



CAYMAN ISLANDS

Labour Force Survey

Conducted in October, 2007



For optimum accuracy, please print carefully and avoid contact with the edges of the box. The following will serve as an example:

0	1	2	3	4	5	6	7	8	9																
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z

IMPORTANT!!! Shade the oval where applicable. Note that some questions have multiple answers

Block No. and Parcel No.

Enumeration Area

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Confidential

IMPORTANT!!!

SAMPLE NO

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USE ONLY 2B PENCIL

Address of Household: _____ Telephone number: _____

I hereby certify that the information contained on this form has been honestly completed to the best of my ability.

INTERVIEWER'S SIGNATURE: _____

Interviewer No

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EDITOR/CODER'S NAME: _____

<input type="checkbox"/> Fully Completed	<input type="checkbox"/> Unable to find address	<input type="checkbox"/> Demolished / Derelict	# of households not previously in the registry <table border="1" style="width: 40px; height: 20px; margin: 0 auto;"> <tr> <td style="width: 10px; height: 10px;"> </td> <td style="width: 10px; height: 10px;"> </td> </tr> </table>		
<input type="checkbox"/> Partially Completed	<input type="checkbox"/> Vacant - not occupied	<input type="checkbox"/> Temporary / Vacation residence			
<input type="checkbox"/> Refusal	<input type="checkbox"/> Vacant - under construction	<input type="checkbox"/> No contact			
<input type="checkbox"/> Household NOT in Cayman Islands on Oct 6, 2007	<input type="checkbox"/> No contact -resident away temporarily	<input type="checkbox"/> Out of Scope			

RECORD OF VISITS

Date of Visit	Start Time	End Time	Comments																																
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Section 1- Demographic Characteristics

P E R S O N #	1.1 Have you / . . . been in the Cayman Islands for at least 6 months or is . . . intending to stay for at least six (6) months? Yes1 No2 Not sure, immigration issues3	1.2 What is..... Relationship to Head? Head 1 Spouse/partner 2 Child 3 Son/daughter in law ... 4 Grand-child 5 Parent/parent-in-law ... 6 Grand parent 7 Brother/sister 8 Other relative 9 Live in domestic 10 Non-relative 11	1.3 Sex Male.....1 Female..2	1.4 Age (as at week ending Oct. 6, 2007)	1.5 Caymanian Status: Is . . . ? Caymanian..... 1 Non-Caymanian with work permit 2 Non-Caymanian with NO work permit 3 Non-Caymanian with government contract work 4 Non-Caymanian permanent resident with rights to work 5 Non-Caymanian permanent resident WITHOUT rights to work 6 Asylum holder/seekers 7 Other 8
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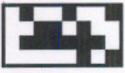
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Section 2- Educational Characteristics

P E R S O N #	2.1 What is the highest <u>grade</u> that . . . <u>completed</u> ?				2.2 What is the <u>highest examination</u> . . . ever passed ?			
	1 None 7 Primary Yr2 13 Middle - Yr8 19 Community College 2 Nursery 8 Primary Yr3 14 Middle - Yr9 20 College 3 Pre-school 9 Primary Yr4 15 High Sch - Yr10 21 University 4 Kindergarten 10 Primary Yr5 16 High Sch- Yr11 22 Other 5 Special Educ. 11 Primary Yr6 17 High Sch- Yr12 23 Don't Know 6 Primary Yr1 12 Middle - Yr7 18 Vocational				None 1 CXC Basic 2 GCE"O" / CXC Gen Prof (1 or 2 subjects) 3 GCE"O" / CXC Gen Prof (3 or 4 subjects) 4 GCE"O" / CXC Gen Prof (5 over subjects) 5 GCE "A" / CAPE / HSC 1 or 2 6 GCE "A" / CAPE / HSC 3 & over 7 GCSE 8 IGCSE 9 Diploma or Equivalent Certificate 10 Associate Degree 11 Undergraduate Degree 12 Postgraduate Degree 13 Professional Qualifications 14 Other 15			
	For Individuals less than 15 years old, Go to 6.1							
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Section 3 - Labour Force

To be completed for those age 15 and older.

