

Quest Version

Varalan	

REPUBLIC OF MAURITIUS
STATISTICS MAURITIUS

CONTINUOUS MULTI-PURPOSE HOUSEHOLD SURVEY - 2012

INTERVIEWING OF HOUSEHOLDS

Reference Month	Geographical District	
PSU-RDI	Rotation Group	
PSU Number	Year of listing	
Enumeration Area	Sample Number	
Household Number	Interview round	
Previous interview	Household selected-1 or replacer	nent-2
Religion of head		
Name of Interviewer	 	

Response details

Ref. No. of Hhld	Visit No.	d	d	m	m	у	у	Status *		Ref. No. of Hhld	Visit No.	d	d	m	m	у	у	Stat	us *	
* 1-Compl	eted 2-F	Refusa	ıl 3-1	Non-c	ontac	t 4-C	Chang	e in househ	old size	5-Moved	away 6	- Part	ly cor	nplete	ed 7	-Resp	onde	nt not	avail	able
Duration	of inte	rviev	V				min	utes						4	d					
Name of	Superv	visor	••••							Date	of field	l che	ck	d	d	111	III	у	у	
										(incl	uding 1	st vis	sit)						<u> </u>	
										Date	e of re-ii	ntervi	ew							
For offi	ice use																			
Edited an	d coded	by								Inpu	ıt by						••			
Checked	by									Veri	fied by.									

MODULE 1

DEMOGRAPHIC AND EDUCATIONAL CHARACTERISTICS OF HOUSEHOLD MEMBERS

Enter the first name and demographic characteristics of every member of the household. Do not forget to include married children forming part of this household and their families, and members of the household temporarily absent including those abroad.

1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	1.10	1.11	1.12
	Name of household	Reason for presence of	National Identity Card	Relationship to head	Age	Sex	Marital status		y, Primary and condary	Other educa	ntional qualifications
Serial number	member (First name only)	household member / absence of member formerly present			Last birthday (years)	1 Male 2 Female	 Married/ in a union Widowed Divorced Separated Single 	 2 Past-WR * 3 Past- None * 4 Never-WR * 5 Never-None * 6 Child not yet 	Level of education If past, insert highest level completed. Specify whether passed or not passed if left school at Std VI, Form V & Upper VI. If now, insert level being attended	 Now-full time Now-Part time 	Qualification/Course Insert highest qualification obtained and field of study. If now, specify course being attended
01						1 2	1 2 3 4 5	$\begin{array}{cccccccccccccccccccccccccccccccccccc$		1 2 3 4 5	
02						1 2	1 2 3 4 5	$\begin{array}{cccccccccccccccccccccccccccccccccccc$		1 2 3 4 5	
03						1 2	1 2 3 4 5	$\begin{array}{rrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrr$		1 2 3 4 5	
04						1 2	1 2 3 4 5	$\begin{array}{cccc} 1 & 2 & 3 \\ 4 & 5 & 6 \end{array}$		1 2 3 4 5	
05						1 2	1 2 3 4 5	$\begin{array}{cccccccccccccccccccccccccccccccccccc$		$\begin{array}{cccc} 1 & 2 & 3 \\ 4 & 5 \end{array}$	

*....-WR : If person can, with understanding, both read and write a simple sentence in his everyday life

1

*....-None: If person cannot, with understanding, both read and write a simple sentence in his everyday life

1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	1.10	1.11	1.12
	Name	Reason	NIC	Relationship to head	Age	Sex	Marital status	School attendance	Level of education	When studied	Qualification/course
06						1 2	1 2 3	1 2 3		1 2 3	
00						1 2	4 5	4 5 6		4 5	
07		<u> </u>				1 2	1 2 3	1 2 3		1 2 3	
							4 5	4 5 6		4 5	
08		 				1 2	1 2 3	1 2 3		1 2 3	
							4 5	4 5 6		4 5	
09						1 2	1 2 3	1 2 3		1 2 3	
							4 5	4 5 6		4 5	
10						1 2	1 2 3	1 2 3		1 2 3	
							4 5	4 5 6		4 5	
11						1 2	1 2 3	1 2 3		1 2 3	
							4 5	4 5 6		4 5	
12						1 2	1 2 3	1 2 3		1 2 3	
							4 5	4 5 6		4 5	

*....-WR : If person can, with understanding, both read and write a simple sentence in his everyday life

