

MINISTRY OF PLANNING AND INVESTMENT
GENERAL STATISTICS OFFICE

ALL INFORMATION HEREIN
WILL BE KEPT STRICTLY
CONFIDENTIAL

QUESTIONNAIRE OF LABOUR FORCE AND EMPLOYMENT SURVEY OF 2010

INTERVIEWED RESULTS					IDENTIFICATION	
	DATE OF INTERVIEW	RESULT (*)	HOUR/DAY TO COME BACK	SIGNATURE OF INTERVIEWER	SIGNATURE OF HEAD	PROVINCE/CITY: _____
THE 1 ST	_____	<input type="checkbox"/>	_____	_____	_____	DISTRICT/QUATER: _____
THE 2 ND	_____	<input type="checkbox"/>	_____	_____	_____	COMMUNEWARD: _____
THE 3 RD	_____	<input type="checkbox"/>	_____	_____	_____	ENUMERATION AREA NUMBER: _____
(*) CODE OF RESULT: 1 = COMPLETED 2 = PARTLY COMPLETED 3 = REFUSED/ABSENT/NOT TO BE RESPONDENT/NOBODY TO ANSWER 4 = DWELLING DESTROYED/DWELLING NOT FOUND 5 = OTHER _____ (SPECIFY)						
FULL-NAME OF THE HOUSEHOLD HEAD: _____ HOUSEHOLD NUMBER: _____ NUMBER OF USUAL RESIDENTS IN THE HOUSEHOLD: OF WHICH, NUMBER OF FEMALES: NUMBER OF MALES AGED 15 AND OVER: NUMBER OF FEMALES AGED 15 AND OVER: NUMBER OF EMPLOYED PEOPLE: NUMBER OF UNEMPLOYED PEOPLE: NUMBER OF UNDEREMPLOYED PEOPLE:						
THIS IS THE <input type="checkbox"/> SET OF <input type="checkbox"/> TOTAL SET(S)						

PART 1: HOUSEHOLD QUESTIONNAIRE

QUESTIONS/FILTER	NUMBER 0 1	NUMBER 0 2	NUMBER 0 3	NUMBER 0 4	NUMBER 0 5	NUMBER 0 6
1. Please let me know the full name of each person usually residing in the household, starting with the head of household	<div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div>					
2. What is [NAME]'s relationship to the household's head?	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> H.H HEAD 1 <input type="checkbox"/> SPOUSE..... 2 <input type="checkbox"/> NATURAL CHILD 3 <input type="checkbox"/> PARENTS 4 <input type="checkbox"/> OTHERS..... 5 <input type="checkbox"/> </div> <div style="width: 45%;"> H.H HEAD 1 <input type="checkbox"/> SPOUSE 2 <input type="checkbox"/> NATURAL CHILD 3 <input type="checkbox"/> PARENTS 4 <input type="checkbox"/> OTHERS 5 <input type="checkbox"/> </div> </div>					
3. Is [NAME] male or female?	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> MALE 1 <input type="checkbox"/> FEMALE: 2 <input type="checkbox"/> </div> <div style="width: 45%;"> MALE 1 <input type="checkbox"/> FEMALE: 2 <input type="checkbox"/> </div> </div>					
4. In what solar month and year was [NAME] born?	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> MONTH YEAR NOT STATED YEAR 9998 <input type="checkbox"/> </div> <div style="width: 45%;"> MONTH YEAR NOT STATED YEAR 9998 <input type="checkbox"/> </div> </div>					
5. What is [NAME]'s age as of his/her last birthday? IF AGE IS 95 YEARS OR MORE, WRITE '95'	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> AGE </div> <div style="width: 45%;"> AGE </div> </div>					
6. To what ethnic group does [NAME] belong?	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> KINH 1 <input type="checkbox"/> OTHER ETHNIC GROUP 2 <input type="checkbox"/> NAME OF ETHNIC GROUP </div> <div style="width: 45%;"> KINH 1 <input type="checkbox"/> OTHER ETHNIC GROUP 2 <input type="checkbox"/> NAME OF ETHNIC GROUP </div> </div>					
7. RESPONDENTS FOR INTERVIEWING THE INDIVIDUAL QUESTIONNAIRE (AGED 15 AND OVER)	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> BE RESPONDENT 1 <input type="checkbox"/> NO RESPONDENT 2 <input type="checkbox"/> NEXT PERSON </div> <div style="width: 45%;"> BE RESPONDENT 1 <input type="checkbox"/> NO RESPONDENT 2 <input type="checkbox"/> NEXT PERSON </div> </div>					

HOUSEHOLD NO:...

