

Segment

Structure

Part

Questionnaire

Household

Form per
person

SECTION B: Labour Force Classification

Only for people aged 15 years and over

Line No <input type="text"/>	Name <input type="text"/>	Phone <input type="text"/>	Type of respondent Self-respondent..... <input type="radio"/> 1 Another respondent in the household..... <input type="radio"/> 2 Respondent out of the household..... <input type="radio"/> 3 For office use only..... <input type="radio"/> 4	Line No <input type="text"/>
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B1. Did (Name) work the past week, for at least one hour, not counting domestic chores or housework?

(Remind informant: Past week refers to the one from Sunday ____ to Saturday ____)

Yes..... O1 (Skip to B9)

No..... O2

B2. Did (Name) do any of the following activities for at least one hour in exchange for money or anything in return...

(Read every option until you arrive at an affirmative answer. If you do, remind it is for an hour or more)

...participate in farm work, rearing, fishing?..... O1

...make any type of product for selling such as clothes, tailoring, foods, crafts?..... O2

...sell any product such as foods, jewelry, raffle tickets or catalogue products?..... O3

...take care of children, elderly or ill persons from another household in exchange for money or in kind?..... O4

...perform any kind of housework such as cleaning, ironing, or others such as nail work, car watching, for people of another household in exchange for money or in kind?..... O5

...perform other jobs or "gigs"?..... O6

...performed any other type of work in exchange for money or anything else in return?..... O7

(Specify)

...none of the above..... O8

(Skip to B9)

B3. Last week, did (Name) work at a business or farm that belongs to a relative or acquaintance for at least one hour, without payment in money or in kind?

Yes..... O1 (Skip to B9)

No..... O2

B4. Although (Name) did not work the past week, does this person have a job or own business, in which is temporarily absent?

Yes..... O1

No..... O2

(Continue with B5)

(Skip to B6)

B5. What is the reason (Name) did not work the past week?

Vacation, sick leave, strike, suspension of activities, paid leave or leave with supporting income from business..... O1

Because there were no customers at the office or business..... O2

Asked for unpaid leave of a month or less..... O3

Temporary cease of business for a month or less without an income (due to repairs on equipment, bad weather, ban) but with certainty of being back in business..... O4

Unpaid vacation or sick leave with no revenue for a month or less with certainty of returning to work..... O5

Leave, vacation, or sick leave with no income for more than a month or uncertain about a returning date..... O6

Cease of activity, business foreclosure with no revenue for over a month or uncertainty of a date to return to work..... O7

Not being hired (without a private business) or because only do occasional jobs for others..... O8

(Skip to B9)

B6. If (Name) had found a job or had customers, could (Name) start working right now or at least in two weeks?

No → Why?

Does not wish to work..... O01

Reached old age..... O02

Because of permanent disability..... O03

Because of illness..... O04

Because of domestic work (housework, caretaking of children and other people)..... O05

Due to personal reasons (studies, planned traveling)..... O06

Could start working at a different moment..... O07

(Skip to Section I)

Yes...

...with no restrictions..... O08

...under certain working conditions (schedule, place or other)..... O09

(Continue with B7)

B7. In the past four weeks, did (Name) do any of the following activities to find a job or start an own business...

(Read every option until you arrive at an affirmative answer)

- ...ask friends or relatives?..... 001
- ...ask for a job at locations?..... 002
- ...offer home services?..... 003
- ...post or answer help wanted ads?..... 004
- ...fill out applications?..... 005
- ...hand out resumes at job fairs?..... 006
- ...send resumes via mail, in person or
through email?..... 007
- ...attend job interviews?..... 008
- ...find customers or do paperwork to start own
business?..... 009
- ...set up a shop or office to start or to continue
the business?..... 010
- ...make other arrangements to find work or set
up own business?..... 011
- ...did not do anything in particular..... 012

**(Skip to
Section H)**

B8. Why did (Name) not look for a job in the past four weeks?

- Already found a job..... 001
- Expecting resumption of operations or business
reopening..... 002
- Awaiting a response from previous job search
efforts..... 003
- Does not have money for job search..... 004
- Tired of job searching..... 005
- Is not offered a job based on age, gender,
race, disability or other..... 006
- There are no jobs in the area..... 007
- Knows that there are no jobs this time
of the year..... 008
- Only works when he is asked..... 009
- Illness or accident..... 010
- Attends classes at an institution..... 011
- Family duties..... 012
- Personal obligations..... 013
- Other..... 014

**(Skip to
Section H)**

**(Skip to
Section I)**

B9. The past week, how many jobs did (Name) have?