*....-None: If person cannot, with understanding, both read and write a simple sentence in his everyday life

MODULE II LABOUR FORCE (For all persons aged 12 years and over) PART A - CURRENT ACTIVITY

First	name of household member													
Seria	I number of household member as per page 2													
2	Interviewer, please state whether information is	Circle one	1		1		1		1	1	1		1	
	being collected from self (1) or proxy (2)	answer	2		2		2		2		2		2	
2.1	During the reference week , did you do any work for pay, profit or family gain, even if it was only for one hour ?	If Yes , go to 2.5	Yes 1	No 2										
2.2	During the reference week, did you do any of the following activities for sale or pay ?1. Work or help in a vegetable/fruit/flower cultivation for sale or pay													
	 Rearing of animals (cow, goat, pig, poultry, etc.) for sale or pay Fishing or other related activities for sale Preparation of food products (at home) for sale Dressmaking, tailoring for sale or pay Making of baskets/hats/other handicrafts for sale or pay 	Circle '1' if any one of the listed activities was carried out and go to 2.5	Yes	No										
	 Work or help in a family shop or other business Repair work (shoes, household appliances, etc.) for pay Sell goods on the street, at fairs or on beaches Transport of goods or people for pay Housework or gardening for pay Care of children/elderly people for pay Any other small job, specify 		1	2	1	2	1	2	1	2	1	2	1	2
2.3	During the reference week , were you temporarily absent from a job or business because of holidays, sickness or any other reason?	If No , go to 2.27 (Part E)	Yes 1	No 2										

4

First	name of household member							
Seria	al number of household member as per page 2							
2.4	Why were you away from work during the							
	reference week?	Do not						
	Illness or injury 1	read out	1	1	1	1	1	1
	Holiday, vacation or on leave2		2	2	2	2	2	2
	Maternity, leave on birth of a child	Circle main	3	3	3	3	3	3
	Household/family responsibilities	reason	4	4	4	4	4	4
	Study/training leave5		5	5	5	5	5	5
	Temporary lay-off with assurance to return to work6		6	6	6	6	6	6
	Temporary disorganisation of work (lack of		7	7	7	7	7	7
	work, plant or machine repair, bad weather, etc.)7		8	8	8	8	8	8
	Other, specify							

PART B - NATURE OF WORK

If the respondent has more than one job or business, questions 2.5 - 2.12 refer to the main job or business, i.e, the job or business in which he/she usually works the most hours.

2.5	What is the name of the establishment, firm, government institution, etc. for which you worked during the reference week ?	Record name of employer if there is no trade name												1
2.6	How many persons (including yourself) work there? Under 5	Circle one answer	1 2 3											
2.7	What kind of activity is carried out at your place of work?	Record major activity carried out where person works												

С

First na	me of household member																							
Serial r	umber of household member as per page 2																							
2.8	What kind of work do you do there?	Record main occupation																						
2.9	What was your employment status? Employer	Circle one answer		1 2 3 4 5 6 7				1 2 3 4 5 6 7				1 2 3 4 5 6 7			1 2 3 4 5 6 7	3 4 5			1 2 3 4 5 6 7			1 2 3 4 5 6 7	-----	
2.10	How long have you been working for your present employer (if employer or own account worker, in the present business)?	Record number of months																						
2.11 (a)	Do you contribute to the National Pensions Scheme?			es 1	No 2		Y 1		No 2		Yes 1		No 2		Yes 1	No 2			Yes 1	No 2		res 1	No 2	
	Does your employer contribute to the National Pensions Scheme for you?		Yes 1	No 2		Va 3	Yes 1	No 2	Na 3	Ye 1	es 1	No 2	Na 3	Yes 1	s N		Na 3	Yes 1	No 2	Na Na	Yes 1	No 2		
2.12 (a)	How much did you derive as income, including overtime pay, from your main job/business for last month ?	Record in Rupees																						
(b)	Of which non-regular income, specify	Record in Rupees																						
2.13	In addition to your main occupation, did you have any other job or business during the reference week ?	If No , go to 2.16		es 1	No 2		Y J	es Ì	No 2		Yes 1		No 2		Yes 1	No 2			Yes 1	No 2		Yes 1	No 2	
2.14	What kind of activity is carried out at your second place of work?	Record major activity carried out there																						
2.15	What was your employment status there?Employer	Circle one answer		1 2 3 4 5 6				1 2 3 4 5 6				1 2 3 4 5 6				- 3 4 5			1 2 3 4 5 6			1 2 3 4 5 6		_

