

INFORMATION REGARDING THE HOUSEHOLD

Table with columns: ANYBODY DIED (H-31), DECEASED (H-31a), and various death-related details like name, date, sex, age, and cause of death.

CENSUS 2001 HOUSEHOLD QUESTIONNAIRE FOR STATISTICAL USE ONLY

- 17(1) Despite any other law, no return or other information collected by Statistics South Africa for the purposes of official or other statistics that relates to an individual or a household may be disclosed to any person.
17(b) Any person who is involved in the collection of, or who may use, that information or data, must first take an oath of confidentiality.
18(e) & 18(g) Any officer of Statistics South Africa who willfully discloses any data or information obtained in the course of such employment to a person not authorised to receive that information is guilty of an offence...

WHAT IS THE SURNAME OF THE HEAD/ACTING HEAD? (Grid for name entry)

Thank you for your co-operation.

FOR OFFICE USE: If more than 1 questionnaire was completed for this household (more than 10 persons present in this household on the night between 9 - 10 October 2001), write the barcode of the first questionnaire in the boxes below.

Signature and Date fields for Enumerator's name and signature, and Supervisor's name and signature.

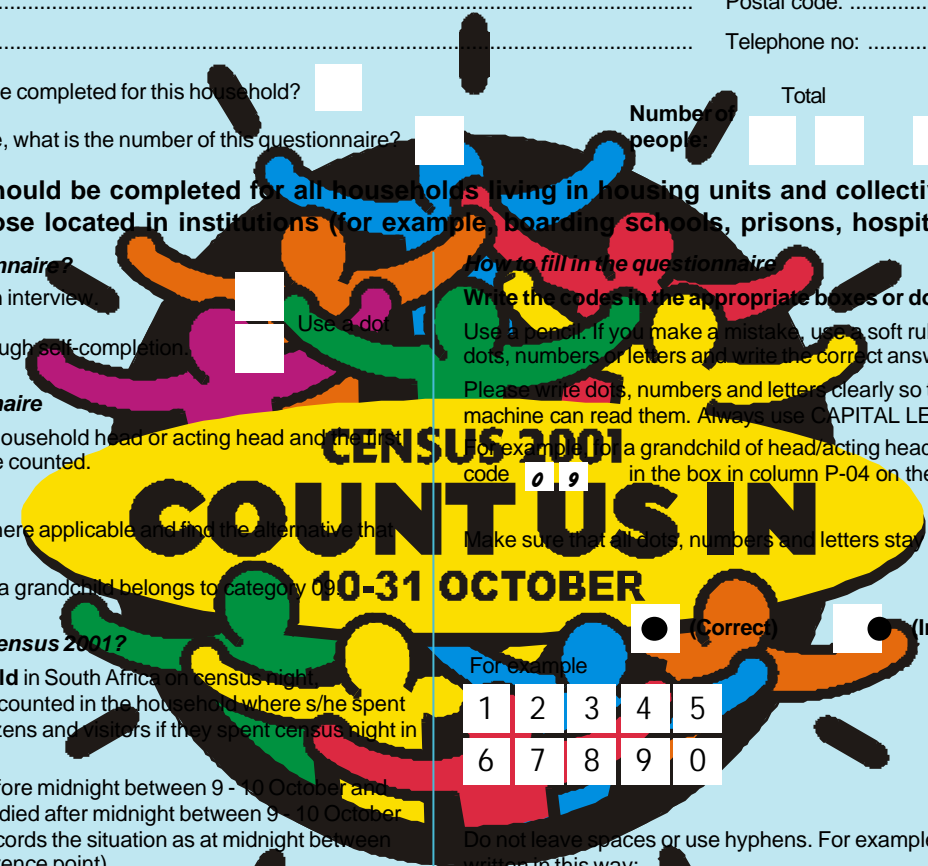


FOR OFFICE USE: EA number, Record number, Institution number, Name of local munic., Household number, Main place, Province, Sub-place.

Physical address, Postal code, Telephone no., and Number of people completed.

This Questionnaire should be completed for all households living in housing units and collective living quarters including those located in institutions (for example boarding schools, prisons, hospitals, etc.)

Who completed this questionnaire? Who should be counted in Census 2001? Read every question carefully. Look at the classifications where applicable and find the alternative that best applies to the response.



Number grid for example: 1 2 3 4 5, 6 7 8 9 0.

Word grid for example: C A P E T O, W N.



SHOULD YOU ENCOUNTER ANY DIFFICULTIES IN THE COMPLETION OF THE QUESTIONNAIRE, PLEASE CONTACT OR PHONE THE CENSUS HOTLINE, TOLL FREE, ON 0800 110248



NAME	Age	Sex
(P-00)		
Please write the name and surname of the household head and first names of every person who was present in this household on the night between 9 - 10 October. One name on each row. Start with head or acting head of household.		
The head or acting head is the person who is the main decision-maker in the household. If people are equally decision-makers, take the oldest person. For babies with no name, write BABY.		

Have you included babies, small children, old people and visitors who were present in this household on the night between 9 - 10 October.

SECTION A: INFORMATION FOR PERSONS IN THE HOUSEHOLD - ASK OF EVERYONE				
PERSON NO	DATE OF BIRTH	SEX	RELATIONSHIP	
(P-01)	(P-02)	(P-03)	(P-04)	
Assign row or person number to each person starting from 01. For example, first person becomes 01, the tenth person becomes 10. The eleventh person becomes 11 in the second questionnaire (if used).	What is (the person's) date of birth and age in completed years? If date of birth not known give (the person's) age in completed years. If age not known give an estimate of age. Date of birth is recorded as DD/MM/YYYY. DD is for day / MM is for month and / YYYY is for year. For example, if the person was born on 7 September 1963, write 07 for the day DD, 09 for the month MM, and 1963 for the year YYYY. For babies less than one year write 000 for age, and for person 7 years and 10 months old write 007 for age.	Is (the person) male or female? M = Male F = Female Dot the appropriate box.	What is (the person's) relationship to the head or acting head of the household? The head or acting head is the person listed in row 1 (of the first questionnaire, if more than one questionnaire has been completed for this household). See definition of head in column P-00 01 = Head/acting head 02 = Husband/wife/partner 03 = Son/daughter 04 = Adopted child 05 = Stepchild 06 = Brother/sister 07 = Parent 08 = Parent-in-law 09 = Grand/greatgrand child 10 = Son/daughter-in-law 11 = Brother/sister-in-law 12 = Other relative 13 = Non related person	
	Date of birth	Sex	Write the appropriate code in the boxes.	
1	DDMMYYYY	M F		
2	DDMMYYYY	M F		
3	DDMMYYYY	M F		
4	DDMMYYYY	M F		
5	DDMMYYYY	M F		
6	DDMMYYYY	M F		
7	DDMMYYYY	M F		
8	DDMMYYYY	M F		
9	DDMMYYYY	M F		
0	DDMMYYYY	M F		



SECTION B: INFORMATION ON HOUSING				
TYPE OF LIVING QUARTERS	TYPE OF HOUSING UNIT	MORE THAN ONE DWELLING	ROOMS	SHARING 1 ROOM
(H-23)	(H-23a)	(H-23b)	(H-24)	(H-24a)
What is the type of these living quarters? 1 = Housing unit 2 = Residential hotel 3 = Students' residence 4 = Home for the aged 5 = Workers' hostel 6 = Other (specify) If 2-5 go to H-25	Which type of dwelling or housing unit does this household occupy? If this household lives in MORE THAN ONE DWELLING, write the code of the MAIN dwelling that the household occupies in the boxes. 01 = House or brick structure on a separate stand or yard 02 = Traditional dwelling/hut/structure made of traditional materials 03 = Flat in block of flats 04 = Town/cluster/semi-detached house (simplex, duplex, triplex) 05 = House/flat/room in back yard 06 = Informal dwelling/shack in back yard 07 = Informal dwelling/shack NOT in back yard, e.g. in an informal/squatter settlement 08 = Room/flatlet not in back yard but on a shared property	Does this household occupy more than one dwelling on this site? Y = Yes N = No Dot the appropriate box.	How many rooms, including kitchens, are there for this household? Count all rooms in all dwellings. Exclude bathrooms, sheds, garages, stables, etc. unless persons are living in them. For example, if 4 rooms 04	If one room only: Are there two or more households sharing a single room? Y = Yes N = No Dot the appropriate box.
TENURE STATUS	PIPED WATER	SOURCE OF WATER	TOILET FACILITY	
(H-25) What is the tenure status of the household? If the household uses several dwellings, write the code for the main dwelling in the box. 1 = Owned and fully paid off 2 = Owned but not yet paid off 3 = Rented 4 = Occupied rent-free 5 = Other (specify)	(H-26) In which way does this household obtain PIPED WATER for domestic use? Write only one code in the box. 1 = No access to piped (tap) water 2 = Piped (tap) water on community stand: distance greater than 200 m from dwelling 3 = Piped (tap) water on community stand: distance less than 200 m from dwelling 4 = Piped (tap) water inside yard 5 = Piped (tap) water inside dwelling	(H-26a) What is this household's MAIN source of WATER for domestic use? Write only one code in the box. 1 = Regional/local water scheme (operated by a Water Service Authority or Provider) 2 = Borehole 3 = Spring 4 = Rain-water tank 5 = Dam / pool / stagnant water 6 = River/stream 7 = Water vendor 8 = Other (specify)	(H-27) What is the MAIN type of TOILET facility that is available for use by this household? Write only one code in the box. 1 = Flush toilet (connected to sewerage system) 2 = Flush toilet (with septic tank) 3 = Chemical toilet 4 = Pit latrine with ventilation (VIP) 5 = Pit latrine without ventilation 6 = Bucket latrine 7 = None	
ENERGY/FUEL	HOUSEHOLD GOODS			
(H-28) What type of energy/fuel does this household MAINLY use for cooking, for heating and for lighting? Write one code in each box. 1 = Electricity 2 = Gas 3 = Paraffin 4 = Wood 5 = Coal 6 = Candles 7 = Animal dung 8 = Solar 9 = Other (specify) Note: - Wood (4), coal (5) and animal dung (7) cannot be used for lighting - Candles (6) cannot be used for cooking or heating	Does the household have any of the following (in working condition)? Y = Yes N = No Dot the appropriate box for each item.			
Cooking Heating Lighting	Y N Radio Y N Refrigerator Y N Television Y N Telephone in the dwelling Y N Computer Y N Cell-phone			
ACCESS TO TELEPHONE (If NO to "telephone" and "cell-phone" in H-28)	REFUSE OR RUBBISH			
(H-29a) Where do members of this household MAINLY use a telephone? Write only one code in the box. 1 = At a neighbour nearby 2 = At a public telephone nearby 3 = At another location nearby 4 = At another location, not nearby 5 = No access to a telephone	(H-30) How is the refuse or rubbish of this household MAINLY disposed of? Write only one code in the box. 1 = Removed by local authority at least once a week 2 = Removed by local authority less often 3 = Communal refuse dump 4 = Own refuse dump 5 = No rubbish disposal 6 = Other (specify)			



WOMEN AGED BETWEEN 12 AND 50 YEARS (BORN BETWEEN 1951 AND 1989)			ASK OF EVERYONE																																									
LAST CHILD BORN			TRAVEL TO SCHOOL OR PLACE OF WORK (P-21)	INCOME CATEGORY (P-22)																																								
<p>(P-20b) If (the person) has ever given live birth: When was (the person's) last child born?</p> <p>Date of Birth: DD/MM/YYYY</p> <p>What is the sex of that child?: M = Male F = Female</p> <p>Is that child alive or dead? A = Alive D = Dead</p> <p>Write the day, month and year of the last live birth and dot the appropriate box of the sex. If multiple birth, indicate only the last child. Dot the appropriate box whether the child is still alive on Census night 9 - 10 October. DO NOT COUNT STILLBIRTHS (children born dead).</p>			<p>How does (the person) usually travel to school or to his/her place of work? Indicate the main mode of travel even if s/he was temporarily absent that week.</p> <p>0 = Not applicable 1 = On foot 2 = By bicycle 3 = By motorcycle 4 = By car as a driver 5 = By car as a passenger 6 = By minibus/ taxi 7 = By bus 8 = By train 9 = Other</p> <p>If more than one mode of travel, write the code of the mode that covers the longest distance.</p>	<p>What is the income category that best describes the gross income of (this person) before tax? Choose from the table below the code that corresponds to the income level.</p> <table border="1"> <thead> <tr> <th>CODE</th> <th>MONTHLY</th> <th>ANNUAL</th> </tr> </thead> <tbody> <tr><td>01</td><td>No income</td><td>No income</td></tr> <tr><td>02</td><td>R 1 – R 400</td><td>R 1 – R 4 800</td></tr> <tr><td>03</td><td>R 401 – R 800</td><td>R 4 801 – R 9 600</td></tr> <tr><td>04</td><td>R 801 – R 1 600</td><td>R 9 601 – R 19 200</td></tr> <tr><td>05</td><td>R 1 601 – R 3 200</td><td>R 19 201 – R 38 400</td></tr> <tr><td>06</td><td>R 3 201 – R 6 400</td><td>R 38 401 – R 76 800</td></tr> <tr><td>07</td><td>R 6 401 – R 12 800</td><td>R 76 801 – R 153 600</td></tr> <tr><td>08</td><td>R 12 801 – R 25 600</td><td>R 153 601 – R 307 200</td></tr> <tr><td>09</td><td>R 25 601 – R 51 200</td><td>R 307 201 – R 614 400</td></tr> <tr><td>10</td><td>R 51 201 – R 102 400</td><td>R 614 401 – R 1 228 800</td></tr> <tr><td>11</td><td>R 102 401 – R 204 800</td><td>R 1 228 801 – R 2 457 600</td></tr> <tr><td>12</td><td>R 204 801 or more</td><td>R 2 457 601 or more</td></tr> </tbody> </table> <p>A monthly income of R1 500 is code 04 and an annual income of R25 000 is code 05.</p>		CODE	MONTHLY	ANNUAL	01	No income	No income	02	R 1 – R 400	R 1 – R 4 800	03	R 401 – R 800	R 4 801 – R 9 600	04	R 801 – R 1 600	R 9 601 – R 19 200	05	R 1 601 – R 3 200	R 19 201 – R 38 400	06	R 3 201 – R 6 400	R 38 401 – R 76 800	07	R 6 401 – R 12 800	R 76 801 – R 153 600	08	R 12 801 – R 25 600	R 153 601 – R 307 200	09	R 25 601 – R 51 200	R 307 201 – R 614 400	10	R 51 201 – R 102 400	R 614 401 – R 1 228 800	11	R 102 401 – R 204 800	R 1 228 801 – R 2 457 600	12	R 204 801 or more	R 2 457 601 or more
CODE	MONTHLY	ANNUAL																																										
01	No income	No income																																										
02	R 1 – R 400	R 1 – R 4 800																																										
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04	R 801 – R 1 600	R 9 601 – R 19 200																																										
05	R 1 601 – R 3 200	R 19 201 – R 38 400																																										
06	R 3 201 – R 6 400	R 38 401 – R 76 800																																										
07	R 6 401 – R 12 800	R 76 801 – R 153 600																																										
08	R 12 801 – R 25 600	R 153 601 – R 307 200																																										
09	R 25 601 – R 51 200	R 307 201 – R 614 400																																										
10	R 51 201 – R 102 400	R 614 401 – R 1 228 800																																										
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Date of birth	Sex	Alive/Dead																																										
D D M M Y Y Y Y	M F	A D																																										
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ASK OF EVERYONE				
MARITAL STATUS (P-05)	SPOUSE (P-05a)	POPULATION GROUP (P-06)	LANGUAGE (P-07)	RELIGION (P-08)
<p>What is (the person's) PRESENT marital status?</p> <p>1 = Married civil/religious 2 = Married traditional/customary 3 = Polygamous marriage 4 = Living together like married partners 5 = Never married 6 = Widower/widow 7 = Separated 8 = Divorced</p> <p>Write only one code per person in the box.</p> <p>If both civil/religious and traditional marriage, indicate civil/religious.</p>	<p>If categories 1-4 in P-05</p> <p>Who, in the household, is (the person's) spouse or partner? Write the person number of the spouse or partner in the appropriate box.</p> <p>For example, if the spouse of the head of the household is the person listed in row 2 write 0 2 in row 1.</p> <p>If a man has more than one wife, write the row number of the first wife. Write the row number of the husband for each of his wives.</p> <p>If spouse is not in the household write 9 9.</p>	<p>How would (the person) describe him/herself in terms of population group?</p> <p>1 = Black African 2 = Coloured 3 = Indian or Asian 4 = White 5 = Other (specify)</p>	<p>Which language does (the person) speak most often in this household?</p> <p>01 = Afrikaans 02 = English 03 = IsiNdebele 04 = IsiXhosa 05 = IsiZulu 06 = Sepedi 07 = Sesotho 08 = Setswana 09 = SiSwati 10 = Tshivenda 11 = Xitsonga 12 = Other (specify)</p> <p>Write only one code per person.</p>	<p>What is (the person's) religion, denomination, or belief?</p> <p>Please write the complete name. For example, Apostolic Faith Mission, Dutch Reformed Church, Hinduism, Islam, Zion Christian Church.</p> <p>If no religion, write NONE.</p> <p>Use CAPITAL LETTERS only.</p>



ASK OF EVERYONE

BORN IN SA? (P-09)	PLACE OF BIRTH (P-09a)	COUNTRY OF BIRTH (P-09b)	CITIZENSHIP (P-10) (P-10a)	USUALLY LIVE (P-11) (P-11a)
Was (the person) born in South Africa? Include former "homelands" as South Africa. Y = Yes N = No Dot the appropriate box. If NO go to P-09b	If YES to P-09 In which province was (the person) born? 1 = Western Cape 2 = Eastern Cape 3 = Northern Cape 4 = Free State 5 = KwaZulu-Natal 6 = North West 7 = Gauteng 8 = Mpumalanga 9 = Northern Province Go to P-10	If NO to P-09 In which country was (the person) born? Write the present name of the country. Use CAPITAL LETTERS only.	Is (the person) a South African citizen? Y = Yes N = No Dot the appropriate box. If YES go to P-11 If NO (P-10a) What is the name of the country of citizenship? Use CAPITAL LETTERS only.	Does (the person) usually live in this household for at least four nights a week? Y = Yes N = No Dot the appropriate box. If YES go to P-12 If NO (P-11a) Where does (the person) usually live? IF IN THE SAME PLACE as the place of enumeration, dot the S box. IF NOT the same place, write the PROVINCE P R , MAIN PLACE (city, town, tribal area, administrative area) and SUB-PLACE (suburb, ward, village, farm, informal settlement). IF ANOTHER COUNTRY, write the name of the country in the boxes below. Use CAPITAL LETTERS only.
Y N		C O U N T R Y	Y N C O U N T R Y	Y N S M A I N P L A C E S U B P L A C E
Y N		C O U N T R Y	Y N C O U N T R Y	Y N S M A I N P L A C E S U B P L A C E
Y N		C O U N T R Y	Y N C O U N T R Y	Y N S M A I N P L A C E S U B P L A C E
Y N		C O U N T R Y	Y N C O U N T R Y	Y N S M A I N P L A C E S U B P L A C E
Y N		C O U N T R Y	Y N C O U N T R Y	Y N S M A I N P L A C E S U B P L A C E
Y N		C O U N T R Y	Y N C O U N T R Y	Y N S M A I N P L A C E S U B P L A C E
Y N		C O U N T R Y	Y N C O U N T R Y	Y N S M A I N P L A C E S U B P L A C E
Y N		C O U N T R Y	Y N C O U N T R Y	Y N S M A I N P L A C E S U B P L A C E
Y N		C O U N T R Y	Y N C O U N T R Y	Y N S M A I N P L A C E S U B P L A C E
Y N		C O U N T R Y	Y N C O U N T R Y	Y N S M A I N P L A C E S U B P L A C E



ASK OF WOMEN AGED BETWEEN 12 AND 50 YEARS (BORN BETWEEN 1951 AND 1989)

TOTAL BIRTHS (P-20)	STILL LIVING (P-20a)
How many children, if any, has (the person) ever had, that were born alive? If none write 0 0 and go to P-21. How many of these were boys? How many of these were girls? Include ALL her children, i.e. those who are still living, whether or not they live in this household, and those who are dead. DO NOT COUNT STILLBIRTHS (children born dead).	If the person has ever given live birth: If boys: How many boys are still alive? If girls: How many girls are still alive?
For example: Total 0 3, Boys 0 2, Girls 0 1	For example, if 2 children of the 3 given in P-20 are still alive, 1 boy and 1 girl, write: Total 0 2, Boys 0 1, Girls 0 1
Total Boys Girls	Total Boys Girls



ASK FOR ALL PERSONS AGED 10 YEARS AND OLDER (BORN BEFORE 10 OCTOBER 1991) WHO HAD WORK

COMPANY/BUSINESSACTIVITY (P-19b)	OCCUPATION (P-19c)	HOURS WORKED (P-19d)	PLACE OF WORK (P-19e) (P-19f)
If YES to P-18 What does the business do (main economic activity)? Write the MAIN INDUSTRY, economic activity, product or service of (the person's) employer or company. For example, gold mining, road construction, supermarket, police service, healthcare, hairdressing, banking. OR Write the activity of the person if self-employed. For example, subsistence farming. If doing PAID domestic work in a private household, write DOMESTIC SERVICE. Use CAPITAL LETTERS only.	If YES to P-18 What is the main occupation of (the person) in this workplace? Occupation refers to the type of work (the person) performed in the seven days before 10 October. Use two or more words. For example, street trader, cattle farmer, primary school teacher, domestic worker, fruit vendor, truck driver, warehouse manager, filing clerk, etc. Use CAPITAL LETTERS only.	If YES to P-18 How many hours did (the person) work in the seven days before 10 October? If (the person) was absent from work those seven days, but usually works, write the number of hours s/he usually works.	If YES to P-18 Does (the person) work in the same sub-place in which s/he usually lives? Y = Yes N = No Dot the appropriate box. If NO, where is this place of work? If NOT the same place, write PROVINCE P R , MAIN PLACE (city, town, tribal area, administrative area) and SUB-PLACE (suburb, ward, village, farm, informal settlement). If another country, write the name of the country in the boxes below.

			Y <input type="checkbox"/> N <input type="checkbox"/> P <input type="checkbox"/> R <input type="checkbox"/>
			M A I N P L A C E
			S U B P L A C E
			Y <input type="checkbox"/> N <input type="checkbox"/> P <input type="checkbox"/> R <input type="checkbox"/>
			M A I N P L A C E
			S U B P L A C E
			Y <input type="checkbox"/> N <input type="checkbox"/> P <input type="checkbox"/> R <input type="checkbox"/>
			M A I N P L A C E
			S U B P L A C E
			Y <input type="checkbox"/> N <input type="checkbox"/> P <input type="checkbox"/> R <input type="checkbox"/>
			M A I N P L A C E
			S U B P L A C E
			Y <input type="checkbox"/> N <input type="checkbox"/> P <input type="checkbox"/> R <input type="checkbox"/>
			M A I N P L A C E
			S U B P L A C E
			Y <input type="checkbox"/> N <input type="checkbox"/> P <input type="checkbox"/> R <input type="checkbox"/>
			M A I N P L A C E
			S U B P L A C E
			Y <input type="checkbox"/> N <input type="checkbox"/> P <input type="checkbox"/> R <input type="checkbox"/>
			M A I N P L A C E
			S U B P L A C E



ASK OF EVERYONE

FIVE YEARS AGO (P-12)	FROM WHERE MOVED (P-12a)	IN WHICH YEAR (P-12b)	DISABILITY (P-13)	MOTHER ALIVE (P-14) (P-14a)
Five years ago (at the time of Census '96), was (the person) living in this place (i.e. this suburb, ward, village, farm, informal settlement)? Y = Yes N = No B = Born after October 1996 Dot the appropriate box. If Y or B go to P-13	If NO to P-12 Where did (the person) move from? If more than one move, give details of the last move. Write the PROVINCE P R , MAIN PLACE (city, town, tribal area, administrative area) and SUB-PLACE (suburb, ward, village, farm, informal settlement). If ANOTHER COUNTRY, write the name of the country. Use CAPITAL LETTERS only.	If NO to P-12 In which year did (the person) move to this place? 1 = 1996 2 = 1997 3 = 1998 4 = 1999 5 = 2000 6 = 2001 If more than one move, write the code for the year of the last move	Does (the person) have any serious disability that prevents his/her full participation in life activities (such as education, work, social life)? Mark any that apply. 0 = None 1 = Sight (blind/severe visual limitation) 2 = Hearing (deaf, profoundly hard of hearing) 3 = Communication (speech impairment) 4 = Physical (e.g. needs wheelchair, crutches or prosthesis; limb, hand usage limitations) 5 = Intellectual (serious difficulties in learning) 6 = Emotional (behavioural, psychological) Dot the appropriate boxes.	Is (the person's) own biological mother still alive? Y = Yes N = No D = Do not know Dot the appropriate box. If YES: (P-14a) Who in this household is (the person's) mother? For example, if the mother is the person listed in row 2, write 0 2 . If the mother does not live in this household, write 9 9 in the appropriate boxes.

Y <input type="checkbox"/> N <input type="checkbox"/> B <input type="checkbox"/>	P <input type="checkbox"/> R <input type="checkbox"/>		0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> D <input type="checkbox"/>	Personno.
	M A I N P L A C E		3 <input type="checkbox"/> 4 <input type="checkbox"/>		
	S U B P L A C E		5 <input type="checkbox"/> 6 <input type="checkbox"/>		
Y <input type="checkbox"/> N <input type="checkbox"/> B <input type="checkbox"/>	P <input type="checkbox"/> R <input type="checkbox"/>		0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> D <input type="checkbox"/>	
	M A I N P L A C E		3 <input type="checkbox"/> 4 <input type="checkbox"/>		
	S U B P L A C E		5 <input type="checkbox"/> 6 <input type="checkbox"/>		
Y <input type="checkbox"/> N <input type="checkbox"/> B <input type="checkbox"/>	P <input type="checkbox"/> R <input type="checkbox"/>		0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> D <input type="checkbox"/>	
	M A I N P L A C E		3 <input type="checkbox"/> 4 <input type="checkbox"/>		
	S U B P L A C E		5 <input type="checkbox"/> 6 <input type="checkbox"/>		
Y <input type="checkbox"/> N <input type="checkbox"/> B <input type="checkbox"/>	P <input type="checkbox"/> R <input type="checkbox"/>		0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> D <input type="checkbox"/>	
	M A I N P L A C E		3 <input type="checkbox"/> 4 <input type="checkbox"/>		
	S U B P L A C E		5 <input type="checkbox"/> 6 <input type="checkbox"/>		
Y <input type="checkbox"/> N <input type="checkbox"/> B <input type="checkbox"/>	P <input type="checkbox"/> R <input type="checkbox"/>		0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> D <input type="checkbox"/>	
	M A I N P L A C E		3 <input type="checkbox"/> 4 <input type="checkbox"/>		
	S U B P L A C E		5 <input type="checkbox"/> 6 <input type="checkbox"/>		
Y <input type="checkbox"/> N <input type="checkbox"/> B <input type="checkbox"/>	P <input type="checkbox"/> R <input type="checkbox"/>		0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> D <input type="checkbox"/>	
	M A I N P L A C E		3 <input type="checkbox"/> 4 <input type="checkbox"/>		
	S U B P L A C E		5 <input type="checkbox"/> 6 <input type="checkbox"/>		



ASK OF EVERYONE			ALL AGED 5 YEARS OR MORE	ALL PERSONS WITH POST-SCHOOL QUALIFICATIONS
FATHER ALIVE	PRESENT SCHOOL ATTENDANCE	LEVEL OF EDUCATION	FIELD OF EDUCATION	
(P-15) (P-15a)	(P-16) (P-16a)	(P-17)	(P-17a)	
<p>Is (the person's) own biological father still alive?</p> <p>Y = Yes N = No D = Do not know</p> <p>If YES: (P-15a) Who in this household is (the person's) father? For example, if the father is the person listed in row 2, write 0 2.</p> <p>If the father does not live in this household, write 9 9 in the appropriate boxes.</p>	<p>Does (the person) presently attend an educational institution?</p> <p>1 = No (Go to P-17) 2 = Yes: Pre-school 3 = Yes: School 4 = Yes: College 5 = Yes: Technikon 6 = Yes: University 7 = Yes: Adult education centre 8 = Yes: Other (specify)</p> <p>Please include studies by correspondence/ distance education. If YES: (P-16a) Is this institution public or private? 1 = public (government) 2 = private 3 = don't know</p>	<p>What is the highest level of education that (the person) has completed?</p> <p>99= No schooling 00= Grade 0 01= Grade 1/Sub A 02= Grade 2/Sub B 03= Grade 3/Standard 1 04= Grade 4/Standard 2 05= Grade 5/Standard 3 06= Grade 6/Standard 4 07= Grade 7/Standard 5 08= Grade 8/Standard 6/ Form 1 09= Grade 9/Standard 7/ Form 2 10= Grade 10/Standard 8/ Form 3/NTCI 11= Grade 11/Standard 9/ Form 4/NTCII 12= Grade 12/Standard 10/ Form 5/Matric./NTCIII</p> <p>13= Certificate with less than Grade 12 14= Diploma with less than Grade 12 15= Certificate with Grade 12 16= Diploma with Grade 12 17= Bachelors Degree 18= Bachelors Degree and Diploma 19= Honours degree 20= Higher Degree (Masters, Doctorate) 21= Other 22= Don't know</p>	<p>If categories 13-20 in P-17 In which field is (the person's) highest post-school qualification?</p> <p>01 = Agriculture or Renewable Natural Resources 02 = Architecture or Environmental Design 03 = Arts, Visual or Performing 04 = Business, Commerce or Management Sciences 05 = Communication 06 = Computer Science or Data Processing 07 = Education, Training or Development 08 = Engineering or Engineering Technology 09 = Health Care or Health Sciences 10 = Home Economics 11 = Industrial Arts, Trades or Technology 12 = Languages, Linguistics or Literature 13 = Law 14 = Libraries or Museums 15 = Life Sciences or Physical Sciences 16 = Mathematical Sciences 17 = Military Sciences 18 = Philosophy, Religion or Theology 19 = Physical Education or Leisure 20 = Psychology 21 = Public Administration or Social Services 22 = Social Sciences or Social Studies 23 = Other (Specify)</p>	
Personno.	Institution	Type	If categories 99 or 00-12 go to P-18	
Y N D				
Y N D				
Y N D				
Y N D				
Y N D				
Y N D				
Y N D				
Y N D				
Y N D				
Y N D				
Y N D				



ASK FOR ALL PERSONS AGED 10 YEARS AND OLDER (BORN BEFORE 10 OCTOBER 1991)					
ANY WORK IN THE 7 DAYS BEFORE 10 OCTOBER (P-18)	DID NOT HAVE ANY WORK			HAD WORK	
(P-18)	REASON WHY NOT WORKING (P-18a)	ACTIVE STEPS (P-18b)	AVAILABILITY (P-18c)	WORK STATUS (P-19)	BUSINESS/COMPANY NAME (P-19a)
<p>In the SEVEN DAYS before 10 October did (the person) do any work for PAY (in cash or in kind) PROFIT or FAMILY GAIN, for one hour or more?</p> <p>1 = Yes: formal registered (non-farming) 2 = Yes: informal unregistered (non-farming) 3 = Yes: farming 4 = Yes: has work but was temporarily absent 5 = No: did not have work</p> <p>If YES go to P-19</p>	<p>If NO to P-18 What is the main reason why (the person) did not have work in the seven days before 10 October?</p> <p>1 = Scholar or student 2 = Home-maker or housewife 3 = Pensioner or retired person/ too old to work 4 = Unable to work due to illness or disability 5 = Seasonal worker not working presently 6 = Does not choose to work 7 = Could not find work</p> <p>If more than one reason, write the code of the MAIN (most important) reason.</p>	<p>If NO to P-18 In the PAST FOUR WEEKS before 10 October has (the person) taken active steps to find employment?</p> <p>Y = Yes N = No For example, (the person) went to visit factories or other employment places, placed or answered advertisements, looked for land or a building or equipment to start own business or farm.</p>	<p>If NO to P-18 If offered work, how soon could (the person) start?</p> <p>1 = Within one week 2 = More than 1 week, up to 2 weeks 3 = More than 2 weeks, up to 4 weeks 4 = Some time after 4 weeks 5 = Does not choose to work Go to P-20</p>	<p>If YES to P-18 How can one best describe (the person's) main activity or work status?</p> <p>1 = Paid employee 2 = Paid family worker 3 = Self-employed 4 = Employer 5 = Unpaid family worker 6 = Other (specify)</p>	<p>If YES to P-18 What is the FULL name of the business/company or organisation for whom (the person) works?</p> <p>If the person works for him/herself, and the business does not have a name, write SELF in the appropriate row. If doing PAID domestic work in a private household, write DOMESTIC SERVICE. Use CAPITAL LETTERS only.</p>
		Y N			
		Y N			
		Y N			
		Y N			
		Y N			
		Y N			
		Y N			
		Y N			
		Y N			
		Y N			



ASK OF WOMEN AGED 12-50 YEARS (BORN BETWEEN 1951 AND 1989)

TOTAL BIRTHS
(P-20)
How many children, if any, has (the person) ever had, that were born alive?
If none, write **00** go to P-21.
How many of these were boys?
How many of these were girls?
Include ALL her children, i.e. those who are still living, whether or not they live in this household, and those who are dead.
DO NOT COUNT STILLBIRTHS (children born dead).

Total		Boys		Girls	
0	3	0	2	0	1

Total Boys Girls

STILL LIVING
(P-20a)
If the person has ever given birth:
If boys:
How many boys are still alive?
If girls:
How many girls are still alive?

Total		Boys		Girls	
0	2	0	1	0	1

Total Boys Girls

ASK OF WOMEN AGED 12-50 YEARS (BORN BETWEEN 1951 AND 1989)

LAST CHILD BORN
(P-20b)
If the (person) has ever given live birth: **When was (the person's) last child born?**
Date of Birth:
DD/MM/YYYY
What is the sex of that child?:
M = Male
F = Female
Is that child alive or dead?
A = Alive
D = Dead
Write the day, month and year of the last live birth and dot the appropriate box of the sex. If multiple birth, indicate only the last child. Dot the appropriate box whether the child is still alive on Census night 9 - 10 October.
DO NOT COUNT STILLBIRTHS (children born dead).

Date of birth Sex Alive/Dead

D	D	M	M	Y	Y	Y	Y	M	F	A	D
---	---	---	---	---	---	---	---	---	---	---	---

ASK OF EVERYONE

TRAVEL TO SCHOOL OR PLACE OF WORK
(P-21)
How does (the person) usually travel to school or to his/her place of work?
Indicate the main mode of travel even if s/he was temporarily absent that week.
0 = Not applicable
1 = On foot
2 = By bicycle
3 = By motorcycle
4 = By car as a driver
5 = By car as a passenger
6 = By minibus/ taxi
7 = By bus
8 = By train
9 = Other
If more than one mode of travel, write the code of the mode that covers the longest distance.

INCOME CATEGORY
(P-22)
What is the income category that best describes the gross income of (this person) before tax? Choose from the table below the code that corresponds to the income level.

CODE	MONTHLY	ANNUAL
01	No income	No income
02	R 1 - R 400	R 1 - R 4 800
03	R 401 - R 800	R 4 801 - R 9 600
04	R 801 - R 1 600	R 9 601 - R 19 200
05	R 1 601 - R 3 200	R 19 201 - R 38 400
06	R 3 201 - R 6 400	R 38 401 - R 76 800
07	R 6 401 - R 12 800	R 76 801 - R 153 600
08	R 12 801 - R 25 600	R 153 601 - R 307 200
09	R 25 601 - R 51 200	R 307 201 - R 614 400
10	R 51 201 - R 102 400	R 614 401 - R 1 228 800
11	R 102 401 - R 204 800	R 1 228 801 - R 2 457 600
12	R 204 801 or more	R 2 457 601 or more

A monthly income of R1 500 is code 04 and an annual income of R25 000 is code 05.

Thank you for your co-operation.

FOR OFFICE USE

Write the barcode of Questionnaire C in the boxes below.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Enumerator's name and signature (confirming that s/he has completed or checked the questionnaire).
Name: _____
Signature: _____
Date:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Supervisor's name and signature (to indicate that s/he has checked enumerator's work).
Name: _____
Signature: _____
Date:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---



CENSUS 2001

QUESTIONNAIRE FOR INDIVIDUALS IN INSTITUTIONS AND TOURIST HOTELS
FOR STATISTICAL USE ONLY

FOR OFFICE USE
EA number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Record number:

--	--	--	--

 Institution number:

--	--	--

 Province:

--	--	--

Local council:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Homeless person (dot the box):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Name of institution:

For individuals in institutions and tourist hotels

(for example, tourist hotels, hospitals, childcare institutions, boarding schools, homes for the disabled, initiation schools, convents, defence force barracks, prisons, community and church halls, refugee camps etc.)

Who completed this questionnaire?

- An enumerator through an interview.
- An individual through self-completion.

How to fill in the questionnaire

Use a dot. Write the codes in the appropriate boxes or dot the box. Use a pencil. If you make a mistake, use a soft rubber to erase wrong dots, numbers or letters and write the correct answer.

Completion of the questionnaire

First fill in the full name of the person to be counted.

Read every question carefully.

Look at the classifications where applicable and find the alternative that best applies to the response.

For example, in question P-07 English belongs to category 02.

Please write dots, numbers and letters clearly so that the scanning machine can read them. Always use CAPITAL LETTERS.

For example, for a person born in Kwazulu-Natal write code **5** in the box in column P-09a.

Make sure that all dots, numbers and letters stay inside the box.

Who should be counted in Census 2001?

- Every person **young or old** in South Africa on census night, 9 - 10 October, shall be counted in the institution where they spent the night.
- **Include:** Babies born before 10 October 2001. Include also persons who died after midnight between 9 - 10 October 2001.
- Members of an institution who are absent overnight, for example working, travelling or at an entertainment venue, are to be counted in their institution if they **return to it the next day, i.e. 10 October.**

For example

1	2	3	4	5
6	7	8	9	0

Do not leave spaces or use hyphens when a word runs across more than one line. For example, Cape Town should be written in this way:

C	A	P	E	T	O
W	N				

SHOULD YOU ENCOUNTER ANY DIFFICULTIES IN THE COMPLETION OF THE QUESTIONNAIRE, PLEASE CONTACT

..... ON OR PHONE THE CENSUS HOTLINE, TOLL FREE, ON **0800 110248**



ASK OF EVERYONE			
NAME	DATE OF BIRTH	SEX	MARITAL STATUS
(P-00) Please write the name of the person who spent the night of 9 - 10 October in this institution.	(P-02) What is (the person's) date of birth and age in completed years? If date of birth not known give (the person's) age in completed years. If age not known give an estimate of age. Date of birth is recorded as DD/MM/YYYY. DD is for day / MM is for month and / YYYY is for year. For example, if the person was born on 7 September 1963, write 0 7 for the day DD, 0 9 for the month MM, and 7 9 6 3 for the year YYYY. For babies less than one year write 0 0 0 for age, and for person 7 years and 10 months old write 0 0 7 for age.	(P-03) Is (the person) male or female? M = Male F = Female Dot the appropriate box.	(P-05) What is (the person's) PRESENT marital status? 1 = Married civil/religious 2 = Married traditional/customary 3 = Polygamous marriage 4 = Living together like married partners 5 = Never married 6 = Widower/widow 7 = Separated 8 = Divorced Write only one code in the box. If both civil/religious and traditional marriage, indicate civil.
	Date of birth	Age	
	D D M M Y Y Y Y		M F

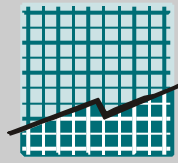
ASK FOR ALL PERSONS AGED 10 YEARS AND OLDER (BORN BEFORE 1 OCTOBER 1991)						
POPULATION GROUP (P-06)	LANGUAGE (P-07)	RELIGION (P-08)	BORN IN SA? (P-09)	PLACE OF BIRTH (P-09a)	COUNTRY OF BIRTH (P-09b)	CITIZENSHIP (P-10) (P-10a)
How would (the person) describe him/herself in terms of population group? 1 = Black African 2 = Coloured 3 = Indian or Asian 4 = White 5 = Other (specify)	Which language does (the person) speak most often in this institution? 01 = Afrikaans 02 = English 03 = IsiNdebele 04 = IsiXhosa 05 = IsiZulu 06 = Sepedi 07 = Sesotho 08 = Setswana 09 = SiSwati 10 = Tshivenda 11 = Xitsonga 12 = Other (specify) Write only one code.	What is (the person's) religion, denomination, or belief? Please write the complete name. For example, Apostolic Faith Mission, Dutch Reformed Church, Hinduism, Islam, Zion Christian Church. If no religion, write NONE. Use CAPITAL LETTERS only.	Was (the person) born in South Africa? Include former "homelands" as South Africa. Y = Yes N = No Dot the appropriate box. If NO go to P-09b	If YES to P-09 In which province was (the person) born? 1 = Western Cape 2 = Eastern Cape 3 = Northern Cape 4 = Free State 5 = KwaZulu-Natal 6 = North West 7 = Gauteng 8 = Mpumalanga 9 = Northern Province Go to P-10	If NO to P-09 In which country was (the person) born? Write the present name of the country. Use CAPITAL LETTERS only.	Is (the person) a South African citizen? Y = Yes N = No Dot the appropriate box. If YES go to P-11 If NO (P-10a) What is the name of the country of citizenship? Use CAPITAL LETTERS only.
			Y N			Y N

ASK FOR ALL PERSONS WHO HAD WORK			
USUALLY LIVE (P-11) (P-11a)	FIVE YEARS AGO (P-12)	FROM WHERE MOVE (P-12a)	IN WHICH YEAR (P-12b)
Does (the person) usually live in this institution for at least four nights a week? Y = Yes N = No Dot the appropriate box. If YES go to P-12 If NO (P-11a) Where does (the person) usually live? IF IN THE SAME PLACE as the place of enumeration, dot the S box. IF NOT the same place, write the PROVINCE P R , MAIN PLACE (city, town, tribal area, administrative area) and SUB-PLACE (suburb, ward, village, farm, informal settlement). IF ANOTHER COUNTRY, write the name of the country in the boxes below. Use CAPITAL LETTERS only.	Five years ago (at the time of Census '96), was (the person) living in this place (i.e. this suburb, ward, village, farm, informal settlement)? Y = Yes N = No B = Born after October 1996 Dot the appropriate box. If Y or B go to P-13	If NO to P-12 Where did (the person) move from? If more than one move, give details of the last move. Write the PROVINCE P R , MAIN PLACE (city, town, tribal area, administrative area) and SUB-PLACE (suburb, ward, village, farm, informal settlement). IF ANOTHER COUNTRY, write the name of the country. Use CAPITAL LETTERS only.	If NO to P-12 In which year did (the person) move to this place? 1 = 1996 2 = 1997 3 = 1998 4 = 1999 5 = 2000 6 = 2001 If more than one move, write the code for the year of the last move
Y N S P R M A I N P L A C E S U B P L A C E	Y N B	P R M A I N P L A C E S U B P L A C E	0 1 2 3 4 5 6

ASK OF EVERYONE			ALL AGED 5 YEARS OR MORE	ALL PERSONS WITH POST-SCHOOL QUALIFICATIONS
MOTHER ALIVE (P-14)	FATHER ALIVE (P-15)	PRESENT SCHOOL ATTENDANCE (P-16) (P-16a)	LEVEL OF EDUCATION (P-17)	FIELD OF EDUCATION (P-17a)
Is (the person's) own biological mother still alive? Y = Yes N = No D = Do not know	Is (the person's) own biological father still alive? Y = Yes N = No D = Do not know	Does (the person) presently attend an educational institution? 1 = No (Go to P-17) 2 = Yes: Pre-school 3 = Yes: School 4 = Yes: College 5 = Yes: Technikon 6 = Yes: University 7 = Yes: Adult education centre 8 = Yes: Other (specify) Please include studies by correspondence/distance education. If YES: (P-16a) Is this institution public or private? 1 = public (government) 2 = private 3 = don't know Institution Type	What is the highest level of education that (the person) has completed? 99= No schooling 00= Grade 0 01= Grade 1/Sub A 02= Grade 2/Sub B 03= Grade 3/Standard 1 04= Grade 4/Standard 2 05= Grade 5/Standard 3 06= Grade 6/Standard 4 07= Grade 7/Standard 5 08= Grade 8/Standard 6/ Form 1 09= Grade 9/Standard 7/ Form 2 10= Grade 10/Standard 8/ Form 3/NTCI 11= Grade 11/Standard 9/ Form 4/NTCII 12= Grade 12/Standard 10/ Form 5/Matric./NTCIII 13= Certificate with less than Grade 12 14= Diploma with less than Grade 12 15= Certificate with Grade 12 16= