

**THE 2015 LAFOR FORCE SURVEY**

**QUESTIONNAIRE ON LABOR AND EMPLOYMENT INFORMATION**  
*(The information collected from the Labor Force Survey in accordance with Decree N° 1287/QD-TCTK issued on 10 November, 2014 by General Director of the General Statistic Office - GSO will be used and kept confidentially as regulated by Statistical Law)*

SAMPLE DIGITS USED TO FILL IN LARGE BOX <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;">0</td> <td style="width: 20px; height: 20px;">1</td> <td style="width: 20px; height: 20px;">2</td> <td style="width: 20px; height: 20px;">3</td> <td style="width: 20px; height: 20px;">4</td> <td style="width: 20px; height: 20px;">5</td> <td style="width: 20px; height: 20px;">6</td> <td style="width: 20px; height: 20px;">7</td> <td style="width: 20px; height: 20px;">8</td> <td style="width: 20px; height: 20px;">9</td> </tr> </table>	0	1	2	3	4	5	6	7	8	9						
0	1	2	3	4	5	6	7	8	9							
CROSS "X" INTO SMALL BOX TO INDICATE THE CORESSPONDING ANSWER <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 15px; height: 15px;">X</td> </tr> </table>	X	1. NUMBER OF ACCTUALLY USUAL RESIDENTS OF HOUSEHOLD:..... <table border="1" style="display: inline-table; border-collapse: collapse; width: 30px; height: 20px;"></table>														
X																
PROVINCE/CITY: _____ <table border="1" style="display: inline-table; border-collapse: collapse; width: 30px; height: 20px;"></table>	OF WHICH, FEMALES: ..... <table border="1" style="display: inline-table; border-collapse: collapse; width: 30px; height: 20px;"></table>															
DISTRICT/QUARTER/TOWN/PROVINCIAL GOVERNED CITY: _____ <table border="1" style="display: inline-table; border-collapse: collapse; width: 30px; height: 20px;"></table>	2. NUMBER OF RESPONDENTS AGED 15 <sup>+</sup> : ..... <table border="1" style="display: inline-table; border-collapse: collapse; width: 30px; height: 20px;"></table>															
COMMUNE/WARD/DISTRICT TOWN: _____	OF WHICH, FEMALE RESPONDENTS AGED 15 <sup>+</sup> : ..... <table border="1" style="display: inline-table; border-collapse: collapse; width: 30px; height: 20px;"></table>															
ENUMERATION AREA NUMBER..... <table border="1" style="display: inline-table; border-collapse: collapse; width: 30px; height: 20px;"></table>	<b>SIGNATURE AND VERIFICATION</b>															
ENUMERATION AREA'S NAME: _____	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 30%; text-align: center;">FULL NAME</th> <th style="width: 30%; text-align: center;">SIGNATURE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">INFORMATION PROVIDER</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">INTERVIEWER</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">TEAM LEADER</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="height: 50px;"></td> <td></td> <td></td> </tr> </tbody> </table>		FULL NAME	SIGNATURE	INFORMATION PROVIDER	_____	_____	INTERVIEWER	_____	_____	TEAM LEADER	_____	_____			
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INFORMATION PROVIDER	_____	_____														
INTERVIEWER	_____	_____														
TEAM LEADER	_____	_____														
HOUSEHOLD NUMBER:..... <table border="1" style="display: inline-table; border-collapse: collapse; width: 30px; height: 20px;"></table>																
FULL NAME OF HOUSEHOLD HEAD: _____																
ADDRESS OF HOUSEHOLD: _____																
PERMANENT TELEPHONE/MOBILE NUMBER: _____																
THIS IS THE <table border="1" style="display: inline-table; border-collapse: collapse; width: 20px; height: 20px;"></table> SET OF <table border="1" style="display: inline-table; border-collapse: collapse; width: 20px; height: 20px;"></table> TOTAL SETS																

## PART 1: INFORMATION ON USUAL RESIDENTS OF HOUSEHOLD

7

SERIAL NUMBER QUESTION	SERIAL N°..... <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	SERIAL N°..... <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	SERIAL N°..... <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	SERIAL N°..... <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	SERIAL N°..... <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	SERIAL N°..... <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	
1. Pls, let me know the full name of each person usually residing in the household, starting with the household head?  (USE THE INTERVIEW PROCEDURE TO DEFINE ACTUALLY USUAL RESIDENT)	<hr/> <hr/> <hr/>						
2. What is [NAME]'s relationship to the household head?  L	HH. HEAD ..... 1 <input type="checkbox"/> SPOUSE ..... 2 <input type="checkbox"/> NATURAL CHILD .... 3 <input type="checkbox"/> PARENTS ..... 4 <input type="checkbox"/> OTHER RELATIVES..... 5 <input type="checkbox"/> NON RELATIVES..... 6 <input type="checkbox"/>	HH. HEAD ..... 1 <input type="checkbox"/> SPOUSE ..... 2 <input type="checkbox"/> NATURAL CHILD .... 3 <input type="checkbox"/> PARENTS ..... 4 <input type="checkbox"/> OTHER RELATIVES..... 5 <input type="checkbox"/> NON RELATIVES..... 6 <input type="checkbox"/>	HH. HEAD ..... 1 <input type="checkbox"/> SPOUSE ..... 2 <input type="checkbox"/> NATURAL CHILD .... 3 <input type="checkbox"/> PARENTS ..... 4 <input type="checkbox"/> OTHER RELATIVES..... 5 <input type="checkbox"/> NON RELATIVES..... 6 <input type="checkbox"/>	HH. HEAD ..... 1 <input type="checkbox"/> SPOUSE ..... 2 <input type="checkbox"/> NATURAL CHILD .... 3 <input type="checkbox"/> PARENTS ..... 4 <input type="checkbox"/> OTHER RELATIVES..... 5 <input type="checkbox"/> NON RELATIVES..... 6 <input type="checkbox"/>	HH. HEAD ..... 1 <input type="checkbox"/> SPOUSE ..... 2 <input type="checkbox"/> NATURAL CHILD .... 3 <input type="checkbox"/> PARENTS ..... 4 <input type="checkbox"/> OTHER RELATIVES..... 5 <input type="checkbox"/> NON RELATIVES..... 6 <input type="checkbox"/>	HH. HEAD ..... 1 <input type="checkbox"/> SPOUSE ..... 2 <input type="checkbox"/> NATURAL CHILD .... 3 <input type="checkbox"/> PARENTS ..... 4 <input type="checkbox"/> OTHER RELATIVES..... 5 <input type="checkbox"/> NON RELATIVES..... 6 <input type="checkbox"/>	HH. HEAD ..... 1 <input type="checkbox"/> SPOUSE ..... 2 <input type="checkbox"/> NATURAL CHILD .... 3 <input type="checkbox"/> PARENTS ..... 4 <input type="checkbox"/> OTHER RELATIVES..... 5 <input type="checkbox"/> NON RELATIVES..... 6 <input type="checkbox"/>
3. Is [NAME] male or female?	MALE...1 <input type="checkbox"/> FEMALE..2 <input type="checkbox"/>						
4. In what solar month and year was [NAME] born?  Q6 ←	MONTH <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> YEAR <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> NOT STATED ..... 9998 <input type="checkbox"/>	MONTH <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> YEAR <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> NOT STATED ..... 9998 <input type="checkbox"/>	MONTH <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> YEAR <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> NOT STATED ..... 9998 <input type="checkbox"/>	MONTH <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> YEAR <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> NOT STATED ..... 9998 <input type="checkbox"/>	MONTH <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> YEAR <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> NOT STATED ..... 9998 <input type="checkbox"/>	MONTH <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> YEAR <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> NOT STATED ..... 9998 <input type="checkbox"/>	
5. At present, what is [NAME]'s age as of last birthday? <small>WRITE '95' IF AGE IS 95 AND ABOVE</small>	COMPLETED AGE.. <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	COMPLETED AGE.. <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	COMPLETED AGE.. <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	COMPLETED AGE.. <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	COMPLETED AGE.. <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	COMPLETED AGE.. <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	
6. RESPONDENT FOR PART 2 AND PART 3 (AGED ≥ 15 AND CURRENTLY RESIDING IN VIETNAM)	NON-RESPONDENT .. 1 <input type="checkbox"/> AS RESPONDENT ..... 2 <input type="checkbox"/>	NON-RESPONDENT 1 <input type="checkbox"/> RESPONDENT ..... 2 <input type="checkbox"/>	NON-RESPONDENT 1 <input type="checkbox"/> RESPONDENT ..... 2 <input type="checkbox"/>	NON-RESPONDENT 1 <input type="checkbox"/> RESPONDENT ..... 2 <input type="checkbox"/>	NON-RESPONDENT 1 <input type="checkbox"/> RESPONDENT ..... 2 <input type="checkbox"/>	NON-RESPONDENT 1 <input type="checkbox"/> RESPONDENT ..... 2 <input type="checkbox"/>	

HOUSEHOLD N°...

**PART 2: SOME BASIC CHARACTERISTICS OF RESPONDENT**  
 (Only asking those persons aged 15+ and currently residing in Vietnam – If Q.6 = 2)

NAME AND SERIAL NUMBER QUESTION	<input type="text"/> <input type="text"/>			
7. What is your current marital status?	NEVER MARRIED ..... 1 <input type="checkbox"/> MARRIED ..... 2 <input type="checkbox"/> WIDOWED ..... 3 <input type="checkbox"/> DIVORCED ..... 4 <input type="checkbox"/> SEPARATED ..... 5 <input type="checkbox"/>	NEVER MARRIED ..... 1 <input type="checkbox"/> MARRIED ..... 2 <input type="checkbox"/> WIDOWED ..... 3 <input type="checkbox"/> DIVORCED ..... 4 <input type="checkbox"/> SEPARATED ..... 5 <input type="checkbox"/>	NEVER MARRIED ..... 1 <input type="checkbox"/> MARRIED ..... 2 <input type="checkbox"/> WIDOWED ..... 3 <input type="checkbox"/> DIVORCED ..... 4 <input type="checkbox"/> SEPARATED ..... 5 <input type="checkbox"/>	NEVER MARRIED ..... 1 <input type="checkbox"/> MARRIED ..... 2 <input type="checkbox"/> WIDOWED ..... 3 <input type="checkbox"/> DIVORCED ..... 4 <input type="checkbox"/> SEPARATED ..... 5 <input type="checkbox"/>
8. For how long have you been usually residing in the current ward, town or commune?	UNDER 1 MONTH ..... 1 <input type="checkbox"/> 1 TO UNDER 6 MONTHS ..... 2 <input type="checkbox"/> 6 TO UNDER 12 MONTHS ..... 3 <input type="checkbox"/> 12 MONTHS TO UNDER 5 YEARS. 4 <input type="checkbox"/> 5 YEARS AND MORE ..... 5 <input type="checkbox"/> Q12 ← <input type="checkbox"/>	UNDER 1 MONTH ..... 1 <input type="checkbox"/> 1 TO UNDER 6 MONTHS ..... 2 <input type="checkbox"/> 6 TO UNDER 12 MONTHS ..... 3 <input type="checkbox"/> 12 MONTHS TO UNDER 5 YEARS. 4 <input type="checkbox"/> 5 YEARS AND MORE ..... 5 <input type="checkbox"/> Q12 ← <input type="checkbox"/>	UNDER 1 MONTH ..... 1 <input type="checkbox"/> 1 TO UNDER 6 MONTHS ..... 2 <input type="checkbox"/> 6 TO UNDER 12 MONTHS ..... 3 <input type="checkbox"/> 12 MONTHS TO UNDER 5 YEARS. 4 <input type="checkbox"/> 5 YEARS AND MORE ..... 5 <input type="checkbox"/> Q12 ← <input type="checkbox"/>	UNDER 1 MONTH ..... 1 <input type="checkbox"/> 1 TO UNDER 6 MONTHS ..... 2 <input type="checkbox"/> 6 TO UNDER 12 MONTHS ..... 3 <input type="checkbox"/> 12 MONTHS TO UNDER 5 YEARS. 4 <input type="checkbox"/> 5 YEARS AND MORE ..... 5 <input type="checkbox"/> Q12 ← <input type="checkbox"/>
9. Is your previous place of usual residence a ward, town or commune?	WARD/TOWN ..... 1 <input type="checkbox"/> COMMUNE ..... 2 <input type="checkbox"/>	WARD/TOWN ..... 1 <input type="checkbox"/> COMMUNE ..... 2 <input type="checkbox"/>	WARD/TOWN ..... 1 <input type="checkbox"/> COMMUNE ..... 2 <input type="checkbox"/>	WARD/TOWN ..... 1 <input type="checkbox"/> COMMUNE ..... 2 <input type="checkbox"/>
10. From which province/city did you move?	<input type="text"/> <input type="text"/> (PROVINCE/CITY)			

