



## INSTRUCTIONS

Please mark boxes like this  .  
DO NOT USE RED INK.

ENUMERATOR NAME

DATE

ENUMERATOR SIGNATURE

ENUMERATOR NUMBER

[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]

## POPULATION CENSUS COMMISSION OF ETHIOPIA

### 2007 National Population and Housing Census

### SHORT FORM

#### SECTION 1: AREA IDENTIFICATION

1. REGION	2. ZONE	3. WEREDA	4. TOWN	5. KEFTEGNA	6. S.A.	7. KEBELE	8. E.A.
[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]	[0] [1] [2] [3] [4] [5] [6] [7] [8] [9]

SUPERVISOR NAME

DATE

SUPERVISOR SIGNATURE

Remember to fill in the area identification particulars on the back of this form!

IF THIS IS A CONTINUATION BOOKLET FOR THIS HOUSEHOLD MARK THIS BOX

## SECTION 2: TYPE OF RESIDENCE AND HOUSING IDENTIFICATION

### 1. Type of Residence

Conventional household	1	Correctional facility	2
Hotel/Hostel	3	Other Collective Quarters	4
Orphanage	5	Household wandering in search of water and grass	6
Boarding School/College/University	7	Homeless	8

### 2. Housing Serial Number

0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9

### 3. Household, Hotel/Hostel/Other Collective Quarter Serial Number

0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9

## SECTION 3: DETAILED PARTICULARS OF PERSONS IN THE HOUSEHOLD

1. Serial No. of Household Member	2. Name of usual members of the household and visitors <small>Please tell me the names of all persons living in this house who have common arrangements for cooking and dining starting with the head of the household, then listed as follows:- Head, Spouse, Children living in the household in age order, Other relatives, Members who are not related, Visitors</small>	3. Residence status <small>Res Present on census day Res Absent on census day Visitor on census day</small>	4. What is the relationship of (NAME) to the head of the household? <small>Head Spouse Son/daughter of head and/or spouse Head Spouse parent in law Head Spouse brother/sister Niece/nephew Grandchild Other relative Non relative</small>	5. What is (NAME's) sex? <small>Male Female</small>
1				
2				
3				
4				
5				
6				
7				
8				
9				

## SECTION 3: DETAILED PARTICULARS OF PERSONS IN THE HOUSEHOLD continued

Serial No. of Household Member	6. What is (NAME's) age? <small>(Record in completed years - if less than one year code 00, if more or equal to 97 code 97)</small>  EXAMPLE: If the age of NAME is 37	7. What is (NAME's) religion? <small>Orthodox Protestant Catholic Muslim/Islam Traditionalist Other</small>	8. What is (NAME's) mother tongue? <small>Please enter the code for the language from the list shown in the instruction manual</small>	9. What is (NAME's) ethnic group? <small>Please enter the code for the ethnic group from the list shown in the instruction manual</small>	10. Read the question from the code list card provided  <small>If not disabled, mark 2 and skip to 16</small>	11. If yes, what is (NAME's) type of difficulty or problem?  <small>Blind Sight difficulty Deaf Hearing difficulty Unable to speak Speaking difficulty Deaf and unable to speak Non functional upper limbs Non functional lower limbs Body movement problem Learning difficulties Mental problem (go to 15) Other</small>		12. What was the cause of (NAME's) disability? <small>Car accident Other accident Polio Hansen disease Other disease (after delivery) During pregnancy (at delivery) War/trauma Others (Not based on codes 1-7) Not known</small>	AGE 0-17 ONLY	
	16. Is (NAME's) biological mother alive?	17. Is (NAME's) biological father alive?								
1										
2										
3										
4										
5										
6										
7										
8										
9										



IF THIS IS A CONTINUATION  
BOOKLET FOR THIS HOUSEHOLD  
MARK THIS BOX

# POPULATION CENSUS COMMISSION OF ETHIOPIA

## 2007 National Population and Housing Census

### LONG FORM

#### ENUMERATOR NUMBER

[0]	[1]	[2]	[3]	[4]	[5]	[6]	[7]	[8]	[9]
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#### SECTION 1: AREA IDENTIFICATION

1. REGION	2. ZONE	3. WEREDA	4. TOWN	5. KEFTEGNA	6. S.A.	7. KEBELE	8. E.A.
[0]	[0]	[0]	[0]	[0]	[0]	[0]	[0]
[1]	[1]	[1]	[1]	[1]	[1]	[1]	[1]
[2]	[2]	[2]	[2]	[2]	[2]	[2]	[2]
[3]	[3]	[3]	[3]	[3]	[3]	[3]	[3]
[4]	[4]	[4]	[4]	[4]	[4]	[4]	[4]
[5]	[5]	[5]	[5]	[5]	[5]	[5]	[5]
[6]	[6]	[6]	[6]	[6]	[6]	[6]	[6]
[7]	[7]	[7]	[7]	[7]	[7]	[7]	[7]
[8]	[8]	[8]	[8]	[8]	[8]	[8]	[8]
[9]	[9]	[9]	[9]	[9]	[9]	[9]	[9]