PART 2: INDIVIDUAL QUESTIONNAIRE

QUESTIONS	NAME AND ORDER NO.					
8. What is the current marital status of [NAME]?		SINGLE 1 CURRENTLY MARRIED 2 WIDOWED 3 DIVORCED/ SEPARATED 4		SINGLE 1 CURRENTLY MARRIED 2 WIDOWED 3 DIVORCED/ SEPARATED 4		SINGLE 1 CURRENTLY MARRIED 2 WIDOWED 3 DIVORCED/ SEPARATED 4
9. What is the highest grade of education/training (regular and unregular) that [NAME] has been attended or graduated? ABBREVIATION: VOC. - VOCATIONAL		NEVER ATTENDED 00 UNDER PRIMARY 01 PRIMARY 02 LOWER SECONDARY 03 SHORT-TERM TRAINING 04 HIGHER SECONDARY 05 TRADE VOC. SCHOOL 06 VOC. SCHOOL 07 TRADE COLLEGE 08 COLLEGE 09 UNIVERSITY AND OVER 10		NEVER ATTENDED 00 UNDER PRIMARY 01 PRIMARY 02 LOWER SECONDARY 03 SHORT-TERM TRAINING 04 HIGHER SECONDARY 05 TRADE VOC. SCHOOL 06 VOC. SCHOOL 07 TRADE COLLEGE 08 COLLEGE 09 UNIVERSITY AND OVER 10		NEVER ATTENDED 00 UNDER PRIMARY 01 PRIMARY 02 LOWER SECONDARY 03 SHORT-TERM TRAINING 04 HIGHER SECONDARY 05 TRADE VOC. SCHOOL 06 VOC. SCHOOL 07 TRADE COLLEGE 08 COLLEGE 09 UNIVERSITY AND OVER 10
Now, I would like to ask some questions about activities related to work/job during the last 7 days						
10. During the last 7 days, did [NAME] do any work to make profit?		YES 1 NO 2		YES 1 NO 2		YES 1 NO 2
11. Although [NAME] did not work during the last 7 days, does [NAME] still receive wages, salaries or profits from his/her work or business?		YES 1 NO 2		YES 1 NO 2		YES 1 NO 2

QUESTIONS	NAME AND ORDER NO.				
12. Did [NAME] have a job and will return to work during the next 30 days?		YES 1 <input type="checkbox"/> NO 2 <input type="checkbox"/> → Q29			YES 1 <input type="checkbox"/> NO 2 <input type="checkbox"/> → Q29
13. How long has [NAME] been temporarily absent from work?		UNDER 1 MONTH 1 <input type="checkbox"/> 1 TO UNDER 2 MONTHS 2 <input type="checkbox"/> 2 MONTHS AND OVER 3 <input type="checkbox"/> → Q14b			UNDER 1 MONTH 1 <input type="checkbox"/> 1 TO UNDER 2 MONTHS 2 <input type="checkbox"/> 2 MONTHS AND OVER 3 <input type="checkbox"/> → Q14b
14a. During the last 7 days, what was the main type of work [NAME] did and what position did [NAME] hold for the mentioned work (if available)?					
14b. What was the main type of work [NAME] did before having break temporarily from work?					
15. With above-mentioned work, is [NAME] the employer, own-account worker, unpaid family worker, wage worker, member of cooperative or apprentice?		EMPLOYER 1 <input type="checkbox"/> OWN-ACCOUNT WORKER 2 <input type="checkbox"/> UNPAID FAMILY WORKER 3 <input type="checkbox"/> WAGE WORKER 4 <input type="checkbox"/> MEMBER OF COOPERATIVE 5 <input type="checkbox"/> APPRENTICE 6 <input type="checkbox"/>			EMPLOYER 1 <input type="checkbox"/> OWN-ACCOUNT WORKER 2 <input type="checkbox"/> UNPAID FAMILY WORKER 3 <input type="checkbox"/> WAGE WORKER 4 <input type="checkbox"/> MEMBER OF COOPERATIVE 5 <input type="checkbox"/> APPRENTICE 6 <input type="checkbox"/>
16. Does the establishment where [NAME] did the above-mentioned work belong to individual, household of individual production and trade, collective, private, state or foreign investment economic sector?		A-F-F HOUSEHOLD/INDIVIDUAL 1 <input type="checkbox"/> HH OF IN. PRO. TRADE 2 <input type="checkbox"/> COLLECTIVE 3 <input type="checkbox"/> PRIVATE 4 <input type="checkbox"/> STATE 5 <input type="checkbox"/> FOREIGN INVESTMENT 6 <input type="checkbox"/>			A-F-F HOUSEHOLD/INDIVIDUAL 1 <input type="checkbox"/> HH OF IN. PRO. TRADE 2 <input type="checkbox"/> COLLECTIVE 3 <input type="checkbox"/> PRIVATE 4 <input type="checkbox"/> STATE 5 <input type="checkbox"/> FOREIGN INVESTMENT 6 <input type="checkbox"/>