- Only one job..... 01
- Two jobs..... 02
- Three or more jobs..... 03

Comments: _____

Reminder for C7:
Hours worked

**Usual or regular hours
worked**

This includes:

- The hours that a person usually or regularly works.
- The additional hours that a person works when they become regular.

+

**Overtime hours worked
apart from the usual hours
worked during the
reference period**

This includes:

- Extra or additional hours the person worked after the usual hours worked.

-

**Usual hours of work not
worked during the
reference week**

This includes:

- Time not worked due to injury or sick leave, vacation, holidays, leaves of absence and similar.

=

**Actual or effective hours worked during the week of reference
(the past week)**

SECTION C: Employed Persons

Only for the main job
Interviewer: Inquire about the job at which the person spends the most time

Remember:

Main job: The one in which the person spends most of the time. In case of having several jobs, and at least one is unpaid, consider the paid one as the main job. If all jobs are paid, and are given the same amount of time, the main job would be that one with the highest

C1. What is the Name of the business, organization, farm or institution where (Name) works or performs labour activities?

C2. In which province and canton is located the business, organization, farm or institution where (Name) works or performs labour activities?

In this same canton..... O1
At another canton..... O2
Which?
Province _____
Canton _____

C3. What kind of business or industry is the organization, farm or institution where (Name) works in? (What do the organization, farm or institution make or do?)

Remember: Only for interviewer

C3a. Which is the main product or service?

C4. What does (Name) do at his/her job? What are his/her main duties?

C5. Does (Name) normally use any kind of tool, machinery or equipment?

Yes..... O1 (Which ones?) No..... O2

C6. What is (Name)'s occupation?

C7. Hours at main job...

...How many hours does (Name) **usually** work per week?.....

...How many **extra** hours did (Name) work last week? (include paid and unpaid extra hours).....

...How many hours **less** than the usual did (Name) work last week (due to vacation, leaves, injuries, etc.)?.....

(Confirm on Tablet)

...How many hours did (Name) **actually** work last week?.....

C8. How many people regularly work here, including (Name) and the owner?

(Remember: if this is a domestic worker at another house, do not include its householder)

Less than 10 (enter the number).....

10 or more {
From 10 to less than 20..... O10
From 20 to less than 30..... O11
From 30 to less than 100..... O12
100 or more..... O13

C8a. Where does (Name) mainly perform his/her tasks?

Always at the shop, company site or farm for the company you work for..... O01

Always at the same shop, company site or farm where you provide services..... O14

Alternating sites at the company your work for or give service to..... O15

At your home {
For services provided..... O02
By piece or product..... O03
Exclusively over the internet..... O04
Telecommuting..... O05

At the employer's household..... O06

On the street, with a set station..... O07

On the street, without station..... O08

On the move (door-to-door, sales, paperwork)..... O09

Transportation of any kind..... O10

Construction site..... O11

Outside of the country..... O12

Other..... O13

(Specify)

C9. The place where (Name) perform his/her duties belongs to...

...private sector	<div> <div>own business or freelance?.. O1</div> <div>institution or company?..... O2</div> <div>private residence?..... O3</div> </div>	<div>(Skip to C13)</div> <div>Continue with C10</div>
...government or public institution?..... O4		

C10. The enterprise or institution which pays a wage to (Name), is the same where (Name) performs his/her duties or business?

Yes..... O1 No..... O2

(Skip to C13) ↓

C11. What is the Name of the company that pays your salary?

C12. What kind of business or industry is the company that is paying (Name) salary? (What do the company make or do?)

C13. Is this job or activity...

...an own business or private company or enterprise?..... O1	(Skip to Section D: Self-Employed Persons)
...as an employee for a person, business or institution?..... O2	(Skip to Section E: Employees Persons)
...as a domestic worker at households?..... O3	
...as an aid for a relative or acquaintance receiving payment in cash or in kind?.... O4	(Continue with C14)
...as an aid for a relative or acquaintance not receiving payment in cash or in kind?..... O5	

(Aid for an employee)
(Domestic worker aid should not appear in this category)

C14. Does (Name) receive a fixed amount payment in cash or in kind for this job?