#### SECTION 2: TYPE OF RESIDENCE AND HOUSING IDENTIFICATION

1. Type of Residence	2. Housing Serial Number	3. Household, Hotel/Hostel/Other Collective Quarter Serial Number
Conventional household	[0]	[0]
Hotel/Hostel	[1]	[1]
Orphanage	[2]	[2]
Boarding School/College/University	[3]	[3]
Correctional facility	[4]	[4]
Other Collective Quarters	[5]	[5]
Households wandering in search of water and grass	[6]	[6]
Homeless	[7]	[7]

#### SECTION 3: DETAILS OF PERSONS IN THE HOUSEHOLD

1. Serial No. of Household Member	2. Name of usual members of the household and visitors <i>Please tell me the names of all persons living in this house who have common arrangements for cooking and dining starting with the head of the household, then listed as follows:-</i> Head Spouse Children living in the household in age order Other relatives Members who are not related Visitors	3. Residence status Resident Present on census day Resident Absent on census day Visitor on census day	4. What is the relationship of (NAME) to the head of the household? Head Spouse Son/daughter of head and/or spouse Head/Spouse parent in law Head/Spouse brother/sister Niece/nephew Grandchild Other relative Non relative	5. What is (NAME's) sex? Male Female	6. What is (NAME's) age? <i>(Record in completed years - if less than one year code 00, if more or equal to 97 code 97)</i> EXAMPLE: If the age of NAME is 37 37	7. What is (NAME's) religion? Orthodox Protestant Muslim/Islam Traditionalist Other	8. What is (NAME's) mother tongue? <i>Please enter the code for the language from the list shown in the instruction manual</i>	9. What is (NAME's) ethnic group? <i>Please enter the code for the ethnic group from the list shown in the instruction manual</i>
[0]		[0]	[0]	[0]	[0]	[0]		
[1]		[1]	[1]	[1]	[1]	[1]		
[2]		[2]	[2]	[2]	[2]	[2]		
[3]		[3]	[3]	[3]	[3]	[3]		
[4]		[4]	[4]	[4]	[4]	[4]		
[5]		[5]	[5]	[5]	[5]	[5]		
[6]		[6]	[6]	[6]	[6]	[6]		
[7]		[7]	[7]	[7]	[7]	[7]		
[8]		[8]	[8]	[8]	[8]	[8]		
[9]		[9]	[9]	[9]	[9]	[9]		

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Serial No. of Household Member	DISABILITY STATUS													13. Urban: What is the number of years (NAME) has continuously lived in this town? Rural: What is the number of years (NAME) has continuously lived in rural part of this Wereda?		ONLY FOR CODES 0-7 in Q13		AGE 0-17 ONLY		AGE 5 AND ABOVE						
	10. Read the question from the code list card provided <i>If not disabled, mark 2 and skip to 16</i>	11. If yes, what is (NAME's) type of difficulty or problem? Blind Seeing difficulty Deaf Hearing difficulty Unable to speak Speaking difficulty Deaf and unable to speak Non functional upper limbs Non functional lower limbs Body movement problem Learning difficulties Mental problem (go to 13) Other												12. What was the cause of (NAME's) disability? Car accident Other accident Polio Hanson disease Other disease (After delivery) During pregnancy (At delivery) War/mines Others (Not listed in codes 1-7) Not known		14. Was (NAME's) previous address urban or rural?		15. To which zone does this place belong?  <i>Use the code list card for zone codes</i>		16. Is (NAME's) biological mother alive?		17. Is (NAME's) biological father alive?		18. Is (NAME) literate?		19. Is (NAME) currently attending school?  <i>If yes, enter the code for the grade</i>  <i>If not attending, ask if attended before. Code "97" if attended before. Code "98" then skip to Q21 if never attended school.</i>
1	Yes 1 No 2	1 2 3 4 5 6 7 8 9 10 11 12 13	1 2 3 4 5 6 7 8 9	URBAN 1 RURAL 2		0 1 2 3 4 5 6 7 8	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2		0 1 2 3 4 5 6 7 8 9															
2	Yes 1 No 2	1 2 3 4 5 6 7 8 9 10 11 12 13	1 2 3 4 5 6 7 8 9	URBAN 1 RURAL 2		0 1 2 3 4 5 6 7 8	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2		0 1 2 3 4 5 6 7 8 9															
3	Yes 1 No 2	1 2 3 4 5 6 7 8 9 10 11 12 13	1 2 3 4 5 6 7 8 9	URBAN 1 RURAL 2		0 1 2 3 4 5 6 7 8	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2		0 1 2 3 4 5 6 7 8 9															
4	Yes 1 No 2	1 2 3 4 5 6 7 8 9 10 11 12 13	1 2 3 4 5 6 7 8 9	URBAN 1 RURAL 2		0 1 2 3 4 5 6 7 8	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2		0 1 2 3 4 5 6 7 8 9															
5	Yes 1 No 2	1 2 3 4 5 6 7 8 9 10 11 12 13	1 2 3 4 5 6 7 8 9	URBAN 1 RURAL 2		0 1 2 3 4 5 6 7 8	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2		0 1 2 3 4 5 6 7 8 9															
6	Yes 1 No 2	1 2 3 4 5 6 7 8 9 10 11 12 13	1 2 3 4 5 6 7 8 9	URBAN 1 RURAL 2		0 1 2 3 4 5 6 7 8	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2		0 1 2 3 4 5 6 7 8 9															
7	Yes 1 No 2	1 2 3 4 5 6 7 8 9 10 11 12 13	1 2 3 4 5 6 7 8 9	URBAN 1 RURAL 2		0 1 2 3 4 5 6 7 8	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2		0 1 2 3 4 5 6 7 8 9															
8	Yes 1 No 2	1 2 3 4 5 6 7 8 9 10 11 12 13	1 2 3 4 5 6 7 8 9	URBAN 1 RURAL 2		0 1 2 3 4 5 6 7 8	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2		0 1 2 3 4 5 6 7 8 9															