P E R S O N #	3.1 Did ... do any work in the Cayman Islands, for pay, profit or family gain during the week ending Oct. 6, 2007? Yes ...1 No2 Include work for as little as ONE (1) hour Exclude work around or in own house & volunteer work. If YES, Go to 4.1	3.2 Did ... have a job at which you / he/she did not work during the week ending Oct. 6, 2007? Yes ...1 No2 If NO, Go to 3.4	3.3 What was the MAIN reason was absent from work during the week ending Oct 6, 2007? Vacation1 Seasonal inactivity2 Student / In Training ...3 Home / family duties ..4 Maternity Leave5 Paternity Leave6 Illness / Injury.....7 Other 8 GO TO 4.1	3.4 During the week ending Oct. 6, 2007 did ... have a job to start in 4 weeks or less? Yes ...1 No2 If YES, Go to 5A.1	3.5 What was the MAIN reason was not working during the week ending Oct 6, 2007? No work available1 Seasonal inactivity 2 Student / In training ...3 Home / family duties. ...4 Retired 5 Illness / Injury 6 Infirmary / Disabled 7 Waiting for work permit / application approval ... 8 Did not want to work .. 9 Other 10	3.6 Has been looking for work and available for work in the last 4 weeks? Yes1 No2 Looking for work includes : - Checking newspaper - Submitted job application - Ask friends about vacancies - Check Internet for possible jobs If Yes, Go to 5A.1 If No, Go to 5B.1
	01	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 <input type="radio"/> 10
02	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 <input type="radio"/> 10	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
03	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 <input type="radio"/> 10	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
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05	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 <input type="radio"/> 10	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
06	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 <input type="radio"/> 10	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
07	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 <input type="radio"/> 10	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
08	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 <input type="radio"/> 10	<input type="radio"/> 1 Yes <input type="radio"/> 2 No



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Section 4 - Employment

To be completed by persons employed during the week ending Oct. 6,

EMPLOYEE #	4.1	4.2	4.3	4.4	4.5						
	Did ... have more than one job including business or contract work in the Cayman Islands during the week ending Oct. 6, 2007? Yes1 No2	How many years have ... been in the <u>main</u> job? Put 97 for less than 6 months Put "1" for 6 months to 1 year Put 99 for not stated	How many hours did ... work in his / her job(s) during week ending Oct. 6, 2007 ? If Total > or = 30, Go to 4.6	What was the <u>main</u> reason why WORKED LESS THAN 30 HOURS in your / his / her job(s) during the week ending Oct 6, 2007? Holiday / Vacation 1 Maternity / Paternity Leave ... 2 Illness / Injury 3 Only hours available 4 Job ended in ref. week 5 Student / In Training 6 Home / Family duties 7 No work available 8 Other 9	Did seek AND was he /she available to work additional hours during week ending Oct. 6, 2007? Yes1 No2						
01	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="text"/> <input type="text"/>	<table border="0"> <tr> <td>Main Job</td> <td>Other Job(s)</td> <td>Total</td> </tr> <tr> <td><input type="text"/><input type="text"/></td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/><input type="text"/></td> </tr> </table> <p>If Total > or = 30, GOTO 4.6</p>	Main Job	Other Job(s)	Total	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
Main Job	Other Job(s)	Total									
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Main Job	Other Job(s)	Total									
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04	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="text"/> <input type="text"/>	<table border="0"> <tr> <td>Main Job</td> <td>Other Job(s)</td> <td>Total</td> </tr> <tr> <td><input type="text"/><input type="text"/></td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/><input type="text"/></td> </tr> </table> <p>If Total > or = 30, GOTO 4.6</p>	Main Job	Other Job(s)	Total	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
Main Job	Other Job(s)	Total									
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Main Job	Other Job(s)	Total									
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Main Job	Other Job(s)	Total									
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07	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="text"/> <input type="text"/>	<table border="0"> <tr> <td>Main Job</td> <td>Other Job(s)</td> <td>Total</td> </tr> <tr> <td><input type="text"/><input type="text"/></td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/><input type="text"/></td> </tr> </table> <p>If Total > or = 30, GOTO 4.6</p>	Main Job	Other Job(s)	Total	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
Main Job	Other Job(s)	Total									
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>									
08	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="text"/> <input type="text"/>	<table border="0"> <tr> <td>Main Job</td> <td>Other Job(s)</td> <td>Total</td> </tr> <tr> <td><input type="text"/><input type="text"/></td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/><input type="text"/></td> </tr> </table> <p>If Total > or = 30, GOTO 4.6</p>	Main Job	Other Job(s)	Total	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
Main Job	Other Job(s)	Total									
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>									



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Section 4 - Employment cont'd

To be completed by persons employed during the week ending Oct.6, 2007.