Firs	name of household member													
Seri	al number of household member as per page 2													
2.16 (a)	Main Job During the reference week , how many hours (including overtime) did you work at your main job?	Exclude lunch time and periods of leave/absence * Insert total hours for the week	Mon Wed Fri Sun	Tue Thu Sat Week*	Mon Wed Fri Sun	Tue Thu Sat Week*	Mon Wed Fri Sun	Tue Thu Sat Week*	Mon Wed Fri Sun	Tue Thu Sat Week*	Mon Wed Fri Sun	Tue Thu Sat Week*	Mon Wed Fri Sun	Tue Thu Sat Week*
(b)	How many hours do you usually work at your main job per week?	Record number of hours If 2.16(a) is greater or equal to 2.16(b), go to 2.17												
(c)	During the reference week, why did you workless than your usual hours at your main job?Illness/Injury	Circle main reason		1 2 3 4 5 6 7 8 9		1 2 3 4 5 6 7 8 9		3 4 5 7 3		1 2 3 4 5 6 7 8 9		- 3 4 5 5 7 3		1 2 3 4 5 6 7 8 9

7

PART C - HOURS OF WORK

First ı	name of household member													
Serial	number of household member as per page 2													
2.17 (a) (b)	Other jobs (applicable if yes at 2.13, else go to 2.18) During the reference week, how many hours (including overtime) did you work at your other job(s)? How many hours do you usually work at your other job(s) per week?	Exclude lunch time and periods of leave/absence * Insert total hours for the week Record number of hours	Mon Fri Sun	Tue Thu Sat Week*	Mon Wed Fri Sun	Tue Thu Sat Week*								
(c)	During the reference week , why did you work	If 2.17(a) is greater or equal to 2.17(b), go to 2.18												
	less than your usual hours at your other job(s) ? Illness/Injury1 On leave2 Studies/training3			1 2 3		1 2 3		1 2 3		1 2 3		1 2 3		1 2 3
	Household/family responsibilities4Temporary/part time job.5Insufficient work.6Bad weather/breakdown.7Shift work/variable hours8Public holiday.9	Circle main reason		4 5 6 7 8 9		4 5 6 7 8 9		4 5 6 7 8 9		4 5 6 7 8 9		4 5 6 7 8 9		4 5 6 7 8 9
	Other, specify			10		10		10		10		10	1	10

ω

Firs	name of household member				 									 				
Seri	al number of household member as per page 2													 				
2.18	Total actual hours (at main and other jobs) worked (calculation to be done by interviewer)	2.16 (a) + 2.17 (a)																
2.19	In addition to your total actual hours worked (number of hours calculated in 2.18), were you available for extra work during the reference week (if offered and the extra hours were paid)?	If No, go to 2.22 (Part D)	Y	es N 1 2	Yo 1	es N	No 2		Yes 1 1	No 2		'es I 1	No 2	Yes 1	No 2	Ŋ	7es N 1 2	
2.20	How many extra hours (at main and other jobs) could you have worked during the reference week ?	Record number of hours																
2.21	Have you been looking for additional or alternative work (with more hours) during the past 4 weeks ?		Y	es No 1 2	Yo 1	es l	No 2	Y	res 1 1	No 2	Y	'es 1 1	No 2	Yes 1	No 2	Ŋ	'es N 1 2	

Applicable if coded 1 or 2 at Questions 2.9 and/or 2.15, ELSE go to 2.42 (Part F) PART D - SELF EMPLOYED (Employers and own account workers)

