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


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

Block No. and Parcel No.
Enumeration Area


Address of Household: $\qquad$

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: $\qquad$


EDITOR/CODER'S NAME:

| O Fully completed | O vacant - not occupied | O temporary short-term rental |
| :--- | :--- | :--- |
| O Partially completed | O Under construction/Derelict | O No contact |
| O Refusal | O Demolished | O Out of scope |
| O Unable to find address | O Temporary second home |  |



RECORD OF VISITS



## RECORD OF VISITS (Cont'd)


1.0 What are the names of all those ( including children) who were members of this household during the week ending October 10, 2009?

Probe for anyone who might be away but who usually lives in this household

LISTING OF HOUSEHOLD MEMBERS

|  | First Name | Surname (optional) |  | First Name |  |  |
| :--- | :--- | :--- | :--- | :--- | :---: | :---: |
| 01 |  | 08 |  |  |  |  |
| 02 |  |  |  |  |  |  |
| 03 |  |  |  |  |  |  |
| 04 |  | 10 |  |  |  |  |
| 05 |  | 12 |  |  |  |  |
| 06 |  | 13 |  |  |  |  |
| 07 |  | 14 |  |  |  |  |

## Section 1- Demographic Characteristics

To be answered by ALL.



## Section 1- Demographic Characteristics (cont'd)

## To be answered by ALL.




## Section 1- Demographic Characteristics <br> (cont'd)

To be answered by ALL.
 Section 2- Educational Characteristics

## To be completed for those age 15 and older.



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## To be completed for those age 15 and older.




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For persons employed during the week ending Oct. 10, 2009.



Section 4 - Employment (cont'd)
For persons employed during the week ending Oct. 10, 2009.


For UNEMPLOYED persons who were part of the LABOUR FORCE during week ending Oct. 10, 2009.



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## Section 6 - Not In The Labour Force




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To be completed for those age 15 and older.

| O | NOTE: Do not include time for which you are being paid. <br> Last week refers to Sunday 4th October to Saturday 10 October, <br> Where activities overlap, please see the manual. |  |  |
| :---: | :---: | :---: | :---: |
| D | 7.1 <br> Last week, how many hours did . . . spend doing UNPAID housework, yard work or home maintenance for members of this household, or others. <br> Some examples include: preparing meals, cleaning, doing laundry, household planning, shopping and cutting the grass. <br> 1.....None <br> 2.....Less than 5 hours <br> 3..... 5 to 14 hours <br> 4..... 15 to 29 hours <br> 5.... 30 to 59 hours <br> $6 . . . .60$ hours or more | 7.2 <br> Last week, how many hours did . . . spend looking after one or more of his/her own children, or the children of others, WITHOUT PAY? <br> Some examples include: bathing or playing with young children, driving children to sports activities or helping them with homework and talking with teens about their problems. <br> 1.....None <br> 2.....Less than 5 hours <br> $3 . . . .5$ to 14 hours <br> 4..... 15 to 29 hours <br> 5.... 30 to 59 hours <br> $6 . . . .60$ hours or more | 7.3 <br> Last week, how many hours did . . . spend providing UNPAID care or assistance to one or more seniors. <br> Some examples include: providing personal care to a senior family member, visiting seniors, talking with them on the telephone, and helping them with shopping, banking or taking medication. <br> 1.....None <br> 2.....Less than 5 hours <br> 3..... 5 to 14 hours <br> 4..... 15 to 29 hours <br> 5..... 30 to 59 hours <br> 6..... 60 hours or more |
| 01 | O $_{1}$ O $_{4}$ <br> O $_{2}$ O $_{5}$ <br> O $_{3}$ O $_{6}$ | O $_{1}$ O $_{4}$ <br> O $_{2}$ O $_{5}$ <br> O $_{3}$ O $_{6}$ | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ |
| 02 | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ |
| 03 | O 1 O 4 <br> $\mathrm{O}_{2}$ ○ 5 <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ |
| 04 | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ |
| 05 | O 1 O4 <br> O 2 O 5 <br> O 3 ○ 6 | O 1 O 4 <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ | O 1 O 4 <br> $O_{2}$ $O_{5}$ <br> $O_{3}$ $O_{6}$ |
| 06 | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ | $\mathrm{O}_{1}$ $\mathrm{O}_{4}$ <br> $\mathrm{O}_{2}$ $\mathrm{O}_{5}$ <br> $\mathrm{O}_{3}$ $\mathrm{O}_{6}$ |



## Section 8 - Expenses \& Remittances

## FOR ALL PERSONS



9.1.a The dwelling you occupied during week ending Oct 10, 2009 was . . .

Select only one

O 1 Detached house
O 2 Apartment
O 3 Condominium/townhouse

O 4 One-room/studio
O 5 Combined business/dwelling
O 6 Other (give details) $\qquad$

9.2 Is this accommodation ... .
O 1 Owned with mortgage
O 2 Owned without mortgage
O 3 Rented - Furnished $\rightarrow$ GO TO 9.4a
O 4 Rented - Unfurnished $\rightarrow$ GO TO 9.4a
O 5 Provided rent-free O 6 Other (specify)
$\qquad$
9.3 How much do you think it would have cost to rent (not including utilities) a similar accommodation per month?
CI\$

$\square$ GO TO 9.5
9.4.a How much rent did you pay for this accommodation last month?

9.4.b Does the rent include any utilities?

## Multiple answers allowed

O 1 Electricity
O 2 Water
O 3 Cable
O 4 No utilities included
9.5 Does this household have the following . . . ?

| 1. Internet at home | O 1 Yes | O 2 No | 5. Telephone - landline (how many) |
| :---: | :---: | :---: | :---: |
| 2. Cable/Satellite | O1 Yes | O 2 No | 6. Cell phones (how many) |
| 3. Air-condition | O 1 Yes | O 2 No | 7. Computers (how many) |
| 4. Housing Insurance | O 1 Yes | O 2 No | 8. Motor Vehicles (how many) |
|  | O 3 Don't know |  |  |

9.6 Have you made changes to your household spending in the past year due to the economic crisis?

O 1 Yes
O 2 No
END INTERVIEW
9.7 For which of the following did you change your spending significantly:

Multiple answers allowed

O 1 Food and non-alcoholic beverages
O 2 Alcoholic beverages and tobacco
O 3 Clothing and footwear
O 4 Housing, water, electricity, gas and other fuels
O 5 Furnishings, household equipment and routine household maintenance O 6 Health

O 7 Transport
O 8 Communication
O 9 Recreation and culture
O 10 Education
O 11 Restaurants and hotels
O 12 Miscellaneous goods and services


COMMENTS
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