QUESTIONNAIRE

2000 CENSUS OF POPULATION AND HOUSING

FEDERATED STATES OF MICRONESIA
INTRODUCTION: Hello, my name is (Your name) and I'm working for the 2000 Population and Housing Census. This is my identification (Pause). I have some questions I need to ask you. Ask the questions on page 1. Complete a form for each household.

<table>
<thead>
<tr>
<th>COMPLETE BEFORE INTERVIEW</th>
<th>COMPLETE AFTER THE INTERVIEW</th>
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<tbody>
<tr>
<td>A. State _______ B. Municipality _______</td>
<td>J. Respondent's Name:_________</td>
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<tr>
<td>C. Enumeration District _____</td>
<td>K. Respondent's Telephone:_________</td>
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<td>D. Block: _______</td>
<td>L. Population count: M____ F____ Total____</td>
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<td>E. Map Spot: _______</td>
<td>M. Type of unit: [ ] Occup [ ] Rent Vacant [ ] Other</td>
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<tr>
<td>F. Household No.: _______</td>
<td>N. Complete after (circle): 1st 2nd 3rd Last Resort</td>
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<tr>
<td>G. Village: _______</td>
<td>O. Total number of households in this unit: _______</td>
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<tr>
<td>H. Interview Started: _______</td>
<td>P. Interview completed: _______ 5:00 AM / PM</td>
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The 2000 Census of Population and Housing must count every person at his or her usual residence. "Usual residence" means the place where the person lives and sleeps most of the time.

**INCLUDEx**
- Everyone who usually lives here such as family members, housemates, roommates, foster children, roomers, boarders, and live-in employees.
- Persons who are temporarily away on a business trip, on vacation, or in a general hospital.
- Students who live here while attending school/collage
- Newborn babies born on or before April 1, 2000
- Persons who stay here most of the weeks, even if they have a home somewhere else.
- Persons with no home who were staying here on April 1, 2000.
- Persons in the Armed Forces who live somewhere else.
- Persons who stay somewhere else most of the week.

**DO NOT INCLUDE**
- Persons who usually live somewhere else
- Persons who are confined to an institution
- Students who live somewhere else while attending school

NOTICE: You are required by Public Law No. 5-77 to answer the 2000 Census. Your answers will be kept confidential by the same law. Only sworn Census employees may see your answers. Your information will only be used for statistical purposes.

1a. Please give me the name of each person living here (whose usual residence is in this household) on April 1, including all persons staying here who have no other home. Begin with the household member in whose name the home is owned, being bought, or rented if there is no such person, start with any adult household member. If EVERYONE is staying here temporarily and usually lives somewhere else, get the name of each person and complete 1d.

Each booklet contains one up to ten persons. If more than ten persons live in this household, you must use more than one booklet.

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1b. When you told me the names of the persons living here on April 1, did you leave anyone out because you were not sure if the person should be listed — for example, someone temporarily away on a business trip or vacation, a newborn baby still in the hospital, or a person who stays here once in a while and has no other home?

1 Yes — Determine if you should include the person(s) based on the instructions for question 1a. If so, include the person and circle the person’s name.  
2 No

1c. When you told me the names of the persons living here on April 1, did you include anyone even though you were not sure if the persons should be listed — for example, a visitor who is staying here temporarily or a person who usually live somewhere else?

1 Yes — Determine if you should include the person(s) based on the instructions for questions 1a, if so, circle the person’s name. If not, draw a line through any entry.

2 No

If EVERYONE is staying here only temporarily and usually lives somewhere else, mark (X) in this box [] and ask —

1d. Where do these people usually live? If the usual residence is within the FSM, enter the State, Municipality, and Village.

State: __________________________  [ ]  
Municipality: ___________________  [ ]  
Village: _________________________  [ ]  
Country: ________________________

NOTES:

______________________________
______________________________
______________________________
HOUSING QUESTIONS

Which best describes this building? Include all apartments even if vacant.