HOUSEHOLD NO:...

--	--	--

QUESTIONS	NAME AND ORDER NO.				
17. What is the name of the establishment where [NAME] did the above-mentioned work and the name of its direct supervision organization (IF AVAILABLE)?					
18. What are the main responsibility/product of the establishment where [NAME] did the above-mentioned work?					
19. How many persons usually work in the establishment where [NAME] worked?					
20. How long has [NAME] worked this job?					
21. Apart from the above-mentioned main job, did [NAME] have any other job, work to make income during the last 7 days?					
22. How many hours did [NAME] actually work, including main and secondary jobs during last 7 days?					

NAME AND ORDER NO.									
QUESTIONS									
23. CHECK Q22: IF Q22 < 35 HOURS → Q24; IF NO → Q27									
24. Did [NAME] want to work overtime?	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q27	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q27	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q27	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q27	N° OF HOURS/WEEK				
25. If suitable work is available, is [NAME] available to work immediately?	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q27	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q27	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q27	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q27	N° OF HOURS/WEEK				
26. How many hours overtime per week do [NAME] want to work?	N° OF HOURS/WEEK		N° OF HOURS/WEEK		N° OF HOURS/WEEK				
27. CHECK Q 15: IF Q15 = 4 → Q28; IF NO → Q40									
28. What is the average monthly salary/wage made by [NAME] before paying taxes or deduction?	Q40 ← (THOUSAND VND)		Q40 ← (THOUSAND VND)		Q40 ← (THOUSAND VND)		Q40 ← (THOUSAND VND)		
29. During the last 30 days, did [NAME] actively look for any work?	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q32	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q32	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q32	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q32	YES.....1 <input type="checkbox"/> NO.....2 <input type="checkbox"/> → Q32				
30. During the last 30 days, how did [NAME] seek work or apply for a job?	APPLIED FOR JOBS1 <input type="checkbox"/> CONTACTED/CHECKED AT PUBLIC EMPLOYMENT SERVICE.....2 <input type="checkbox"/> VIA FRIENDS AND RELATIVES.....3 <input type="checkbox"/> PLACED ADVERTISEMENTS4 <input type="checkbox"/> LOOKED AT ADVERTISEMENTS OF RECRUITMENT5 <input type="checkbox"/> PREPARATION FOR SETTING UP A BUSINESS6 <input type="checkbox"/> OTHERS7 <input type="checkbox"/> (SPECIFY)	APPLIED FOR JOBS1 <input type="checkbox"/> CONTACTED/CHECKED AT PUBLIC EMPLOYMENT SERVICE2 <input type="checkbox"/> VIA FRIENDS AND RELATIVES.....3 <input type="checkbox"/> PLACED ADVERTISEMENTS4 <input type="checkbox"/> LOOKED AT ADVERTISEMENTS OF RECRUITMENT5 <input type="checkbox"/> PREPARATION FOR SETTING UP A BUSINESS6 <input type="checkbox"/> OTHERS7 <input type="checkbox"/> (SPECIFY)	APPLIED FOR JOBS1 <input type="checkbox"/> CONTACTED/CHECKED AT PUBLIC EMPLOYMENT SERVICE2 <input type="checkbox"/> VIA FRIENDS AND RELATIVES.....3 <input type="checkbox"/> PLACED ADVERTISEMENTS4 <input type="checkbox"/> LOOKED AT ADVERTISEMENTS OF RECRUITMENT5 <input type="checkbox"/> PREPARATION FOR SETTING UP A BUSINESS6 <input type="checkbox"/> OTHERS7 <input type="checkbox"/> (SPECIFY)	APPLIED FOR JOBS1 <input type="checkbox"/> CONTACTED/CHECKED AT PUBLIC EMPLOYMENT SERVICE2 <input type="checkbox"/> VIA FRIENDS AND RELATIVES.....3 <input type="checkbox"/> PLACED ADVERTISEMENTS4 <input type="checkbox"/> LOOKED AT ADVERTISEMENTS OF RECRUITMENT5 <input type="checkbox"/> PREPARATION FOR SETTING UP A BUSINESS6 <input type="checkbox"/> OTHERS7 <input type="checkbox"/> (SPECIFY)	APPLIED FOR JOBS1 <input type="checkbox"/> CONTACTED/CHECKED AT PUBLIC EMPLOYMENT SERVICE2 <input type="checkbox"/> VIA FRIENDS AND RELATIVES.....3 <input type="checkbox"/> PLACED ADVERTISEMENTS4 <input type="checkbox"/> LOOKED AT ADVERTISEMENTS OF RECRUITMENT5 <input type="checkbox"/> PREPARATION FOR SETTING UP A BUSINESS6 <input type="checkbox"/> OTHERS7 <input type="checkbox"/> (SPECIFY)				

