



count me in

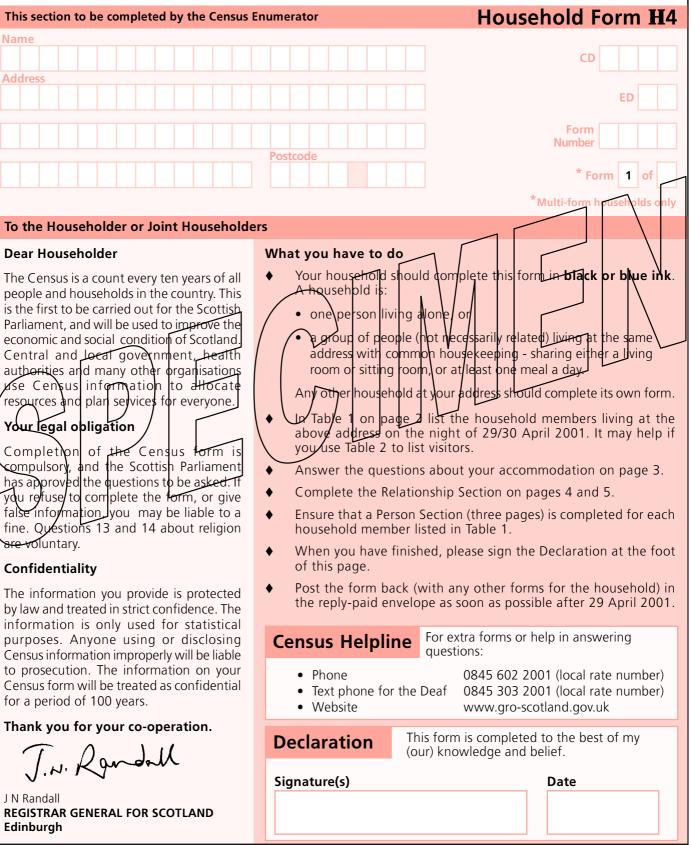


Table 1 Household Members

- Using **black or blue ink**, list all members of your household who usually live at this address, including yourself.
 - Start with the householder or joint householders.
 - Include anyone who is temporarily away from home on the night of 29/30 April 2001 and who usually lives at this address.
 - Include any baby born before 30 April 2001, even if he or she is still in hospital.
 - Include schoolchildren and students if they live at this address during the school, college or university term.
 - Also include schoolchildren and students who are away from home during the school, college or university term **if this is their normal vacation address**. (Only basic information is required in the Person Section.)
 - Include a spouse or partner who works away from home for part of the time, or is a member of the armed forces **if this is the family home**.
 - Include other people with more than one address if they live at this address for the majority of time.
 - Include anyone who is staying with you **if he or she has no other usual address.**
- An Individual Form is available with an envelope for anyone who wishes not to disclose information to others in the household. Please leave **blank** the three-page Person Section on this form (or any *Continuation Form*) for anyone who completed an *Individual Form* and *s* the box for the person in the column marked 'Individual Form'.

| Person No. | First name and surname of househol | d member | Individual Form | | | | | |
|---|--|---|-----------------|--|--|--|--|--|
| Person 1 | | | Ц Д | | | | | |
| Person 2 | | | | | | | | |
| Person 3 | | | | | | | | |
| Person 4 | | | | | | | | |
| Person 5 | | | | | | | | |
| • You will n | ead one or more Continuation Forms | if there are more than 5 household members | | | | | | |
| Person 6 | | | | | | | | |
| Person | | | | | | | | |
| Person 8 | | | | | | | | |
| Person 9 | | | | | | | | |
| Person 10 | | | | | | | | |
| Table 2 | lisitors | | | | | | | |
| | ou to complete the form you may oril, who usually live elsewhere. | y use the Table below to list any visitors at this address, on th | ne night of | | | | | |
| • Note that | t visitors from elsewhere in the U | K must be included on a Census form at their usual address. | | | | | | |
| If there are only visitors in the household at this address, please answer questions H1 to H5 on Page 3. Afterwards, please sign the declaration on the front page. No further information is required. | | | | | | | | |
| First name a | and surname of visitor | Usual address | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Please answer the questions about household accommodation on Page 3 opposite. | | | | | | | | |

| ŀ | low to Complete the | Re | emaining Questions | | |
|-------------------|---|--|---|-----|---|
| R P li b | Remember to use black or blue ink. The appropriate box, ke this 1 . If you mark the wrong ox, fill in the box and put a tick in the right one, like this 1 . | If yo like on Wh ans leav Stai | ou tick a box with an instruction Go to H11, you should move to the question indicated. were you are required to write in an wer please use CAPITAL LETTERS and we one space between each word. rt a new line if a word will not fit. example on right. | [| What is your country of birth? Elsewhere, please write in the present name of the country S O T H I |
| ŀ | Iousehold Accommod | lat | ion | | |
| H1 | What type of accommodation does your household occupy? A whole house or bungalow that is: Detached Semi-detached Terraced (including end-terrace) A flat, maisonette, or apartment that is: In a purpose-built block of flats or tenement Part of a converted or shared house (includes bed-sits) | | Do you have a bath/shower and toilet for use only by your household? Yes No What is the lowest floor level of your household's living accommodation? Basement or semi-basement Ground floor (street level) First floor (floor above street level) | H8 | Does your household own or rent the accommodation? ✓ one box only. Owns outright Go to H11 Owns with a mortgage or loan Go to H11 Pays part rent and part mortgage (shaled owneiship) Go to H11 |
| H12 | In a commercial building (for example, in an office building, or hotel, or over a shop) Mobile or temporary structure: A caravan or other noble or temporary structure Is your household's accommodation self-contained? This means that all the rooms, including the kirchen, bathroom | H6 | Second floor Third or fourth floor Fifth floor or higher Does your accommodation have central heating? If you have central heating available, Yes' whether or rot you use it Central heating includes: • as, oil or solid fuel central | H9 | Rents Go to H9 Lives here rent free Go to H9 Who is your landlord? Council (Local Authority) Scottish Homes |
| | and toilet are behind a door that only your household can use. Yes, all the rooms are behind a door that only our household can use No | | heating night storage heaters warm air heating underfloor heating Yes, in some or all rooms No | | Housing Association Housing Co-operative Charitable Trust Non-profit housing company Private landlord or letting agency Employer of a household member |
| H3 | How many rooms do you have for use only by your household? <u>Do not count</u> bathrooms, toilets, | H7 | How many cars or vans are owned, or available for use, by one or more members of your household? Include any company car or van if | | Relative or friend of a household member Other |
| • | halls or landings, or rooms that can only be used for storage such as cupboards. <u>Do count</u> all other rooms, for example kitchens, living rooms, bedrooms, utility rooms and studies. If two rooms have been converted | × · | available for private use. None One Two | H10 | Is the accommodation provided furnished or unfurnished? |
| | into one, count them as one room. Number of rooms | | Three Four or more, <i>please</i> write in number | H11 | Please turn the page. |