NAME AND SERIAL NUMBER QUESTION				
11. What was the main reason that you moved to this household?  L	TO FIND JOB..... 1 <input type="checkbox"/> TO START NEW JOB ..... 2 <input type="checkbox"/> JOB LOST/UNABLE TO FIND JOB 3 <input type="checkbox"/> TO ACCOMPANY WITH FAMILY/RETIRED ..... 4 <input type="checkbox"/> TO GET MARRIED ..... 5 <input type="checkbox"/> TO RESETTLE..... 6 <input type="checkbox"/> TO IMPROVE LIVING CONDITIONS . 7 <input type="checkbox"/> FOR SCHOOLINGS..... 8 <input type="checkbox"/> OTHERS _____ 9 <input type="checkbox"/> (SPECIFIC)	TO FIND JOB..... 1 <input type="checkbox"/> TO START NEW JOB ..... 2 <input type="checkbox"/> JOB LOST/UNABLE TO FIND JOB 3 <input type="checkbox"/> TO ACCOMPANY WITH FAMILY/RETIRED ..... 4 <input type="checkbox"/> TO GET MARRIED ..... 5 <input type="checkbox"/> TO RESETTLE..... 6 <input type="checkbox"/> TO IMPROVE LIVING CONDITIONS . 7 <input type="checkbox"/> FOR SCHOOLINGS..... 8 <input type="checkbox"/> OTHERS _____ 9 <input type="checkbox"/> (SPECIFIC)	TO FIND JOB ..... 1 <input type="checkbox"/> TO START NEW JOB ..... 2 <input type="checkbox"/> JOB LOST/UNABLE TO FIND JOB 3 <input type="checkbox"/> TO ACCOMPANY WITH FAMILY/RETIRED ..... 4 <input type="checkbox"/> TO GET MARRIED ..... 5 <input type="checkbox"/> TO RESETTLE ..... 6 <input type="checkbox"/> TO IMPROVE LIVING CONDITIONS .. 7 <input type="checkbox"/> FOR SCHOOLINGS ..... 8 <input type="checkbox"/> OTHERS _____ 9 <input type="checkbox"/> (SPECIFIC)	TO FIND JOB ..... 1 <input type="checkbox"/> TO START NEW JOB ..... 2 <input type="checkbox"/> JOB LOST/UNABLE TO FIND JOB 3 <input type="checkbox"/> TO ACCOMPANY WITH FAMILY/RETIRED ..... 4 <input type="checkbox"/> TO GET MARRIED ..... 5 <input type="checkbox"/> TO RESETTLE ..... 6 <input type="checkbox"/> TO IMPROVE LIVING CONDITIONS . 7 <input type="checkbox"/> FOR SCHOOLINGS ..... 8 <input type="checkbox"/> OTHERS _____ 9 <input type="checkbox"/> (SPECIFIC)
12. What is the highest educational level that you have attained?  <b>ABBREVIATION:</b> PRI – PRIMARY PROF – PROFESSIONAL	NEVER ATTENDED SCHOOL ..... 1 <input type="checkbox"/> NOT COMPLETED PR. SCHOOL ... 2 <input type="checkbox"/> PRIMARY SCHOOL ..... 3 <input type="checkbox"/> LOWER SECONDARY SCHOOL ... 4 <input type="checkbox"/> UPPER SECONDARY SCHOOL ..... 5 <input type="checkbox"/> MID-TERM PROF. SCHOOL ..... 6 <input type="checkbox"/> PROFESSIONAL COLLEGE ..... 7 <input type="checkbox"/> UNIVERSITY ..... 8 <input type="checkbox"/> ABOVE UNIVERSITY ..... 9 <input type="checkbox"/>	NEVER ATTENDED SCHOOL ..... 1 <input type="checkbox"/> NOT COMPLETED PR. SCHOOL .. 2 <input type="checkbox"/> PRIMARY SCHOOL ..... 3 <input type="checkbox"/> LOWER SECONDARY SCHOOL ... 4 <input type="checkbox"/> UPPER SECONDARY SCHOOL .... 5 <input type="checkbox"/> MID-TERM PROF. SCHOOL ..... 6 <input type="checkbox"/> PROFESSIONAL COLLEGE ..... 7 <input type="checkbox"/> UNIVERSITY ..... 8 <input type="checkbox"/> ABOVE UNIVERSITY ..... 9 <input type="checkbox"/>	NEVER ATTENDED SCHOOL ..... 1 <input type="checkbox"/> NOT COMPLETED PR. SCHOOL .. 2 <input type="checkbox"/> PRIMARY SCHOOL ..... 3 <input type="checkbox"/> LOWER SECONDARY SCHOOL ... 4 <input type="checkbox"/> UPPER SECONDARY SCHOOL .... 5 <input type="checkbox"/> MID-TERM PROF. SCHOOL ..... 6 <input type="checkbox"/> PROFESSIONAL COLLEGE ..... 7 <input type="checkbox"/> UNIVERSITY ..... 8 <input type="checkbox"/> ABOVE UNIVERSITY ..... 9 <input type="checkbox"/>	NEVER ATTENDED SCHOOL ..... 1 <input type="checkbox"/> NOT COMPLETED PR. SCHOOL ... 2 <input type="checkbox"/> PRIMARY SCHOOL ..... 3 <input type="checkbox"/> LOWER SECONDARY SCHOOL .... 4 <input type="checkbox"/> UPPER SECONDARY SCHOOL ..... 5 <input type="checkbox"/> MID-TERM PROF. SCHOOL ..... 6 <input type="checkbox"/> PROFESSIONAL COLLEGE ..... 7 <input type="checkbox"/> UNIVERSITY ..... 8 <input type="checkbox"/> ABOVE UNIVERSITY ..... 9 <input type="checkbox"/>
13. What is the highest vocational skill/ certificate/ diploma that you have attained?  <b>ABBREVIATION:</b> CERT. - CERTIFICATE TECH. - TECHNICAL DIPL. - DIPLOMA	NO TECH. QUALIFICATION OR NO VOCATIONAL SKILL ..... 1 <input type="checkbox"/> TECH. WORKER WITHOUT DIPL./CERT. .... 2 <input type="checkbox"/> UNDER 3 MONTH VOCATIONAL SKILL ..... 3 <input type="checkbox"/> UNDER 3 MONTH VOCATIONAL CERT. .... 4 <input type="checkbox"/> PRIMARY VOCATIONAL CERT. ... 5 <input type="checkbox"/> MID-TERM VOCATIONAL CERT. .. 6 <input type="checkbox"/> VOCATIONAL COLLEGE DIPL. .... 7 <input type="checkbox"/>	NO TECH. QUALIFICATION OR NO VOCATIONAL SKILL ..... 1 <input type="checkbox"/> TECH. WORKER WITHOUT DIPL./CERT. .... 2 <input type="checkbox"/> UNDER 3 MONTH VOCATIONAL SKILL ..... 3 <input type="checkbox"/> UNDER 3 MONTH VOCATIONAL CERT. .... 4 <input type="checkbox"/> PRIMARY VOCATIONAL CERT. ... 5 <input type="checkbox"/> MID-TERM VOCATIONAL CERT. .. 6 <input type="checkbox"/> VOCATIONAL COLLEGE DIPL. .... 7 <input type="checkbox"/>	NO TECH. QUALIFICATION OR NO VOCATIONAL SKILL ..... 1 <input type="checkbox"/> TECH. WORKER WITHOUT DIPL./CERT. .... 2 <input type="checkbox"/> UNDER 3 MONTH VOCATIONAL SKILL ..... 3 <input type="checkbox"/> UNDER 3 MONTH VOCATIONAL CERT. .... 4 <input type="checkbox"/> PRIMARY VOCATIONAL CERT. ... 5 <input type="checkbox"/> MID-TERM VOCATIONAL CERT. .. 6 <input type="checkbox"/> VOCATIONAL COLLEGE DIPL. ... 7 <input type="checkbox"/>	NO TECH. QUALIFICATION OR NO VOCATIONAL SKILL ..... 1 <input type="checkbox"/> TECH. WORKER WITHOUT DIPL./CERT. .... 2 <input type="checkbox"/> UNDER 3 MONTH VOCATIONAL SKILL ..... 3 <input type="checkbox"/> UNDER 3 MONTH VOCATIONAL CERT. .... 4 <input type="checkbox"/> PRIMARY VOCATIONAL CERT. ... 5 <input type="checkbox"/> MID-TERM VOCATIONAL CERT. .. 6 <input type="checkbox"/> VOCATIONAL COLLEGE DIPL. .... 7 <input type="checkbox"/>

**PART 3: QUESTIONS FOR CLASIFYING THE ECONOMICALLY ACTIVE STATUS**

NAME AND SERIAL NUMBER QUESTION	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
14. In the last 7 days, did you do any work for at least 1 hour to get salary/wage? YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>
15. In the last 7 days, did you engage into or do any productive or business activities for at least 1 hour to generate income? YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>
16. In the last 7 days, did you do any unpaid work for at least 1 hour to generate your family income? YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>	YES.....1 <input type="checkbox"/> → ITEM A NO.....2 <input type="checkbox"/>
17. What was the reason that you did not work in the last 7 days? TEMPORARILY ABSENT ..... 1 <input type="checkbox"/> PUPIL/STUDENT/APPRENTICE 2 <input type="checkbox"/> DISABLED ..... 3 <input type="checkbox"/> TOO YOUNG/TOO OLD ..... 4 <input type="checkbox"/> TAKING DOMESTIC WORKS..... 5 <input type="checkbox"/> WAITING FOR JOB APPLICATION/ NO JOB YET/DISMISSED ..... 6 <input type="checkbox"/> OTHERS ..... 7 <input type="checkbox"/> ITEM B ←	TEMPORARILY ABSENT ..... 1 <input type="checkbox"/> PUPIL/STUDENT/APPRENTICE 2 <input type="checkbox"/> DISABLED ..... 3 <input type="checkbox"/> TOO YOUNG/TOO OLD ..... 4 <input type="checkbox"/> TAKING DOMESTIC WORKS..... 5 <input type="checkbox"/> WAITING FOR JOB APPLICATION/ NO JOB YET/DISMISSED ..... 6 <input type="checkbox"/> OTHERS ..... 7 <input type="checkbox"/> ITEM B ←	TEMPORARILY ABSENT ..... 1 <input type="checkbox"/> PUPIL/STUDENT/APPRENTICE 2 <input type="checkbox"/> DISABLED ..... 3 <input type="checkbox"/> TOO YOUNG/TOO OLD ..... 4 <input type="checkbox"/> TAKING DOMESTIC WORKS..... 5 <input type="checkbox"/> WAITING FOR JOB APPLICATION/ NO JOB YET/DISMISSED ..... 6 <input type="checkbox"/> OTHERS ..... 7 <input type="checkbox"/> ITEM B ←	TEMPORARILY ABSENT ..... 1 <input type="checkbox"/> PUPIL/STUDENT/APPRENTICE 2 <input type="checkbox"/> DISABLED ..... 3 <input type="checkbox"/> TOO YOUNG/TOO OLD ..... 4 <input type="checkbox"/> TAKING DOMESTIC WORKS..... 5 <input type="checkbox"/> WAITING FOR JOB APPLICATION/ NO JOB YET/DISMISSED ..... 6 <input type="checkbox"/> OTHERS ..... 7 <input type="checkbox"/> ITEM B ←	TEMPORARILY ABSENT ..... 1 <input type="checkbox"/> PUPIL/STUDENT/APPRENTICE.2 <input type="checkbox"/> DISABLED.....3 <input type="checkbox"/> TOO YOUNG/TOO OLD.....4 <input type="checkbox"/> TAKING DOMESTIC WORKS .....5 <input type="checkbox"/> WAITING FOR JOB APPLICATION/ NO JOB YET/DISMISSED .....6 <input type="checkbox"/> OTHERS ..... 7 <input type="checkbox"/> ITEM B ←