First	name of household member																		
Seria	al number of household member as per page 2																		
2.22	What is the type of ownership of the enterprise in which you are working? Individual proprietor	Circle one answer		1 2 3 4 5 6	<u> </u>		1 2 3 4 5 6			1 2 3 4 5 6			1 2 3 4 5 6			1 2 3 4 5 6			1 2 3 4 5 6
2.23	Is the enterprise's expenditure separate from that of the owner's household?		Ye 1		lo 2	Ye 1		No 2			No 2		Yes 1	No 2	Y		No 2	Yes 1	No 2
2.24	Are the enterprise's assets separate from that of the owner's household?		Ye 1	es N	lo 2	Ye 1		lo 2	Y		No 2		Yes 1	No 2	Y		No 2	Yes 1	No 2
2.25	Do you keep any record of accounts (receipts and expenditure) for your enterprise?		Ye 1	es N	lo 2	Ye 1		lo 2			No 2		Yes	No 2	Y		No 2	Yes 1	No 2
2.26	 How many persons (including yourself) worked in this enterprise during the reference week ? 1. Working proprietor - Male 2. Working proprietor - Female 3. Contributing family worker - Male 4. Contributing family worker - Female 5. Permanent employee - Male 6. Permanent employee - Female 7. Casual employee - Male 8. Casual employee - Female 9. Apprentice/helper - Male 10. Apprentice/helper - Female 	Enter number Go to 2.42 (Part F)	1. 2. 3. 4. 5. 6. 7. 8. 9. 10.			1. 2. 3. 4. 5. 6. 7. 8. 9.			1. 2. 3. 4. 5. 6. 7. 8. 9. 10.			1. 2. 3. 4. 5. 6. 7. 8. 9. 10.			1. 2. 3. 4. 5. 6. 7. 8. 9. 10.			1. 2. 3. 4. 5. 6. 7. 8. 9. 10.	

First	name of household member								·····					
Serial	number of household member as per page 2													
2.27	Have you been looking for work or trying to set up your own business during the past 4 weeks ?	If No , go to 2.30	Yes 1	No 2										
2.28	What have you done during the past 4 weeks to obtain work or to start your own business?	Do not read out	Yes	No										
	1. Applied to prospective employers	Circle either	1	2	1	2	1	2	1	2	1	2	1	2
	2. Checked at factories, worksites,etc	Yes (1) or	1	2	1	2	1	2	1	2	1	2	1	2
	3. Placed or answered advertisements	No (2)	1	2	1	2	1	2	1	2	1	2	1	2
	4. Sought assistance or advice to obtain a paid job		1	2	1	2	1	2	1	2	1	2	1	2
	5. Sought assistance or advice to start own business		1	2	1	2	1	2	1	2	1	2	1	2
	6. Looked for inputs* to set up own business		1	2	1	2	1	2	1	2	1	2	1	2
	7. Applied for permit to set up own business		1	2	1	2	1	2	1	2	1	2	1	2
	8. Registered at the Employment Service		1	2	1	2	1	2	1	2	1	2	1	2
	9. Other steps, specify		1	2	1	2	1	2	1	2	1	2	1	2
2.29	How long have you been continuously without work and looking for work or trying to set up your own business?	Record number of months Go to 2.32												
2.30	Would you have liked to work during the reference week ?	If No , go to 2.34	Yes 1	No 2										

PART E - UNEMPLOYMENT

* inputs such as land, building, machinery, equipment or finance

First	name of household member													
Seria	Il number of household member as per page 2													\prod
2.31	Why were you not looking for work or trying to set up your own business?													<u> </u>
	Studying/training1		1		1		1		1		1		1	
	Will resume studies soon 2		2		2		2		2		2		2	
	Retired/too old to work		3		3		3		3		3		3	
	Permanent disability4		4		4		4		4		4		4	
	Temporary illness/injury	Circle	5		5		5		5		5		5	
	Too young to work6	main reason	6		6		6		6		6		6	
	Parents or spouse not agreeable7		7		7		7		7		7		7	
	Household/family responsibilities		8		8		8		8		8		8	
	Not interested to work		9		9		9		9		9		9	
	New job or own business to start soon10		10		10		10		10		10		10	
	Suitable jobs not available11		11		11		11		11		11		11	
	Do not know how and where to look for work 12		12		12		12		12		12		12	
	Got tired/frustrated of seeking work13		13		13		13		13		13		13	
	Other, specify		14		14		14		14		14		14	
2.32	Could you have started to work during the	If No,	Yes	No										
	reference week if work was available?	go to 2.34	1	2	1	2	1	2	1	2	1	2	1	2
2.33	Are you willing to accept?		Yes	No										
1	. Full-time employment		1	2	1	2	1	2	1	2	1	2	1	2
2	2. Part-time employment	Circle either	1	2	1	2	1	2	1	2	1	2	1	2
3	E. Employment without limit of time (permanent)	Yes (1) or	1	2	1	2	1	2	1	2	1	2	1	2
4	. Temporary employment	No (2)	1	2	1	2	1	2	1	2	1	2	1	2
5	Employment in the public sector		1	2	1	2	1	2	1	2	1	2	1	2
e	5. Employment in the private sector	Go to 2.35	1	2	1	2	1	2	1	2	1	2	1	2
7	. Work below your level of qualification		1	2	1	2	1	2	1	2	1	2	1	2
8	B. Work outside your training/qualification		1	2	1	2	1	2	1	2	1	2	1	2

