

THE REPUBLIC



OF THE GAMBIA

Strictly Confidential

POPULATION AND HOUSING CENSUS, APRIL 1993

FORM A HOUSEHOLD QUESTIONNAIRE PART 1

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

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

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Total No. of
Persons in
GPC-4

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Total No. of
Persons in
GPC-5

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Total No. of
Persons in
GPC-3 & 4

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Total No. of
Persons in
GPC-3 & 5

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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 Ab- sent (in Completed Months)
					Town / Village	District/Country	
1							
2							
3							
4							
5							

Name

Signature

Date

1st Visit

2nd Visit

Final Visit

Enumerator

Supervisor

Date

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[illegible]

FORM A HOUSEHOLD QUESTIONNAIRE PART 2

[illegible]

FORM A HOUSEHOLD QUESTIONNAIRE PART 2 (Continued)

[illegible]

[illegible]

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?	b) If you rent it or it is rent-free, who owns the accommodation?	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)	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)								

(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 1: Male 2: Female	Relationship to Head of Household	Age at Death
(1)	(2)	(3)	(4)