NAME AND SERIAL NUMBER QUESTION				
<p>18. You are on the temporary absence from work, so what was your main reason of absence?</p> <p><b>ABBREVIATION:</b> PROD. - PRODUCTION</p>	<p>WORK BY SHIFT.....01 <input type="checkbox"/></p> <p>HOLIDAYS/LEAVES/VACATION...02 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY 03 <input type="checkbox"/></p> <p>MATERNAL LEAVES.....04 <input type="checkbox"/></p> <p>SCHOOLING/TRAINING.....05 <input type="checkbox"/></p> <p>PERSONAL MATTERS.....06 <input type="checkbox"/></p> <p>LAID OFF.....07 <input type="checkbox"/></p> <p>PROD. TEMPORARILY STOPPED ...08 <input type="checkbox"/></p> <p>BAD WEATHER.....09 <input type="checkbox"/></p> <p>OFF SEASON.....10 <input type="checkbox"/></p> <p>TO START/ UPGRADE ESTABLISHMENT ...11 <input type="checkbox"/></p> <p>OTHERS.....12 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>WORK BY SHIFT.....01 <input type="checkbox"/></p> <p>HOLIDAYS/LEAVES/VACATION...02 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY 03 <input type="checkbox"/></p> <p>MATERNAL LEAVES.....04 <input type="checkbox"/></p> <p>SCHOOLING/TRAINING.....05 <input type="checkbox"/></p> <p>PERSONAL MATTERS.....06 <input type="checkbox"/></p> <p>LAID OFF.....07 <input type="checkbox"/></p> <p>PROD. TEMPORARILY STOPPED ...08 <input type="checkbox"/></p> <p>BAD WEATHER.....09 <input type="checkbox"/></p> <p>OFF SEASON.....10 <input type="checkbox"/></p> <p>TO START/ UPGRADE ESTABLISHMENT ...11 <input type="checkbox"/></p> <p>OTHERS.....12 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>WORK BY SHIFT.....01 <input type="checkbox"/></p> <p>HOLIDAYS/LEAVES/VACATION...02 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY 03 <input type="checkbox"/></p> <p>MATERNAL LEAVES.....04 <input type="checkbox"/></p> <p>SCHOOLING/TRAINING.....05 <input type="checkbox"/></p> <p>PERSONAL MATTERS.....06 <input type="checkbox"/></p> <p>LAID OFF.....07 <input type="checkbox"/></p> <p>PROD. TEMPORARILY STOPPED ...08 <input type="checkbox"/></p> <p>BAD WEATHER.....09 <input type="checkbox"/></p> <p>OFF SEASON.....10 <input type="checkbox"/></p> <p>TO START/ UPGRADE ESTABLISHMENT ...11 <input type="checkbox"/></p> <p>OTHERS.....12 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>WORK BY SHIFT.....01 <input type="checkbox"/></p> <p>HOLIDAYS/LEAVES/VACATION...02 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY.03 <input type="checkbox"/></p> <p>MATERNAL LEAVES.....04 <input type="checkbox"/></p> <p>SCHOOLING/TRAINING.....05 <input type="checkbox"/></p> <p>PERSONAL MATTERS.....06 <input type="checkbox"/></p> <p>LAID OFF.....07 <input type="checkbox"/></p> <p>PROD. TEMPORARILY STOPPED ...08 <input type="checkbox"/></p> <p>BAD WEATHER.....09 <input type="checkbox"/></p> <p>OFF SEASON.....10 <input type="checkbox"/></p> <p>TO START/ UPGRADE ESTABLISHMENT ...11 <input type="checkbox"/></p> <p>OTHERS.....12 <input type="checkbox"/></p> <p>(SPECIFY)</p>
<p>19. During the temporary absence, did you receive salary/wage or get profit from any productive or business activities?</p>	<p>YES.....1 <input type="checkbox"/> → ITEM A</p> <p>NO .....2 <input type="checkbox"/></p>	<p>YES.....1 <input type="checkbox"/> → ITEM A</p> <p>NO .....2 <input type="checkbox"/></p>	<p>YES.....1 <input type="checkbox"/> → ITEM A</p> <p>NO .....2 <input type="checkbox"/></p>	<p>YES.....1 <input type="checkbox"/> → ITEM A</p> <p>NO .....2 <input type="checkbox"/></p>
<p>20. After the temporary absence, are you going to be recalled for that work?</p>	<p>YES.....1 <input type="checkbox"/></p> <p>NO .....2 <input type="checkbox"/> → ITEM B</p>	<p>YES.....1 <input type="checkbox"/></p> <p>NO .....2 <input type="checkbox"/> → ITEM B</p>	<p>YES.....1 <input type="checkbox"/></p> <p>NO .....2 <input type="checkbox"/> → ITEM B</p>	<p>YES.....1 <input type="checkbox"/></p> <p>NO .....2 <input type="checkbox"/> → ITEM B</p>
<p>21. Hence, how long will you return work?</p>	<p>UNDER 1 MONTH.....1 <input type="checkbox"/></p> <p>ITEM A ←</p> <p>1 TO UNDER 3 MONTHS.....2 <input type="checkbox"/></p> <p>3 MONTHS AND MORE .....3 <input type="checkbox"/></p> <p>NOT STATED.....4 <input type="checkbox"/></p> <p>ITEM B ←</p>	<p>UNDER 1 MONTH.....1 <input type="checkbox"/></p> <p>ITEM A ←</p> <p>1 TO UNDER 3 MONTHS.....2 <input type="checkbox"/></p> <p>3 MONTHS AND MORE .....3 <input type="checkbox"/></p> <p>NOT STATED.....4 <input type="checkbox"/></p> <p>ITEM B ←</p>	<p>UNDER 1 MONTH.....1 <input type="checkbox"/></p> <p>ITEM A ←</p> <p>1 TO UNDER 3 MONTHS.....2 <input type="checkbox"/></p> <p>3 MONTHS AND MORE .....3 <input type="checkbox"/></p> <p>NOT STATED.....4 <input type="checkbox"/></p> <p>ITEM B ←</p>	<p>UNDER 1 MONTH.....1 <input type="checkbox"/></p> <p>ITEM A ←</p> <p>1 TO UNDER 3 MONTHS.....2 <input type="checkbox"/></p> <p>3 MONTHS AND MORE .....3 <input type="checkbox"/></p> <p>NOT STATED.....4 <input type="checkbox"/></p> <p>ITEM B ←</p>

**Check:** Q14 = 1 or Q15 = 1 or Q16 = 1 or Q19 = 1 or Q21 = 1, skip to Item A to ask for information on employed laborers;  
Q17 = (2/3/4/5/6/7) or Q20 = 2 or Q21 = (2/3/4), skip to Item B to ask for information on the unemployment and the economical inactivity.

HOUSEHOLD N°...

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## ITEM A: INFORMATION ON EMPLOYED LABORERS

(Asking for the job worked in the last 7 days/or the job worked before the temporary absence)

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NAME AND SERIAL NUMBER QUESTION	_____ <input type="text"/> <input type="text"/>			
<b>I. THE MAIN JOB (THE FIRST JOB)</b>				
<p>22. What was the main job that you did in the last 7 days/7 days before the temporary absence? <i>(Fill fully job position/title)</i></p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>(SPECIFY)</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>(SPECIFY)</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>(SPECIFY)</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>(SPECIFY)</p>
<p>23. What was the main activity or product or service of the establishment that you worked in the last 7 days/7 days before the temporary absence?</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>(SPECIFY)</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>(SPECIFY)</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>(SPECIFY)</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>(SPECIFY)</p>

