

Bosnia and Herzegovina

AGENCY FOR STATISTICS
BOSNIA AND HERZEGOVINA

REPUBLIKA SRPSKA
REPUBLIC INSTITUTE OF STATISTICS

FEDERATION OF BOSNIA AND HERZEGOVINA
FEDERAL INSTITUTE OF STATISTICS

LABOUR FORCE SURVEY

LFS - 2014

Entity/District

Canton/Region

Municipality code

EA code

Sequence number of household

Total number of households in the dwelling unit

Household identifier 1 - household from the list; 2 - new household at the given address

Household telephone number (cell phone, fixed line)

Address:

(street and number)

(no. of apartment)

DATA ON INTERVIEW

Date of interview day month

Interview started at hours minutes

Interview completed at hours minutes

Number of visits to household

- Interviewer Name and Surname Interviewer's code

- Controller Name and Surname Controller's code

- Data entry person Name and Surname Data entry person's code

DATA CONFIDENTIALITY

Data compiled in the Questionnaire is confidential and will only be used for statistical purposes, fully in line with the provisions of the mentioned laws

BiH Law on Statistics, ("Official Gazette of Bosnia and Herzegovina", . 26/04 and 42/04);
Law on Statistics of the Federation of BiH (Official Gazette of Federation, 63/03
("Official Gazette of Federation", 63/03); Law on Statistics of the RS,
("Official Gazette of the Republika Srpska", 85/03)

LFS1a

To be filled for all household members

SEQUENCE NO. MEM. OF HOUSEHOLD	Insert a sequence number of father of the household member	Insert a sequence number of mother of the household member	NATIONALITY, WHICH COUNTRY?		WHICH COUNTRY WERE YOU BORN IN?		SINCE WHICH YEAR HAVE YOU BEEN LIVING IN BiH?	DID YOU LIVE IN THIS MUNICIPALITY 12 MONTHS BEFORE THE SURVEY? (April 2013)	WHERE DID YOU LIVE 12 MONTHS BEFORE THE SURVEY?	
	If he does not live in the household, please insert 99.	If she does not live in the household, please insert 99.	If BiH and some other country, please insert BiH. (Coding by statistical office)		If born in BiH >> 14 Other >> 13 (Coding by statistical office)		Please insert a year	Yes..... 1 >> 16 No..... .2	- If in BiH, please insert municipality - If outside BiH, please insert a state (Coding by statistical office)	
1	9	10	11		12		13	14	15	
01	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ _	_	_ _ _ _	_ _ _ _
02	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ _	_	_ _ _ _	_ _ _ _
03	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ _	_	_ _ _ _	_ _ _ _
04	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ _	_	_ _ _ _	_ _ _ _
05	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ _	_	_ _ _ _	_ _ _ _
06	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ _	_	_ _ _ _	_ _ _ _
07	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ _	_	_ _ _ _	_ _ _ _
08	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ _	_	_ _ _ _	_ _ _ _
09	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ _	_	_ _ _ _	_ _ _ _
10	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ _	_	_ _ _ _	_ _ _ _

LFS1a

To be completed for all household members

SEQUENCE NO. MEM. OF HOUSEHOLD	SCHOOL COMPLETED - EDUCATION LEVEL	WHAT IS THE FIELD OF YOUR EDUCATION/TRAINING?	WHICH YEAR DID YOU REACH THAT LEVEL OF EDUCATION?	WERE YOU ABSENT FROM THE HOUSEHOLD ALL 12 MONTHS OR MORE?	WHAT WERE THE REASONS OF YOUR ABSENCE?	FOR PERSON WHO: ANSWERS Q5 WITH CHOICE 1 and Q19 WITH CHOICE 2 OR Q5 WITH CHOICE 1 and Q20 WITH CHOICE 1,2 or 3 PLEASE INSERT <u>1</u>
	16	17	18	19	20	21
01	No education.....1>> 19 1-4/5 grades of Elementary School2>> 19 5/6-8/9 grades of Elementary School...3>> 19 Completed Elementary School 4>>18 Completed Secondary School 3 year..... 5 Completed Secondary School 4 year..... 6 Completed High School 7 Completed university education 8 M.A, Ph.D degree9	General education programme.....01 Teacher training and education science.....02 Art and humanities science..... 03 Social science, business and law.....04 Foreign languages05 Biology and environmental science.....06 Physical science (including physics, chemistry and earth science).....07 Mathematics and statistics.....08 Computer science.....09 Computer use.....10 Engineering, manufacturing and construction.....11 Agriculture and veterinary.....12 Health and welfare13 Services (personal, transport etc.).....14 Unknown.....15	Please, insert a year.	Yes.....1 No.....2>>21	Education.....1 Work/employment in BiH.....2 Employment with local employer outside BiH3 Employment with foreign employer outside BiH4 Illness/hospitalization.....5 Other.....6	
02						
03						
04						
05						
06						
07						
08						
09						
10						