1. Single family house detached from any other house
2. Single family house attached to one or more houses
3. A building with 2 apartments
4. A building with 3 or 4 apartments
5. A building with 5 to 9 apartments
6. A building with 10 to 15 apartments
7. A building with 20 or more apartments
8. Other
9. Don't know

H.2. When did (person 1 listed in question 1 on page 1) move to this house/apartment?

H.3. What is the MAIN type of material used for the outside walls of this building? (Read each category and circle ONE item.)
5. Thatch 6. Local wood or bamboo 7. Other
8. No walls

H.4. What is the MAIN type of material used for the roof of this building? (Read each category and circle ONE item.)
4. Thatch 5. Bamboo 6. Other

H.5. What is the MAIN type of material used for the foundation of this building? (Read each category and circle ONE item.)
1. Concrete 2. Wood piers or pilings 3. Coral
4. Stone 5. Other

H.6. About when was this building first built?

H.7. How many rooms do you have in this house/apartment? (Count living rooms, dining rooms, kitchens, and bedrooms; but do NOT count bathrooms, balconies, foyers, or halls.)
1. Room(s). If 9 or more rooms, enter 9.

H.8. How many rooms are designed primarily for sleeping?
1. Room(s). If 9 or more rooms, enter 9.

H.9a. Do you have piped water?
1. Yes, hot and cold in this unit
2. Yes, cold only in this unit
3. Yes, cold only outside this unit
4. No piped water

H.9b. What type of energy does your water heater use most?

H.9c. Do you have a bathtub or shower?
1. Yes, in this unit
2. Yes, in this building but not in unit
3. Yes, outside this building
4. No

H.9d. Do you have a flush toilet?
1. Yes, in this unit
2. Yes, in this building but not in unit
3. Yes, outside this building
4. No

H.10. Does this unit have electric power?
1. Yes, public utility
2. Yes, generator
3. Yes, solar power
4. No

H.11. Do you have a telephone or CB radio in this unit?
1. Yes
2. No

H.12. Do you have a battery-operated radio? Count car radios, transistor radios, and other battery operated sets in working order or needing only new batteries to operate.
1. Yes
2. No

H.13. Do you have a television set or Video Cassette Recorder (VCR)?
1. Yes
2. No

H.14. Do you have air conditioning?
1. Yes
2. No

H.15. Where do you get most of your drinking water from?
1. A public system only
2. A community system only
3. A public system and catchment
4. A community system and catchment
5. An individual well
6. A catchment, tanks, or drums only
7. A public standpipe or steel hydrant
8. Purchased bottled water
9. Some other source such as spring, river, creek, etc.

H.16. Is this building connected to a public sewer?
1. Yes, connected to a public sewer
2. Yes, connected to a septic tank or cesspool
3. No, use other means

H.17a. Are your MAIN cooking facilities inside or outside this unit?
1. Yes, inside this unit
2. Yes, outside this unit
3. No cooking facilities

H.17b. What are your MAIN cooking facilities?
1. Electric range
2. Kerosene stove
3. Gas stove
4. Microwave oven
5. Portable electric stove
6. Wood stove
7. Open fire
8. Other

H.17c. Do you have a refrigerator in this unit? If yes, ask what type?
1. Yes, electric
2. Yes, gas
3. No refrigerator

H.17d. Do you have a separate freezer in this unit?
1. Yes
2. No

H.17e. Do you have a sink in this unit?
1. Yes
2. No

H.18. How many automobiles, vans, and pick-up trucks are kept at home for use by members of this household?
1. If 9 or more, enter 9

H.19. How many boats/canoes are kept at home for use by members of this household?
1. If 9 or more, enter 9
HOUSING QUESTIONS

H20. What is the average monthly cost for electricity for this unit?
   $ __________ 00 OR
   1. Included in rent
   2. No charge, or electricity not used

H20b. What is the average monthly cost for kerosene for this unit?
   $ __________ 00 OR
   1. Kerosene not used

H20c. What is the average monthly cost for water for this unit?
   $ __________ 00 OR
   1. Included in rent
   2. No charge

H20d. What is the average monthly cost for other fuels (such as oil, gas, wood, etc.) for this unit?
   $ __________ 00 OR
   1. Included in rent
   2. No charge, or these fuels not used.

H21. Is this unit – Read list and circle ONE item.
1. Owned by you or someone in this household with a mortgage or loan?
2. Owned by you or someone else in this household free and clear (without a mortgage)?
3. Rented for cash?
4. Occupied without payment of cash rent?
5. Other; Specify.

Ask only if RENT IS PAID for this unit –

H22. What is the monthly rent for this house/unit?
   If "PAY BY THE MONTH" see the QR& on how to figure the rent.
   $ __________ 00

INTERVIEWER INSTRUCTIONS: Ask questions H23 to H24c if this is a one-family house that someone in this household OWNS OR IS BUYING; otherwise go to page 4 and ask population questions for each member of the household starting with the head of household.

H23. What is the value of this house? If respondent does not know the value of the house, use –
   How much it would cost to build a house like this?
   $ __________ 00

H24a. Is there a mortgage, deed of trust, contract to purchase, or similar debt on this unit?
   1. Yes, mortgage, deed of trust, or similar debt
   2. Yes, contract to purchase
   3. No – SKIP TO FIRST PERSON

H24b. How much is the regular monthly mortgage payment on THIS UNIT? Include payments only on the first mortgage or contract to purchase.
   $ __________ 00 OR
   1. No regular payment required – SKIP TO FIRST PERSON

H24c. Does the regular payment include payments for fire, hazard, or flood insurance on this unit?
   1. Yes, insurance included in payment
   2. No, insurance paid separately or no insurance
   3. No – SKIP TO FIRST PERSON

FOR VACANT UNITS

C1. Vacancy Status
   1. For rent
   2. For sale only
   3. Rented or sold, not occupied
   4. For seasonal/recreational/occasional
   5. Put migrant worker
   6. Other vacant

C2. Is this unit boarded up?
   1. Yes
   2. No

C3. Months vacant
   1. Less than 1
   2. 1 to 2
   3. 3 to 6
   4. 7 to 12
   5. 13 to 23
   6. 24 or more

NOTES:
POPULATION QUESTIONS

1. PERSONAL IDENTIFICATION NUMBER (from question 1a on page 1) Last name: ____________________________
   First name: ____________________________

2. How is ... related to the Householder? (Circle one entry. If "Other relative" circle 7 below and print exact relationship, such as wife's mother, sister's son, etc.)
   1. Householder
   2. Husband/wife
   3. Natural born son/daughter
   4. Adopted son/daughter
   5. Brother/sister
   6. Father/mother
   7. Other relative

3. Is ... 1 Male 2 Female

4a. What is ...'s state of birth? If unknown, please give your best estimate. (Print the date in the boxes).
   MM / DD / YYYY

4b. How old is ...? (Age should be in complete years as of April 1, 2006. Print age in the boxes).
   Age in years: ____________________________

5. Is ... now married, widowed, divorced, separated, or has never been married? Circle ONE item.
   1. Married
   2. Widowed
   3. Divorced
   4. Separated
   5. Never married

6. What is ...'s ethnic origin? For example, Yapese, Polynesian, Morichese, Sawaiian, Filipino, etc. Print no more than two groups.
   ____________________________ ____________________________

7. What is ...'s religion?
   1. Roman Catholic
   2. Congregational
   3. Latter Day Saints (Mormon)
   4. Seventh Day Adventist
   5. Baptist
   6. Other religion

8. Where was ... born? Print the name of the village, municipality, F.S.M. state, or other country in the space below if ... was born in a hospital, record the place of the usual residence of the mother just before she went to the hospital.
   Village/island: ____________________________
   Municipality: ____________________________
   F.S.M. state: ____________________________
   Other country: ____________________________

9. Is ... a FSM citizen? What is ...'s legal residence? The name of the municipality and the F.S.M. state in which the person lives is printed in the space below. If not, record the country of citizenship.
   Municipality: ____________________________
   F.S.M. state: ____________________________
   Country of citizenship: ____________________________

10. Is ... a dependent of an active-duty or retired member of the Armed Forces of the United States or of the full-time Military Reserves or National Guard? "Active duty" does NOT include training for the military Reserves or National Guard.
   1. Yes, dependent of active-duty member of the Armed Forces
   2. Yes, dependent of retired member of the Armed Forces, or dependent of an active-duty or retired member of the National Guard or Armed Forces Reserves
   3. No

11a. Since birth ... live continuously in this municipality?
   1. Yes, since birth - SKIP TO INTERVIEWER CHECK ITEM (IC) AFTER 1b. ...
   2. No - Ask 1b

11b. Where was the previous place of residence?
   Municipality: ____________________________
   F.S.M. state: ____________________________
   Other country: ____________________________

12. Since February 1, 2000, has ... attended regular school or college? Include only pre-kindergarten, pre-school, kindergarten, elementary school, and school which leads to a high school diploma or a college.
   1. No, never attended school - SKIP TO 14
   2. No, attended in the past, but not since February 1, 2000.
   3. Yes, public school, public college
   4. Yes, private school

13. How much school has ... COMPLETED? Read categories if person is unsure. Circle entry for the highest grade completed or degree received. If currently enrolled, circle the previous grade attended or highest grade completed.
   30. No school completed
   31. Pre-school, head-start, or kindergarten
   32. 1st grade
   33. 2nd grade
   34. 3rd grade
   35. 4th grade
   36. 5th grade
   37. 6th grade
   38. 7th grade
   39. 8th grade
   40. 9th grade
   41. 10th grade
   42. 11th grade
   43. College
   44. Associate degree in college
   45. Bachelors degree
   46. Masters degree
   47. Professional degree

14. Does ... know how to read and write in any language?
   1. Yes
   2. No

15a. What languages does ... speak? List in order of usage with the most used language first and the least used last.

15b. What is the language that ... usually speaks at home?

16a. Did ... live in this municipality 5 years ago? (April 1, 1996)
   1. Yes - SKIP TO NEXT ICI
   2. No - Ask 16b

16b. What is the name of the municipality, F.S.M. state, or other country where ... lived 5 years ago?
   Municipality: ____________________________
   F.S.M. state: ____________________________
   Other country: ____________________________

17a. What is the number of children ever born alive? Include all natural children even if they have been adopted by somebody or are being away from home. Do not count stepchildren or children ... adopted. Enter the information in the categories below.
   Living at home
   Living elsewhere
   Died
   Total number of children ____________________________

17b. What is the date of birth of the last child born alive?
   MM / DD / YYYY

17c. Was the last child born male or female?
   1. Male
   2. Female

18. Has ... completed the requirements for a vocational training program in a trade school, business school, hospital, some other kind of business school for occupational training, or "at place of work"? Do not include academic college courses. If "Yes" - Was training received in the FSM?
   1. No
   2. Yes, in FSM
   3. Yes, outside FSM
   4. Both in and outside FSM
INTERVIEWER INSTRUCTIONS:

- Before you leave this housing unit, be sure you have recorded -

1. Information in items A, B, C, D, E, F, G, and H on page 1 of the questionnaire.

2. The respondent's name in item J and the respondent's telephone number (if any) in item K on page 1 of the questionnaire.

3. Information in items L, M, N, O and P.
   Also, be sure you have -

4. Completed as many of the census questions as possible, including the last resort questions.

5. Completed the FOR VACANT UNITS section on page 3 (only if unit is vacant).

6. Entered the required information on the List of Regular Households pages in the Listing Book and the ED map.

7. Written all entries clearly.

After you complete items 1-7 above, be sure to enter your signature and date in the certification box below.

THANK THE RESPONDENT FOR HIS/HER COOPERATION

- CERTIFICATION -

Enumerator:
I certify that the entries I have made on this questionnaire are true and correct to the best of my knowledge.

 Enumerator's name (Print)  Code

 Enumerator's signature  Date

Crew leader:
I have reviewed and certify that the entries made on this questionnaire are true and correct.

 Crew leader's name (Print)  Code

 Crew leader's signature  Date