# Provincial Processing Manual

**2010 CPH**

*Kabilang Ako!*

## 2010 Census of Population and Housing

**National Statistics Office**
**Philippines**

PROVINCIAL PROCESSING MANUAL

2010 Census of Population and Housing

# Provincial Processing Manual

# FOREWORD

The census questionnaires accomplished during the enumeration phase of the 2010 Census of Population and Housing (2010 CPH) in May 2010 shall undergo processing to come up with accurate and reliable data on population and housing.  It is the aim of 2010 CPH to provide government planners, policy makers, and administrators with these data on which to base their social and economic development plans and programs.

Activities and procedures during manual processing shall ensure that all accomplished questionnaires are accounted for, errors found in the questionnaires are corrected, and all write-in entries are converted into readable codes for machine processing.  In order to accomplish these tasks, it is important that all personnel involved in the processing of the data collected should be familiar with the enumeration and processing procedures.

This **Provincial Processing Manual** was prepared to guide the Provincial Staff during the manual processing of census forms.  This manual defines the scope of each phase of manual processing.  It also provides information and instructions on manual processing that shall be strictly followed by all personnel involved in manual processing.  Sound judgment in the course of manual processing work will is of utmost important.

Personnel involved in manual processing are expected to play a vital role in the 2010 CPH overall processing.  The quality of data that will be released from the census depends not only on the data collectors but also on the people who will prepare the questionnaires for machine processing.

**CARMELITA N. ERICTA**
Administrator

Manila, Philippines
April 2010

# CONTENTS

# LIST OF APPENDICES

# LIST OF ILLUSTRATIONS

# LIST OF ABBREVIATIONS AND ACRONYMS

| | |
|---|---|
| ACAS | Assistant Census Area Supervisor |
| BSN | Building Serial Number |
| CAS | Census Area Supervisor |
| CO | Central Office |
| CPC | Census Processing Center |
| 2010 CPH | 2010 Census of Population and Housing |
| CPH Form | Census of Population and Housing Form |
| DSO | District Statistics Officer |
| EA | Enumeration Area |
| EARF | Enumeration Area Reference File |
| EN | Enumerator |
| Geo-ID | Geographic Identification |
| FO | Field Office |
| HSD | Household Statistics Department |
| HSN | Household Serial Number |
| HUSN | Housing Unit Serial Number |
| ICR | Intelligent Character Recognition |
| IP | Indigenous Peoples |
| ISCO | International Standard Classification of Occupations |
| ISIC | International Standard Industrial Classification |
| ISN | Institutional Serial Number |
| NSCB | National Statistical Coordination Board |
| NUR | Non-usual Resident |
| PO | Provincial Office |
| PMR | Progress Monitoring Report |
| PMS | Progress Monitoring System |
| PSO | Provincial Statistics Officer |
| PSCED | Philippine Standard Classification on Education |
| RD | Regional Director |
| RO | Regional Office |
| RCC | Receipt and Control Clerk |
| SAQ | Self-Administered Questionnaire |
| SMS | Short Message Service (text messaging) |
| SCO | Statistical Coordination Officer |
| TRACS | Tracking, Receipt and Control System |
| TS | Team Supervisor |
| VBLDG | Vacant Building |
| VHU | Vacant Housing Unit |
| VRH | Vacation or Rest House |

# 1
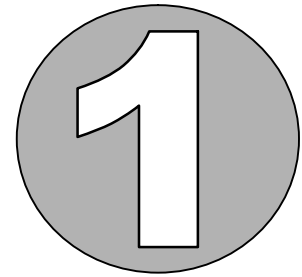
# INTRODUCTION

The 2010 Census of Population and Housing (2010 CPH) data collection is a huge and complex undertaking. Ensuring the highest quality standards in all phases is of utmost importance in every census. Quality of census returns can be ensured by undertaking data processing prior to generation of data, that is, all accomplished census forms shall undergo processing, which consists manual and machine data processing.

*Manual Processing involves receipt and control of forms and maps; verification of geographic identification and completeness of forms and maps; review of entries for completeness, consistency, and acceptability of responses; coding of selected items; document preparation; and bundling/packaging of forms.*
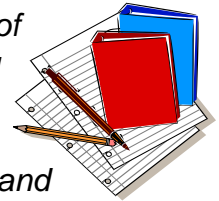
*Machine Processing involves receipt and control of forms, scanning of forms and maps to provide digital copies (images), data entry/interpretation, and key verification of write-in entries. It also includes computer editing of entries for completeness and consistency of data items within and between records, imputation of missing entries, and consolidation of data according to predetermined table formats.*

Provincial Offices (POs) of the National Statistics Office (NSO) shall be responsible for manual processing. On the other hand, machine processing shall be done at the **2010 Census Processing Center (CPC 2010)** to be set up in different host Regional Offices (ROs) throughout the country. CPC 2010 shall also be responsible for preliminary tabulation of selected demographic characteristics which will be used for evaluation by Field Offices (FOs) and the Central Office (CO). Further processing of data shall be done at the CO for final tabulation.

This Provincial Processing Manual shall serve as guide for the entire manual processing operations of the PO. A separate manual is prepared as guide for machine processing at the CPC 2010.

## 1.1 OBJECTIVES OF MANUAL PROCESSING

Manual processing of CPH forms aims to:

- account all questionnaires to be processed;
- correct the errors found in the questionnaires for consistency and reliability;
- convert write-in entries into machine readable format; and
- prepare the questionnaires for machine processing.

The objectives of manual processing of maps, meanwhile, are to:

- account all maps to be processed;
- verify these maps against their corresponding CPH Form 1; and
- prepare the maps for machine processing.

## 1.2 MAJOR ACTIVITIES OF MANUAL PROCESSING AT THE PROVINCIAL OFFICE

These are the activities during the processing operation at PO:

a. checking for the completeness of accomplished listing booklets (CPH Form 1), Barangay Schedule (CPH Form 5), and Barangay/ Enumeration Area (EA)/Block maps vis-à-vis the Enumeration Area Reference File (EARF), and the completeness of accomplished questionnaires (CPH Forms 2, 3, and 4) vis-à-vis CPH Form 1;

b. examining of the geographic identification (geo-ID) of each form to ensure that appropriate codes are reflected;

c. checking for the sequential arrangement of the questionnaires based on their geo-ID (including the serial numbers of the building, housing unit, household, and/or institutional living quarter);

d. checking for the completeness and consistency of entries between data items in the questionnaires;

e.　checking for clarity and legibility of entries;

f.　checking for appropriateness of codes corresponding to the write-in entries;

g.　coding of the write-in entries for residence 5 years ago, highest grade/year completed, place of school, usual occupation, kind of business/industry, place of work, and residence 5 years from now; and

h.　other necessary preparation of the questionnaires and forms for machine processing, such as spreading and bundling of questionnaires.

Processing of maps will be done after all the census forms have been processed. Separate instructions for the processing of maps shall be provided.

## 1.3 FORMS AND MAPS TO BE PROCESSED AT THE PROVINCIAL OFFICE

Below is the list of forms to be processed at PO:

a.　*CPH Form 1 – Listing Booklet* was used to list the buildings, housing units, households, and institutional living quarters (ILQs) within an EA. It also contains other information pertaining to the population of households and ILQs.

b.　*CPH Form 2 – Common Household Questionnaire* was used to record information about the common or nonsample households. This questionnaire gathers information on the following demographic and socio-economic characteristics of the population: relationship to household head, sex, date of birth, age, birth registration, marital status, religious affiliation, citizenship, ethnicity, disability, functional difficulty, residence 5 years ago, highest grade/year completed, and overseas worker. It also contains questions on the type of building/house, construction materials of the roof and outer walls, state of repair of the building/house, year building/house was built, floor area of the housing unit, and tenure status of the lot.

c. *CPH Form 3 – Sample Household Questionnaire* was used to record information about the sample households. This questionnaire contains ALL questions asked in CPH Form 2 with additional population, household, and housing questions. The additional questions on population characteristics are: literacy, school attendance, place of school, usual occupation, kind of business/industry, class of worker, place of work, and some fertility indicators. Additional questions on household characteristics, meanwhile, are: fuel for lighting and cooking, source of water supply for drinking, cooking, and laundry and/or bathing, tenure status of the housing unit, acquisition of the housing unit, source of financing of the housing unit, monthly rental of the housing unit, tenure status of the lot, usual manner of garbage disposal, kind of toilet facility, and land ownership. Also asked are questions on language/dialect generally spoken at home, residence 5 years from now, presence of household conveniences/availability of information and communications technology (ICT) devices, and access to internet.

d. *CPH Form 4 – Institutional Population Questionnaire* was used to record information about persons who are considered part of the institutional population. It contains questions on residence status, sex, date of birth, age, birth registration, marital status, religious affiliation, citizenship, ethnicity, disability, functional difficulty, and highest grade/year completed.

e. *CPH Form 5 – Barangay Schedule* was used to record the physical characteristics of each barangay, presence of establishments and service facilities in the area, as well as travel information of the barangay.

f. *Barangay/EA/Block Maps – Mapping Form* was used to plot buildings, either vacant or occupied by households, and ILQs. This was also used to map a block of an EA/barangay in large or congested areas.

These forms and the barangay/EA/block maps should be contained in the EA pack submitted by the District Statistics Officer (DSO) or Statistical

Coordination Officer (SCO) to PO. During manual processing, an EA pack containing these set of forms and maps will be assigned to PO personnel for receipt and control, editing, coding, and verification.

## 1.4 SYSTEMS TO BE USED AT THE PROVINCIAL OFFICE

The following are the descriptions of the systems to be used by PO personnel during manual processing:

a. *Tracking, Receipt and Control System (TRACS)*

TRACS was developed to serve as the electronic logbook of PO personnel during provincial processing. It records the receipt and control of questionnaires and maps transmitted by DSO/SCO to PO. Within PO, the system is able to track the flow of accomplished questionnaires as they proceed to the various stages of manual processing. The system is also able to generate summary and status reports of manual processing for progress monitoring.

b. *Electronic Library*

This is a software application of Codebook, Philippine Standard Classification of Education (PSCED), Philippine Standard Occupational Classification (PSOC), and Philippine Standard Industrial Classification (PSIC) which shall be used as a quick electronic reference for coding and verifying of codes for the items on religious affiliation, country of citizenship, ethnicity, residence 5 years ago, highest grade/year completed, place of school, usual occupation, kind of business/industry, class of worker, place of work, language/dialect generally spoken at home, and residence 5 years from now.
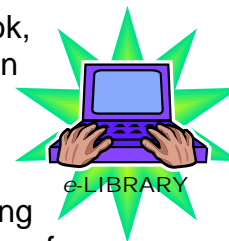
## 1.5 TIMETABLE OF ACTIVITIES

The quality and timeliness of the final census results will greatly depend on the manual processing at PO. Before submitting CPH forms and maps to CPC 2010, the PO Supervisors should ensure that all forms and maps are subjected to manual processing and that the timetable is strictly followed. The general schedule of

manual processing activities is shown below. The detailed timetable of manual processing by province is shown in Appendix 1 on pages 147 to 149.

**Table 1. Schedule of Manual Processing Activities at the Provincial Office**

| Activity | Beginning Date | End Date |
|---|---|---|
| 1. Third Level Training for manual processing and TRACS at PO | June 14, 2010 | June 18, 2010 |
| 2. Manual processing of accomplished CPH Forms 1, 2, 3, 4 and 5, and maps | June 21, 2010 | August 14, 2010 |
| 3. Submission to CPC 2010<br><br>   a. Manually processed CPH Forms 2, 3, and 4 CPH Forms 1 and 5, and maps<br><br>   b. Data file of TRACS | June 28, 2010 | August 21, 2010 |
| 4. Preparation and submission of narrative report on processing to CO | August 16, 2010 | October 30, 2010 |

The first four days of the third level training will be devoted to the discussion of processing manual and will be attended by the Assistant Supervisor, Processors, and Receipt and Control Clerk (RCC). The training for the use of electronic library of Codebook, PSCED, PSOC, and PSIC will be attended by verifiers and coders a week after their selection. Selection of coders and verifiers will be discussed on Section 2.3 on page 13.

# 2

# PROVINCIAL OFFICE PROCESSING SET-UP

This chapter discusses the organizational set-up of PO during manual processing. The duties and responsibilities of the PO personnel are also discussed to serve as guides in performing their assigned tasks.

## 2.1 ORGANIZATIONAL SET-UP OF PROVINCIAL OFFICE DURING MANUAL PROCESSING

Activities that comprise the manual processing of the PO need to be well defined and planned to ensure the smooth flow of its operations. Each member of the unit should understand its organizational set-up to perform his/her tasks effectively and efficiently.

ILLUSTRATION 2.1
ORGANIZATIONAL SET-UP OF PROVINCIAL OFFICE
DURING MANUAL PROCESSING

```
                    ┌─────────────────────────┐
                    │          PSO            │
                    └─────────────────────────┘
                                 │
                    ┌─────────────────────────┐
                    │       Supervisor        │
                    │ (Provincial Statistician)│
                    └─────────────────────────┘
                                 │
              ┌──────────────────────────────────────┐
              │         Assistant Supervisor          │
              │ (Provincial Assistant Statistician or Hired) │
              └──────────────────────────────────────┘
                                 │
        ┌────────────────────┬──────────────────┬──────────────────┐
  ┌──────────────┐   ┌──────────────┐   ┌──────────────┐
  │  Processor   │   │ Receipt and  │   │Utility Worker│
  │(Hired Editor,│   │Control Clerk │   │   (Hired)    │
  │Coder,Verifier│   │  (Hired)     │   │              │
  │or Cartographer)│ └──────────────┘   └──────────────┘
  └──────────────┘
```
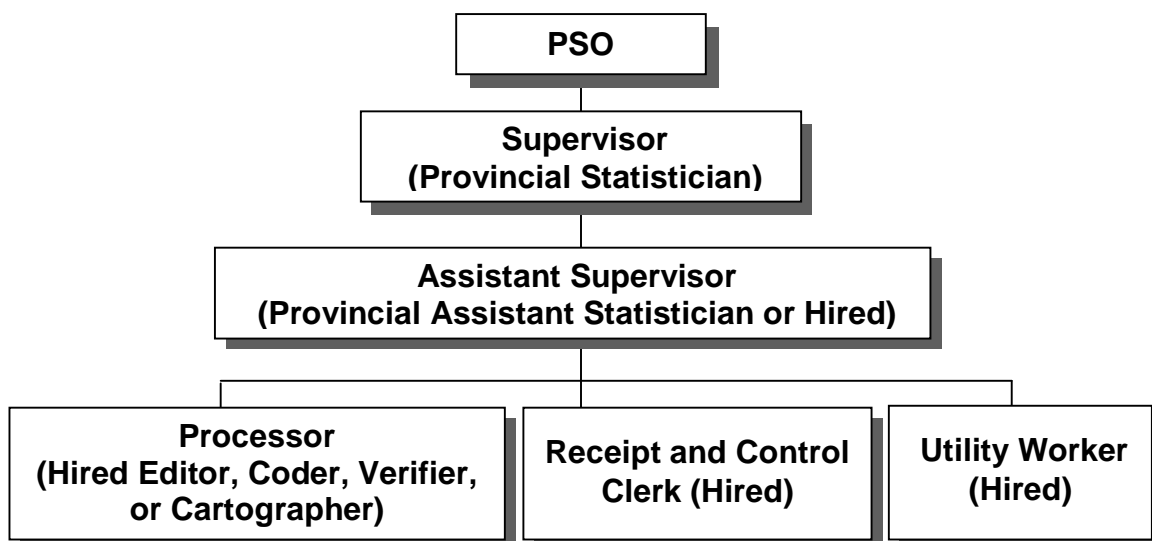
The Provincial Statistics Officer (PSO) will spearhead PO during manual processing. He/she will be assisted by a Supervisor (Provincial Statistician) who will take charge of the daily operations of the manual processing, and an Assistant Supervisor (Provincial Assistant Statistician or hired staff) who will assist the Supervisor during manual processing operations. Hired processors (editors, coders, verifiers, and cartographers) will work under them. The supervisors shall see to it that the accomplished forms are ready for machine processing. The hired Receipt and Control Clerk (RCC), on the other hand, will be responsible for tracking the flow of questionnaires in every stage of manual processing. Further, there will be a hired Utility Worker who will provide assistance to PO personnel in their work during manual processing.

## 2.2 DUTIES AND RESPONSIBILITIES OF PERSONNEL DURING MANUAL PROCESSING

The duties and responsibilities of every personnel of PO are listed below.

The **Provincial Statistics Officer** shall:

a. designate the Provincial Statistician and Provincial Assistant Statistician to serve as Supervisor and Assistant Supervisor, respectively, for manual processing;

b. see to it that the operation and quality control procedures outlined in this manual are properly carried out during processing;

c. monitor the activities to determine problems of the supervisors and processors and to resolve these problems accordingly;

d. review the progress report and periodically assess the compliance of the province with the timetable of the provincial manual processing, and formulate necessary plans to meet the timetable;

e. accomplish sample verification of at least two percent of the processed CPH Forms 1, 2, 3, and 4; and

f. ensure complete verification of CPH Form 5 and processing of maps.

The **Supervisor** shall:

a. take charge of the daily operations of manual processing;

b. distribute assignment of CPH forms to the Editors, Coders, and Verifiers, and assess performance of these personnel from time to time;

c. evaluate the progress of manual processing based on the generated status report and submit said report to PSO;

d. accomplish sample verification of at least 10 percent of the processed CPH Forms 1, 2, 3, and 4;

e. perform complete verification of CPH Form 5 and maps;

f. supervise the transmittal of manually processed forms and databases of TRACS to CPC 2010 every week, and the submission of maps to CPC 2010 after all the forms have undergone manual processing;

g. implement action plans to meet scheduled completion of processing; and

h. perform other activities that may be required by the PSO.

The **Assistant Supervisor** shall:

a. assist the supervisor in the daily operations of manual processing;

b. assist the RCC in the generation of TRACS status report;

c. ensure that the assignment of Editors, Coders, and Verifiers are accomplished on time;

d. accomplish sample verification of at least 10 percent of the processed CPH Forms 1, 2, 3, and 4;

e. review all CPH Form 5 for completeness, consistency, and legibility;

f. ensure completeness of barangay/EA/block maps;

g. assist in the implementation of action plans to meet timetable of processing; and

h. perform other activities that may be required by the Supervisor.

For large provinces, the Assistant Supervisor is hired. For the rest of the provinces, the Provincial Assistant Statistician shall be designated as Assistant Supervisor.

The **Processors** shall be directly responsible for the preparation of the questionnaires that will be scanned at CPC 2010. These personnel are hired and may be assigned as an Editor, Coder, or Verifier. The selection process for Coders and Verifiers is discussed in Section 2.3 (page 13).

The descriptions of the tasks of Processors are specified below.

Processors assigned as **Editors** shall:

a. check for the completeness of questionnaires;

b. check if CPH Forms 2 and 3 are properly bundled;

c. verify the geo-ID of CPH Forms 1, 2, 3, 4, and 5, as well as the maps;

d. check for the legibility of entries and acceptability of questionnaires for machine processing;

e. ensure that all applicable items in CPH forms have entries;

f. check for the consistency of entries in the questionnaires (CPH Forms 1, 2, 3, and 4);

g. check the consistency of write-in entries and codes supplied by the ENs;

h. transcribe entries from CPH Form 2 that were used in enumerating institutional population to CPH Form 4; transcribe damaged forms with indistinguishable entries due to unnecessary marks, folds, and deterioration to new questionnaires; and transcribe questionnaires with no serial numbers (that is, questionnaires for the training but were used during enumeration) to questionnaires with serial numbers;

i. assist in the document preparation of processed forms for machine processing; and

j. perform other activities that may be required by the Supervisors.

Processors assigned as **Coders** shall:

a. enter the appropriate codes for the following items**:**

| Item | CPH Form | | |
|---|---|---|---|
| | 2 | 3 | 4 |
| Residence 5 years ago | ✓ | ✓ | |
| Highest grade/year completed for post secondary and college courses | ✓ | ✓ | ✓ |
| Place of school | | ✓ | |
| Usual occupation | | ✓ | |
| Kind of business or industry | | ✓ | |
| Place of work | | ✓ | |
| Residence 5 years from now | | ✓ | |

b. perform other activities that may be required by the Supervisors.

Processors assigned as **Verifiers** shall:

a. accomplish sample verification of the assignment of all Editors and Coders of at least 20 percent for CPH Forms 1, 2, 3, and 4; and

b. perform other activities that may be required by the Supervisors.

The **Cartographer** shall:

a. keep an inventory of all maps in the province;

b. update city/municipality, barangay, and EA maps;

c. construct barangay maps for barangays that have no sketch maps by extracting these from the municipal map and redraw/sketch EA maps with plotted households;

d. manually process barangay/EA/block maps to be used for machine processing;

e. prepare other progress reports in connection with mapping work done in PO; and

f. perform other activities that may be required by the Supervisors.

The **Receipt and Control Clerk (RCC)** shall:

a. receive and check the questionnaires, barangay/EA maps, and other census forms and materials (manuals and others) submitted by DSOs/SCOs against EARF and CPH Form 13;

2010 CPH

b.  keep track of the flow of documents within PO during manual processing;

c.  encode the dates the questionnaires were received, edited, coded, and verified using TRACS, and record these also in CPH Form 19 (Provincial Processing Receipt and Control Form);

d.  assist in checking the geo-ID and completeness of CPH Forms 2, 3, 4, and 5, and maps vis-à-vis CPH Form 1;

e.  see to it that the questionnaires and maps are properly arranged in the designated racks during manual processing;

f.  bundle CPH Forms 1, 2, 3, 4, and 5, and maps, folio other control forms, and prepare the questionnaires for machine processing;

g.  prepare and record using TRACS the transmittal of processed questionnaires and maps to CPC 2010;  and

h.  perform other activities that may be required by the Supervisors.

The **Utility Worker** shall:



a.  help in retrieving and returning questionnaires/maps from/to the racks during manual processing;

b.  pack the questionnaires and maps for transmittal to CPC 2010;

c.  perform repetitive and routine general services;

d.  maintain orderliness and cleanliness in the office;

e.  reproduce various forms as directed;

f.  distribute messages and correspondence received to employees concerned;

g.  perform liaison and messenger-related works within and outside the office; and

h.  perform other activities that may be required by the Supervisors.

Most of the detailed duties and responsibilities of each personnel in every stage of manual processing are discussed in the succeeding chapters.

# 2.3 SELECTION OF CODERS AND VERIFIERS

During the first week of manual processing, all hired Processors shall review, edit, and code all items in the questionnaires.  Each Processor will be given an EA pack to process.  The Processors will check for the completeness and acceptability of CPH forms, check the codes of write-in entries supplied by the ENs, and code other write-in entries.  The completed work of each Processor shall be the basis for selecting Coders and Verifiers.

The Supervisor and Assistant Supervisor shall identify processors who will serve as coders or verifiers. Selection of Coders is done to establish specialization in coding and increase the accuracy and speed of coding census items. Verifiers, on the other hand, will be selected by the PSO, upon the recommendation of the Supervisors, from the rank of processors.  They must be the best among the processors.  Before the Coders and Verifiers assume their new assignment, the PSO and Supervisor shall brief them on the procedures for coding of census items and verification of these codes with respect to the corresponding write-in entries in the questionnaires.

Listed below are the procedures to be followed by the Supervisor and Assistant Supervisor in selecting coders and verifiers:

a. Verify at least one EA pack done by each processor on a 100 percent basis;

b. Use CPH Form 20 (Verification Form for CPH Forms 1, 2, 3, 4, and 5) to record the errors committed by the processors;

c. Rank the processors according to the number of errors committed in editing and coding the questionnaires; and

d. Select and recommend verifiers who committed the least number of errors in editing and coding. Select and recommend also coders who committed the least number of errors in coding the items.

# 3

# PROVINCIAL PROCESSING FORMS AND FLOW

This chapter presents the different forms to be used during manual processing and the flow of provincial processing operation that shall be followed by the PO personnel.

## 3.1 PROVINCIAL PROCESSING FORMS

Different processing forms will be used to monitor the flow of census materials and to keep track of the questionnaires assigned to Processors. These forms shall help PO in ensuring that no CPH form is lost or missed during the manual processing phase. They shall also be used to monitor if the operation is progressing at the required pace. These forms are:

a. *CPH Form 13 – Transmittal/Receipt Form* will be used to transmit edited forms from PO to CPC 2010, and to transmit forms that are for verification from RCC to DSO/SCO, and vice-versa. Information in this form includes the type and quantity of materials received and transmitted by area, date the materials were transmitted and received, and names of transmitting and receiving personnel (see Appendix 2 on page 150).

b. *CPH Form 14 – CPH Form 1 or 5 Bundle Cover* will be used to cover the bundled CPH Form 1 or 5. It contains information on the geo-ID of the bundled forms, type of form, and number of questionnaires in the bundle. For CPH Form 1, the names and geographic codes of the EAs/barangays contained in the bundle (Bundle Contents) are also included. Other information found in this form includes the Processing Record of CPH Form 1 or 5 to be done at PO and CPC 2010 (see Appendix 3 on page 151).

c. *CPH Form 14A – CPH Form 4 Bundle Cover* is similar to CPH Form 14 but will be used to cover the bundled CPH Form 4 (see Appendix 4 on page 152).

d. *CPH Form 15 – CPH Form 2 Bundle Cover* will be used to cover the bundled CPH Forms 2. This form contains information on the geo-ID and number of the questionnaires in the bundle. Other information included in this form are the Processing Record of activities done by ACAS/CAS, DSO/SCO, PO, and CPC 2010 (see Appendix 5 on page 153).

e. *CPH Form 15A – CPH Form 3 Bundle Cover* is similar to CPH Form 15 but will be used to cover the bundled CPH Form 3 (see Appendix 6 on page 154)

f. *CPH Form 19 – Provincial Processing Receipt and Control Form* is a computer-generated form to monitor the flow of forms and maps being manually processed. It will also keep track of the progress of manual processing by activity. This form will serve as a hardcopy file of the contents of the TRACS database (see Appendix 7 on page 155).

g. *CPH Form 20 – Verification Slip for CPH Form 1, 2, 3, 4 or 5* will be used by the Verifier and Supervisor for sample verification of questionnaires to ensure that manual processing instructions are correctly followed by the Processors. This form will also be used by the Supervisors in identifying potential Verifiers/Coders from among the Processors (see Appendix 8 on page 156).

h. *CPH Form 21 – Record of Missing/Extra Questionnaires* will be used in recording the geo-ID and serial number of buildings, housing units, households, and/or ILQs from the questionnaires listed in CPH Form 1 that are reported as missing/extra. This should be accomplished per EA/barangay (see Appendix 9 on page 157).

i. *CPH Form 22 – Manual Processor's Daily Accomplishment Report* will be used during manual processing to record and monitor the work of Processors on a daily basis (see Appendix 10 on page 158).

j. *CPH Form 24 – Problems Referral Form* will be used in recording inconsistencies or problems encountered by the Processors during processing that are FOR REFERRAL to their Supervisors (see Appendix 11 on page 159).

k. *CPH Form 25 – Summary of Unused Serial Numbers Form* will be used in recording the missing/unused serial number of buildings, housing units, households, and/or ILQs.  This should be accomplished

per barangay/EA and should be submitted to CPC 2010 together with CPH Forms 2, 3, and 4 (see Appendix 12 on page 160).

l. *CPH Form 28 – Map Bundle Cover* will be used to cover the bundled barangay/EA/block maps. It contains information on the geo-ID of the bundled maps, and number of maps in the bundle. Names and geographic codes of the EAs/barangays contained in the bundle (Bundle Contents) are also included. Other information found in this form includes the Processing Record of maps to be done at PO and CPC 2010. A soft copy of this form will be provided to POs. (see Appendix 13 on page 161).

Illustrations on how to accomplish most of the aforementioned forms are discussed in the succeeding chapters of this manual.

# 3.2 REFERENCE MATERIALS FOR CODING

Aside from this manual, the following books for coding will be utilized:

- *Philippine Standard Classification of Education (PSCED)* for coding of the educational degrees/courses obtained;

- *Philippine Standard Occupational Classification (PSOC)* for coding of usual occupation;

- *Philippine Standard Industrial Classification (PSIC)* for coding of kind of business or industry; and

- *Codebook* for verification and coding of items on relationship to household head, age as of last birthday, religious affiliation, country of citizenship, ethnicity, residence 5 years ago, highest grade/year completed, place of school, class of worker, place of work, language/dialect generally spoken at home, and residence 5 years from now.
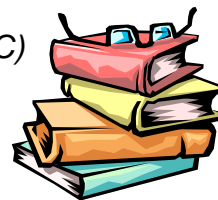
As mentioned in Section 1.4 (page 5), an electronic copy of the Codebook, PSCED, PSIC, and PSOC will be installed at PO as quick reference and back-up, in case a code for a specific item is difficult to find using the printed copy.

# 3.3 FLOW OF ACTIVITIES DURING MANUAL PROCESSING

Several stages of processing will be done at PO from the submission of accomplished CPH forms and maps by DSO/SCO to the transmittal of processed CPH forms and maps to CPC 2010. In between these activities, CPH forms and maps will pass through editing, coding, and verification, which will be received and controlled for monitoring purposes. The flow of provincial processing activities is discussed below and presented in Illustration 3.1.

## A. Receipt of Census Returns

1. A week after the enumeration period, DSOs/SCOs should already be submitting census returns to PO. The RCC checks the forms and maps submitted against CPH Form 13 and EARF to ensure that all forms are accounted for and that all EAs/barangays in the province have corresponding census returns and maps.

2. The RCC then encodes the date and quantity of forms and maps received as reported in CPH Form 13 to the computer using TRACS, and record these information also in CPH Form 19.

3. The RCC also forwards the last batch of submitted CPH Form 10 to his/her Supervisor for verification of PM text messages that were sent to CO.

4. The RCC sets aside CPH Forms 7 and 8 if these are bundled in EA pack of CPH Forms 2 and 4, respectively. CPH Forms 11 and 12, and other forms should be set aside for folioing.

## B. Completeness Checking of Accomplished CPH Forms and Maps

5. Upon instruction of the Supervisor, the RCC distributes the EA packs to the Editors who will perform the verification of geo-ID and completeness check, that is, the general screening of each form.

6. The Editors will check if the accomplished CPH Forms 2, 3, 4, and 5 are properly bundled. He/she will also check if those listed in CPH Forms 1 have corresponding questionnaires (CPH Forms 2, 3 or 4). Any missing or extra accomplished form shall be reported using CPH Form 21.

