

HOUSEHOLD SCHEDULE

Household Listing (1-8)

The household schedule has several purposes. The primary objectives are to screen the sample of households for women eligible to be interviewed and to provide descriptive data on the characteristics of the household. Information on the relationship of each household member to the head of the household provides a picture of the structure and composition of the household. The marital status of members aged 15 years and older and the line number of the husband/partner permits the identification of coresident and noncoresident couples in the household.

HOUSEHOLD SCHEDULE

Now we would like some information about the people who usually live in your household or who are staying with you now.

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD*	RESIDENCE		SEX	AGE	FOR AGE 15+ MARITAL STATUS	FOR WOMEN MARRIED OR LIVING TOGETHER		ELIGIBILITY
			Does (NAME) usually live here?	Did (NAME) stay here last night?	Is (NAME) male or female ?	How old is (NAME)?	What is (NAME)'s marital status? MARRIED...1 LIVING TOGETHER..2 DIVORCED...3 WIDOWED...4 SEPARATED..5 NEVER MARRIED..6 DK.....8	Does (NAME)'s husband live in this household?	WRITE LINE NUMBER OF HUSBAND	CIRCLE LINE NUMBER OF ALL WOMEN AGE 20-44
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
			YES NO	YES NO	M F	IN YEARS		YES NO		
01		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>	01
02		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>	02
03		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>	03
04		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>	04
05		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>	05
06		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>	06
07		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>	07
08		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>	08

LINE (1)	RESIDENTS/VISITORS (2)	RELATIONSHIP (3)	RESIDENCE		SEX (6)	AGE (7)	MARITAL ST. (8)	FOR MARRIED WOMEN		ELIG. (11)
			(4)	(5)				(9)	(10)	
09		<input type="checkbox"/> <input type="checkbox"/>	1 2	1 2	1 2	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	1 2	<input type="checkbox"/> <input type="checkbox"/>	09
10		<input type="checkbox"/> <input type="checkbox"/>	1 2	1 2	1 2	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	1 2	<input type="checkbox"/> <input type="checkbox"/>	10
11		<input type="checkbox"/> <input type="checkbox"/>	1 2	1 2	1 2	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	1 2	<input type="checkbox"/> <input type="checkbox"/>	11
12		<input type="checkbox"/> <input type="checkbox"/>	1 2	1 2	1 2	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	1 2	<input type="checkbox"/> <input type="checkbox"/>	12

NON-RESIDENT HUSBANDS

81						<input type="checkbox"/> <input type="checkbox"/>	
82						<input type="checkbox"/> <input type="checkbox"/>	
83						<input type="checkbox"/> <input type="checkbox"/>	
84						<input type="checkbox"/> <input type="checkbox"/>	

TICK HERE IF CONTINUATION SHEET USED

Just to make sure that I have a complete listing:

- 1) Are there any other persons such as small children or infants that we have not listed? YES → ENTER EACH IN TABLE NO
- 2) In addition, are there any other people who may not be members of your family, such as domestic servants, lodgers, or friends who usually live here? YES → ENTER EACH IN TABLE NO
- 3) Are there any guests or temporary visitors staying here, or anyone else who slept here last night that have not been listed? YES → ENTER EACH IN TABLE NO

* CODES FOR Q.3: RELATIONSHIP TO HEAD OF HOUSEHOLDS

- | | | |
|------------------------------------|------------------------|--------------------------------|
| 01 = HEAD | 05 = GRANDCHILD | 09 = CO-WIFE |
| 02 = WIFE OR HUSBAND | 06 = PARENT | 10 = OTHER RELATIVE |
| 03 = SON OR DAUGHTER | 07 = PARENT-IN-LAW | 11 = ADOPTED/FOSTER/STEP CHILD |
| 04 = SON-IN-LAW OR DAUGHTER-IN-LAW | 08 = BROTHER OR SISTER | 12 = NOT RELATED |