Yes..... O1 → (Skip to Section E)

No..... O2 → "If the answer to C13 is code 5 skip to Section F, if not, continue with C15"

C15. Does (Name) take part in the decision-making and management of the company?

Yes..... O1 No..... O2 → (Skip to Section F)

↓

C16. Does (Name) withdraw money or receive profit for this job?

Yes..... O1 No..... O2 → (Skip to Section F)

↓

C17. The person with whom (Name) works is...

...a member of this household?..... O1

...a member of another household?..... O2

↓ ↓

(Skip to Section D) Enter the line number for this person

C18. How much money did (Name) receive last month?

SKIP TO SECTION F

Comments: _____

SECTION D: Self-Employed Persons

D1. Does (Name) hire personnel...

...yes, permanently..... O1 →

...yes, occasionally..... O2 →

...(Name) never hire personnel.... O3

D2. During the past week. How many people worked with (Name)?

D3. Is (Name)'s business or activity...

...for an indefinite or permanent time?..... O1 **(Skip to D5)**

...only for the season?..... O2

...only for a fixed amount of time?..... O3

...done only once?..... O4

...only when needed or asked for?..... O5

D4. How long did this job last or will this job last?

A week or less..... O1 } **(Skip to D27)**

More than a week to a month..... O2 }

More than a month to three months..... O3

More than three months to six months..... O4

More than six months to a year..... O5

More than a year..... O6

D5. How long has (Name) owned this business or activity continuously?
(With interruptions of no more than 15 days)

How many?

Less than a month..... O1

More than a month..... O2 _____ months

A year or more..... O3 _____ years

D6. To perform the duties of the business, does (Name) have...

	owned?	rented?	borrowed?	No
...tools..... O1	O2	O3	O4	
...machinery..... O1	O2	O3	O4	
...shop or land..... O1	O2	O3	O4	
...own vehicle only used for business..... O1	O2	O3	O4	

D7. Does (Name) have partners in this business?

Yes { And they are members of this household..... O1

And they are members of other households..... O2

No..... O3

D8. Is the business registered...

...with a corporate number at Property Registry Office..... O1

...at another public entity?..... O2

(Specify)

...it is not registered O3

D9. Does this business keep formal accounts periodically?

(Those on a simplified tax regime are not included here)

Yes..... O1 No { this is a **NON-farming activity**..... O2 **(Skip to D16)**

↓ this is a **farming activity**..... O3 **(Skip to D22)**

(Continue on D10)

Self-Employed Income

Corporations and quasi-corporations

D10. Does (Name) have a salary assigned by his/her company?

Yes..... O1 →

No..... O2 ↓

D11. Last month, how much money was assigned to (Name) as gross salary?

D12a. In the past twelve months, has (Name) received any payments for distribution of profits or earnings?

Yes..... O1 → **D12b. How much?**

No..... O2 _____

D13. In the past twelve months, did (Name) reinvest the profits or returns generated by his/her enterprise?

Yes..... O1 No..... O2

Remember for D14:

Only if a salary was assigned on D11; if not, skip to D15

D14. At this job, does (Name) have deductions of...

...social security? Yes..... O1 No..... O2

...income taxes? Yes..... O1 No..... O2

D14a. Did the company assign a Christmas bonus (aguinaldo) to (Name)?

Yes..... O1 No..... O2

D15. Did (Name) receive any of the following from the company:

(Only payments in kind)

What is the estimated value?

...food?..... Yes O1 _____

No O2 _____

...transportation, fuel?..... Yes O1 _____

No O2 _____

...home?..... Yes O1 _____

No O2 _____

...personal vehicle?..... Yes O1 _____

No O2 _____

...any other?..... Yes O1 _____

No O2 _____

SKIP TO SECTION F

Only for non-farming production
(Only code 2 on question D9)

Remember from D16 to D18a:

If the amount stated differs from that of a month, put it together

D16. Last month, how much did (Name) sell or charge for his/her products or services?.....

D17. Last month, how much did (Name) spend making sales or providing services?

(Confirm on Tablet)

D18. Was the profit for the past month ?