First	name of household member									
Seria	al number of household member as per page 2									
2.34		Record main reason	1 2 3 4 5 6 7 8 9 10 11 12 13 14		1 2 3 4 5 6 7 8 9 10 11 12 13 14		1 2 3 4 5 6 7 8 9 10 11 12 13 14	$ \begin{array}{c} 1\\2\\3\\4\\5\\6\\7\\8\\9\\10\\11\\12\\13\\14\end{array} $	$ \begin{array}{c} 1\\2\\3\\4\\5\\6\\7\\8\\9\\10\\11\\12\\13\\14\end{array} $	$ \begin{array}{c} 1\\2\\3\\4\\5\\6\\7\\8\\9\\10\\11\\12\\13\\14\end{array} $
2.35	What is your main source of income or support to meet your daily needs? Parents. 1 Spouse/partner. 2 Children. 3 Other relatives/non relatives. 4 Maintenance alimony (ex-spouse) 5 Savings/property income. 6 Government pension/assistance. 7 Other pension/work compensation. 8 Other, specify. 9	Record main source of income	1 2 3 4 5 6 7 8 9		1 2 3 4 5 6 7 8 9		1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9
2.36	Have you ever worked in the past?	If No , go to 2.42 (Part F)	Yes 1	No 2	Yes 1	No 2	Yes No 1 2	Yes N 1 2		
2.37	How long is it since you worked for the last time, even for a few days? If the number of months is greater than 120, record number and go to 2.42 (Part F)	Record number of months								

13

First	name of household member		 			 	 	 			 		 			 			
Seria	I number of household member as per page 2		 			 					 								Τ
2.38	What kind of activity was carried out at the place where you worked?	Record major activity carried out where person worked																	
2.39	What kind of work did you do there most of the time?	Record main occupation							T										
2.40	What was your employment status?				1					1		1 1					<u> </u>		
	Employer1			1		1			1		1				1			1	
	Own account worker2	Circle one		2		2			2		2				2			2	
	Employee 3	answer		3		3			3		3				3			3	
	Employee (under empowerment programme)			4		4			4		4				4			4	
	Apprentice			5		5			5		5				5			5	
	Contributing family worker			6		6			6		6				6			6	
	Other, specify			7		7			7		7			,	7			7	
2.41	Why did you leave your last job?																		
	Closure of establishment/firm1			1		1		1	l		1			1	1			1	
	VRS-Closure of establishment			2		2		4	2		2			2	2			2	
	Reduction of workforce			3		3			3		3			3	3			3	
	VRS-Reduction of workforce			4		4		2	1		4			4	1			4	
	Completion of contract/temporary job 5	Circle		5		5		4	5		5			5	5			5	
	Health problems	main reason		6		6		6	5		6			6	5			6	
	Retirement7			7		7		7	7		7			7	7			7	
	Marriage/childbirth/household responsibilities			8		8		8	3		8			8	3			8	
	Not satisfied with job			9		9		ç)		9			9)			9	
	Resumption of studies/training10			10		10		1	0		10)		1	0			10	
	Other, specify			11		11		1	1		11			1	1			11	

Applicable to all persons aged between 16 and 65 years inclusive, ELSE end of module

PART F - REGISTRATION AT EMPLOYMENT SERVICE

Age a	s per column 1.6																		
First ı	name of household member																		
Serial	number of household member as per page 2	2																	
2.42	Are you registered at the Employment	If No,	Yes	No	Y	es N	No	Ye	s N	lo	Ye	es N	lo	Ye	es N	No	Yes	s N	0
	Service?	end of module	1	2		1	2	1		2		1 2	2		1	2	1	2	2
2.43	How long have you been registered at the	red at the Record number of months,																	
	Employment Service?	end of module																	