7. After checking each EA pack for completeness, the RCC will separate CPH Form 5 and the maps from the rest of the forms in the EA pack for bundling.
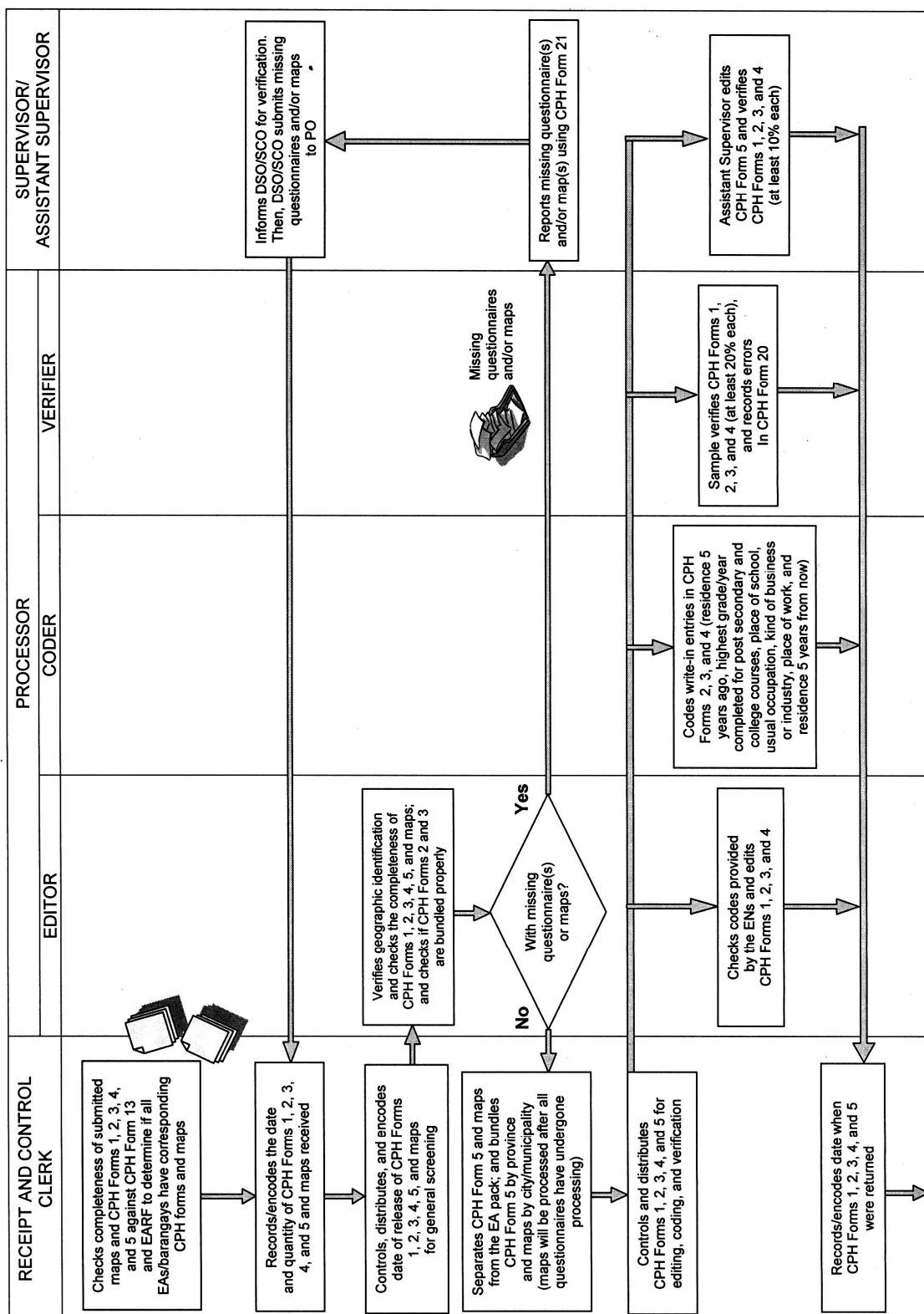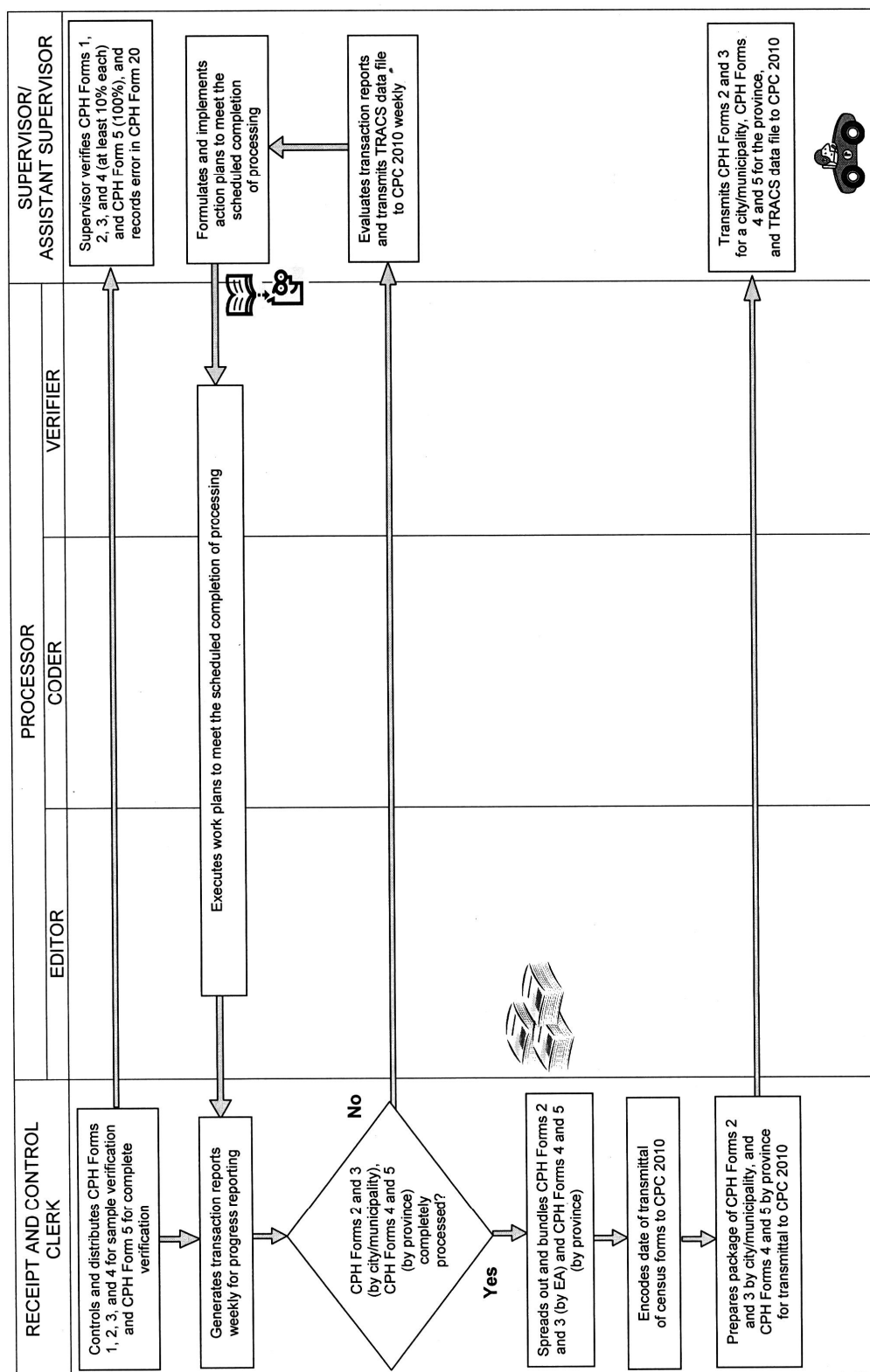
# ILLUSTRATION 3.1
# PROVINCIAL PROCESSING FLOW

**SUPERVISOR/ ASSISTANT SUPERVISOR**

- Informs DSO/SCO for verification. Then, DSO/SCO submits missing questionnaires and/or maps to PO
- Reports missing questionnaire(s) and/or map(s) using CPH Form 21
- Assistant Supervisor edits CPH Form 5 and verifies CPH Forms 1, 2, 3, and 4 (at least 10% each)

**VERIFIER**

- Missing questionnaires and/or maps
- Sample verifies CPH Forms 1, 2, 3, and 4 (at least 20% each), and records errors In CPH Form 20

**PROCESSOR**

**CODER**

- Codes write-in entries in CPH Forms 2, 3, and 4 (residence 5 years ago, highest grade/year completed for post secondary and college courses, place of school, usual occupation, kind of business or industry, place of work, and residence 5 years from now)

**EDITOR**

- Verifies geographic identification and checks the completeness of CPH Forms 1, 2, 3, 4, 5, and maps; and checks if CPH Forms 2 and 3 are bundled properly
- With missing questionnaire(s) or maps?  — Yes / No
- Checks codes provided by the ENs and edits CPH Forms 1, 2, 3, and 4

**RECEIPT AND CONTROL CLERK**

- Checks completeness of submitted maps and CPH Forms 1, 2, 3, 4, and 5 against CPH Form 13 and EARF to determine if all EAs/barangays have corresponding CPH forms and maps
- Records/encodes the date and quantity of CPH Forms 1, 2, 3, 4, and 5 and maps received
- Controls, distributes, and encodes date of release of CPH Forms 1, 2, 3, 4, 5, and maps for general screening
- Separates CPH Form 5 and maps from the EA pack; and bundles CPH Form 5 by province and maps by city/municipality (maps will be processed after all questionnaires have undergone processing)
- Controls and distributes CPH Forms 1, 2, 3, 4, and 5 for editing, coding, and verification
- Records/encodes date when CPH Forms 1, 2, 3, 4, and 5 were returned

## ILLUSTRATION 3.1
## PROVINCIAL PROCESSING FLOW (Continuation)



**SUPERVISOR/ASSISTANT SUPERVISOR**

- Supervisor verifies CPH Forms 1, 2, 3, and 4 (at least 10% each) and CPH Form 5 (100%), and records error in CPH Form 20
- Formulates and implements action plans to meet the scheduled completion of processing
- Evaluates transaction reports and transmits TRACS data file to CPC 2010 weekly
- Transmits CPH Forms 2 and 3 for a city/municipality, CPH Forms 4 and 5 for the province, and TRACS data file to CPC 2010

**PROCESSOR** — VERIFIER / CODER / EDITOR

- Executes work plans to meet the scheduled completion of processing

**RECEIPT AND CONTROL CLERK**

- Controls and distributes CPH Forms 1, 2, 3, and 4 for sample verification and CPH Form 5 for complete verification
- Generates transaction reports weekly for progress reporting
- CPH Forms 2 and 3 (by city/municipality), CPH Forms 4 and 5 (by province) completely processed? — **No** / **Yes**
- Spreads out and bundles CPH Forms 2 and 3 (by EA) and CPH Forms 4 and 5 (by province)
- Encodes date of transmittal of census forms to CPC 2010
- Prepares package of CPH Forms 2 and 3 by city/municipality, and CPH Forms 4 and 5 by province for transmittal to CPC 2010

**Important Notice:**

1. PSO spearheads manual processing and is the overall supervisor in the entire manual processing operation.
2. After all CPH Form 1 are verified and edited based on CPH Forms 2, 3, and 4, entries in CPH Form 10 and corresponding files will also be updated using the updated entries in CPH Form 1. Editor will update entries in CPH Form 10 while Supervisor will update the data file of CPH Form 10.
3. Bundles of CPH Form 1 are to be transmitted to CPC 2010 only after the verification of maps against these forms have been completed.
4. Bundles of maps are to be transmitted to CPC 2010 only after all of barangay/EA/block maps were manually processed.

2010 CPH
Kabilang Ako!

## C. Editing, Coding, and Verification of Accomplished CPH Forms

8. Upon instruction of the Supervisor, the RCC distributes to the Editors each EA pack containing CPH Forms 1, 2, 3, and/or 4 to check for completeness, consistency, and acceptability of entries. After editing, the Coders shall supply the codes for residence 5 years ago, highest grade/year completed for post secondary and college courses, place of school, usual occupation, kind of business or industry, place of work, and residence 5 years from now.

9. Once the questionnaires in an EA pack have been edited and coded, the Verifier will do at least 20 percent sample verification of CPH Forms 1, 2, 3, and 4. The Supervisor and Assistant Supervisor will also do a 10 percent sample verification of CPH Forms 1, 2, 3, and 4.  The errors committed by the Editors and Coders will be recorded in CPH Form 20.

10. The Assistant Supervisor will edit CPH Form 5 for completeness and legibility of entries while the Supervisor will do 100 percent verification of CPH Form 5.

## D. Transmittal of Processed CPH Forms and Maps

Once the processing of CPH Forms 2 and/or 3 for a city/municipality has been completed, these forms should be transmitted to CPC 2010 by city/municipality or in batches of municipalities.  CPH Forms 4 and 5 should be transmitted only after all cities/municipalities in the province are completely processed.

CPH Form 1 for a city/municipality will be transmitted only after the barangay/EA/block maps prepared by ENs have been verified against this form. Maps will be transmitted only after all of Barangay/EA/block maps for the province have been redrawn.  All these transactions during processing shall be recorded by the RCC in CPH Form 19 and encoded in the computer using TRACS.

# 4 RECEIPT AND CONTROL

This chapter discusses the procedures to be followed in the receipt and control of accomplished forms and maps. It also identifies the specific and important tasks of **RCC.**

## 4.1 RECEIPT AND CONTROL AT THE PROVINCIAL OFFICE



The DSO/SCO shall submit the boxes containing 2010 CPH questionnaires, maps, and other census forms and materials to PO as soon as the enumeration in a city/municipality or group of cities/municipalities is completed. The boxes submitted should contain the following:

a. CPH Form 1 – Listing Booklet
b. CPH Form 2 – Common Household Questionnaire
c. CPH Form 3 – Sample Household Questionnaire
d. CPH Form 4 – Institutional Population Questionnaire
e. CPH Form 5 – Barangay Schedule
f. CPH Form 7 – Common Household SAQ Instructions
g. CPH Form 8 – Institutional Population SAQ Instructions
h. CPH Form 9 – Appointment Slip to Household/Institutional Population Respondent
i. CPH Form 10 – EN's Accomplishment/Progress Monitoring Report
j. CPH Form 11 – Weekly Progress Report of CAS/ACAS/TS
k. CPH Form 12 – Re-interview/Spot-check Record
l. CPH Form 13 – Transmittal/Receipt Form
m. CPH Forms 17 – Certification of Barangay Chairperson
n. Barangay/EA/Block Maps
o. Mapping forms

p.  2010 CPH Identification Card

q.  Manuals and unused forms

Upon receipt of the boxes, the RCC must:

a.  Check the contents of the boxes received against the accompanying CPH Form 13.  All forms and maps listed in CPH Form 13 must be accounted for. If incomplete, inform the Supervisor so that the DSO/SCO concerned will be notified of the discrepancy.  Refer to the EARF to check for the completeness of the submitted forms and maps and for the verification of geographic codes in CPH Form 13.  If some areas (city/municipality, barangay, and EA) indicated in CPH Form 13 do not have codes or had wrong codes, provide or correct the codes in CPH Form 13 based on the EARF.

b.  Encode in the computer using TRACS the number of CPH Forms 1, 2, 3, 4, and 5, and barangay/EA/block maps reported in CPH Form 13. Enter remarks in the system if there are discrepancies between the actual counts of CPH forms/maps received and the counts reported in CPH Form 13.  This should be tagged as "**pending**" or "**subject for verification**."   Such EA pack will not be processed until it is cleared by the Supervisor. Detailed procedures in using TRACS are discussed in the TRACS User's Manual.

c.  Fill out also CPH Form 19 by recording the number of CPH Forms 1, 2, 3, 4, and 5, and barangay/EA/block maps received.

d.  Give the folio of CPH Forms 10 and 17 to your Supervisor for verification of PM Report 2 (SMS Transaction Record). This is the last batch of CPH Form 10 that shall be received by the PO.

e.  Set aside CPH forms that are not to be manually processed, such as CPH Forms 11 and 12 and the administrative forms for folioing. Refer to Section 10.5 on page 137 for instructions on folioing of other forms.

f.  Also, set aside the manuals and unused forms and give these to your supervisor.

g.  File the EA packs in designated racks.  In doing so, the RCC shall label each EA pack and see to it that the label is facing him/her for easy retrieval during processing.

# 4.2 RECEIPT AND CONTROL WITHIN THE PROVINCIAL OFFICE

The RCC shall be responsible for controlling the flow and distribution of documents within the PO.  He/she must know where a particular EA pack or any other form is located or who is processing the said forms.  Specifically, the RCC shall:

a. control and, upon instruction of the supervisor, distribute EA pack(s) to the Processor who will be responsible for the general screening of forms and maps to determine their completeness and the correctness of geo-ID codes;

b. bundle CPH Form 5 and maps separately from the EA pack;

c. control and, upon instruction of the supervisor, distribute EA pack(s) containing CPH Forms 1, 2, 3, and 4 to Processors responsible for editing or coding;

d. record the contents of each EA pack returned by the Editors and Coders;

e. place the processed EA packs in the designated rack, which will be given to the Verifier, Assistant Supervisor, Supervisor, and the PSO for verification;

f. control and distribute, upon instruction of the supervisor, the EA packs (containing CPH Forms 1, 2, 3, and 4) to be verified;

g. control and give CPH Form 5 to the Assistant Supervisor for editing and later to the Supervisor for complete verification; and

h. record the dates in CPH Form 19 when CPH forms are released for editing, coding, and verification and ask the Processor, Assistant Supervisor or Supervisor to write his/her initial beside the date.  Record also the dates when CPH forms are returned and write your initial beside the date.  Encode these dates in the computer.  Example of accomplished CPH Form 19 is shown in Illustration 4.1 on page 25.

# 4.3 RECEIPT AND CONTROL FROM THE PROVINCIAL OFFICE TO THE 2010 CENSUS PROCESSING CENTER

Once all CPH Forms 2 and 3 bundles of a city/municipality or bundles of CPH Forms 4 and 5 of the province have undergone processing and verification,

2010 CPH

and CPH Form 1 have been verified against barangay/EA/block maps of a city/municipality, the RCC shall:

a. inform the Supervisor that CPH forms and maps are ready for transmittal to the CPC 2010;

b. record in CPH Form 19 the number of forms by type and maps and the date the bundles are transmitted to CPC 2010;

c. generate CPH Form 13 using TRACS; and

d. ensure that all forms and maps in CPH Form 13 are accounted for in the boxes for transmittal.

# ILLUSTRATION 4.1
# FILLED OUT CPH FORM 19
# (Provincial Processing Receipt and Control Form)

CPH Form 19

Republic of the Philippines
NATIONAL STATISTICS OFFICE

2010 Census of Population and Housing

PROVINCIAL PROCESSING RECEIPT AND CONTROL FORM

Sheet [0] [1] of [0] [1] Sheets

Province  BOHOL

City/Municipality  SEVILLA

| Line No. | Barangay Name | Code | Enumeration Area Number | Type of Form | Number of Bundles/Forms | Date Received/Initial | Checking Completeness Date Released/Initial | Checking Completeness Date Returned/Initial | Number of Bundles/Forms | Editing Date Released/Initial | Editing Date Returned/Initial | Coding Date Released/Initial | Coding Date Returned/Initial | Verification Date Released/Initial | Verification Date Returned/Initial | Transmittal to CPC 2010 Date/Initial | Transmittal to CPC 2010 Number of Bundles/Forms | Remarks |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) | (11) | (12) | (13) | (14) | (15) | (16) | (17) | (18) |
| 1 | BAYAWAHAN | 001 | 0000 | CPH F1 | 3 | | | | 3 | | | | | | | | | |
| 2 | | 001 | 0000 | CPH F2 | 1/126 | | | | 1/26 | | | | | | | 6/30/10 | 1/126 | Completed |
| 3 | | 001 | 0000 | CPH F3 | 1/31 | | | | 1/31 | | | | | | | 6/30/10 | 1/31 | Completed |
| 4 | | 001 | 0000 | CPH F4 | 0 | | | | 0 | | | | | | | | | |
| 5 | | 001 | 0000 | CPH F5 | 1 | | | | 1 | | | | | | | | | |
| 6 | | 001 | 0000 | EA MAPS | 1 | | | | 1 | | | | | | | | | |
| 7 | CABANCALAN | 002 | 0000 | CPH F1 | 3 | | | | 3 | | | | | | | | | |
| 8 | | 002 | 0000 | CPH F2 | 1/100 | | | | 1/100 | | | | | | | 6/30/10 | 1/100 | Completed |
| 9 | | 002 | 0000 | CPH F3 | 1/25 | | | | 1/25 | | | | | | | 6/30/10 | 1/25 | Completed |
| 10 | | 002 | 0000 | CPH F4 | 0 | | | | 0 | | | | | | | | | |
| 11 | | 002 | 0000 | CPH F5 | 1 | | | | 1 | | | | | | | | | |
| 12 | | 002 | 0000 | EA MAPS | 1 | | | | 1 | | | | | | | | | |
| 13 | CALINGA-AN | 003 | 0000 | CPH F1 | 3 | | | | 3 | | | | | | | | | |
| 14 | | 003 | 0000 | CPH F2 | 1/95 | | | | 1/95 | | | | | | | 6/30/10 | 1/95 | Completed |
| 15 | | 003 | 0000 | CPH F3 | 1/24 | | | | 1/24 | | | | | | | 6/30/10 | 1/24 | Completed |
| 16 | | 003 | 0000 | CPH F4 | 0 | | | | 0 | | | | | | | | | |
| 17 | | 003 | 0000 | CPH F5 | 1 | | | | 1 | | | | | | | | | |
| 18 | | 003 | 0000 | EA MAPS | 1 | | | | 1 | | | | | | | | | |
| 19 | CALINGINAN NORTE | 004 | 0000 | CPH F1 | 3 | | | | 3 | | | | | | | | | |
| 20 | | 004 | 0000 | CPH F2 | 1/118 | | | | 1/118 | | | | | | | 6/30/10 | 1/118 | Completed |
| 21 | | 004 | 0000 | CPH F3 | 1/30 | | | | 1/30 | | | | | | | 6/30/10 | 1/30 | Completed |
| 22 | | 004 | 0000 | CPH F4 | 0 | | | | 0 | | | | | | | | | |
| 23 | | 004 | 0000 | CPH F5 | 1 | | | | 1 | | | | | | | | | |
| 24 | | 004 | 0000 | EA MAPS | 1 | | | | 1 | | | | | | | | | |

Prepared by: _____  06/30/10
Signature over printed name of Receipt & Control Clerk    Date

Verified by: _____  07/05/10
Guillermo M. Lipio, Jr.    Date
Signature over printed name of Supervisor

2010 CPH
Kabilang Ako!

# 5

# BASIC INSTRUCTIONS FOR MANUAL PROCESSING

For uniformity, all personnel responsible for the processing of census questionnaires shall follow the standard procedures in correcting the entries in the questionnaires. To achieve this, they should adhere to the general instructions in editing, coding, verifying, and enhancing the entries in the questionnaires, transcribing damaged forms into other forms, and document preparation as discussed in this chapter. Other detailed instructions of manual processing are discussed in the succeeding chapters.

## 5.1 GENERAL INSTRUCTIONS FOR MANUAL PROCESSING

The ENs were instructed to record the responses to the questions in CPH forms in the following manner:

For pre-coded responses:

a.  an **X** mark written in the box opposite the code; or
b.  the code is entered in the boxes.

*Examples:*

| Relationship to Head | Sex |
|---|---|
| *What is _____'s relationship to the head of the household?* | *Is _____ male or female?* |
| | 1 Male<br>2 Female |
| WRITE THE ANSWER ON THE SPACE PROVIDED.<br><br>SEE CODES AT THE BOTTOM. | WRITE **X** IN THE BOX. |
| P2 | P3 |

CODE FOR SPOUSE → [0][2]

SPOUSE
SPECIFY

[ ] 1
[X] 2 ← "X" MARK FOR FEMALE

For write-in entries:

a.  responses are written on the spaces provided for; and/or
b.  digits of numerical entries in corresponding boxes.

*Examples:*



| | |
|---|---|
| RESPONSES FOR NAME OF PROVINCE AND CITY/MUNICIPLITY | |
| | NUMERICAL ENTRIES FOR NUMBER OF CHILDREN BORN ALIVE |

In CPH Form 1, an **X** or ✓ mark is also entered in the circle.

*Example:*



CALLBACK INDICATOR          INSTITUTIONAL POPULATION INDICATOR

The general instructions in editing and coding the entries in the questionnaires are as follows:

1.  To distinguish the entries made during enumeration (pencil for EN, TS, ACAS, and CAS) from those entries made during the various levels of manual processing at PO, the color scheme of pens to be used are:

| **Color of ballpen** | **To be used by** |
|---|---|
| Black ballpen | Editor/Coder |
| Blue ballpen | Verifier |
| Green ballpen | Assistant Supervisor/Supervisor |
| Red ballpen | PSO and other personnel from RO and CO |

Be extra careful when using ballpen in editing the questionnaires especially in CPH Forms 2, 3, 4, and 5. Unnecessary marks and inkblots may be interpreted as valid entries by the machines during the interpretation of images.

2. <u>Never erase an entry</u> (written, coded, or an **X** or ✓ mark) <u>made by the EN</u>. Always consider his/her entry as correct unless there is a clear indication that an error was committed. Take note that, in general, write-in entries shall prevail over the codes entered in the boxes.

3. As a general rule, do not guess or assume for an answer. It is better to refer the matter to your Supervisor who, in turn, shall refer the case to the concerned DSO/SCO.

4. To correct an erroneous entry, <u>line out with two horizontal lines</u> across the wrong entry and enter the correct code as close as possible to the wrong entry. <u>Never use an eraser or liquid eraser</u> in correcting entries.

Below are some illustrations on how to correct the entries.

a. For write-in entries with code in the boxes, line out with two horizontal lines across the wrong entry, and write the correct entry following the prescribed strokes on the available space nearest the original entry.

**Prescribed strokes for writing numeric characters:**

| 0 | I | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|---|---|---|---|---|---|---|---|---|---|

*Example:*

Highest Grade/
Year Completed

*What is the highest grade/year completed by _____?*

WRITE THE ANSWER
ON THE SPACE
PROVIDED.

IF GRADUATE
IN POST SECONDARY
OR COLLEGE, SPECIFY
THE COURSE.
SEE CODES
AT THE BOTTOM.

P16

| ~~3~~ | ~~2~~ | ~~0~~ |
|---|---|---|

**330**

3RD YR

HIGH SCHOOL

SPECIFY

b. For items requiring an **X** mark in one of the boxes, line out with two horizontal lines across the wrong entry, and put an **X** mark in the box corresponding to the correct answer and encircle the corresponding code. Do not extend the **X** mark outside the boxes. Also, if more than one box has an **X** mark, determine the correct entry and line out the incorrect response. In these cases, encircle the code of the correct answer.

*Example:*

| Name | Relationship to Head | Sex |
|---|---|---|
| *Who is the head of this household? Who are the persons usually residing here as of May 1, 2010?* | *What is _____'s relationship to the head of the household?* | *Is _____ male or female?* |
| | | 1 Male 2 Female |
| | WRITE THE ANSWER ON THE SPACE PROVIDED. | |
| LIST THE PERSONS OR HOUSEHOLD MEMBERS IN THE ORDER SPECIFIED ON PAGE 3A. | SEE CODES AT THE BOTTOM. | WRITE **X** IN THE BOX. |
| **P1** | **P2** | **P3** |
| JOHN PAUL  LAST NAME  LIPIO  FIRST NAME | [0][I]  HEAD  SPECIFY | [X] 1  [ ] 2 |
| _____  LAST NAME  MA. ELENA  FIRST NAME | [0][2]  SPOUSE  SPECIFY | X̶  [X]② |

c. For erroneous write-in entry, line out with two horizontal lines and write the correct answer following the prescribed strokes on the available space near the original entry.

**Prescribed strokes for writing alpha characters** (always use capital letters):

A B C D E F G H I J K L M N
Ñ O P Q R S T U V W X Y Z

*Example:*



```
Residence 5 Years Ago

In what city/municipality
did _____ reside
on May 1, 2005?

0000  Same City/Municipality
8887  Foreign country

IF SAME CITY/MUNICIPALITY,
WRITE "SAME" ON THE SPACE
PROVIDED.  IF ANOTHER CITY/
MUNICIPALITY, SPECIFY THE
NAME OF CITY/MUNICIPALITY
AND PROVINCE ON THE SPACES
PROVIDED.

P14

PROV     CITY/MUN

MADRIJOS MADRIDEJOS
PROVINCE
CEBU
CITY/MUNICIPALITY
```

5. If an item calls for a definite number of digits, ensure that all the digits are entered in the boxes. Prefix zero(es) when necessary.

*Example:*



6. If there are missing entries, check if these can be reasonably determined on the basis of other items. If the answers to these items are difficult to determine, consult your Supervisor.

7. If a household member listed was lined out by the EN or should be excluded from the list, line out (two lines) all entries and boxes in the particular row or line number, whether or not these lines have entries or none.

*Example:*

**BEFORE EDIT**

| | Name | Relationship to Head | Sex | Date of Birth | Age | Birth Registration | Marital Status | Religious Affiliation |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | **For All Persons** | |

(Header detail as shown on form)

| L I N E N U M B E R | Who is the head of this household? Who are the persons usually residing here as of May 1, 2010? LIST THE PERSONS OR HOUSEHOLD MEMBERS IN THE ORDER SPECIFIED ON PAGE 3A. | What is _____'s relationship to the head of the household? WRITE THE ANSWER ON THE SPACE PROVIDED. SEE CODES AT THE BOTTOM. | Is _____ male or female? 1 Male 2 Female WRITE X IN THE BOX. | In what month and year was _____ born? MM Month YYYY Year ⌐ | What is _____'s age as of his/her last birthday? WRITE THE AGE IN THE BOXES. | Was _____'s birth registered with the Civil Registry Office? 1 Yes 2 No 3 Don't know WRITE X IN THE BOX. | Is _____ single, married, widowed, divorced/ separated, or in a common-law/live-in arrangement? 1 Single 2 Married 3 Widowed 4 Divorced/Separated 5 Common-law/Live-in 6 Unknown WRITE X IN THE BOX CORRESPONDING TO ANSWER. FOR PERSONS 0 TO 9 YEARS OLD, WRITE X IN THE BOX FOR SINGLE. | What is _____'s religious affiliation? WRITE THE ANSWER ON THE SPACE PROVIDED. SEE CODEBOOK. |
| | P1 | P2 | P3 | P4 | P5 | P6 | P7 | P8 |
| 5 | ~~DOMINGO~~ LAST NAME ~~VERONICA~~ FIRST NAME | ~~DOMESTIC HELPER~~ SPECIFY | ~~X~~ 2 | 0 4 MM 1 9 8 4 YYYY | 0 2 6 | X 1 | X 1 | SPECIFY |

**AFTER EDIT**

| | Name | Relationship to Head | Sex | Date of Birth | Age | Birth Registration | Marital Status | Religious Affiliation |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | **For All Persons** | |

| L I N E N U M B E R | Who is the head of this household? Who are the persons usually residing here as of May 1, 2010? LIST THE PERSONS OR HOUSEHOLD MEMBERS IN THE ORDER SPECIFIED ON PAGE 3A. | What is _____'s relationship to the head of the household? WRITE THE ANSWER ON THE SPACE PROVIDED. SEE CODES AT THE BOTTOM. | Is _____ male or female? 1 Male 2 Female WRITE X IN THE BOX. | In what month and year was _____ born? MM Month YYYY Year ⌐ | What is _____'s age as of his/her last birthday? WRITE THE AGE IN THE BOXES. | Was _____'s birth registered with the Civil Registry Office? 1 Yes 2 No 3 Don't know WRITE X IN THE BOX. | Is _____ single, married, widowed, divorced/ separated, or in a common-law/live-in arrangement? 1 Single 2 Married 3 Widowed 4 Divorced/Separated 5 Common-law/Live-in 6 Unknown WRITE X IN THE BOX CORRESPONDING TO ANSWER. FOR PERSONS 0 TO 9 YEARS OLD, WRITE X IN THE BOX FOR SINGLE. | What is _____'s religious affiliation? WRITE THE ANSWER ON THE SPACE PROVIDED. SEE CODEBOOK. |
| | P1 | P2 | P3 | P4 | P5 | P6 | P7 | P8 |
| 5 | ~~DOMINGO~~ LAST NAME ~~VERONICA~~ FIRST NAME | ~~DOMESTIC HELPER~~ SPECIFY | ~~X~~ 2 | 0 4 MM 1 9 8 4 YYYY | 0 2 6 | X 1 | X 1 | SPECIFY |

8. For Coders, enter the appropriate codes for the responses/items that require codes. If the reported entries are not specific enough that there are no corresponding codes that could be assigned, request assistance from your Supervisor.

9. For items in the questionnaire that require codes, refer to the following reference materials:

| Items that Require Codes | Reference Material |
|---|---|
| Relationship to head | Codebook |
| Religious affiliation | Codebook |
| Citizenship | Codebook |
| Ethnicity | Codebook |

| Items that Require Codes | Reference Material |
|---|---|
| Place of school | Codebook |
| Highest grade/year completed | Codebook/PSCED |
| Residence 5 years ago | Codebook |
| Usual occupation | PSOC |
| Kind of business or industry | PSIC |
| Class of worker | Codebook |
| Place of work | Codebook |
| Language/dialect generally spoken at home | Codebook |
| Residence 5 years from now | Codebook |

10. If a Verifier, upon review of the Editor's work, decides to maintain or finds the entry of the EN more appropriate than that of the Editor, the Verifier should line out the editor's entry and re-write the EN's entry on the nearest space.

*Example:*



11. Write in the Processing Record of the corresponding bundle cover (CPH Forms 14, 14A, 15, and 15A) the date when the specific data processing activities have started and ended. The signature of the concerned personnel should also be affixed.

12. Check all bundles for completeness. For example, for two bundles there should be **Bundle 1 of 2 Bundles** and **Bundle 2 of 2 Bundles** written on the bundle cover (CPH Forms 14, 14A, 15, and 15A). Check also the contents of the bundle as to the type of form.

13. Prepare a summary of inconsistencies or problems encountered during editing, coding, and verification for referral to your Supervisor. Use CPH Form 24 (Problems Referral Form) for this purpose.

# 5.2 ENHANCEMENT OF ENTRIES

The purpose of enhancing the entries in all CPH forms is to make the entries clearer or readable for machine processing. This should be undertaken simultaneously while editing CPH Forms 1, 2, 3, 4, and 5.  This is done by overwriting write-in entries (tracing the numbers or letters written by the EN) or **X** or ✓ marks that are **unclear, unreadable, fine, threadlike** or **faded.**  <u>Erasing the original entries made by the EN and rewriting them again should be avoided</u>.

# 5.3 TRANSCRIPTION OF DAMAGED FORM TO ANOTHER FORM

There might be instances when some accomplished questionnaires are in bad condition, that is, crumpled, folded, dirty, with holes or stapled, upon submission to PO. The computers may not be able to recognize such questionnaires during machine processing.  Hence, cases like these should be reported to the Supervisor.  The Processor will be asked to transcribe the entries in these forms into blank questionnaires using supplied pencil. <u>The Processor should record in the remarks portion of the new questionnaire that the entries were transcribed and write the serial number of the original questionnaire.</u>  Likewise, entries in questionnaires without serial numbers (those intended for training but were used during enumeration) should be transcribed into questionnaires with serial number.  Make sure that the entries in the original questionnaires are completely and correctly copied.  Set aside the original forms for future verification.

The Processor will also transcribe the entries in CPH Form 2 used by ENs as an improvised CPH Form 4 into a blank CPH Form 4. For specific instructions, refer to Section 7.4 (Transcription of CPH Form 2 used as CPH Form 4) on page 84.

# 5.4 DOCUMENT PREPARATION

Manually processed forms should be properly arranged and prepared for scanning at CPC 2010.  This is done by spreading out each folded questionnaire after it has been edited, coded, and/or verified.

At the PO, the RCC is responsible for the document preparation of all CPH forms.  He/she should ensure that all CPH Forms 2 and 3 for a city/municipality and CPH Forms 4 for all cities/municipalities in the province are spread out. CPH Forms 1 will be spread out only after all the barangay/EA/block maps for a city/municipality have been verified.  Document preparation for CPH Form 5 should be done after each of these forms have been verified by the Supervisor. Spreading out of CPH forms or making sure that these forms are already spread out should be done by RCC when he/she is bundling the particular form.

# 6

# GENERAL SCREENING
# OF QUESTIONNAIRES AND MAPS

Proper accounting of all accomplished forms and maps is quite important in every stage of data processing. This is to ensure that the forms and maps for a particular EA are not mixed with other EAs and missing forms and maps are easily accounted for and traced. In general, this will facilitate the flow of forms and maps during processing. To achieve this, a general screening of questionnaires and maps shall be done. It involves checking for the completeness of questionnaires and maps and verification of their geo-ID, as well as the interview record for the questionnaires. This activity should be done as soon as the questionnaires and maps for completely enumerated barangays/EAs are submitted and received by RCC. The Processors assigned in the general screening are responsible for verifying the entries in the geo-ID and interview record portions, and checking the serial numbers of the building, housing unit, household, and ILQs in every questionnaire.

## 6.1 CHECKING FOR COMPLETENESS OF CPH FORMS 1, 2, 3, 4, AND 5, AND MAPS

To perform completeness checking, the Processor should be guided by the following steps:

1.  Get EA packs containing CPH Forms 1, 2, 3, 4, 5, and barangay/EA/block map(s) to work on from the RCC. Work on one EA pack at a time to avoid mixing the forms and maps of different EAs. If the barangay is composed of several EAs, finish the first EA before you do the next EA since all EAs in the barangay will be assigned to you.

2.  Check whether all CPH Form 1 are complete and intact.

a. Count the number of CPH Form 1 submitted for an EA and check if it corresponds with the last number of booklet reported in CPH Form 1.  If there is any discrepancy, verify the booklet numbering for possible error, that is, **Booklet 1 of 7 Booklets**, **Booklet 2 of 7 Booklets**, and so on. Check if these booklets got mixed up with the booklets in other EAs in the barangay.  If there are missing booklets, record these in CPH Form 21 (Record of Missing/Extra Questionnaires) and report the matter to your Supervisor so that DSO/SCO concerned could be notified.

b. Make sure that there are no missing building/housing unit/household/institutional serial numbers.  If some serial numbers are missing, look for comments or explanation in the remarks column.  If the remarks were inadvertently missed, **do not renumber**.  Record the missing serial numbers using CPH Form 25 (Summary of Missing/Unused Serial Numbers).  If there are gross errors in the serial numbers assigned, refer the matter to your Supervisor so that the DSO/SCO concerned could be notified.