Serial No. of H/hold Member	AGE 5 AND ABOVE continued		AGE 10 AND ABOVE												
	20. What is the highest grade (NAME) completed?  <i>Use the code list card</i>	21. Has (NAME) been engaged in productive activity for at least 4 hours during the last 7 days? Yes goto Q23 Has job but not worked goto Q23 No	22. Is (NAME) available to work during the coming month? If Yes, code 1, if No code reason	23. Was (NAME) engaged in productive activity during most of the last 12 months? If Yes, code 1, if No code main reason.	24. What was (NAME's) employment status in the main job?	25. What is (NAME's) current marital status?									
1	0 1 2 3 4 5 6 7 8 9	1 2 3	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9 10 11	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6									
2	0 1 2 3 4 5 6 7 8 9	1 2 3	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9 10 11	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6									
3	0 1 2 3 4 5 6 7 8 9	1 2 3	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9 10 11	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6									
4	0 1 2 3 4 5 6 7 8 9	1 2 3	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9 10 11	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6									
5	0 1 2 3 4 5 6 7 8 9	1 2 3	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9 10 11	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6									
6	0 1 2 3 4 5 6 7 8 9	1 2 3	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9 10 11	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6									
7	0 1 2 3 4 5 6 7 8 9	1 2 3	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9 10 11	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6									
8	0 1 2 3 4 5 6 7 8 9	1 2 3	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9 10 11	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6									

Serial No. of Household Member	FOR WOMEN OF AGE 10 AND ABOVE																																						
	26. Of the children you have borne, how many sons and daughters are now living with you?  <i>Record "0" if none.</i>  <i>*Record "0" for women who have no child at all.</i>								27. Of the children you have borne, how many sons and daughters are living elsewhere?  <i>Record "0" if none.</i>  <i>*Record "0" for women who have no child at all.</i>								28. Did you have children who have died?  If yes, how many are males and how many are females.  <i>Record "0" if none.</i>  <i>*Record "0" for women who have no child at all.</i>								29. Did (NAME) have any live births between 29 May 2006 and 28 May 2007?  <i>If yes, record number of children. If no, record "0"</i>														
	MALE				FEMALE				MALE				FEMALE				MALE				FEMALE																		
1		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4
2		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4
3		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4
4		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4
5		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4
6		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4
7		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4
8		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4	5	6	7	8	9		0	1	2	3	4

