### TO BE FILLED IN FOR EACH DWELLING AND FOR THE BUILDING IN WHICH THE DWELLING IS LOCATED

<table>
<thead>
<tr>
<th>County</th>
<th>Municipality/City/Commune</th>
<th>Component locality/Village</th>
<th>Street</th>
<th>Order number of the building within the folder</th>
<th>Order number of the dwelling within the building</th>
<th>Number of the LC form within the folder</th>
<th>Number of the SC form under which the dwelling was recorded (only for the dwellings in the collective living space)</th>
</tr>
</thead>
</table>

#### DATA CONFIDENTIALITY

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#### DATA PROVISION IS COMPULSORY

All persons shall be required to provide data, in accordance with Art. 2 of Government Ordinance No 36/2007 on the conducting of the 2011 Population and Housing Census. Refusal to provide data shall be deemed a contravention and shall be punishable under Art. 21 of Government Decision No 1502/2009 on the organisation and carrying out of the Romanian Population and Housing Census in 2011.

#### DWELLING

<table>
<thead>
<tr>
<th>1</th>
<th>NUMBER OF HOUSEHOLDS IN THE DWELLING</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>NUMBER OF PERSONS IN THE DWELLING</td>
<td></td>
</tr>
<tr>
<td></td>
<td>of which:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>present</td>
<td></td>
</tr>
<tr>
<td></td>
<td>temporarily absent</td>
<td></td>
</tr>
<tr>
<td></td>
<td>away for a long period of time</td>
<td></td>
</tr>
<tr>
<td></td>
<td>temporarily present</td>
<td></td>
</tr>
</tbody>
</table>

#### TYPE OF DWELLING

1. Conventional dwelling
2. Mobile housing unit
3. Provisional housing unit
4. Another unit designed for habitation
5. Another unit not designed for habitation

2-5 go directly to question 8

**QUESTIONS 4, 5, 6 AND 7 APPLY ONLY TO CONVENTIONAL DWELLINGS**

#### DWELLING STATUS

1. Permanent (main)
2. Secondary
3. Holiday house

#### DWELLING OCCUPANCY STATUS

1. Occupied
2. Reserved for seasonal or secondary use
3. For sale
4. For rent
5. For demolition
6. Another situation
7. Only foreign citizens who are temporarily present are inside the dwelling

#### POSITION OF THE DWELLING IN THE BUILDING

30. Basement
40. Semi-basement
50. Ground floor
60. Mezzanine
70. Attic

#### HOW MANY LEVELS DOES THE DWELLING HAS?

#### TYPE OF OWNERSHIP

1. Individual private
2. Public
3. Shared private
4. Co-operative
5. Associative
6. Owned by a religious cult

#### RESIDENTIAL ROOMS

9.1 Number
9.2 Area (in sq m, without decimals)

#### OF WHICH: ROOMS USED ONLY FOR PROFESSIONAL, COMMERCIAL PURPOSES, ETC.

10.1 Number
10.2 Area (in sq m, without decimals)
11 KITCHEN/KITCHENETTE

11.1 There is a kitchen/kitchenette

1. inside the dwelling
2. outside the dwelling
3. within the building
4. outside the building
5. No kitchen/kitchenette
6. Cooking facilities in a different room

11.2 Area (in sq m, without decimals)

12 BATHROOM (with bathtub and/or shower)

There is a bathroom

1. in the dwelling
2. outside the dwelling
3. within the building
4. outside the building
5. No bathroom

13 FLUSH TOILET (WC)

There is a flush toilet

1. in the dwelling
2. outside the dwelling
3. within the building
4. outside the building

No flush toilet; there is another type of flush toilet

14 WATER SUPPLY SYSTEM

There is piped water

1. from the public network
2. from its own system
3. within the building
4. outside the building

No piped water

15 HOT WATER SUPPLY SYSTEM

There is hot water

1. from the public network
2. from its own system
3. within the building
4. from the public network
5. from its own system
6. outside the building
7. No hot water

16 SEWAGE DISPOSAL SYSTEM

There is a sewage disposal system

1. connected to a public sewage disposal plant
2. connected to a private sewage disposal plant
3. another situation
4. No sewage disposal system