3. Check if the questionnaires have serial number in the upper right portion. If none, transcribe the entries in the corresponding questionnaires with serial number.

4. Check also if the serial numbers printed on the upper right portion of CPH Forms 1, 2, 3, 4, and 5 are unique.  If you encounter questionnaires with duplicate serial numbers, inform your Supervisor who shall then ask you to transcribe the entries into appropriate questionnaires.

5. Check whether all CPH Forms 2 or 3 are properly bundled, that is, sorted in ascending household serial number (HSN).  These forms should be <u>separately bundled</u>.  If not, re-bundle the forms as follows:

a. Arrange separately all CPH Form 2 and CPH Form 3 of a particular EA by building, housing unit, and household serial number, and booklet number.

b. Ensure that households with more than one accomplished CPH Form 2 or 3 are bundled together.

c. After re-bundling CPH Form 2 or 3 of an EA, fill out the necessary information such as province, city/municipality, barangay, EA number, the type and number of questionnaires, and the number of bundles required in CPH Form 15 or 15A.  Place the filled out CPH Form 15 or 15A on top of CPH Form 2 or 3.

d. Use plastic to cover the bundle of CPH Form 2 or 3.

For an EA with more than 500 questionnaires, re-bundle CPH Form 2 or 3 by dividing the total number of CPH Form 2 or 3 by 500 to determine the number of bundles for the EA. Follow the same procedures given above in re-bundling the forms.

---

## IMPORTANT NOTICE

Do not punch holes, staple, or use fasteners/shoelaces in bundling CPH Forms 1, 2, 3, 4, and 5.

---

6. Check whether the province, city/municipality, and barangay names, and their corresponding geographic codes and EA numbers written in CPH Form 15 or 15A are correct. Make sure that these information matches with the geo-ID of CPH Forms 1, 2, 3, 4, and 5.

7. Verify if every household or institution listed in CPH Form 1 has a corresponding CPH Form 2, 3 or 4, respectively. <u>If a household or institution listed in CPH Form 1 has a missing questionnaire, record the geo-ID, building, housing unit and household or institutional serial number, and name and address of the household head or name/type and address of the institution of the missing questionnaire in CPH Form 21</u>. Report this to your Supervisor who shall then call the attention of DSO/SCO for appropriate action. Refer to page 45 on how to accomplish this form and see Illustration 6.2 on page 46 for a sample of filled out CPH Form 21.

8. Check the numbering of booklets for each CPH Form 1, 2, 3 or 4, that is, for two booklets there should be **Booklet <u>1</u> of <u>2</u> Booklets** and **Booklet <u>2</u> of <u>2</u> Booklets**. Check for additional questionnaires if there are more than eight household members or more than 16 institutional population members recorded in the summary of visit portion. If there are missing booklets, report the matter to your Supervisor.

9. If there are vacant housing units (VHUs), vacant buildings (VBLDGs), vacation or rest houses (VRHs), or housing units occupied by non-usual residents (NURs) or person(s) excluded from the enumeration that are listed in CPH Form 1 but without CPH Form 2, provide CPH Form 2 and fill out only the geo-ID portion. Copy their corresponding building, housing unit, and household serial numbers in the boxes of CPH Form 2. Note that the household serial number for NUR is 7777, 8888 for housing unit occupied by person(s) excluded from

2010 CPH

Kabilang Ako!

enumeration, 8889 for VRH, and 9999 for VBLDG or VHU. Copy the name of the household head (including VHU, VBLDG, VRH, or NUR) and address indicated in CPH Form 1. Report this to your Supervisor who shall then call the attention of the DSO/SCO for verification of items in the housing portion.

10. If there are extra CPH Form 2, 3 or 4 not listed in CPH Form 1, <u>record these in CPH Form 21 and inform your Supervisor, who shall then call the attention of DSO/SCO for verification. If upon verification the household or institution of the said extra questionnaire is among those households or institutions to be listed, append to CPH Form 1 the geo-ID, building, housing unit and household or institutional serial numbers, and the name and address of the household head or name/type, and address of the institution written in the extra questionnaire</u>.

11. Check in all EAs of the barangay if there is at least one corresponding CPH Form 5. The geo-ID of this form should match with the geo-ID of CPH Form 1. Inform your Supervisor if no CPH Form 5 is found or if the geographic information of CPH Form 5 does not match with the geo-ID of the EA/barangay. Likewise, inform your Supervisor if there is more than one CPH Form 5 for the EA/barangay.

12. Check the maps in each EA/ barangay pack and match the geographic names and codes with CPH Form 1. Inform your Supervisor in case of mismatched geographic information or if there are no maps found in the pack.

## 6.2 HOW TO CORRECT DUPLICATES/GAPS IN THE SERIAL NUMBER OF BUILDINGS, HOUSING UNITS, HOUSEHOLDS OR INSTITUTIONAL LIVING QUARTERS IN CPH FORM 1

As a general rule, **DO NOT RENUMBER** if there are duplicates or gaps in serial numbers for the building, housing unit, household, and ILQ. Below are the instructions on how to deal with this problem.

1. If there are duplicate HSNs or ISNs, line out the duplicate HSN or ISN and write the new HSN or ISN following the last HSN or ISN assigned for the EA/barangay. See example in Illustration 6.1 on page 39.

2. If there are gaps between the assigned building, housing unit, household or ILQ serial numbers, check if entries in the page totals are correct by manually counting the assigned BSN, HUSN, HSN or ISN (refer to Section 7.6 on page 88). Make necessary corrections on the

page totals. Leave the serial numbers as they are. Record in CPH Form 25 the missing serial number(s). Report this to your Supervisor, who shall then call the attention of the DSO/SCO for appropriate action. Refer to page 47 on how to accomplish this form and see Illustration 6.3 on page 48 for a sample of filled out CPH Form 25.

3. For every correction made in CPH Form 1, see to it that it is reflected in the corresponding CPH Form 2, 3 or 4.

## ILLUSTRATION 6.1
## HOW TO CORRECT DUPLICATE SERIAL NUMBERS IN CPH FORM 1

# 6.3 VERIFICATION OF GEOGRAPHIC IDENTIFICATION OF CPH FORMS 1, 2, 3, 4, AND 5, AND BARANGAY/EA/BLOCK MAPS

The geo-ID is one of the most important items in any enumeration form. It identifies the location of the households, institutions, and barangays and thus, provides accurate geographical distribution of the population. Hence, it must be completely and accurately filled out.

For **CPH Form 1**, the geo-ID panel consists of the month of visit, names and codes of the province, city/municipality, and barangay, and the EA number. It also includes the number of booklets used for an EA. Verify the geographic names and codes against EARF. Make correction when necessary.

*Example:*

---

**GEOGRAPHIC IDENTIFICATION**

MONTH OF VISIT `0 5` RANDOM START `0 2` BOOKLET `0 1` OF `0 4` BOOKLETS

PROVINCE BOHOL `1 2` BARANGAY MAGSAYSAY `0 1 3`

CITY/MUNICIPALITY SEVILLA `3 9` ENUMERATION AREA NUMBER .......... `0 0 0 0`

---

For **CPH Forms 2** and **3**, the geo-ID consists of the names and codes of the province, city/municipality, and barangay, EA number, Building Serial Number (BSN), Housing Unit Serial Number (HUSN), Household Serial Number (HSN), line number of the respondent, cluster number (for CPH Form 3 only), name of household head, and address of the household. The number of booklets used for a household is also included. Verify the geographic names and codes against CPH Form 1. Make correction when necessary.

*Examples:*

| CPH FORM 2 | CPH FORM 3 |
|---|---|
| **GEOGRAPHIC IDENTIFICATION** | **GEOGRAPHIC IDENTIFICATION** |
| BOOKLET ☐ of ☐ BOOKLETS | BOOKLET ☐ of ☐ BOOKLETS |
| PROVINCE BOHOL `1 2` | PROVINCE BOHOL `1 2` |
| CITY/MUNICIPALITY SEVILLA `3 9` | CITY/MUNICIPALITY SEVILLA `3 9` |
| BARANGAY MAGSAYSAY `0 1 3` | BARANGAY MAGSAYSAY `0 1 3` |
| ENUMERATION AREA NUMBER ········· `0 0 0 0` | ENUMERATION AREA ········· `0 0 0 0` |
| BUILDING SERIAL NUMBER ········· `0 0 0 1` | BUILDING SERIAL NUMBER ········· `0 0 0 5` |
| HOUSING UNIT SERIAL NUMBER ········· `0 0 0 1` | HOUSING UNIT SERIAL NUMBER ········· `0 0 0 6` |
| HOUSEHOLD SERIAL NUMBER ········· `0 0 0 1` | HOUSEHOLD SERIAL NUMBER ········· `0 0 0 6` |
| LINE NUMBER OF RESPONDENT ········· `0 1` | LINE NUMBER OF RESPONDENT ········· `0 2` |
| NAME OF HOUSEHOLD HEAD LIPIO, JOHN PAUL | CLUSTER NUMBER ········· `0 0 2` |
| LAST NAME, FIRST NAME | NAME OF HOUSEHOLD HEAD MARCIAL, JASPER |
| ADDRESS #1 KANG-ANGI STREET | LAST NAME, FIRST NAME |
| HOUSE NUMBER AND STREET NAME OR NAME OF SITIO | ADDRESS #9 KANG-ANGI STREET |
| | HOUSE NUMBER AND STREET NAME OR NAME OF SITIO |

For **CPH Form 4**, the geo-ID consists of the names and codes of the province, city/municipality, and barangay, EA number, BSN, Institutional Serial Number (ISN), code for the type of ILQ, as well as the name/type and address of the ILQ. The number of booklets used is also included. Verify the geographic names and codes against CPH Form 1. Make correction when necessary.

*Example:*

| GEOGRAPHIC IDENTIFICATION |
|---|
| BOOKLET [0][1] OF [0][1] BOOKLETS |
| PROVINCE BOHOL [1][2] |
| CITY/MUNICIPALITY SEVILLA [3][9] |
| BARANGAY MAGSAYSAY [0][1][3] |
| ENUMERATION AREA ·························· [0][0][0][0] |
| BUILDING SERIAL NUMBER ·························· [0][1][3][1] |
| INSTITUTIONAL SERIAL NUMBER ·························· [0][0][0][1] |
| TYPE OF INSTITUTIONAL LIVING QUARTER (SEE CODES BELOW) ·························· [0][1] |
| NAME OF INSTITUTIONAL LIVING QUARTER NIJ BOARDING HAUS |
| ADDRESS #6 KABANBANAN ST. |
| NUMBER AND STREET NAME OR NAME OF SITIO |

For **CPH Form 5**, the geo-ID consists of the name and code of the province, city/municipality, and barangay, name and designation of the respondent, and address of the barangay hall. Verify the geographic names and codes against EARF. Make correction when necessary.

*Example:*

| GEOGRAPHIC IDENTIFICATION |
|---|
| PROVINCE BOHOL [1][2] |
| CITY/MUNICIPALITY SEVILLA [3][9] |
| BARANGAY MAGSAYSAY [0][1][3] |
| NAME OF RESPONDENT MORALES AMOR |
| LAST NAME FIRST NAME |
| DESIGNATION/POSITION IN THE BARANGAY BARANGAY CAPTAIN |
| ADDRESS OF THE BARANGAY HALL #4 CENTRO STREET |
| NUMBER AND STREET NAME OR NAME OF SITIO |

For the **barangay/EA/block maps,** the geo-ID consists of the names and codes of the region, province, city/municipality, and barangay, and EA number. It also includes the block number and the number of sheets used for the EA. Verify the geographic names and codes against EARF. Make correction when necessary.

*Example:*



| | | |
|---|---|---|
| Graphical Scale: | NOT DRAWN TO SCALE | |
| | Kilometers | |
| REGION 7 | | 0 7 |
| Region | | |
| BOHOL | | I 2 |
| Province | | |
| SEVILL A | | 3 9 |
| City/Municipality | | |
| MAGSAYSAY | | 0 I 3 |
| Barangay | | |
| E.A. no. | | 0 0 0 0 |
| Block no. | | 0 I |
| Sheet 0 I of 0 I Sheets | | |

## FOR ALL CPH FORMS

### Province/City/Municipality and Barangay

Two boxes each are allotted for the region, province, and city/municipality codes and three boxes for the barangay code.  Verify whether the codes entered are correct (refer to CPH Form 1 which was already verified by the RCC).

In case there is no entry, supply the appropriate code.  See to it that the codes are legibly written inside the boxes.

### Enumeration Area Number

Refer to CPH Form 1 whether the four-digit code entered for the EA is correct.  Otherwise, supply the correct EA code.

## FOR CPH FORMS 2, 3, AND 4

### Building, Housing Unit, Household, and Institutional Serial Numbers

Serial numbers for the buildings, housing units, and households or ILQs in CPH Form 2, 3, and 4 should be the same as those found in Columns 2 to 5 of CPH Form 1.

If the household or institution occupies two or more buildings, the BSN written in CPH Forms 2, 3 or 4 must correspond to the first serial number assigned to the household or institution.

Also, if there are two or more questionnaires for one household or institution, check that all entries in the geo-ID are the same for all questionnaires for that household or institution.

## Line Number of the Respondent in CPH Form 2 or 3

📖 A **respondent** is any responsible member of the household who can provide accurate information about the household.

In CPH Form 2 or 3, the line number of the respondent should have been encircled on page 2B or 3B. If no Line Number is encircled, check whether there is a remark in the questionnaire or in CPH Form 1, specifying the source of information (for instance, neighbor, Barangay Chairperson, or other persons). If there is an indication that the data came from a person who is not a household member, enter **00**. Otherwise, enter **99** in the boxes.

Check whether the entry for the Line Number of Respondent is the same as the encircled line number inside the questionnaire. If not, line out with two horizontal lines the entry on the cover page and write the line number of the household member whose line number has been encircled on page 2B or 3B of CPH Form 2 or 3. Prefix zero (**0**) whenever necessary. Refer to the example shown below:

💡 *Example:*

**Type of Institutional Living Quarter**

Check whether the two-digit code entered for the type of ILQ is consistent with the name and code of the ILQ found at the bottom part of page 4A of CPH Form 4. If the code is incorrect, line out the original entry and write the correct code.

If there is no entry, check if it can be determined using the name of the ILQ and write the two-digit code that matches with the name of the ILQ. If the name of the ILQ is also blank, or if the code could not be determined based on the name of the ILQ, record this problem in CPH Form 24. Refer to Section 7.8 on page 96 on how to accomplish this form.

## IMPORTANT NOTICE

Check if the members of institutional population (refer to write-in entries in P2-Residence Status) matches with the entry indicated in type of ILQ. If there is any inconsistency, record this case in CPH Form 24 to be referred to DSO/SCO. For instance, refer to your Supervisor if the type of ILQ is a military camp and entries in residence status are boarder or lodger.

# 6.4 VERIFICATION OF INTERVIEW RECORD

**Number of Visits Made/Final Result of Visit**

For less than four visits, the entries in the number of visits made and result of final visit should correspond to the entries recorded in the last Column of Visit 1 to 3 of the Interview Record.

Code **4** is not an acceptable code for the result of final visit. In this case, record it in CPH Form 24 for referral to DSO/SCO.

## IMPORTANT NOTICE

If there are two or more booklets for one household or institution, the Interview Record panel of the additional questionnaires should have no entries. Only the first booklet should have entries in this portion. If there is no entry in the Interview Record panel of the first booklet and the other booklet(s) for the household has entries in this portion, transcribe the entries from this booklet to the first booklet and line out the entries in the Interview Record panel of the other booklet(s).

# **6.5** HOW TO FILL OUT CPH FORM 21 – RECORD OF MISSING/EXTRA QUESTIONNAIRES

If a questionnaire is missing, that is, a household or ILQ listed in CPH Form 1 has no corresponding CPH Form 2, 3 or 4, or there is a filled out questionnaire but not reported in CPH Form 1, record the missing/extra questionnaire in CPH Form 21.

Below are the instructions to the Editors on how to fill out CPH Form 21.

1. Fill out the geo-ID portion by writing the name of the province, city/municipality, and barangay, and their corresponding code.

2. Write the EA number in the boxes.

3. Indicate in Column 1 whether there is a missing questionnaire or an extra questionnaire by writing code **1** for Missing Questionnaire and/or code **2** for Extra Questionnaire.

4. Write the building, housing unit, and household or institutional serial number of the missing/extra questionnaire in their respective columns.

5. Indicate in Column 6 the type of missing/extra form.

6. Write the name of the household head/name or type of institution, address of the household/institution, actions taken, and remarks in Columns 7 to 10, respectively.

7. Use another CPH Form 21 for every EA.

8. If two or more sheets of CPH Form 21 were used to record missing/extra questionnaires, make sure that the number of sheets is correctly reflected, that is, for two sheets, there should be **Sheet 1 of 2 Sheets** and **Sheet 2 of 2 Sheets**.

9. After recording all missing/extra questionnaires, write your name and affix your signature on the space provided.  Record also the date when you submitted CPH Form 21 to your Supervisor.

10. Do not forget to append in CPH Form 1 the information of the extra questionnaire found in the EA.

Submit accomplished CPH Form 21 to your Supervisor after all CPH forms in the EA pack are checked for completeness.  This will be given to concerned DSO/SCO for verification. The DSO/SCO should then write the date when the missing/extra form was referred to him/her and should affix his/her

signature. Likewise, the Supervisor should also write the date he/she referred this matter to the DSO/SCO and affix his/her signature. See example of accomplished CPH Form 21 below.

**ILLUSTRATION 6.2**
**FILLED OUT CPH FORM 21**
**(Record of Missing/Extra Questionnaires)**

CPH Form 21

Republic of the Philippines
NATIONAL STATISTICS OFFICE

**2010 Census of Population and Housing**
**RECORD OF MISSING/EXTRA QUESTIONNAIRES**

Sheet 1 of 1 Sheets

Province: BOHOL
City/Municipality: SEVILLA
Barangay: MAGSAYSAY  1 2 / 0 1 3
Enumeration Area Number: 3 9 / 0 0 0

| Questionnaire Indicator 1 – Missing 2 – Extra | Building Serial Number (BSN) | Housing Unit Serial Number (HUSN) | Household Serial Number (HSN) | Institutional Serial Number (ISN) | Type of Form Missing/ Extra | Name of Household Head/ Type of Institution | Address | Actions Taken | Remarks |
|---|---|---|---|---|---|---|---|---|---|
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) |
| 1 | 0089 | 0040 | 0040 | | CPH FORM 2 | CRUZ, DALIN | CANDAGUIT | TO BE VERIFIED BY DSO | |
| 1 | 0125 | 0081 | 0082 | | CPH FORM 3 | ACOSTA, MARIANITO | LIBORON | TO BE VERIFIED BY DSO | |
| 2 | 0188 | | | 0002 | CPH FORM 4 | MILITARY CAMP | CENTRO | ADDED IN CPH FORM 1 | |

Prepared by: CKarganilla
CARLO KARGANILLA
Signature over printed name

Date submitted to Supervisor: 6/23/2010

Referred to: E galab
Emmanuel Galab
Signature over printed name of DSO/SCO
Date: 6/24/2010

Approved by: G lipio
GUI LIPIO
Signature over printed name of Supervisor
Date: 6/23/2010

# 6.6 HOW TO FILL OUT CPH FORM 25 – SUMMARY OF UNUSED SERIAL NUMBERS

If a serial number is missing, record this in CPH Form 25. Below are the instructions on how to fill out this form.

1. Fill out the geo-ID portion by writing the name of the province and city/municipality and their corresponding code.

2. Write your name and designation. Processor, RCC, Assistant Supervisor, and Supervisor may accomplish CPH Form 25.

3. Indicate in Columns 1 and 2, respectively, the name of the barangay and its code. Write the corresponding EA number in Column 3.

4. Write in Column 4 the CPH form type wherein unused serial number was found.

5. Indicate in Column 5 the type of serial number, that is, whether it is a BSN, HUSN, HSN, or ISN. Then write the unused serial number in Column 6.

6. Write the actions taken and remarks in Columns 7 and 8, respectively.

7. Use another CPH Form 25 for every municipality.

Submit accomplished CPH Form 25 to the concerned DSO/SCO. See example of accomplished CPH Form 25 on next page.


# 6.7 PREPARATION OF CPH FORMS 1, 2, 3, 4, 5, AND MAPS FOR MANUAL PROCESSING

After general screening of all CPH forms and maps in the EA pack, the processors should return the EA pack to RCC. The RCC should then separate CPH Forms 5 to be given to Assistant Supervisor for editing and barangay/EA/block maps from the EA pack for processing on a later schedule. Hence, the content of each EA pack during editing, coding, and verification of Processors should only be CPH Forms 1, 2, 3, and 4.
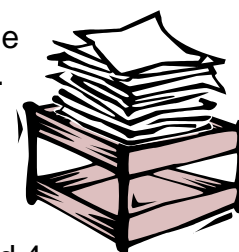
Maps should be bundled and placed on designated racks while CPH Forms 1, 2, 3, and 4 are being processed. Refer to Section 10.4 – Bundling Instructions for Maps on pages 134.

2010 CPH

Kabilang Ako!

**ILLUSTRATION 6.3**
**FILLED OUT CPH FORM 25**
**(Summary of Unused Serial Numbers)**

CPH Form 25

Republic of the Philippines
NATIONAL STATISTICS OFFICE

**2010 Census of Population and Housing**
**SUMMARY OF UNUSED SERIAL NUMBERS**

Province: BOHOL    | 1 | 2 |    Name: Guillermo Lipio

Municipality: SEVILLA    | 3 | 9 |    Designation: Supervisor

| Barangay | | EA Number | CPH Form Type | Type of Serial Number | Unused Serial Number | Action to be Taken | Remarks |
|---|---|---|---|---|---|---|---|
| Name | Code | | | | | | |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) |
| CABANCALAN | 0002 | 0000 | CPH FORM 2 | HSN | 0126 | TO BE VERIFIED BY DSO | |
| EWON | 0008 | 0000 | CPH FORM 3 | HUSN | 0157 | TO BE VERIFIED BY DSO | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

# 7

# SPECIFIC INSTRUCTIONS IN EDITING CPH FORMS 1, 2, 3, 4, AND 5

The complex process of data collection in the field was not spared from several conditions which might have resulted to some errors in the entries made on the census forms. The errors may be committed by respondents in their response and/or by enumerators in filling out the forms during enumeration. Hence, efforts directed to identify and correct as much error as possible should be done.

In general, questionnaires will undergo review. This process will involve the checking for completeness, consistency, legibility, and reliability of entries. It also includes editing of entries in census forms.

Editing of CPH Forms 1, 2, 3, and 4 will be done by the Editors by EA/barangay. On the other hand, CPH Form 5 will be edited by the Assistant Supervisor by city/municipality.

The Editor should edit CPH Form 2 or 3 for a household and use this as basis in editing corresponding entries in CPH Form 1. After all CPH Forms 2 and 3 have been edited, the next form to be edited should be CPH Form 4. In the same manner, entries in CPH Form 1 should be correspondingly checked with the edited CPH Form 4. After editing all CPH Forms 2, 3, and 4, the page totals in CPH Form 1 should be checked.

There are some cases of editing during manual processing that should be referred to the Supervisor. These are to be recorded in CPH Form 24 – Problems Referral Form for submission and discussion by the Processor with his/her Supervisor (Section 7.8 on page 96).

## 7.1 TYPES OF ERRORS TO BE EDITED

These are basically the types of errors in the questionnaires that Editors should verify and edit:

1. Wrong numeric entry. This occurs when a numeric response is erroneously entered.

   *Example:*

   | P4 |
   | --- |
   | Month of Birth → | Month of Birth is between 01 to 12 only |
   | 1 3 MM | |
   | 1 9 8 6 YYYY | |
   | Year of Birth → | |

2. Wrongly coded item. This occurs when a code does not correspond to the write-in entry.

   *Example:*

   | Relationship to Household Head | A code of **42** should be assigned to the write-in entry of **SISTER** |
   | --- | --- |

   P2

   4 1

   SISTER
   SPECIFY

   **CODES FOR P2 – RELATIONSHIP TO HOUSEHOLD HEAD**

   | | | |
   | --- | --- | --- |
   | 01 Head | 31 Grandson | 55 Nephew |
   | 02 Spouse | 32 Granddaughter | 56 Niece |
   | 03 Son | 33 Father | 57 Other relative |
   | 04 Daughter | 34 Mother | 58 Nonrelative |
   | 21 Stepson | 41 Brother | 65 Boarder |
   | 22 Stepdaughter | 42 Sister | 66 Domestic helper |
   | 23 Son-in-law | 43 Uncle | |
   | 24 Daughter-in-law | 44 Aunt | |

3. Wrong response option. This happens when an entry is outside the predetermined entry expected for an item.

   *Example:*

   | Age | Marital Status | |
   | --- | --- | --- |
   | P5 | P7 | A person aged 9 years or below should have an entry of code **1** for Single in "Marital Status" |
   | 0 0 5 | | |

   Marital Status codes:
   1 Single
   2 Married
   3 Widowed
   4 Divorced/Separated
   5 Common-law/Live-in
   6 Unknown

   (Box 1, Box 4, Box X 2, Box 5, Box 3, Box 6)

4. Inconsistent response with related item(s). This occurs when two related items do not correctly correspond with one another.

*Example:*



| Relationship to Household Head | Sex |
|---|---|
| P2 | P3 |
| 0 3 | ☐ 1 |
| SON | ☒ 2 |
| SPECIFY | |

1 Male
2 Female

An entry of **SON** in "Relationship to Household Head" should correspond to an **X** mark for **MALE** in "Sex"

5. Faulty skip. This happens when skipping pattern is not followed.

*Examples:*

a. Wrong Skipping Pattern by Related Item(s)



**H4 Tenure status of the housing unit**
*Do you own or amortize this housing unit occupied by your household or do you rent it, do you occupy it rent-free with consent of owner, or rent-free without consent of owner? .* WRITE **X** IN THE BOX.

☐ 1 Owned/being amortized
☒ 2 Rented, SKIP TO H7
☐ 3 Rent-free with consent of owner, SKIP TO H8
☐ 4 Rent-free without consent of owner, SKIP TO H8

**H5 Acquisition of the housing unit**
*How did you acquire this housing unit?* WRITE **X** IN THE BOX.

☐ 1 Inherited, SKIP TO H8
☐ 2 Gift, SKIP TO H8
☐ 3 Company benefit, SKIP TO H8
☒ 4 Purchased
☐ 5 Others, SPECIFY _____

**H6 Source of financing of the housing unit**
*Do you avail of the following sources of financing in the construction/purchase of this housing unit?* WRITE **X** IN THE BOX. THEN SKIP TO H8.

YES NO
☒ ☐ a Own resources/interest–free loans from relatives/friends
☐ ☒ b Government assistance, PAG-IBIG, GSIS, SSS, DBP, and others
☐ ☒ c Private banks/foundations/cooperatives
☒ ☐ d Employer assistance
☐ ☒ e Private persons
☐ ☒ f Others, SPECIFY _____

**H7 Monthly rental of the housing unit**
*How much is the monthly rental of this housing unit?* WRITE **X** IN THE BOX.

☐ 1 [PhP500 or less]
☐ 2 [PhP501- 1,000]
☐ 3 [PhP1,001 - 1,500]
☐ 4 [PhP1,501 - 2,000]
☐ 5 [PhP2,001 - 4,000]
☐ 6 [PhP4,001- 6,000]
☐ 7 [PhP6,001 - 7,500]
☐ 8 [PhP7,501 - 10,000]
☐ 9 [PhP10,000 and over]

If code **2** in **"**Tenure status of the housing unit", there should be no entry in "Acquisition of the housing unit" and "Source of financing of the housing unit"

b. Wrong Skipping Pattern by Age Requirement



| Age | For All 5 Years Old and Over Functional Difficulty |
|---|---|
| P5 | P13 |

P13
Yes No Yes No
☐ ☒ a ☒ ☐ d
☐ ☒ b ☒ ☐ e
☒ ☐ c ☐ ☒ f

Age P5: 0 0 3

"Functional Difficulty" should be blank for persons below five years old

## 7.2　EDITING OF CPH FORM 2

**Name of Household Head and Address**

Under the geo-ID portion, check whether the name of the household head is the same as that written in CPH Form 1. If inconsistent, the name written in CPH Form 2 shall prevail. However, if there is no entry in CPH Form 2, copy the name of the household head in CPH Form 1.

Likewise, check if the corresponding address is properly filled out. Match the address written in CPH Form 2 with the address in CPH Form 1. For a housing unit that is vacant (HSN 9999), occupied by a household not eligible for enumeration (HSN 8888), housing unit used only as vacation house or rest house (HSN 8889), or housing unit occupied exclusively by non-usual residents (HSN 7777), check if the entries in their respective geo-ID are the same as those indicated in CPH Form 1.

**Number of Household Members and Number of Males and Females**

Make sure that the total number of household members recorded in the Interview Record panel of CPH Form 2 (page 2A) corresponds to the line number of the last member in the household (page 2B). If not, line out the entry in the Interview Record portion and write the correct number based on the line number of the last member in the household. Likewise, if there is no entry, enter the number based on the line number of the last member in the household.

Also, see to it that the number of males corresponds to the number of members with **X** mark in the box for code **1** (Male) in Column P3-Sex and the number of females corresponds to the number of members with **X** mark in the box for code **2** (Female) in the same column. If not, line out the entry in the Interview Record portion and write the correct number based in Column P3-Sex. Likewise, if there is no entry, write the correct number in the corresponding boxes for males and females based in Column P3-Sex.

*Example:*

**PAGE 2A**
**PAGE 2B**



## POPULATION CENSUS QUESTIONS

The population census questions are found on pages 2B and 2C of CPH Form 2. These questions collect information on the socio-economic and demographic characteristics of household members.

**Line Number**

If the household has more than eight members, check if there are two or more questionnaires used for the household.  Examine whether the line numbers in the succeeding questionnaire(s) have been renumbered. If not, line out the preprinted line number on the second questionnaire and write the succeeding

number on top. Start from **09** for the second questionnaire, and so on, down to the last member of the household.

If there are gaps in line numbers because of deletion or duplication, renumber the line numbers accordingly.

💡 *Example:*



## P1-Name

The name of the household head should occupy the first row of the questionnaire and should, therefore, match the name written on page 2A in the geo-ID portion of the questionnaire. If the household head is not written on the first row, leave as is.

Check for fictitious names, such as names of actors or popular personalities. Spot names that are repeated in many questionnaires since it indicates possible population padding. Write the problem in CPH Form 24.

## P2-Relationship to Head

Check if the two-digit code entered in the boxes is correct by matching it with the write-in entries in this column (refer to the codes for this item at the bottom portion of page 2B of the questionnaire). If inconsistent, the write-in entry shall prevail.

*Example:*

| BEFORE EDIT | AFTER EDIT |
|---|---|

| Relationship to Head | Relationship to Head |
|---|---|
| *What is _____'s relationship to the head of the household?* | *What is _____'s relationship to the head of the household?* |
| WRITE ANSWER ON THE SPACE PROVIDED. SEE CODES AT THE BOTTOM. | WRITE ANSWER ON THE SPACE PROVIDED. SEE CODES AT THE BOTTOM. |
| **P2** | **P2** |
| 3 3 | ~~3 3~~ **34** |
| MOTHER | MOTHER |
| SPECIFY | SPECIFY |

In every household questionnaire, there should always be a household head. Check if there is a code **01** in this column. Generally, this code should appear on the first line number and there should only be one code **01** for the entire household. If there is no code **01**, record this case in CPH Form 24 so that it could be referred to the DSO/SCO. If there are more than one member with this code, verify, and correct each code based on the other entries in the questionnaire (that is, surname, age, sex, and marital status) to determine which code is appropriate.

Look for an entry of **BOARDER** or code **65**. If it occurred 10 times or more, transcribe this on CPH Form 4. Refer to Section 7.4 on pages 83 to 84 for instructions on transcribing CPH Form 2 into CPH Form 4.

## P3-Sex

If the sex of the person is not reported, refer to the name of the household member in Column P1 and the relationship to the household head in P2 to determine the sex of the person.  Write **X** in the box opposite the appropriate code and encircle this code.

*Example:*

| BEFORE EDIT | AFTER EDIT |
|---|---|



## P4-Date of Birth

The entry in the boxes for the month of birth should correspond to any of the 12 months in a year. The entry in the boxes for the year of birth, meanwhile should have four digits and should not exceed 2010. If most of the members or most of the questionnaires in the bundle have no entry in this column, record this in CPH Form 24.

## P5-Age

Age should be entered in three digits and in completed year(s). Prefix **0** whenever necessary.

If an entry is specified in number of months, such as 6 months or 18 months, convert it to completed years.  Do not round off.  If it is less than one year, write **000**. If it is one year and 11 months, write **001** and not **002** or two years.

*Example:*

| BEFORE EDIT | AFTER EDIT |
|---|---|



If age has no entry, record it in CPH Form 24 for referral to DSO/SCO.

## P6-Birth Registration

Check if there is an **X** mark in this column.  If none, leave it blank.  However, if most of the members or most of the questionnaires in the bundle have no entry in this column, note down this case in CPH Form 24 so that the concerned DSO/SCO could be notified.

## P7-Marital Status

Check if the response in this item is consistent with the entries in Columns P2-Relationship to Head and P5-Age.  For example, if a household head has a spouse, both of their marital status should correspond to one another accordingly, that is, both are **2** or **5**.

A person who is less than 10 years old should have an **X** mark opposite code **1**.  Make correction when necessary.

*Example:*

| BEFORE EDIT | AFTER EDIT |
|---|---|



If there is no entry in this column, leave it blank.  However, if most of the members or most of the questionnaires in the bundle have no entry in this column, log this case in CPH Form 24.

## P8-Religious Affiliation

All household members should have a write-in entry and corresponding code in this item.

Check if the write-in entry is clear and legible.  If the write-in entry is not readable, ask assistance from the Supervisor. Check if the code entered by EN corresponds to the write-in entry. If not, line out the said code and write the appropriate code. If the code boxes are blank, enter the correct two-digit code for this item. Refer to page 2 of the Codebook for the codes of religious affiliation.

If there is no write-in entry and the code boxes are blank, leave as is.  If there are many cases of no entries or blank in this column, record it in CPH Form 24 for referral to your Supervisor.