P E R S O N #	4.6 What category of worker is ... in his / her main job ?	4.7 How many employees at . . place of work ?	4.8 What is . . . occupation in his/ her main job ?	4.9 What kind of business is carried on at . . . 's main job?
	Employee (work for someone) - E 1 Self-employed, with NO employees SE 2 Self-employed, with employees SEE 3 Unpaid family business worker UFW 4	1-10 1 11-24 2 25-49 3 50 + 4	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Probe, get details</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Write kind of business & name of business</div>
01	<input type="radio"/> 1 E <input type="radio"/> 2 SE <input type="radio"/> 3 SEE <input type="radio"/> 4 UFW	<input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4	_____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>	_____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>
02	<input type="radio"/> 1 E <input type="radio"/> 2 SE <input type="radio"/> 3 SEE <input type="radio"/> 4 UFW	<input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4	_____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>	_____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>
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08	<input type="radio"/> 1 E <input type="radio"/> 2 SE <input type="radio"/> 3 SEE <input type="radio"/> 4 UFW	<input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4	_____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>	_____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>



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Section 4 - Employment cont'd

To be completed by persons employed during the week ending Oct.6, 2007.

P E R S O N #	4.10 How much was your / . . . earnings from your/ his/ her MAIN job for September 2007?		4.11 How much was your / . . . earnings from your/ his/ her OTHER job(s) for September 2007?		
	<div style="border: 1px solid black; padding: 5px; background-color: yellow;"> Refer to FLASH CARD for earnings range </div>		<div style="border: 1px solid black; padding: 5px; background-color: yellow;"> Refer to FLASH CARD for earnings range </div>		
	<div style="border: 1px solid black; padding: 5px; background-color: yellow;"> Go to 6.1 </div>				
	01	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5	<input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated <input type="radio"/> 9 Not applicable
	02	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5	<input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated <input type="radio"/> 9 Not applicable
	03	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5	<input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated <input type="radio"/> 9 Not applicable
	04	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5	<input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated <input type="radio"/> 9 Not applicable
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	06	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5	<input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated <input type="radio"/> 9 Not applicable
07	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5	<input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 Not Stated <input type="radio"/> 9 Not applicable	
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Section 5A - Unemployment

For UNEMPLOYED persons who were part of the LABOUR FORCE during week ending Oct. 6, 2007.

PERSON #	5A.1 How long has ... been without work?	5A.2 Have you / ... ever had a job before?	5A.3 What kind of work was ... doing in his/ her last job?
		1 < 3 (months)1 3 < 6 (months)2 6 < 12 (months) ...3 12 + (months)4	Yes1 No2 <div style="border: 1px solid black; padding: 2px; display: inline-block;">If NO, Go to 5A.5</div>
01	<input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>
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04	<input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>
05	<input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>
06	<input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>
07	<input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>
08	<input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>



Section 5A - Unemployment cont'd

For UNEMPLOYED persons who were a part of the LABOUR FORCE during week ending Oct. 6, 2007.

PERSON #	5A.4 What kind of business was carried on where . . . last worked?	5A.5 What was main means of financial support during the week ending Oct. 6, 2007?	5A.6 What kind of work was . . . looking for ?
	<p>Write kind of business & name of business</p>	Parents 1 Spouse 2 Other relatives & friends 3 Savings / investments 4 Social Services 5 Pension / veteran / seaman 6 Other 7	<p>Probe , get details</p> <p>Go to 6.1</p>
01	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>
02	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>
03	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>
04	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>
05	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>
06	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>
07	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>
08	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div>



Section 5B - Unemployment

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For persons NOT EMPLOYED i.e. NOT IN THE LABOUR FORCE during week ending Oct. 6, 2007.