Yes..... O1

No..... O2

(Skip to D19)

D18a. So, how much has (Name) earned?

Profit estimation. Only if the amount is ignored or "0".

D18b. How much of the monthly expenses of the household is covered by the revenue of this activity?

Did not assign an amount for household expenses..... O1

For use of interviewer:

D19. Is this a manufacturing or product sales activity?

Yes..... O1

No..... O2

(Continue on D20)

SKIP TO SECTION F

D20. About (Name)'s production, did (Name) take any amount for own consumption the past month?

Yes..... O1

No..... O2

D21. What would be the estimated value of the products that were taken for home consumption if they had been sold?

SKIP TO SECTION F

Only for farming production, hunting, silviculture
and fishing (Only code 3 on question D9)

Remember from D22 to D25:

If the amount stated corresponds to less than a month, put it together

D22 What was the total revenue of the farming production or fishing activity in the last period? Harvest, production, fishing period

D23. How much did (Name) invest in this production?

(Confirm on Tablet)

D24. Is the average return per month ?

Yes..... O1

No..... O2

(Skip to D19)

D24a. So, what is the estimated monthly return?

Profit estimation. Only if the amount is ignored or "0".

D24b. How much of the monthly expenses of the household is covered by the revenue of this activity?

Did not assign an amount for household expenses O1

D25a. About (Name)'s production, did (Name) take any amount for own consumption the past month?

Yes..... O1

No..... O2

D26a. What would be the estimated value of the products that were taken for home consumption if they had been sold?

SKIP TO SECTION F

Occasional Income

(Only for codes 1 and 2 in question D4)

D27. How much money did or will (Name) earn for this activity?

SKIP TO SECTION F

This area is for notes of questions D16 to D24 only

Product	Quantity	Price per unit	Value of sales	Expenses	Profit	Period

Notes for D25 (self-consumption)

Quantity	Value	Period

SECTION E: Employees Persons (refer only to main job)

E1. Is your job...

- ...for an indefinite or permanent time?..... O1 **(Skip to E3)**
 ...only for the season?..... O2
 ...only for a fixed amount of time?..... O3
 ...done only once?..... O4
 ...only when needed or asked for?..... O5

E2. How long did this job last o will this job last?

- A week or less..... O1
 More than a week to a month..... O2
 More than a month to three months..... O3
 More than three months to six months..... O4
 More than six months to a year..... O5
 More than a year..... O6
- (Skip to E7)**

E3. How long has (Name) worked continuously at this place?
(With interruptions of less than 15 days)

- How many?
- Less than a month..... O1
- More than a month..... O2 months
- A year or more..... O3 years

E4. What is (Name)'s regular work shift?

- Day shift (between 5 am and 7pm)..... O1
 Night shift (between 7 pm and 5am) O2
 Swing shift (at least 3 night hours) O3
 Alternating, rotating or staggered shifts..... O4
 Other..... O5
- (Specify)**
- Own shift..... O6 **(Skip to E6)**

E5. How many straight work days does (Name) have? How many days off?

- Work days.....
- Off days.....

E5a. Does the company assign an alternating on/off shift for (Name)?

- Yes..... O1 No..... O2

Remember for E6:

Machinery or equipment: Machinery refers to the group of machines that help run the operation of the business.

E6. Does (Name) have to make use any of the following, without any form of compensation to perform the work...

- ...instruments, or tools?..... Yes..... O1 No..... O2
- ...own vehicle or motorcycle?..... Yes..... O1 No..... O2
- ...room or area within your household?..... Yes..... O1 No..... O2
- ...machinery or equipment?..... Yes..... O1 No..... O2
- ...own capital?..... Yes..... O1 No..... O2

E7. Which is the form of payment...

- ...only by comission? O01
- ...wage and commissions?..... O02
- ...consulting or professional fees?..... O03
- ...daily wage?.....O04
- ...piece-rate payment?..... O05
- ...hourly pay?..... O06
- ...fixed wage?.....O07
- ...only in kind?..... O08 **(Skip to E15)**
- ...was paid only once..... O09 **(Skip to E17)**

E8. Which is the pay period?