*Example:*

| BEFORE EDIT | AFTER EDIT |
|---|---|



**An Example of How to Edit Items P1 to P8 of CPH Form 2**

The following items are edited for consistency (refer to Illustration 7.1 on page 61):

a. P2-Relationship to Head, Line No. 3

Line out code **04** and write **03** on the nearest space since it corresponds to the write-in entry **SON**. The correct entry is consistent with item P1-Name of Household Member **(GEORGE)** and P3-Sex **(Male)**.

b. P3-Sex, Line No. 4

Line out the box with **X** mark opposite **1** for Male, then, mark **X** the box opposite **2** for Female and encircle this code. This corrected entry is consistent with Item P1-Name of Household Member **(REGINA)** and P2-Relationship to Head **(Daughter)**.

c. P5-Age, Line No. 4

Line out the entry of **005 MONTHS** in this item and write **000** since the age to be reported should be in completed years.

d. P7-Marital Status, Line No. 3

Line out the box with **X** mark opposite **2** for Married, then, mark **X** the code opposite **1** for Single and encircle this code. Persons 0 to 9 years old should have an **X** mark opposite **1** for Single.

e. P8-Religious Affiliation, Line No. 6

The Editor is advised to seek assistance from the Supervisor in case of an unclear or unreadable write-in entry so that it can be checked if the code supplied by the EN is correct.

## ILLUSTRATION 7.1
## HOW TO EDIT ITEMS P1 TO P8 ON PAGE 2B OF CPH FORM 2

**2B — POPULATION CENSUS QUESTIONS — For All Persons**

| | Name | Relationship to Head | Sex | Date of Birth | Age | Birth Registration | Marital Status | Religious Affiliation |
|---|---|---|---|---|---|---|---|---|
| | Who is the head of this household? Who are the persons usually residing here as of May 1, 2010? | What is ____'s relationship to the head of the household? | Is ____ male or female? 1 Male 2 Female | In what month and year was ____ born? MM Month YYYY Year | What is ____'s age as of his/her last birthday? | Was ____'s birth registered with the Civil Registry Office? 1 Yes 2 No 3 Don't know | Is ____ single, married, widowed, divorced/separated, or in a common-law/live-in arrangement? 1 Single 2 Married 3 Widowed 4 Divorced/Separated 5 Common-law/Live-in 6 Unknown WRITE X IN THE BOX CORRESPONDING TO ANSWER. FOR PERSONS 0 TO 9 YEARS OLD, WRITE X IN THE BOX FOR SINGLE. | What is ____'s religious affiliation? |
| | LIST THE PERSONS OR HOUSEHOLD MEMBERS IN THE ORDER SPECIFIED ON PAGE 2A. | WRITE ANSWER ON THE SPACE PROVIDED. SEE CODES AT THE BOTTOM. | WRITE X IN THE BOX. | | WRITE AGE IN THE BOXES. | WRITE X IN THE BOX. | | WRITE ANSWER ON THE SPACE PROVIDED. SEE CODEBOOK. |
| | P1 | P2 | P3 | P4 | P5 | P6 | P7 | P8 |
| 1 | ALEJANDRE (LAST NAME) / ELPIDIO (FIRST NAME) | 0 1 — HEAD SPECIFY | X 1 | 0 4 MM / 1 9 7 5 YYYY | 0 3 5 | X 1 | X 2 | 6 9 ROMAN CATHOLIC SPECIFY |
| 2 | TERESITA (FIRST NAME) | 0 2 — SPOUSE SPECIFY | X 2 | 0 6 MM / 1 9 8 1 YYYY | 0 2 8 | X 1 | X 2 | 6 9 ROMAN CATHOLIC SPECIFY |
| 3 | GEORGE (FIRST NAME) | 0 4 → 03 SON SPECIFY | X 1 | 0 7 MM / 2 0 0 3 YYYY | 0 0 7 | X 1 | X 1 / X 2 | 6 9 ROMAN CATHOLIC SPECIFY |
| 4 | REGINA (FIRST NAME) | 0 4 — DAUGHTER SPECIFY | X (1 crossed) / X 2 | 1 2 MM / 2 0 0 9 YYYY | 0 0 5 MONTHS / 000 | X 3 | X 1 | 6 9 ROMAN CATHOLIC SPECIFY |
| 5 | PAZ (FIRST NAME) | 3 4 — MOTHER SPECIFY | X 2 | 0 1 MM / 1 9 4 5 YYYY | 0 6 5 | X 1 | X 3 | 6 9 ROMAN CATHOLIC SPECIFY |
| 6 | SIMON (LAST NAME) / EVA (FIRST NAME) | 6 6 — DOMESTIC HELPER SPECIFY | X 2 | 0 2 MM / 1 9 7 4 YYYY | 0 3 6 | X 1 | X 1 | 5 0 JESUS REIGNS MINISTRIES SPECIFY |
| 7 | JTM (LAST NAME) | SPECIFY | | MM / YYYY | | | | SPECIFY |
| 8 | (LAST NAME) | SPECIFY | 2 | MM / YYYY | | 2 | | SPECIFY |

Callout annotations:
- Write-in entry should prevail
- Mark with x the box opposite code 2
- Age reported should be in completed years
- For member(s) less than 10 years old, code opposite 1 should be marked with x
- Not readable, seek assistance from the Supervisor

**HOUSEHOLD SIZE**

1. ... 1 Yes, ADD IN THE LIST.　X 2 No
2. IF THERE ARE MORE THAN 6 MEMBERS IN THIS HOUSEHOLD, WRITE X IN THE BOX FOR YES. OTHERWISE, WRITE X IN THE BOX FOR NO. 1 Yes, USE ADDITIONAL BOOKLET.　X 2 No

**CODES FOR P2 – RELATIONSHIP TO HOUSEHOLD HEAD**

| | | |
|---|---|---|
| 01 Head | 31 Grandson | 55 Nephew |
| 02 Spouse | 32 Granddaughter | 56 Niece |
| 03 Son | 33 Father | 57 Other relative |
| 04 Daughter | 34 Mother | 58 Nonrelative |
| 21 Stepson | 41 Brother | 65 Boarder |
| 22 Stepdaughter | 42 Sister | 66 Domestic helper |
| 23 Son-in-law | 43 Uncle | |
| 24 Daughter-in-law | 44 Aunt | |

### P9 and P10-Citizenship

If the box for code **1** is marked with **X** in Column P9, Column P10 should be blank. If write-in entry in P10 is **PHILIPPINES**, line this out. But if P10 has an entry other than **PHILIPPINES**, record this in CPH Form 24 for verification of DSO/SCO.

If the box for code **2** or **3** is marked with **X** in Column P9, there should be a corresponding entry in Column P10. If none, line out the entry in P9, then write **X** in the box for code **1** and encircle this code.

*Example:*



Check if the write-in entry for country of citizenship in P10 is clear and legible.  If not, seek the assistance of your Supervisor.  Check if the code entered by EN in P10 corresponds to the write-in entry. If not, line out the code and write the appropriate code. If the code boxes are blank, enter the correct three-digit code for this item. Refer to pages 3 to 4 of the Codebook for the codes of country of citizenship.

If there are many cases of blank entries for these items in one bundle, record it in CPH Form 24.

### P11-Ethnicity

All household members should have a write-in entry and corresponding code in this item.

Take note of the following cases and refer to pages 260 to 263 of the Enumerator's Manual in determining the ethnic groups that are considered Indigenous Peoples (IPs), Non-IPs, and Muslim:

- Parents are mixed non-IPs (father is non-IP and mother is non-IP)

  For children below 13 years old, check if their ethnicity is the same as that of their mother. If not, line out the entry and copy the ethnicity of his/her mother.

  For children aged 13 years and over, check if their ethnicity is the same as that of their father or mother. If not, record this on CPH Form 24 for referral to your Supervisor.

- Parents are mixed IPs (father is IP and mother is IP)

  For children below 13 years old, check if their ethnicity is the same as that of their mother. If not, line out the entry and copy the ethnicity of his/her mother.

  For children aged 13 years and over, check if their ethnicity is the same as that of their father or mother. If not, record this on CPH Form 24 for referral to your Supervisor.

- Parents are mixed IP and non-IP (father is IP and mother is non-IP or vice-versa)

  Check if the children's ethnicity is the same as that of the IP parent, regardless of the children's age. If not, line this out and copy the ethnicity of the IP parent. If code boxes are blank, just copy the ethnicity of the IP parent.

- Both parents are Muslims or the father is Muslim and the mother is non-Muslim

  For children whose father is Muslim, the entry should follow the father's ethnicity, regardless of the children's age and the mother's ethnicity. If not, line this out and copy the ethnicity of the father. If code boxes are blank, just copy the ethnicity of the father.

*Example:*



| BEFORE EDIT | AFTER EDIT |

Check if the write-in entry is clear and legible. If the entry is not readable, seek the assistance from the Supervisor. Check if the codes entered by EN correspond to the write-in entry. If not, line out the codes and write the appropriate codes. If the code boxes are blank, enter the correct three-digit code for this item. Refer to pages 5 to 6 of the Codebook for the codes of ethnicity.

If there are many cases of no entries or blank in this column, write it down in CPH Form 24 for referral to your Supervisor.

## P12-Disability

Check if there is an **X** mark in this column. If none, leave it blank. If most of the members or most of the questionnaires in the bundle have no entry in this column, record this case in CPH Form 24.

## P13-Functional Difficulty

All household members aged five years and over should have an **X** mark in the boxes for Yes or No in items **a** to **f** in this column. If there is an **X** mark in any of the boxes for the household member below 5 years old, line out all the boxes in this column for this household member.

*Example:*



Check if there is an **X** mark in each of the categories (**a** to **f**) of functional difficulty for Yes or No. If most of the members have no entries or blank for this item, write it down in CPH Form 24 for referral to your Supervisor.

## P14-Residence 5 Years Ago

All household members 5 years old and over should have write-in entries in this item. If there are entries for household members below 5 years old, line out the entries in this column.

If **SAME** is written on the space for the name of city/municipality and/or province, the code entered should be **0000**. Write this code if the code boxes are blank.

*Example:*

| BEFORE EDIT | AFTER EDIT |
|---|---|

**Residence 5 Years Ago**

*In what city/municipality did _____ reside on May 1, 2005?*

**0000** Same City/Municipality
**8887** Foreign country

IF SAME CITY/MUNICIPALITY, WRITE "SAME" ON THE SPACE PROVIDED.

IF ANOTHER CITY/ MUNICIPALITY, SPECIFY THE NAME OF CITY/MUNICIPALITY AND PROVINCE ON THE SPACES PROVIDED.

**P14**

PROV    CITY/MUN

[ ][ ][ ][ ]

SAME
PROVINCE
SAME
CITY/MUNICIPALITY

**Residence 5 Years Ago**

*In what city/municipality did _____ reside on May 1, 2005?*

**0000** Same City/Municipality
**8887** Foreign country

IF SAME CITY/MUNICIPALITY, WRITE "SAME" ON THE SPACE PROVIDED.

IF ANOTHER CITY/ MUNICIPALITY, SPECIFY THE NAME OF CITY/MUNICIPALITY AND PROVINCE ON THE SPACES PROVIDED.

**P14**

PROV    CITY/MUN

[0][0][0][0]

SAME
PROVINCE
SAME
CITY/MUNICIPALITY

If the place written is another city/municipality, check if it is clear and legible. If not, seek the assistance of your Supervisor. Leave the code boxes blank as the code for this item will be supplied by the Coder.

If the write-in entry for residence 5 years ago is a foreign country, check if the code supplied by the EN is **8887**. Write this code if the code boxes are blank.

For incomplete information such as only the name of the city/municipality or province is provided, log it in CPH Form 24 for referral to your Supervisor. If there is no entry, leave it blank. If there are many cases of no entries or blank in this column, record it in CPH Form 24 for referral to your Supervisor.

**P16-Highest Grade/Year Completed**

All household members 5 years old and over should have an entry in this column. If there is an entry for household member below 5 years old, line out the entry in this column.

If the EN supplied the three-digit code, check if the code corresponds to the write-in entry (refer to the codes for Column P16 at the bottom of page 2C of the questionnaire or refer to page 6 of the Codebook). If not, line out the incorrect code and write the appropriate code on the nearest space available.

*Example:*

| BEFORE EDIT | AFTER EDIT |
|---|---|

**Highest Grade/
Year Completed**

*What is the highest
grade/year
completed
by _____?*

**WRITE ANSWER
ON THE SPACE
PROVIDED.**

**IF GRADUATE
IN POST
SECONDARY
OR COLLEGE,
SPECIFY
THE COURSE.**

**SEE CODES
AT THE BOTTOM.**

**P16**

| 3 | 5 | 0 |
|---|---|---|

FIRST YR
COLLEGE

**SPECIFY**

**Highest Grade/
Year Completed**

*What is the highest
grade/year
completed
by _____?*

**WRITE ANSWER
ON THE SPACE
PROVIDED.**

**IF GRADUATE
IN POST
SECONDARY
OR COLLEGE,
SPECIFY
THE COURSE.**

**SEE CODES
AT THE BOTTOM.**

**P16**

8I0 | 3 | 5 | 0 |

FIRST YR
COLLEGE

**SPECIFY**

For post secondary and college graduates, check if the course specified is clear and legible. If the entries are not legible, request the assistance of your Supervisor. Leave the code boxes blank since the coders will provide the three-digit code. If there is no write-in entry and no code at the same time, leave this column blank. If the bundles being processed have many cases of missing entries, record it in CPH Form 24 for referral to the Supervisor.

## P19-Overseas Worker

All household members 10 years old and over should have an entry in this item. If there is any entry for a household member below 10 years old, line out all the boxes in this column for this household member. Check whether one of the code boxes is marked with **X**. If there is no entry in this item, leave it blank. If there are many cases of no entries or blank in this column, note this down in CPH Form 24.

### An Example of How to Edit Items P9 to P15 and P19 of CPH Form 2

The following items are edited for consistency (refer to Illustration 7.2 on page 69):

a. P9-Filipino Citizenship, Line No. 2

        Line out the box with **X** mark opposite **3**, write **X** mark in the box opposite **1** and encircle this code. If there is no entry in Column P10, the box opposite **1** should be marked with **X** in P9.

b. P10-Country of Citizenship, Line No. 1

        Line out the entry **PHILIPPINES** since the box for code **1** is marked with **X** in item P9. Item P10 in this case should be blank.

c. P11-Ethnicity, Line Nos. 3 to 5

        Line out the entry **TAGALOG** and write **IRAYA** on the nearest space for the ethnicity of all the children because they should follow the ethnicity of their mother who belongs to an IP group. Enter the appropriate code for **IRAYA**.

d. P13-Functional Difficulty, Line No. 4

        Line out all the entries since this item should only be asked for household members aged five years and over.

e. P15-Highest Grade/Year Completed, Line No. 6

        Line out code **340** and write code **350** on the nearest space since it corresponds to the write-in entry **HIGH SCHOOL GRADUATE**.

f. P19-Overseas Worker, Line No. 3

        Line out all the boxes since all household members below 10 years old should have no entry in this column.

## ILLUSTRATION 7.2
## HOW TO EDIT ITEMS P9 TO P19 OF CPH FORM 2



**POPULATION CENSUS QUESTIONS**

Form columns: P1 (Name), P5 (Age), P9 (Citizenship), P10 (What country/other country is a citizen of?), P11 (Ethnicity), P12 (Disability), P13 (Functional Difficulty), P14 (Residence 5 Years Ago), P16 (Highest Grade/Year Completed), P19 (Overseas Worker)

| Line | Name | Age (P5) | Ethnicity (P11) | Residence (P14) | Highest Grade (P16) |
|------|------|------|------|------|------|
| 1 | ALEJANDRE / ELPIDIO | 035 | 162 TAGALOG | VICTORIA, ORIENTAL MINDORO | B.S. IN ECONOMICS |
| 2 | TERESITA | 028 | 084 IRAYA | VICTORIA, OR. MINDORO | ASSOCIATE IN ACCOUNTANCY |
| 3 | GEORGE | 007 | ~~162~~ 084 IRAYA ~~TAGALOG~~ | VICTORIA, OR. MINDORO | 210 GRADE ONE |
| 4 | REGINA | ~~005~~ MONTHS 000 | ~~162~~ 084 IRAYA ~~TAGALOG~~ | | |
| 5 | PAZ | 065 | 162 TAGALOG | 0000 SAME, SAME | A.B. ENGLISH |
| 6 | SIMON / EVA | 036 | 040 BOHOLANO | 0000 SAME, SAME | ~~340~~ 350 HIGH SCHOOL GRADUATE |
| 7 | JTM | | | | |
| 8 | JTM | | | | |

**CODES FOR P16 – HIGHEST GRADE/YEAR COMPLETED**

| Elementary | High School | Post secondary ** | College ** |
|------|------|------|------|
| 000 No grade completed | 310 1st Year | 410 1st Year | 810 1st Year |
| 010 Preschool | 320 2nd Year | 420 2nd Year | 820 2nd Year |
| 210 Grade 1 | 330 3rd Year | 430 3rd Year | 830 3rd Year |
| 220 Grade 2 | 340 4th Year | | 840 4th Year |
| 230 Grade 3 | 350 High school graduate | ** IF GRADUATE IN POST SECONDARY AND COLLEGE, SPECIFY COURSE. | 850 5th Year |
| 240 Grade 4 | | | 860 6th Year |
| 250 Grade 5 | | | |
| 260 Grade 6 | | | 900 Post baccalaureate |
| 270 Grade 7 | | | |
| 280 Elementary graduate | | | |

CODE:
01 Head
02 Spouse
03 Son
04 Daughter
21 Stepson
22 Stepdaughter
23 Son-in-law
24 Daughter-in-law

1. Are there any other persons such children, infants, and/or overseas who were not yet listed?
☐ 1 Yes, ADD IN THE LIST.
☒ 2 No

2010 CPH
Kabilang Ako!

## HOUSING CENSUS QUESTIONS

The housing census questions are contained on page 2D of CPH Form 2. These questions collect information on the housing characteristics, whether the housing unit is:

- occupied by a household or persons excluded from enumeration,
- vacant,
- used as vacation or rest house, or
- occupied exclusively by non-usual residents.

---

### IMPORTANT NOTICE

For households with two or more booklets (households with more than eight members), be sure that only the first booklet of the housing portion is filled out. If there is no entry in the housing portion of the first booklet and the other booklet for the household has entries, transcribe the entries from this booklet to the first booklet and line out the entries in the housing portion of the other booklet.

---

### B1-Type of Building/House, B2-Construction Materials of the Roof, and B3-Construction Materials of the Outer Walls

For each item, there should be only one box marked with **X**. If there are multiple entries, encircle the corresponding code of the stronger/strongest materials and, then line out the entry indicating the weaker/weakest materials.

*Example:*

| BEFORE EDIT | AFTER EDIT |
|---|---|
| **B3** Construction materials of the outer walls<br>WRITE **X** IN THE BOX. **L**<br><br>[X] 01 Concrete/brick/stone<br>[ ] 02 Wood<br>[ ] 03 Half concrete/brick/stone and half wood<br>[ ] 04 Galvanized iron/aluminum<br>[ ] 05 Bamboo/sawali/cogon/nipa<br>[ ] 06 Asbestos<br>[X] 07 Glass<br>[ ] 08 Makeshift/salvaged/improvised materials<br>[ ] 09 Others, SPECIFY _____<br>[ ] 10 No walls | **B3** Construction materials of the outer walls<br>WRITE **X** IN THE BOX. **L**<br><br>[X] (01) Concrete/brick/stone<br>[ ] 02 Wood<br>[ ] 03 Half concrete/brick/stone and half wood<br>[ ] 04 Galvanized iron/aluminum<br>[ ] 05 Bamboo/sawali/cogon/nipa<br>[ ] 06 Asbestos<br>~~[X]~~ 07 Glass<br>[ ] 08 Makeshift/salvaged/improvised materials<br>[ ] 09 Others, SPECIFY _____<br>[ ] 10 No walls |

If the code box for **Others** in Items B2 (code **8**) or B3 (code **09**) is marked with **X**, check if there is a write-in entry. Try to determine if the given write-in

entry can be categorized in one of the response options.  Make correction when necessary.

If there is no entry, check the questionnaire of other households having the same BSN and HUSN, if any, and copy the answers in these items. If BSN and HUSN are unique and there is no entry, leave it blank.

For more than one household in a housing unit where the BSN and HUSN are the same, check whether the entries are the same for these households.  If not, consider the entries in the questionnaire of the first household in that housing unit (with lower/lowest HSN). If there are many cases of no entries or blank in this item, record it in CPH Form 24 for referral to your Supervisor.

## B4-State of Repair of the Building/House, B5-Year Building/House was Built, D1-Floor Area of the Housing Unit, and H8-Tenure Status of the Lot

For each item, there should be only one box marked with **X**.  In case of multiple **X** marks or no entry, check the questionnaire of other households having the same BSN and HUSN, if any, and copy the answers in these items. If BSN and HUSN are unique but entries in each of these items are more than one or there are no entries, record it in CPH Form 24.

For more than one household in a housing unit where the BSN and HUSN are the same, check whether the entries are the same for these households.  If not, consider the entries in the questionnaire of the first household in that housing unit (with lower/lowest HSN).

If answer in B1 is **6**, the entries in B4, B5, D1, and H8 should be **Not Applicable** (**7** for B4, **11** for B5, **12** for D1, and **5** for H8). If not, line out the entry/entries in B4, B5, D1, and/or H8; write **X** in the box(es) for code(s) that correspond to **Not Applicable** and encircle the corresponding code.

If there are many cases of no entries or blank in these items, record them in CPH Form 24.

*2010 CPH*

*Kabilang Ako!*

*Example:*

**BEFORE EDIT**

**B1   Type of building/house**
WRITE **X** IN THE BOX.

- [ ] 1  Single house
- [ ] 2  Duplex
- [ ] 3  Multi-unit residential (three units or more)
- [ ] 4  Commercial/industrial/agricultural (office, factory, and others)
- [ ] 5  Institutional living quarter (hotel, hospital, and others)
- [X] 6  Other housing units (boat, cave, and others)

**B4   State of repair of the building/house**
WRITE **X** IN THE BOX.

- [ ] 1  Needs no repair/needs minor repair
- [ ] 2  Needs major repair
- [ ] 3  Dilapidated/condemned
- [ ] 4  Under renovation/being repaired
- [ ] 5  Under construction
- [ ] 6  Unfinished construction
- [X] 7  Not applicable

**B5 IS TO BE ASKED FROM ANY HOUSEHOLD IN THE BUILDING.**

**B5   Year building/house was built**
*When was this building/house built?*
WRITE **X** IN THE BOX.

- [ ] 01  [2010]
- [ ] 02  [2009]
- [ ] 03  [2008]
- [ ] 04  [2007]
- [X] 05  [2006]
- [ ] 06  [2001 - 2005]
- [ ] 07  [1991 - 2000]
- [ ] 08  [1981 - 1990]
- [ ] 09  [1971 - 1980]
- [ ] 10  [1970 or earlier]
- [ ] 11  [Not applicable]
- [ ] 12  [Don't know]

**D1 IS TO BE ASKED FROM ANY HOUSEHOLD IN THE HOUSING UNIT.**

**D1   Floor area of the housing unit**
*What is the estimated floor area of this housing unit?*
WRITE **X** IN THE BOX.

- [ ] 01  [Less than 5 sq. m./ less than 54 sq. ft.]
- [ ] 02  [5 - 9 sq. m./54 - 107 sq. ft.]
- [ ] 03  [10 - 19 sq. m/108 - 209 sq. ft.]
- [ ] 04  [20 - 29 sq. m./210 - 317 sq. ft.]
- [ ] 05  [30 - 49 sq. m./318 - 532 sq. ft.]
- [ ] 06  [50 - 69 sq. m./533 - 748 sq. ft.]
- [ ] 07  [70 - 89 sq. m./749 - 963 sq. ft.]
- [ ] 08  [90 - 119 sq. m./964 - 1286 sq. ft.]
- [ ] 09  [120 - 149 sq. m./1287 - 1609 sq. ft.]
- [ ] 10  [150 - 199 sq. m./1610 - 2147 sq. ft.]
- [ ] 11  [200 sq. m. and over/ 2148 sq. ft. and over]
- [X] 12  Not applicable

**H8 IS TO BE ANSWERED BY ALL HOUSEHOLDS.**

**H8   Tenure status of the lot**
*Did you own or amortize this lot occupied by your household or do you rent it, do you occupy it rent-free with consent of owner, or rent-free without consent of owner?*
WRITE **X** IN THE BOX.

- [ ] 1  Owned/being amortized
- [ ] 2  Rented
- [ ] 3  Rent-free with consent of owner
- [X] 4  Rent-free without consent of owner
- [ ] 5  Not applicable

**AFTER EDIT**

**B1   Type of building/house**
WRITE **X** IN THE BOX.

- [ ] 1  Single house
- [ ] 2  Duplex
- [ ] 3  Multi-unit residential (three units or more)
- [ ] 4  Commercial/industrial/agricultural (office, factory, and others)
- [ ] 5  Institutional living quarter (hotel, hospital, and others)
- [X] 6  Other housing units (boat, cave, and others)

**B4   State of repair of the building/house**
WRITE **X** IN THE BOX.

- [ ] 1  Needs no repair/needs minor repair
- [ ] 2  Needs major repair
- [ ] 3  Dilapidated/condemned
- [ ] 4  Under renovation/being repaired
- [ ] 5  Under construction
- [ ] 6  Unfinished construction
- [X] 7  Not applicable

**B5 IS TO BE ASKED FROM ANY HOUSEHOLD IN THE BUILDING.**

**B5   Year building/house was built**
*When was this building/house built?*
WRITE **X** IN THE BOX.

- [ ] 01  [2010]
- [ ] 02  [2009]
- [ ] 03  [2008]
- [ ] 04  [2007]
- [~~X~~] 05  [2006]
- [ ] 06  [2001 - 2005]
- [ ] 07  [1991 - 2000]
- [ ] 08  [1981 - 1990]
- [ ] 09  [1971 - 1980]
- [ ] 10  [1970 or earlier]
- [X] ⑪  [Not applicable]
- [ ] 12  [Don't know]

**D1 IS TO BE ASKED FROM ANY HOUSEHOLD IN THE HOUSING UNIT.**

**D1   Floor area of the housing unit**
*What is the estimated floor area of this housing unit?*
WRITE **X** IN THE BOX.

- [ ] 01  [Less than 5 sq. m./ less than 54 sq. ft.]
- [ ] 02  [5 - 9 sq. m./54 - 107 sq. ft.]
- [ ] 03  [10 - 19 sq. m/108 - 209 sq. ft.]
- [ ] 04  [20 - 29 sq. m./210 - 317 sq. ft.]
- [ ] 05  [30 - 49 sq. m./318 - 532 sq. ft.]
- [ ] 06  [50 - 69 sq. m./533 - 748 sq. ft.]
- [ ] 07  [70 - 89 sq. m./749 - 963 sq. ft.]
- [ ] 08  [90 - 119 sq. m./964 - 1286 sq. ft.]
- [ ] 09  [120 - 149 sq. m./1287 - 1609 sq. ft.]
- [ ] 10  [150 - 199 sq. m./1610 - 2147 sq. ft.]
- [ ] 11  [200 sq. m. and over/ 2148 sq. ft. and over]
- [X] 12  Not applicable

**H8 IS TO BE ANSWERED BY ALL HOUSEHOLDS.**

**H8   Tenure status of the lot**
*Did you own or amortize this lot occupied by your household or do you rent it, do you occupy it rent-free with consent of owner, or rent-free without consent of owner?*
WRITE **X** IN THE BOX.

- [ ] 1  Owned/being amortized
- [ ] 2  Rented
- [ ] 3  Rent-free with consent of owner
- [~~X~~] 4  Rent-free without consent of owner
- [X] ⑤  Not applicable

## An Example of How to Edit Housing Census Questions of CPH Form 2

The following items are edited for consistency (refer to Illustration 7.3 below):

a. B2-Construction Materials of the Roof

Line out the box with **X** mark opposite 4, then write **X** in the box opposite **2** and encircle this code. Consider the entry with stronger material for the roof.

b. B3-Construction Materials of the Outer Walls

Line out the box with **X** mark opposite **04**, then write **X** in the box opposite **01** and encircle this code. Consider the entry with stronger material for the outer walls.

## ILLUSTRATION 7.3
## HOW TO EDIT HOUSING CENSUS QUESTIONS OF CPH FORM 2

# 7.3   EDITING OF CPH FORM 3

**Name of Household Head and Address, Number of Household Members, and Number of Males and Females**

For these items, follow the instructions in editing the same items in CPH Form 2 on pages 52 to 53.

**POPULATION CENSUS QUESTIONS**

The population census questions are contained on pages 3B and 3C of CPH Form 3.  This questionnaire collects more information on the characteristics of household members compared with CPH Form 2.

**Line Number, P1-Name, P2-Relationship to Head, P3-Sex, P4-Date of Birth, P5-Age, P6-Birth Registration, P7-Marital Status, P8-Religious Affiliation, P9 and P10-Country of Citizenship, P11-Ethnicity, P12-Disability, P13-Functional Difficulty, and P14-Residence 5 Years Ago**

For these items, follow the instructions in editing the same items in CPH Form 2 on pages 53 to 66.

**P15-Literacy**

All household members aged 5 years and over should have an **X** mark in the boxes for either **1** or **2** in this column.  If none, record it in CPH Form 24 for referral to your Supervisor.  On the other hand, if there is any entry for household members below 5 years old, line out all the boxes in this column for this household member.

*Example:*

| BEFORE EDIT | | AFTER EDIT | |
|---|---|---|---|
| **PAGE 3B** | **PAGE 3C** | **PAGE 3B** | **PAGE 3C** |



## P16-Highest Grade/Year Completed

For this item, follow the instructions in editing the same item in CPH Form 2 on pages 66 to 67.

## P17-School Attendance and P18-Place of School

All household members aged 5 to 24 years should have an **X** mark in the boxes for either code **1** or **2** in Column P17. If there are entries for household members below 5 years old, line out all the boxes in this column for this household member.

If the box for code **1** is marked with **X** in Column P17, there should be a corresponding entry in Column P18.  If none, line out the entry for code **1,** write **X** in the box for code **2** and encircle this code in Column P17.  On the other hand, if the box for code **2** is marked with **X** in Column P17 but there is an entry in P18, line out the entry in Column P17, then write **X** in the box for code **1** and encircle this code.

For item P18, follow similar instructions in editing P14-Residence 5 Years Ago in CPH Form 2 on pages 65 to 66.

*Example:*

| BEFORE EDIT | AFTER EDIT |
| --- | --- |

**BEFORE EDIT**

| For All 5 to 24 Years Old | |
| --- | --- |
| School Attendance | Place of School |
| *Did _____ attend school at anytime from June 2009 to March 2010?*<br><br>1 Yes<br>2 No<br><br>IF NO, SKIP TO P19. WRITE **X** IN THE BOX. | *In what city/municipality did _____ attend school?*<br><br>**0000** Same City/Municipality<br>**8887** Foreign country<br><br>IF SAME CITY/ MUNICIPALITY, WRITE "SAME" ON THE SPACE PROVIDED. IF ANOTHER CITY/MUNICIPALITY, SPECIFY THE NAME OF CITY/MUNICIPALITY AND PROVINCE ON THE SPACES PROVIDED. |
| **P17** | **P18** |

PROV   CITY/MUN

☐ 1    | 0 | 0 | 0 | 0 |

X 2

SAME
PROVINCE
SAME
CITY/MUNICIPALITY

**AFTER EDIT**

| For All 5 to 24 Years Old | |
| --- | --- |
| School Attendance | Place of School |
| *Did _____ attend school at anytime from June 2009 to March 2010?*<br><br>1 Yes<br>2 No<br><br>IF NO, SKIP TO P19. WRITE **X** IN THE BOX. | *In what city/municipality did _____ attend school?*<br><br>**0000** Same City/Municipality<br>**8887** Foreign country<br><br>IF SAME CITY/ MUNICIPALITY, WRITE "SAME" ON THE SPACE PROVIDED. IF ANOTHER CITY/MUNICIPALITY, SPECIFY THE NAME OF CITY/MUNICIPALITY AND PROVINCE ON THE SPACES PROVIDED. |
| **P17** | **P18** |

PROV   CITY/MUN

X ①    | 0 | 0 | 0 | 0 |

X̶ 2

SAME
PROVINCE
SAME
CITY/MUNICIPALITY

### P19-Overseas Worker

For this item, follow the instructions in editing the same item in CPH Form 2 on page 67.

### P20-Usual Occupation

All household members 15 years old and over should have write-in entries in this item.  If none, leave it blank.  If there are many cases of no entries or blank in this column, record it in CPH Form 24 for referral to your Supervisor.  On the other hand, if there is any entry for household members below 15 years old, line out the entry in this column.

Check if the write-in entry is clear and legible.  If not, seek the assistance of your Supervisor.  Leave the code boxes blank, the Coder will enter the four-digit code for this item.

*Example:*

| BEFORE EDIT | | AFTER EDIT | |
|---|---|---|---|
| **PAGE 3B** | **PAGE 3C** | **PAGE 3B** | **PAGE 3C** |



## P21-Kind of Business or Industry, P22-Class of Worker, and P23-Place of Work

There should be entries in these columns if the entry in Column P20 is considered a gainful activity, that is, the entry is not among the nongainful activities enumerated below:

- Housekeeper, own home/housewife
- Student
- Retired
- Dependent
- Disabled
- Pensioner

If the entry in P20 is a nongainful one, line out the entries in Columns P21, P22, and P23.

*Example:*

| BEFORE EDIT | AFTER EDIT |
| --- | --- |

| Usual Occupation | Kind of Business or Industry | Class of Worker | Place of Work |
| --- | --- | --- | --- |
| *During the past 12 months, what was _____'s usual activity/occupation?* <br><br> WRITE DETAILED DESCRIPTION ON THE SPACE PROVIDED. <br><br> IF STUDENT, HOUSEKEEPER, DEPENDENT, OR OTHER NON GAINFUL ACTIVITY SKIP TO P24. | *In what kind of business or industry did _____ work during the past 12 months?* <br><br> WRITE DETAILED DESCRIPTION ON THE SPACE PROVIDED. | *What kind of worker is _____?* <br><br> MENTION THE CATEGORIES AT THE BOTTOM. <br><br> WRITE THE ANSWER ON THE SPACE PROVIDED. SEE CODES AT THE BOTTOM. | *In what city/municipality did _____ work during the past 12 months?* <br><br> **0000** Same City/Municipality <br> **8887** Foreign country <br><br> IF SAME CITY/MUNICIPALITY, WRITE "SAME" ON THE SPACE PROVIDED. IF ANOTHER CITY/MUNICIPALITY, SPECIFY THE NAME OF CITY/MUNICIPALITY AND PROVINCE ON THE SPACES PROVIDED. |
| P20 | P21 | P22 | P23 |
| ▭▭▭▭ <br> HOUSEKEEPER IN OWN HOME <br> SPECIFY | ▭▭▭▭ <br> PRIVATE HOUSEHOLD <br> SPECIFY | 0 <br> PHH <br> SPECIFY | PROV  CITY/MUN <br> 0 0 0 0 <br> SAME <br> PROVINCE <br> SAME <br> CITY/MUNICIPALITY |

Check if the write-in entry in P21-Kind of Business or Industry is clear and legible. If not, seek the assistance of your Supervisor. Leave the code boxes blank because the Coder will enter the four-digit code for this item.