PERSON #	5B.1 What was the <u>main</u> reason was not seeking work and/or not being available for work during the past 4 weeks ?			5B.2 What was <u>main</u> means of financial support during the week ending Oct. 6, 2007 ?		
	1	2	3	1	2	3
	In School 1	Home / family duties 2	Retired / Elderly 3	Parents 1	Spouse / Partner 2	Other relatives & friends 3
	Infirmity / Disabled 4	Temporary Illness 5	Did not want work 6	Savings / investments 4	Social Services 5	Pension / veteran / seaman 6
	Not eligible or waiting for work permit / application approval 7	Pregnancy 8	Caring for Someone 9	Other 7		
	Don't Know 10	Other 11				
01	<input type="radio"/> 1	<input type="radio"/> 5	<input type="radio"/> 9	<input type="radio"/> 1	<input type="radio"/> 4	<input type="radio"/> 7
	<input type="radio"/> 2	<input type="radio"/> 6	<input type="radio"/> 10	<input type="radio"/> 2	<input type="radio"/> 5	
	<input type="radio"/> 3	<input type="radio"/> 7	<input type="radio"/> 11	<input type="radio"/> 3	<input type="radio"/> 6	
	<input type="radio"/> 4	<input type="radio"/> 8				
02	<input type="radio"/> 1	<input type="radio"/> 5	<input type="radio"/> 9	<input type="radio"/> 1	<input type="radio"/> 4	<input type="radio"/> 7
	<input type="radio"/> 2	<input type="radio"/> 6	<input type="radio"/> 10	<input type="radio"/> 2	<input type="radio"/> 5	
	<input type="radio"/> 3	<input type="radio"/> 7	<input type="radio"/> 11	<input type="radio"/> 3	<input type="radio"/> 6	
	<input type="radio"/> 4	<input type="radio"/> 8				
03	<input type="radio"/> 1	<input type="radio"/> 5	<input type="radio"/> 9	<input type="radio"/> 1	<input type="radio"/> 4	<input type="radio"/> 7
	<input type="radio"/> 2	<input type="radio"/> 6	<input type="radio"/> 10	<input type="radio"/> 2	<input type="radio"/> 5	
	<input type="radio"/> 3	<input type="radio"/> 7	<input type="radio"/> 11	<input type="radio"/> 3	<input type="radio"/> 6	
	<input type="radio"/> 4	<input type="radio"/> 8				
04	<input type="radio"/> 1	<input type="radio"/> 5	<input type="radio"/> 9	<input type="radio"/> 1	<input type="radio"/> 4	<input type="radio"/> 7
	<input type="radio"/> 2	<input type="radio"/> 6	<input type="radio"/> 10	<input type="radio"/> 2	<input type="radio"/> 5	
	<input type="radio"/> 3	<input type="radio"/> 7	<input type="radio"/> 11	<input type="radio"/> 3	<input type="radio"/> 6	
	<input type="radio"/> 4	<input type="radio"/> 8				
05	<input type="radio"/> 1	<input type="radio"/> 5	<input type="radio"/> 9	<input type="radio"/> 1	<input type="radio"/> 4	<input type="radio"/> 7
	<input type="radio"/> 2	<input type="radio"/> 6	<input type="radio"/> 10	<input type="radio"/> 2	<input type="radio"/> 5	
	<input type="radio"/> 3	<input type="radio"/> 7	<input type="radio"/> 11	<input type="radio"/> 3	<input type="radio"/> 6	
	<input type="radio"/> 4	<input type="radio"/> 8				
06	<input type="radio"/> 1	<input type="radio"/> 5	<input type="radio"/> 9	<input type="radio"/> 1	<input type="radio"/> 4	<input type="radio"/> 7
	<input type="radio"/> 2	<input type="radio"/> 6	<input type="radio"/> 10	<input type="radio"/> 2	<input type="radio"/> 5	
	<input type="radio"/> 3	<input type="radio"/> 7	<input type="radio"/> 11	<input type="radio"/> 3	<input type="radio"/> 6	
	<input type="radio"/> 4	<input type="radio"/> 8				
07	<input type="radio"/> 1	<input type="radio"/> 5	<input type="radio"/> 9	<input type="radio"/> 1	<input type="radio"/> 4	<input type="radio"/> 7
	<input type="radio"/> 2	<input type="radio"/> 6	<input type="radio"/> 10	<input type="radio"/> 2	<input type="radio"/> 5	
	<input type="radio"/> 3	<input type="radio"/> 7	<input type="radio"/> 11	<input type="radio"/> 3	<input type="radio"/> 6	
	<input type="radio"/> 4	<input type="radio"/> 8				
08	<input type="radio"/> 1	<input type="radio"/> 5	<input type="radio"/> 9	<input type="radio"/> 1	<input type="radio"/> 4	<input type="radio"/> 7
	<input type="radio"/> 2	<input type="radio"/> 6	<input type="radio"/> 10	<input type="radio"/> 2	<input type="radio"/> 5	
	<input type="radio"/> 3	<input type="radio"/> 7	<input type="radio"/> 11	<input type="radio"/> 3	<input type="radio"/> 6	
	<input type="radio"/> 4	<input type="radio"/> 8				