Household Members and their Relationships within the Household

- The example below shows how to provide the relationship information for a household with John Smith, his wife (Mary) and their three children (Alison, Steven and James).
- In this example Steven's (Person 4) relationship to Person 1 is son, to Person 2 is son and to Person 3 is brother.

| Name of Person 1 | Name of Person 2 | | | |
|--|--|-------------|---|----------|
| First name JOHN | | | First name ALISON | |
| SMITH | SMITH | | SMITH | |
| | Relationship of Person 2 to Person + | 1 | Relationship of Person 3 to Person | → 1 2 |
| ENTER NAME | Husband or wife | | Husband or wife | |
| OF PERSON 1 | Partner | | Partner | |
| ABOVE | Son or daughter | | Son or daughter | |
| | Step-child | | Step-child | |
| | Brother or sister | | Brother or sister | |
| Print the name of each hous ✓ a box to show the relatio Provide information on relatio | onship of each person to ot | her membe | rs of your household. | using an |
| Individual Form for privacy re | | | | |
| | \neg | | N V /I r | |
| me of Person 1 | Name of Person 2 | | Name of Person | |
| | First name | | First name | |
| rname | Surname | | | |
| | | | | |
| | Relationship of Person 2 to Person | | Relationship of Person 3 to Person | → 1 2 |
| | | -7 I | reison 5 to reison | |
| | | _ | | |
| ENTER NAME | Husband or wife | | Husband or wife | |
| ENTER NAME OF PERSON 1 | Partner | | Partner | |
| | | | | |
| | Partner | | Partner | |
| | Partner Son or daughter | | Partner Son or daughter | |
| | Partner Son or daughter Step-child | | Partner Son or daughter Step-child | |
| | Partner Son or daughter Step-child Brother or sister | | Partner Son or daughter Step-child Brother or sister | |
| | Partner Son or daughter Step-child Brother or sister Mother or father | | Partner Son or daughter Step-child Brother or sister Mother or father | |
| | Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-fat | | Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step- | |
| | Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-fat Grandchild | L | Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step- Grandchild | |

| | Name of Person 4 | | Name of Person 5 | |
|---|---|-------|---|-------|
| | SMITH | | SMITH | |
| | Relationship of Person 4 to Person 🔸 | 1 2 3 | Relationship of Person 5 to Person 🔺 1 | 2 3 4 |
| ł | Husband or wife | | Husband or wife | |
| ł | Partner | | Partner | |
| | Son or daughter | | Son or daughter | |
| | Step-child | | Step-child | |
| ł | Brother or sister | | Brother or sister | |
| | Name of Person 4 First name Sumame Relationship of Person 4 to Person | | Name of Person 5 First name Burname Relationship of Person 5 to Person -> | |
| | Husband or wife | | Husband or wife | |
| | Partner | | Partner | |
| / | Son or daughter | | Son or daughter | |
| | Step-child | | Step-child | |
| | Brother or sister | | Brother or sister | |
| | Mother or father | | Mother or father | |
| | Step-mother or step-fath | | Step-mother or step-father | |
| ¢ | | | | |
| | Grandchild | | Grandchild | |
| (| Grandchild Grandparent | | Grandchild Grandparent | |
| (| Grandchild Grandparent Other related | | Grandchild Grandparent Other related | |

Where a household member is completing an *Individual Form* for privacy reasons, leave blank his or her three-page Person Section on this form (or on any *Continuation Form*).

| Person 1 | | | | | | | |
|---|------------------|---|--|--|--|--|--|
| See top of page 3 for how to enter or amend answers to questions. Please use black or blue ink. | | | | | | | |
| 1 What is your name? (Person 1 | able 1) | | | | | | |
| First name and surname | | | | | | | |
| | | | | | | | |
| 2 What is your sex? | - | ur usual address one | e year ago? ol or a student one year ago, give the | | | | |
| Male Female | address at whi | ch you were living dur | ring the school/college/university term. | | | | |
| 3 What is your date of birth? | | n after 29 April 2000, √ s shown on the front of | 'No usual address one year ago'. | | | | |
| Day Month Year | | | | | | | |
| | | ddress one year ago | | | | | |
| 4 What is your marital status (on 29 April 2001)? | Elsewhere, | please write in below | | | | | |
| Single (never married) | | | | | | | |
| Married (first marriage) | | | | | | | |
| Re-married | | | | | | | |
| Separated (but still legally married) | | | Postcode | | | | |
| Divorced | | | | | | | |
| Widowed | 10 What addres | do you travel to fo | r your main job or course of study | | | | |
| 5 Are you a schoolchild or studen | (including sch | | | | | | |
| in full-time education? | \sim | a depot, write in dep | nd most time for work or study. of address. | | | | |
| Yes Foo to 6 | Not curren | tly working or studying | Go to 12 | | | | |
| No Go to Z | Work or st | udy mainly at or from ho | me 🕞 Go to 12 | | | | |
| 6 Do you live at the address shown on the front of this for | → | ace | | | | | |
| during the school, college or | Work of o | ffshore installation pleas | se use the address panel below to write om, for example "ABERDEEN" | | | | |
| University term? Only soswer this question if you | | ypu travel offshore fro s below, please write ir | | | | | |
| have answered 'Yes' to Question | | s beitary, piedse write i | | | | | |
| Yes, I live at this address during the school/college/university terr | | | | | | | |
| Go to 7 | | | | | | | |
| 1 No, I live elsewhere during the | | | | | | | |
| school/college/university term | | | Postcode | | | | |
| | | | | | | | |
| 7 Over the last twelve months would you say your health has | 11 How do you | usually travel to you | ur main place of work or study | | | | |
| on the whole been: | (including sch | | | | | | |
| Good? Fairly good? | • J one box only | | | | | | |
| Not good? | | | nce, of your usual journey to work or study. | | | | |
| 8 Do you have any long-term illness, health problem or | | d, tube, metro or light rail | Passenger in a car or van | | | | |
| disability which limits your dai activities or the work you can de | Train | or coach (au blic constants) | Motor cycle, scooter or moped | | | | |
| • Include problems which are due t | | or coach (public or private) | Bicycle | | | | |
| old age. | Taxi or min | | On foot | | | | |
| Yes No | Driving a ca | ar or van | Other | | | | |