HOUSEHOLD NO: ...

--	--	--

QUESTIONS	NAME AND ORDER NO.				
31. When did [NAME] start to seek for above work?		MONTH	YEAR	MONTH	YEAR
32. During the last 7 days, would [NAME] be available for work if you have found a work?		YES 1	NO 2	YES 1	NO 2
33. CHECK Q29 AND Q32: IF Q29 = 1 AND Q32 = 1 → Q36; IF NO → Q34					
34a. IF Q29 = 2: What is the main reason [NAME] did not look for work during the last 30 days?		NO SUITABLE WORK/ DON'T KNOW WHERE 1	WAIT FOR JOB/ SEASON 2	ILLNESS/PERSONAL MATTER 3	BAD WEATHER 4
		ATTENDING SCHOOL 5	HOUSEWORK 6	DISABLED/TOO YOUNG/TOO OLD .. 7	NOT WILLING TO WORK 8
		OTHER 9	(SPECIFY)		
34b. IF Q32 = 2: What is the main reason [NAME] was not available for work immediately?		NO SUITABLE WORK/ DON'T KNOW WHERE 1	WAIT FOR JOB/ SEASON 2	ILLNESS/PERSONAL MATTER 3	BAD WEATHER 4
		ATTENDING SCHOOL 5	HOUSEWORK 6	DISABLED/TOO YOUNG/TOO OLD .. 7	NOT WILLING TO WORK 8
		OTHER 9	(SPECIFY)		
REMARK: Q29 = 2 AND Q32 = 2, ASK Q34a					
35. What is the main reason [NAME] did not work during the last 7 days?		STUDENT/PUPIL 1	HOUSEWORK 2	SICKNESS/DISABILITY 3	TOO YOUNG/OLD 4
		OTHER 5	(SPECIFY)		
36. Has [NAME] ever worked yet?		YES 1	NO 2	YES 1	NO 2
					→ Q40

QUESTIONS	NAME AND ORDER NO.				
37. When (solar calendar's month and year) did [NAME] leave previous work/job					<div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> MONTH..... <div> <div></div> <div></div> </div> YEAR.....
38. CHECK Q37: IF YEAR ≥ 2008 → Q39; IF NO → Q40					
39. Why did [NAME] leave the last job?					<div> <div></div> <div></div> </div> WORKFORCE CUT DOWN 1 <div> <div></div> <div></div> </div> DISSOLUTION/RESTRUCTURE. 2 <div> <div></div> <div></div> </div> CLOSE DOWN OF IND ENTER/ <div> <div></div> <div></div> </div> LTD CO/HH OF TRADE 3 <div> <div></div> <div></div> </div> DISMISSAL 4 <div> <div></div> <div></div> </div> END OF CONTRACT 5 <div> <div></div> <div></div> </div> RESIGNATION/LOW INCOME 6 <div> <div></div> <div></div> </div> LOOSE FARMING LAND 7 <div> <div></div> <div></div> </div> OTHER 8 (SPECIFY)
40. CHECK Q14 HAS INFORMATION, WRITE THE CROSS (X) ON THE BOX '1' (EMPLOYED)					<div> <div></div> <div></div> </div> EMPLOYED 1 <div> <div></div> <div></div> </div> UNEMPLOYED 2 <div> <div></div> <div></div> </div> UNDER-EMPLOYED 3 <div> <div></div> <div></div> </div> DISCOURAGED-WORKER 4
CHECK: Q29 = 1 AND Q32 = 1, OR Q34 = 2/3/4, WRITE THE CROSS (X) ON THE BOX '2' (UNEMPLOYED)					<div> <div></div> <div></div> </div> EMPLOYED 1 <div> <div></div> <div></div> </div> UNEMPLOYED 2 <div> <div></div> <div></div> </div> UNDER-EMPLOYED 3 <div> <div></div> <div></div> </div> DISCOURAGED-WORKER 4
CHECK: Q24 = 1 AND Q25 = 1, WRITE THE CROSS (X) ON THE BOX '3' (UNDER-EMPLOYED)					<div> <div></div> <div></div> </div> EMPLOYED 1 <div> <div></div> <div></div> </div> UNEMPLOYED 2 <div> <div></div> <div></div> </div> UNDER-EMPLOYED 3 <div> <div></div> <div></div> </div> DISCOURAGED-WORKER 4
CHECK: Q34 = 1, WRITE THE CROSS (X) ON THE BOX '4' (DISCOURAGED-WORKER)					<div> <div></div> <div></div> </div> EMPLOYED 1 <div> <div></div> <div></div> </div> UNEMPLOYED 2 <div> <div></div> <div></div> </div> UNDER-EMPLOYED 3 <div> <div></div> <div></div> </div> DISCOURAGED-WORKER 4
41. CHECK Q7: IF THERE ARE NO RESPONDENTS FOR INDIVIDUAL QUESTIONNAIRE INTERVIEW, END INTERVIEW AND COME BACK TO COMPLETE THE COVER PAGE					

