type="text"/>	<input type="text"/>

GPC-4 Visitors Present On Census Night

Srl No	Full Name	Sex	Relationship to Head of Household	Usual Residence	
				Town / Village	District/Country
1					
2					
3					
4					
5					

GPC-5 Usual Members Absent On Census Night

Srl No	Full Name	Sex	Age	Relationship to Head of Household	Address on Census Night		How Long Absent (in Completed Months)
					Town / Village	District/Country	
1							
2							
3							
4							
5							

1st Visit	2nd Visit	Final Visit
Date	Date	Date

Name	Signature	Date
Enumerator/...../.....
Supervisor/...../.....

FORM A HOUSEHOLD QUESTIONNAIRE PART 3

HOUSING CONDITIONS (To be answered by head of household or any responsible member of household)
Circle only one code number corresponding to correct answer

1 Accommodation		2 Main Source of Light	3 Kitchen	4 Main Cooking Fuel	5 Bath Room	6 Toilet Facility	7 Source of Water
a) On what basis do you occupy this dwelling? 1 - Owner Occupied 2 - Rent 3 - Not Owner, but Rent Free 4 - Other, Specify	b) If you rent it or it is rent-free, who owns the accommodation? 1 - Private (Individual) 2 - Public Ownership 3 - Other Private (Institution)	1 - Electricity 2 - Kerosene Lamp with Glass Shade 3 - Other Kerosene Lamp 4 - Candle 5 - Other, Specify	Where do you generally cook? 1 - Separate Room (in the House or Compound) for Exclusive Use of Household 2 - Separate Room (in the House or Compound) for Use of Other Households also 3 - Open Space (in the Compound) 4 - Other, Specify	1 - Firewood 2 - Kerosene 3 - Briquette 4 - Charcoal 5 - Gas 6 - Electricity 7 - Other, Specify	Where do you usually have your bath? 1 - Separate Room (in the House or Compound) for Exclusive Use of Household 2 - Separate Room (in the House or Compound) for Use of Other Households also 3 - Enclosure without roof (in the Compound) 4 - Other, Specify	a) Is there a Toilet In this House or Compound? 1 - Yes 2 - No (Skip to 6c) b) If Yes, does your Household use this Toilet? 1 - Yes (Household only) 2 - Yes (with other Households) 3 - No c) What Type of Toilet does your Household use? 1 - W.C. 2 - Private Pan 3 - Public Latrine 4 - Private Pit 5 - Public Pit 6 - Ventilated Improved Pit (V.I.P.) 7 - Other, Specify	1 - Stand Pipe or Running Water in House or Compound 2 - Public Stand Pipe 3 - Well in Compound 4 - Well with Pump (Public) 5 - Well without Pump (Public) 6 - Stream or River 7 - Other, Specify
8. Number of Rooms Occupied by Household (excluding Kitchen, Bathroom /Toilet and Stores)						

FORM A HOUSEHOLD QUESTIONNAIRE PART 4
DEATHS IN HOUSEHOLD IN THE LAST 12 MONTHS
(To be answered by head of household or any responsible member of household)

Deaths in Household in the Last 12 Months			
Name of the Deceased	Sex	Relationship to Head of Household	Age at Death
(1)	1: Male 2: Female (2)	(3)	(4)
		
		
		
		
		