| Ρ | erson 1 - continued | | | | |
|---------|---|----|--|----|---|
| 12 | What is your country of birth? | 15 | What is your ethnic group? Choose ONE section from A to E, then | 16 | Can you understand, speak, read, or write Scottish Gaelic? |
| | Scotland | | ✓ the appropriate box to indicate | ٠ | ✓ all the boxes that apply. |
| | England | А | your cultural background. White | | Understand spoken Gaelic |
| | Wales | | Scottish | | Speak Gaelic |
| | Northern Ireland | | Other British | | Read Gaelic |
| | Republic of Ireland | | lrish | | Write Gaelic |
| | Elsewhere, please write in the present name of the country | | Any other White background, | | None of these |
| | | | | 17 | Do you look after, or give any |
| | | | | | help or support to family members, friends, neighbours |
| | | | | • | or others because of: long-term physical or mental |
| 13 | What religion, religious denomination or body do you | В | Mixed | | ill-health or disability, or problems related to old age? |
| | belong to? | | Any Mixed background, please write in | • | Do not count anything you do as |
| | Church of Scotland | | | | part of your paid employment. ✓ time spent in a typical week. |
| | Roman Catholic | | | | |
| | Other Christian, <i>please write in</i> | | | | Yes, 1-19 hours a week |
| | | С | Asian, Asian Scottish or Asian British | | Yes, 20-49 hours a week |
| | | | | | Yes, 50+ hours a week |
| | Buddhist | -1 | Pakistani | 18 | If you are aged 16 to 74 |
| | Hindu Jewish | | Bangladesti | 7 | Go ta 19 |
| | | - | Chinese | | If you are aged 15 and under, or |
| / | Another Religion) please write in | | Any other Asian background, | | 75 and over Go to 35 |
| ľ | | | | 10 | Last week, were you doing any |
| | | | | | work: |
| 14 | What religion, religious | | | | as an employee, as self-employed/freelance, |
| ſ | denomination or body were you brought up in? | D | Black, Black Scottish or Black British | • | in your own/family business, or |
| \land | U Vone | | Caribbean | • | on a Government sponsored training scheme? |
| | Church of Scotland | | African | • | ✓ 'Yes' if you were away from work ill, on maternity leave, on holiday or |
| | Roman Catholic | | Any other Black background, | | temporarily laid off. ✓ 'Yes' for any paid work, including |
| | Other Christian, <i>please write in</i> | | | | casual or temporary work, even if only |
| | | | | • | for one hour. ✔ 'Yes' if you worked, paid or |
| | | | | | unpaid, in your own/family business. |
| | Buddhist | E | Other ethnic background | | Yes Go to 25 |
| | Hindu Jewish | | Any other background, please write in | | No Go to 20 |
| | Muslim Sikh | | | 20 | Were you actively looking for any kind of paid work during the last |
| | Another Religion, <i>please write in</i> | | | | kind of paid work during the last 4 weeks? |
| | | | | | Yes No |
| | | | | | Please turn over |

| Ρ | erson 1 - continued | |
|----|---|---|
| 21 | If a job had been available last week, could you have started it within 2 weeks? | How many hours (to the nearest full hour) a week do (did) you usually work in your main job? Give average for last four weeks. Number of hours worked a week |
| | Yes No | 30 What is (was) the full title of your <i>main</i> job? |
| 22 | Last week, were you waiting to start a job already obtained? | For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT. Civil Servants, Local Government Officers - give job title not grade or pay band. |
| 23 | Yes No Last week, were you any of the following? ✓ all the boxes that apply. | |
| | Retired Student Looking after home/family Permanently sick/disabled None of the above | 31 Describe what you do (did) in your main job. Image: Second |
| 24 | Have you ever worked? Yes, please write in the year you last worked Go to 25 No, have never worked Go to 34 | What is the full name of the organisation you work (worked) for in your main job? Please write in or ✓ one box below as appropriate. If you have your own business, write in the name |
| • | Answer the remaining questions for the main job you were soing last week, or if not working last week, your last main job. Your main job is the job in which you usually work the most hours. Do (did) you work as an employee or are (were) you self-employed? | Self-employed/freelance Work (worked) for a private individual What is (was) the business of the organisation which you named above at Question 32? For example, MAKING SHOES, REPAIRING CARS, ECONDARY EDUCATION. Civil Servante, Local Government Officers prease specify your Department. |
| 5 | Self-employed with employees Self-employed/freelance without employees | Which of these qualifications do you have? ✓ all boxes that apply. O' Grade, Standard Grade, Intermediate 1, Intermediate 2, GCSE, CSE, Senior |
| • | Do (did) you supervise any other employees? A supervisor or foreman is responsible for overseeing the work of other employees on a day-to-day basis. Yes No | Certificate or equivalent Higher Grade, CSYS, Scottish Group Award at Higher, 'A' Level, AS Level, Advanced Senior Certificate or equivalent GSVQ/SVQ Level 1 or 2, SCOTVEC/National Certificate Module, BTEC First Diploma, City and Guilds Craft, RSA Diploma or equivalent GSVQ/SVQ Level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds |
| | How many people work (worked) for your employer at the place where you work (worked)? If you are (were) self-employed, to show how many people you employ (employed) including | Advanced Craft, RSA Advanced Diploma or equivalent HNC, HND, SVQ Level 4 or 5, RSA Higher Diploma or equivalent First Degree, Higher Degree Professional Qualifications (for example, teaching, accountancy) None of these |
| | yourself. 1-9 10-24 25-499 500 or more | 35 If there is only 1 household member please sign the Declaration on front page leaving the rest of the form blank. Otherwise go to questions for Person 2. |