- Daily.....O1
- Weekly..... O2
- Bi-weekly..... O3
- Fortnight..... O4
- Monthly..... O5
- Other..... O6
- (Specify)**

E8a. How many working weekly hours were (Name) hired for?

- Less than 15 hours..... O1
- 15 to less than 40 hours..... O2
- 40 to 48 hours..... O3
- Over 48 hours..... O4
- Other..... O5

E9. At this present job, does (Name) receive...

	Yes	No
...paid sick leave?.....	O1	O2
...paid vacation?.....	O1	O2
...labor insurance?.....	O1	O2
...paid extra hours?.....	O1	O2
...travel expenses?.....	O1	O2

E10. Does (Name) get any of the following deductions at his/her job...

	Yes	No
...social security?.....	O1	O2
...revenue tax?.....	O1	O2

Employees Income**E11. At the present job, which was (Name) gross salary for the past month before deductions? (No tips, travel expenses or overtime)**

_____ → **Continue with E12**

Did not receive any payment the past month and have been there for over a month..... O1
(Skip to E16)

Did not receive any payment the past month and will remain at work for a month or less..... O2
(Skip to E17)

E12. How much were (Name) paid the past month after deductions of social security, taxes, etc.--including only those that are automatically deducted by the employer? (Do not include savings, payments or others)

E13. During the past twelve months at this job, did (Name) receive any...**How much was it?**

...year-end bonus?.....	Yes	O1	→	_____
(Aguinaldo)	No	O2		
...school bonus?.....	Yes	O1	→	_____
(Salario escolar)	No	O2		

E14. Did (Name) receive any bonuses, tips, paid extra hours or any other payment in cash during the past month?

Yes..... O1 (Continue with E14a) No..... O2 (Skip to E15)

E14a. Did (Name) receive any...**How much was it?**

...bonuses?.....	Yes	O1	→	_____
	No	O2		
...tips?.....	Yes	O1	→	_____
	No	O2		
...extra hours?.....	Yes	O1	→	_____
	No	O2		
...other?.....	Yes	O1	→	_____
	No	O2		

E15. For this job, did (Name) receive any of the following... (Only for payments in kind)**What is the estimated monthly?**

...food expenses?.....	Yes	O1	→	_____
	No	O2		
...transportation,.....	Yes	O1	→	_____
fuel?	No	O2		
...lodging,.....	Yes	O1	→	_____
accommodations?	No	O2		
...personal vehicle?.....	Yes	O1	→	_____
	No	O2		
...other payments.....	Yes	O1	→	_____
in kind?	No	O2		

SKIP TO SECTION F**E16. Which will be (Name)'s gross monthly salary?**

_____ → **SKIP TO SECTION F**

E17. Which was or will be (Name)'s gross salary for the hiring period? (Including tips)

_____ for _____ period

SKIP TO SECTION F

Comments: _____

SECTION F: Secondary Job

F1. During the past week, did (Name) perform any other type of work besides the one discussed before?

No, (Name) only has this job..... O1

Yes { (Name) has an additional job..... O2
(Name) has more than one additional job... O3 } (Skip to F2a)

F1a. Besides the main job, did (Name) do any of the following activities for at least one hour, during the past week, in exchange for payment in cash or in kind...

(Read every option until you have an affirmative answer, then confirm that it was for at least an hour)

...sold food or other products, raffle tickets, home sales?..... O1

...performed miscellaneous jobs or "gigs"?..... O2

...did tailoring, crafts or prepared food to sell?..... O3

...helped in farm labor, caretaking, cleaning or ironing for another household or a business in exchange for payment in cash or in kind?..... O4

(Skip to F2a)

Did not do any of those activities..... O5

F1b. Additionally the job mentioned before, do (Name) have a secondary own business or job from which were temporarily absent?

Yes..... O1

No..... O2

(Continue with F1)

(Skip to Section G)

F1c. Was (Name)'s absence for...

...less than a month?..... O1 (Continue with F2a)

...over a month? O2 (Skip to Section G)

Remember from F2a to F5:

Make sure the following information belongs to the job having the most working hours besides the person's main job.

F2a. What is the Name of the business, institution or farm where (Name) works?

F2b. What kind of business or industry is the organization, farm or institution where (Name) works in? (What do the organization, farm or institution make or do?)

F3a. What does (Name) do at this extra job, which are his/her main tasks?