MINISTRY OF PLANNING AND INVESTMENT
GENERAL STATISTICS OFFICE

ALL INFORMATION HEREIN
WILL BE KEPT STRICTLY
CONFIDENTIAL

QUESTIONNAIRE OF LABOUR FORCE AND EMPLOYMENT SURVEY OF 2010 (Period 2)

INTERVIEWED RESULTS					IDENTIFICATION	
DATE OF INTERVIEW	RESULT (*)	HOUR/DAY TO COME BACK	SIGNATURE OF INTERVIEWER	SIGNATURE OF HEAD		
THE 1 ST	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PROVINCE/CITY: <input type="text"/>	
THE 2 ND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DISTRICT/QUATER: <input type="text"/>	
THE 3 RD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	COMMUNE/WARD: <input type="text"/>	
					ENUMERATION AREA NUMBER: <input type="text"/>	
					ENUMERATION AREA NAME: <input type="text"/>	
					HOUSEHOLD NUMBER: <input type="text"/>	
					FULL-NAME OF THE HOUSEHOLD HEAD: <input type="text"/>	
					NUMBER OF USUAL RESIDENTS IN THE HOUSEHOLD: <input type="text"/>	
					OF WHICH, NUMBER OF FEMALES: <input type="text"/>	
					NUMBER OF MALES AGED 15 AND OVER: <input type="text"/>	
					NUMBER OF FEMALES AGED 15 AND OVER: <input type="text"/>	
					NUMBER OF EMPLOYED PEOPLE: <input type="text"/>	
					NUMBER OF UNEMPLOYED PEOPLE: <input type="text"/>	
					NUMBER OF UNDER-EMPLOYED PEOPLE: <input type="text"/>	

(*) CODE OF RESULT:
1 = COMPLETED
2 = PARTLY COMPLETED
3 = REFUSED/ABSENT/NOT TO BE RESPONDENT/NOBODY TO ANSWER
4 = DWELLING DESTROYED/DWELLING NOT FOUND
5 = OTHER _____ (SPECIFY)

THIS IS THE ☐ SET OF ☐ TOTAL SET(S)

