



ENUMERATION AREA SERIAL NO:

IF THIS IS A SPECIAL ENUMERATION
AREA PUT AN "X" MARK.

☐

22 OCTOBER 2000 POPULATION CENSUS

ATTENTION TO ENUMERATOR

Successful implementation and attainment of targets of 2000 Population Census, which is a costly operation both in terms of manhours and finance, require complete dedication to the job assigned to you. For that purpose, it is essential that, together with Census Supervisors, you check the addresses one by one in given Enumeration Area Building List (Form C) one day before census day. If you reveal any problems during your controls, inform the Census Committee to fix it. It is such an important task that to tackle it perfectly, you are expected to have carefully read again the "Handbook for Enumerators and Supervisors" handed out to you during training sessions, one day before census day. At census day enumerate all population in your enumeration area. BELIEVING THAT YOU WILL DO YOUR BEST TO TACKLE YOUR CENSUS TASK WE WISH YOU SUCCESS.

THE ENUMERATED POPULATION'S

PROVINCE NAME

DISTRICT NAME

SUBDISTRICT NAME

VILLAGE NAME

QUARTER NAME

IF EXISTS
SUBMUNICIPALITY
NAME

CODE
(Do not enter
anything
to this column)

ATTENTION

- 1- Persons whose negligence or abuse of duties in relation to the tasks related the Population Census are observed, shall be punished in accordance with the relevant clauses of Turkish Criminal Code.
- 2- All information in this book will be kept confidential.
- 3- For those who do not answer accurately and completely to the questions in this questionnaire, who abstain from answering questions or who expose personal informations; penal procedures will be undertaken in accordance with Law No. 53 and Turkish Criminal Code.

STATEMENT BY THE ENUMERATOR:

I visited, one by one, all the places assigned to me in the enumeration area. I entered all the population present in these places in accordance with the " Handbook ". After completing the enumeration, I added up the

population I entered in this book, and I found

In numbers

(.....) persons.

In words

Subtracting from this figure the number of household heads not at home (Total number of "No" answers to the question " Is the household head at home now?" (Section III, Question No.2)), I state that the remaining

total population is

In numbers

(.....) persons.

In words

ENUMERATOR'S

Name

Surname

Signature:

STATEMENT BY THE SUPERVISOR:

I checked the enumerator's statement. I found

In numbers

(.....) persons in this book.

In words

Subtracting from this figure the number of household heads not at home (Total number of "No" answers to the question " Is the household head at home now?" (Section III, Question No.2)), I state that the remaining

total population is

In numbers

(.....) persons.

In words

SUPERVISOR'S

Name

Surname

Signature:

INSTRUCTIONS FOR FILLING IN THE QUESTIONNAIRE

POPULATION CENSUS QUESTIONNAIRES WILL BE TRANSFERRED TO COMPUTERS THROUGH OPTICAL DATA ENTRY SYSTEM . PLEASE READ CAREFULLY THE ITEMS BELOW AND FILL IN QUESTIONNAIRES VERY CAREFULLY.

1. Do not fold up the books, do not damage the bindings, do not tear up the pages.
2. Do not damage the questionnaires, do not **use erasers** while filling in the questionnaire, do not scrape, try to fill in accurately at once.
3. Do not write anything or mark outside the **external frame**.
4. Use the pen provided to fill in the questionnaire. If you can not find this pen, use **black or dark blue ball-point pen**.
5. Try that your handwriting be legible.
6. Fill alphabetical information spaces with **CAPITALS**. Write letters and numbers as shown below (be careful in writing the numbers 1, 4, 7 and the letters Ç,Ğ,İ,Ö,Ş,Ü) :

A B C Ç D E F G Ğ H I J K L M N O Ö P R S Ş T U Ü V Y Z

0 1 2 3 4 5 6 7 8 9

7. Fill in letters and numbers **leaning to the left**. Leave the remaining boxes unfilled.

EXAMPLE:

16 What is your current age in completed years? 19

18 What is the present name of the province and the district in which you were born?

Province name D I Y A R B A K I R

8. Write letters, numbers and (X) marks in sign boxes without overflowing.

EXAMPLE:

TRUE

18 What is the present name of the province and the district in which you were born?

Province name A N T A L Y A

16 What is your current age in completed years? 23

15 What is your sex? 1 X Male 2 Female

FALSE

18 What is the present name of the province and the district in which you were born?

Province name A N T A L Y A

16 What is your current age in completed years? 23

15 What is your sex? 1 X Male 2 Female

9. If you recognize that you make a mark incorrectly, do not try to erase it, put (X) mark to the right box and **cross out** the box that you put (X) mark incorrectly.

EXAMPLE: 15 What is your sex? 1 X Male 2 Female

10. If you write letters or numbers incorrectly:

- If the remaining boxes are **sufficient**, put the (X) mark on boxes that you incorrently wrote on and indicate that they are invalid. Write the correct information in the remaining boxes **by not skipping unfilled boxes**.