F3b. Does (Name) make use of any tools, machinery or gear?

Yes..... O1 (Which ones?) No..... O2

F3c. What is (Name)'s occupation?

F3d. Where does (Name) mainly perform his/her tasks?

Always at the same company, farm, institution site..... O01

At your home { For services provided..... O02
By piece or product..... O03
Exclusively over the internet..... O04
Telecommuting..... O05

At the employer's household..... O06

On the street, with a set station..... O07

On the street, no station..... O08

On the move (door-to-door, sales, paperwork)..... O09

Transportation of any kind..... O10

Construction site..... O11

Outside of the country..... O12

Other..... O13

(Specify)

F3e. Is (Name) job...

- ...for an indefinite or permanent time?..... O1
 ...only for the season?..... O2
 ...only for a fixed amount of time?..... O3
 ...done only once?..... O4
 ...only when needed or asked for?..... O5

F4. Is this job or activity...

- ...an own business or private company... O1 (Continue with F5:
or enterprise? Self-Employed Persons)
- ...as an employee for a person,
business or institution?..... O2
- ...as a domestic worker at one or
more homes?..... O3 (Skip to F6:
Employees Persons)
- ...as an aid for a relative or acquaintance
receiving payment in cash or in kind?.. O4
- ...as an aid for a relative or acquaintance
not receiving payment in cash or in
kind?..... O5 (Skip to F6:
Unpaid workers)

F5. Does (Name) hire personnel...

- ...yes, permanently?..... O1
 ...yes, occasionally?..... O2
 ...(Name) never hire personnel?..... O3

F5a. Is the business registered...

- ...with a corporate number at Property Registry Office?..... O1
 ...at another public entity?..... O2
 (Specify)
- ...it is not registered..... O3

F6. Hours spent at a secondary jobs (secondary job and other jobs)**Secondary jobs**

- ...How many hours does (Name)
usually work per week?.....
- ...How many extra hours did you
work last week? (include paid and
unpaid extra hours).....
- ...How many hours less than the usual did (Name)
work last week (due to vacation, leaves, injuries,
etc.)?.....

(Confirm on Tablet)

- ...How many hours did (Name)
actually work last week?.....

Skipping:

Check F4, if (Name)'s secondary job is:

- Self-Employed Persons (F4 = 1) move to F6e Secondary Self-Employed Income.
- Employees Persons (F4 = 2, 3 or 4) move to F8d: Secondary Employees Income.
- Unpaid workers (F4 = 5) move to Section G

Secondary Self-employed Income**Reminder for Self-employed Income:**

Take only the income that corresponds to the Main Secondary Job for questions F7 and F8.

F6e. Does this business keep formal accounts periodically?

(Those on a simplified tax regime are not included here)

Yes..... O1

No..... O2



(Continue with F7c)

(Continue with F7a)

F7. Which was the net profit of the business?

(Enter the period. If it is farming, the period may be longer than a month)

Period

F7a. Sold	_____	_____
F7b. Spent	_____	_____
F7c. Profit	_____	_____

F8a. Did (Name) keep any produce for consumption at home?

Yes..... O1

No..... O2



(Skip to Section G)

F8c. What is the estimated value of the items kept if they had been sold?



F8b. Which was the period?

Secondary Employees Income

Reminder for Employees Income:

For questions F8d to F12 consider only the income derived from the Main Secondary Job.

F8d. Which is the form of payment...

- ...only by commission?..... O01
- ...wage and/or commissions?..... O02
- ...consulting or professional fees?..... O03
- ...daily wage?..... O04
- ...piece-rate payment?..... O05
- ...hourly pay?..... O06
- ...fixed wage?..... O07
- ...only in kind?..... O08 (Skip to F13)

F8e. Do (Name) get any deductions for...

- | | Yes | No |
|--------------------------|-----|----|
| ...social security?..... | O1 | O2 |

F9. Which was (Name) total salary for the past month before any deductions (gross salary)?

_____ → Continue with F10

Did not receive any payment the past month and have been there for over a month..... O1
(Skip to F11)

Did not receive any payment the past month and will remain at work for a month or less..... O2
(Skip to F12)

F10. How much were (Name) paid the past month after deductions -social security, taxes, etc-? (Include only those deductions that are automatically deducted by the employer)

_____ (Skip to F13)

F11. Which is going to be (Name) gross salary for this month, that is, before deductions?