| P | Person 2 | | | | | | | | | | | | | | | | | | |
|-----------------|--|-------|------|-----------|--------|------|---------------|-------|-------|--------|-------------|-------|-------------|------|-------|-----------------------|------------|------------------|-------------|
| ٠ | See top of page 3 for how to ent | ter o | or a | mei | nd a | ns | wer | 's to | o q | ues | tic | ons | . Please | e u | se | black or l | blue in | k. | |
| 1 | What is your name? (Person 2 in | Tab | le 1 |) | | | | | | | | | | | | | | | |
| | First name and surname | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| 2 | What is your sex? | 9 | | | | - | | | | | | | one ye | | - | o? lent one y | | الد مناد | |
| | Male Female | • | ad | dres | ss at | w | hich | you | w | ere | livi | ing | during | the | e sc | hool/colle | ege/univ | ersity t | |
| 3 | What is your date of birth? | • | For | | | | | | | | | | | | | l address | one yea | r a go' . | |
| | Day Month Year | | | | | | | | | | | | of the f | orn | n | | | | |
| | | | | | | | addr | | | | | - | | L | | Same as P | Person 1 | | |
| 4 | What is your marital status | | | El | sewh | here | e, ple | ease | W | rite | in I | belo | ow | | | | | | |
| | (on 29 April 2001)? | | | | | | | | | | | | | | | | | | |
| | Single (never married) | | | | | | | | | | | - | | | | | | | |
| | Married (first marriage) | | | | | | | | | | | | | | | | | | |
| | Re-married | | | | | | | | | | | Г | | | Г | | | | |
| | Separated (but still legally married) | | | - | | | | | | | | | | | | Postcode | | | |
| | Divorced | | | | | | | | | | | | | | | | | | |
| | Widowed | 10 | | | | | | | ou | trav | ve | l to | for yo | ur | ma | in job o | r-course | e of stu | фy |
| 5 | Are you a schoolchild or student | | - | | - | - | choc he pl | - | w | here | v | ou e | bend m | 105 | t tii | ne for wo | ork or st | udv | N |
| | in full-time education? | • | | | - | - | | | | | | | depot a | | | | |] | |
| | Yes Go to 6 | | | /N | ot cu | irre | ntly | worl | king | or | stu | dyii | ng\/ / | | G | to 12 | | ` | \setminus |
| | □ No ► Go to 7 | | Ъ | Ŵ | /prk (| ors | study | ' ma | inly | at c | or f | rþn | n home | | G | to 12 | | | \square |
| 6 | Do you live at the address shown on the front of this form | | ф | N | o fixe | ed p | place | | | | | \ | | | | | | | |
| / | during the school, college or | | Щ | W | prk (| oŋ | off | ore | ins | talla | tio | n p | ease us | ie 1 | the | address p mple "AB | oanel be | low to | write |
| | university term? | 「 | Д | | | | | | | | | | | or | exa | mple "AB | BERDEEN | ! ″ | |
| | have answered 'Yes' to Question 5 | | 1 | \bigvee | ie ac | | | eių | μp | ieas | eı | | te in | | _ | | | | |
| | Yes, I live at this address during the school/college/university term | |] | | | | | | | | | | | | | | | | |
| | $\int \int Goto 7$ | | | | | | | | | | | | | | | | | | |
| $\left \right $ | No, I live elsewhere during the | | | | | | | | | | | | | | | | | | |
| | school/college/university term | | | | | | | | | | | | | | | | | | |
| | Go to 35 | | | | | | | | | | | | | | | Postcode | | | |
| 7 | Over the last twelve months | | | | | | | | | | | | | | | | | | |
| | would you say your health has on the whole been: | 11 | | | | | ı usı choc | | y t | rave | el · | to | your m | air | ı pl | ace of w | ork or | study | |
| | Good? Fairly good? | • | - | | e box | - | | ,,,, | | | | | | | | | | | |
| | Not good? | • | - | | | | - | long | jest | t par | t, <i>l</i> | by d | listance, c | of y | our | usual jourr | ney to w | ork or st | udy. |
| 8 | Do you have any long-term | | | U | nderg | grou | und, ti | ube, | met | tro or | r lig | ht ra | ail | E | | Passenger | r in a car | or van | |
| | illness, health problem or disability which limits your daily | | | Tr | ain | | | | | | | | | [| | Motor cyc | cle, scoot | er or mo | oped |
| | activities or the work you can do? | | | Bu | us, mi | nibı | us or o | coach | n (pi | ublic | orp | oriva | te) | Γ | | Bicycle | | | |
| ٠ | Include problems which are due to old age. | | | Та | ixi or | mi | inical | С | | | | | | Г | ٦ | On foot | | | |
| | Yes No | | | D | rivinc |) a | car o | or va | n | | | | | Г | | Other | | | |
| | | | | | - | | | | | | | | | L | | | Please | e turn o | over |

| Person 2 - continued | 1 | | | |
|---|----|---|----|--|
| 12 What is your country of birth? | 15 | What is your ethnic group? | 16 | Can you understand, speak, read, or write Scottish Gaelic? |
| Scotland | • | Choose ONE section from A to E, then ✓ the appropriate box to indicate | • | ✓ all the boxes that apply. |
| England | Δ | your cultural background. White | | Understand spoken Gaelic |
| Wales | | Scottish | | Speak Gaelic |
| Northern Ireland | | Other British | | Read Gaelic |
| Republic of Ireland | | Irish | | Write Gaelic |
| Elsewhere, <i>please write in the</i> | | Any other White background, | | None of these |
| present name of the country | | please write in | | |
| | | | 17 | help or support to family |
| | | | | members, friends, neighbours or others because of: |
| 13 What religion, religious | в | Mixed | • | long-term physical or mental ill-health or disability, or |
| denomination or body do you belong to? | | Any Mixed background, | | problems related to old age? |
| None None | | please write in | • | Do <i>not</i> count anything you do as part of your paid employment. |
| Church of Scotland | | | • | ✓ time spent in a typical week. |
| Roman Catholic | | | | |
| Other Christian, <i>please write in</i> | с | Asian, Asian Scottish or Asian | Г | Yes, 1-19 hours a week |
| | | British | | Yes, 2049 hours a week |
| | | | | Yes, 50+ hours a week |
| Buddhist | | | 18 | If you are aged 16 to 74 |
| Hindu Jewish | | Baygladestr | • | |
| Moslim Sikh | - | | | If you are aged 15 and under, or 75 and over |
| Another Religion, please write in | | Ahy other Asjan background, please jvrite in | | Go to 35 |
| | | | 19 | Last week, were you doing any |
| | ſ | | | work: as an employee, |
| 14 What religion, religious | D | Black, Black Scottish or Black | • | as self-employed/freelance, |
| denomination or body were you brought up in? | | British | • | in your own/family business, or on a Government sponsored |
| None L | | Caribbean | | training scheme? |
| Church of Scotland | | African | • | ✓ 'Yes' if you were away from work ill, on maternity leave, on holiday or |
| Roman Catholic | | Any other Black background, please write in | | temporarily laid off. |
| Other Christian, <i>please write in</i> | | | ľ | casual or temporary work, even if only for one hour. |
| | | | • | 🖌 'Yes' if you worked, paid or |
| | | | | unpaid, in your own/family business. |
| Buddhist | E | Other ethnic background | | Yes Go to 25 |
| Hindu Jewish | | Any other background, please write in | | No ► Go to 20 |
| Muslim Sikh | | | 20 | Were you actively looking for any |
| Another Religion, <i>please write in</i> | | | | kind of paid work during the last 4 weeks? |
| | | | | Yes No |
| | | | | |