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Section 6 - Expenses & Remittances

To be answered by ALL

P E R S O N #	6.1 How many personal trips have you/ made abroad from the Cayman Islands aduring the last 12 months ?	6.2 What is the TOTAL Estimated cost in CI\$ of personal travel abroad (not including money spent on gifts & personal effects abroad) during the last 12 months?	6.3 What is the TOTAL estimated cost in CI\$ (spent abroad) for gifts & personal effects BROUGHT TO CAYMAN during the last 12 months ?	6.4 What is the TOTAL estimated cost in CI\$ for gifts & personal effects purchased in Cayman and taken ABROAD during the last 12 months?	6.5 During the past 12 months, did . . . SEND any money abroad? Yes1 No2
	If NONE, write zero (0) & GO TO 6.5				If NO, Go to 6.8
01	[][]	[][], [][][][]	[][], [][][][]	[][], [][][][]	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
02	[][]	[][], [][][][]	[][], [][][][]	[][], [][][][]	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
03	[][]	[][], [][][][]	[][], [][][][]	[][], [][][][]	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
04	[][]	[][], [][][][]	[][], [][][][]	[][], [][][][]	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
05	[][]	[][], [][][][]	[][], [][][][]	[][], [][][][]	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
06	[][]	[][], [][][][]	[][], [][][][]	[][], [][][][]	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
07	[][]	[][], [][][][]	[][], [][][][]	[][], [][][][]	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
08	[][]	[][], [][][][]	[][], [][][][]	[][], [][][][]	<input type="radio"/> 1 Yes <input type="radio"/> 2 No



2004 1816



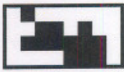
13438

Section 6 - Expenses & Remittances cont'd**To be answered by ALL**

P E R S O N #	6.6 What is the TOTAL estimated amount (in CI\$) . . . SENT abroad during the past 12 months? under \$6,000 1 \$6,000 - \$11,999 2 \$12,000 - \$23,999 3 \$24,000 - \$41,999 4 \$42,000 + 5	6.7 How was this money SENT abroad? Wire transfer / Cable 1 Western Union/Money Express etc 2 Draft / money order 3 Post Office 4 Sent via an individual 5	6.8 During the past 12 months, did . . . RECEIVE any money FROM abroad? Yes 1 No 2	6.9 What is the TOTAL estimated amount (in CI\$) received FROM abroad during the past 12 months? under \$6,000 1 \$6,000 - \$11,999 2 \$12,000 - \$23,999 3 \$24,000 - \$41,999 4 \$42,000 + 5	6.10 How was this money RECEIVED FROM ABROAD? Wire transfer / Cable 1 Western Union / Money Express etc 2 Draft / money order 3 Post Office 4 Sent via an individual 5
		Multiple answers allowed	If NO, & below 15 years, END INTERVIEW		Multiple answers allowed
01	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3
02	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3
03	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3
04	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3
05	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3
06	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3
07	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3
08	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3	<input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3



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Section 7 - Small Business

To be completed for those age 15 and older.