_____ (Skip to F13)

F12. Which was or will be (Name) salary for the period?

_____ for _____
period

F13. Did (Name) receive meals, partial subsidies, lodging, fuel, a vehicle for personal use or any other form of payment in kind for the past month?

Yes..... O1 → What is the estimated value?

No..... O2

Reminder for F14:

The question is only for persons who answered code 3 on F1 (Persons with two or more additional jobs).

F14. How much did (Name) earn for his/her other jobs?

(Name) did not have another job..... O1

SKIP TO SECTION G

Comments: _____

SECTION G: Insufficient working hours and inadequate employment

Insufficient Working Hours

Interviewer: **Remember** to transcribe total hours,

Effective total hours at main job (C7).....

Effective total hours at secondary jobs (F6) +

Total working hours..... =

Reminder:

If the person is on leave (B4 = 1) transcribe their **usually work hours**

G1. (Name) worked _____ hours last week, would (Name) have wanted to work more hours?

(If person was on leave, ask "would you have wanted to...")

Yes..... O1 Continue with G2
No..... O2 (Skip to G4)

G2. If (Name) had get more hours, would (Name) have worked...

...last week?..... O1
...this week or next?..... O2 } Continue with G3
...no, (Name) could not work more
hours immediately?..... O3 (Skip to G4)

G3. Why would (Name) not work more hours on the week?

Due to studies..... O1
Due to health problems..... O2
Due to personal or family issues..... O3
Because (Name) has not found more work..... O4
Other..... O5
(Specify)

Inadequate Employment

G4. Despite (Name) had a job last week, would (Name) like to change the job? *(If person has two or more jobs, refer to the main job)*

Yes..... O1 Continue with G5
No..... O2 (Skip to I2)

G5. If (Name) found the job that wishes, would (Name) change his/her job on the next four weeks?

Yes..... O1 No..... O2
↓ ↓
(Continue with G6) (Skip to G7)

G6. What is the reason (Name) wishes to find another job?

You are looking for a more stable job..... O1
The current contract has expired..... O2
You are looking for better working conditions
(closer distance, work climate, etc.)..... O3
You do not like it; find it inconvenient..... O4
To work fewer hours..... O5
To earn more money..... O6
To find a more suitable job for your career..... O7
To gain experience..... O8

G7. During the past four weeks, did (Name) use any of the following methods in the job search...

(Read every option until arriving at an answer)

...asked friends or relatives?..... O1
...sought to establish your own business?..... O2
...offered home services?..... O3
...handed out resumes, participated in job fairs?..... O4
...inquired at sites?..... O5
...nothing?..... O6

SKIP TO I2

SECTION H: Unemployed Persons

H1. How long ago did (Name) do something to find a job or to start an own business?

A week ago or less..... O1
More than a week to a month ago..... O2
More than a month to three months ago..... O3
More than three to six months ago..... O4
More than six months to a year ago..... O5
More than a year to three years ago..... O6
More than three years ago..... O7
Has not done anything..... O8

H2. Have (Name) ever worked?

Yes..... O1 No..... O2 (Skip to H12)

H3. Since (Name) left his/her last job, how long ago have (Name) been looking for a work or to start an own business?

A month or less..... O1
More than a month to three months..... O2
More than three to six months..... O3
More than six months to a year..... O4
More than a year to three years..... O5
More than three years..... O6
Has not done anything..... O7

H4. When did (Name) leave his/her last job?

Less than three months ago..... O1
 Three to six months ago..... O2
 Six months to a year ago..... O3
 A year to three years ago..... O4
 Three years ago or more..... O5

H5. What was the Name of the company or business where (Name) last worked in?

H6. What kind of business or industry is the organization, farm or institution where (Name) last worked in? (What do the organization, farm or institution make or do?)