| Ρ | erson 2 - continued | | |
|------------------|--|---------|--|
| 21 | If a job had been available last week, could you have started it within 2 weeks? | 29 ♦ | How many hours (to the nearest full hour) a week do (did) you usually work in your <i>main</i> job? Give average for last four weeks. Number of hours worked a week |
| | Yes No | 30 | What is (was) the full title of your <i>main</i> job? |
| 22 | Last week, were you waiting to | ٠ | For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT. |
| | start a job already obtained? | ٠ | Civil Servants, Local Government Officers - give job title not grade or pay band. |
| 23 | Last week, were you any of the | | |
| | following? | | |
| • | ✓ all the boxes that apply. | | |
| | Retired Student | 31 | Describe what you do (did) in your <i>main</i> job. |
| | Looking after home/family | | |
| | Permanently sick/disabled | | |
| | None of the above | | |
| 24 | Have you ever worked? | 32 | What is the full name of the organisation you work (worked) for in your <i>main</i> job? |
| | Yes, please write in the year you last worked | • | Please write in or 🗸 one box below as appropriate. If you have your own business, write in the name |
| | Go to 25 | | n you have your own business, write in the name |
| | No, have never worked | | |
| | Go to 34 | | |
| 25 | Answer the remaining questions for the <i>main</i> job you were doing | - | Self-employed/freelance |
| | last week, or if not working last | 33 | What is (was) the business of the organisation which you named |
| ٠ | week, your last main job. Your main job is the job in which | | above at Question 32? |
| | you usually work the most hours. | | For example, MAKING SHOES, REPAIRING CARS, SECONDARY EDUCATION. Civil Servan's, Loca Government Officers please specify your Department. |
| 26 | employee or are (were) you | | |
| $\left \right $ | self-employed? | | |
| | Empldyee | _ | |
| r | Self-employed with employees | 34 | Which of these qualifications do you have? |
| $\left \right $ | Self-employed/freelance without | | 'O' Grade, Standard Grade, Intermediate 1, Intermediate 2, GCSE, CSE, Senior |
| 27 | Do (did) you supervise any | | Certificate or equivalent |
| • | other employees? A supervisor or foreman is responsible | | Higher Grade, CSYS, Scottish Group Award at Higher, 'A' Level, AS Level, Advanced Senior Certificate <i>or equivalent</i> |
| Ť | for overseeing the work of other employees on a day-to-day basis. | | GSVQ/SVQ Level 1 or 2, SCOTVEC/National Certificate Module, BTEC First Diploma, City and Guilds Craft, RSA Diploma <i>or equivalent</i> |
| | Yes No | | GSVQ/SVQ Level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds |
| 28 | How many people work | | Advanced Craft, RSA Advanced Diploma <i>or equivalent</i> |
| | (worked) for your employer at the place where you work (worked)? | | HNC, HND, SVQ Level 4 or 5, RSA Higher Diploma or equivalent First Degree, Higher Degree |
| ٠ | If you are (were) self-employed, | | Professional Qualifications (for example, teaching, accountancy) |
| | ✓ to show how many people you <i>employ (employed)</i> including yourself. | | None of these |
| | 1-9 10-24 | 35 | If there are only 2 household members, the householder(s) should now sign the Declaration on front page and the remaining pages |
| | 25-499 500 or more | | should be left blank. Otherwise go to questions for Person 3. |

| Person 3 | |
|---|---|
| | er or amend answers to questions. Please use black or blue ink. |
| 1 What is your name? (Person 3 in | |
| First name and surname | |
| | |
| 2 What is your sex? | 9 What was your usual address one year ago? ♦ If you were a child at boarding school or a student one year ago, give the |
| Male Female | address at which you were living during the school/college/university term. ♦ For a child born after 29 April 2000, ✓ 'No usual address one year ago'. |
| 3 What is your date of birth? Day Month Year | The address shown on the front of the form |
| | No usual address one year ago Same as Person 1 |
| 4 What is your marital status | Elsewhere, <i>please write in below</i> |
| (on 29 April 2001)? | |
| Single (never married) | |
| Married (first marriage) | |
| Re-married | |
| Separated (but still legally married) | Postcode |
| Divorced | |
| Widowed | 10 What address do you travel to for your main job or course of study (including school)? |
| 5 Are you a schoolchild or student in full-time education? | Answer for the place where you spend most time for work or study. |
| Yes > Go to 6 | If you eport to a depot, write in depot address. |
| \square No \blacktriangleright Go to $_7$ | Not currently working or studying 60 to 12 |
| 6 Do you live at the address | Work or study mainly at or from home - Go to 12 |
| shown on the front of this form during the school, college or | No fixed place |
| university term? | Work on offshore installation please use the address panel below to write in where you travel offshore from, for example "ABERDEEN" |
| Only answer this question if you have answered 'Yes' to Question 5 | The address below, please write in |
| Yes, I live at this address during | |
| the school/college/university term | |
| No, I live elsewhere during the | |
| school/college/university term | |
| Go to 35 | Postcode |
| 7 Over the last twelve months would you say your health has | |
| on the whole been: | 11 How do you usually travel to your main place of work or study (including school)? |
| Good? Fairly good? | ♦ 🖌 one box only. |
| Not good? | ◆ ✓ the box for the longest part, <i>by distance</i> , of your usual journey to work or study. |
| 8 Do you have any long-term illness, health problem or | Underground, tube, metro or light rail Passenger in a car or van |
| disability which limits your daily | Train Motor cycle, scooter or moped |
| activities or the work you can do? Include problems which are due to | Bus, minibus or coach (public or private) Bicycle |
| old age. | Taxi or minicab On foot |
| Yes No | Driving a car or van Other |

| Person 3 - continued | | |
|---|---|--|
| 12 What is your country of birth? | 15 What is your ethnic group? Choose ONE section from A to E, then | 16 Can you understand, speak, read, or write Scottish Gaelic? |
| England | the appropriate box to indicate your cultural background. | Inderstand spoken Gaelic |
| Wales | A White | Speak Gaelic |
| Northern Ireland | Scottish | |
| Republic of Ireland | Other British | Read Gaelic |
| Elsewhere, <i>please write in the</i> | Irish | Write Gaelic |
| present name of the country | Any other White background, please write in | None of these |
| | | 17 Do you look after, or give any help or support to family |
| | | members, friends, neighbours or others because of: |
| 13 What religion, religious denomination or body do you | B Mixed | long-term physical or mental ill-health or disability, or |
| belong to? | Any Mixed background, | problems related to old age? Do not count anything you do as |
| None None | please write in | part of your paid employment. |
| Church of Scotland | | ✓ time spent in a typical week. No |
| Roman Catholic | | Yes, 1-19 hours a week |
| Other Christian, <i>please write in</i> | C Asian, Asian Scottish or Asian British | Yes, 2049 hours a week |
| | | Yes, 50+ hours a week |
| | Pakistani | 18 If you are aged 16 to 74 |
| Buddhist | Bangladeshi | $ \mathbf{G} \mathbf{G} $ |
| Hindu Jewish | Chinese | If you are aged 15 and under, or |
| Muslim Sikh | Any other Asjan background, | 75 and over |
| Another Religion, please write in | please write in | Go to 35 |
| | | 19 Last week, were you doing any work: |
| 14 What religion, religious | | as an employee, as self-employed/freelance, |
| denomination or body were you brought/up in? | D Black, Black Scottish or Black British | in your own/family business, or |
| None None | Caribbean | on a Government sponsored training scheme? |
| Church of Scotland | African | ♦ √ 'Yes' if you were away from work |
| Roman Catholic | Any other Black background, | ill, on maternity leave, on holiday or temporarily laid off. |
| Other Christian, <i>please write in</i> | please write in | Yes' for any paid work, including casual or temporary work, even if only |
| | | for one hour. ♦ ✓ 'Yes' if you worked, paid or |
| | | unpaid, in your own/family business. |
| Buddhist | E Other ethnic background | 🗌 Yes 🍉 Go to 25 |
| 🔲 Hindu 🔲 Jewish | Any other background, | 🔲 No 📂 Go to 20 |
| Muslim Sikh | | 20 Were you actively looking for any |
| Another Religion, <i>please write in</i> | | kind of paid work during the last 4 weeks? |
| | | Yes No |
| | | Please turn over |

| Ρ | Person 3 - continued | | | | |
|-----------------|---|----|---|--|--|
| 21 | If a job had been available last week, could you have started it within 2 weeks? | • | How many hours (to the nearest full hour) a week do (did) you usually work in your <i>main</i> job? Give average for last four weeks. Number of hours worked a week | | |
| | Yes No | 30 | What is (was) the full title of your <i>main</i> job? | | |
| | Last week, were you waiting to start a job already obtained? | | For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT. Civil Servants, Local Government Officers - give job title not grade or pay band. | | |
| • | Last week, were you any of the following? ✓ all the boxes that apply. Retired Student Looking after home/family Permanently sick/disabled None of the above | 31 | Describe what you do (did) in your <i>main</i> job. | | |
| 24 | Have you ever worked? | | What is the full name of the organisation you work (worked) for in your | | |
| 25 | Yes, please write in the year you last worked Go to 25 No, have never worked Go to 34 Answer the remaining questions. | • | main job? Please write in or \checkmark one box below as appropriate. If you have your own business, write in the name Self-employed/freelance Work (worked) for a private individual | | |
| 26 | for the main job you were doing last week, or if not working last week, your last main job. Your main job is the job in which you usually work the most hours. Do (diel) you work as an employee or are (were) you self-employed? | | What is (was) the business of the organisation which you named above at Question 32? For example, MAKING SHOES, REFAIRING CARS, SECONDARY EDUCATION. Civil Servants, Local Government Officers please specify your Department. | | |
| $\left \right $ | Self-employed with employees | | Which of these qualifications do you have? | | |
| $ \setminus$ | Self-employed/freelance without | • | ✓ all boxes that apply. 'O' Grade, Standard Grade, Intermediate 1, Intermediate 2, GCSE, CSE, Senior | | |
| • | Do (did) you supervise any other employees? A supervisor or foreman is responsible for overseeing the work of other employees on a day-to-day basis. Yes No How many people work (worked) for your employer at the place where you work | | Certificate <i>or equivalent</i> Higher Grade, CSYS, Scottish Group Award at Higher, 'A' Level, AS Level, Advanced Senior Certificate <i>or equivalent</i> GSVQ/SVQ Level 1 or 2, SCOTVEC/National Certificate Module, BTEC First Diploma, City and Guilds Craft, RSA Diploma <i>or equivalent</i> GSVQ/SVQ Level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft, RSA Advanced Diploma <i>or equivalent</i> HNC, HND, SVQ Level 4 or 5, RSA Higher Diploma <i>or equivalent</i> First Degree, Higher Degree | | |
| ٠ | (worked)? If you are (were) self-employed, | | Professional Qualifications (for example, teaching, accountancy) | | |
| | Image: to show how many people you employ (employed) including yourself. Image: total relation of the show how many people you employ (employed) including yourself. Image: total relation of the show how many people you employ (employed) including yourself. Image: total relation of the show how many people you employ (employed) including yourself. Image: total relation of the show how many people you employ (employed) including yourself. Image: total relation of the show how many people you employ (employed) including yourself. Image: total relation of the show how many people you employ (employed) including you employed) including you employ (employed) including you employed) including you employed you employed) including you employed you employ employed you employ employed you employed | | None of these If there are only 3 household members, the householder(s) should now sign the Declaration on front page and the remaining pages | | |
| | 25-499 500 or more | | should be left blank. Otherwise go to questions for Person 4. | | |

| Person 4 | | | | |
|--|----------|---|--|--|
| See top of page 3 for how to ent | er oı | r amend answers to questions. Please use black or blue ink. | | |
| 1 What is your name? (Person 4 in | Tab | le 1) | | |
| First name and surname | | | | |
| | | | | |
| 2 What is your sex? | | What was your usual address one year ago? If you were a child at boarding school or a student one year ago, give the | | |
| Male Female | ľ | address at which you were living during the school/college/university term. | | |
| 3 What is your date of birth? | • | For a child born after 29 April 2000, 🗸 'No usual address one year ago'. | | |
| Day Month Year | | The address shown on the front of the form | | |
| | | No usual address one year ago Same as Person 1 | | |
| 4 What is your marital status | | Elsewhere, <i>please write in below</i> | | |
| (on 29 April 2001)? | | | | |
| Married (first marriage) | | | | |
| Re-married | | | | |
| | | | | |
| Separated (but still legally married) | | Postcode | | |
| Divorced | | | | |
| Widowed | 10 | What address do you travel to for your main job or course of study (including school)? | | |
| 5 Are you a schoolchild or student in full-time education? | ٠ | Answer for the place where you spend most time for work or study. | | |
| Yes F Go to 6 | | If you report to a depot, write in depot iddress. | | |
| □ No ► Go to 7 | | Not currently working or studying Gd to 12 | | |
| 6 Do you live at the address | | Work of study mainly at or from home - Gd to 12 | | |
| shown on the front of this form | | No fixed place | | |
| during the school, college or university term? | | Work on offinore installation, please use the address panel below to write in where you travel offshore from, for example "ABERDEEN" | | |
| Only answer this question if you have answered 'Yes' to Question 5 | | The address below, please write in | | |
| Yes, live at this address during | | | | |
| the school/college/university term | | | | |
| Go to 7 | | | | |
| No, I live elsewhere during the school/college/university term | | | | |
| Go to 35 | | Postcode | | |
| 7 Over the last twelve months | | | | |
| would you say your health has on the whole been: | 11 | How do you usually travel to your main place of work or study | | |
| Good? Fairly good? | | (including school)? | | |
| Not good? | * | ✓ one box only. ✓ the box for the longest part, by distance, of your usual journey to work or study. | | |
| | | Underground, tube, metro or light rail Passenger in a car or van | | |
| 8 Do you have any long-term illness, health problem or | | Train Motor cycle, scooter or moped | | |
| disability which limits your daily activities or the work you can do? | | Bus, minibus or coach (public or private) | | |
| • Include problems which are due to | | | | |
| old age. | | Taxi or minicab On foot | | |
| | | Driving a car or van Other Please turn over | | |

| Person 4 - continued | | | | |
|--|---------|--|----|---|
| 12 What is your country of birth? | 15 ♦ | What is your ethnic group? Choose ONE section from A to E, then | | Can you understand, speak, read, or write Scottish Gaelic? |
| Scotland | | ✓ the appropriate box to indicate your cultural background. | • | ✓ all the boxes that apply. |
| England | Α | White | | Understand spoken Gaelic |
| Wales | | Scottish | | Speak Gaelic |
| Northern Ireland | | Other British | | Read Gaelic |
| Republic of Ireland | | lrish | | Write Gaelic |
| Elsewhere, please write in the present name of the country | | Any other White background, please write in | | None of these |
| | | | 17 | Do you look after, or give any help or support to family |
| | | | | members, friends, neighbours or others because of: |
| 13 What religion, religious denomination or body do you | в | Mixed | | long-term physical or mental ill-health or disability, or |
| belong to? | | Any Mixed background, | ŕ | problems related to old age? |
| None None | | please write in | | Do hor count anything you do as part of your paid employment. |
| Church of Scotland | | | | ✓ time spent in a typical week. |
| Roman Catholic | - | 1 () | | |
| Other Christian, please write in | e | Asian, Asian Scottish or Asian | | Yes, 1-19 hours a week |
| | _ | British | | Yes 50+ hours a week |
| | | Pakistapi | | |
| Buddhist | | $\neg \bigcirc / \square$ | 18 | If you are aged 16 to 74 |
| Hindy Jewish | _ | Bangladestri | | Go to 19 |
| Muslim Sikh | | | | If you are aged 15 and under, or 75 and over |
| Another Religion, <i>please write in</i> | | Any other Asian background, please write in | | Go to 35 |
| | | | 19 | Last week, were you doing any work: |
| | | | • | as an employee, |
| 14 What religion, religious denomination or body were you | D | Black, Black Scottish or Black | • | as self-employed/freelance, |
| brought up in? | | British | • | in your own/family business, or on a Government sponsored |
| None None | | Caribbean | | training scheme? |
| Church of Scotland | | African | | ✓ 'Yes' if you were away from work ill, on maternity leave, on holiday or temporarily laid off. |
| Other Christian, <i>please write in</i> | | Any other Black background, please write in | ٠ | ✓ 'Yes' for any paid work, including |
| | | | | casual or temporary work, even if only for one hour. |
| | | | • | ✓ 'Yes' if you worked, paid or unpaid, in your own/family business. |
| Buddhist | E | Other ethnic background | | 🗌 Yes 🍉 Go to 25 |
| 🗌 Hindu 🔲 Jewish | | Any other background, | | No Go to 20 |
| Muslim Sikh | | please write in | 20 | Were you actively looking for any |
| Another Religion, <i>please write in</i> | | | | kind of paid work during the last 4 weeks? |
| | | | | Yes No |
| | | | | |

| P | Person 4 - continued | | | | |
|--------------|--|-----------|---|--|--|
| 21 | If a job had been available last week, could you have started it within 2 weeks? | 29 ♦ | How many hours (to the nearest full hour) a week do (did) you usually work in your main job? Give average for last four weeks. Number of hours worked a week | | |
| | Yes No | 30 | What is (was) the full title of your <i>main</i> job? | | |
| 22 | Last week, were you waiting to start a job already obtained? | • | For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT. | | |
| | Yes No | • | Civil Servants, Local Government Officers - give job title not grade or pay band. | | |
| 23 | Last week, were you any of the following? | | | | |
| ٠ | \checkmark all the boxes that apply. | | | | |
| | Retired Student | 31 | Describe what you do (did) in your <i>main</i> job. | | |
| | Looking after home/family | | | | |
| | Permanently sick/disabled | | | | |
| | None of the above | | | | |
| 24 | Have you ever worked? | 32 | What is the full name of the organisation you work (worked) for in your <i>main</i> job? | | |
| | Yes, please write in the year you last worked | * * | Please write in or 🗸 one box below as appropriate. If you have your own business, write in the name | | |
| | Go to 25 | | | | |
| | No, have never worked | | | | |
| 25 | Go to 34 | | | | |
| 25 | Answer the remaining questions for the main job you were doing | | Self-employed/freelance | | |
| | last week, or if not working last week, your last main job. | -33 | What is (was) the business of the organisation which you named above at Question 32? | | |
| / | Your main job is the job in which you usually work the most hours. | | For example, MAKING SHOES, REPAIRING CARS, SECONDARY EDUCATION. Ovil Servarits, Local Government Officer please specify your Department. | | |
| 26 | Po (did) you work as an employee pr are (were) you | | | | |
| | self-employed? | \square | | | |
| | Employee | | | | |
| T | Self-employed with employees | 34 | Which of these qualifications do you have? | | |
| \backslash | Self-embloyed/freelance without | | 'O' Grade, Standard Grade, Intermediate 1, Intermediate 2, GCSE, CSE, Senior | | |
| 27 | Do (did) you supervise any other employees? | | Certificate or equivalent Higher Grade, CSYS, Scottish Group Award at Higher, 'A' Level, AS Level, | | |
| ٠ | A supervisor or foreman is responsible | | Advanced Senior Certificate or equivalent | | |
| | for overseeing the work of other employees on a day-to-day basis. | | GSVQ/SVQ Level 1 or 2, SCOTVEC/National Certificate Module, BTEC First Diploma, City and Guilds Craft, RSA Diploma <i>or equivalent</i> | | |
| | Yes No | | GSVQ/SVQ Level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft, RSA Advanced Diploma <i>or equivalent</i> | | |
| 28 | How many people work (worked) for your employer at | | HNC, HND, SVQ Level 4 or 5, RSA Higher Diploma <i>or equivalent</i> | | |
| | the place where you work (worked)? | | First Degree, Higher Degree | | |
| ٠ | If you are (were) self-employed, for show how many people | | Professional Qualifications (for example, teaching, accountancy) | | |
| | you employ (employed) including yourself. | | None of these | | |
| | 1-9 10-24 | 35 | If there are only 4 household members, the householder(s) should now sign the Declaration on front page and the remaining pages | | |
| | 25-499 500 or more | | should be left blank. Otherwise go to questions for Person 5. | | |

| Person 5 | | | | | | |
|---|--|--|--|--|--|--|
| See top of page 3 for how to enter or amend answers to questions. Please use black or blue ink. | | | | | | |
| 1 What is your name? (Person 5 in | - | | | | | |
| First name and surname | | | | | | |
| | | | | | | |
| 2 What is your sex? | 9 What was your usual address one year ago? | | | | | |
| Male Female | If you were a child at boarding school or a student one year ago, give the address at which you were living during the school/college/university term. | | | | | |
| 3 What is your date of birth? | ◆ For a child born after 29 April 2000, ✓ 'No usual address one year ago'. | | | | | |
| Day Month Year | The address shown on the front of the form | | | | | |
| | No usual address one year ago Same as Person 1 | | | | | |
| 4 What is your marital status (on 29 April 2001)? | Elsewhere, <i>please write in below</i> | | | | | |
| Single (never married) | | | | | | |
| Married (first marriage) | | | | | | |
| Re-married | | | | | | |
| Separated (but still legally married) | Postcode | | | | | |
| Divorced | | | | | | |
| U Widowed | 10 What address do you travel to for your main job or course of study | | | | | |
| 5 Are you a schoolchild or student | (including school)? Answer for the place where you spend most time for work or study. | | | | | |
| in full-time education? | ♦ If you report to a depot write in depot address. | | | | | |
| Ves Gd to 6 | Not currently working or studying - Go to 12 | | | | | |
| Go to 7 | Work or study mainly at or from home 📂 Go to 12 | | | | | |
| 6 Do you live at the address shown on the front of this form | No fixed place | | | | | |
| during the school, college or university term? | Work on offshore installation, <i>please use the address panel below to write</i> | | | | | |
| Only ariswer this question if you | in where you travel offshore from, for example "ABERDEEN" The address below, please write in | | | | | |
| have answered 'Yes' to Question 5. | | | | | | |
| the school/college/university term | | | | | | |
| Go to 7 | | | | | | |
| No, I live elsewhere during the school/college/university term | | | | | | |
| Go to 35 | Postcode | | | | | |
| 7 Over the last twelve months | | | | | | |
| would you say your health has on the whole been: | 11 How do you usually travel to your main place of work or study | | | | | |
| Good? Fairly good? | <pre>(including school)? </pre> ✓ one box only. | | | | | |
| Not good? | If the box for the longest part, by distance, of your usual journey to work or study. | | | | | |
| 8 Do you have any long-term | Underground, tube, metro or light rail Passenger in a car or van | | | | | |
| illness, health problem or disability which limits your daily | Train Motor cycle, scooter or moped | | | | | |
| activities or the work you can do? | Bus, minibus or coach (public or private) Bicycle | | | | | |
| Include problems which are due to old age. | Taxi or minicab On foot | | | | | |
| Yes No | Driving a car or van Other | | | | | |

| Person 5 - continued | | | | |
|---|------------|---|----|--|
| 12 What is your country of birth? | 15 | What is your ethnic group? | 16 | Can you understand, speak, read, or write Scottish Gaelic? |
| Scotland | • | Choose ONE section from A to E, then ✓ the appropriate box to indicate | • | ✓ all the boxes that apply. |
| England | A | your cultural background. White | | Understand spoken Gaelic |
| Wales | | Scottish | | Speak Gaelic |
| Northern Ireland | | Other British | | Read Gaelic |
| Republic of Ireland | | Irish | | Write Gaelic |
| Elsewhere, please write in the present name of the country | | Any other White background, | | None of these |
| | | please write in | 17 | Do you look after, or give any |
| | | | | help or support to family members, friends, neighbours |
| | | | | or others because of: long-term physical or mental |
| 13 What religion, religious denomination or body do you | В | Mixed | | ill-health or disability, or problems related to old age? |
| belong to? | | Any Mixed background, please write in | ſ | Do not count anything you do as |
| Church of Scotland | | | | part of your paid employment. I tme spent in a typical week. |
| Roman Catholic | | | | |
| Other Christian, <i>please w</i> fite in | | | | Yes, 1-9 hours a week |
| | _ <u>C</u> | Asian, Asian Scottish or Asian | | Yes, 20-49 hours a week |
| | / | 1 Indian | | Yes, 50+ hours a week |
| Buddhist | - | Pakistan ⁱ | 18 | If you are aged 16 to 74 |
| | | Bangladest | | ► Go to 19 |
| Muslim Sikh | | Chinese | | If you are aged 15 and under, or 75 and over |
| Another Religion, <i>please write in</i> | | Any other Asian background, please write in | | → Go to 35 |
| | | | 19 | Last week, were you doing any |
| | | | | work: |
| 14 What religion, religious | | | | as an employee, as self-employed/freelance, |
| denomination or body were you brought up in? | D | Black, Black Scottish or Black British | | in your own/family business, or on a Government sponsored |
| None None | | Caribbean | | training scheme? |
| Church of Scotland | | African | • | ✓ 'Yes' if you were away from work ill, on maternity leave, on holiday or |
| Roman Catholic | | Any other Black background, please write in | | temporarily laid off. ✓ 'Yes' for any paid work, including |
| Other Christian, <i>please write in</i> | | | | casual or temporary work, even if only for one hour. |
| | | | • | ✔ 'Yes' if you worked, paid or |
| | | | | unpaid, in your own/family business. |
| Buddhist | E | Other ethnic background | | Yes Fo to 25 |
| Hindu Jewish | | Any other background, please write in | | No Foto 20 |
| Muslim Sikh | | | 20 | Were you actively looking for any kind of paid work during the last |
| Another Religion, <i>please write in</i> | | | | 4 weeks? |
| | | | | Yes No |
| | | | | Please turn over |

| Ρ | Person 5 - continued | | | | |
|--------|--|----------------------|--|--|--|
| 21 | If a job had been available last week, could you have started it within 2 weeks? | 29 • | How many hours (to the nearest full hour) a week do (did) you usually work in your <i>main</i> job? Give average for last four weeks. Number of hours worked a week | | |
| | Yes No | 30 | What is (was) the full title of your <i>main</i> job? | | |
| 22 | Last week, were you waiting to start a job already obtained? | | For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT. Civil Servants, Local Government Officers - give job title not grade or pay band. | | |
| 23 | Last week, were you any of the following? | | | | |
| | Retired Student | 31 | Describe what you do (did) in your <i>main</i> job. | | |
| | Looking after home/family Permanently sick/disabled None of the above | | | | |
| 24 | Have you ever worked? | 32 | What is the full name of the organisation you work (worked) for in your | | |
| | Yes, please write in the year you last worked Go to 25 No, have never worked | | main job? Please write in or ✓ one box below as appropriate. If you have your own business, write in the name. | | |
| 25 | Answer the remaining questions for the <i>main</i> job you were doing | 1 | Self-employed/freelance Work (worked) for a private individual | | |
| 26 | last week, or if net working last week, you last main job. Your main job is the job in which you usually work the most hours. | -33 | What is (was) the business of the organisation which you named above at Question 32? For example, MAKING SHCES, REPAIRING CARS SECONDARY EDUCATION. Civil Servarts, Local Government Officers - please specify your Department. | | |
| \mid | Self employed with employees | 34 | Which of these qualifications do you have? | | |
| 27 | Do (did) you supervise any | • | ✓ all boxes that apply. ^(O) Grade, Standard Grade, Intermediate 1, Intermediate 2, GCSE, CSE, Senior Certificate or equivalent | | |
| • | other employees? A supervisor or foreman is responsible for overseeing the work of other | | Higher Grade, CSYS, Scottish Group Award at Higher, 'A' Level, AS Level, Advanced Senior Certificate or equivalent GSVQ/SVQ Level 1 or 2, SCOTVEC/National Certificate Module, BTEC First | | |
| | employees on a day-to-day basis. | | Diploma, City and Guilds Craft, RSA Diploma <i>or equivalent</i> GSVQ/SVQ Level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds | | |
| 28 | How many people work (worked) for your employer at the place where you work (worked)? | | Advanced Craft, RSA Advanced Diploma or equivalent HNC, HND, SVQ Level 4 or 5, RSA Higher Diploma or equivalent First Degree, Higher Degree | | |
| • | If you are (were) self-employed, ✓ to show how many people you employ (employed) including yourself. | | Professional Qualifications (for example, teaching, accountancy)None of these | | |
| | 1-9 10-24 25-499 500 or more | 35 | If there are only 5 household members, the householder(s) should now sign the Declaration on front page. Otherwise please continue with a <i>Continuation Form</i> . Contact Census Helpline if form required (see front page). | | |