17 ELECTRICAL LIGHTING

1. Yes
2. No

18 AIR CONDITIONING SYSTEM

1. Yes
2. No

19 FUEL USED FOR COOKING

1. Gas from the public network
2. Liquefied gas (gas cylinder)
3. Solid fuel
4. Electric energy
5. Other

20 TYPE OF HEATING

1. Central heating
2. From a public heating centre
3. From an installation in the dwelling with
4. gas from the public network
5. liquefied gas (gas cylinder)
6. solid fuel
7. liquid fuel
8. another type of energy used

No central heating; the heating is provided by

1. A cooker with
2. gas from the public network
3. liquefied gas (gas cylinder)
4. A stove (fireplace) with
5. gas from the public network
6. liquefied gas (gas cylinder)
7. solid fuel
8. liquid fuel
9. Electric energy
10. Another type of heating
11. No heating at all
**BUILDING**

**THIS INFORMATION IS TO BE RECORDED ONLY ON THE FORM CORRESPONDING TO THE FIRST DWELLING IN THE BUILDING**

<table>
<thead>
<tr>
<th>21</th>
<th>WINDOW CARPENTRY OF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Wood</td>
</tr>
<tr>
<td>2</td>
<td>Thermo-insulating material (thermopane - PVC, aluminium, glass fibre, mixed)</td>
</tr>
<tr>
<td>3</td>
<td>Another material (iron, etc.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>22</th>
<th>THERMAL REHABILITATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>YES</td>
</tr>
<tr>
<td>2</td>
<td>NO</td>
</tr>
<tr>
<td>3</td>
<td>New dwellings already thermally insulated (built this way)</td>
</tr>
</tbody>
</table>

→ go directly to question 24

<table>
<thead>
<tr>
<th>24</th>
<th>NUMBER OF DWELLINGS IN THE BUILDING</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[ ] [ ] [ ]</td>
</tr>
</tbody>
</table>

**QUESTIONS 25–29 ARE TO BE ANSWERED ONLY IF AT LEAST ONE CONVENTIONAL DWELLING IS IN THE BUILDING**

<table>
<thead>
<tr>
<th>25</th>
<th>TYPE OF BUILDING</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Residential building</td>
</tr>
<tr>
<td>2</td>
<td>Individual house</td>
</tr>
<tr>
<td>3</td>
<td>Duplex house</td>
</tr>
<tr>
<td>4</td>
<td>Row or terraced house</td>
</tr>
<tr>
<td>5</td>
<td>Blocks of flats</td>
</tr>
<tr>
<td>6</td>
<td>Designed for the collective living space (in which there are dwellings)</td>
</tr>
<tr>
<td>7</td>
<td>Non-residential building</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>26</th>
<th>BUILDING CONSTRUCTION PERIOD (YEAR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Before 1919</td>
</tr>
<tr>
<td>2</td>
<td>1919 – 1945</td>
</tr>
<tr>
<td>3</td>
<td>1946 – 1960</td>
</tr>
<tr>
<td>4</td>
<td>1961 – 1970</td>
</tr>
<tr>
<td>5</td>
<td>After 1970, year</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>27</th>
<th>NUMBER OF FLOORS OF THE BUILDING</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[ ] [ ] [ ] [ ]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>28</th>
<th>CONSTRUCTION MATERIALS OF THE BUILDING’S OUTER WALLS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Reinforced concrete</td>
</tr>
<tr>
<td>2</td>
<td>Prefabricated units</td>
</tr>
<tr>
<td>3</td>
<td>Masonry of brick, stone or a substitute (gas-formed concrete), with floors of:</td>
</tr>
<tr>
<td>4</td>
<td>- wood</td>
</tr>
<tr>
<td>5</td>
<td>Wood (beams, boards, etc.)</td>
</tr>
<tr>
<td>6</td>
<td>Framework, adobe</td>
</tr>
<tr>
<td>7</td>
<td>Other materials (fibreboard, OSB, glass, etc.)</td>
</tr>
<tr>
<td>8</td>
<td>Mixed materials</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>29</th>
<th>LOCATION OF THE BUILDING</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>In a continuously built-up area along a street</td>
</tr>
<tr>
<td>2</td>
<td>In a group of buildings having a locally recognised name</td>
</tr>
<tr>
<td>3</td>
<td>In a group of neighbouring buildings (less than 200 m)</td>
</tr>
<tr>
<td>4</td>
<td>In an area with isolated buildings</td>
</tr>
</tbody>
</table>