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NAME AND SERIAL NUMBER QUESTION				
<p>24. Does the establishment that you worked belong to one kind of economic unit as follows?</p> <p><i>(Read out answer choices)</i></p> <p><b>ABBREVIATION:</b>            BUS. – BUSINESS            ORG. – ORGANIZATION            ASS. – ASSOCIATION</p>	<p>FARM HOUSEHOLD .....01 <input type="checkbox"/></p> <p>OWN ACCOUNT INDIVIDUAL .02 <input type="checkbox"/></p> <p>IN. BUS. ESTABLISHMENT.....03 <input type="checkbox"/></p> <p>COLLECTIVE.....04 <input type="checkbox"/></p> <p>NON-STATE ENTERPRISE.....05 <input type="checkbox"/></p> <p>NON-STATE SERVICE UNIT ..06 <input type="checkbox"/></p> <p>STATE:</p> <p>+ LEGISLATIVE, EXECUTIVE, <input type="checkbox"/></p> <p>JUDICAL AGENCY .....07 <input type="checkbox"/></p> <p>+ OGRANIZATION .....08 <input type="checkbox"/></p> <p>+ SERVICE UNIT .....09 <input type="checkbox"/></p> <p>+ ENTERPRISE .....10 <input type="checkbox"/></p> <p>FOREIGN INVESTMENT .....11 <input type="checkbox"/></p> <p>OTHER ORG./ASS. ....12 <input type="checkbox"/></p> <p style="text-align: right;">Q26 ←</p>	<p>FARM HOUSEHOLD ..... 01 <input type="checkbox"/></p> <p>OWN ACCOUNT INDIVIDUAL 02 <input type="checkbox"/></p> <p>IN. BUS. ESTABLISHMENT.... 03 <input type="checkbox"/></p> <p>COLLECTIVE..... 04 <input type="checkbox"/></p> <p>NON-STATE ENTERPRISE.... 05 <input type="checkbox"/></p> <p>NON-STATE SERVICE UNIT ..06 <input type="checkbox"/></p> <p>STATE:</p> <p>+ LEGISLATIVE, EXECUTIVE, <input type="checkbox"/></p> <p>JUDICAL AGENCY ..... 07 <input type="checkbox"/></p> <p>+ OGRANIZATION ..... 08 <input type="checkbox"/></p> <p>+ SERVICE UNIT ..... 09 <input type="checkbox"/></p> <p>+ ENTERPRISE ..... 10 <input type="checkbox"/></p> <p>FOREIGN INVESTMENT ..... 11 <input type="checkbox"/></p> <p>OTHER ORG./ASS. .... 12 <input type="checkbox"/></p> <p style="text-align: right;">Q26 ←</p>	<p>FARM HOUSEHOLD .....01 <input type="checkbox"/></p> <p>OWN ACCOUNT INDIVIDUAL .02 <input type="checkbox"/></p> <p>IN. BUS. ESTABLISHMENT ....03 <input type="checkbox"/></p> <p>COLLECTIVE.....04 <input type="checkbox"/></p> <p>NON-STATE ENTERPRISE.....05 <input type="checkbox"/></p> <p>NON-STATE SERVICE UNIT ..06 <input type="checkbox"/></p> <p>STATE:</p> <p>+ LEGISLATIVE, EXECUTIVE, <input type="checkbox"/></p> <p>JUDICAL AGENCY .....07 <input type="checkbox"/></p> <p>+ OGRANIZATION .....08 <input type="checkbox"/></p> <p>+ SERVICE UNIT .....09 <input type="checkbox"/></p> <p>+ ENTERPRISE .....10 <input type="checkbox"/></p> <p>FOREIGN INVESTMENT .....11 <input type="checkbox"/></p> <p>OTHER ORG./ASS. ....12 <input type="checkbox"/></p> <p style="text-align: right;">Q26 ←</p>	<p>FARM HOUSEHOLD .....01 <input type="checkbox"/></p> <p>OWN ACCOUNT INDIVIDUAL .02 <input type="checkbox"/></p> <p>IN. BUS. ESTABLISHMENT ....03 <input type="checkbox"/></p> <p>COLLECTIVE .....04 <input type="checkbox"/></p> <p>NON-STATE ENTERPRISE.....05 <input type="checkbox"/></p> <p>NON-STATE SERVICE UNIT...06 <input type="checkbox"/></p> <p>STATE:</p> <p>+ LEGISLATIVE, EXECUTIVE, <input type="checkbox"/></p> <p>JUDICAL AGENCY .....07 <input type="checkbox"/></p> <p>+ OGRANIZATION .....08 <input type="checkbox"/></p> <p>+ SERVICE UNIT .....09 <input type="checkbox"/></p> <p>+ ENTERPRISE .....10 <input type="checkbox"/></p> <p>FOREIGN INVESTMENT .....11 <input type="checkbox"/></p> <p>OTHER ORG./ASS. ....12 <input type="checkbox"/></p> <p style="text-align: right;">Q26 ←</p>
<p>25. Are the main products or services that you produced or provided for sales/trade or for own use of household?</p>	<p>ONLY FOR SALE/TRADE..... 1 <input type="checkbox"/></p> <p>MAINLY FOR SALE/TRADE ..... 2 <input type="checkbox"/></p> <p>MAINLY FOR OWN USE ..... 3 <input type="checkbox"/></p> <p>ONLY FOR OWN USE..... 4 <input type="checkbox"/></p> <p style="text-align: right;">Q28 ←</p>	<p>ONLY FOR SALE/TRADE..... 1 <input type="checkbox"/></p> <p>MAINLY FOR SALE/TRADE ..... 2 <input type="checkbox"/></p> <p>MAINLY FOR OWN USE ..... 3 <input type="checkbox"/></p> <p>ONLY FOR OWN USE..... 4 <input type="checkbox"/></p> <p style="text-align: right;">Q28 ←</p>	<p>ONLY FOR SALE/TRADE.....1 <input type="checkbox"/></p> <p>MAINLY FOR SALE/TRADE .....2 <input type="checkbox"/></p> <p>MAINLY FOR OWN USE .....3 <input type="checkbox"/></p> <p>ONLY FOR OWN USE.....4 <input type="checkbox"/></p> <p style="text-align: right;">Q28 ←</p>	<p>ONLY FOR SALE/TRADE .....1 <input type="checkbox"/></p> <p>MAINLY FOR SALE/TRADE .....2 <input type="checkbox"/></p> <p>MAINLY FOR OWN USE .....3 <input type="checkbox"/></p> <p>ONLY FOR OWN USE.....4 <input type="checkbox"/></p> <p style="text-align: right;">Q28 ←</p>
<p>26. Did the establishment that you worked have the business registration?</p>	<p>YES.....1 <input type="checkbox"/></p> <p>NO.....2 <input type="checkbox"/></p>	<p>YES.....1 <input type="checkbox"/></p> <p>NO.....2 <input type="checkbox"/></p>	<p>YES.....1 <input type="checkbox"/></p> <p>NO.....2 <input type="checkbox"/></p>	<p>YES.....1 <input type="checkbox"/></p> <p>NO.....2 <input type="checkbox"/></p>

NAME AND SERIAL NUMBER QUESTION	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<p>27. In what is the venue that you usually work?</p> <p style="text-align: right;">L</p>	<p>FIXED OFFICE ..... 1 <input type="checkbox"/></p> <p>AT HOME/ HOME OF CLIENTS .. 2 <input type="checkbox"/></p> <p>MARKET/TRADE CENTER..... 3 <input type="checkbox"/></p> <p>OUTDOOR FIXED PLACE..... 4 <input type="checkbox"/></p> <p>MOBILE ..... 5 <input type="checkbox"/></p>	<p>FIXED OFFICE..... 1 <input type="checkbox"/></p> <p>AT HOME/ HOME OF CLIENTS.. 2 <input type="checkbox"/></p> <p>MARKET/TRADE CENTER..... 3 <input type="checkbox"/></p> <p>OUTDOOR FIXED PLACE..... 4 <input type="checkbox"/></p> <p>MOBILE ..... 5 <input type="checkbox"/></p>	<p>FIXED OFFICE ..... 1 <input type="checkbox"/></p> <p>AT HOME/ HOME OF CLIENTS .. 2 <input type="checkbox"/></p> <p>MARKET/TRADE CENTER..... 3 <input type="checkbox"/></p> <p>OUTDOOR FIXED PLACE..... 4 <input type="checkbox"/></p> <p>MOBILE ..... 5 <input type="checkbox"/></p>	<p>FIXED OFFICE..... 1 <input type="checkbox"/></p> <p>AT HOME/ HOME OF CLIENTS .. 2 <input type="checkbox"/></p> <p>MARKET/TRADE CENTER..... 3 <input type="checkbox"/></p> <p>OUTDOOR FIXED PLACE ..... 4 <input type="checkbox"/></p> <p>MOBILE..... 5 <input type="checkbox"/></p>
<p>28. With the above job, are you?</p> <p><i>(Read out answer choices)</i></p> <p><b>ABBREVIATION:</b> CONTR. – CONTRIBUTING</p>	<p>EMPLOYER ..... 1 <input type="checkbox"/></p> <p>OWN ACCOUNT WORKER..... 2 <input type="checkbox"/></p> <p>FAMILY CONTR. WORKER..... 3 <input type="checkbox"/></p> <p style="text-align: center;">Q32 ←</p> <p>MEMBER OF COOPERATIVE .. 4 <input type="checkbox"/></p> <p>EMPLOYEE ..... 5 <input type="checkbox"/></p>	<p>EMPLOYER ..... 1 <input type="checkbox"/></p> <p>OWN ACCOUNT WORKER..... 2 <input type="checkbox"/></p> <p>FAMILY WORKER ..... 3 <input type="checkbox"/></p> <p style="text-align: center;">Q32 ←</p> <p>MEMBER OF COOPERATIVE .. 4 <input type="checkbox"/></p> <p>EMPLOYEE ..... 5 <input type="checkbox"/></p>	<p>EMPLOYER ..... 1 <input type="checkbox"/></p> <p>OWN ACCOUNT WORKER..... 2 <input type="checkbox"/></p> <p>FAMILY WORKER..... 3 <input type="checkbox"/></p> <p style="text-align: center;">Q32 ←</p> <p>MEMBER OF COOPERATIVE... 4 <input type="checkbox"/></p> <p>EMPLOYEE ..... 5 <input type="checkbox"/></p>	<p>EMPLOYER ..... 1 <input type="checkbox"/></p> <p>OWN ACCOUNT WORKER ..... 2 <input type="checkbox"/></p> <p>FAMILY WORKER..... 3 <input type="checkbox"/></p> <p style="text-align: center;">Q32 ←</p> <p>MEMBER OF COOPERATIVE .. 4 <input type="checkbox"/></p> <p>EMPLOYEE..... 5 <input type="checkbox"/></p>
<p>29. What type of labor contract did you hold, with the above job?</p> <p><i>(Read out answer choices)</i></p> <p><b>ABBREVIATION:</b> CONT. – LABOR CONTRACT</p>	<p>INDEFINITE TERM CONT..... 1 <input type="checkbox"/></p> <p style="text-align: center;">Q31 ←</p> <p>1 TO &lt; 3 YEAR CONT..... 2 <input type="checkbox"/></p> <p>3 MONTH TO &lt; 1 YEAR CONT... 3 <input type="checkbox"/></p> <p>UNDER 3 MONTH CONT ..... 4 <input type="checkbox"/></p> <p>VERBAL AGREEMENT..... 5 <input type="checkbox"/></p> <p>NO LABOR CONTRACT ..... 6 <input type="checkbox"/></p> <p style="text-align: center;">L</p>	<p>INDEFINITE TERM CONT..... 1 <input type="checkbox"/></p> <p style="text-align: center;">Q31 ←</p> <p>1 TO &lt; 3 YEAR CONT..... 2 <input type="checkbox"/></p> <p>3 MONTH TO &lt; 1 YEAR CONT... 3 <input type="checkbox"/></p> <p>UNDER 3 MONTH CONT..... 4 <input type="checkbox"/></p> <p>VERBAL AGREEMENT..... 5 <input type="checkbox"/></p> <p>NO LABOR CONTRACT ..... 6 <input type="checkbox"/></p>	<p>INDEFINITE TERM CONT..... 1 <input type="checkbox"/></p> <p style="text-align: center;">Q31 ←</p> <p>1 TO &lt; 3 YEAR CONT. .... 2 <input type="checkbox"/></p> <p>3 MONTH TO &lt; 1 YEAR CONT ... 3 <input type="checkbox"/></p> <p>UNDER 3 MONTH CONT ..... 4 <input type="checkbox"/></p> <p>VERBAL AGREEMENT ..... 5 <input type="checkbox"/></p> <p>NO LABOR CONTRACT ..... 6 <input type="checkbox"/></p>	<p>INDEFINITE TERM CONT..... 1 <input type="checkbox"/></p> <p style="text-align: center;">Q31 ←</p> <p>1 TO &lt; 3 YEAR CONT..... 2 <input type="checkbox"/></p> <p>3 MONTH TO &lt; 1 YEAR CONT... 3 <input type="checkbox"/></p> <p>UNDER 3 MONTH CONT..... 4 <input type="checkbox"/></p> <p>VERBAL AGREEMENT ..... 5 <input type="checkbox"/></p> <p>NO LABOR CONTRACT ..... 6 <input type="checkbox"/></p>
<p>30. What was the reason that you held such kind of labor contract above or no labor contract?</p> <p style="text-align: right;">L</p>	<p>ON JOB TRAINING/APPRENTICE. 1 <input type="checkbox"/></p> <p>ON PROBATION..... 2 <input type="checkbox"/></p> <p>SEASONAL JOB..... 3 <input type="checkbox"/></p> <p>DAILY/CASUAL JOB..... 4 <input type="checkbox"/></p> <p>DO A FAVOUR ..... 5 <input type="checkbox"/></p> <p>AS REGULATED BY UNIT..... 6 <input type="checkbox"/></p> <p>OTHERS ..... 7 <input type="checkbox"/></p> <p style="text-align: center;">(SPECIFY)</p>	<p>ON JOB TRAINING/APPRENTICE. 1 <input type="checkbox"/></p> <p>ON PROBATION..... 2 <input type="checkbox"/></p> <p>SEASONAL JOB..... 3 <input type="checkbox"/></p> <p>DAILY/CASUAL JOB..... 4 <input type="checkbox"/></p> <p>DO A FAVOUR..... 5 <input type="checkbox"/></p> <p>AS REGULATED BY UNIT..... 6 <input type="checkbox"/></p> <p>OTHERS ..... 7 <input type="checkbox"/></p> <p style="text-align: center;">(SPECIFY)</p>	<p>ON JOB TRAINING/APPRENTICE.. 1 <input type="checkbox"/></p> <p>ON PROBATION..... 2 <input type="checkbox"/></p> <p>SEASONAL JOB..... 3 <input type="checkbox"/></p> <p>DAILY/CASUAL JOB ..... 4 <input type="checkbox"/></p> <p>DO A FAVOUR ..... 5 <input type="checkbox"/></p> <p>AS REGULATED BY UNIT ..... 6 <input type="checkbox"/></p> <p>OTHERS ..... 7 <input type="checkbox"/></p> <p style="text-align: center;">(SPECIFY)</p>	<p>ON JOB TRAINING/APPRENTICE . 1 <input type="checkbox"/></p> <p>ON PROBATION..... 2 <input type="checkbox"/></p> <p>SEASONAL JOB ..... 3 <input type="checkbox"/></p> <p>DAILY/CASUAL JOB..... 4 <input type="checkbox"/></p> <p>DO A FAVOUR..... 5 <input type="checkbox"/></p> <p>AS REGULATED BY UNIT ..... 6 <input type="checkbox"/></p> <p>OTHERS ..... 7 <input type="checkbox"/></p> <p style="text-align: center;">(SPECIFY)</p>

NAME AND SERIAL NUMBER QUESTION	_____ <input type="checkbox"/> <input type="checkbox"/>	_____ <input type="checkbox"/> <input type="checkbox"/>	_____ <input type="checkbox"/> <input type="checkbox"/>	_____ <input type="checkbox"/> <input type="checkbox"/>
31. By what manner is for the payment that you received, with the above job?  <input type="checkbox"/>	FIXED SALARY .....1 <input type="checkbox"/> PER WORKING DAY/HOUR.....2 <input type="checkbox"/> PER PRODUCT/PIECE.....3 <input type="checkbox"/> PER REVENUE .....4 <input type="checkbox"/> FIXED SALARY AND REVENUE.....5 <input type="checkbox"/> REVENUE AND COST .....6 <input type="checkbox"/> OTHERS .....7 <input type="checkbox"/> (SPECIFY)	FIXED SALARY.....1 <input type="checkbox"/> PER WORKING DAY/HOUR.....2 <input type="checkbox"/> PER PRODUCT/PIECE.....3 <input type="checkbox"/> PER REVENUE.....4 <input type="checkbox"/> FIXED SALARY AND REVENUE.....5 <input type="checkbox"/> REVENUE AND COST .....6 <input type="checkbox"/> OTHERS .....7 <input type="checkbox"/> (SPECIFY)	FIXED SALARY .....1 <input type="checkbox"/> PER WORKING DAY/HOUR.....2 <input type="checkbox"/> PER PRODUCT/PIECE .....3 <input type="checkbox"/> PER REVENUE .....4 <input type="checkbox"/> FIXED SALARY AND REVENUE .....5 <input type="checkbox"/> REVENUE AND COST .....6 <input type="checkbox"/> OTHERS .....7 <input type="checkbox"/> (SPECIFY)	FIXED SALARY.....1 <input type="checkbox"/> PER WORKING DAY/HOUR.....2 <input type="checkbox"/> PER PRODUCT/PIECE.....3 <input type="checkbox"/> PER REVENUE.....4 <input type="checkbox"/> FIXED SALARY AND REVENUE.....5 <input type="checkbox"/> REVENUE AND COST .....6 <input type="checkbox"/> OTHERS .....7 <input type="checkbox"/> (SPECIFY)
32. Have you paid for social insurance, with the above job?	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q34 ←	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q34 ←	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q34 ←	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q34 ←
33. What kind of social insurance have you paid for?	MANDATORY .....1 <input type="checkbox"/> VOLUNTARY.....2 <input type="checkbox"/>	MANDATORY .....1 <input type="checkbox"/> VOLUNTARY.....2 <input type="checkbox"/>	MANDATORY .....1 <input type="checkbox"/> VOLUNTARY.....2 <input type="checkbox"/>	MANDATORY .....1 <input type="checkbox"/> VOLUNTARY.....2 <input type="checkbox"/>
34. Is the job that you are taking a temporary one to wait for or seek another job?	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q37 ←	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q37 ←	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q37 ←	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q37 ←
35. In the last 30 days, did you intent to look for another job?	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q37 ←	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q37 ←	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q37 ←	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> Q37 ←

<b>NAME AND SERIAL NUMBER</b> <b>QUESTION</b>	<input type="text"/> <input type="text"/>			
<p>36. By what manner did you look for job?</p> <p><b>ABBREVIATION:</b></p> <p>INFOR.: INFORMATION            ADVER.: ADVERTISEMENT            INTERV: INTERVIEW            PRO/BUS.: PRODUCTIVE/BUSINESS ACTIVITIES</p>	<p>JOB APPLYING ..... 1 <input type="checkbox"/></p> <p>CONTACTING TO/GETTING INFOR. FROM JOB SUPPORTING UNIT .. 2 <input type="checkbox"/></p> <p>VIA FRIENDS/RELATIVES ..... 3 <input type="checkbox"/></p> <p>PLACING JOB ADVER. .... 4 <input type="checkbox"/></p> <p>VIA RECRUITMENT NOTICE ..... 5 <input type="checkbox"/></p> <p>ALREADY ATTENDING INTERV. . 6 <input type="checkbox"/></p> <p>SELF SEEKING ..... 7 <input type="checkbox"/></p> <p>PREPARING TO START PRO/BUS. 8 <input type="checkbox"/></p> <p>OTHERS _____ 9 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>JOB APPLYING ..... 1 <input type="checkbox"/></p> <p>CONTACTING TO/GETTING INFOR. FROM JOB SUPPORTING UNIT .. 2 <input type="checkbox"/></p> <p>VIA FRIENDS/RELATIVES ..... 3 <input type="checkbox"/></p> <p>PLACING JOB ADVER. .... 4 <input type="checkbox"/></p> <p>VIA RECRUITMENT NOTICE ..... 5 <input type="checkbox"/></p> <p>ALREADY ATTENDING INTERV. . 6 <input type="checkbox"/></p> <p>SELF SEEKING ..... 7 <input type="checkbox"/></p> <p>PREPARING TO START PRO/BUS. 8 <input type="checkbox"/></p> <p>OTHERS _____ 9 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>JOB APPLYING ..... 1 <input type="checkbox"/></p> <p>CONTACTING TO/GETTING INFOR. FROM JOB SUPPORTING UNIT .. 2 <input type="checkbox"/></p> <p>VIA FRIENDS/RELATIVES ..... 3 <input type="checkbox"/></p> <p>PLACING JOB ADVER. .... 4 <input type="checkbox"/></p> <p>VIA RECRUITMENT NOTICE ..... 5 <input type="checkbox"/></p> <p>ALREADY ATTENDING INTERV. . 6 <input type="checkbox"/></p> <p>SELF SEEKING ..... 7 <input type="checkbox"/></p> <p>PREPARING TO START PRO/BUS. 8 <input type="checkbox"/></p> <p>OTHERS _____ 9 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>JOB APPLYING ..... 1 <input type="checkbox"/></p> <p>CONTACTING TO/GETTING INFOR. FROM JOB SUPPORTING UNIT .. 2 <input type="checkbox"/></p> <p>VIA FRIENDS/RELATIVES ..... 3 <input type="checkbox"/></p> <p>PLACING JOB ADVER. .... 4 <input type="checkbox"/></p> <p>VIA RECRUITMENT NOTICE ..... 5 <input type="checkbox"/></p> <p>ALREADY ATTENDING INTERV. . 6 <input type="checkbox"/></p> <p>SELF SEEKING ..... 7 <input type="checkbox"/></p> <p>PREPARING TO START PRO/BUS. 8 <input type="checkbox"/></p> <p>OTHERS _____ 9 <input type="checkbox"/></p> <p>(SPECIFY)</p>
<p>37. For how long have you worked, with the above job?</p>	<p>UNDER 6 MONTHS ..... 1 <input type="checkbox"/></p> <p>6 TO UNDER 12 MONTHS ..... 2 <input type="checkbox"/></p> <p>1 TO UNDER 5 YEARS ..... 3 <input type="checkbox"/></p> <p>5 TO UNDER 10 YEARS ..... 4 <input type="checkbox"/></p> <p>10 YEARS AND MORE ..... 5 <input type="checkbox"/></p> <p>Q40 ←</p>	<p>UNDER 6 MONTHS ..... 1 <input type="checkbox"/></p> <p>6 TO UNDER 12 MONTHS ..... 2 <input type="checkbox"/></p> <p>1 TO UNDER 5 YEARS ..... 3 <input type="checkbox"/></p> <p>5 TO UNDER 10 YEARS ..... 4 <input type="checkbox"/></p> <p>10 YEARS AND MORE ..... 5 <input type="checkbox"/></p> <p>Q40 ←</p>	<p>UNDER 6 MONTHS ..... 1 <input type="checkbox"/></p> <p>6 TO UNDER 12 MONTHS ..... 2 <input type="checkbox"/></p> <p>1 TO UNDER 5 YEARS ..... 3 <input type="checkbox"/></p> <p>5 TO UNDER 10 YEARS ..... 4 <input type="checkbox"/></p> <p>10 YEARS AND MORE ..... 5 <input type="checkbox"/></p> <p>Q40 ←</p>	<p>UNDER 6 MONTHS ..... 1 <input type="checkbox"/></p> <p>6 TO UNDER 12 MONTHS ..... 2 <input type="checkbox"/></p> <p>1 TO UNDER 5 YEARS ..... 3 <input type="checkbox"/></p> <p>5 TO UNDER 10 YEARS ..... 4 <input type="checkbox"/></p> <p>10 YEARS AND MORE ..... 5 <input type="checkbox"/></p> <p>Q40 ←</p>
<p>38. Before taking in the above job, what did you do?</p> <p><i>(Read out answer choices)</i></p>	<p>IN ANOTHER JOB ..... 1 <input type="checkbox"/></p> <p>WAITING for JOB/OFF SEASON . 2 <input type="checkbox"/></p> <p>LOOKING FOR JOB ..... 3 <input type="checkbox"/></p> <p>OTHERS _____ 4 <input type="checkbox"/></p> <p>(SPECIFY)</p> <p>Q40 ←</p>	<p>IN ANOTHER JOB ..... 1 <input type="checkbox"/></p> <p>WAITING for JOB/OFF SEASON . 2 <input type="checkbox"/></p> <p>LOOKING FOR JOB ..... 3 <input type="checkbox"/></p> <p>OTHERS _____ 4 <input type="checkbox"/></p> <p>(SPECIFY)</p> <p>Q40 ←</p>	<p>IN ANOTHER JOB ..... 1 <input type="checkbox"/></p> <p>WAITING for JOB/OFF SEASON . 2 <input type="checkbox"/></p> <p>LOOKING FOR JOB ..... 3 <input type="checkbox"/></p> <p>OTHERS _____ 4 <input type="checkbox"/></p> <p>(SPECIFY)</p> <p>Q40 ←</p>	<p>IN ANOTHER JOB ..... 1 <input type="checkbox"/></p> <p>WAITING for JOB/OFF SEASON . 2 <input type="checkbox"/></p> <p>LOOKING FOR JOB ..... 3 <input type="checkbox"/></p> <p>OTHERS _____ 4 <input type="checkbox"/></p> <p>(SPECIFY)</p> <p>Q40 ←</p>

NAME AND SERIAL NUMBER QUESTION				
39. What was the reason that you left from the previous job?  <b>ABBREVIATION:</b>  ORG.: ORGANIZATION	WORKFORCE CUT DOWN/ ORGAN. RESTRUCTURED..... 01 <input type="checkbox"/> DISSOLVED/IN RUIN ..... 02 <input type="checkbox"/> PRODUCTION STOPPED ..... 03 <input type="checkbox"/> DISMISSED ..... 04 <input type="checkbox"/> CONTRACT ENDED..... 05 <input type="checkbox"/> LOW INCOME ..... 06 <input type="checkbox"/> FARMING LAND LOST..... 07 <input type="checkbox"/> UNSUITABLE JOB..... 08 <input type="checkbox"/> RESETTLEMENT ..... 09 <input type="checkbox"/> OTHERS _____ 10 <input type="checkbox"/> (SPECIFY)	WORKFORCE CUT DOWN/ ORGAN. RESTRUCTURED .....01 <input type="checkbox"/> DISSOLVED/IN RUIN .....02 <input type="checkbox"/> PRODUCTION STOPPED .....03 <input type="checkbox"/> DISMISSED .....04 <input type="checkbox"/> CONTRACT ENDED.....05 <input type="checkbox"/> LOW INCOME .....06 <input type="checkbox"/> FARMING LAND LOST.....07 <input type="checkbox"/> UNSUITABLE JOB .....08 <input type="checkbox"/> RESETTLEMENT .....09 <input type="checkbox"/> OTHERS _____ 10 <input type="checkbox"/> (SPECIFY)	WORKFORCE CUT DOWN/ ORGAN. RESTRUCTURED .....01 <input type="checkbox"/> DISSOLVED/IN RUIN .....02 <input type="checkbox"/> PRODUCTION STOPPED .....03 <input type="checkbox"/> DISMISSED .....04 <input type="checkbox"/> CONTRACT ENDED .....05 <input type="checkbox"/> LOW INCOME .....06 <input type="checkbox"/> FARMING LAND LOST.....07 <input type="checkbox"/> UNSUITABLE JOB .....08 <input type="checkbox"/> RESETTLEMENT .....09 <input type="checkbox"/> OTHERS _____ 10 <input type="checkbox"/> (SPECIFY)	WORKFORCE CUT DOWN/ ORGAN. RESTRUCTURED .....01 <input type="checkbox"/> DISSOLVED/IN RUIN .....02 <input type="checkbox"/> PRODUCTION STOPPED .....03 <input type="checkbox"/> DISMISSED .....04 <input type="checkbox"/> CONTRACT ENDED .....05 <input type="checkbox"/> LOW INCOME .....06 <input type="checkbox"/> FARMING LAND LOST.....07 <input type="checkbox"/> UNSUITABLE JOB .....08 <input type="checkbox"/> RESETTLEMENT .....09 <input type="checkbox"/> OTHERS _____ 10 <input type="checkbox"/> (SPECIFY)

**II. QUESTIONS RELATING TO INCOME AND NUMBER OF WORKING HOURS THAT THE RESPONDENT SPENT IN THE MAIN JOB IN THE LAST 7 DAYS/7 DAYS BEFORE THE TEMPORARY ABSENCE)**

40. With the above job, how much money did you receive in the last month?  <b>Of which:</b> Overtime remuneration, bonus, occupational allowances and other welfare payments? (if applicable)	TOTAL AMOUNT OF CASH RECEIVED: <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)  OF WHICH: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)	TOTAL AMOUNT OF CASH RECEIVED: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)  OF WHICH: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)	TOTAL AMOUNT OF CASH RECEIVED: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)  OF WHICH: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)	TOTAL AMOUNT OF CASH RECEIVED: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)  OF WHICH: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)
41. With the above job, how many hours did you <b>actually</b> work in the last 7 days?	ACTUAL HOURS WORKED... <input type="text"/> <input type="text"/>	ACTUAL HOURS WORKED... <input type="text"/> <input type="text"/>	ACTUAL HOURS WORKED... <input type="text"/> <input type="text"/>	ACTUAL HOURS WORKED... <input type="text"/> <input type="text"/>

HOUSEHOLD N<sup>o</sup>.....



NAME AND SERIAL NUMBER QUESTION	<input type="text"/> <input type="text"/>			
42. With the above job, how many hours do you <b>usually</b> work in a week?	USUAL HOURS WORKED <input type="text"/> <input type="text"/>			
43. Apart from the above job, did you do another job for income in the last 7 days/7 days before the temporary absence?	YES .....1 <input type="checkbox"/> NO .....2 <input type="checkbox"/> Q47 ←	YES .....1 <input type="checkbox"/> NO .....2 <input type="checkbox"/> Q47 ←	YES .....1 <input type="checkbox"/> NO .....2 <input type="checkbox"/> Q47 ←	YES .....1 <input type="checkbox"/> NO .....2 <input type="checkbox"/> Q47 ←
44. For all jobs ( <i>including the main job and other jobs</i> ), how much money did you receive in the last month?	TOTAL AMOUNT OF CASH RECEIVED: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)	TOTAL AMOUNT OF CASH RECEIVED: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)	TOTAL AMOUNT OF CASH RECEIVED: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)	TOTAL AMOUNT OF CASH RECEIVED: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (IN THOUSAND DONGS)
45. <b>Actually</b> , how many hours did you spend in all jobs in the last 7 days ( <i>including the main job and other jobs</i> )?	TOTAL NUMBER OF ACTUAL HOURS WORKED..... <input type="text"/> <input type="text"/>	TOTAL NUMBER OF ACTUAL HOURS WORKED..... <input type="text"/> <input type="text"/>	TOTAL NUMBER OF ACTUAL HOURS WORKED..... <input type="text"/> <input type="text"/>	TOTAL NUMBER OF ACTUAL HOURS WORKED..... <input type="text"/> <input type="text"/>
46. <b>Usually</b> , how many hours do you spend in all jobs ( <i>including the main job and other jobs</i> )?	TOTAL NUMBER OF USUAL HOURS WORKED..... <input type="text"/> <input type="text"/>	TOTAL NUMBER OF USUAL HOURS WORKED..... <input type="text"/> <input type="text"/>	TOTAL NUMBER OF USUAL HOURS WORKED..... <input type="text"/> <input type="text"/>	TOTAL NUMBER OF USUAL HOURS WORKED..... <input type="text"/> <input type="text"/>



<b>NAME AND SERIAL NUMBER QUESTION</b>	_____ <input type="text"/> <input type="text"/>	_____ <input type="text"/> <input type="text"/>	_____ <input type="text"/> <input type="text"/>
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**47. CHECK: (Q.41 # Q.42) OR (Q.45 # Q.46), ASK Q.48; OTHERWISE SKIP TO Q.49**

<b>48. Why did you actually work for less/more hours than usual in the last 7 days/7 days before the temporary absence?</b>	INJURED/ILL ..... 01 <input type="checkbox"/>			
	ON HOLIDAYS/LEAVES ..... 02 <input type="checkbox"/>			
	JUST STARTING WORK ..... 03 <input type="checkbox"/>			
	JOB LOST/QUITTING JOB ..... 04 <input type="checkbox"/>			
	BAD WEATHER/OFF SEASON .. 05 <input type="checkbox"/>	BAD WEATHER/OFF SEASON... 05 <input type="checkbox"/>	BAD WEATHER/OFF SEASON... 05 <input type="checkbox"/>	BAD WEATHER/OFF SEASON .. 05 <input type="checkbox"/>
	WORK BY SHIFT ..... 06 <input type="checkbox"/>			
	FARMING LAND LOST ..... 07 <input type="checkbox"/>			
	PERSONAL OBLIGATIONS ..... 08 <input type="checkbox"/>			
	LACK OF CLIENTS/ORDERS IN BUSINESS ..... 09 <input type="checkbox"/>	LACK OF CLIENTS/ORDERS IN BUSINESS ..... 09 <input type="checkbox"/>	LACK OF CLIENTS/ORDERS IN BUSINESS ..... 09 <input type="checkbox"/>	LACK OF CLIENTS/ORDERS IN BUSINESS ..... 09 <input type="checkbox"/>
	MORE WORK ..... 10 <input type="checkbox"/>			
	STRIKE ..... 11 <input type="checkbox"/>			
	STARTING/ENDING/ CHANGING JOB ..... 12 <input type="checkbox"/>			
	OTHERS ..... 13 <input type="checkbox"/>			
(SPECIFY)	(SPECIFY)	(SPECIFY)	(SPECIFY)	

**III. QUESTIONS RELATING TO THE UNDER-EMPLOYMENT**

<b>49. For such total number of hours worked above, would you like to work more time?</b>	YES ..... 1 <input type="checkbox"/> NO ..... 2 <input type="checkbox"/> → Q.65	YES ..... 1 <input type="checkbox"/> NO ..... 2 <input type="checkbox"/> → Q.65	YES ..... 1 <input type="checkbox"/> NO ..... 2 <input type="checkbox"/> → Q.65	YES ..... 1 <input type="checkbox"/> NO ..... 2 <input type="checkbox"/> → Q.65
<b>50. You would like to work more time but are you available to work immediately?</b>	YES ..... 1 <input type="checkbox"/> NO ..... 2 <input type="checkbox"/> → Q.65	YES ..... 1 <input type="checkbox"/> NO ..... 2 <input type="checkbox"/> → Q.65	YES ..... 1 <input type="checkbox"/> NO ..... 2 <input type="checkbox"/> → Q.65	YES ..... 1 <input type="checkbox"/> NO ..... 2 <input type="checkbox"/> → Q.65
<b>51. How many additional hours would you like to work per week?</b>	HOURS/WEEK ..... <input type="text"/> <input type="text"/> Q.65 ←			

**ITEM B. INFORMATION ON THE UNEMPLOYMENT OR THE ECONOMICALLY INACTIVE STATUS**

NAME AND SERIAL NUMBER QUESTION	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
52. In the last 30 days, did you intent to look for job or prepare to start any productive or business activites?	YES.....1 <input type="checkbox"/> NO .....2 <input type="checkbox"/> → Q.55	YES.....1 <input type="checkbox"/> NO .....2 <input type="checkbox"/> → Q.55	YES .....1 <input type="checkbox"/> NO .....2 <input type="checkbox"/> → Q.55	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q.55
53. How did you look for job or start any productive or business activities?  <b>ABBREVIATION:</b> PRO./BUS: PRODUCTIVE/BUSINESS	JOB APPLYING .....1 <input type="checkbox"/> CONTACTING TO/GETTING INFOR FROM JOB SUPPORTING UNIT 2 <input type="checkbox"/> VIA FRIENDS/RELATIVES .....3 <input type="checkbox"/> PLACING JOB ADVER .....4 <input type="checkbox"/> VIA RECRUITMENT NOTICE .....5 <input type="checkbox"/> ALREADY ATTENDING INTERV 6 <input type="checkbox"/> SELF SEEKING .....7 <input type="checkbox"/> PREPARING TO START PRO./BUS ACTIVITIES.....8 <input type="checkbox"/> OTHERS _____ 9 <input type="checkbox"/> (SPECIFY)	JOB APPLYING .....1 <input type="checkbox"/> CONTACTING TO/GETTING INFOR FROM JOB SUPPORTING UNIT 2 <input type="checkbox"/> VIA FRIENDS/RELATIVES .....3 <input type="checkbox"/> PLACING JOB ADVER .....4 <input type="checkbox"/> VIA RECRUITMENT NOTICE .....5 <input type="checkbox"/> ALREADY ATTENDING INTERV 6 <input type="checkbox"/> SELF SEEKING .....7 <input type="checkbox"/> PREPARING TO START PRO./BUS ACTIVITIES.....8 <input type="checkbox"/> OTHERS _____ 9 <input type="checkbox"/> (SPECIFY)	JOB APPLYING.....1 <input type="checkbox"/> CONTACTING TO/GETTING INFOR FROM JOB SUPPORTING UNIT 2 <input type="checkbox"/> VIA FRIENDS/RELATIVES .....3 <input type="checkbox"/> PLACING JOB ADVER.....4 <input type="checkbox"/> VIA RECRUITMENT NOTICE .....5 <input type="checkbox"/> ALREADY ATTENDING INTERV 6 <input type="checkbox"/> SELF SEEKING .....7 <input type="checkbox"/> PREPARING TO START PRO./BUS ACTIVITIES .....8 <input type="checkbox"/> OTHERS _____ 9 <input type="checkbox"/> (SPECIFY)	JOB APPLYING .....1 <input type="checkbox"/> CONTACTING TO/GETTING INFOR FROM JOB SUPPORTING UNIT 2 <input type="checkbox"/> VIA FRIENDS/RELATIVES.....3 <input type="checkbox"/> PLACING JOB ADVER.....4 <input type="checkbox"/> VIA RECRUITMENT NOTICE .....5 <input type="checkbox"/> ALREADY ATTENDING INTERV 6 <input type="checkbox"/> SELF SEEKING .....7 <input type="checkbox"/> PREPARING TO START PRO./BUS ACTIVITIES .....8 <input type="checkbox"/> OTHERS _____ 9 <input type="checkbox"/> (SPECIFY)
54. How long have you been looking for job?	UNDER 1 MONTH ..... 1 <input type="checkbox"/> 1 TO UNDER 3 MONTHS .....2 <input type="checkbox"/> 3 MONTHS AND MORE.....3 <input type="checkbox"/> Q.56 ←	UNDER 1 MONTH ..... 1 <input type="checkbox"/> 1 TO UNDER 3 MONTHS .....2 <input type="checkbox"/> 3 MONTHS AND MORE.....3 <input type="checkbox"/> Q.56 ←	UNDER 1 MONTH .....1 <input type="checkbox"/> 1 TO UNDER 3 MONTHS .....2 <input type="checkbox"/> 3 MONTHS AND MORE .....3 <input type="checkbox"/> Q.56 ←	UNDER 1 MONTH.....1 <input type="checkbox"/> 1 TO UNDER 3 MONTHS .....2 <input type="checkbox"/> 3 MONTHS AND MORE.....3 <input type="checkbox"/> Q.56 ←

NAME AND SERIAL NUMBER QUESTION				
<p>55. What was the reason that you did not look for job in the last 30 days?</p> <p><b>ABBREVIATION:</b>            PRO./BUS – PRODUCTIVE/BUSINESS            ST - STUDENT            PU - PUPIL            AP – APPENTICE</p>	<p>TOO OLD/YOUNG, DISABLED...01 <input type="checkbox"/></p> <p>TAKING DOMESTIC WORKS.....02 <input type="checkbox"/></p> <p>SCHOOLING (ST/PU/AP).....03 <input type="checkbox"/></p> <p>NO DEMAND OF WORK/ NO NEED TO WORK.....04 <input type="checkbox"/></p> <p>BELIEVING NO JOB AVAILABLE/ NO JOB SUITABLE.....05 <input type="checkbox"/></p> <p>DID NOT KNOW WHERE/HOW TO FIND JOB.....06 <input type="checkbox"/></p> <p>TEMPORARILY LAID OFF .....07 <input type="checkbox"/></p> <p>WAITING JOB APPLICATION/TO START PRO/BUS ACTIVITIES ...08 <input type="checkbox"/></p> <p>OFF SEASON.....09 <input type="checkbox"/></p> <p>BAD WEATHER.....10 <input type="checkbox"/></p> <p>FAMILY OBLIGATIONS/ RELAXING.....11 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY 12 <input type="checkbox"/></p> <p>OTHERS _____ 13 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>TOO OLD/YOUNG, DISABLED...01 <input type="checkbox"/></p> <p>TAKING DOMESTIC WORKS.....02 <input type="checkbox"/></p> <p>SCHOOLING (ST/PU/AP).....03 <input type="checkbox"/></p> <p>NO DEMAND OF WORK/ NO NEED TO WORK.....04 <input type="checkbox"/></p> <p>BELIEVING NO JOB AVAILABLE/ NO JOB SUITABLE.....05 <input type="checkbox"/></p> <p>DID NOT KNOW WHERE/HOW TO FIND JOB.....06 <input type="checkbox"/></p> <p>TEMPORARILY LAID OFF .....07 <input type="checkbox"/></p> <p>WAITING JOB APPLICATION/TO START PRO/BUS ACTIVITIES ...08 <input type="checkbox"/></p> <p>OFF SEASON.....09 <input type="checkbox"/></p> <p>BAD WEATHER.....10 <input type="checkbox"/></p> <p>FAMILY OBLIGATIONS/ RELAXING.....11 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY 12 <input type="checkbox"/></p> <p>OTHERS _____ 13 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>TOO OLD/YOUNG, DISABLED .. 01 <input type="checkbox"/></p> <p>TAKING DOMESTIC WORKS..... 02 <input type="checkbox"/></p> <p>SCHOOLING (ST/PU/AP)..... 03 <input type="checkbox"/></p> <p>NO DEMAND OF WORK/ NO NEED TO WORK..... 04 <input type="checkbox"/></p> <p>BELIEVING NO JOB AVAILABLE/ NO JOB SUITABLE ..... 05 <input type="checkbox"/></p> <p>DID NOT KNOW WHERE/HOW TO FIND JOB ..... 06 <input type="checkbox"/></p> <p>TEMPORARILY LAID OFF ..... 07 <input type="checkbox"/></p> <p>WAITING JOB APPLICATION/TO START PRO/BUS ACTIVITIES ... 08 <input type="checkbox"/></p> <p>OFF SEASON..... 09 <input type="checkbox"/></p> <p>BAD WEATHER..... 10 <input type="checkbox"/></p> <p>FAMILY OBLIGATIONS/ RELAXING..... 11 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY 12 <input type="checkbox"/></p> <p>OTHERS _____ 13 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>TOO OLD/YOUNG, DISABLED...01 <input type="checkbox"/></p> <p>TAKING DOMESTIC WORKS.....02 <input type="checkbox"/></p> <p>SCHOOLING (ST/PU/AP).....03 <input type="checkbox"/></p> <p>NO DEMAND OF WORK/ NO NEED TO WORK.....04 <input type="checkbox"/></p> <p>BELIEVING NO JOB AVAILABLE/ NO JOB SUITABLE.....05 <input type="checkbox"/></p> <p>DID NOT KNOW WHERE/HOW TO FIND JOB.....06 <input type="checkbox"/></p> <p>TEMPORARILY LAID OFF .....07 <input type="checkbox"/></p> <p>WAITING JOB APPLICATION/TO START PRO/BUS ACTIVITIES ...08 <input type="checkbox"/></p> <p>OFF SEASON.....09 <input type="checkbox"/></p> <p>BAD WEATHER.....10 <input type="checkbox"/></p> <p>FAMILY OBLIGATIONS/ RELAXING.....11 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY.12 <input type="checkbox"/></p> <p>OTHERS _____ 13 <input type="checkbox"/></p> <p>(SPECIFY)</p>
<p>56.For the next 2 weeks, if it is available for a job or a productive/business activity, will you be ready to work immediately?</p>	<p>YES.....1 <input type="checkbox"/> → Q.58</p> <p>NO .....2 <input type="checkbox"/></p>	<p>YES.....1 <input type="checkbox"/> → Q.58</p> <p>NO .....2 <input type="checkbox"/></p>	<p>YES ..... 1 <input type="checkbox"/> → Q.58</p> <p>NO .....2 <input type="checkbox"/></p>	<p>YES..... 1 <input type="checkbox"/> → .58</p> <p>NO..... 2 <input type="checkbox"/></p>
<p>57. What is the main reason that you are unavailable for work immediately?</p>	<p>SCHOOLING/TRAINING.....1 <input type="checkbox"/></p> <p>FAMILY OBLIGATIONS ..... 2 <input type="checkbox"/></p> <p>BAD WEATHER..... 3 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY 4 <input type="checkbox"/></p> <p>OTHERS _____ 5 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>SCHOOLING/TRAINING.....1 <input type="checkbox"/></p> <p>FAMILY OBLIGATIONS ..... 2 <input type="checkbox"/></p> <p>BAD WEATHER..... 3 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY 4 <input type="checkbox"/></p> <p>OTHERS _____ 5 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>SCHOOLING/TRAINING..... 1 <input type="checkbox"/></p> <p>FAMILY OBLIGATIONS.....2 <input type="checkbox"/></p> <p>BAD WEATHER.....3 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY .4 <input type="checkbox"/></p> <p>OTHERS _____ 5 <input type="checkbox"/></p> <p>(SPECIFY)</p>	<p>SCHOOLING/TRAINING ..... 1 <input type="checkbox"/></p> <p>FAMILY OBLIGATIONS ..... 2 <input type="checkbox"/></p> <p>BAD WEATHER ..... 3 <input type="checkbox"/></p> <p>TEMPORARY ILLNESS/INJURY.4 <input type="checkbox"/></p> <p>OTHERS _____ 5 <input type="checkbox"/></p> <p>(SPECIFY)</p>

HOUSEHOLD N° ...

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NAME AND SERIAL NUMBER QUESTION	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
58. Have you ever worked before? L	YES.....1 <input type="checkbox"/> NOT YET.....2 <input type="checkbox"/> → Q.65	YES.....1 <input type="checkbox"/> NOT YET.....2 <input type="checkbox"/> → Q.65	YES.....1 <input type="checkbox"/> NOT YET.....2 <input type="checkbox"/> → Q.65	YES.....1 <input type="checkbox"/> NOT YET.....2 <input type="checkbox"/> → Q.65
59. For how long have you left the last job? L	UNDER 1 MONTH .....1 <input type="checkbox"/> 1 TO < 3 MONTHS.....2 <input type="checkbox"/> 3 MONTHS TO < 1 YEAR .....3 <input type="checkbox"/> 1 TO < 5 YEARS .....4 <input type="checkbox"/> 5 YEARS AND MORE .....5 <input type="checkbox"/> Q.65 ←	UNDER 1 MONTH .....1 <input type="checkbox"/> 1 TO < 3 MONTHS.....2 <input type="checkbox"/> 3 MONTHS TO < 1 YEAR .....3 <input type="checkbox"/> 1 TO < 5 YEARS .....4 <input type="checkbox"/> 5 YEARS AND MORE .....5 <input type="checkbox"/> Q.65 ←	UNDER 1 MONTH .....1 <input type="checkbox"/> 1 TO < 3 MONTHS .....2 <input type="checkbox"/> 3 MONTHS TO < 1 YEAR .....3 <input type="checkbox"/> 1 TO < 5 YEARS .....4 <input type="checkbox"/> 5 YEARS AND MORE .....5 <input type="checkbox"/> Q.65 ←	UNDER 1 MONTH.....1 <input type="checkbox"/> 1 TO < 3 MONTHS.....2 <input type="checkbox"/> 3 MONTHS TO < 1 YEAR .....3 <input type="checkbox"/> 1 TO < 5 YEARS .....4 <input type="checkbox"/> 5 YEARS AND MORE .....5 <input type="checkbox"/> Q.65 ←
60. What reason did you quit/leave from the last job?  <b>ABBREVIATION:</b> ORG. – ORGANIZATION	WORKFORCE CUT DOWN/ ORG. RESTRUCTURED.....01 <input type="checkbox"/> DISSOLVED/IN RUIN .....02 <input type="checkbox"/> PRODUCTION STOPPED .....03 <input type="checkbox"/> DISMISSED .....04 <input type="checkbox"/> CONTRACT ENDED.....05 <input type="checkbox"/> LOW INCOME.....06 <input type="checkbox"/> FARMING-LAND LOST.....07 <input type="checkbox"/> UNSUITABLE JOB.....08 <input type="checkbox"/> RESETTLEMENT.....09 <input type="checkbox"/> RETIRED/DUE TO DISABILITY 10 <input type="checkbox"/> OTHERS .....11 <input type="checkbox"/> (SPECIFY)	WORKFORCE CUT DOWN/ ORG. RESTRUCTURED.....01 <input type="checkbox"/> DISSOLVED/IN RUIN .....02 <input type="checkbox"/> PRODUCTION STOPPED .....03 <input type="checkbox"/> DISMISSED .....04 <input type="checkbox"/> CONTRACT ENDED.....05 <input type="checkbox"/> LOW INCOME.....06 <input type="checkbox"/> FARMING-LAND LOST.....07 <input type="checkbox"/> UNSUITABLE JOB.....08 <input type="checkbox"/> RESETTLEMENT .....09 <input type="checkbox"/> RETIRED/DUE TO DISABILITY 10 <input type="checkbox"/> OTHERS .....11 <input type="checkbox"/> (SPECIFY)	WORKFORCE CUT DOWN/ ORG. RESTRUCTURED.....01 <input type="checkbox"/> DISSOLVED/IN RUIN .....02 <input type="checkbox"/> PRODUCTION STOPPED .....03 <input type="checkbox"/> DISMISSED .....04 <input type="checkbox"/> CONTRACT ENDED.....05 <input type="checkbox"/> LOW INCOME .....06 <input type="checkbox"/> FARMING-LAND LOST .....07 <input type="checkbox"/> UNSUITABLE JOB .....08 <input type="checkbox"/> RESETTLEMENT .....09 <input type="checkbox"/> RETIRED/DUE TO DISABILITY .10 <input type="checkbox"/> OTHERS .....11 <input type="checkbox"/> (SPECIFY)	WORKFORCE CUT DOWN/ ORG. RESTRUCTURED.....01 <input type="checkbox"/> DISSOLVED/IN RUIN.....02 <input type="checkbox"/> PRODUCTION STOPPED.....03 <input type="checkbox"/> DISMISSED.....04 <input type="checkbox"/> CONTRACT ENDED.....05 <input type="checkbox"/> LOW INCOME.....06 <input type="checkbox"/> FARMING-LAND LOST .....07 <input type="checkbox"/> UNSUITABLE JOB.....08 <input type="checkbox"/> RESETTLEMENT.....09 <input type="checkbox"/> RETIRED/DUE TO DISABILITY 10 <input type="checkbox"/> OTHERS .....11 <input type="checkbox"/> (SPECIFY)

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NAME AND SERIAL NUMBER QUESTION	_____ <input type="text"/>	_____ <input type="text"/>	_____ <input type="text"/>	_____ <input type="text"/>
<p>61. What was the main job that you did before the job break?</p> <p><i>(Fill fully job position/title)</i></p> <p>L</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/></p> <p>(SPECIFY)</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/></p> <p>(SPECIFY)</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/></p> <p>(SPECIFY)</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/></p> <p>(SPECIFY)</p>
<p>62. What was the main activity or product or service of the establishment that you worked for the above-mentioned job?</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/></p> <p>(SPECIFY)</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/></p> <p>(SPECIFY)</p> <p>L</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/></p> <p>(SPECIFY)</p>	<p>_____</p> <p>_____</p> <p>_____ <input type="text"/></p> <p>(SPECIFY)</p>
<p>63. With the above-mentioned job, were you?</p> <p><i>(Read out answer choices)</i></p> <p><b>ABBREVIATION:</b></p> <p>CONTR. – CONTRIBUTING</p>	<p>EMPLOYER.....1 <input type="checkbox"/></p> <p>OWN ACCOUNT WORKER.....2 <input type="checkbox"/></p> <p>FAMILY CONTRI. WORKER.....3 <input type="checkbox"/></p> <p>MEMBER OF COOPERATIVE..4 <input type="checkbox"/></p> <p>EMPLOYEE .....5 <input type="checkbox"/></p>	<p>EMPLOYER.....1 <input type="checkbox"/></p> <p>OWN ACCOUNT WORKER.....2 <input type="checkbox"/></p> <p>FAMILY CONTRI. WORKER.....3 <input type="checkbox"/></p> <p>MEMBER OF COOPERATIVE..4 <input type="checkbox"/></p> <p>EMPLOYEE .....5 <input type="checkbox"/></p>	<p>EMPLOYER.....1 <input type="checkbox"/></p> <p>OWN ACCOUNT WORKER.....2 <input type="checkbox"/></p> <p>FAMILY CONTRI. WORKER.....3 <input type="checkbox"/></p> <p>MEMBER OF COOPERATIVE..4 <input type="checkbox"/></p> <p>EMPLOYEE .....5 <input type="checkbox"/></p>	<p>EMPLOYER.....1 <input type="checkbox"/></p> <p>OWN ACCOUNT WORKER.....2 <input type="checkbox"/></p> <p>FAMILY CONTRI. WORKER.....3 <input type="checkbox"/></p> <p>MEMBER OF COOPERATIVE..4 <input type="checkbox"/></p> <p>EMPLOYEE.....5 <input type="checkbox"/></p>

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NAME AND SERIAL NUMBER QUESTION	[ ] [ ]	[ ] [ ]	[ ] [ ]	[ ] [ ]
<p>64. Does the last establishment that you worked belong to one kind of economic unit as follows?</p> <p><i>(Read out answer choices)</i></p> <p><b>ABBREVIATION:</b></p> <p>BUS. – BUSINESS ORG. – ORGANIZATION ASS. – ASSOCIATION</p>	FARM HOUSEHOLD ..... 01 <input type="checkbox"/>	FARM HOUSEHOLD ..... 01 <input type="checkbox"/>	FARM HOUSEHOLD .....01 <input type="checkbox"/>	FARM HOUSEHOLD..... 01 <input type="checkbox"/>
	OWN ACCOUNT INDIVIDUAL 02 <input type="checkbox"/>	OWN ACCOUNT INDIVIDUAL 02 <input type="checkbox"/>	OWN ACCOUNT INDIVIDUAL.02 <input type="checkbox"/>	OWN ACCOUNT INDIVIDUAL 02 <input type="checkbox"/>
	IN. BUS. ESTABLISHMENT.... 03 <input type="checkbox"/>	IN. BUS. ESTABLISHMENT.... 03 <input type="checkbox"/>	IN. BUS. ESTABLISHMENT ....03 <input type="checkbox"/>	IN. BUS. ESTABLISHMENT .... 03 <input type="checkbox"/>
	COLLECTIVE..... 04 <input type="checkbox"/>	COLLECTIVE..... 04 <input type="checkbox"/>	COLLECTIVE .....04 <input type="checkbox"/>	COLLECTIVE..... 04 <input type="checkbox"/>
	NON-STATE ENTERPRISE.... 05 <input type="checkbox"/>	NON-STATE ENTERPRISE.... 05 <input type="checkbox"/>	NON-STATE ENTERPRISE.....05 <input type="checkbox"/>	NON-STATE ENTERPRISE .... 05 <input type="checkbox"/>
	NON-STATE SERVICE UNIT.. 06 <input type="checkbox"/>	NON-STATE SERVICE UNIT .. 06 <input type="checkbox"/>	NON-STATE SERVICE UNIT .. 06 <input type="checkbox"/>	NON-STATE SERVICE UNIT.. 06 <input type="checkbox"/>
	STATE:	STATE:	STATE:	STATE:
	+ LEGISLATIVE, EXECUTIVE,	+ LEGISLATIVE, EXECUTIVE,	+ LEGISLATIVE, EXECUTIVE,	+ LEGISLATIVE, EXECUTIVE,
	JUDICAL AGENCY ..... 07 <input type="checkbox"/>	JUDICAL AGENCY ..... 07 <input type="checkbox"/>	JUDICAL AGENCY .....07 <input type="checkbox"/>	JUDICAL AGENCY ..... 07 <input type="checkbox"/>
	+ OGRANIZATION ..... 08 <input type="checkbox"/>	+ OGRANIZATION ..... 08 <input type="checkbox"/>	+ OGRANIZATION .....08 <input type="checkbox"/>	+ OGRANIZATION ..... 08 <input type="checkbox"/>
	+ SERVICE UNIT ..... 09 <input type="checkbox"/>	+ SERVICE UNIT ..... 09 <input type="checkbox"/>	+ SERVICE UNIT .....09 <input type="checkbox"/>	+ SERVICE UNIT ..... 09 <input type="checkbox"/>
	+ ENTERPRISE ..... 10 <input type="checkbox"/>	+ ENTERPRISE ..... 10 <input type="checkbox"/>	+ ENTERPRISE .....10 <input type="checkbox"/>	+ ENTERPRISE ..... 10 <input type="checkbox"/>
FOREIGN INVESTMENT ..... 11 <input type="checkbox"/>	FOREIGN INVESTMENT ..... 11 <input type="checkbox"/>	FOREIGN INVESTMENT .....11 <input type="checkbox"/>	FOREIGN INVESTMENT ..... 11 <input type="checkbox"/>	
OTHER ORG./ASS. .... 12 <input type="checkbox"/>	OTHER ORG./ASS. .... 12 <input type="checkbox"/>	OTHER ORG./ASS. ....12 <input type="checkbox"/>	OTHER ORG./ASS..... 12 <input type="checkbox"/>	

**65. CHECK 6: ASK THE NEXT RESPONDENT FOR "PART 2 AND PART 3" IF AVAILABLE ; OTHERWISE, END THE INTERVIEW.**

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## **SOME REMARKABLE CASES FOR CLASSIFYING THE ECONOMICALLY ACTIVE STATUS**

### **The priority mechanism for classifying the economically active status:**

- Firstly, “employment” rather than “unemployment” and “economical inactivity”.
- Secondly, “unemployment” rather than “economical inactivity”.

### **Regarded as “the employed”:**

*All those persons classified into the following cases are regarded as “the employed”:*

- Those persons who are in the temporary absence from work (due to any kind of reason) have continuously received wages/salaries/profits from productive or business activities or are going to return work for less than 1 month.
- Those students/pupils/retired persons, who in the reference period, did any kind of job for at least 1 hour to generate income.
- Those job seekers, who in the reference period, did any kind of job for at least 1 hour to generate income.
- Those participators of unemployment insurance (including both registrators and receivers), who in the reference period, did any kind of job for at least 1 hour to generate income.
- Those trainees/apprentices/interns/learners who are paid salaries/wages.

### **Regarded as “the unemployed”:**

*All those persons classified into the following cases are regarded as “the unemployed”:*

- Those students/pupils/retired persons, who in the reference period, were seeking job (for full time or part time) and ready to work.
- Those homemakers (that is, taking domestic works for their own families) who in the reference period, were seeking job (for full time or part time) and ready to work.

### **Regarded as “the economically inactive”:**

*All those persons classified into the following cases are regarded as “the economically inactive”:*

- Those homemakers (that is, taking domestic works for their own families)
- Those unpaid volunteers, engaging into unpaid charity, humanity, voluntary activities
- Those unpaid trainees/learners/apprentices (including interns)
- Those seasonal workers who were not working, looking for job and unready to work in the off season.
- Those persons who have received incomes from retirement welfares, supports or transfers/disposition of property by cash or other kinds (bank interest, share returns, gifts,...).