EXAMPLE: 1 What is the name and surname of the household head?

Name X X X A H M E T

Surname X X X Ö Z T Ü R K

- If the remaining boxes are not enough, write the correct information onto the letters or numbers that you write incorrectly. While doing this, be sure that it is understood which letter it is.

EXAMPLE: 1 What is the name and surname of the household head?

Name S E B A H A T T I N

Surname Ö Z D E N İ R O Ğ L U

11. Leave one box **unfilled** between the words written on answer spaces.

EXAMPLE: 48 What is your main occupation?

K İ M Y A M Ü H E N D İ S İ

2000 POPULATION CENSUS QUESTIONNAIRE

ATTENTION TO ENUMERATOR

For the places constituting household, fill in the Section I, Section II and Section III in this form.

For the places not constituting household, fill in only the Sections I and II. Leave section III unfilled.

SECTION I : ADDRESS

STREET, SQUARE or BOULEVARD NAME

ROAD, BUILDING GROUP NAME or NUMBER

CONDOMINIUM NAME

BLOCK NAME or NUMBER

BUILDING NUMBER FLAT NUMBER

SECTION II: TYPE OF THE PLACE CENSUS TAKE PLACE

1 <input type="checkbox"/> Detached	5 <input type="checkbox"/> Hotel, motel, pension	9 <input type="checkbox"/> Boarding school, hostel etc.
2 <input type="checkbox"/> Apartment flat	6 <input type="checkbox"/> Train, ferry, bus, terminal, etc.	10 <input type="checkbox"/> Kindergarten, orphanage, nursing home
3 <input type="checkbox"/> Prefab	7 <input type="checkbox"/> Hospital, health center	11 <input type="checkbox"/> Prison, reformatory
4 <input type="checkbox"/> Tent, hut, etc.	8 <input type="checkbox"/> Military quarters barracks, garrison etc.	12 <input type="checkbox"/> Others (factory, government office, embassies, etc.)

SECTION III: QUESTIONS ABOUT HOUSEHOLD AND HOUSE

(For the places constituting household, ask the questions between 1-12 in this section to the household head or to anyone who can answer instead.)

1 What is the name and surname of the household head?
(Write name and surname of the household head whether he/she is at home or not)

Name

Surname

2 Is the household head at home now?

1 ☐ Yes 2 ☐ No

3 How many persons are there in this household now including visitors?

4 How many visitors are there in this household now regardless of they are relatives or not?

None

5 How many members of this household who are not in the house now are

a) in the country? None

b) abroad? None

6 What is the ownership status of this house?

1 ☐ Owner 4 ☐ Not owner but not paying rent

2 ☐ Tenant 5 ☐ Other

3 ☐ Lodgement

7 How many rooms are there in your house including living room?

8 Which of the followings are in your household?

	Inside	Outside	Doesn't exist
Toilet	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Bath	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Kitchen	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Piped water	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

9 Was there a member of this household who died in the last one year (from 22 th October 1999 till now)?

1 ☐ Yes 2 ☐ No → Go to Question 12

10 How many members died?

11 What is the sex, completed age and the date of death of the(se) person(s)?

	Sex		Completed Age	Date of death		
	Male	Female		Day	Month	Year
Person 1	1 <input type="checkbox"/>	2 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Person 2	1 <input type="checkbox"/>	2 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Person 3	1 <input type="checkbox"/>	2 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Person 4	1 <input type="checkbox"/>	2 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Person 5	1 <input type="checkbox"/>	2 <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

12 Please give the names and surnames of all persons who are in this household now, starting with the household head.

(Write the name and surname of the household head regardless of he/she is at home now. Write the names and surnames of other household members starting from the oldest member. Then write the names and surnames of the visitors starting from the oldest one.)

Individual Rank Number	Individual Rank Number
1 <input type="text"/>	15 <input type="text"/>
2 <input type="text"/>	16 <input type="text"/>
3 <input type="text"/>	17 <input type="text"/>
4 <input type="text"/>	18 <input type="text"/>
5 <input type="text"/>	19 <input type="text"/>
6 <input type="text"/>	20 <input type="text"/>
7 <input type="text"/>	21 <input type="text"/>
8 <input type="text"/>	22 <input type="text"/>
9 <input type="text"/>	23 <input type="text"/>
10 <input type="text"/>	24 <input type="text"/>
11 <input type="text"/>	25 <input type="text"/>
12 <input type="text"/>	26 <input type="text"/>
13 <input type="text"/>	27 <input type="text"/>
14 <input type="text"/>	28 <input type="text"/>

SECTION IV: QUESTIONS ABOUT PERSONAL QUALIFICATIONS

13 Write individual's rank number in the house.

(Write here the individual rank number in question 12.)

14 What is your name and surname?

(Write those who are in the house at the time of the census. But, even if the household head is not at home write his/her as the first individual with all of his/her qualifications.)

Name

Surname

15 What is your sex? 1 Male 2 Female

16 What is your current age in completed years?

(For the infants who are under 1 year of age write "0".)

17 What is your relationship to the household head?

(For those who don't live regularly in this house, mark the option "visitor". For the places which are not constituting household do not ask this question.)

- 1 Household head 8 Father-in-law
2 Wife/husband 9 Mother-in-law
3 Son 10 Daughter-in-law
4 Daughter 11 Son-in-law
5 Father 12 Grandchild
6 Mother 13 Other
7 Brother/sister 14 Visitor

18 What is the present name of the province and the district in which you were born?

(For those who were born abroad write only the name of the COUNTRY.)

Province name

District name

Country name

19 What is your nationality?

(For those who are not Turkish citizens write the name of the COUNTRY.)

- 1 T.R. 2 Does not have any nationality

Country name

20 Do you have any physical or mental disability?

- 1 Yes 2 No

21 What kind of disability do you have?

(More than one choice may be marked.)

- 1 Disability of seeing 4 Physical/orthopedical disability
2 Disability of hearing 5 Mental disability
3 Disability of speaking 6 Other

22 Do you live (settle) in this place of residence where you are enumerated for the census?

- 1 Yes 2 No

23 What is the present name of the province, district, sub-district or village where you live (settle) in?

(For those who live abroad write only the name of the COUNTRY.)

Province name

District name

Sub-district name

Village name

Country name

ASK PERSONS AGED 5 and OVER.

24 Five years ago, that is on October 22, 1995 were you living in the same place of residence that you are living now?

- 1 Yes 2 No

25 What is the present name of the province and district where you were living five years ago, that is on October 22, 1995?

(For those whose place of residence five years ago was abroad, write only the name of the COUNTRY.)

Province name

District name

Country name

26 Is the place of residence, where you were living five years ago (on October 22, 1995), a province center, a district center or a sub-district, village?

(Do not ask to those whose place of residence 5 years before was abroad)

- 1 Province center
2 District center
3 Sub-district, village

27 What was the main reason for leaving from the place of residence where you lived five years ago?

(Mark only one choice.)

- 1 To seek/to find a job 5 Marriage
2 Designation/appointment 6 Earthquake
3 Migration related to any members of the household 7 Security
4 Education 8 Other

ASK PERSONS AGED 6 and OVER.

28 Are you literate?

- 1 Yes 2 No

29 What is the last school you have completed?

(The school that the final degree was received.)

- 1 No school completed 6 High school
2 Primary school 7 Vocational school at high school level
3 Primary education 8 Higher education
4 Junior high school 9 Faculty
5 Vocational school at junior high school level 10 Master/Doctorate

ASK PERSONS AGED 12 and OVER.

30 What is your marital status?

- 1 Never married 3 Divorced
2 Married 4 Widowed

ASK WOMEN AGED 12 and OVER WHO ARE MARRIED, WIDOWED OR DIVORCED.

31 Have you ever given birth?

(Whether he/she is alive or dead now.)

- 1 Yes 2 No

32 How many children (female or male) have you ever given birth?

Female Male

33 How many of these children are still alive?

Female Male

ASK WOMEN AGED BETWEEN 12 and 50 WHO ARE MARRIED, WIDOWED OR DIVORCED.

34 When did you last give birth?

Day Month Year

ASK PERSONS AGED 12 and OVER

35 Did you work at any job during the last week?

(Persons who worked to earn cash or income in kind even 1 hour during the last week should be marked as "worked". For the persons who did not work last week because of vocation, illness, travel etc., the choice "Did not work but has a job attachment" will be marked.)

- 1 Worked
2 Did not work but has a job attachment
3 Did not work

36 What was your main task or duty at the job that you worked or had a job attachment in the last week?

(Occupations such as; farmer, mechanical engineer, bank manager, typist, history teacher, greengrocer, shoe repairer, barber, carpet machine operator, master workman builder etc. should be written.) General names such as; tradesman, official, worker, self employed should not be written.

37 What is the name of the work place or organization where you worked or had a job attachment in the last week?

(For example; field, municipality, security office, ministry of justice, justice, grocery, greengrocery shop, barber shop, construction, home, primary school, high school, university etc.)

38 What is the main activity of the work place (firm/organization) where you worked or had a job attachment in the last week?

(For example; public service, retail trade, banking, refrigerator manufacturing, construction works, field agriculture, animal feeding, poultry.)

39 What is your employment status in the job where you worked or had a job attachment in the last week?

- 1 Regular or casual employee
2 Employer
3 Self-employed
4 Unpaid family worker

40 Are you seeking a job?

- 1 Yes 2 No

41 When did you last take any steps to look for work?

- 1 1 month ago
2 2-3 months ago
3 4-6 months ago
4 7 months or more
5 Have done nothing

42 Why are you not seeking a job or not working?

- 1 Found a job but waiting to start 4 Retired
2 Student 5 Income recipients
3 Housewife/Housegirl 6 Other

43 What is your main occupation?

(If you do not have mark "none")

None