H7. Which was the reason for leaving this job?**Closure due to:**

Lack of clientele..... O01
 Delinquent customers..... O02
 Fierce competition..... O03
 Was unable to cover for expenses..... O04
 Not enough capital, machinery or equipment..... O05

Motives related to the Labor Market:

Closure, bankruptcy, relocation..... O06
 Reorganization or reduction in force..... O07
 End of seasonal job..... O08
 Forced layoff, layoff agreement..... O09
 Contract termination..... O10
 Other labor reasons..... O11

Personal motives:

Voluntary resignation..... O12
 Prolonged injury leave, labor accident..... O13
 Personal reasons (studies, illness, traveling)..... O14
 Family reasons (marriage, pregnancy, childcare)..... O15
 Did not like job, was inconvenient..... O16
 Bad working climate, poor labor conditions, poor sanitary conditions, retaliation, sexual harassment..... O17
 Retirement or permanent disability..... O18
 Was not paid enough or at all..... O19

H8. The job mentioned was...

... an own business?..... O1
 ... as an employee for a person, business or institution?..... O2
 ... as a domestic worker for one or more households?..... O3
 ... as an aid for a relative or acquaintance without any form of payment in cash or in kind?..... O4

H8a. How long did (Name) work at his/her last job?

How many?

Less than a month..... O1
 More than a month..... O2 months
 A year or more..... O3 years

H9. In which field or industry is (Name) looking for work...

...farming or fishing?..... O1
 ...manufacture?..... O2
 ...commerce (clothing, goods, etc.)?..... O3
 ...services (teaching, call center, etc.)?..... O4
 ...other?..... O5

(Specify)

H10. What is the most important condition that (Name) would like to get at the job that is looking for?

Fewer working hours..... O1
 More flexible shifts (non-continuous, part-time, night shift, etc.)..... O2
 Akin to your knowledge or experience..... O3
 Good wage conditions..... O4
 Good working climate..... O5
 A minimum wage..... O6

H11. During the time unemployed, have (Name) found an alternative source of income?

Yes..... O1 No..... O2

SKIP TO 12

H12. How long have (Name) been trying to find a job or start a business of his/her own?

A month or less..... O1
 More than a month to three months..... O2
 More than three to six months..... O3
 More than six months to a year..... O4
 More than a year to three years..... O5
 More than three years..... O6
 Has not done anything..... O7

SKIP TO 12

SECTION I: Primary Production for Own-consumption at the Household

I1. Does (Name) look for permanent or seasonal work at a given month or some ways to earn money?

Yes..... O1 No..... O2

At which months? Yes No

January.....	<input type="radio"/> 1	<input type="radio"/> 2
February.....	<input type="radio"/> 1	<input type="radio"/> 2
March.....	<input type="radio"/> 1	<input type="radio"/> 2
April.....	<input type="radio"/> 1	<input type="radio"/> 2
May.....	<input type="radio"/> 1	<input type="radio"/> 2
June.....	<input type="radio"/> 1	<input type="radio"/> 2
July.....	<input type="radio"/> 1	<input type="radio"/> 2
August.....	<input type="radio"/> 1	<input type="radio"/> 2
September.....	<input type="radio"/> 1	<input type="radio"/> 2
October.....	<input type="radio"/> 1	<input type="radio"/> 2
November.....	<input type="radio"/> 1	<input type="radio"/> 2

I2. Did (Name) harvest, graze cattle, pasture poultry, participate in logging or prepare farming products during the past week exclusively for own-consumption?

Yes..... O1 → **How many hours did (Name) spend?**

_____ → _____

No..... O2 → **Skip to I5**

I3. Was the activity related to...

...farming?..... O1 →

...pasturing?..... O2

...fishing?..... O3

...other?..... O4

**Specify,
Which type?**

I4. During the past month, how much would (Name) have spent on the products mentioned before if (Name) had paid for them?

I5. During the last week, did (Name) do remodeling, repairs or construction activities exclusively for his/her home?

Yes..... O1 → **I5a. How many hours did (Name) spend?**

No..... O2

I6. Did (Name) do any tailoring exclusively for use at the household during the past week?

Yes..... O1 → **I6a. How many hours did (Name) spend?**

No..... O2

I7. Did (Name) do any community or volunteer work the past week?

Yes..... O1 → **I7a. How many hours did (Name) spend?**

No..... O2 → **End of questionnaire**

I8. What is the Name of the place where does (Name) volunteer or community work?

I9. Did (Name) receive any form of payment for the volunteer work?

Yes..... O1

No..... O2 → **End of questionnaire**

I10. How much did (Name) get or will be paid?

Comments: _____
