



Palestinian Central Bureau of Statistics

Data Confidential in Accordance to General Statistical Law 1994

Repetition	Quarter	Year
1	1 2 3 4	_____
2	1 2 3 4	_____
3	1 2 3 4	_____
4	1 2 3 4	_____
Interviewee Week Round No.	_____	Constant No _____

Mark (x) in the box of the Repetition in which the household is interviewed ☐ first ☐ second ☐ third ☐ forth

Part I : Identification Information

IDNUM	<input type="text"/>	REP	<input type="text"/>	IDSAM	<input type="text"/>
ID1	Locality code	<input type="text"/>	ID4	Number of HU in the Building	<input type="text"/>
ID2	Enumeration Area	<input type="text"/>	ID5	Number of household in HU	<input type="text"/>
ID3	Building no	<input type="text"/>	ID6	District code	<input type="text"/>
ID7	Type of locality	<input type="text"/>	ID8	No. of HH in Enumeration Area	<input type="text"/>
ID9	Name of head of HH	<input type="text"/>			
District	<input type="text"/>		Locality	<input type="text"/>	
				Street/Route	<input type="text"/>

Part II: Quality Control

Repetition	Date of interviewing			Final result	No. of visits	Name of interviewer	No. of interviewer	Editor code	Coder code	Data entry operator code
	QC1			QC2	QC3		QC4	QC5	QC6	QC7
	day	month	year	(1-3)	(1-8)					
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

QC2	Final result	1. Complete	2. Family Passenger	3. Unit Not Found	4. Nobody at Home	5. Refused	6. Not inhabited unit	7. No information	8. Others/ Select.....
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Interviewer: Read all names of household members listed in the previous Repetition and ask the following questions	Repetition				
	First	Second	Third	Fourth	
RD1: Number of new household members	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	If the number is more than one, add the new names to the household roster
RD2: Number of household members who left the household due to death, migration or any other reason	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	If the number is more than one update the roster and delete the names of the leaving members
RD3: Number of household members less than 10 years	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
RD4: Number of household members 10 years and over	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
RD5: Number of residence rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

HR0				HR0A	HR1	HR2	HR3				HR4	HR5	HR6	HR7						
Office Use Only				Number of Person answering by Round <div> <div><input type="checkbox"/></div><div><input type="checkbox"/></div> <div><input type="checkbox"/></div><div><input type="checkbox"/></div> <div><input type="checkbox"/></div><div><input type="checkbox"/></div> <div><input type="checkbox"/></div><div><input type="checkbox"/></div> </div>	Name	Sex 1.Male 2.Female	Date of Birth				Relationship to the Head of Household 1. head 2. spouse 3. son/daughter 4. father/mother 5. brother/ sister 6. Grand Father/ Mother 7. grand child 8. Son Wife/ Daughter 9. Other relative 10. Others	Refugee Status 1.Registered 2.Not Registered 3.Not Refugee	Interviewer: Write down changes of residency Status 1. Work 2. Studying 3. Marriage 4. Accompanying 5. Emigration 6. Death 7. Newborn 8. Others 9. Nothing	When was the Person Registered For the first time in the HH by the Repetition						
1	2	3	4				Day	Month	Year	1					2	3	4			
				01		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4	
				02		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				03		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				04		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				05		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				06		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				07		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				08		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				09		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				10		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				11		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				12		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				13		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				14		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				15		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				16		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				17		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				18		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				19		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4
				20		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4

O Interviewer: Mark (x) in the circle if an extra questionnaire was completed for the household

Part 4: Population 10 years and above
ROUND:

District: _____		Locality: _____		Name of head of HH: _____		IDSAM: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Serial No: <input type="checkbox"/> <input type="checkbox"/>		Name: _____		Pr1: The Age: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
Pr2: School Attendance: <input type="checkbox"/> 1. yes 2. no	Pr3 Number of School Years: <input type="checkbox"/> <input type="checkbox"/>		Pr4 Educational Attainment(higher Qualification) <input type="checkbox"/> <input type="checkbox"/> 1. Illiterate 2. Can Read and Write 3. Elementary 4. Preparatory 5. Secondary 6. Associate Diploma 7. BA/ BSc 8. Higher Diploma 9. Master Degree 10. Ph.D				
Pr5: Marital Status: ask for Persons 12 years and above, Persons 10-11 years record for them (--) 1. Never Married 2. Engaged 3. Married 4. Divorced 5. Widowed							
PW01 Did..... work for wage in any kind of job including casual activities even for one hour?	1 yes 2 No-Disable/abroad 3 Detained 4 No	Skip to PW05 Skip to PW17 PW02					
PW02 Although.....did not work last week, did he/she assist in any work including casual activities ?	1 Yes 2 No	Skip to PW05					
PW03 Does have any work or enterprise for which he/she was absent last week?	1 Yes 2 No	Skip to PW11					
PW04 Why was..... absent from his/her job last week?	1 Ill 2 Vacation 3 Strike, closure, curfew 4 No permit 5 Temporary stoppage 6 Others	Skip to PW08					
PW05 Does..... have any other jobs?	1 Yes 2 No						
PW06 How many hours did work in all jobs last week?		IF the hours 35 or more Skip to PW08					
PW07 Why was the number of hours worked last week less than 35 hours?	1 Personal reasons (ill, vacation...) 2 No wish to work more 3 Nature of work 4 Strike 5 Closure 6 Could not find additional work 7 Others						
PW08 Did... want to change his/her job or to get additional work last week?	1 Yes 2 No	Skip to PW10					
PW09 Why did... want to change his/her job or to get additional work?	1 Insufficient income 2 Occupation is not suitable 3 Bad conditions 4 Place of work is far 5 Others	Skip to PW18					
PW10 Why did not want to change his/job or to get additional job?	1 Good work 2 Studying, training 3 Home duties 4 Old, ill 5 Others	Skip to PW18					
PW11 Was available for work last week?	1 Yes 2 No - Old, ill 3 No, student 4 No- home duties 5 No- Others	Skip to PW17					
PW12 Was there any reason that prevented from getting a job if he was offered on last week?	1 No 2 Yes, student 3 Yes- home duties 4 Yes-Old, ill 5 Yes- Others	Skip to PW17					

PW13	For How long is.... available and able to work?	<input type="text"/> <input type="text"/> <input type="text"/>	Months
PW14	Did... seek for a job last week?	1 Yes 2 No	Skip to PW16
PW15	What were the steps taken to get a job?	1 Asked friends 2 Declared/ Read newspaper 3 Application to employers 4 Labour exchange 5 Others 6 Did nothing	Skip to PW17
PW16	Why did not seek for a job last week?	1 Studying, training 2 Home duties 3 Old, ill 4 Found/established a job which starts later 5 Waiting results form previous job/applications 6 Waiting seasonal work 7 No permit/ possibility to find work 8 Job Finding, No use 9 Find a job doesn't match with qualifications 10 Not founding for a job as payment scale is low 11 Not interested in job Finding due to other income sources 12 Others	
PW17	Did....ever work in the past for at least two weeks regularly?	1 Yes- in the last12 months 2 Yes- 1-5 years ago 3 Yes- more than 5 years ago 4 No	Skip to PW18 End
PW18	Where did... work in the main currents/previous job?	1 At Home 2 In Same District in West 3 In other District in West 4 In same District in Gaza 5 In other District in Gaza	6 Israel 7 Settlements 8 Bounder Industrial 9 Abroad/ Arab Country 10 Abroad/ Foreign
X18a	For the interviewer: if the answer in PW18 was (6or7), ask If the employee has a permission or a document which Enable him to work in Israel or Settlements (use circle)	1 Worker has a work permission 2 Worker doesn't have a work permission 3 Worker has Israeli identity or foreign passport	
X18b	For interviewer: write down a complete description for the Work place where the worker does his main job	<input type="text"/> <input type="text"/> <input type="text"/>	
PW19	For whom did ... work in the main current/previous work?		For Office Use
PW20	What type of Industry (economic activity) does this company/ establishment work in?	<input type="text"/> <input type="text"/> <input type="text"/>	
PW21	What are the main duties and activities that... does At this work?		For Office Use
PW22	Wait is/was his/her main occupation at this work?	<input type="text"/> <input type="text"/> <input type="text"/>	
PW23	What is/was his/her employment status	1 Employer(employs others) 2 Self Employed 3 Unpaid family member 4 Employee/ National Government 5 Employee/ Foreign Government 6 Employee/ UNRWA 7 Employee/ International Organization 8 Employee/ Nonprofit Organization 9 Regular employee/ private sector 10 Irregular employee/ private sector 11 Others	
Only for those who answered PW23 4-10, and did not answer PW17			
PW24	How long is he/she at this work?	<input type="text"/> <input type="text"/> <input type="text"/>	Months
PW25	How many days did ..work for wage last month	<input type="text"/> <input type="text"/>	Days
PW26	Since he/she worked for wage what was the amount for it 1. Shiekeel 2. Jordanian Dinar 3. Dollar	Daily <input type="text"/> <input type="text"/> <input type="text"/>	Weekly <input type="text"/> <input type="text"/> <input type="text"/> Monthly <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Currency <input type="text"/>