**QUESTIONS 21, 22 AND 23 APPLY ONLY TO CONVENTIONAL DWELLINGS**

**QUESTION 23 APPLIES ONLY TO THERMALLY REHABILITATED DWELLINGS (CODE 1 – QUESTION 22)**

**MORE THAN ONE OPTION CAN BE SELECTED**

<table>
<thead>
<tr>
<th>23</th>
<th>THE DWELLING HAS BEEN THERMALLY REHABILITATED BY:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Thermal insulation of the external walls (coating of polystyrene)</td>
</tr>
<tr>
<td>2</td>
<td>Replacing the balcony windows and doors</td>
</tr>
<tr>
<td>3</td>
<td>Closing the balcony with thermopane windows</td>
</tr>
<tr>
<td>4</td>
<td>Thermo-hydroinsulation of the roof</td>
</tr>
</tbody>
</table>
### SUMMARY LIST OF PERSONS RECORDED IN THE DWELLING

<table>
<thead>
<tr>
<th>Number of the G form of the dwelling</th>
<th>Persons recorded in the dwelling</th>
<th>TOTAL</th>
<th>Persons who are present</th>
<th>PERSONS TEMPORARILY ABSENT</th>
<th>PERSONS AWAY FOR A LONG PERIOD OF TIME</th>
<th>PERSONS TEMPORARILY PRESENT</th>
<th>STEADY POPULATION</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Total**: Total of all persons recorded in the dwelling.
- **Persons who are present**: To be taken from the P form.
- **Persons temporarily absent**: To be taken from the PPI form.
- **Persons away for a long period of time**: To be taken from the TP form.
- **Persons temporarily present**: To be calculated separately.

#### Columns

| M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10| 11| 12| 13| 14| 15| 16| 17| 18| 19| 20| 21| 22| 23| 24| 25| 26| 27| 28|

#### Foreign Citizens

- **To a place within the country**
- **Abroad**

#### Calculation Formulas

- \( \text{col1} = \text{col3} + \text{col7} + \text{col15} + \text{col23} \)
- \( \text{col2} = \text{col4} + \text{col8} + \text{col16} + \text{col24} \)

---

**I confirm that all data recorded on this form is in accordance with the information given by the respondent.**

Signature of the household head, more specifically of the person who provided the information.

Thank you for your answers.

---

**Completed,**

Surname and first name of the enumerator

Signature

---

**Checked,**

Surname and first name of the chief enumerator

Signature

---

Form completion date: October 2011
The household occupies the dwelling as:
1. Owner
2. Tenant
3. Another situation (free of charge, etc.)

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LIST OF PERSONS IN THE HOUSEHOLD

Present and temporarily absent, away for less than 12 months

<table>
<thead>
<tr>
<th>Order number of the person</th>
<th>SURNAME AND FIRST NAME</th>
<th>RELATIONSHIP TO THE HEAD OF THE HOUSEHOLD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>01 Household head</td>
</tr>
<tr>
<td>1</td>
<td></td>
<td>02 Husband/Wife</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>03 Partner</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>04 Son/Daughter</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>05 Son-in-law/Daughter-in-law</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>06 Grandmother</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>07 Father/Mother</td>
</tr>
<tr>
<td>7</td>
<td></td>
<td>08 Grandparent</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>09 Brother/Sister</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>10 Brother-in-law/Sister-in-law</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>11 Stepfather/Stepmother</td>
</tr>
<tr>
<td>11</td>
<td></td>
<td>12 Parent-in-law</td>
</tr>
<tr>
<td>12</td>
<td></td>
<td>13 Other relative</td>
</tr>
<tr>
<td>13</td>
<td></td>
<td>14 Non relative</td>
</tr>
<tr>
<td></td>
<td></td>
<td>15 Husband/Wife (Partner)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>16 Father</td>
</tr>
<tr>
<td></td>
<td></td>
<td>17 Mother</td>
</tr>
</tbody>
</table>

* From the G or PPI form
### List of Persons in the Household

Present and temporarily absent, away for less than 12 months

<table>
<thead>
<tr>
<th>Order number of the person</th>
<th>Surname and first name</th>
<th>Relationship to the head of the household</th>
<th>Order number under which they are recorded*</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Household head</td>
<td>01</td>
<td></td>
</tr>
<tr>
<td>02</td>
<td>Husband/Wife</td>
<td>02</td>
<td></td>
</tr>
<tr>
<td>03</td>
<td>Partner</td>
<td>03</td>
<td></td>
</tr>
<tr>
<td>04</td>
<td>Son/Daughter</td>
<td>04</td>
<td></td>
</tr>
<tr>
<td>05</td>
<td>Son-in-law/Daughter-in-law</td>
<td>05</td>
<td></td>
</tr>
<tr>
<td>06</td>
<td>Grandchild</td>
<td>06</td>
<td></td>
</tr>
<tr>
<td>07</td>
<td>Father/Mother</td>
<td>07</td>
<td></td>
</tr>
<tr>
<td>08</td>
<td>Grandparent</td>
<td>08</td>
<td></td>
</tr>
<tr>
<td>09</td>
<td>Brother/Sister</td>
<td>09</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Brother-in-law/Sister-in-law</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Nephew/Niece</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Parent-in-law</td>
<td>12</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Other relative</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Non relative</td>
<td>14</td>
<td></td>
</tr>
</tbody>
</table>

* From the G or PPI form

---

I confirm that all data recorded on this form is in accordance with the information given by the respondent,

Signature of the household head, more specifically of the person who provided the information

.................................................................

Thank you for your answers.

---

Completed,
Surname and first name of the enumerator

.................................................................

Signature ...........................................................

---

Checked,
Surname and first name of the chief enumerator

.................................................................

Signature ...........................................................
**PERSONS**

**POPULATION AND HOUSING CENSUS**

---

### CENSUS REFERENCE MOMENT

Data to be recorded on the census form refers to 20 October 2011, 00:00 hours. The following shall be recorded:
- a child born on 20 October 2011 before 00:00 hours;
- a person who died on 20 October 2011 after 00:00 hours (as he/she was alive at the reference moment of the census).

The following shall not be recorded:
- a child born on 20 October 2011 after 00:00 hours (even if the child exists on the date the form is filled in);
- a person who died on 20 October 2011 before 00:00 hours.

---

### DEMOGRAPHIC CHARACTERISTICS

1. **PERSON’S ORDER NUMBER**
2. **PERSONAL NUMERIC CODE**
3. **GENDER**
   - 1 Male
   - 2 Female
4. **DATE OF BIRTH**
   - Year
   - Month
   - Day
5. **LEGAL MARITAL STATUS**
   - 1 Single → go directly to question 7
   - 2 Married
   - 3 Widow(er) → go directly to question 7
   - 4 Divorced

**QUESTION 6 APPLIES ONLY TO MARRIED WOMEN.**

6. **YEAR OF MARRIAGE**
   - 6.1 First marriage
   - 6.2 Current marriage (remarried women only)

**INTERNAL AND INTERNATIONAL MIGRATION**

7. **WHERE DOES THE PERSON CURRENTLY LIVE?**
   - In another locality of .................................................. County
   - Municipality/City/Commune ..................................................
   - In another country ..............................................................

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ETHNIC AND CULTURAL CHARACTERISTICS
EACH PERSON IS FREE TO EXPRESS HIS OR HER OPINION, WITHOUT ANY CONSTRAINTS

23 WHAT ETHNIC GROUP DOES THE PERSON CONSIDER HE/SHE BELONGS TO?

24 WHAT IS THE PERSON’S MOTHER TONGUE?

25 WHAT RELIGION DOES THE PERSON CONSIDER HE/SHE BELONGS TO?
EDUCATIONAL CHARACTERISTICS

QUESTIONS 26 AND 27 APPLY ONLY TO PERSONS BORN BEFORE JANUARY 2002.

26 HIGHEST EDUCATIONAL INSTITUTION FROM WHICH THE PERSON GRADUATED (receiving a certificate or a diploma)

26.1 NAME AND PROFILE (the master’s and PhD studies are not included; they will be written further below)

26.1.1 Bologna system

1 YES 2 NO

26.2 MASTER’S STUDIES (INCLUDING POSTGRADUATE STUDIES) – name of the educational institution

26.3 PHD STUDIES – name of the educational institution

27 OWNERSHIP OF THE EDUCATIONAL INSTITUTION FROM WHICH THE PERSON GRADUATED

1 State ownership 2 Private ownership

ECONOMIC CHARACTERISTICS

QUESTIONS 28 AND 29 APPLY ONLY TO PERSONS WHO WERE BORN BEFORE JANUARY 2006.

28 EDUCATIONAL INSTITUTION THE PERSON IS ATTENDING

28.1 NAME AND PROFILE

28.2 MASTER’S STUDIES (INCLUDING POSTGRADUATE STUDIES) – name of the educational institution

28.3 PHD STUDIES – name of the educational institution

29 DOES THE PERSON USE THE INTERNET?

1 YES 2 NO

30 CURRENT ACTIVITY STATUS (performed during the reference week 13 to 19 October 2011)

01 Employed
02 Unemployed looking for another job
03 Unemployed looking for his/her first job
04 Pupil/student
05 Pensioner
06 Housewife
07 Supported by another person
08 Supported by the state or by private organisations
09 Supported from other sources
10 Another economic situation

31 WORKING HOURS (during the reference week)

31.1 Total number of hours actually worked

31.2 of which: dedicated to the main activity

Questions 32-36 refer to the main activity and apply only to persons whose answer to question 31.1 was different from 0 and to persons whose answer to question 30 was “unemployed looking for another job” (code 2). For the latter, the characteristics corresponding to their last job shall be recorded.

32 OCCUPATION

1  Employee
2  Employer
3  Self-employed
4  Member of an agricultural company/co-operative
5  (Unpaid) family helper
6  Another situation

33 OCCUPATIONAL STATUS

1  Employee
2  Employer
3  Self-employed
4  Member of an agricultural company/co-operative
5  (Unpaid) family helper
6  Another situation

34 WORKPLACE

34.1 Full name of the unit/subunit where the person is employed

34.2 Main activity of the unit/subunit where the person is employed

35 GEOGRAPHICAL LOCATION OF THE WORKPLACE

900 In the enumeration locality
In another locality of … County
Municipality/City/Commune
In another country

36 TYPE OF SECTOR IN WHICH THE PERSON WORKS

1  Non-financial and financial companies
2  Public administration
3  Non-profit institutions serving the population
4  Households

Questions 37 and 38 apply only to persons who declared they are “unemployed” (question 30 – code 02 or code 03).

37 THE PERSON HAS BEEN LOOKING FOR A JOB SINCE:

Year Month

38 FORM OF SOCIAL PROTECTION FOR THE UNEMPLOYED

1  Unemployment allowance
2  Unemployment allowance for educational institution graduates
3  Compensatory payments
4  Other compensations
5  No longer receives any aid
6  Has never received aid
DIFFICULTIES IN PERFORMING THE CURRENT ACTIVITY
TO BE FILLED IN FOR PERSONS BORN BEFORE JANUARY 2006

I. DOES THE PERSON ENCOUNTER ANY DIFFICULTIES IN CARRYING OUT HIS/HER DAILY ACTIVITIES (AT SCHOOL, AT WORK, AT HOME, ETC.)?

1. YES 2. NO

39 EYESIGHT DIFFICULTIES, even if the person wears glasses (contact lenses)

a. Level of difficulty
   1. no difficulties → go directly to question 40
   2. not too significant
   3. significant
   4. complete inability

b. Causes of the difficulties (only for the persons who declared they have difficulties – a = 2, 3 or 4)
   1. hereditary
   2. at birth
   3. following an illness
   4. work accident
   5. road accident
   6. other

40 HEARING DIFFICULTIES, even if the person uses hearing aid

a. Level of difficulty
   1. no difficulties → go directly to question 41
   2. not too significant
   3. significant
   4. complete inability

b. Causes of the difficulties (only for the persons who declared they have difficulties – a = 2, 3 or 4)
   1. hereditary
   2. at birth
   3. following an illness
   4. work accident
   5. road accident
   6. other

41 DIFFICULTY TO WALK, TO CLIMB STAIRS

a. Level of difficulty
   1. no difficulties → go directly to question 42
   2. not too significant
   3. significant
   4. complete inability

b. Causes of the difficulties (only for the persons who declared they have difficulties – a = 2, 3 or 4)
   1. hereditary
   2. at birth
   3. following an illness
   4. work accident
   5. road accident
   6. other

42 MEMORY OR CONCENTRATION DIFFICULTIES

a. Level of difficulty
   1. no difficulties → go directly to question 43
   2. not too significant
   3. significant
   4. complete inability

b. Causes of the difficulties (only for the persons who declared they have difficulties – a = 2, 3 or 4)
   1. hereditary
   2. at birth
   3. following an illness
   4. work accident
   5. road accident
   6. other

43 SELF-CARE DIFFICULTIES (to dress or wash himself/herself)

a. Level of difficulty
   1. no difficulties → go directly to question 44
   2. not too significant
   3. significant
   4. complete inability

b. Causes of the difficulties (only for the persons who declared they have difficulties – a = 2, 3 or 4)
   1. hereditary
   2. at birth
   3. following an illness
   4. work accident
   5. road accident
   6. other

44 COMMUNICATION DIFFICULTIES (to understand or make his/her meaning clear)

a. Level of difficulty
   1. no difficulties → go directly to question 43
   2. not too significant
   3. significant
   4. complete inability

b. Causes of the difficulties (only for the persons who declared they have difficulties – a = 2, 3 or 4)
   1. hereditary
   2. at birth
   3. following an illness
   4. work accident
   5. road accident
   6. other

II. DOES THE PERSON WHO HAS ANY OF THESE DIFFICULTIES RECEIVE AID FROM SOMEONE ELSE (a person who accompanies him/her on a regular basis)?

1. YES 2. NO

I confirm that all data recorded on this form is in accordance with the information given by the respondent.

Signature of the household head, more specifically of the person who provided the information

---------------------------------------------
Thank you for your answers.

Form completion date  October 2011

Completed,
Surname and first name of the enumerator

---------------------------------------------
Signature  

Checked,
Surname and first name of the chief enumerator

---------------------------------------------
Signature  

4
 County .......................................................... Municipality/City/Commune .................................
 Component locality/Village ................................. Street ........................................................... No. ........
 Block..... Entrance..... Floor..... Apartment..... District ....

 FOLDER NUMBER
 Number of the LC form within the folder (to be taken from the LC form corresponding to the dwelling the person belongs to)
 Number of the G form of the dwelling
 Person’s order number in the G or PPI form

 SURNAME AND FIRST NAME
 (the initial of the father’s first name or of the mother’s first name (if the father is unknown) shall also be written)

 1 PERSONAL NUMERIC CODE

 2 INDICATE THE COUNTRY WHERE THE PERSON LIVES

 3 WHEN DID THE PERSON LEAVE THE ENUMERATION LOCALITY TO GO ABROAD?
 1 o less than 6 months ago 4 o 2 – 3 years ago
 2 o 6 months – 1 year ago 5 o 3 years ago or more than 3 years ago
 3 o 1 – 2 years ago

 4 DOES THE PERSON LIVING ABROAD WORK THERE?
 1 o YES
 2 o NO ➔ go directly to question 6
 3 o NO, he/she is searching for a job ➔ go directly to question 6

 DATA CONFIDENTIALITY
 All information in this form is confidential and shall be used for exclusively statistical purposes.

 DATA PROVISION IS COMPULSORY
 All persons shall be required to provide data, in accordance with Art. 2 of Government Ordinance No 36/2007 on the conducting of the 2011 Population and Housing Census. Refusal to provide data shall be deemed a contravention and shall be punishable under Art. 21 of Government Decision No 1502/2009 on the organisation and carrying out of the Romanian Population and Housing Census in 2011.
5 FIELD THE PERSON WORKS IN
1 ☐ Agriculture
2 ☐ Industry
3 ☐ Construction
4 ☐ Restaurants, bars
5 ☐ Hotels
6 ☐ Transport
7 ☐ Computers/Informatics
8 ☐ Household services
9 ☐ Health
10 ☐ Another field

6 DOES THE PERSON SEND MONEY TO THE HOUSEHOLD MEMBERS?
1 ☐ YES
2 ☐ NO end form

7 HOW OFTEN DOES THE PERSON LIVING ABROAD SEND MONEY TO THE HOUSEHOLD MEMBERS?
1 ☐ Monthly
2 ☐ Every 3 months
3 ☐ Every 6 months
4 ☐ Yearly
5 ☐ Occasionally
6 ☐ I don't know

Completed,
Surname and first name of the enumerator
..................................................
Signature ....................................

Checked,
Surname and first name of the chief enumerator
..................................................
Signature .....................................

I confirm that all data recorded on this form is in accordance with the information given by the respondent,
Signature of the household head, more specifically of the person who provided the information
..................................................
Thank you for your answers.

Form completion date ___ October 2011