PART 1: HOUSEHOLD QUESTIONNAIRE

QUESTIONS/FILTER	NUMBER 0 1	NUMBER 0 2	NUMBER 0 3	NUMBER 0 4	NUMBER 0 5	NUMBER 0 6
1. Please let me know the full name of each person usually residing in the household, starting with the head of household	_____	_____	_____	_____	_____	_____
2. What is [NAME]'s relationship to the household's head?	H.H HEAD 1 <input type="checkbox"/> SPOUSE 2 <input type="checkbox"/> NATURAL CHILD 3 <input type="checkbox"/> PARENTS 4 <input type="checkbox"/> OTHERS 5 <input type="checkbox"/>	H.H HEAD 1 <input type="checkbox"/> SPOUSE 2 <input type="checkbox"/> NATURAL CHILD 3 <input type="checkbox"/> PARENTS 4 <input type="checkbox"/> OTHERS 5 <input type="checkbox"/>	H.H HEAD 1 <input type="checkbox"/> SPOUSE 2 <input type="checkbox"/> NATURAL CHILD 3 <input type="checkbox"/> PARENTS 4 <input type="checkbox"/> OTHERS 5 <input type="checkbox"/>	H.H HEAD 1 <input type="checkbox"/> SPOUSE 2 <input type="checkbox"/> NATURAL CHILD 3 <input type="checkbox"/> PARENTS 4 <input type="checkbox"/> OTHERS 5 <input type="checkbox"/>	H.H HEAD 1 <input type="checkbox"/> SPOUSE 2 <input type="checkbox"/> NATURAL CHILD 3 <input type="checkbox"/> PARENTS 4 <input type="checkbox"/> OTHERS 5 <input type="checkbox"/>	H.H HEAD 1 <input type="checkbox"/> SPOUSE 2 <input type="checkbox"/> NATURAL CHILD 3 <input type="checkbox"/> PARENTS 4 <input type="checkbox"/> OTHERS 5 <input type="checkbox"/>
3. Is [NAME] male or female?	MALE 1 <input type="checkbox"/> FEMALE: 2 <input type="checkbox"/>	MALE 1 <input type="checkbox"/> FEMALE: 2 <input type="checkbox"/>	MALE 1 <input type="checkbox"/> FEMALE: 2 <input type="checkbox"/>	MALE 1 <input type="checkbox"/> FEMALE: 2 <input type="checkbox"/>	MALE 1 <input type="checkbox"/> FEMALE: 2 <input type="checkbox"/>	MALE 1 <input type="checkbox"/> FEMALE: 2 <input type="checkbox"/>
4. In what solar month and year was [NAME] born?	MONTH <input type="text"/> YEAR <input type="text"/> Q6 <input type="text"/> NOT STATED YEAR 9998 <input type="text"/>	MONTH <input type="text"/> YEAR <input type="text"/> Q6 <input type="text"/> NOT STATED YEAR 9998 <input type="text"/>	MONTH <input type="text"/> YEAR <input type="text"/> Q6 <input type="text"/> NOT STATED YEAR 9998 <input type="text"/>	MONTH <input type="text"/> YEAR <input type="text"/> Q6 <input type="text"/> NOT STATED YEAR 9998 <input type="text"/>	MONTH <input type="text"/> YEAR <input type="text"/> Q6 <input type="text"/> NOT STATED YEAR 9998 <input type="text"/>	MONTH <input type="text"/> YEAR <input type="text"/> Q6 <input type="text"/> NOT STATED YEAR 9998 <input type="text"/>
5. What is [NAME]'s age as of his/her last birthday? IF AGE IS 95 YEARS OR MORE, WRITE '95'	AGE <input type="text"/>	AGE <input type="text"/>	AGE <input type="text"/>	AGE <input type="text"/>	AGE <input type="text"/>	AGE <input type="text"/>
6. To what ethnic group does [NAME] belong?	KINH 1 <input type="checkbox"/> OTHER ETHNIC GROUP 2 <input type="checkbox"/> NAME OF ETHNIC GROUP <input type="text"/>	KINH 1 <input type="checkbox"/> OTHER ETHNIC GROUP 2 <input type="checkbox"/> NAME OF ETHNIC GROUP <input type="text"/>	KINH 1 <input type="checkbox"/> OTHER ETHNIC GROUP 2 <input type="checkbox"/> NAME OF ETHNIC GROUP <input type="text"/>	KINH 1 <input type="checkbox"/> OTHER ETHNIC GROUP 2 <input type="checkbox"/> NAME OF ETHNIC GROUP <input type="text"/>	KINH 1 <input type="checkbox"/> OTHER ETHNIC GROUP 2 <input type="checkbox"/> NAME OF ETHNIC GROUP <input type="text"/>	KINH 1 <input type="checkbox"/> OTHER ETHNIC GROUP 2 <input type="checkbox"/> NAME OF ETHNIC GROUP <input type="text"/>
7. RESPONDENTS FOR INTERVIEWING THE INDIVIDUAL QUESTIONNAIRE (AGED 15 AND OVER)	BE RESPONDENT 1 <input type="checkbox"/> NO RESPONDENT 2 <input type="checkbox"/> NEXT PERSON <input type="text"/>	BE RESPONDENT 1 <input type="checkbox"/> NO RESPONDENT 2 <input type="checkbox"/> NEXT PERSON <input type="text"/>	BE RESPONDENT 1 <input type="checkbox"/> NO RESPONDENT 2 <input type="checkbox"/> NEXT PERSON <input type="text"/>	BE RESPONDENT 1 <input type="checkbox"/> NO RESPONDENT 2 <input type="checkbox"/> NEXT PERSON <input type="text"/>	BE RESPONDENT 1 <input type="checkbox"/> NO RESPONDENT 2 <input type="checkbox"/> NEXT PERSON <input type="text"/>	BE RESPONDENT 1 <input type="checkbox"/> NO RESPONDENT 2 <input type="checkbox"/> NEXT PERSON <input type="text"/>

HOUSEHOLD NO:...

PART 2: INDIVIDUAL QUESTIONNAIRE

QUESTIONS	NAME AND ORDER NO.				
8. What is the current marital status of [NAME]?		SINGLE1 CURRENTLY MARRIED2 WIDOWED3 DIVORCED/ SEPARATED4	SINGLE1 CURRENTLY MARRIED2 WIDOWED3 DIVORCED/ SEPARATED4	SINGLE1 CURRENTLY MARRIED2 WIDOWED3 DIVORCED/ SEPARATED4	SINGLE1 CURRENTLY MARRIED2 WIDOWED3 DIVORCED/ SEPARATED4
9. What is the highest grade of education/training (regular and unregular) that [NAME] has been attended or graduated? ABBREVIATION: VOC. - VOCATIONAL		NEVER ATTENDED00 UNDER PRIMARY01 PRIMARY02 LOWER SECONDARY03 SHORT-TERM TRAINING04 HIGHER SECONDARY05 TRADE VOC. SCHOOL06 VOC. SCHOOL07 TRADE COLLEGE08 COLLEGE09 UNIVERSITY AND OVER10	NEVER ATTENDED00 UNDER PRIMARY01 PRIMARY02 LOWER SECONDARY03 SHORT-TERM TRAINING04 HIGHER SECONDARY05 TRADE VOC. SCHOOL06 VOC. SCHOOL07 TRADE COLLEGE08 COLLEGE09 UNIVERSITY AND OVER10	NEVER ATTENDED00 UNDER PRIMARY01 PRIMARY02 LOWER SECONDARY03 SHORT-TERM TRAINING04 HIGHER SECONDARY05 TRADE VOC. SCHOOL06 VOC. SCHOOL07 TRADE COLLEGE08 COLLEGE09 UNIVERSITY AND OVER10	NEVER ATTENDED00 UNDER PRIMARY01 PRIMARY02 LOWER SECONDARY03 SHORT-TERM TRAINING04 HIGHER SECONDARY05 TRADE VOC. SCHOOL06 VOC. SCHOOL07 TRADE COLLEGE08 COLLEGE09 UNIVERSITY AND OVER10
Now, I would like to ask some questions about activities related to work/job during the last 7 days					
10. During the last 7 days, did [NAME] do any work to make profit?		YES1 NO2	YES1 NO2	YES1 NO2	YES1 NO2
11. Although [NAME] did not work during the last 7 days, does [NAME] still receive wages, salaries or profits from his/her work or business?		YES1 NO2	YES1 NO2	YES1 NO2	YES1 NO2
12. Did [NAME] have a job and will return to work during the next 30 days?		YES1 NO2	YES1 NO2	YES1 NO2	YES1 NO2

QUESTIONS	NAME AND ORDER NO.				
13. How long has [NAME] been temporarily absent from work?		<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>
14a. During the last 7 days, what was the main type of work [NAME] did and what position did [NAME] hold for the mentioned work (if available)?		<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>
14b. What was the main type of work [NAME] did before having break temporarily from work?		<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>
15. With above-mentioned work, is [NAME] the employer, own-account worker, unpaid family worker, wage worker, member of cooperative or apprentice?		<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>
15a. With the above-mentioned job, did [NAME] receive the following:		<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>
1. Pay slip?		<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>
2. Paid public holidays/leaves?		<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>
3. Social insurance?		<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>
16. Does the establishment where [NAME] did the above-mentioned work belong to individual, household of individual production and trade, collective, private, state or foreign investment economic sector?		<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>
ABBREVIATION: A-F-F: AGRICULTURE-FORESTRY-FISHERY HH OF IN. PRO. TRADE: HOUSEHOLD OF INDIVIDUAL PRODUCTION AND TRADE		<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>

HOUSEHOLD NO:...