Section 1. ENVIRONMENT

	Head of Household			
3.1	Are you aware of the following environmental issues?	Yes	No	
	1. Sustainable Development/Maurice Ile Durable	1	2	
	2. Environment friendly goods (e.g ozone friendly products)	1	2	
	3. Greenhouse gas emission from fossil fuel combustion is responsible for climate change	1	2	
	4. Effect of climate change (e.g. abnormal weather, flooding, sea level rise, etc)	1	2	
	5. Environmental benefits of car pooling	1	2	
	6. Emission from vehicles cause air pollution	1	2	
	7. Environment benefits of using bicycle or walking short distances	1	2	
	8. Dumping at unauthorised places is illegal	1	2	
3.2 (a) Do you take any measures to reduce/reuse/recycle waste?	Yes	No	If No, go to 3.3
		1	2	3.3
(b) Which measure(s) do you take to reduce/reuse/recycle waste?	Yes	No	
	1. Use own bags for shopping	1	2	
	2. Choose products with minimum packing	1	2	
	3. Reuse plastic bags	1	2	
	4. Reuse empty containers	1	2	
	5. Compost waste	1	2	
	6. Other, specify	1	2	
	1	*		
	2	*		
	3	*		
	* for office use			
3.3 (a) Do you take any measures to reduce water consumption in your household?	Yes	No	If No, go to
		1	2	3.4
(b) Which measure(s) do you take to reduce water consumption in your household?			
	1. Control use of water when performing certain activites*	1	2	
	2. Use slow flow showers	1	2	
	3. Use dual flush toilets	1	2	
	4. Other, specify	1	2	
	* activities such as dish washing, brushing teeth, taking showers, etc.	1	1	I
		-		I
3.4 (a) Do you usually collect rain water ?	Yes	No	If No, end of

2 section 1

1

(go to Section 2)

(b) For which purpose(s) do you collect and use rain water?

1. General cleaning (house, car and pavement)	1	2
2. Watering plants/lawn	1	2
3. Other, specify	1	2

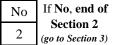
7	Section 2. ENERGY			
	Head of Household			_
4.1	Is your household equipped with a solar water heater?	Yes	No	If Yes, go to
		1	2	4.4
4.2	Are you interested to buy a solar water heater?	Yes	No	If Yes , go to
		1	2	4.4
4.3	Why are you not interested to buy a solar water heater?			-
				1

1. Too expensive	1
2. Not appropriate for the region	2
3. Not necessary	3
4. Other, specify	4

4.4 Do you use the following types of lamps for lighting?

	Yes	No	If yes, state number in use
1. Compact Fluorescent Lamps (CFL- lampoule economique)	1	2	
2. Fluorescent tubes (<i>tube</i>)	1	2	
3. Incandescent lamps (<i>lampoule normale</i>)	1	2	

4.5 (a) Do you take any measures to reduce consumption of electrical energy at home?



1

Yes

1

Г

(b) Which measures do you take to reduce electrical energy consumption?

	Yes	No
1. Use other energy sources instead of electricity for cooking	1	2
2. Use other energy sources instead of electricity for water heating	1	2
3. Use low consumption electric bulbs	1	2
4. Use energy efficient electric appliances	1	2
5. Turning off lights when not in use	1	2
6. Switch off electric appliances after use	1	2
7. Iron clothes in batches	1	2
8. Other, specify	1	2

Section 3. SPORTS

All household members aged 7 years and above

8

First	name of household member																																								
Serial number of household member as per page 2																																									
5.1	During last month , did you do any physical	If No (2),																																							
	exercise (jogging, yoga, swimming, football,	go to		Yes	N	lo	Yes	N	lo	Yes	No	Yes	Ν	lo	Yes	N	lo	Yes	N	0																					
	aerobics, etc.)	5.6		1		2	1	-	2	1	2	1		2	1		2	1	2	,																					
5.2	How much time did you spend on your physical					Μ			М		М			М			М			М																					
	exercise per week and where* did you practice	Read out		Min	utes	О Н	Minu	tes	О Н	Minute	es H	Minu	ites	О Н	Minu	ites	О Н	Minut	es	О Н																					
	the activities?					P			P		P			P			Ρ			P																					
	1. Jogging		1	i		×		:	*		*		:	*	i		*			*																					
	2. Brisk walking		2				÷				••••		·			·																									
	3. Yoga	Record time in minutes and infrastructure as per footnote						3		•••		·				••••			•																						
	4. Aerobic		4		••••••••			:			••••		:	<u> </u>		:																									
	5. Tai-chi		minutes and infrastructure as	minutes and infrastructure as per footnote	5		•••			:			••••		:	1																									
	6. Cycling										infrastructure as per footnote	infrastructure as per footnote	infrastructure as per footnote	infrastructure as	infrastructure as	6											1														
	7. Swimming/diving																							7											1			1			
	8. Body building																							8											1						
	9. Weightlifting																										. [· · · · · · · · · · · · · · · · · · ·	9			 		•					1	[
	10. Football		10					<u>}</u>]	[]]]																											
	11. Volleyball	-		record time spent	11																																				
	12. Basketball				~	12											l																								
	13. Athletics	activities outside	13			.																																			
	14. Tennis	school hours	14			.																																			
	15. Badminton		15			.																																			
	16. Table tennis		16			_								ļ																											
	17. Other specify		17		:		:					:	:																												
5.3	How many times per week did you practice?																																								