LFS1b									
To be compiled for all household members who, in the first part of Questionnaire (LFS1a) in the Column 21, were coded 1									
Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member					
				1	2	3	4	5	
				Sequence number of household member providing answers					
					1	2	3	4	5
A. LABOUR ACTIVITY DURING THE REFERENCE WEEK									
1	HAVE YOU DONE ANY WORK FOR PAY OR PROFIT DURING THE REFERENCE WEEK OR YOU WERE UNPAID ASSISTING FAMILY MEMBER - FROM MONDAY TO SUNDAY - (AT LEAST, ONE HOUR)?								
	Yes	1	→	4					
	No	2	→	2					
2	ALTHOUGH YOU DID NOT WORK DURING THE REFERENCE WEEK , DO YOU HAVE A JOB OR BUSINESS TO RETURN TO?								
	Yes	1	→	3					
	No	2	→	42					
3	WHAT WERE THE REASON FOR NOT WORKING DURING THE REFERENCE WEEK ALTHOUGH YOU HAVE A JOB OR BUSINESS TO RETURN TO?								
	- Own illness, injury, etc.	1	4 3a 42						
	- Maternity leave	2							
	- Bad weather or seasonal reasons	3							
	- Slack work	4							
	- Labour dispute (strike, cease of work)	5							
	- School education or training	6							
	- Parental leave	7							
	- Holidays	8							
	- Paid leave (annual leave etc..)	9							
	- Other reasons	10							
3.a	FOR HOW LONG HAVE YOU BEEN ABSENT FROM WORK?								
	- Absent for up to and including 3 months	1	→	4					
	- Absent for more than 3 months	2	→	3.b					
3.b	IS YOUR ABSENCE RENUMERATED?								
	- Yes, less than 50% of my salary	1	→	42					
	- Yes, 50% and more of my salary	2	→	4					
	- No, I am not receiving my salary	3	→	42					

Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member				
				_ _	_ _	_ _	_ _	_ _

B. EMPLOYMENT CHARACTERISTICS OF THE MAIN JOB

4	Sequence no. of hh member	WHAT IS THE MAIN ACTIVITY OF THE UNIT YOU ARE EMPLOYED WITH? <i>(detailed description of products/services)</i>					
↓							
Coding by statistical office (NACE rev 2)							

5	WHAT IS THE TYPE OF OWNERSHIP OF THE UNIT YOU WORK FOR?						
	- State owned - Private owned - Cooperative - Mixed - Without property type... - Unknown	1 2 3 4 5 6	↓				

6	Sequence no. of hh member	WHAT IS YOUR OCCUPATION ON WITH MAIN JOB? <i>(detailed description your present job)</i>					
↓							
Coding by statistical office (CO 08)							

7	WHAT IS YOUR EMPLOYMENT STATUS?						
	- Owner/joint owner with employees - employer..... - Farmer with own farm and employees.. - Unpaid assisting family member employer - Owner/joint owner without employees - self-employed... - Farmer on own farm without employees..... - Employed by foreign company - Employed by employer	1 2 3 4 5 6 7	4 15 7a				

7.a	DOES YOUR JOB HAVE A SUPERVISORY ROLE (SUPERVISOR OR MANAGER)?						
	Yes..... No.....	1 2	↓				

8	DO YOU HAVE INDEFINITE OR DEFINITE WORK CONTRACT (PERMANENT OR TEMPORARY) ?						
	- Indefinite - Definite	1 2	11 9				

9	WHICH OF THE GIVEN REASONS DESCRIBE THE BEST YOUR DEFINITE WORK CONTRACT (TEMPORARY WORK)?						
	- Educational training/ trainee at job - Could not find a permanent job - Did not want a permanent job - Probationary work.....	1 2 3 4	↓				

Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member					
				_ _	_ _	_ _	_ _	_ _	
10	WHAT IS THE TOTAL DURATION OF YOUR TEMPORARY JOB (TEMPORARY WORK)?								
	(Insert a number of months, if less than one month, please insert 00.)		↓	_ _	_ _	_ _	_ _	_ _	
10.a	DO YOU HAVE A CONTRACT FOR TEMPORARY WORK WITH THE EMPLOYMENT AGENCY?								
	Yes.....	1	↓	_	_	_	_	_	
	No.....	2							
11	DO YOU EXERCISE YOUR PAYMENT RIGHTS AT JOB, SALARY, BENEFITS ETC.?								
	Yes	1	↔	12	_	_	_	_	_
	No	2	↔	14	_	_	_	_	_
12	WHEN DID YOU RECEIVE THE LAST SALARY OR BENEFIT AT PRESENT JOB?								
	Month.....		↓	_ _	_ _	_ _	_ _	_ _	
	Year.....			_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	
13	WHICH PERIOD YOUR LAST SALARY, PART OF IT OR BENEFIT WAS REFERRED TO?								
	Month.....		↓	_ _	_ _	_ _	_ _	_ _	
	Year.....			_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	
14	HOW MANY PERSONS ARE EMPLOYED IN THE UNIT YOU WORK FOR?								
	- Exact number, if ≤ 10.....	01-10	↓	_ _	_ _	_ _	_ _	_ _	
	- 11 to 19	11							
	- 20 to 49	12							
	- 50 to 99.....	13							
	- 100 to 249.....	14							
	- 250 and more.....	15							
	- Don't know, but less than 11	16							
	- Don't know, but more than 10	17							
15	DO YOU EXERCISE YOUR HEALTH INSURANCE RIGHTS AT YOUR JOB?								
	Yes	1	↓	_	_	_	_	_	
	No	2							
16	DO YOU EXERCISE YOUR PENSION RIGHTS AT YOUR JOB?								
	Yes	1	↓	_	_	_	_	_	
	No	2							
17	Sequence no. of hh member	WHAT IS A NAME OF MUNICIPALITY YOU WORK IN? (IF YOU WORK ABROAD, PLEASE INSERT A COUNTRY)							
	_ _	↓	_ _ _ _	_ _ _ _	_ _ _ _	_ _ _ _	_ _ _ _	_ _ _ _	
	_ _								
	_ _								
	_ _								
	_ _								

(1) Coding by statistical office

Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member				
				_ _	_ _	_ _	_ _	_ _
18	WHERE DO YOU USUALLY WORK? - At home - At farm, institution, shop or other organisation..... - At market - At agricultural holding - Street counter - In a car/vehicle - No specific location - Other	1 2 3 4 5 6 7 8	↓	_ _	_ _	_ _	_ _	_ _
19	WHEN DID YOU START TO WORK AT PRESENT JOB? Month..... Year.....		↓	_ _	_ _	_ _	_ _	_ _
19.a	HAVE YOU STARTED TO WORK AT THIS JOB YOU HAVE GOT THROUGH THE EMPLOYMENT AGENCY? Yes No.....	1 2	↓	_ _	_ _	_ _	_ _	_ _
20	DO YOU WORK FULL TIME OR LESS THAN FULL TIME? - Full time..... - Less than full time.....	1 2	→ 22 → 21	_ _	_ _	_ _	_ _	_ _
21	WHICH ARE THE REASONS FOR WORKING LESS THAN FULL TIME? - Looking after children or incapacitated adults - Education, training - Illness or disability - Can not find a full-time job - Personal or family reasons - Other reasons.....	1 2 3 4 5 6	→ 21a → 22	_ _	_ _	_ _	_ _	_ _
21a	THE REASON YOU LOOK AFTER CHILDREN OR INCAPACITATED ADULTS - The institutions of care for children are not available or affordable - The institutions of care for ill, disabled or elderly are not available or affordable - The institutions of care for children or ill, disabled or elderly are not available or affordable - The institutions of care do not affect the decision on working hours	1 2 3 4	↓	_ _	_ _	_ _	_ _	_ _
22	HOW MANY HOURS DO YOU USUALLY WORK PER WEEK? - Hours	01-99	↓	_ _	_ _	_ _	_ _	_ _
23	DID YOU WORK A NUMBER OF USUAL WORKING HOURS DURING THE REFERENCE WEEK? Yes No	1 2	→ 26 → 24	_ _	_ _	_ _	_ _	_ _
24	HOW MANY HOURS DID YOU WORK DURING THE REFERENCE WEEK? - Hours.....	00 01-99	→ 26 → 25	_ _	_ _	_ _	_ _	_ _
25	WHAT IS A MAIN REASON FOR HOURS ACTUALLY WORKED DURING THE REFERENCE WEEK BEING DIFFERENT FROM PERSON'S USUAL HOURS? a) If person worked more than usual number of hours - Flexible/varying working hours... - Paid overtime..... - Unpaid overtime..... - Other reasons b) If person worked less than usual working hours due to - Bad weather..... - Reduced work due to technical or economic reasons..... - Labour dispute (strike, work stoppage)..... - Education or training..... - Flexible/varying working hours..... - Own illness or injury..... - Maternity or parental leave..... - Special leave from personal or family reasons. - Paid leave (annual leave and other)..... - Holidays - Start or change of job - End of job without taking up a new one..... - Other reasons	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17	→ 25.a → 25.b → 26	_ _	_ _	_ _	_ _	_ _

Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member					
				_ _	_ _	_ _	_ _	_ _	
25.a	NUMBER OF HOURS OF PAID OVERTIME								
	Hours.....	00-99	→ 26	_ _	_ _	_ _	_ _	_ _	
25.b	NUMBER OF HOURS OF UNPAID OVERTIME								
	Hours.....	00-99	↓	_ _	_ _	_ _	_ _	_ _	
26	DO YOU WISH TO WORK MORE THAN USUAL NUMBER OF HOURS?								
	Yes.....	1	→ 27	_	_	_	_	_	
	No.....	2	→ 29	_	_	_	_	_	
27	WHAT IS THE WAY YOU CAN WORK MORE THAN USUAL NUMBER OF HOURS?								
	- Through an additional job.....	1	↓	_	_	_	_	_	
	- Through a job with more working hours.....	2							
	- Only within the present job.....	3							
	- Other	4							
28	HOW MANY HOURS WOULD YOU LIKE TO WORK IN TOTAL?								
	- Hours.....	01-99	↓	_ _	_ _	_ _	_ _	_ _	

Reference period for questions **29 - 34** is the last month of work (last four weeks).

29	DID YOU WORK IN SHIFTS DURING THE LAST FOUR WEEKS?								
	- Yes.....	1	↓	_	_	_	_	_	
	- No.....	2							
30	HOW OFTEN DID YOU WORK IN THE AFTERNOON DURING THE LAST FOUR WEEKS?								
	- Usual.....	1	↓	_	_	_	_	_	
	- Sometimes	2							
	- Never	3							
31	HOW OFTEN DID YOU WORK AT NIGHT DURING THE LAST FOUR WEEKS?								
	- Usual.....	1	↓	_	_	_	_	_	
	- Sometimes	2							
	- Never	3							
32	HOW OFTEN DID YOU WORK ON SATURDAYS DURING THE LAST FOUR WEEKS?								
	- Usual.....	1	↓	_	_	_	_	_	
	- Sometimes	2							
	- Never	3							
33	HOW OFTEN DID YOU WORK ON SUNDAYS DURING THE LAST FOUR WEEKS?								
	- Usual.....	1	↓	_	_	_	_	_	
	- Sometimes	2							
	- Never	3							
34	HOW OFTEN DID YOU WORK AT HOME DURING THE LAST FOUR WEEKS?								
	- Usual.....	1	↓	_	_	_	_	_	
	- Sometimes	2							
	- Never	3							

Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member				
				_ _	_ _	_ _	_ _	_ _
C. SECOND - ADDITIONAL JOB								
35	DID YOU HAVE DURING THE REFERENCE WEEK SOME OTHER JOB, IN ADDITION TO YOUR MAIN JOB, FOR WHICH YOU RECEIVED SALARY OR BENEFIT (EITHER IN MONEY OR IN KIND)?							
	Yes.....	1	→	36	_	_	_	_
	No	2	→	40	_	_	_	_
36	THE WAY YOU WORK IN THE SECOND JOB:							
	- Usual work.....	1	↓		_	_	_	_
	- Seasonal work	2			_	_	_	_
	- Temporary work	3			_	_	_	_
37	Sequence no. of hh member	WHAT IS THE MAIN ACTIVITY OF THE LOCAL UNIT YOU WORK FOR? (detailed description of products/services)						
	_ _							
	_ _							
	_ _							
	_ _							
	_ _							
	Coding by statistical office (NACE rev 2)			↓	_ _ _	_ _ _	_ _ _	_ _ _
38	WHAT IS YOUR PROFESSIONAL STATUS IN THE SECOND JOB?							
	- Owner/joint owner with employees - employer..	1	↓		_	_	_	_
	- Farmer on its own agric. holding with employees.....	2			_	_	_	_
	- Unpaid assisting family member.....	3			_	_	_	_
	- Owner/joint owner without employees/self-employed.....	4			_	_	_	_
	- Farmer on its own agric.holding without employees.....	5			_	_	_	_
	- Working for foreign organization }	6			_	_	_	_
	- Working for employer } employee	7			_	_	_	_
39	HOW MANY HOURS DID YOU WORK IN THE SECOND JOB DURING THE REFERENCE WEEK?							
	- Hours	00-99	↓	_ _	_ _	_ _	_ _	_ _
40	ARE YOU SEEKING EMPLOYMENT ALTHOUGH YOU ALREADY HAVE ONE?							
	Yes	1	→	41	_	_	_	_
	No	2	→	71	_	_	_	_
41	WHAT ARE MAIN REASONS FOR SEEKING ANOTHER EMPLOYMENT?							
	- Present employment is uncertain.....	1	} 51		_	_	_	_
	- Present employment is temporary/ending soon...	2			_	_	_	_
	- Wish to work more hours than presently worked...	3			_	_	_	_
	- Wish to work less hours than presently worked...	4			_	_	_	_
	- Wish to have additional employment.....	5			_	_	_	_
	- Wish to have better job (salary, etc.).....	6			_	_	_	_
	- Other reasons.....	7			_	_	_	_

Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member				
				_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
D. PREVIOUS WORK EXPERIENCE								
42	HAVE YOU EVER WORKED FOR SALARY OR BENEFIT (IN MONEY OR IN KIND)?							
	Yes	1	→ 43	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	No	2	→ 48	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
43	WHEN DID YOU LEAVE THE LAST PAID JOB?							
	Month.....		↓	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	Year.....		↓	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
44	WHAT WAS THE MAIN REASON FOR LEAVING THE LAST JOB?							
	- Dismissed/due to different reasons	01		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- A job of limited duration/seasonal or temporary duration	02		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Company ceased operations	03		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Taking care of children or incapacitated persons	04		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Other personal or family responsibilities.....	05	↓	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Education or training	06		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Own illness or disability	07		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Early retirement	08		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Regular or pension from retirement	09		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Other reasons	10		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
45	Sequence no. of hh member	WHAT WAS THE MAIN ACTIVITY OF THE LOCAL UNIT YOU WORKED FOR? (detailed description of products/services)						
	_ _ _							
	_ _ _							
	_ _ _							
	_ _ _							
	_ _ _							
	_ _ _							
	Coding by statistical office (NACE rev 2)		↓	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
46	Sequence no. of hh member	WHAT WAS YOUR PROFESSIONAL STATUS IN THE LAST JOB? (detailed description of your present job)						
	_ _ _							
	_ _ _							
	_ _ _							
	_ _ _							
	_ _ _							
	Coding by statistical office (CO 08)		↓	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
47	WHAT WAS YOUR OCCUPATION IN THE LAST JOB?							
	- Owner/joint owner with employees - employer..	1		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Farmer on its own agri.holding with employees...	2		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Unpaid assisting family member.....	3		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Owner/joint owner without employees - self-employed...	4	↓	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Farmer on its own agric.holding without employees.....	5		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Worked for foreign company	6		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
	- Worked for the employer } employee	7		_ _ _	_ _ _	_ _ _	_ _ _	_ _ _

Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member				
				_ _	_ _	_ _	_ _	_ _
E. SEARCH FOR EMPLOYMENT								
48	DID YOU SEARCH EMPLOYMENT DURING THE LAST FOR WEEKS?							
Yes.....		1	→ 51	_ _	_ _	_ _	_ _	_ _
No.....		2	→ 49	_ _	_ _	_ _	_ _	_ _
49	WHAT IS THE MAIN REASON FOR NOT SEARCHING EMPLOYMENT IN THE LAST FOUR WEEKS?							
<ul style="list-style-type: none"> - Have found a job which will start in no more than 3 months ... - Have found a job which will start in more than 3 months..... - looking after children or incapacitated adults, elderly persons, etc.. - awaiting recall to work - believe that no work is available..... - other personal or family reasons - education or training - retirement - own illness or disability - Other reasons 		01	68					
		02						
		03	49a					
		04						
		05	50					
		06						
		07						
		08						
		09						
		10						
49a	THE REASON YOU LOOK AFTER CHILDREN OR INCAPACITATED ADULTS							
<ul style="list-style-type: none"> - The institutions of care for children are not available or affordable - The institutions of care for ill, disabled or elderly are not available or affordable - The institutions of care for children or ill, disabled or elderly are not available or affordable - The institutions of care do not affect the decision on working hours 		1	↓					
		2						
		3						
		4						
50	WISH TO WORK ALTHOUGH NOT SEEKING EMPLOYMENT?							
- Wish to work		1	→ 69	_ _	_ _	_ _	_ _	_ _
- Do not wish to work		2	→ 71	_ _	_ _	_ _	_ _	_ _
51	WHICH TYPE OF JOB YOU HAVE BEEN SEEKING FOR?							
<ul style="list-style-type: none"> - Self-employed - Employed only in full-time job..... - Employed only in part-time job..... - Employed in full-time job, but accepting part-time job - Employed in part-time job, but accepting full-time job..... - Any other job 		1	↓					
		2						
		3						
		4						
		5						
		6						
52	HAVE YOU REJECTED ANY JOB OFFERED DURING THE LAST FOUR WEEKS?							
Yes.....		1	→ 53	_ _	_ _	_ _	_ _	_ _
No.....		2	→ 54	_ _	_ _	_ _	_ _	_ _
53	WHAT WAS A REASON FOR REJECTING A JOB OFFERED?							
<ul style="list-style-type: none"> - Place of work..... - Unacceptable working hours..... - No career advancement..... - Job offered did not correspond with qualification..... - Unacceptable salary..... - Other reasons..... 		1	↓					
		2						
		3						
		4						
		5						
		6						
54	HOW LONG HAVE YOU BEEN SEARCHING EMPLOYMENT? (Please specify a number of months)?							
- Months		↓	_ _	_ _	_ _	_ _	_ _	_ _

Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member				
				_ _	_ _	_ _	_ _	_ _
F. METHODS USED DURING THE LAST FOUR WEEKS TO FIND JOB								
55	HAVE YOU CONTACTED THE PUBLIC EMPLOYMENT OFFICE TO FIND JOB?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
56	HAVE YOU CONTACTED THE PRIVATE EMPLOYMENT AGENCY TO FIND JOB?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
57	HAVE YOU CONTACTED THE EMPLOYERS DIRECTLY?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
58	HAVE YOU ASKED FRIENDS, RELATIVES ABOUT THE JOB?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
59	HAVE YOU STUDIED ADVERTISEMENTS IN NEWSPAPERS OR JOURNALS, INTERNET ETC.?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
60	HAVE YOU INSERTED, ANSWERED ADVERTISEMENTS IN NEWSPAPERS OR JOURNALS, INTERNET ETC.?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
61	HAVE YOU TAKEN A TEST, INTERVIEW OR EXAMINATION TO GET JOB?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
62	HAVE YOU LOOKED FOR LAND, PREMISES, EQUIPMENT ETC. TO START OWN BUSINESS?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
63	HAVE YOU ASKED FOR LICENCE, FINANCIAL RESOURCES ETC. TO START OWN BUSINESS?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
64	ARE YOU WAITING FOR THE RESULTS OF AN APPLICATION FOR JOB?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
65	ARE YOU WAITING FOR THE RESULTS OF A COMPETITION FOR RECRUITMENT - PUBLIC SECTOR?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
66	ARE YOU WAITING FOR THE CALL FROM THE PUBLIC EMPLOYMENT OFFICE?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_
67	HAVE YOU USED ANY OTHER METHOD TO FIND JOB?							
	Yes.....	1	↓	_	_	_	_	_
	No.....	2		_	_	_	_	_

Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member				
				_ _	_ _	_ _	_ _	_ _
68	WHAT WAS YOUR STATUS BEFORE STARTING TO SEARCH FOR JOB?							
	- Was working	1	↓					
	- Was pupil, student, trainee.....	2		_	_	_	_	_
	- Was doing home activities/housewife	3						
	- Other (e.g. pensioner)	4						
69	IF A JOB IS OFFERED NOW, WILL YOU BE ABLE TO START WORKING <u>WITHIN TWO WEEKS</u> ?							
	Yes	1 → 71		_	_	_	_	_
	No	2 → 70						
70	WHY ARE YOU UNABLE TO START WORKING?							
	- Personal or family reasons.....	1	↓					
	- Health reasons	2						
	- Education or training	3		_	_	_	_	_
	- Responsibilities at present work	4						
	- Other reasons.....	5						
71	HAVE YOU BEEN REGISTERED WITH THE PUBLIC EMPLOYMENT OFFICE?							
	Yes	1 → 72		_	_	_	_	_
	No	2 → 74						
72	DO YOU RECEIVE BENEFITS FROM THE PUBLIC EMPLOYMENT OFFICE?							
	Yes	1	↓					
	No	2		_	_	_	_	_
73	DO YOU HAVE YOUR HEALTH INSURANCE COVERED BY THE PUBLIC EMPLOYMENT OFFICE?							
	Yes	1	↓					
	No	2		_	_	_	_	_
74	WHICH OF THE MENTIONED STATUS DESCRIBES THE BEST YOUR CURRENT POSITION?							
	- Employed.....	1	↓					
	- Unemployed.....	2						
	- Pupil, student, trainee	3						
	- Fulfilling domestic tasks (housewife).....	4		_	_	_	_	_
	- Pensioner	5						
	- Disable to work	6						
	- Other inactive person.....	7						

Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member				
				_ _	_ _	_ _	_ _	_ _
G. EDUCATION								
Questions from 75 to 81 refer to the last four weeks period								
75	DID YOU ATTEND ANY SCHOOL OR TRAINING DURING THE LAST FOUR WEEKS?							
	Yes.....	1	76					
	Schoolbreak.....	2		_	_	_	_	_
	No.....	3		78				
76	WHICH TYPE OF SCHOOL DID YOU ATTEND?							
	- Elementary school.....	1	78					
	- Secondary schools.....	2		77	_	_	_	_
	- Secondary vocational schools.....	3						
	- High schools.....	4						
	- University.....	5						
	- Postgraduate studies.....	6						
	- Ph.D degree.....	7						
77	WHAT WAS YOUR FIELD OF EDUCATION?							
	- General programme.....	01	↓	_ _	_ _	_ _	_ _	_ _
	- Teacher training and education science.....	02						
	- Art and humanitarian science.....	03						
	- Social sciences, business and law.....	04						
	- Foreign languages.....	05						
	- Biology and environmental science.....	06						
	- Physical science (including physics, chemistry and earth science).....	07						
	- Mathematics and statistics.....	08						
	- Computer science.....	09						
	- Computer use	10						
	- Engineering, manufacturing and construction	11						
	- Agriculture and veterinary.....	12						
	- Health and welfare.....	13						
	- Services (personal, transport etc.).....	14						
	- Unknown.....	15						
78	HAVE YOU ATTENDED ANY COURSE OR TRAINING DURING THE LAST FOUR WEEKS?							
	Yes.....	1	79					
	No.....	2		82				
79	WHAT WAS A PURPOSE OF ATTENDING THE MENTIONED COURSES OR TRAINING?							
	- Mainly job requirement -	1	↓	_	_	_	_	_
	- Mainly personal reasons	2						
80	WHAT IS A NUMBER OF HOURS SPENT ON LEARNING/TRAINING ACTIVITIES?							
	- Hours		↓	_ _	_ _	_ _	_ _	_ _
80.a	FIELD OF EDUCATION YOU TOOK A COURSE OR TRAINING IN ?							
	- General programme.....	01	↓	_ _	_ _	_ _	_ _	_ _
	- Teacher training and education science.....	02						
	- Art and humanitarian science.....	03						
	- Social sciences, business and law.....	04						
	- Foreign languages.....	05						
	- Biology and environmental science.....	06						
	- Physical science (including physics, chemistry and earth science).....	07						
	- Mathematics and statistics.....	08						
	- Computer science.....	09						
	- Computer use	10						
	- Engineering, manufacturing and construction	11						
	- Agriculture and veterinary.....	12						
	- Health and welfare.....	13						
	- Services (personal, transport etc.).....	14						
	- Unknown.....	15						
81	DID THESE LEARNING/TRAINING ACTIVITIES TAKE PLACE DURING PAID WORKING HOURS?							
	- Only during paid working hours.....	1	↓	_	_	_	_	_
	- Mainly during paid working hours.....	2						
	- Mainly after paid working hours.....	3						
	- Only after paid working hours.....	4						
	- Was not employed	5						

Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member				
				_ _	_ _	_ _	_ _	_ _
H. SITUATION ONE YEAR BEFORE SURVEY								
82	WHAT WAS YOUR ACTIVITY STATUS ONE YEAR BEFORE SURVEY? (to reference week)							
	- Employed	1	→ 83					
	- Unemployed	2	} 85					
	- Pupil, student, trainee	3						
	- Fulfilling domestic tasks ,housewife.....	4		_	_	_	_	_
	- Retired	5						
	- Disable to work	6						
	- Other inactive person.....	7						
83	Sequence no. of hh member	WHAT WAS A MAIN ACTIVITY OF THE LOCAL UNIT YOU WORKED FOR?						
	_ _							
	_ _							
	_ _							
	_ _							
	_ _							
	Coding by statistical office (NACE rev 2)	↓	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
84	WHAT WAS YOUR STATUS IN THE EMPLOYMENT?							
	- Owner/joint owner with employees - employer.....	1	↓					
	- Farmer on own agri.holding with employees.....	2						
	- Unpaid assisting family member.....	3						
	- Owner/joint owner without employees / self-employed...	4		_	_	_	_	_
	- Farmer on own agric.holding without employees.....	5						
	- Working for foreign company }	6						
	- Working for employer } employee	7						



Sequence no.	Questions – Answers:	Codes	Questions	Sequence number of household member				
				_ _	_ _	_ _	_ _	_ _
I. INCOME								
85	WHAT IS YOUR MAIN SOURCE OF INCOME? - Salary - Old-age pension/regular/early pension - Family pension - Disability pension - Income from agriculture activities - Income of property and other activities ... - Income of other household members - Income of other persons not HH members - Other benefits and contributions	1 2 3 4 5 6 7 8 9	→ 85.a 89 → 85.b → 86	_ _	_ _	_ _	_ _	_ _
85.a	CAN YOU TELL US THE NET AMOUNT OF YOUR MONTHLY SALARY AT YOUR MAIN JOB? <i>(Data refers to the last month)</i> Yes No	1 2	→ 85.b → 86	_ _	_ _	_ _	_ _	_ _
85.b	WHAT IS THE TOTAL NET AMOUNT OF YOUR MONTHLY SALARY AT YOUR MAIN JOB? <i>(Data refers to the last month)</i> Amount KM		→ 87	_ _	_ _	_ _	_ _	_ _
86	WHAT IS THE TOTAL MONTHLY SALARY RECEIVED FROM MAIN JOB? <i>(Data refers to the last month)</i> - Up to 200 KM..... - 201 - 300 KM..... - 301 - 400 KM..... - 401 - 500 KM..... - 501 - 700 KM..... - 701 - 900 KM..... - 901 - 1.500 KM..... - 1.501 - 2.500 KM..... - 2.501 KM and more	1 2 3 4 5 6 7 8 9	↓	_ _	_ _	_ _	_ _	_ _
87	WHAT ARE OTHER MONTHLY ALLOWANCES FROM YOUR MAIN JOB? <i>(meal allowances, transport etc.)</i> - No allowances - Less than 100 KM..... - 101 - 150 KM..... - 151 - 200 KM..... - 201 - 250 KM..... - 251 - 300 KM..... - 301 KM and more.....	1 2 3 4 5 6 7	↓	_ _	_ _	_ _	_ _	_ _
88	WHAT IS THE TOTAL ANNUAL AMOUNT OF ADDITIONAL BENEFITS FROM YOUR MAIN JOB? <i>(all related to regular monthly allowances)</i> - Nothing - Less than 100 KM - 101 - 200 KM - 201 - 300 KM - 301 - 500 KM - 501 - 700 KM - 701 - 1000 KM - 1001 KM and more	1 2 3 4 5 6 7 8	↓	_ _	_ _	_ _	_ _	_ _
- to be answered by head of household or other most familiar person -								
89	WHAT IS THE TOTAL NET ANNUAL INCOME OF YOUR HOUSEHOLD <i>(all household members)?</i> - No income..... - Up to 1000 KM - 1001 - 2000 KM - 2001 - 3000 KM - 3001 - 4000 KM..... - 4001 - 5000 KM..... - 5001 - 7000 KM..... - 7001 - 10000 KM - 10001 - 15000 KM - 15001 - 20000 KM - 20001 - 30000 KM - 30001 and more.....	01 02 03 04 05 06 07 08 09 10 11 12	↓	_ _ _				

REMARKS

[illegible]