--	--	--

QUESTIONS	NAME AND ORDER NO.			
17. What is the name of the establishment where [NAME] did the above-mentioned work and the name of its direct supervision organization (IF AVAILABLE)?				
18. What are the main responsibility/product of the establishment where [NAME] did the above-mentioned work?				
19a. Does the establishment where [NAME] worked have the following: 1. Business registration? 2. Tax code registration? 3. Social security registration? 4. Written accounts?				
19. How many persons usually work in the establishment where [NAME] worked?				
20. How long has [NAME] worked this job				
21. Apart from the above-mentioned main job, did [NAME] have any other job, work to make income during the last 7 days?				

QUESTIONS	NAME AND ORDER NO.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
22. How many hours did [NAME] actually work, including main and secondary jobs during last 7 days?		ACTUAL HOURS WORKED/ WEEK	<input type="text"/>	<input type="text"/>	ACTUAL HOURS WORKED/ WEEK	<input type="text"/>	<input type="text"/>
23. CHECK Q22: IF Q22 < 35 HOURS → Q24; IF NO → Q27							
24. Did [NAME] want to work overtime?		YES 1 <input type="text"/>	<input type="text"/>	YES 1 <input type="text"/>	<input type="text"/>	NO 2 <input type="text"/>	Q27 → <input type="text"/>
25. If suitable work is available, is [NAME] available to work immediately?		YES 1 <input type="text"/>	<input type="text"/>	YES 1 <input type="text"/>	<input type="text"/>	NO 2 <input type="text"/>	Q27 → <input type="text"/>
26. How many hours overtime per week do [NAME] want to work?		N° OF HOURS/WEEK	<input type="text"/>	N° OF HOURS/WEEK	<input type="text"/>		
27. CHECK Q 15: IF Q15 = 4 → Q28; IF NO → Q40							
28. What is the average monthly salary/wage made by [NAME] before paying taxes or deduction?		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Q40 (THOUSAND VND)	<input type="text"/>
29. During the last 30 days, did [NAME] actively look for any work?		YES 1 <input type="text"/>	<input type="text"/>	YES 1 <input type="text"/>	<input type="text"/>	NO 2 <input type="text"/>	Q32 → <input type="text"/>
30. During the last 30 days, how did [NAME] seek work or apply for a job?		APPLIED FOR JOBS 1 <input type="text"/>	<input type="text"/>	APPLIED FOR JOBS 1 <input type="text"/>	<input type="text"/>	CONTACTED/CHECKED AT PUBLIC EMPLOYMENT SERVICE 2 <input type="text"/>	VIA FRIENDS AND RELATIVES 3 <input type="text"/>
		PLACED ADVERTISEMENTS 4 <input type="text"/>	<input type="text"/>	PLACED ADVERTISEMENTS 4 <input type="text"/>	<input type="text"/>	LOOKED AT ADVERTISEMENTS OF RECRUITMENT 5 <input type="text"/>	PREPARATION FOR SETTING UP A BUSINESS 6 <input type="text"/>
		OTHERS 7 <input type="text"/>	<input type="text"/>	OTHERS 7 <input type="text"/>	<input type="text"/>	(SPECIFY)	

HOUSEHOLD NO:...

QUESTIONS	NAME AND ORDER NO.				
31. When did [NAME] start to seek for above work?		MONTH	YEAR		
32. During the last 7 days, would [NAME] be available for work if you have found a work?		YES	NO		
33. CHECK Q29 AND Q32: IF Q29 = 1 AND Q32 = 1 → Q36; IF NO → Q34					
34a. IF Q29 = 2: What is the main reason [NAME] did not look for work during the last 30 days?		NO SUITABLE WORK/ DON'T KNOW WHERE	WAIT FOR JOB/ SEASON	ILLNESS/PERSONAL MATTER	BAD WEATHER
34b. IF Q32 = 2: What is the main reason [NAME] was not available for work immediately?		ATTENDING SCHOOL	HOUSEWORK	DISABLED/TOO YOUNG/TOO OLD	NOT WILLING TO WORK
REMARK: Q29 = 2 AND Q32 = 2, ASK Q34a		OTHER			
35. What is the main reason [NAME] did not work during the last 7 days?		STUDENT/PUPIL	HOUSEWORK	SICKNESS/DISABILITY	TOO YOUNG/OLD
36. Has [NAME] ever worked yet?		YES	NO		

[illegible]