* M - Public (Ministry of Youth & Sports) O - Public (Other) H - Private(Home) P - Private(other)

First	name of household member													
Seria	I number of household member as per page 2													
5.4	Why did you practice the main activities?Leisure	end of section	1		1 2 3 4									
5.5	Did you train under the supervision of a coach?	End of section	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
5.6	Why did you not practice any physical activities?	Do not read												
	Lack of time due to work 1	out	1		1		1		1		1		1	
	Lack of time due to study 2		2		2		2		2		2		2	
	Lack of facilities/accessibility	Record main	3		3		3		3		3		3	
	Lack of motivation 4		4		4		4		4		4		4	
	Injury 5		5		5		5		5		5		5	
	Age 6	End of	6		6		6		6		6		6	
	Disability/illness	section	7		7		7		7		7		7	
	Other, specify		8		8		8		8		8		8	

Section 4. HOUSEHOLD INCOME AND EXPENDITURE

6.1	What was your total household expenditu	re			
	for the last month ?	Rs			

6.2 What was your household expenditure on the following items **last month**?

	 Amount (Rs)
1. Food and non-alcoholic beverages	
2. Medical care	
3. Rent (if any)	
4. Gas	
5. Educational expenses	
6. Travelling and transport	
7. Clothing and footwear	
8. Water bill and waste water bill	
9. Electricity bill (including MBC TV licence)	
10. Telephone bill (excluding internet bill)	
11. Internet/e-mail	
12. Mobile phone	
13. Restaurants and hotels bills	
14. Recreation and culture	
15. Household appliances and furniture	
16. Routine house maintenance	
17. Life insurance and pension contributions	
of which (i) National Pension Fund or other fund	
(ii) Civil Service Family Pension Scheme	
(iii) Pension contribution (PRB 2008)	
18. Debt repayment: Land/house	
Vehicle	
Credit purchase	
Educational loan	
Other, specify	
Total	

6.3 For the calendar **year 2011**, what was the total amount paid for the following items?

	Amount (Rs)
1. Income tax	
2. Municipal tax	

6.4 Applicable if no rent at question 6.2(3) has been declared, i.e, for owned and free accomodation only

What would be the rent payable for your housing unit ?	Rs
(if rented unfurnished)	

Source	Serial number of household member as per page 2													
Source														
Paid employment (including bonus, overtime, etc.)														
Income from self-employment (trade, business, plantation, etc.)														
Income from backyard-produced goods (vegetables, fruits, eggs, etc.)														
Total														
						Total 6.5								

11 6.6 Income from property last month

 Serial number of household member as per page 2

 Rent from land and buildings/machinery/ equipment, etc
 Image: Colspan="2">Image: Colspan="2">Image: Colspan="2">Image: Colspan="2"

 Dividends/Interests
 Image: Colspan="2">Image: Colspan="2"

 Other, specify.....
 Image: Colspan="2">Image: Colspan="2"

 Total
 Image: Colspan="2">Image: Colspan="2"

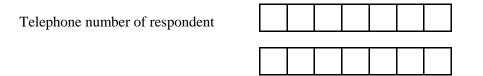
Total 6.6

12 6.7 Transfer Income

	If '	'Yes'', please	state	amount re	eceived last mo	nth					
	Serial number of household member as per page 2										
Pension from former employer											
NPF retirement/old age pension											
Widow's and children pension											
Other social security benefits											
Maintenance allowance/alimony											
Regular allowance from											
parents/relatives											
Regular allowance from social/religious organisations											
Other regular income, specify											
Total											
		1			1						

Total 6.7

Total (6.5+ 6.6+ 6.7)



Collected under the provisions of the Statistics Act and in accordance with the sections 22, 24, 25 and 50 of the Data Protection Act.