SECTION 4: DEATHS IN THE HOUSEHOLD DURING THE LAST 12 MONTHS																	
1. Did a death occur in the household since 29 May 2006? <i>If yes, record number of deaths in the box on the right and further details below.</i> <i>If no, record "0" and go to Section 5 (Housing)</i>																	
<div>0123456789</div>																	
2. Name of deceased		3. Sex of deceased		4. Age at death <i>Record age in completed years</i>				ONLY FOR WOMEN WHO DIED BETWEEN AGE 12-49									
								5. Did (NAME) die during pregnancy, childbirth or within 2 months after childbirth?									
		Male	1			0	1	2	3	4	5	6	7	8	9	Yes	1
		Female	2			0	1	2	3	4	5	6	7	8	9	No	2
		Male	1			0	1	2	3	4	5	6	7	8	9	Yes	1
		Female	2			0	1	2	3	4	5	6	7	8	9	No	2
		Male	1			0	1	2	3	4	5	6	7	8	9	Yes	1
		Female	2			0	1	2	3	4	5	6	7	8	9	No	2
		Male	1			0	1	2	3	4	5	6	7	8	9	Yes	1
		Female	2			0	1	2	3	4	5	6	7	8	9	No	2
		Male	1			0	1	2	3	4	5	6	7	8	9	Yes	1
		Female	2			0	1	2	3	4	5	6	7	8	9	No	2







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1 Enumerator: In accordance with the instruction, housing information will be:

Collected for the unit

Skipped

2 How many years ago was this housing unit built?

Less than 5 years

5 - 9 years

10 - 14 years

15 - 19 years

20 years or more

3 How many ROOMS are in the housing unit?

0

1

2

3

4

5

6

7

8

9

0

1

2

3

4

5

6

7

8

9

4 What is the main source of DRINKING WATER for the members of this housing unit?

Tap inside the house

Tap in compound, private

Tap in compound, shared

Tap outside compound/From private tap, public tap, other organisation/(bought or free of charge)

Protected well or spring

Unprotected well or spring

River/Lake/Pond

5 What type of TOILET facility does the housing unit have?

No toilet facility

Flush toilet

VIP Latrine

Pit Latrine

If coded 2 - 4 only in Question 5

6 Does the household share the toilet with other households?

Yes

No

7 What type of BATHING facility does the housing unit have?

No bathing facility

Bathtub private

Bathtub shared

Shower private

Shower shared

A room prepared for bathing

8 What type of KITCHEN does the housing unit have?

No kitchen

A room used for traditional kitchen inside the housing unit

A room used for traditional kitchen outside the housing unit

A room used for modern kitchen inside the housing unit

A room used for modern kitchen outside the housing unit

If coded 2 - 5 only in Question 8

9 Does the household share the kitchen with other households?

Yes

No

10 Do members of the housing unit use mostly:

YES

NO

Electricity for cooking

Gas/cylinder for cooking

Kerosene for cooking

Charcoal for cooking

Firewood/Leaves/Sawdust for cooking

Dung/manure for cooking

Bio-gas for cooking

Other items than listed above

11 What type of LIGHTING does the housing unit have?

Electricity/Meter private

Electricity/Meter shared

Electricity from generator (No Meter)

Solar energy

Lantern

Bio-gas

Kerosene

Candle/Wax candle

Firewood

12 Does the housing unit have: YES NO

Working radio

Fixed Telephone/Wireless Telephone Excluding mobile phone

Working television

13 How does the housing unit dispose of SOLID WASTE?

Collected by Municipality (Public Dump)

Collected by private establishments/individuals

Dumped in street/Open space

Dumped in river

Burned/Buried solid waste

Other

14 Do livestock spend the night in the room(s) where members spend the night?

Yes

No

No livestock

15 What is the type of TENURE of the housing unit?

Owner occupied

Rent free

Rented from Kebele

Rented from agency of rented houses

Rented from other organisation

Rented from private household

Occupied by paying rent difference

For Questions 16 - 20 please mark by observation and/or asking

16 What is the type of housing unit?

Conventional

Improvised

Mobile

Other

17 What is the major material used for the construction of the WALL of the housing unit?

Wood and mud

Wood and thatch/Wood only

Stone and mud

Stone and cement

Plastered hollow blocks

Unplastered hollow blocks

Bricks

Corrugated iron

Reed/Bamboo

Mud Bricks

Other

18 What is the major material used for the construction of the major part of the CEILING of the housing unit?

None

Fabrics

Bamboo/Reed

Chip wood/Hardboard

Parquet or polished wood

Wood planks

Concrete/Cement

Polythene sheet "Madaberia"

Other

19 What is the major material used for the construction of the major part of the ROOF of the housing unit?

Corrugated iron sheet

Concrete or cement

Thatch

Wood and mud

Bamboo or reed

Plastic/Shera

Asbestos

Other

20 What is the major material used for the construction of the major part of the FLOOR of the housing unit?

Mud

Bamboo/Reed

Wood planks

Parquet or polished wood

Cement screed/Cement screed not applied

Plastic tiles

Cement tile/Brick tile

Ceramic/Marble tiles

Other

ENUMERATOR VALIDATION

Enumerator Name

Enumerator Signature

Date

SUPERVISOR VALIDATION

Supervisor Name

Supervisor Signature

Date

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