Check if the code provided for P22-Class of Worker corresponds to the write-in entry. If not, line out the code and write the correct code for class of worker in the nearest space available. Refer at the bottom of page 3C for the codes of Class of Worker.

For Item P23, follow similar instructions in editing P14-Residence 5 Years Ago on pages 65 to 66.

If there are no entries, leave them blank. However, if there are many cases of no entries or blank in these columns, record them in CPH Form 24 for referral to your Supervisor.

## FERTILITY INDICATORS

Questions on fertility indicators are contained on page 3C of CPH Form 3. These questions collect information on the number of children born alive to female household member(s) 15 to 49 years old and their age at first marriage.

All female household members aged 15 to 49 years old should have an entry in Items P24 to P27. If there are entries for members below 15 years old or more than 49 years old, line out these entries.

## P24-Number of Children Born Alive

Check if there is a numeric entry for this column for females aged 15 to 49 years old, if none leave it blank. However, if most of the questionnaires in the bundle have no entry in this column for female household members 15 to 49 years old, note this down in CPH Form 24.

## P25-Number of Children Still Alive

If entry in Column P24 is **01** or greater than **01**, there should be corresponding entry in Column P25. Entry in P25, however, should not be greater than the entry in P24. If there is no entry, leave it blank. If many of these cases occur in the questionnaire or in one bundle, record it in CPH Form 24.

## P26-Number of Children Born Alive from May 1, 2009 to April 30, 2010

Check if the entry in this item is equal or less than the entry in Columns P24 and P25. If not, record it in CPH Form 24 for referral to your Supervisor.

If the entry is **2** or more, check if the female household member gave birth to a twin or triplets or quadruplets, and so on. Confirm this in entries in P4 or P5 if there are 2 or more children with same date of birth/age. Check also if there was a short interval between two live-births. Verify this case in P4 if there are children with different dates of birth from May 2009 to April 2010 or verify in P5 if there are children aged less than one year old. If the above conditions were not found in Columns P4 and/or P5, record it in CPH Form 24.

If there is no entry, leave it blank. But if many of these cases occur in the questionnaire or in one bundle, record it in CPH Form 24.

## P27-Age at First Marriage

All female household members aged 15 to 49 years old should have an entry in this item, except for those who answered **1** for Single and **6** for Unknown in Column P7. If there is no entry, leave it blank.  But if many of these cases occur in the questionnaire or in one bundle, record it in CPH Form 24.

## ILLUSTRATION 7.4
## AN EXAMPLE OF CORRECTLY FILLED OUT ITEMS P14 TO P27
## OF CPH FORM 3



## HOUSEHOLD/HOUSING CENSUS QUESTIONS

The household/housing census questions are contained on page 3D of CPH Form 3. These items collect more information on the housing characteristics compared with CPH Form 2 and contain questions for household.

**B1-Type of Building/House, B2-Construction Materials of the Roof, B3-Construction Materials of the Outer Walls, B4-State of Repair of the Building/House, B5-Year Building/House was Built, and D1-Floor Area of the Housing Unit**

For these items, follow the instructions in editing the same items in CPH Form 2 on pages 70 to 72. Take note of the Important Notice.

**H1-Fuel for Lighting**

For this item, there should be only one box marked with **X**. If there is more than one entry but including Electricity, retain the **X** mark for Electricity and

encircle code **1**, then line out other entries for this item.  If there is no entry, leave it blank. But if there are many cases of no entries or blank, note it down in CPH Form 24.

*Example:*

| BEFORE EDIT | AFTER EDIT |
|---|---|
| **H1   Fuel for lighting**<br>*What type of fuel does this household use for lighting?*<br>WRITE **X** IN THE BOX.<br><br>[X] 1 Electricity        [ ] 4 Oil (vegetable, animal, and others)<br>[X] 2 Kerosene *(gaas)*   [ ] 5 Others, SPECIFY _____<br>[ ] 3 Liquefied petroleum gas (LPG)   [ ] 0 None | **H1   Fuel for lighting**<br>*What type of fuel does this household use for lighting?*<br>WRITE **X** IN THE BOX.<br><br>[X] ①Electricity        [ ] 4 Oil (vegetable, animal, and others)<br>[X̶] 2 Kerosene *(gaas)*   [ ] 5 Others, SPECIFY _____<br>[ ] 3 Liquefied petroleum gas (LPG)   [ ] 0 None |

If the code box for **Others** (code **5**) is marked with **X**, check if there is a write-in entry.  Try to determine if the given write-in entry can be categorized in one of the response options, then, make necessary correction.

## H2-Fuel for Cooking

For this item, there should be only one box marked with **X**. If there is more than one entry, record it in CPH Form 24. If there is no entry, leave it blank. But if there are many cases of no entries or blank, write it down in CPH Form 24.

If the code box for **Others** (code **6**) is marked with **X**, check if there is a write-in entry.  Try to determine if the given write-in entry can be categorized in one of the response options.  Make correction when necessary.

## H3-Source of Water Supply for Drinking, Cooking, Laundry and/or Bathing

For each source of water supply, there should be only one box marked with **X**.  If there is more than one entry, record it in CPH Form 24. If there is no entry, leave it blank. But if there are many cases of no entries or blank, record it also in CPH Form 24.

If the code box for **Others** in Item H3 (code **12**) is marked with **X**, check if there is a write-in entry.  Try to determine if the given write-in entry can be categorized in one of the response options, then, make the necessary corrections.

## H4-Tenure Status of the Housing Unit

For this item, there should be only one box marked with **X**.  If there is more than one entry, log it in CPH Form 24 for referral to your Supervisor. If

there is no entry, leave it blank. If there are many cases of blank or no entries in a bundle, record it in CPH Form 24.

## H5-Acquisition of the Housing Unit, H6-Source of Financing of the Housing Unit, and H7-Monthly Rental of the Housing Unit

If the box for code **1** is marked with **X** in Item H4, there should be corresponding entries in Items H5 and H6. If none, record it in CPH Form 24 for referral to your Supervisor. If the answer in Item H4 is **2**, Items H5 and H6 should be blank and there should be corresponding entry in Item H7. If entry in Item H4 is **3** or **4**, Items H5, H6, and H7 should be blank. If none, record it in CPH Form 24 for referral to your Supervisor.

If entry for Item H4 is **1** and there are no entries in Items H5 and H6 while there is an entry in Item H7, record it in CPH 24 for referral to your Supervisor. On the other hand, if entry for Item H4 is **2** and there is no entry in Item H7 while there are entries in H5 and/or H6, line out the entry in Item H4 and write **X** mark in the box for code **1** and encircle this code.

## H8-Tenure Status of the Lot

For this item, follow the instructions in editing the same item in CPH Form 2 on page 71. Take note of the Important Notice.

## H9-Usual Manner of Garbage Disposal

For this item, there should be only one box marked with **X**. If there is more than one entry, log it in CPH Form 24 for referral to your Supervisor. If there is no entry, leave it blank. If there are many cases of blank or no entries in a bundle, record it in CPH Form 24.

If the code box for **Others** (code **7**) is marked with **X**, check if there is a write-in entry. Try to determine if the given write-in entry can be categorized in one of the response options. Make correction when necessary.

## H10-Kind of Toilet Facility

For this item, there should be only one box marked with **X**. If there is more than one entry, log it in CPH Form 24 for referral to your Supervisor. If there is no entry, leave it blank. If there are many cases of blank or no entries in a bundle, record it in CPH Form 24.

## H11-Land Ownership

Check if there is an **X** mark in each of the categories of land ownership for Yes or No. If none, leave it blank. If most of the questionnaires in a bundle have

no entries for this item, write it down in CPH Form 24 for referral to your Supervisor.

## H12-Language/Dialect Generally Spoken at Home

Every household should have write-in entry in this item. If none, leave it blank. If there are many cases of no entries or blank in one bundle, record them in CPH Form 24 for referral to your Supervisor.

Check if the write-in entry is clear and legible. If the entry is not readable, seek the assistance from the Supervisor. Check if the code entered by EN corresponds to the write-in entry. If not, line out the code and write the appropriate code. If the code boxes are blank, enter the correct three-digit code for this item. Refer to pages 5 to 6 of the Codebook for the codes of language/dialect generally spoken at home.

## H13-Residence Five Years from Now

For this item, follow the instructions in editing P14-Residence 5 Years Ago on pages 65 to 66.

## H14-Presence of Household Conveniences/ICT Devices

Check if there is an **X** mark in each of the categories of household conveniences/ICT devices for Yes or No. If many of the questionnaires have no **X** mark in any category under this item, write them down in CPH Form 24 for referral to your Supervisor.

## H15-Internet Access

Check if there is an **X** mark in each of the sources of internet access for Yes or No. If none, leave it blank. But if many of the questionnaires in a bundle have no **X** mark for this item, write them down CPH Form 24 for referral to your Supervisor.

## ILLUSTRATION 7.5
## AN EXAMPLE OF CORRECTLY FILLED OUT ITEMS B1 TO H15
## OF CPH FORM 3



# 7.4 TRANSCRIPTION OF CPH FORM 2 USED AS CPH FORM 4

The ENs were instructed to use CPH Form 2 as an improvised CPH Form 4 in cases when they have ran out of CPH Form 4 during enumeration. To avoid confusion during the later stage of data processing operation, CPH Form 2 that was used to enumerate ILQs should be transcribed into CPH Form 4. This should be done before the detailed editing of CPH Form 4.

Use the supplied pencil in transcribing improvised CPH Form 2 used as CPH Form 4 into CPH Form 4. Check if all the entries below are copied correctly. Then, set aside CPH Form 2 used as CPH Form 4 for verification if the need arises.

The items to be transcribed from CPH Form 2 to CPH Form 4 are the following:

| CPH Form 2 Used as CPH Form 4 | CPH Form 4 |
|---|---|
| Geographic Identification<br>HSN<br>Line Number of Respondent<br>Name of Household Head<br>Address<br>Interview Record | Geographic Identification<br>ISN<br>Type of Institutional Living Quarter<br>Name of Institutional Living Quarter<br>Address<br>Interview Record |
| Demographic Characteristics:<br>P1-Name<br>P2-Relationship to Head<br>P3-Sex<br>P4-Date of Birth<br>P5-Age<br>P6-Birth Registration<br>P7-Marital Status<br>P8-Religious Affiliation<br>P9 and P10-Citizenship<br>P11-Ethnicity<br>P12-Disability<br>P13-Functional Difficulty<br>P16-Highest Grade/Year Completed | Demographic Characteristics:<br>P1-Name<br>P2-Residence Status<br>P3-Sex<br>P4-Date of Birth<br>P5-Age<br>P6-Birth Registration<br>P7-Marital Status<br>P8-Religious Affiliation<br>P9 and P10-Citizenship<br>P11-Ethnicity<br>P12-Disability<br>P13-Functional Difficulty<br>P16-Highest Grade/Year Completed |

# 7.5  EDITING OF CPH FORM 4

Editing of CPH Form 4 should proceed after all CPH Forms 2 and 3 for the barangay/EA have been completely edited.  Below are the instructions in editing CPH Form 4.

**Name and Address of Institutional Living Quarter**

Verify if the name of ILQ is the same with that recorded in CPH Form 1.  If there is any inconsistency, the name written in CPH Form 4 shall prevail.  If there is no entry, copy the name of the ILQ that appears in CPH Form 1 having the same ISN.

Likewise, check if the corresponding address is properly filled out. Match the address written in CPH Form 4 with the address written in CPH Form 1. Make correction when needed.

**Total Members in the Institution and Number of Males and Females**

Ensure that the total number of members in the institution recorded in the Interview Record panel of CPH Form 4 (page 4A) corresponds to the line number of the last member in the institution (page 4B or 4C). If not, line out the entry in the Interview Record portion and write the correct number. If there is no entry, enter the number based on the line number of the last member in the institution. See Illustration 7.6 on page 88.

In the Interview Record panel of CPH Form 4, ensure that the number of males corresponds to the number of members with **X** in the box for code **1** (Male) in Column P3-Sex and that the number of females corresponds to the number of members with **X** in the box for code **2** (Female) in the same column. If not, line out the entry in the Interview Record portion and write the correct number. If there is no entry, write the correct number in the corresponding boxes for males and females based in Column P3-Sex.

**POPULATION CENSUS QUESTIONS**

**Line Number**

If the institution has more than 16 members, check if there are two or more questionnaires used for the institution. Examine whether the line numbers in the succeeding questionnaire(s) have been renumbered. If not, line out the pre-printed line number and write the succeeding number on top. Start from **17** for the second questionnaire, and so on, down to the last member of the institution.

If there are gaps in line numbers because of deletion or duplication, renumber the line numbers accordingly. See line numbers 6 and 7 in Illustration 7.6.

**P1-Name**

Check that the name of the members is in the order as listed in the coding scheme for P2-Residence Status. If not, leave it blank. Check for fictitious names, names of actors or popular personalities and spot names that occurred more than once. Report such cases to the Supervisor for appropriate action.

## P2-Residence Status

Check if the two-digit code entered in the boxes is correct by matching it against the write-in entries in this column (refer to the codes at the bottom of page 4B of the questionnaire). If there is any inconsistency, the write-in entry shall prevail. See line number 4 in Illustration 7.6.

If there are no entries, check if the answer can be determined based on the residence status of the other members of the institution.  If not possible, record this case in CPH Form 24 so that the Supervisor could refer it to DSO/SCO.

## P3-Sex to P13-Functional Difficulty and P16-Highest Grade/Year Completed

For these items, follow the instructions given for the same items in CPH Form 2.

## ILLUSTRATION 7.6
## HOW TO EDIT SELECTED ITEMS ON CPH FORM 4

**PAGE 4A**

**PAGE 4B**



# 7.6 EDITING OF CPH FORM 1

During the editing of CPH Forms 2, 3, and 4, there may be cases when their corresponding entries in CPH Form 1 have been updated. Editing shall be done only when these forms corresponding to a particular CPH Form 1 have been edited.

Verify the entry for the total number of buildings, vacant buildings, housing units, vacant housing units, households, institutions, as well as total household population, institutional population, and total population by sex in every page of CPH Form 1.

### a. Total Buildings (A)

Line numbers with **X** mark in the circle of Column 1 (for callback) are excluded from the count. Also, make sure that multiple entries in one line are considered in the count.

If there is no **X** mark in Column 1, check the **BSNs** in Column 2. If they are numbered consecutively, subtract the first BSN from the last BSN **of the same page** and add 1. Check the entry in the box for Total (A) of Column 2. Make necessary correction, if needed.

If there are **X** marks in Column 1 or the BSNs are not numbered consecutively, count all the buildings with unique BSNs in Column 2.

For vacant buildings, count the number of entries marked with **VBLDG** in Column 6 and check the entry in the box for Vacant [below (A)] of Column 2. See Column 2 in Illustration 7.7, page 92).

### b. Total Housing Units (B)

Line numbers with **X** mark in the circle of Column 1 are to be excluded in the count.

If there is no **X** mark in Column 1, check the **HUSNs** in Column 3. If they are numbered consecutively, subtract the first HUSN from the last HUSN **of the same page** and add 1. Check the entry in the box for Total (B) of Column 3. Make necessary correction, if needed.

If there are **X** marks in Column 1 or the HUSNs are not numbered consecutively, count all the housing units with unique HUSNs in Column 3. Make necessary correction, if needed. See Column 3 in Illustration 7.7.

For vacant housing units, count the number of entries with **VHU** and the corresponding units for **VBLDG** in Column 6 and make sure that multiple entries in one line under Column 3 are considered in the count. Check the entry in the box for Vacant [below (B)] of Column 3.

**c. Total Households (C)**

Line numbers with **X** mark in the circle of Column 1 are to be excluded.

If there is no **X** mark in Column 1, check the **HSNs** in Column 4. If they are numbered consecutively**,** subtract the first HSN from the last HSN **of the same page** and add 1.  Check the entry in the box for Total(C) of Column 4.  Make necessary correction, if needed.

If there are **X** marks in Column 1 or the HSNs are not consecutively numbered, count all the households with unique HSNs in Column 4.  Make necessary correction, if needed.

Take note that HSNs **7777, 8888**, **8889**, and **9999** are excluded in the count.  See Column 4 in Illustration 7.7.

**d. Total Institutional Living Quarters (D)**

Line numbers with **X** mark in the circle of Column 1 are excluded in the count.

If there is no **X** mark in Column 1, check the **ISNs** in Column 5. If they are numbered consecutively, subtract the first ISN from the last ISN **of the same page** and add 1.  Check the entry in the box for Total (D) of Column 5. See Column 5 in Illustration 7.7. Make necessary correction, if needed.

If there are **X** marks in Column 1 or the ISNs are not consecutively numbered, count all the institutional living quarters with unique ISNs in Column 5.  Make necessary corrections if needed.

**e. Total Household Population (E) to (G)**

The sum of males (Column 8) and females (Column 9) must be equal to the total household population in Column 7, such that:

**(E) = (F) + (G)**

Line numbers with ✓ mark in the circle in Column 7 (an indicator for institutional population) are excluded from the count.

For records **without** ✓ mark in the abovementioned circle in Column 7, add all entries in Columns 7, 8, and 9 downward (by column) to check whether the entries in the boxes for Total, Male, and

Female corresponding to the Total Household Population are correct. See Columns 7, 8, and 9 in Illustration 7.7.

### f. Total Institutional Population (H) to (J)

The sum of males (Column 8) and females (Column 9) for institutional population should be equal to Column 7, such that:

**(H) = (I) + (J)**

For records **with** ✓ mark in the circle in Column 7, add all entries in Columns 7, 8, and 9 downward (by column) and check entries in the boxes for Total, Male, and Female, respectively. See Columns 7, 8, and 9 of Illustration 7.7.

### g. Total Population

Check the entries in the row for total population by adding the entries in the total household and institutional population in Columns 7 to 9. See Columns 7, 8, and 9 of Illustration 7.7.

## ILLUSTRATION 7.7
## HOW TO EDIT CPH FORM 1

**CPH FORM 1**

**AUTHORITY:**
Commonwealth Act No. 591, Batas Pambansa Blg. 72, and Executive Order No. 121 authorize the National Statistics Office (NSO) to conduct and collect information for this census.

**CONFIDENTIALITY:**
Section 4 of Commonwealth Act No. 591 provides that all information furnished in this booklet shall be kept STRICTLY CONFIDENTIAL.

*Republic of the Philippines*
**NATIONAL STATISTICS OFFICE**
**2010 CENSUS OF POPULATION AND HOUSING**
**LISTING BOOKLET**

002256   **1A**

NSCB Approval No. NSO – 1003-01

Expires on: June 30, 2011

### CERTIFICATION

I hereby certify that the data set forth herein were personally obtained/reviewed by me and in accordance with the instructions given by the NSO.

*J maramot*

| JAM MARAMOT | 06/09/10 |
|---|---|
| ENUMERATOR (SIGNATURE OVER PRINTED NAME) | DATE SIGNED |

*Glipio*

| GUILIPIO | 06/11/10 |
|---|---|
| TEAM SUPERVISOR (SIGNATURE OVER PRINTED NAME) | DATE SIGNED |

### GEOGRAPHIC IDENTIFICATION

MONTH OF VISIT `0 6`  RANDOM START `0 2`  BOOKLET `0 5` OF `0 5` BOOKLETS

PROVINCE BOHOL `1 2`  BARANGAY MAGSAYSAY `0 1 3`

CITY/MUNICIPALITY SEVILLA `3 9`  ENUMERATION AREA NUMBER `0 0 0 0`

### LISTING RECORD

| LINE NO. (1) | DAY OF VISIT / CALL-BACK INDICATOR (2) | BUILDING SERIAL NUMBER (BSN) (3) | HOUSING UNIT SERIAL NUMBER (HUSN) (4) | HOUSE-HOLD SERIAL NUMBER (HSN) (5) | INSTI-TUTIONAL SERIAL NUMBER (ISN) | NAME OF HOUSEHOLD HEAD OR NAME/TYPE OF INSTITUTION / ADDRESS (6) | TOTAL (7) | MALE (8) | FEMALE (9) | REMARK/S (10) |
|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 08 ◯ | 0209 | 0209 | 0205 | | RICARTE, HAZEL / #4 DANGAONAN STREET | 11 ◯ | 4 | 7 | |
| 2 | 08 ⊗ | 0210 | 0210 | 0206 | | FONTAMILLAS, MARIE / #6 DANGAONAN STREET | ◯ | | | APPT 06/09 10:00 AM |
| 3 | 08 ◯ | 0211 | 0211 | 0207 | | REYES, CRISTINA / #8 DANGAONAN STREET | 8 ◯ | 5 | 3 | |
| 4 | 08 ◯ | 0212 | 0212 | 0208 | | TURTAL, EMELITA / #10 DANGAONAN STREET | 4 ◯ | 2 | 2 | |
| 5 | 08 ◯ | 0213 | 0213 | 0209 | | PEREZ, RAMIRO / #12 DANGAONAN STREET | 1 ◯ | 1 | 0 | |
| 6 | 08 ◯ | 0214 | 0214 | 0210 | | TAGUIAM, ARNELSON / #14 DANGAONAN STREET | 6 ◯ | 2 | 4 | |
| 7 | 09 ◯ | 0210 | 0210 | 0206 | | FONTAMILLAS, MARIE / #6 DANGAONAN STREET | 4 ◯ | 3 | 1 | |
| 8 | 09 ◯ | 0215 | 0215 | 9999 | | VBLDG / #16 DANGAONAN STREET | ◯ | | | |
| 9 | 09 ◯ | 0216 | | | 0002 | MILITARY CAMP / #35 CENTRO STREET | 27 ✓ | 27 | 0 | |
| 10 | 00 ◯ | | | | | | ◯ | | | |

| | DAY OF VISIT | BSN (A) | HUSN (B) | HSN (C) | ISN (D) | | TOTAL (E) | MALE (F) | FEMALE (G) | |
|---|---|---|---|---|---|---|---|---|---|---|
| **TOTAL** | | ~~9~~ 8 | 7 | 6 | 1 | **TOTAL HOUSEHOLD POPULATION** | ~~35~~ 34 | 17 | ~~18~~ 17 | |
| **VACANT** | | 1 | 1 | | | **TOTAL INSTITUTIONAL POPULATION** | 27 (H) | 27 (I) | 0 (J) | |
| | | | | | | **TOTAL POPULATION** | ~~62~~ 61 | 44 | ~~18~~ 17 | |

2010 CPH
*Kabilang Ako!*

# 7.7 EDITING OF CPH FORM 5

Editing of CPH Form 5 shall be done by the Assistant Supervisor only after the verification of CPH Forms 1, 2, 3, and 4 have been done.

## Name of Respondent, Designation/Position in the Barangay, and Address

Check if the name, designation/position, and address of respondent for CPH Form 5 are legibly written. If none, just leave them blank.

## Part I-Barangay Facilities/Characteristics

For items Q1 to Q5, either code **1** for Yes or code **2** for No should have an **X** mark. For items that require distance, check if there is one code marked with **X** and that the skipping instruction is followed.

If there is no entry, record this case in CPH Form 24 so that the Supervisor could refer it to DSO/SCO.

*Example:*



## Part II-Kinds of Establishments

In each column for Items Q6 to Q12, there should be three-digit entries inside the boxes for questions (a) and (b). An entry that is less than 100 should have a prefix of **0** or **00**. If there are no entries in these columns, record it in CPH Form 24 for referral to Supervisor.

*Example:*

| ORIGINAL ENTRY BY EN |
|---|

| Part II – Kinds of Establishments | | 5C |
|---|---|---|

INSTRUCTION: ENTER ANSWER IN THE BOXES PROVIDED.

| | | Number of Establishments with... | | |
|---|---|---|---|---|
| | | less than 10 employees | 10-99 employees | 100 employees or more |
| Q6 Commercial establishments like wholesale store, department store, bazaar, hardware store, drugstore, gasoline station, sari-sari store, or other stores with current merchandise worth P600 or more. | a. How many commercial establishments in this barangay have less than 10 employees, 10 to 99 employees, and 100 employees or more? → | \| 1 | \| 1 | |
| | b. How many commercial establishments outside the barangay but within 2 kms. from the barangay hall have less than 10 employees, 10 to 99 employees, and 100 employees or more? → | \| 5 | 4 | 2 |

| CORRECTION DONE |
|---|

| Part II – Kinds of Establishments | | 5C |
|---|---|---|

INSTRUCTION: ENTER ANSWER IN THE BOXES PROVIDED.

| | | Number of Establishments with... | | |
|---|---|---|---|---|
| | | less than 10 employees | 10-99 employees | 100 employees or more |
| Q6 Commercial establishments like wholesale store, department store, bazaar, hardware store, drugstore, gasoline station, sari-sari store, or other stores with current merchandise worth P600 or more. | a. How many commercial establishments in this barangay have less than 10 employees, 10 to 99 employees, and 100 employees or more? → | 0 \| 1 | 0 0 \| | |
| | b. How many commercial establishments outside the barangay but within 2 kms. from the barangay hall have less than 10 employees, 10 to 99 employees, and 100 employees or more? → | 0 \| 5 | 0 0 4 | 0 0 2 |

## Part III-Travel Information

Item Q13 can have an **X** mark in any mode of transportation from (a) to (j) for mode of transportation from the town/city proper to the barangay. Item Q14 should have an **X** mark for **Yes** or **No** in every corresponding mode of transportation with **X** mark in Q13. If none, record it in CPH Form 24.

Item Q15 should have an entry in the box for every corresponding **X** mark in Q13. If none, write this case in CPH Form 24.

Item Q16 should have an entry for amount of transportation. Prefix **0** whenever necessary. If none, record it in CPH form 24 for referral to your DSO/SCO.

If there is an **X** mark in Q13 for **i** (**hiking/walking)**, item Q17 should have an **X** mark in box for **i** (**hiking/walking) is marked with "X"**. Otherwise, the box

for **i** (**hiking/walking) is not marked with "X"** should have an **X** mark. This indicates the end of interview and the next item Q18 should be blank.

Item Q18 should have entries for number of hours and minutes if Q13 has an **X** mark for **(i)** in mode of transportation. If there are entries for Q18 but **(i)** for Q13 is blank or if there is an **X** mark in (**i**) for Q13 but there is no entry in either number of hours or number of minutes, record it in CPH Form 24.

*Example:*

| Part III – Travel Information | | | |
|---|---|---|---|
| | Mode of Transportation/Access from the Town/City Proper | | Frequency |
| Mode of Transportation/*Access*<br><br>Any blank and inconsistency should be referred to DSO/SCO | *What are the modes of transportation/access from the town/city proper to this barangay?*<br><br>WRITE "X" IN THE BOX FOR ALL AVAILABLE MODES OF TRANSPORTATION/ACCESS.<br>Q13 | *If mode of transportation/access is marked "X" in Q13, does_____ pass directly or indirectly to this barangay?*<br><br>1 Directly    2 Indirectly<br><br>WRITE "X" IN THE BOX CORRESPONDING TO THE ANSWER<br>Q14 | *How many days in a week is _____ available as a mode of transportation?*<br><br>WRITE THE NUMBER OF DAYS IN THE BOX FOR ALL MODES OF TRANSPORTATION WITH "X" MARK IN Q13.<br>Q15 |
| a. Bus | ☐ | ☐ 1   ☐ 2 | ☐ |
| b. Jeepney | ☒ | ☐ 1   ☐ 2 | 7 |
| c. Van | ☐ | ☐ 1   ☐ 2 | ☐ |
| d. Tricycle | ☒ | ☒ 1   ☐ 2 | 7 |
| e. Motorcycle | ☐ | ☐ 1   ☐ 2 | ☐ |
| f. Boat/motorboat | ☒ | ☐ 1   ☒ 2 | 5 |
| g. Calesa/other animal-driven transport | ☒ | ☒ 1   ☐ 2 | 6 |
| h. Horse and other animals | ☐ | ☐ 1   ☐ 2 | ☐ |
| i. Hiking/walking | ☐ | ☐ 1   ☐ 2 | |
| j. Others, specify _____ | ☐ | ☐ 1   ☐ 2 | ☐ |
| **Q16** Using the most economical mode of transportation possible, how much (in peso) is the total cost of a one-way trip from the town/city proper to the barangay? | | | 0 0 0 2 4 |
| **Q17** CHECK Q13 FOR ITEM i<br>IF ITEM i (hiking/walking) IS MARKED WITH "X" ☐ → GO TO Q18<br>IF ITEM i (hiking/walking) IS NOT MARKED WITH "X" ☒ → END INTERVIEW | | | |
| **Q18** How many hours is the travel time in hiking/walking from the last vehicle station to the barangay? | | | 0 1    3 0<br>HR     MIN |

# 7.8 HOW TO FILL OUT CPH FORM 24 – PROBLEMS REFERRAL FORM

In editing CPH forms, Processors may encounter problems or errors that should be referred to their Supervisors. These problems/errors should be compiled using CPH Form 24 – Problems Referral Form for submission and discussion with the Supervisor. Cases that could not be resolved by the Supervisor should be referred to the DSO/SCO for verification with the CAS/ACAS/TS/EN. Below are the instructions to the editors on how to fill out CPH Form 24.

1. Fill out the geo-ID portion by writing the names of the province, city/municipality, and barangay, and their corresponding codes.

2. Write the EA number in the boxes.

3. Indicate in Column 1 the type of form with problems/inconsistencies/ errors.

4. Write the building, housing unit, and household or institutional serial numbers of the questionnaire in their respective columns.

5. Write the description of the problem encountered, actions taken, and remarks in Columns 6 to 8, respectively.

6. Fill out CPH Form 24 for every EA/barangay.

7. After recording all the problems, write your name and affix your signature on the space provided. Record also the date when you submitted CPH Form 24 to your Supervisor.

See Illustration 7.8 on next page for example on how to accomplish CPH Form 24 that will be submitted to Supervisor.

## ILLUSTRATION 7.8
## HOW TO ACCOMPLISH CPH FORM 24

CPH Form 24

**Republic of the Philippines**
**NATIONAL STATISTICS OFFICE**

**2010 Census of Population and Housing**
**PROBLEMS REFERRAL FORM**

Sheet 1 of 1 Sheets

Province: BOHOL

City/Municipality: SEVILLA

Barangay: MAGSAYSAY    1 2
                       3 9

Enumeration Area Number: 0 1 3
                         0 0 0 0

| Type of Form (1) | Building Serial Number (BSN) (2) | Housing Unit Serial Number (HUSN) (3) | Household Serial Number (HSN) (4) | Institutional Serial Number (ISN) (5) | Problems Encountered (6) | Actions Taken (7) | Remarks (8) |
|---|---|---|---|---|---|---|---|
| CPH F2 | 0056 | 0057 | 0057 | - | NO ENTRIES ON P11 | | |
| CPH F2 | 0068 | 0069 | 0069 | - | NO CODE OF 01 IN P2 | | |
| CPH F3 | 0017 | 0017 | 0017 | - | NO WRITE-IN ENTRY FOR MUNICIPALITY IN P14 | | |
| CPH F3 | 0022 | 0022 | 0022 | - | LINE 2 – ENTRY IN P26 IS GREATER THAN ENTRY IN P25 | | |
| CPH F4 | 0131 | - | - | 0002 | LINES 2 TO 8 – HOLLYWOOD ACTORS' NAMES | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Prepared by: DEOMAR PASION
_Signature over printed name_

07/09/2010
_Date submitted to Supervisor_

# 8

# CODING OF ITEMS
# IN CPH FORMS 2, 3, AND 4

After CPH Forms 2, 3, and 4 have been edited, coding of several items shall be done.

📖 **Coding** *is the process of assigning numeric characters that correspond to write-in entries in the questionnaire in preparation for machine processing.* It is done to facilitate computer editing and tabulation of data.

**0123456789**

Specialized Coders shall be assigned to code the write-in entries of the following items:

| Item | CPH Form Type | | |
|---|:---:|:---:|:---:|
| | 2 | 3 | 4 |
| P14-Residence 5 Years Ago | ✓ | ✓ | |
| P16-Highest Grade/Year Completed (for Post Secondary and College Courses) | ✓ | ✓ | ✓ |
| P18-Place of School | | ✓ | |
| P20-Usual Occupation | | ✓ | |
| P21-Kind of Business or Industry | | ✓ | |
| P23-Place of Work | | ✓ | |
| H13-Residence 5 Years from Now | | ✓ | |

Some coding procedures are complicated and classification of a particular write-in entry that corresponds to a code requires skill. Thus, specialization in coding of the abovementioned items is necessary to ensure that correct and uniform coding procedures are followed. In addition, specialization in coding shall not only ensure accuracy of codes for write-in entries but shall also speed up the coding activity.

## 8.1  WHO ARE THE SPECIALIZED CODERS

Specialized Coders are to be selected by the PSO from the pool of Processors. The selection shall be based on the performance of the manual processors during the first week of processing, that is, those who committed the least number of errors in coding (see Chapter 2, page 13 for the detailed discussion).

After the specialized Coders are selected, they shall undergo a short briefing about the details of their job. This includes familiarization of the e-library and codebooks that they will be using for coding and discussion of strategies on how to standardize and hasten the coding process, such as writing on the board the common occupations found in the questionnaires and their corresponding codes. It is important that Coders work as a team and discuss with the Supervisors problems in coding, especially those entries which are difficult to code.

## 8.2  GENERAL INSTRUCTIONS FOR SPECIALIZED CODERS

Below are the procedures to be followed by specialized Coders in performing their tasks:

a.  Get an EA pack containing edited CPH Forms 2, 3, and 4 from the RCC.

b.  Code the write-in entries in Columns P8, P10, P11, P14, P16, P18, P20, P21, P22, P23, H12, and H13 in CPH Forms 2, 3, and 4.

c.  Use the following reference materials for coding or verification of codes supplied by ENs:

| Item for Coding/Verification of Codes | Reference Material |
|---|---|
| Residence 5 Years Ago, Place of School, Place of Work, and Residence 5 Years from Now | Codebook |
| Highest Grade/Year Completed (for Post Secondary and College Courses) | PSCED |
| Usual Occupation | PSOC |
| Kind of Business/Industry | PSIC |

Coders may also use the Electronic Library installed in POs for coding.

For PSCED, PSOC, and PSIC, courses in the post secondary and tertiary levels of education, occupation, and kind of business/industry, respectively, are found in hierarchical and alphabetical listing. In hierarchical listing, the courses are arranged according to the level of education while occupations and kind of business/industry are arranged based on Major Groups/Divisions. In alphabetical listing, courses, occupations, and kind of business/industry are arranged in alphabetical order.

a.  After coding CPH Forms 2, 3, and 4 of an EA pack, accomplish CPH Form 22. Refer to Section 11.2 on page 140 for instructions in filling out this form.

b.  Return the forms after coding to RCC and get another EA pack.

# 8.3 SPECIFIC INSTRUCTIONS IN CODING ITEMS IN CPH FORMS 2, 3, AND 4

**P14-Residence 5 Years Ago**

Four-digit code boxes are provided for this item.  Refer to pages 7 to 18 of the Codebook for the codes of province and city/municipality. The provinces and their cities/municipalities are arranged in alphabetical order with their corresponding codes. The first two digits correspond to province code while the last two digits stand for city/municipality code. Enter the appropriate codes in the boxes that correspond to the write-in entry.

*Example:*

On the other hand, if entry is **SAME** but code boxes are blank, enter **0000**. If write-in entry is a foreign country and code boxes are blank, enter **8887**.

## P16-Highest Grade/Year Completed

If the entry is a specific grade/year, the ENs were instructed to enter the corresponding code for the specific grade or year level. In this case, check if the codes provided are correct. If not, make necessary corrections. Refer to the codes written on:

- page 2C of CPH Form 2,
- page 3C of CPH Form 3,
- page 4C of CPH Form 4, or
- page 6 of the Codebook.

In coding post secondary non tertiary and/or technical-vocational courses, as well as tertiary, first stage/baccalaureate or college and academic degrees, the 2008 Philippine Standard Classification of Education (PSCED) will be used as reference.

PSCED is a detailed classification of all educational levels in the country's educational system. It aims to integrate the different classification schemes used by various agencies, the purpose of which is to standardize and facilitate compilation of education statistics as basis for educational planning, manpower training, labor market studies, and other related activities.

For the 2010 CPH, a condensed version of PSCED is provided. It contains 5-digit program codes for post secondary education starting with code 5 and collegiate or academic degrees starting with code 6.

Courses are arranged according to the particular program of education (that is, programs in economics, programs in civil engineering, programs in medicine, and others) where they belong. Further, the lists of courses are presented in hierarchical and alphabetical order with their corresponding codes.

For the purpose of coding column P16, the 2008 PSCED contains the three-digit codes for post secondary and tertiary levels of education. It uses the following coding scheme:

- one-digit code level representing the educational *level*, that is, code **5** for post secondary and code **6** for college level;
- three-digit code level representing the *field*; and
- five-digit code representing the *program*

*Examples:*

| PSCED Code | | COURSE DESCRIPTION |
|---|---|---|
| **3-digit** | **5-digit** | |
| | | **POST SECONDARY NONTERTIARY/TECHNICAL-VOCATIONAL EDUCATION** |
| | | **GENERAL** |
| **501** | **BASIC PROGRAMS** | |
| | 50100 | Basic General Programs |
| | 50100 | Associate in Arts/Liberal Arts |

| PSCED Code | | COURSE DESCRIPTION |
|---|---|---|
| **3-digit** | **5-digit** | |
| | | **FIRST STAGE OF TERTIARY/BACCALAUREATE EDUCATION (NOT LEADING DIRECTLY TO AN ADVANCED RESEARCH QUALIFICATION)** |
| | | **GENERAL** |
| **601** | **BASIC PROGRAMS** | |
| | 60100 | Basic General Programs |
| | 60100 | Bachelor |

## Guidelines in Coding Post Secondary and College Courses

In coding the courses in Column P16, Coders may use the hierarchical listing or alphabetical listing of courses. The three-digit code for the field group should be written in the boxes.

Follow the guidelines in the next page in coding post secondary and college courses:

a. If the Coder opts to use the hierarchical list, determine first if the indicated write in-entry is a post secondary or college course. If post

secondary, refer to pages 1 to 19 of PSCED. If college course, refer to pages 20 to 36 of PSCED. Then, find the course specified in Column P16, and write the three-digit field code where the course belongs.

*Example (using the hierarchical list of PSCED):*

| Highest Grade/ Year Completed | | |
|---|---|---|

**672 HEALTH PROGRAMS**

| | | |
|---|---|---|
| 67202 | Programs in Hygiene | |
| 67202 | | Bachelor of Science in Community/Public Health |
| 67202 | | Bachelor of Science in Sanitary Science |
| 67206 | Programs in Medicine | |
| 67206 | | Bachelor of Arts in Basic Medical Sciences |
| 67206 | | Doctor of Medicine |
| 67208 | Programs in Rehabilitation Medicine | |
| 67208 | | Bachelor of Science in Occupational Therapy |
| 67208 | | Bachelor of Science in Physical Therapy |
| 67208 | | Bachelor of Science in Respiratory Therapy |
| 67208 | | Bachelor of Science in Speech Pathology |
| 67212 | Programs in Nursing | |
| 67212 | | Bachelor of Science in Nursing |

*What is the highest grade/year completed by _____ ?*

WRITE ANSWER ON THE SPACE PROVIDED.

IF GRADUATE IN POST SECONDARY OR COLLEGE, SPECIFY THE COURSE. SEE CODES AT THE BOTTOM.

**P16**

**6 7 2**

**BS NURSING**
_____
SPECIFY

b. If the Coder opts to use the alphabetical list, determine first if the indicated write in-entry is a post secondary or college course. If post secondary, refer to pages 39 to 58 of PSCED. If college course, refer to pages 59 to 75 of PSCED. Next, find the course specified in Column P16 according to the first letter of the course. Then, copy the first three digits starting from the leftmost digit of the corresponding code.

*Example (using the alphabetical list of PSCED):*

**P16**

**5 2 1**

PHOTOGRAPHY
_____
SPECIFY

| | |
|---|---|
| 52271 | Philosophy |
| 52271 | Philosophy, Programs in |
| 52142 | Photography |
| 52142 | Photography and Cinematography, Programs in |
| 51404 | Physical Education |
| 54432 | Physics, Programs in |

## P18-Place of School

Refer to instructions in coding P14-Residence 5 Years Ago on page 100.

**P20-Usual Occupation**

The classification scheme that will be used in coding the usual activity or occupation is the PSOC. This book, which is based on the 1992 PSOC, approved by the National Statistical Coordination Board (NSCB), contains unique codes that could identify each occupation. It is patterned after the International Standard Classification of Occupations (ISCO). This classification uses the following coding scheme:

- first digit represents the *major* group;
- first and second digits form the *sub-major* group;
- first, second, and third digits form the *minor* group; and
- all four digits form the *unit* group.

*Example:*

---

**MAJOR GROUP 2**

**PROFESSIONALS**

**21 PHYSICAL, MATHEMATICAL, AND ENGINEERING SCIENCE PROFESSIONALS**

**211 PHYSICISTS, CHEMISTS AND RELATED PROFESSIONALS**

**2111** PHYSICISTS AND ASTRONOMERS
- ASTRONOMER          - LIGHT AND OPTICS PHYSICIST
- PHYSICIST (GENERAL)  - ASTRONOMICAL SCIENTIST

---

As Coder, you should familiarize yourself with the Major Groups of occupational classification, as follows:

| PSOC Major Group | Description | Pages in PSOC |
|---|---|---|
| 1 | Officials of Government and Special-Interest Organizations, Corporate Executives, Managers, Managing Proprietors, and Supervisors | 1 to 6 |
| 2 | Professionals | 7 to 14 |
| 3 | Technicians and Associate Professionals | 15 to 23 |
| 4 | Clerks | 24 to 26 |
| 5 | Service Workers and Shop and Market Sales Workers | 27 to 29 |
| 6 | Farmers, Forestry Workers, and Fishermen | 30 to 32 |
| 7 | Trades and Related Workers | 33 to 39 |
| 8 | Plant and Machine Operators and Assemblers | 40 to 46 |
| 9 | Elementary Occupation: Laborers and Unskilled Workers | 47 to 49 |
| 0 | Special Occupations (Including Nongainful Activities) | 50 |

## Guidelines in Coding Usual Occupation

Follow the guidelines below in coding usual occupation:

a. For 2010 CPH, <u>the four-digit code</u> for the unit group shall be entered in the boxes provided for this item.

*Example:*



b. To determine the code of the reported occupation, use first the alphabetical listing (refer to pages 53 to 93 of PSOC). If the occupation reported exactly matches with the alphabetical listing, copy the corresponding code.

*Example (using the alphabetical list of PSOC):*



| | |
|---|---|
| 5161 | Fire-brigade/marshall |
| 5161 | Fire-fighter (general) |
| 3151 | Firefighter specialist |
| 5161 | Fire-fighting operative |
| 5161 | Fireman |
| 3151 | Fire-prevention specialist |

c. If there is no exact match in the alphabetical listing, use the hierarchical listing. Determine first the major occupation group where the reported occupation falls based on the description of the job. Then, determine the sub-major and minor groups by looking at the list of occupations enumerated under the unit group.

*Example (using the hierarchical list of PSOC):*

```
  P20
┌─────────┐
│ 6 1 2 2 │
└─────────┘
  DURIAN
  FARMER
  SPECIFY
```

**612 ORCHARD FARMERS**

**6121** COCONUT FARMERS

**6122** FRUIT TREE FARMERS

- MANGO FARMER        - CITRUS FARMER
- BANANA FARMER       - PAPAYA FARMER

**6123** TREE NUT FARMERS

- CASHEW NUT FARMER  - AFRICAN OIL PALM FARMER
- PILI NUT FARMER       - CASTAÑAS FARMER
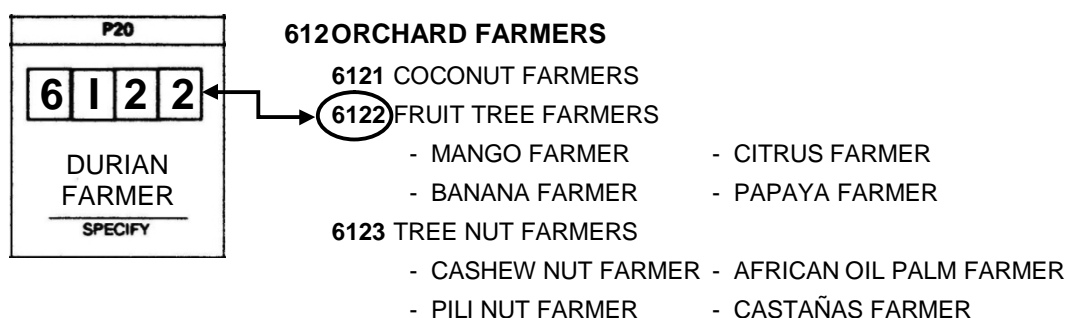
Since the description of the job relates with fruit tree farming, it is classified as farmer/plant grower under major group **6**, sub-major group **61** (Farmers and Other Plant Growers), and minor group **612** (Orchard Farmers) which includes the unit group Fruit Tree Farmers. Thus, the respondent whose reported occupation is durian farmer will be assigned a code of **6122**.

d. If the reported occupation does not give a detailed description of the job that would allow for a four-digit coding, code the occupation to the level supported by the response, that is, to the third, second or first digit level, and affix **0**, **00**, or **000** to the code.

*Examples:*

| Write-in entry in item P20-Usual Occupation | Code to be used |
|---|---|
| Mechanic | 7230 |
| Engineer | 2150 |
| Farmer | 6100 |
| Machine Operator | 8200 |
| Laborer | 9000 |
| Clerk | 4000 |

**P21-Kind of Business or Industry**

The classification scheme that will be used in coding the usual business or industry is the PSIC.  This book, which is based on the 2009 PSIC, approved by the NSCB, contains unique codes that could identify each industry.  It is patterned after the International Standard Industrial Classification (ISIC) Rev 4. The PSIC codebook categorizes industry in groups of major division and uses the following coding scheme:

- letters A to U represent the industry *section*;
- first and second digits form the industry *division*;

- first, second, and third digits form the industry *group*;
- first, second, third, and four digits form the industry *class*;
- all five digits form the *sub-class*.

*Example:*

---

**SECTION A. AGRICULTURE, FORESTRY AND FISHING**

This section includes the exploitation of vegetal and animal natural resources, comprising the activities of growing crops, raising and breeding of animals, harvesting of timber and other plants, animals or animal products from a farm or their natural habitats.

**Division 01. Crop and animal production, hunting and related service activities**

The division involves the production of food and non-food crops; livestock and poultry production and animal products; hunting and trapping of animals and related support activities. This includes production for the market or for own subsistence use; organically and genetically modified crops and livestock.

011    Growing of non-perrenial crops

This group includes the growing of non-perrenial crops, i.e. plants that do not last for more than two growing seasons. Included is the growing of these plants for the purpose of seed production.

0111    Growing of cereals (except rice and corn), leguminous crops and oil seeds

01111    Growing of leguminous crops such as: mongo, string beans (sitao), pigeon peas, gisantes, garbanzos, bountiful beans (habichuelas)

---

As Coder, you should familiarize yourself with the Sections and Divisions of industrial classification, as follows:

| Section | Division | Description | Pages in PSIC |
|---------|----------|-------------|---------------|
| A | 01 to 03 | Agriculture, Forestry, and Fishing | A-1 to A-12 |
| B | 05 to 09 | Mining and Quarrying | B-1 to B-7 |
| C | 10 to 33 | Manufacturing | C-3 to C-107 |
| D | 35 | Electricity, Gas, Steam, and Air Conditioning Supply | D-1 to D-2 |
| E | 36 to 39 | Water Supply; Sewerage, Waste Management and Remediation Activities | E-1 to E-7 |
| F | 41 to 43 | Construction | F-1 to F-9 |
| G | 45 to 47 | Wholesale and Retail Trade; Repair of Motor Vehicles and Motorcycles | G-1 to G-21 |
| H | 49 to 53 | Transportation and Storage | H-1 to H-9 |
| I | 55 to 56 | Accommodation and Food Service Activities | I-1 to I-4 |
| J | 58 to 63 | Information and Communication | J-1 to J-13 |
| K | 64 to 66 | Financial and Insurance Activities | K-1 to K-7 |
| L | 68 | Real Estate Activites | L-1 to L-2 |

| Section | Division | Description | Pages in PSIC |
|---------|----------|-------------|---------------|
| M | 69 to 75 | Professional, Scientific, and Technical Activities | M-1 to M-12 |
| N | 77 to 82 | Administrative and Support Service Activities | N-1 to N-18 |
| O | 84 | Public Administration and Defense; Compulsory Social Security | O-1 TO O-5 |
| P | 85 | Education | P-1 TO P-6 |
| Q | 86 to 88 | Human Health and Social Work Activities | Q-1 TO Q-8 |
| R | 90 to 93 | Arts, Entertainment, and Recreation | R-1 TO R-8 |
| S | 94 to 96 | Other Service Activities | S-1 TO S-8 |
| T | 97 to 98 | Activities of  Households as Employers; Undifferentiated-Goods and Services-Producing Activities of Households for Own Use | T-1 TO T-2 |
| U | 99 | Activities of Extraterritorial Organizations and Bodies | U-1 |

### Guidelines in Coding Kind of Business/Industry

Follow the guidelines below in coding kind of business/industry:

a.  For 2010 CPH, only the four-digit code for the industry class is needed and shall be entered in the boxes provided for this item.

*Example:*



b.  To determine the code of the reported kind of business or industry, use first the alphabetical listing (refer to pages 1 to 27 of PSIC). If the occupation reported exactly matches with the alphabetical listing, copy the first four digits starting from the leftmost digit of the corresponding code.

*Example (using the alphabetical list of PSIC):*

| P21 | | | |
|---|---|---|---|
| 6 | 5 | 1 | 1 |

LIFE
INSURANCE

SPECIFY

| | |
|---|---|
| **82227** | Legal services activities |
| **64922** | Lending investor activities |
| **91010** | Library and archives activities |
| **65110** | Life insurance |
| **08102** | Limestone quarrying |
| **90002** | Live theatrical presentations and other stage productions |
| **49203** | Local bus line operation |

c.  If there is no exact match in the alphabetical listing, use the hierarchical listing.  Determine first the industry section where the reported kind of business or industry falls based on the description of the business activity. Then, determine the division and industry groups by looking at the list of occupations enumerated under the industry class.

*Example (using the hierarchical list of PSIC):*

**DIVISION 45. WHOLESALE AND RETAIL TRADE AND REPAIR OF MOTOR VEHICLES AND MOTORCYCLES**

452    4520    Maintenance and repair of motor vehicles

This class includes :

Maintenance and repair of motor vehicles:
   mechanical repairs
   electrical repairs
   electronic injection system repair
   ordinary servicing
   bodywork repair
   repair of motor vehicle parts
   washing, polishing, etc.
   spraying and painting
   repair of screens and windows
   repair of motor vehicle seats

| P21 | | | |
|---|---|---|---|
| 4 | 5 | 2 | 0 |

GLASSWORKS ON
MOTOR VEHICLE

SPECIFY

Tire and tube repair, fitting or replacement;
Anti-rust treatment.

Installation of parts and accessories not as part of the manufacturing process.

This class excludes retreading and rebuilding of tires, see 2211.

45201    Repair of motor vehicles, including overhauling
45202    Repair of batteries for motor vehicles
45203    Vulcanizing or preparing of tires for motor vehicles
45209    Maintenance of motor vehicles, n.e.c.

Since the description of the business activity deals with repair of motor vehicle, then it should be classified under Section G (Wholesale and Retail Trade; Repair of Motor Vehicles and Motorcycles) under Division **45** (Wholesale and Retail Trade and Repair of Motor Vehicles and Motorcycles), and industry group **452** (Maintenance and repair of motor vehicles). Since there is only one industry class under industry group **452**, code **4520** should be entered in the code boxes.

d. If the reported kind of business or industry does not give a detailed description of the job that would allow for a four-digit coding, code the kind of business or industry to the level supported by the response, that is, to the third, second, or first level, and affix **0** or **00** to the code.

*Examples:*

| Write-in entry in item<br>P21-Kind of Business/Industry | Code to be used |
|---|---|
| Animal Farming | 0140 |
| Fishing | 0310 |
| Water Transportation | 5000 |
| Food Manufacturing | 1000 |
| Real Estate | 6800 |

## P23-Place of Work

Refer to instructions in coding P14-Residence 5 Years Ago on page 100.

## H13-Residence 5 Years From Now

Refer to instructions in coding P14-Residence 5 Years Ago on page 100.

# 9
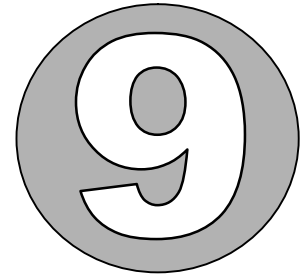
# VERIFICATION
# OF CPH FORMS 1, 2, 3, 4, AND 5

An essential aspect of manual processing is verification. It ensures that information gathered in CPH forms have passed acceptable quality standards before proceeding to machine processing, which involves data capture using Intelligent Character Recognition (ICR) technology. This activity also ensures that procedures discussed in the earlier chapters of this manual are strictly followed.

Verification is done after the questionnaires had undergone review for completeness, editing, and coding. In this stage of processing, a sample or complete verification of CPH forms will be employed. For CPH Forms 1, 2, 3, and 4, verification will be done for at least 20 percent. On the other hand, a complete verification will be done for CPH Form 5.

## 9.1 WHO ARE THE VERIFIERS

Among the pool of Processors, a few will be chosen to serve as Verifiers. These Verifiers must come from the ranks of processors and must be the best among them. Actual editing and coding must have been done by Verifiers prior to their selection. (See Section 2.3 on page 13 for the detailed discussion on the selection of Verifiers.)

Verifiers should undergo a short briefing about the nature of their job before embarking on actual verification of questionnaires. They shall be guided by the Supervisor and Assistant Supervisor in their task during the sample verification phase.

To further establish quality control measure during this stage, the Supervisor, Assistant Supervisor, and PSO shall perform sample verification of the questionnaires. In the process, they should be able to detect errors in the

questionnaires and at the same time monitor the work of Editors, Coders, and Verifiers.

# 9.2 GENERAL INSTRUCTIONS IN THE VERIFICATION PROCESS

Verification process involves selection of questionnaires in an EA pack that will be subjected for verification of entries that have been edited and coded. The results of verification shall identify EAs that have passed or failed verification. In the case of failed verification, the questionnaires in the EA shall undergo further verification.

PSO, Supervisor, Assistant Supervisor, and Verifiers shall be responsible in this process. They shall adhere to the following instructions:

1. A sampling rate shall be applied in the selection of questionnaires (CPH Forms 2, 3, and 4) in an EA to be verified, the minimum of which is 20 percent for each type of questionnaire in an EA that shall be carried out by Verifiers. This means that every fifth questionnaire in an EA shall be verified. All items in questionnaires that are subject for verification shall be verified.

2. The selected questionnaires shall also be verified against CPH Form 1 for consistency of entries.

3. From the sample questionnaires that will be verified, an EA pack will be assessed whether it passes or fails verification.

4. Even if an EA pack passes verification from the Verifiers, the said pack shall still be subjected to another round of verification from the Assistant Supervisor, Supervisor, and PSO. This is important especially in monitoring the work of all processors, from Editors, Coders, and Verifiers.

5. The Supervisor and Assistant Supervisor shall perform verification of at least 10 percent of the processed questionnaires (CPH Forms 2, 3 and 4) while the PSO shall carry out verification of at least 2 percent of the processed questionnaires. Furthermore, a 100 percent verification of CPH Form 5 shall be done by the Supervisor.

6. If an EA pack fails verification, all questionnaires in the said pack shall be subjected to 100-percent verification.

7. To closely monitor the verification process, CPH Form 20 (Verification Slip for CPH Form 1, 2, 3, 4 or 5) shall be accomplished to tally errors

found in the questionnaires and to serve as record of CPH forms that have passed or failed the sample verification. Verifiers should accomplish and submit this form to the Supervisor, who, in turn should call the attention of the Processors concerned and discuss the errors committed.

8. The PSO, Supervisor, and Assistant Supervisor should also use CPH Form 20 in their verification, as basis in monitoring the quality of manual processing and evaluating the performance of Processors. Whenever necessary, the Supervisor may recommend to the PSO for the replacement of an Editor, Coder or Verifier in view of his/her poor performance.

9. In the course of verification process, the Supervisor shall hold a meeting with the Processors from time to time to discuss observations and errors committed based on CPH Form 20, and other problems encountered during processing.

10. All questionnaires that have passed verification or failed verification but were already subjected to 100-percent verification should be prepared for bundling and eventual transmittal to CPC 2010.

11. In addition to CPH Form 20, Verifiers and Assistant Supervisors will have to accomplish CPH Form 22 (Manual Processor's Daily Accomplishment Report) after verification of CPH Forms 1, 2, 3, and 4 of an EA pack for progress monitoring of processing. See a sample of filled out CPH Form 20 on pages 121 to 122.

# 9.3 SAMPLE SELECTION OF QUESTIONNAIRES FOR VERIFICATION

The decision on which CPH form should be verified will depend on whether a 20 percent or 100 percent sampling rate was applied to the EA during enumeration. If the EA was subjected to a 20 percent sampling rate during enumeration, CPH Form 3 would comprise of 20 percent of the total households in the EA while CPH Form 2 would constitute of 80 percent of the total households. For verification, you will get 20 percent of each type of CPH form in an EA to be verified.

Example:

An EA pack with the following contents of CPH forms should have the corresponding number of CPH forms for verification based on a 20 percent sampling rate.

| CPH Form Type | Total Number of CPH Forms in an EA Pack | Total Number of CPH Forms to be Verified |
|---|---|---|
| CPH Form 2 | 400 | 80 |
| CPH Form 3 | 100 | 20 |
| CPH Form 4 | 20 | 4 |

For purposes of verification, if a household or institution has more than one questionnaire, all the questionnaires for that household or institution should be counted only as one. When that particular household or institution is selected as sample questionnaire for verification, all the questionnaires for that household or institution shall be completely verified.

The rules for the selection of questionnaires for verification are given below:

1. One random number start will be assigned by the RCC to all Processors for each day.

2. Based on the random number start given by the RCC, verify every fifth questionnaire in the bundle.

Should the supervisor decide for a higher sampling rate of say, 30 percent or 50 percent, the selection of questionnaires for verification should be guided by the following rules:

1. For a 30 percent sampling rate, verify the first and every succeeding third questionnaire in the bundle of each type of CPH form for an EA.

2. For a 50 percent sampling rate, verify the first and every other questionnaire in the bundle of each type of CPH form for an EA.

---

### IMPORTANT NOTICE

Make sure that the questionnaires are arranged in ascending order of household/institutional serial numbers before starting the selection of sample for verification.

---

# 9.4 SPECIFIC INSTRUCTIONS IN SAMPLE VERIFICATION OF QUESTIONNAIRES

### a. Receipt and Control Clerk

The following are the procedures that must be followed by the RCC in the sample verification of CPH Forms 1, 2, 3, 4, and 5:

1. Assign a random number start everyday for each Verifier and inform them on the selected random number start.

2. Assign an EA pack containing CPH Forms 1, 2, 3, and/or 4 to the Verifiers. Give the bundle of CPH Form 5 to the Supervisor for complete verification.

3. Record in CPH Form 19 the date when the EA pack was given to Verifiers and when the pack was returned. Then, ask the Verifier to write his/her initials beside the date. The date(s) the pack was given and returned shall also be encoded in the computer using TRACS.

4. Record in the TRACS the EA pack that passed sample verification. For those packs that failed sample verification, the Verifier shall do 100 percent verification. The RCC shall also record this in the TRACS.

5. At the end of each week, the RCC should summarize the verifications done and submit this report to the Supervisor. The report shall include the number of households verified, and the number of EA packs or bundles that have passed or failed the sample verification.

### b. Verifiers

The tasks of the Verifiers are essentially the same as those of the work of Editors and Coders, with some modifications. Editors check the ENs' work while Coders write the appropriate codes for the write-in entries made by the ENs. The Verifiers, meanwhile, check the work of the Editors and Coders but on a sample basis for CPH Forms 2, 3, and 4.

The following are the procedures that must be followed by the Verifiers:

1. Get an EA pack to be verified from the RCC.

2. Using the random number start given by the RCC, review the selected CPH Forms 2, 3, and 4 for legibility, completeness and consistency of entries, and correctness of codes. Match these questionnaires with the corresponding entries in CPH Form 1 and check the page totals in CPH Form 1.

For a 20 percent sampling rate, verify every 5th household or institutional questionnaire in the EA, correcting all the errors that you find as you go through all the sample questionnaires. Do not put unnecessary marks on the questionnaires being verified.

Put a "**V**" mark on the upper left portion of the census questionnaire (in the panel box which includes the CPH Form Number, Authority, and Confidentiality) to indicate that the particular questionnaire had already been verified.

*Examples:*



3. Record the errors that the Editors and Coders committed in processing the questionnaires using CPH Form 20. If the Editor or Coder committed the same error for entries of two or more members of the same household, count them only as one.

4. The following are some of the possible error(s) that may be committed by the Editor and/or Coder:

- An item in geo-ID without code or with wrong code;

- Wrong totals in CPH Form 1;
- Missing entries (for instance, write-in entries were lined out but no correction(s) were made);
- Missing or wrong codes for the following items:
  - ✓ Relationship to household head
  - ✓ Religious affiliation
  - ✓ Country of citizenship
  - ✓ Ethnicity
  - ✓ Residence 5 years ago
  - ✓ Highest grade/year completed
  - ✓ Place of school
  - ✓ Usual occupation
  - ✓ Kind of business or industry
  - ✓ Class of worker
  - ✓ Place of work
  - ✓ Language/dialect generally spoken at home
  - ✓ Residence 5 years from now
- Inconsistent entries

5. Upon completion of the verification for an EA bundle for CPH Forms 2, 3, and 4, you should affix your signature on the corresponding bundle cover.

6. You should accomplish CPH Form 20 and report verification done with the questionnaires. If the number of questionnaires with error is less than 50 percent of the verified questionnaires, write **"PASS"** for status to mean that the EA bundle had passed the sample verification; otherwise, write **"FAIL".** If one of the items failed verification, you should verify all items in all questionnaires of the EA/barangay, that is, perform 100 percent verification.

## c. Supervisor or Assistant Supervisor

The following tasks should be performed by the **Supervisor and Assistant Supervisor** during the sample verification phase:

1. Check that the procedures for sample verification are strictly followed.

2. Verify at least 10 percent of the processed questionnaires.

3. Answer queries of the Processors regarding problems encountered while processing the questionnaires.

4.  Based on the weekly report of RCC, make a weekly report on the progress of verification activity to PSO.  Include in the report the number of questionnaires that passed or failed verification.  Report also problems that may cause delay in the verification activity.

5.  The Supervisor should submit to PSO the names of Editor(s), Coder(s) or Verifier(s) whose performance does not conform with the standard procedures of manual processing.  The Editor, Coder or Verifier may be required to attend a re-briefing or may be dismissed from work if his/her performance does not improve.

6.  The Assistant Supervisor should edit and check the completeness of entries in CPH Form 5 while the Supervisor should verify these forms on a 100 percent basis.  Write **"PASS"** in CPH Form 20 for the status of processing to mean that the forms have passed verification, otherwise, write **"FAIL".** If there is at least one blank entry in CPH Form 5 when there should be an entry, the questionnaire must be considered as failed.  In this case, the questionnaire must be returned to the concerned DSO/SCO for verification.

7.  The Supervisor and Assistant Supervisor should accomplish CPH Form 20 to tally the number of errors found in the questionnaires.  This form shall serve as a means to monitor the quality of data.  See Illustration 9.1 on pages 121 to 122 for a sample of filled out CPH Form 20.

### d.  Provincial Statistics Officer

The following are the tasks of the PSO during the sample verification phase:

1.  Based on the weekly report of the RCC and the Supervisor, PSO should call the attention of the processors whose work seldom passed verification.

    - For first offense, issue a warning to the processor and urge him/her to improve on his/her performance.

    - For second offense, issue another warning to the processor and see to it that he/she undergoes a review of editing, coding, and verification procedures.

- For the third offense, dismiss and replace the processor for not being able to cope with the standards set for processing.

2. Verify at least 2 percent of the processed questionnaires.

3. Attend to problem(s), if any, regarding editing, coding, and verification activities.

# 9.5 HOW TO FILL OUT CPH FORM 20 – VERIFICATION SLIP FOR CPH FORM 1, 2, 3, 4 OR 5

During verification, the PSO, Supervisor, Assistant Supervisor, and Verifiers, should fill out CPH Form 20 – Verification Slip for CPH Form 1, 2, 3, 4, or 5. Below are the instructions on how to fill out the said form:

1. Fill out the geo-ID portion by writing the name of the province and city/municipality and their corresponding codes.

2. Write **X** on the box(es) corresponding to the type of CPH form to be verified:
   - CPH Form 1 and CPH Form 2;
   - CPH Form 1 and CPH Form 3
   - CPH Form 1 and CPH Form 4; and
   - CPH Form 5

3. There are four columns in each CPH Form 20 that correspond to different EAs/barangays. In each of these columns, write the following information:
   - name of Editor/Coder;
   - barangay code/EA number;
   - number of bundles/number of questionnaires to be verified/total questionnaires in the bundle;
   - date of verification; and
   - random number start given by RCC.

4. Verify all entries in the selected questionnaires. Tally all errors by marking with "**I**" the corresponding item under the column for **Number of Questionnaires with Error(s)**. If the Editor or Coder commits error for the same item in two or more household members, count them only as one. Some of the items are only applicable to CPH Form 3. For CPH Form 2 or 4, some items (such as P15-Literacy, P17-School Attendance, P18-Place of School, and others) should be left blank in columns for **Number of Questionnaires with Error(s)** and **Status**.

5. After verification of all questionnaires in an EA pack, count the tallied marks and write the total beside the marks. Write **0** if no error was found in an item.

6. If 50 percent of CPH Forms 1, 2, 3, or 4 were found to be erroneous, write **FAIL** in the column for **Status**. Otherwise, write **PASS**. For CPH Form 5, if one of the item fails verification, write **FAIL** in the column for **Status**. Otherwise, write **PASS**.

7. Write remarks at the bottom of page 2. Specify the item(s) that failed verification and write the action(s) to be taken. If all items in the questionnaire have passed verification, write **ALL ITEMS PASSED**.

8. Repeat instruction numbers 3 to 7 in the verification of other EA packs. Use one CPH Form 20 for verification of four EA packs of the same type of CPH form.

9. After verifying four EA packs, write your name and affix your signature at the bottom of page 2. Record also the date when you submitted the CPH Form 20 to your Supervisor.

Submit accomplished CPH Form 20 to your Supervisor after all CPH forms in the EA pack are verified. See example of accomplished CPH Form 20 on next page.

## ILLUSTRATION 9.1
## FILLED OUT CPH FORM 20
## (Verification Slip for CPH Form 1, 2, 3, 4 or 5)

**CPH Form 20**

*Republic of the Philippines*
**NATIONAL STATISTICS OFFICE**

**2010 Census of Population and Housing**

**VERIFICATION SLIP**
**FOR CPH FORM 1, 2, 3, 4 OR 5**

Sheet `0` `1` of `0` `1` Sheets

Province    **BOHOL**    `1` `2`

City/Municipality    **SEVILLA**    `3` `9`

Verification Slip for: ☒ CPH Form 1    ☐ CPH Form 2    ☒ CPH Form 3    ☐ CPH Form 4    ☐ CPH Form 5

| | | | |
|---|---|---|---|
| **Name of Editor/Coder** | SHIELA MICHELLE GARCIA/ MARY GRACE MOJARES | MICHAEL BELLO/ CARLO KARGANILLA | VANESSA TABUSO/ ALAN JUMAIRE MALLARI | EDSEL MARK TAMSE/ DEOMAR PASION |
| **Barangay Code/EA Number** | 001/0000 | 002/0000 | 003/0000 | 004/0000 |
| **Number of Bundles/ Number of Questionnaires Verified/Total** | 1/20/99 | 1/17/85 | 1/15/74 | 1/18/90 |
| **Date Verified** | 7/29/2010 | 7/29/2010 | 7/29/2010 | 7/29/2010 |
| **Random Start** | 4 | 4 | 4 | 4 |

**RESULTS OF VERIFICATION**

| Forms/Items Verified | Number of Questionnaires with Error(s) | Status (If 50% of the questionnaires had errors, write FAIL. Otherwise, write PASS.) | Number of Questionnaires with Error(s) | Status (If 50% of the questionnaires had errors, write FAIL. Otherwise, write PASS.) | Number of Questionnaires with Error(s) | Status (If 50% of the questionnaires had errors, write FAIL. Otherwise, write PASS.) | Number of Questionnaires with Error(s) | Status (If 50% of the questionnaires had errors, write FAIL. Otherwise, write PASS.) |
|---|---|---|---|---|---|---|---|---|
| **CPH FORM 1** | | | | | | | | |
| Geographic Identification | 0 | PASS | 0 | PASS | 0 | PASS | 2 | PASS |
| Listing Record | 0 | PASS | 0 | PASS | 0 | PASS | 0 | PASS |
| Page Total | 1 | PASS | 0 | PASS | 1 | PASS | 0 | PASS |
| **CPH FORM 2, 3 or 4** | | | | | | | | |
| Geographic Identification | 2 | PASS | 0 | PASS | 1 | PASS | 0 | PASS |
| Summary of Visit | 0 | PASS | 0 | PASS | 0 | PASS | 0 | PASS |
| Relationship to Household Head | 1 | PASS | 1 | PASS | 0 | PASS | 0 | PASS |
| Sex | 0 | PASS | 0 | PASS | 2 | PASS | 1 | PASS |
| Date of Birth | 0 | PASS | 0 | PASS | 0 | PASS | 0 | PASS |
| Age | 0 | PASS | 0 | PASS | 0 | PASS | 0 | PASS |
| Birth Registration | 0 | PASS | 1 | PASS | 0 | PASS | 0 | PASS |
| Marital Status | 1 | PASS | 0 | PASS | 0 | PASS | 0 | PASS |
| Religious Affiliation | 2 | PASS | 1 | PASS | 4 | PASS | 1 | PASS |
| Citizenship | 2 | PASS | 0 | PASS | 1 | PASS | 2 | PASS |
| Ethnicity | 5 | PASS | 2 | PASS | 3 | PASS | 2 | PASS |
| Disability | 0 | PASS | 0 | PASS | 0 | PASS | 0 | PASS |
| Functional Difficulty | 0 | PASS | 0 | PASS | 0 | PASS | 0 | PASS |

(The Item Description rows from "Geographic Identification" to "Functional Difficulty" are grouped under the vertical label **ITEM DESCRIPTION**.)

Page 1 of 2

## ILLUSTRATION 9.1
## FILLED OUT CPH FORM 20 (Continuation)
## (Verification Slip for CPH Form 1, 2, 3, 4 or 5)

| RESULTS OF VERIFICATION | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Forms/Items Verified | Number of Questionnaires with Error(s) | Status (If 50% of the question-naires had errors, write FAIL. Otherwise, write PASS.) | Number of Questionnaires with Error(s) | Status (If 50% of the question-naires had errors, write FAIL. Otherwise, write PASS.) | Number of Questionnaires with Error(s) | Status (If 50% of the question-naires had errors, write FAIL. Otherwise, write PASS.) | Number of Questionnaires with Error(s) | Status (If 50% of the question-naires had errors, write FAIL. Otherwise, write PASS.) |
| **CPH FORM 2, 3 or 4** | | | | | | | | |
| Residence 5 Years Ago | 0 | PASS | II  2 | PASS | I  1 | PASS | 0 | PASS |
| Literacy | 0 | PASS | 0 | PASS | II  2 | PASS | 0 | PASS |
| Highest Grade/Year Completed | THI I  6 | PASS | II  2 | PASS | THI THI IIII  14 | FAIL | II  2 | PASS |
| School Attendance | II  2 | PASS | THI  5 | PASS | 0 | PASS | III  3 | PASS |
| Place of School | I  1 | PASS | IIII  4 | PASS | IIII  4 | PASS | I  1 | PASS |
| Overseas Worker Indicator | 0 | PASS | I  1 | PASS | 0 | PASS | 0 | PASS |
| Usual Occupation | III  3 | PASS | I  1 | PASS | II  2 | PASS | 0 | PASS |
| Kind of Business/ Industry | II  2 | PASS | THI THI III  13 | FAIL | THI I  6 | PASS | II  2 | PASS |
| Class of Worker | 0 | PASS | II  2 | PASS | 0 | PASS | II  2 | PASS |
| Place of Work | II  2 | PASS | III  3 | PASS | I  1 | PASS | 0 | PASS |
| Fertility Indicators | 0 | PASS | 0 | PASS | II  2 | PASS | 0 | PASS |
| Housing Census Questions | I  1 | PASS | II  2 | PASS | 0 | PASS | I  1 | PASS |
| Household Census Questions | II  2 | PASS | I  1 | PASS | III  3 | PASS | 0 | PASS |
| **CPH FORM 5** | | | | | | | | |
| Geographic Identification | | | | | | | | |
| Part I – Barangay Facilities/ Characteristics | | | | | | | | |
| Part II – Kinds of Establishments | | | | | | | | |
| Part III – Travel Information | | | | | | | | |
| REMARKS | ALL ITEMS PASSED | | "KIND OF BUSINESS/INDUSTRY" FAILED; BUNDLE FOR 100% VERIFICATION | | "HIGHEST GRADE/YEAR COMPLETED" FAILED; BUNDLE FOR 100% VERIFICATION | | ALL ITEMS PASSED | |

Prepared by:

*CAndres*

CHRISTADEL ANDRES         7/29/2010
Signature over printed name of Verifier    Date

Verified by:

*GLipio*

GUI LIPIO         7/29/2010
Signature over printed name of Supervisor    Date

Page 2 of 2

# 10

# INSTRUCTIONS IN BUNDLING AND FOLIOING OF CPH FORMS

Bundling or folioing of CPH forms will help facilitate the systematic transmittal of the said forms from PO to CPC 2010.  This chapter discusses the procedures in bundling processed CPH Forms 1, 4, and 5, and maps, as well as folioing other census forms.

Bundling of CPH Forms 1, 4, 5, and maps and folioing of other control forms will be done by the RCC only after the manual processing of these forms and maps has been completed.  Preliminary bundling of accomplished CPH Forms 2 and 3 was already done by CAS/ACAS upon their submission of these forms to DSO/SCO.  The RCC should ensure that these forms are properly bundled after being edited, coded, and passed the verification stage.

**Bundling** *means compiling the forms administered during enumeration and wrapping these in plastic sheets for transmittal*.

CPH Forms 4 and 5 should be bundled ahead of CPH Form 1 since the latter forms will still be needed during verification and/or redrawing of maps.

**Folioing** *means compiling the forms using a fastener or shoelace inserted into the holes of the forms.*

CPH forms used for control and monitoring will be folioed.  Some of these forms are pre-punched for easy compilation.

# 10.1 GENERAL INSTRUCTIONS FOR BUNDLING AND FOLIOING

These are the general instructions for bundling and folioing that the RCC should follow:

1. The forms to be bundled are CPH Forms 1, 4, 5, and maps. CPH Forms 2 and 3 are already bundled. The RCC should ensure that these are still properly bundled especially when these forms have been passed around from processors to supervisor during processing.

2. Since CPH Forms 2 and 3 are already bundled when these are transmitted to PO, the Processing Record of CPH Forms 15 (CPH Form 2 Bundle Cover) and 15A (CPH Form 3 Bundle Cover) for CAS and DSO/SCO portions are already filled out. The RCC should fill out the portion for PO in the said forms during manual processing.

3. The following information in the Processing Record for PO of CPH Forms 15 and 15A need to be filled out:

   a. For the receipt portion, record the date when the DSO/SCO submitted the questionnaires. The RCC should affix his/her signature on the space provided for receipt.

   b. Write the earliest starting date and last ending date based on the information recorded in CPH Form 19 when the EAs in the bundle have undergone the following:

      • Verification of geographic codes
      • Completeness checking of forms
      • Editing/coding/consistency checking of entries
      • Sample verification of forms and entries/document preparation

   c. Record the date when the bundles will be transmitted to CPC 2010 for machine processing.

   d. Let the Supervisor or the Assistant Supervisor affix his/her signature in the column next to the dates recorded.

   e. The PSO should affix his/her signature before transmitting the bundle. The PSO should also write the date of transmittal of these bundles to CPC 2010.

4. Punching holes and putting fasteners are not allowed for CPH Forms 1, 2, 3, 4, 5, and maps. Scanning during machine processing requires that these forms are free from holes and fasteners.

5. Control and monitoring forms such as CPH Forms 10, 11, 12, and 13, and other forms will be folioed.

# 10.2 BUNDLING INSTRUCTIONS FOR CPH FORMS 4 AND 5

Bundling of CPH Forms 4 and 5 shall be done after these forms have been edited, coded, and passed the verification process.

**CPH FORM 4**

The following must be followed by RCC in bundling CPH Form 4:

1. Sort all CPH Form 4 for the province in ascending order of geographic code of city/municipality, barangay, EA number, ISN, and booklet number.

2. Spread out the questionnaires with pages 4A and 4D upturned.

*Example:*



3. Group the questionnaires into bundles and be guided by the following:

   a. Each bundle should contain at most 500 CPH Form 4

   b. If there are more than one bundle of CPH Form 4 for a province, the forms should be more or less equally distributed to each of the bundles;

   c. However, make sure that all CPH Form 4 for a city/municipality are placed in the same bundle.

4. Cover the bundle with CPH Form 14A (CPH Form 4 Bundle Cover).

5. Fill out the required information in the bundle cover, such as the name and code of the province, bundle number, and number of booklets contained in the bundle.

6. The following information in the Processing Record for PO of CPH Form 14A need to be filled out:

   a. For the receipt portion, record the date when the DSO/SCO submitted the questionnaires. The RCC should affix his/her signature on the space provided for receipt.

   b. Write the earliest starting date and last ending date based on the information recorded in CPH Form 19 when the EAs in the bundle have undergone the following:

      • Verification of geographic identification and/or checking of totals
      • Completeness checking of forms
      • Editing/coding/consistency checking of entries
      • Sample verification of forms and entries

   c. Record the date when the bundles will be transmitted to CPC 2010 for machine processing.

   d. Let the Supervisor or the Assistant Supervisor affix his/her signature in the column next to the dates recorded.

   e. Record the starting date and ending date when the bundle has undergone document preparation/bundling of forms and affix your signature.

   f. The PSO should affix his/her signature before transmitting the bundle. The PSO should also write the date of transmittal of these bundles to CPC 2010.

7. All CPH Form 14A must be placed on top of the questionnaires in a bundle.

8. Use the plastic sheet supplied in bundling the questionnaires.

See Illustration 10.1 for an example of filled out CPH Form 14A used for covering the bundle of CPH Form 4.

## ILLUSTRATION 10.1
## FILLED OUT CPH FORM 14A FOR CPH FORM 4
## (CPH Form 4 Bundle Cover)

CPH Form 14A

Bundle 1 of 9 Bundle(s)

Republic of the Philippines
NATIONAL STATISTICS OFFICE

2010 Census of Population and Housing
## CPH FORM 4 BUNDLE COVER
(LISTING BOOKLET/QUESTIONNAIRE TRANSMITTAL AND PROCESSING RECORDS)

Province: BOHOL | 1 | 2 |

Number of Questionnaires: 144

| | Activity | Date Started | Date Finished | Signature of Person Responsible | Remarks |
|---|---|---|---|---|---|
| **P O** | Receipt | | 06/21/2010 | J maramot | COMPLETE |
| | Verification of Geographic Codes and/or Checking of Totals | 06/21/2010 | 06/23/2010 | NerryPalangyos | COMPLETE |
| | Completeness Checking of Forms | 06/21/2010 | 06/24/2010 | NerryPalangyos | COMPLETE |
| | Editing/Coding/Consistency Checking of Entries | 06/24/2010 | 07/30/2010 | Glipio | COMPLETE |
| | Sample Verification of Forms and Entries | 07/20/2010 | 08/6/2010 | NerryPalangyos | PASSED |
| | Document Preparation/Bundling of Forms | 08/06/2010 | 08/6/2010 | J maramot | READY FOR TRANSMITTAL |
| | Transmittal to 2010 Census Processing Center (CPC 2010) | | 08/7/2010 | J maramot | OK for transmittal: JAlcazar PSO 08/7/2010 Date |
| **C P C 2010** | Receipt | | | | |
| | Scanning | | | | |
| | Test for Interpretability of CPH Form 4 | | | | |
| | Transmittal of Data File to Central Office | | | | OK for transmittal: RD Date |

Processing Record of CPH Form 4

2010 CPH
Kabilang Ako!

## CPH FORM 5

The following instructions must be followed by RCC in bundling the processed CPH Form 5:

1. Sort all accomplished CPH Form 5 for a particular province by ascending order of geographic codes of city/municipality and barangay. A separator (colored paper) shall be placed between CPH Form 5 of different cities/municipalities.

2. Spread out the questionnaires with pages 5A and 5D upturned.

   *Example:*



3. Group the forms into bundles and be guided by the following:

   a. Each bundle should contain at most 500 CPH Form 5;

   b. If there are more than one bundle for a province, the forms should be more or less equally distributed to each of the bundles;

   c. However, make sure that all CPH Form 5 of a city/municipality are placed in the same bundle.

4. Cover the bundle with CPH Form 14 (CPH Form 1 or 5 Bundle Cover).

5. Fill out the required information in the bundle cover such as the name and code of the province, bundle number, type of form, and number of CPH Form 5 contained in the bundle.

6. Fill out information in the Processing Record for PO following similar instructions in item 6 for CPH Form 4 on page 126.

7. All CPH Form 14 must be placed on top of the questionnaires in a bundle.

8. Use plastic sheet to bundle the questionnaires.

        See Illustration 10.2 for an example of filled out CPH Form 14 used for covering the bundle of CPH Form 5.

---

## IMPORTANT NOTICE

Do not punch holes, staple, or use fasteners/shoelaces in bundling CPH Forms 4 and 5.

---

## ILLUSTRATION 10.2
## FILLED OUT CPH FORM 14 FOR CPH FORM 5
## (CPH Form 1 or 5 Bundle Cover)

**CPH Form 14**
Bundle  1  of  3  Bundle(s)

*Republic of the Philippines*
**NATIONAL STATISTICS OFFICE**

**2010 Census of Population and Housing**

# CPH FORM 1 or 5 BUNDLE COVER
(LISTING BOOKLET/QUESTIONNAIRE TRANSMITTAL AND PROCESSING RECORDS)

Province:  BOHOL   | 1 | 2 |

City/Municipality: _____ |  |  | *(Leave blank if CPH Form 5)*

**Type of Form**    **Number of Questionnaires**

CPH Form | 5 |    382

| Bundle Contents for CPH Form 1 Only | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Barangay | | EA No. | Number of Listing Booklets Used | Barangay | | EA No. | Number of Listing Booklets Used | Barangay | | EA No. | Number of Listing Booklets Used |
| Name | Code | | | Name | Code | | | Name | Code | | |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |

| Processing Record of CPH Form 1 or 5 | | | | | |
|---|---|---|---|---|---|
| | Activity | Date Started | Date Finished | Signature of Person Responsible | Remarks |
| **P O** | Receipt | | 06/21/10 | J maramot | COMPLETE |
| | Verification of Geographic Codes and/or Checking of Totals | 06/21/10 | 06/23/10 | E MT ams | OK |
| | Completeness Checking of Forms | 06/21/10 | 06/24/10 | Ê MT am | COMPLETE |
| | Editing/Coding/Consistency Checking of Entries | 06/24/10 | 07/03/10 | NerryPalangyos | OK |
| | Sample Verification of Forms and Entries | 07/05/10 | 07/12/10 | Glipio | PASSED |
| | Document Preparation/Bundling of Forms | 07/13/10 | 07/13/10 | J maramot | READY FOR TRANSMITTAL |
| | Transmittal to 2010 Census Processing Center (CPC 2010) | | 07/14/10 | J maramot | OK for transmittal: J Alcazaren 07/15/10 ___PSO___ ___Date___ |
| **C P C 2010** | Receipt | | | | |
| | Scanning | | | | |
| | Test for Interpretability of CPH Form 1 or 5 | | | | |
| | Transmittal of Data File to Central Office | | | | OK for transmittal: _____ ___RD___ ___Date___ |

# 10.3 BUNDLING INSTRUCTIONS FOR CPH FORM 1

CPH Form 1 should be bundled only after the maps had been verified and/or redrawn. Below are the instructions that must be followed by RCC in bundling CPH Form 1:

1. Sort all accomplished CPH Form 1 for a particular <u>city/municipality</u> in ascending order of geographic codes of barangay, EA number, and booklet number.

2. Spread out the forms with pages 1A and 1D upturned.

   *Example:*



3. Group the forms into bundles and be guided by the following:

   a. Each bundle should contain at most 500 CPH Form 1;

   b. If there are more than one bundle for a city/municipality, the forms should be more or less equally distributed to each of the bundles;

   c. However, make sure that all CPH Form 1 of an EA are placed in the same bundle.

4. Cover each bundle with CPH Form 14.

5. Fill out the required information in the bundle cover such as:

a. The names and codes of the province and city/municipality, and the bundle number.

b. The type of form contained in the bundle by specifying the CPH Form number in the box provided.

c. The total number of listing booklets contained in the bundle on the space provided.

6. Accomplish the portion for "Bundle Contents for CPH Form 1 Only", as follows:

   • Write the barangay name and code, EA number, and the number of listing booklets for an EA.

   • Use CPH Form 14 for every 15 EAs. If there are more than 15 EAs for a municipality, use another CPH Form 14. For the succeeding CPH Form 14, copy the name and code of the province and city/municipality of the first CPH Form 14 and indicate the type of form. Leave the bundle number and the number of questionnaires blank.

7. All CPH Forms 14 must be placed on top of the questionnaires for a bundle.

8. Fill out the information needed in the Processing Record for PO following similar instructions in item 6 for CPH Form 4 on page 126.

9. Use plastic sheet to bundle the listing booklets.

An example of a fully accomplished CPH Form 14 used to bundle CPH Form 1 is shown in Illustration 10.3.

## ILLUSTRATION 10.3
## FILLED OUT CPH FORM 14 FOR CPH FORM 1
## (CPH Form 1 or 5 Bundle Cover)

**CPH Form 14**

Bundle __1__ of __1__ Bundle(s)

*Republic of the Philippines*
**NATIONAL STATISTICS OFFICE**

**2010 Census of Population and Housing**

# CPH FORM 1 or 5 BUNDLE COVER
### (LISTING BOOKLET/QUESTIONNAIRE TRANSMITTAL AND PROCESSING RECORDS)

Province: __BOHOL__ | 1 | 2 |

City/Municipality: __SEVILLA__ | 3 | 9 |  *(Leave blank if CPH Form 5)*

| Type of Form | Number of Questionnaires |
|---|---|
| CPH Form  1 | 45 |

| Bundle Contents for CPH Form 1 Only | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| **Barangay** | | **EA No.** | **Number of Listing Booklets Used** | **Barangay** | | **EA No.** | **Number of Listing Booklets Used** | **Barangay** | | **EA No.** | **Number of Listing Booklets Used** |
| **Name** | **Code** | | | **Name** | **Code** | | | **Name** | **Code** | | |
| BAYAWAHAN | 001 | 0000 | 3 | CAMBAGUI | 006 | 0000 | 5 | LOBGOB | 012 | 0000 | 4 |
| CABANCALAN | 002 | 0000 | 3 | EWON | 008 | 0000 | 3 | MAGSAYSAY | 013 | 0000 | 5 |
| CALINGA-AN | 003 | 0000 | 3 | GUINOB-AN | 009 | 0000 | 3 | POBLACION | 014 | 0000 | 4 |
| CALINGINAN NORTE | 004 | 0000 | 3 | LAGTANGAN | 010 | 0000 | 3 | | | | |
| CALINGINAN SUR | 005 | 0000 | 3 | LICOLICO | 011 | 0000 | 3 | | | | |

| Processing Record of CPH Form 1 or 5 | | | | | |
|---|---|---|---|---|---|
| | **Activity** | **Date** | | **Signature of Person Responsible** | **Remarks** |
| | | **Started** | **Finished** | | |
| **P O** | Receipt | | 06/21/10 | *J maramol* | COMPLETE |
| | Verification of Geographic Codes and/or Checking of Totals | 06/21/10 | 06/23/10 | NerryPalangyos | OK |
| | Completeness Checking of Forms | 06/21/10 | 06/24/10 | NerryPalangyos | COMPLETE |
| | Editing/Coding/Consistency Checking of Entries | 06/24/10 | 07/30/10 | Glipio | OK |
| | Sample Verification of Forms and Entries | 07/20/10 | 08/06/10 | Glipio | PASSED |
| | Document Preparation/Bundling of Forms | 08/14/10 | 08/14/10 | *J maramol* | READY FOR TRANSMITTAL |
| | Transmittal to 2010 Census Processing Center (CPC 2010) | | 08/14/10 | *J maramol* | OK for transmittal: J Alcazar 08/14/10 <br> PSO        Date |
| **C P C 2010** | Receipt | | | | |
| | Scanning | | | | |
| | Test for Interpretability of CPH Form 1 or 5 | | | | |
| | Transmittal of Data File to Central Office | | | | OK for transmittal: <br> _____ <br> RD        Date |

2010 CPH

*Kabilang Ako!*

# 10.4 BUNDLING INSTRUCTIONS FOR MAPS

Below are the instructions that must be followed by RCC in bundling processed barangay/EA/block maps:

1. Sort all maps for a particular <u>city/municipality</u> in ascending order of geographic codes of barangay, EA number, block number, and sheet number.

2. Cover each bundle with CPH Form 28 (Maps Bundle Cover).

3. Fill out the required information in the bundle cover such as:

   a. The names and codes of the province and city/municipality, and the bundle number.

   b. Accomplish the portion for "Bundle Contents" as follows:

      • Write the barangay name and code, EA number, and the number of barangay/EA/block maps for an EA.

      • Use CPH Form 28 for every 15 EAs. If there are more than 15 EAs for a city/municipality, use another CPH Form 28. For the succeeding CPH Form 28, copy the name and code of the province and city/municipality of the first CPH Form 28. All CPH Forms 28 must be placed on top of the maps in a bundle.

4. Fill out the information needed in the Processing Record for PO.

   a. For the receipt portion, record the date when the DSO/SCO submitted the maps (inside EA pack). The RCC should affix his/her signature on the space provided for receipt.

   b. Write the earliest starting date and last ending date based on the information recorded in CPH Form 19 when the EAs in the bundle have undergone the following:

      • Verification of geo-ID and checking of totals
      • Completeness checking of forms

   c. Write the earliest starting date and last ending date when the maps in the bundle have undergone the following:

      • Consistency checking of HSNs with CPH Form 1
      • Redrawing of barangay/EA/block maps

d. Record the date when the bundles are to be transmitted to CPC 2010 for machine processing.

e. Let the Supervisor or the Assistant Supervisor affix his/her signature in the column next to the dates recorded.

f. Record the starting date and ending date when the bundle has undergone document preparation/bundling and affix your signature.

g. Record the date when the bundles are to be transmitted to CPC 2010 for machine processing. Make sure that the PSO has affixed his/her signature before transmitting the bundle. The PSO should also write the date of transmittal of these bundles to CPC 2010.

5. All CPH Form 28 must be placed on top.

6. Use plastic sheet to bundle the maps.

An example of a fully accomplished CPH Form 28 used to bundle barangay/EA/block maps is shown in Illustration 10.4.

## ILLUSTRATION 10.4
## FILLED OUT CPH FORM 28 FOR MAPS
## (Map Bundle Cover)

CPH Form 28

Bundle ___1___ of ___1___ Bundle(s)

*Republic of the Philippines*
NATIONAL STATISTICS OFFICE

**2010 Census of Population and Housing**

# MAP BUNDLE COVER
(TRANSMITTAL AND PROCESSING RECORDS OF MAP)

Province: BOHOL | 1 | 2 |

City/Municipality: SEVILLA | 3 | 9 |

| Bundle Contents | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Barangay | | EA No. | Number of Mapping Forms Used | Barangay | | EA No. | Number of Mapping Forms Used | Barangay | | EA No. | Number of Mapping Forms Used |
| Name | Code | | | Name | Code | | | Name | Code | | |
| BAYAWAHAN | 001 | 0000 | 2 | CAMBAGUI | 006 | 0000 | 3 | LOBGOB | 012 | 0000 | 3 |
| CABANCALAN | 002 | 0000 | 2 | EWON | 008 | 0000 | 2 | MAGSAYSAY | 013 | 0000 | 3 |
| CALINGA-AN | 003 | 0000 | 2 | GUINOB-AN | 009 | 0000 | 2 | POBLACION | 014 | 0000 | 3 |
| CALINGINAN NORTE | 004 | 0000 | 2 | LAGTANGAN | 010 | 0000 | 2 | | | | |
| CALINGINAN SUR | 005 | 0000 | 2 | LICOLICO | 011 | 0000 | 2 | | | | |

| Processing Record of Barangay/EA/Block Maps | | | | | |
|---|---|---|---|---|---|
| | Activity | Date | | Signature of Person Responsible | Remarks |
| | | Started | Finished | | |
| **P O** | Receipt | | 06/21/10 | *J maramol* | COMPLETE |
| | Verification of Geographic Codes and/or Checking of Totals | 06/21/10 | 06/23/10 | Glipio | OK |
| | Completeness Checking of Forms | 06/21/10 | 06/24/10 | NerryPalangyos | COMPLETE |
| | Consistency Checking of Household Serial Numbers with CPH Form 1 | 08/03/10 | 08/04/10 | NerryPalangyos | OK |
| | Redrawing of Barangay/EA/Block Maps | 08/04/10 | 08/13/10 | NerryPalangyos | PASSED |
| | Document Preparation/Bundling of Barangay/EA/Block Maps | 08/14/10 | 08/14/10 | *J maramol* | READY FOR TRANSMITTAL |
| | Transmittal to 2010 Census Processing Center (CPC 2010) | | 08/14/10 | *J maramol* | OK for transmittal: JAlcazar 08/14/10 <br> PSO     Date |
| **C P C** **2010** | Receipt | | | | |
| | Scanning | | | | |
| | Test for Interpretability of Barangay/EA/Block Maps | | | | |
| | Transmittal of Data File to Central Office | | | | OK for transmittal: <br> _____ _____ <br> RD     Date |

# 10.5 FOLIOING INSTRUCTIONS FOR OTHER CONTROL FORMS

Upon receipt of all the forms used, the RCC shall folio the other CPH forms.  The following must be followed in folioing these forms:

1. These forms shall be folioed by province:

   a. CPH Forms 12 and 13 accomplished by CAS/ACAS should be folioed together; and

   b. CPH Forms 12 and 13 accomplished by TS should also be folioed together.

2. Sort all forms for the province in ascending order of geographic code of city/municipality, barangay, and EA number.

3. Use a fastener/shoelace to bind the administrative forms.

4. Label the folio by indicating the type of form, and name and code of the province. Indicate also the number of forms contained in the folio.

5. Set aside these folioed forms.  They will be used as reference during verification.
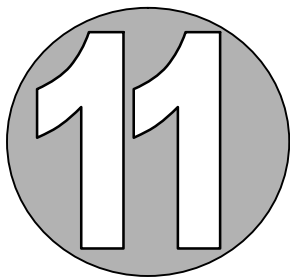
# PACKAGING AND TRANSMITTAL OF FORMS AND PROGRESS REPORTING

Processed CPH forms are prepared for transmittal to CPC 2010, which shall follow a systematic order in such a way that all forms are accounted for. This chapter discusses the procedures to be followed in packaging and transmittal of processed forms from PO to CPC 2010, and reporting the progress of manual processing at PO.

## 11.1 PACKAGING AND TRANSMITTAL OF PROCESSED FORMS FROM PO TO CPC 2010

Once all the CPH forms have been edited, coded, and verified, all these questionnaires shall be transmitted to CPC 2010 for scanning and image processing.

For timely submission of CPH forms to CPC 2010, the PSO should see to it that the timetable provided in Appendix 1 is strictly followed. He/she should make the necessary arrangement with other cooperating agencies regarding the transmittal of forms to CPC 2010.

The following guidelines must be followed in the transmittal of CPH Forms 1, 2, 3, 4, and 5, and maps:

1. Ensure that all accomplished questionnaires and maps for each city/municipality are processed, verified, and accounted for.

2. Below are the procedures to be followed in transmitting manually processed CPH forms from PO to CPC 2010.

a.  The PO should give priority to the transmittal of CPH Forms 2 and 3 to CPC 2010.  These forms will be transmitted by city/municipality or by batches for large cities/municipalities.

b.  Transmit CPH Forms 4 and 5 by province.

c.  Transmit CPH Form 1 by city/municipality after the barangay/EA/block maps prepared by the ENs for a city/municipality have been reviewed against CPH Form 1 and/or these maps have been redrawn.

d.  Transmit barangay/EA/block maps by province.

The **RCC** shall pack the forms and/or maps to be transmitted to CPC 2010.  He/she shall inform the Supervisor that the forms and/or maps are ready for transmittal.  See Section 4.3 on pages 23 to 24 for the instructions on Receipt and Control from PO to CPC 2010.

The **PSO or Supervisor** shall perform the following activities before the forms are transmitted to CPC 2010:

1.  All processed forms and maps should be accounted for.

2.  See to it that the forms are bundled in the following manner:

    •  CPH Form 1 by city/municipality
    •  CPH Forms 2 and 3 separately by EA/barangay
    •  CPH Forms 4 and 5 separately by province
    •  Barangay/EA/block maps by city/municipality

3.  Check if the forms are placed in the boxes in the following manner:

    •  CPH Forms 1, 2, and 3 by city/municipality or group of cities/municipalities
    •  CPH Forms 4 and 5 by province
    •  Barangay/EA/block maps by city/municipality

4.  Check if the boxes are labeled as:

    Box _1_ of  _n_ boxes
    Box _2_ of  _n_ boxes
       ⋮
    Box _n_ of  _n_ boxes
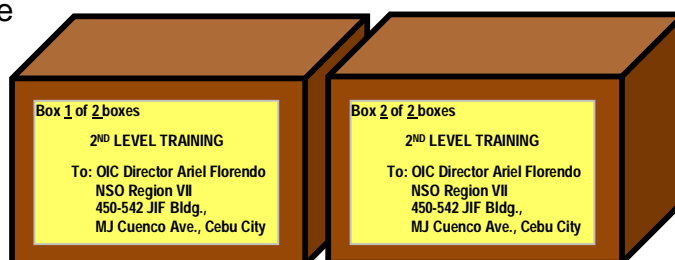


where _n_ is the total number of boxes used in packaging the forms.

2010 CPH
Kabilang Ako!

5. Ensure that CPH Form 13 is included in the first box. The box label should indicate that it contains the Transmittal/Receipt Form (CPH Form 13).

6. Inform, in advance, the RD of CPC 2010 of the quantity and type of forms and the date these forms are transmitted.

# 11.2 PROGRESS REPORTING OF PROCESSING

### a. Processor and Assistant Supervisor

Each processor will be provided with CPH Form 22 (Manual Processor's Daily Accomplishment Report) wherein he/she will record his/her daily accomplishment. The Assistant Supervisor will also accomplish CPH Form 22.

In filling out CPH Form 22, the Processor/Assistant Supervisor must be guided by the following instructions:

1. A form must be provided to each Processor for each level of processing, that is, for editing, coding, and verification.

2. Write the name of the province and city/municipality on the spaces provided and their corresponding code in the boxes. Indicate the number of sheets used and your designation by putting an **X** mark opposite the appropriate box, that is, Editor, Coder, Verifier, or Assistant Supervisor.

3. Write the date, the name and code of barangay, and the EA number of the questionnaires processed in an EA pack.

4. For each type of form, write the number of forms processed for the day in the **Daily** column. For example, for CPH Form 1, write the number of booklets of CPH Form 1 processed in Column 5.

5. In the **Cumulative** columns (Columns 6, 8, 10, 12, and 14), indicate the cumulative number of questionnaires processed since the start of processing a particular EA.

6. For EAs that were processed in more than one day, encircle the cumulative total number of forms by type for a particular EA after all CPH Forms 1, 2, 3, 4, and 5 have been coded, edited, or verified. For EAs that have been completely coded, edited, or

verified within one day, there is no need to encircle the cumulative total number of forms.

7. For Editors, if transcription of CPH Form was made, write in the remarks portion the number of questionnaires transcribed for a particular EA.

8. Do not forget to write your name and affix your signature at the bottom of the form.

9. Submit CPH Form 22 to your Supervisor after recording your accomplishment for the day.

# ILLUSTRATION 11.1
# FILLED OUT CPH FORM 22
## (Processor's Daily Accomplishment Report)

CPH Form 22

Republic of the Philippines
NATIONAL STATISTICS OFFICE

**2010 Census of Population and Housing**

**MANUAL PROCESSOR'S DAILY ACCOMPLISHMENT REPORT**

Sheet [0][1] of [0][1] Sheets

Province: BOHOL

City/Municipality: SEVILLA

[X] Editor  [ ] Coder  [ ] Verifier  [ ] Assistant Supervisor

| Line No. | Date | Barangay Name | Code | Enumeration Area Number | CPH Form 1 Daily | CPH Form 1 Cumulative | CPH Form 2 Daily | CPH Form 2 Cumulative | CPH Form 3 Daily | CPH Form 3 Cumulative | CPH Form 4 Daily | CPH Form 4 Cumulative | CPH Form 5 Daily | CPH Form 5 Cumulative | Remarks |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| (1) | | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) | (11) | (12) | (13) | (14) | (15) |
| 1 | 6/24 | BAYAWAHAN | 001 | 0000 | 3 | 3 | 126 | 126 | 31 | 31 | | | | | |
| 2 | | CABANCALAN | 002 | 0000 | 3 | 3 | 100 | 100 | 25 | 25 | | | | | |
| 3 | 6/25 | CALINGA-AN | 003 | 0000 | 3 | 3 | 95 | 95 | 24 | 24 | | | | | |
| 4 | | CALINGINAN NORTE | 004 | 0000 | 3 | 3 | 118 | 118 | 30 | 30 | | | | | |
| 5 | 6/26 | CALINGINAN SUR | 005 | 0000 | 3 | 3 | 93 | 93 | 23 | 23 | | | | | |
| 6 | | CAMBAGUI | 006 | 0000 | 3 | 3 | 139 | 139 | 32 | 32 | | | | | |
| 7 | 6/28 | CAMBAGUI | 006 | 0000 | 1 | (4) | 32 | (171) | 15 | (43) | | | | | |
| 8 | | EWON | 008 | 0000 | 3 | 3 | 116 | 116 | 29 | 29 | | | | | |
| 9 | 6/29 | GUINOB-AN | 009 | 0000 | 3 | 3 | 97 | 97 | 24 | 24 | | | | | 3 CPH Forms 2 were transcribed |
| 10 | | LAGTANGAN | 010 | 0000 | 3 | 3 | 121 | 121 | 30 | 30 | | | | | |
| 11 | 6/30 | LICOLICO | 011 | 0000 | 3 | 3 | 128 | 128 | 32 | 32 | | | | | |
| 12 | | LOBGOB | 012 | 0000 | 4 | 4 | 137 | 137 | 34 | 34 | | | | | |
| 13 | 07/01 | MAGSAYSAY | 013 | 0000 | 4 | 4 | 153 | 153 | 38 | 38 | 2 | 2 | | | |
| 14 | | POBLACION | 014 | 0000 | 4 | 4 | 146 | 146 | 36 | 36 | | | | | |

Type and Number of Forms Edited/Coded/Verified

Prepared by:

MBello
Michael Bello
Signature over printed name of Processor

Verified by:

07/01/10
_____   Date
Signature over printed name of Supervisor   Date

## b. Supervisor

The Supervisor will keep track of the daily accomplishment of each processor based on CPH Form 22.

As Supervisor, he/she should inform the PSO about the progress of the provincial processing based on the reports generated using TRACS. The RCC and Assistant Supervisor should assist the Supervisor in checking the status of the operation based on the processed forms.

Using TRACS, the following reports should be generated to monitor the progress of manual processing:

a. *Generated CPH Form 19 – Provincial Processing Receipt and Control Form*, which should be consistent with CPH Form 19 that was manually accomplished by RCC.

b. *TRACS Report 1 – Status of Submission of Accomplished Forms/Maps,* which contains the number of forms/maps submitted and date of submission (start and end) by city/municipality, barangay, and EA number. This will be generated per type of form/map to check if all forms have been received at PO.

c. *TRACS Report 2 – Accomplishment of Processors,* which contains the total number of forms/maps processed by type of form.

d. *TRACS Report 3 – Accomplishment by City/Municipality,* which contains the total number of forms/maps processed by type of form and city/municipality.

e. *TRACS Report 4 – Status of Verification,* which contains the total number of forms and the percentage of forms verified per EA/barangay.

f. *TRACS Report 5 – Progress of Provincial Processing,* which contains the total number of EAs/barangays, number and percent of EAs/barangays with completely processed forms by city/municipality.

Appendix 14 on pages 162 to 166 shows the format of the abovementioned reports.

Any problem that may cause delay in the processing operation should be reported to the PSO.

The updated TRACS data file should be transmitted to CPC 2010 once a week. The TRACS will be installed in all POs to generate management reports to monitor the progress of provincial processing.

## c. Provincial Statistics Officer

The PSO shall keep track of the progress of provincial processing based on the information provided by the Supervisor. He/she should attend to any problem that may be encountered during the course of processing operation at the PO. In other words, he/she should take all the necessary steps to ensure that the manual processing operation will be accomplished on time. Any delay in the operation should be reported to the Regional and Central Offices.

# Appendices

**APPENDIX 1**

**TIMETABLE BY PROVINCE**

| REGION/PROVINCE | DURATION | |
| --- | --- | --- |
| | START | END |
| | | |
| **NCR** | | |
| NCR I | 21-Jun-10 | 14-Aug-10 |
| NCR II | 21-Jun-10 | 14-Aug-10 |
| NCR III | 21-Jun-10 | 14-Aug-10 |
| NCR IV | 21-Jun-10 | 14-Aug-10 |
| NCR V | 21-Jun-10 | 14-Aug-10 |
| NCR VI | 21-Jun-10 | 14-Aug-10 |
| | | |
| **CAR** | | |
| ABRA | 21-Jun-10 | 31-Jul-10 |
| APAYAO | 21-Jun-10 | 31-Jul-10 |
| BENGUET | 21-Jun-10 | 14-Aug-10 |
| IFUGAO | 21-Jun-10 | 14-Aug-10 |
| KALINGA | 21-Jun-10 | 14-Aug-10 |
| MT. PROVINCE | 21-Jun-10 | 31-Jul-10 |
| | | |
| **REGION I** | | |
| ILOCOS NORTE | 21-Jun-10 | 7-Aug-10 |
| ILOCOS SUR | 21-Jun-10 | 14-Aug-10 |
| LA UNION | 21-Jun-10 | 14-Aug-10 |
| PANGASINAN | 21-Jun-10 | 12-Aug-10 |
| | | |
| **REGION II** | | |
| BATANES | 21-Jun-10 | 16-Jul-10 |
| CAGAYAN | 21-Jun-10 | 14-Aug-10 |
| ISABELA | 21-Jun-10 | 14-Aug-10 |
| NUEVA VIZCAYA | 21-Jun-10 | 7-Aug-10 |
| QUIRINO | 21-Jun-10 | 30-Jul-10 |
| | | |
| **REGION III** | | |
| AURORA | 21-Jun-10 | 31-Jul-10 |
| BATAAN | 21-Jun-10 | 12-Aug-10 |
| BULACAN | 21-Jun-10 | 14-Aug-10 |
| NUEVA ECIJA | 21-Jun-10 | 12-Aug-10 |
| PAMPANGA | 21-Jun-10 | 14-Aug-10 |
| TARLAC | 21-Jun-10 | 12-Aug-10 |
| ZAMBALES | 21-Jun-10 | 9-Aug-10 |

| REGION/PROVINCE | DURATION | |
|---|---|---|
| | START | END |
| | | |
| **REGION IV (CALABARZON)** | | |
| BATANGAS | 21-Jun-10 | 14-Aug-10 |
| CAVITE | 21-Jun-10 | 14-Aug-10 |
| LAGUNA | 21-Jun-10 | 14-Aug-10 |
| QUEZON | 21-Jun-10 | 12-Aug-10 |
| RIZAL | 21-Jun-10 | 14-Aug-10 |
| | | |
| **REGION IV (MIMAROPA)** | | |
| MARINDUQUE | 21-Jun-10 | 31-Jul-10 |
| OCCIDENTAL  MINDORO | 21-Jun-10 | 9-Aug-10 |
| ORIENTAL  MINDORO | 21-Jun-10 | 14-Aug-10 |
| PALAWAN | 21-Jun-10 | 14-Aug-10 |
| ROMBLON | 21-Jun-10 | 2-Aug-10 |
| | | |
| **REGION V** | | |
| ALBAY | 21-Jun-10 | 14-Aug-10 |
| CAMARINES NORTE | 21-Jun-10 | 7-Aug-10 |
| CAMARINES SUR | 21-Jun-10 | 14-Aug-10 |
| CATANDUANES | 21-Jun-10 | 31-Jul-10 |
| MASBATE | 21-Jun-10 | 14-Aug-10 |
| SORSOGON | 21-Jun-10 | 14-Aug-10 |
| | | |
| **REGION VI** | | |
| AKLAN | 21-Jun-10 | 7-Aug-10 |
| ANTIQUE | 21-Jun-10 | 10-Aug-10 |
| CAPIZ | 21-Jun-10 | 14-Aug-10 |
| GUIMARAS | 21-Jun-10 | 30-Jul-10 |
| ILOILO | 21-Jun-10 | 14-Aug-10 |
| NEGROS OCC. | 21-Jun-10 | 14-Aug-10 |
| | | |
| **REGION VII** | | |
| BOHOL | 21-Jun-10 | 14-Aug-10 |
| CEBU | 21-Jun-10 | 14-Aug-10 |
| NEGROS ORIENTAL | 21-Jun-10 | 14-Aug-10 |
| SIQUIJOR | 21-Jun-10 | 21-Jul-10 |
| | | |
| **REGION VIII** | | |
| BILIRAN | 21-Jun-10 | 29-Jul-10 |
| EASTERN SAMAR | 21-Jun-10 | 7-Aug-10 |
| LEYTE | 21-Jun-10 | 14-Aug-10 |
| NORTHERN SAMAR | 21-Jun-10 | 12-Aug-10 |
| SAMAR | 21-Jun-10 | 14-Aug-10 |
| SOUTHERN LEYTE | 21-Jun-10 | 7-Aug-10 |

| REGION/PROVINCE | DURATION | |
|---|---|---|
| | START | END |
| | | |
| **REGION IX** | | |
| BASILAN | 21-Jun-10 | 7-Aug-10 |
| ZAMBOANGA  NORTE | 21-Jun-10 | 14-Aug-10 |
| ZAMBOANGA DEL SUR | 21-Jun-10 | 13-Aug-10 |
| | | |
| **REGION X** | | |
| BUKIDNON | 21-Jun-10 | 14-Aug-10 |
| CAMIGUIN | 21-Jun-10 | 22-Jul-10 |
| LANAO DEL NORTE | 21-Jun-10 | 9-Aug-10 |
| MISAMIS OCCIDENTAL | 21-Jun-10 | 7-Aug-10 |
| MISAMIS ORIENTAL | 21-Jun-10 | 14-Aug-10 |
| | | |
| **REGION XI** | | |
| COMPOSTELA VALLEY | 21-Jun-10 | 13-Aug-10 |
| DAVAO DEL NORTE | 21-Jun-10 | 14-Aug-10 |
| DAVAO DEL SUR | 21-Jun-10 | 14-Aug-10 |
| DAVAO ORIENTAL | 21-Jun-10 | 7-Aug-10 |
| | | |
| **REGION XII** | | |
| NORTH COTABATO | 21-Jun-10 | 14-Aug-10 |
| SOUTH COTABATO | 21-Jun-10 | 13-Aug-10 |
| SARANGANI | 21-Jun-10 | 7-Aug-10 |
| SULTAN KUDARAT | 21-Jun-10 | 13-Aug-10 |
| | | |
| **ARMM** | | |
| LANAO DEL SUR | 21-Jun-10 | 14-Aug-10 |
| MAGUINDANAO (including Shariff Kabunsuan) | 21-Jun-10 | 14-Aug-10 |
| SULU | 21-Jun-10 | 14-Aug-10 |
| TAWI-TAWI | 21-Jun-10 | 7-Aug-10 |
| | | |
| **CARAGA** | | |
| AGUSAN DEL NORTE | 21-Jun-10 | 14-Aug-10 |
| AGUSAN DEL SUR | 21-Jun-10 | 14-Aug-10 |
| SURIGAO DEL NORTE | 21-Jun-10 | 7-Aug-10 |
| SURIGAO DEL SUR | 21-Jun-10 | 7-Aug-10 |

2010 CPH

Kabilang Ako!

# APPENDIX 2
# CPH FORM 13 – TRANSMITTAL/RECEIPT FORM

**CPH FORM 13**
(Accomplish in duplicate)

Sheet _____ of _____ Sheets

*Republic of the Philippines*
NATIONAL STATISTICS OFFICE

**2010 Census of Population and Housing**

## TRANSMITTAL/RECEIPT FORM

Region: _____ ☐☐   Transmitting Officer: _____
                                    Signature over printed name

Province: _____ ☐☐   Designation: _____

| AREA/DESCRIPTION OF MATERIALS (Name and Code of City/Municipality and Barangay, EA Number, CPH Form, and Manual) | UNIT | TRANSMITTED | | RECEIVED | | |
|---|---|---|---|---|---|---|
| | | Date | Quantity | Date | Quantity | Name/Signature |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Remarks:

# APPENDIX 3
# CPH FORM 14 – CPH FORM 1 OR 5 BUNDLE COVER

**CPH Form 14**

Bundle _____ of _____ Bundle(s)

*Republic of the Philippines*
NATIONAL STATISTICS OFFICE

**2010 Census of Population and Housing**

## CPH FORM 1 or 5 BUNDLE COVER
(LISTING BOOKLET/QUESTIONNAIRE TRANSMITTAL AND PROCESSING RECORDS)

Province: _____

City/Municipality: _____   *(Leave blank if CPH Form 5)*

**Type of Form**      **Number of Questionnaires**

CPH Form [   ]      _____

### Bundle Contents for CPH Form 1 Only

| Barangay | | EA No. | Number of Listing Booklets Used | Barangay | | EA No. | Number of Listing Booklets Used | Barangay | | EA No. | Number of Listing Booklets Used |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Name | Code | | | Name | Code | | | Name | Code | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

### Processing Record of CPH Form 1 or 5

| | Activity | Date Started | Date Finished | Signature of Person Responsible | Remarks |
|---|---|---|---|---|---|
| **P O** | Receipt | | | | |
| | Verification of Geographic Codes and/or Checking of Totals | | | | |
| | Completeness Checking of Forms | | | | |
| | Editing/Coding/Consistency Checking of Entries | | | | |
| | Sample Verification of Forms and Entries | | | | |
| | Document Preparation/Bundling of Forms | | | | |
| | Transmittal to 2010 Census Processing Center (CPC 2010) | | | | OK for transmittal: _____ _____ PSO   Date |
| **C P C 2010** | Receipt | | | | |
| | Scanning | | | | |
| | Test for Interpretability of CPH Form 1 or 5 | | | | |
| | Transmittal of Data File to Central Office | | | | OK for transmittal: _____ _____ RD   Date |

2010 CPH
*Kabilang Ako!*

# APPENDIX 4
## CPH FORM 14A – CPH FORM 4 BUNDLE COVER

CPH Form 14A

Bundle _____ of _____ Bundle(s)

*Republic of the Philippines*
NATIONAL STATISTICS OFFICE

**2010 Census of Population and Housing**

## CPH FORM 4 BUNDLE COVER
(LISTING BOOKLET/QUESTIONNAIRE TRANSMITTAL AND PROCESSING RECORDS)

Province: _____

Number of Questionnaires: _____

**Processing Record of CPH Form 4**

| | Activity | Date | | Signature of Person Responsible | Remarks |
|---|---|---|---|---|---|
| | | Started | Finished | | |
| | Receipt | | | | |
| P O | Verification of Geographic Codes and/or Checking of Totals | | | | |
| | Completeness Checking of Forms | | | | |
| | Editing/Coding/Consistency Checking of Entries | | | | |
| | Sample Verification of Forms and Entries | | | | |
| | Document Preparation/Bundling of Forms | | | | |
| | Transmittal to 2010 Census Processing Center (CPC 2010) | | | | OK for transmittal: _____ _____ PSO Date |
| C P C | Receipt | | | | |
| | Scanning | | | | |
| | Test for Interpretability of CPH Form 4 | | | | |
| 2010 | Transmittal of Data File to Central Office | | | | OK for transmittal: _____ _____ RD Date |

# APPENDIX 5
# CPH FORM 15 – CPH FORM 2 BUNDLE COVER

CPH Form 15

Bundle _____ of _____ Bundle(s)

*Republic of the Philippines*
NATIONAL STATISTICS OFFICE

## 2010 Census of Population and Housing

# CPH FORM 2 BUNDLE COVER
(QUESTIONNAIRE TRANSMITTAL AND PROCESSING RECORD)

Province: _____

City/Municipality: _____

Barangay: _____

EA Number: _____

Number of Questionnaires: _____

| | | Processing Record | | | |
|---|---|---|---|---|---|
| | **Activity** | **Date** | | **Signature of Person Responsible** | **Remarks** |
| | | **Started** | **Finished** | | |
| **CAS/ ACAS** | Bundling of Forms | | | | |
| | Verification of Codes/Consistency and Completeness of Entries | | | | |
| | Transmittal to DSO/SCO | | | | |
| **DSO/ SCO** | Receipt | | | | |
| | Verification of Codes/Consistency and Completeness of Entries | | | | |
| | Transmittal to Provincial Office | | | | |
| **P O** | Receipt | | | | |
| | Verification of Geographic Codes | | | | |
| | Completeness Checking of Forms | | | | |
| | Editing/Coding/Consistency Checking of Entries | | | | |
| | Sample Verification of Forms and Entries/Document Preparation | | | | |
| | Transmittal to 2010 Census Processing Center (CPC 2010) | | | | OK for transmittal: _____ _____ PSO          Date |
| **C P C 2010** | Receipt | | | | |
| | Scanning | | | | |
| | Test for Interpretability of CPH Form 2 | | | | |
| | Transmittal of Data File to Central Office | | | | OK for transmittal: _____ _____ RD          Date |

# APPENDIX 6
## CPH FORM 15A – CPH FORM 3 BUNDLE COVER

CPH Form 15A

Bundle _____ of _____ Bundle(s)

Republic of the Philippines
NATIONAL STATISTICS OFFICE

2010 Census of Population and Housing

## CPH FORM 3 BUNDLE COVER
(QUESTIONNAIRE TRANSMITTAL AND PROCESSING RECORD)

Province: _____

City/Municipality: _____

Barangay: _____

EA Number: _____

Number of Questionnaires: _____

**Processing Record**

|  | Activity | Date Started | Date Finished | Signature of Person Responsible | Remarks |
|---|---|---|---|---|---|
| **CAS/ ACAS** | Bundling of Forms | | | | |
| | Verification of Codes/Consistency and Completeness of Entries | | | | |
| | Transmittal to DSO/SCO | | | | |
| **DSO/ SCO** | Receipt | | | | |
| | Verification of Codes/Consistency and Completeness of Entries | | | | |
| | Transmittal to Provincial Office | | | | |
| **P O** | Receipt | | | | |
| | Verification of Geographic Codes | | | | |
| | Completeness Checking of Forms | | | | |
| | Editing/Coding/Consistency Checking of Entries | | | | |
| | Sample Verification of Forms and Entries/ Document Preparation | | | | |
| | Transmittal to 2010 Census Processing Center (CPC 2010) | | | | OK for transmittal: ___ PSO ___ Date |
| **C P C** | Receipt | | | | |
| | Scanning | | | | |
| | Test for Interpretability of CPH Form 3 | | | | |
| **2010** | Transmittal of Data File to Central Office | | | | OK for transmittal: ___ RD ___ Date |

**APPENDIX 7**
**CPH FORM 19 – Provincial Processing Receipt and Control Form**

CPH Form 19

*Republic of the Philippines*
**NATIONAL STATISTICS OFFICE**

**2010 Census of Population and Housing**

**PROVINCIAL PROCESSING RECEIPT AND CONTROL FORM**

Sheet ☐ of ☐ ☐ Sheets

Province _____

City/Municipality _____

| Line No. | Barangay Name (1) | Code (2) | Enumeration Area Number (3) | Type of Form (4) | Number of Bundles/ Forms (5) | Date Received/ Initial (6) | Completeness Checking Date Released/ Initial (7) | Completeness Checking Date Returned/ Initial (8) | Number of Bundles/ Forms (9) | Editing Date Released/ Initial (10) | Editing Date Returned/ Initial (11) | Coding Date Released/ Initial (12) | Coding Date Returned/ Initial (13) | Verification Date Released/ Initial (14) | Verification Date Returned/ Initial (15) | Transmittal to CPC 2010 Date/ Initial (16) | Number of Bundles/ Forms (17) | Remarks (18) |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | | | | | | | |
| 16 | | | | | | | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | | | | | | | |
| 19 | | | | | | | | | | | | | | | | | | |
| 20 | | | | | | | | | | | | | | | | | | |
| 21 | | | | | | | | | | | | | | | | | | |
| 22 | | | | | | | | | | | | | | | | | | |
| 23 | | | | | | | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | | | | | | | |

Prepared by: _____ _____
Signature over printed name of Receipt & Control Clerk    Date

Verified by: _____ _____
Signature over printed name of Supervisor    Date

2010 CPH
*Kabilang Ako!*

# APPENDIX 8
# CPH FORM 20 – VERIFICATION SLIP FOR CPH FORM 1, 2, 3, 4 OR 5

CPH Form 20

*Republic of the Philippines*
NATIONAL STATISTICS OFFICE

2010 Census of Population and Housing

**VERIFICATION SLIP**
**FOR CPH FORM 1, 2, 3, 4 OR 5**

Province

City/Municipality

Sheet ☐☐ of ☐☐ ____ Sheets

Verification Slip for: ☐ CPH Form 1   ☐ CPH Form 2   ☐ CPH Form 3   ☐ CPH Form 4   ☐ CPH Form 5

Name of Editor/Coder

Barangay Code/EA Number

Number of Bundles/ Number of Question-naires Verified/Total

Date Verified

Random Start

**RESULTS OF VERIFICATION**

| Forms/Items Verified | Number of Questionnaires with Error(s) | Status (If 50% of the question-naires had errors, write FAIL. Otherwise, write PASS.) | Number of Questionnaires with Error(s) | Status (If 50% of the question-naires had errors, write FAIL. Otherwise, write PASS.) | Number of Questionnaires with Error(s) | Status (If 50% of the question-naires had errors, write FAIL. Otherwise, write PASS.) |
|---|---|---|---|---|---|---|

**CPH FORM 1**

Geographic Identification
Listing Record
Page Total

**CPH FORM 2, 3 or 4**

Geographic Identification
Summary of Visit
I - Relationship to
T - Household Head
E -
M - Sex
D - Date of Birth
E - Age
S - Birth Registration
C - Marital Status
R -
I - Religious
P - Affiliation
T - Citizenship
I - Ethnicity
O - Disability
N - Functional Difficulty

Page 1 of 2

---

**RESULTS OF VERIFICATION**

| Forms/Items Verified | Number of Questionnaires with Error(s) | Status (If 50% of the question-naires had errors, write FAIL. Otherwise, write PASS.) | Number of Questionnaires with Error(s) | Status (If 50% of the question-naires had errors, write FAIL. Otherwise, write PASS.) | Number of Questionnaires with Error(s) | Status (If 50% of the question-naires had errors, write FAIL. Otherwise, write PASS.) |
|---|---|---|---|---|---|---|

**CPH FORM 2, 3 or 4**

Residence 5 Years Ago
Literacy
I - Highest Grade/Year Completed
T - School
E - Attendance
M - Place of School
D - Overseas
E - Worker Indicator
S - Usual Occupation
C - Kind of Business/
R - Industry
I - Class of Worker
P - Place of Work
T -
I - Fertility
O - Indicators
N -

**CPH FORM 5**

Housing Census Questions
Household Census Questions

Geographic Identification
Part I – Barangay Facilities/ Characteristics
Part II – Kinds of Establishments
Part III – Travel Information

**REMARKS**

Prepared by:

Verified by:

_____  Date
Signature over printed name of Verifier

_____  Date
Signature over printed name of Supervisor

Page 2 of 2

2010 CPH
Kabilang Ako!

# APPENDIX 9
# CPH FORM 21 – RECORD OF MISSING/EXTRA QUESTIONNAIRES

CPH Form 21

Sheet _____ of _____ Sheets

**Republic of the Philippines**
**NATIONAL STATISTICS OFFICE**

**2010 Census of Population and Housing**
**RECORD OF MISSING/EXTRA QUESTIONNAIRES**

Province: _____

City/Municipality: _____

Barangay: _____

Enumeration Area Number: _____

| Questionnaire Indicator 1 – Missing 2 – Extra | Building Serial Number (BSN) | Housing Unit Serial Number (HUSN) | Household Serial Number (HSN) | Institutional Serial Number (ISN) | Type of Form Missing/ Extra | Name of Household Head/ Type of Institution | Address | Actions Taken | Remarks |
|---|---|---|---|---|---|---|---|---|---|
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

Prepared by: _____
Signature over printed name

Date submitted to Supervisor

Referred to: _____
Signature over printed name of DSO/SCO
Date

Approved by: _____
Signature over printed name of Supervisor
Date

2010 CPH

Kabilang Ako!

# APPENDIX 10
## CPH FORM 22 – MANUAL PROCESSOR'S DAILY ACCOMPLISHMENT REPORT

CPH Form 22

Republic of the Philippines
NATIONAL STATISTICS OFFICE

2010 Census of Population and Housing

**MANUAL PROCESSOR'S DAILY ACCOMPLISHMENT REPORT**

Sheet ☐☐ of ☐☐ Sheets

Province: _____

City/Municipality: _____

Editor ☐  Coder ☐  Verifier ☐  Assistant Supervisor ☐

| Line No. | Date | Barangay Name | Code | Enumeration Area Number | Type and Number of Forms Edited/Coded/Verified | | | | | | | | | | | Remarks |
| | | | | | CPH Form 1 | | CPH Form 2 | | CPH Form 3 | | CPH Form 4 | | CPH Form 5 | | |
| | | | | | Daily | Cumulative | Daily | Cumulative | Daily | Cumulative | Daily | Cumulative | Daily | Cumulative | |
| (1) | | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) | (11) | (12) | (13) | (14) | (15) |
| 1 | | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | | | | |

Prepared by:

_____  _____
Signature over printed name of Processor     Date

Verified by:

_____  _____
Signature over printed name of Supervisor     Date

# APPENDIX 11
## CPH FORM 24 – PROBLEMS REFERRAL FORM

CPH Form 24

Republic of the Philippines
**NATIONAL STATISTICS OFFICE**

**2010 Census of Population and Housing**
**PROBLEMS REFERRAL FORM**

Sheet _____ of _____ Sheets

Province: _____

City/Municipality: _____

Barangay: _____

Enumeration Area Number: _____

| Type of Form | Building Serial Number (BSN) | Housing Unit Serial Number (HUSN) | Household Serial Number (HSN) | Institutional Serial Number (ISN) | Problems Encountered | Actions Taken | Remarks |
|---|---|---|---|---|---|---|---|
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Prepared by: _____    Date submitted to Supervisor

Signature over printed name

2010 CPH

Kabilang Ako!

# APPENDIX 12
# CPH FORM 25 – SUMMARY OF UNUSED SERIAL NUMBERS FORM

CPH Form 25

*Republic of the Philippines*
NATIONAL STATISTICS OFFICE

2010 Census of Population and Housing
SUMMARY OF UNUSED SERIAL NUMBERS

Province: _____

Municipality: _____

Name: _____

Designation: _____

| Barangay | | EA Number | CPH Form Type | Type of Serial Number | Unused Serial Number | Action to be Taken | Remarks |
|---|---|---|---|---|---|---|---|
| Name | Code | | | | | | |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

2010 CPH

*Kabilang Ako!*

## APPENDIX 13
## CPH FORM 28 – MAP BUNDLE COVER

**CPH Form 28**

Bundle _____ of _____ Bundle(s)

*Republic of the Philippines*
NATIONAL STATISTICS OFFICE

**2010 Census of Population and Housing**

# MAP BUNDLE COVER
### (TRANSMITTAL AND PROCESSING RECORDS OF MAP)

Province: _____ | | |

City/Municipality: _____ | | |

### Bundle Contents

| Barangay | | EA No. | Number of Mapping Forms Used | Barangay | | EA No. | Number of Mapping Forms Used | Barangay | | EA No. | Number of Mapping Forms Used |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Name | Code | | | Name | Code | | | Name | Code | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

### Processing Record of Barangay/EA/Block Maps

| | Activity | Date Started | Date Finished | Signature of Person Responsible | Remarks |
|---|---|---|---|---|---|
| **P O** | Receipt | | | | |
| | Verification of Geographic Codes and/or Checking of Totals | | | | |
| | Completeness Checking of Forms | | | | |
| | Consistency Checking of Household Serial Numbers with CPH Form 1 | | | | |
| | Redrawing of Barangay/EA/Block Maps | | | | |
| | Document Preparation/Bundling of Barangay/EA/Block Maps | | | | |
| | Transmittal to 2010 Census Processing Center (CPC 2010) | | | | OK for transmittal: _____ _____ PSO Date |
| **C P C 2010** | Receipt | | | | |
| | Scanning | | | | |
| | Test for Interpretability of Barangay/EA/Block Maps | | | | |
| | Transmittal of Data File to Central Office | | | | OK for transmittal: _____ _____ RD Date |

# APPENDIX 14
## TRACS REPORT 1 – STATUS OF SUBMISSION OF ACCOMPLISHED CPH FORMS/MAPS BY AREA

TRACS Report 1

**National Statistics Office**
**2010 Census of Population and Housing**
**STATUS OF SUBMISSION OF ACCOMPLISHED CPH FORMS/MAPS BY AREA**
As of _____, 2010

PROVINCE: _____

TYPE OF FORM: _____

| AREA CODE | CITY/MUNICIPALITY/ BARANGAY/ENUMERATION AREA | NUMBER OF ACCOMPLISHED CPH FORMS/MAPS | | DATE OF SUBMISSION (mm/dd) | | REMARKS | STATUS |
|---|---|---|---|---|---|---|---|
| | | TRANSMITTED | RECEIVED | START | END | | |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) |
| | MUNICIPALITY 1 | | | | | | |
| | Barangay 1 | | | | | | |
| | EA 0100 | | | | | | |
| | EA 0200 | | | | | | |
| | Barangay 2 | | | | | | |
| | . | | | | | | |
| | . | | | | | | |
| | Barangay n | | | | | | |
| | MUNICIPALITY 2 | | | | | | |
| | . | | | | | | |
| | . | | | | | | |
| | MUNICIPALITY n | | | | | | |

# APPENDIX 14
## TRACS REPORT 2 – ACCOMPLISHMENT OF PROCESSORS BY TYPE OF CPH FORM/MAP AND ACTIVITY

TRACS Report 2

**National Statistics Office**
**2010 Census of Population and Housing**
ACCOMPLISHMENT OF PROCESSORS BY TYPE OF CPH FORM/MAP AND ACTIVITY
From _____, 2010 to _____, 2010

Province: _____

| NAME OF PROCESSOR | TYPE OF CPH FORM/MAP | NUMBER OF FORMS BY TYPE OF ACTIVITY | | | | REMARKS |
| | | GENERAL SCREENING | EDITING | CODING | VERIFICATION | |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) |
| Processor 1 | 1 | | | | | |
| | 2 | | | | | |
| | 3 | | | | | |
| | 4 | | | | | |
| | 5 | | | | | |
| | Map | | | | | |
| Processor 2 | 1 | | | | | |
| | 2 | | | | | |
| | 3 | | | | | |
| | 4 | | | | | |
| | 5 | | | | | |
| | Map | | | | | |
| Processor 3 | 1 | | | | | |
| | 2 | | | | | |
| | 3 | | | | | |
| | 4 | | | | | |
| | 5 | | | | | |
| | Map | | | | | |

2010 CPH
Kabilang Ako!

# APPENDIX 14
## TRACS REPORT 3 – ACCOMPLISHMENT OF PROVINCE BY TYPE OF CPH FORM/MAP, ACTIVITY, AND CITY/MUNICIPALITY

TRACS Report 3

**National Statistics Office**
**2010 Census of Population and Housing**
ACCOMPLISHMENT OF PROVINCE BY TYPE OF CPH FORM/MAP, ACTIVITY, AND CITY/MUNICIPALITY
From _____, 2010 to _____, 2010

Province: _____

| CITY/MUNICIPALTY | TYPE OF CPH FORM/MAP | NUMBER OF FORMS BY TYPE OF ACTIVITY | | | | REMARKS |
| | | GENERAL SCREENING | EDITING | CODING | VERIFICATION | |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) |
| City/Municipality 1 | 1 | | | | | |
| | 2 | | | | | |
| | 3 | | | | | |
| | 4 | | | | | |
| | 5 | | | | | |
| | Map | | | | | |
| City/Municipality 2 | 1 | | | | | |
| | 2 | | | | | |
| | 3 | | | | | |
| | 4 | | | | | |
| | 5 | | | | | |
| | Map | | | | | |
| City/Municipality 3 | 1 | | | | | |
| | 2 | | | | | |
| | 3 | | | | | |
| | 4 | | | | | |
| | 5 | | | | | |
| | Map | | | | | |

# APPENDIX 14
# TRACS REPORT 4 – STATUS OF VERIFICATION
# BY TYPE OF CPH FORM AND BARANGAY/ENUMERATION AREA

TRACS Report 4

**National Statistics Office**
**2010 Census of Population and Housing**
STATUS OF VERIFICATION BY TYPE OF CPH FORM AND BARANGAY/ENUMERATION AREA
As of _____, 2010

Province: _____

City/Municipality: _____

| BARANGAY/ ENUMERATION AREA | CPH FORM 1 | | CPH FORM 2 | | CPH FORM 3 | | CPH FORM 4 | | CPH FORM 5 | | REMARKS |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| | Total | Percent Verified | Total | Percent Verified | Total | Percent Verified | Total | Percent Verified | Total | Percent Verified | |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) | (11) | (12) |
| Barangay 1 | | | | | | | | | | | |
| EA 001 | | | | | | | | | | | |
| EA 002 | | | | | | | | | | | |
| Barangay 2 | | | | | | | | | | | |
| . | | | | | | | | | | | |
| . | | | | | | | | | | | |
| Barangay n | | | | | | | | | | | |

$$\text{Percent Verified} = \frac{\text{Number of Verified Forms}}{\text{Total Number of Forms}} \times 100$$

2010 CPH

# APPENDIX 14
## TRACS REPORT 5 – PROGRESS OF PROVINCIAL PROCESSING BY TYPE OF ACTIVITY AND CITY/MUNICIPALITY

TRACS Report 5

**National Statistics Office**
**2010 Census of Population and Housing**
**PROGRESS OF PROVINCIAL PROCESSING BY TYPE OF ACTIVITY AND CITY/MUNICIPALITY**
As of _____, 2010

TYPE OF CPH FORM: _____

| AREA CODE | PROVINCE AND CITY/MUNICIPALITY | TOTAL NUMBER OF BARANGAY/EAs | NUMBER OF BARANGAYS/EAs WITH COMPLETELY PROCESSED FORMS BY TYPE OF ACTIVITY | | | | PERCENT OF BARANGAYS/EAs WITH COMPLETELY PROCESSED FORMS | | | | REMARKS |
| | | | GENERAL SCREENING | EDITING | CODING | VERIFICATION | GENERAL SCREENING | EDITING | CODING | VERIFICATION | |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) | (11) | (12) |
| | PROVINCE | | | | | | | | | | |
| | CITY/MUNICIPALITY 1 | | | | | | | | | | |
| | CITY/MUNICIPALITY 2 | | | | | | | | | | |
| | . | | | | | | | | | | |
| | . | | | | | | | | | | |
| | CITY/MUNICIPALITY n | | | | | | | | | | |

Col 8 = Col 4/Col 3 x 100
Col 9 = Col 5/Col 3 x 100
Col 10 = Col 6/Col 3 x 100
Col 11 = Col 7/Col 3 x 100

# 2010 CPH

## Kabilang Ako!

*Support*

## 2010 Census of Population and Housing

NSO Website: www.census.gov.ph