P E R S O N #	7.1 Do you own or operate a small business ? Yes1 No2	7.2 What is the main activity of your business?	7.3 How long (in years OR months) has this business been in operation?	7.4 From where does the business operate ? At Home 1 On a construction site 2 A fixed factory 3 A fixed office 4 A fixed shop 5 In a market place 6 Roadside 7 As a mobile vendor 8 On an empty / private lot .. 9 Other 10	
	01	<input type="radio"/> 1 Yes <input type="radio"/> 2 No <div style="border: 1px solid black; padding: 2px; width: fit-content;">If NO & NOT head of household, END INTERVIEW</div> <div style="border: 1px solid black; padding: 2px; width: fit-content;">If NO & head of household Go to 8.1</div>	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin-left: auto; margin-right: auto;"></div>	<div style="border: 1px solid black; padding: 2px; width: fit-content;">Enter EITHER years or months</div> <div style="border: 1px solid black; padding: 2px; width: fit-content;">Put 99 in years for not stated</div>	
	02	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin-left: auto; margin-right: auto;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Years <div style="border: 1px solid black; padding: 2px; width: 20px; text-align: center; margin: 0 auto;">OR</div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Months	<input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8
	03	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin-left: auto; margin-right: auto;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Years <div style="border: 1px solid black; padding: 2px; width: 20px; text-align: center; margin: 0 auto;">OR</div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Months	<input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8
	04	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin-left: auto; margin-right: auto;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Years <div style="border: 1px solid black; padding: 2px; width: 20px; text-align: center; margin: 0 auto;">OR</div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Months	<input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8
	05	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin-left: auto; margin-right: auto;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Years <div style="border: 1px solid black; padding: 2px; width: 20px; text-align: center; margin: 0 auto;">OR</div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Months	<input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8
	06	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin-left: auto; margin-right: auto;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Years <div style="border: 1px solid black; padding: 2px; width: 20px; text-align: center; margin: 0 auto;">OR</div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Months	<input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8
	07	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin-left: auto; margin-right: auto;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Years <div style="border: 1px solid black; padding: 2px; width: 20px; text-align: center; margin: 0 auto;">OR</div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Months	<input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8
	08	<input type="radio"/> 1 Yes <input type="radio"/> 2 No	<hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin-left: auto; margin-right: auto;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Years <div style="border: 1px solid black; padding: 2px; width: 20px; text-align: center; margin: 0 auto;">OR</div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> Months	<input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8



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Section 7 - Small Business

For ALL SELF EMPLOYED PERSONS

P E R S O N #	<p>7.5 What was the total estimated expenditure (in C\$) in the past 12 months for your / ... business?</p> <p>0 - 24001 2401 - 48002 4801 - 60003 6001 +4</p>	<p>7.6 What was the estimated total income (in C\$) in the past 12 months earned by your / .. business?</p> <p>0 - 24001 2401 - 48002 4801 - 60003 6001 +4</p>	<p>7.7 Did the business undertake work on a sub-contracting basis ?</p> <p>Yes1 No2</p> <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: fit-content;"> <p>If NOT head of household, END INTERVIEW</p> </div>	
	01	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
	02	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
	03	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
	04	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
	05	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
	06	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
	07	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No
	08	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 Yes <input type="radio"/> 2 No





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Section 8 - Dwelling Characteristics

For HEAD OF HOUSEHOLD

QUESTIONS ON THIS PAGE TO BE ASKED LAST IN THE INTERVIEW.

Report answers for the dwelling that your household occupied on June 30, 2007

8.1 Did at least ONE member of this household live in Cayman Islands as at June 30, 2007 ?

- 1 Yes
- 2 No

If NO, End INTERVIEW

8.2 The dwelling you occupied on or before June 30, 2007 was . . .

Select ONLY ONE

- 1 Detached house
- 2 Part of a private house
- 3 Apartment
- 4 Condominium / townhouse
- 5 One-room / studio
- 6 Combined business / dwelling
- 7 Trailer Home
- 8 Boat
- 9 Other (give details) _____

8.3 Is this accommodation . . .

Read & Select ONLY ONE

- 1 Owned with mortgage
- 2 Owned without mortgage
- 3 Rented - Furnished (GO TO Q 8.5a)
- 4 Rented - Unfurnished (GO TO Q 8.5a)
- 5 Leased to own (GO TO Q 8.5a)
- 6 Provided rent-free
- 7 Other (specify) _____

8.4 How much do you think it would have cost to rent (not including utilities) a similar accommodation per month ? . . .

CIS ,

8.5.a How much rent do you / does . . . pay for this accommodation per month?

CIS ,

8.5.b If rent includes utilities and /or cable, please specify what is included

- 1 Electricity
- 2 Water
- 3 Cable

Multiple answers allowed

THANK YOU

END OF INTERVIEW



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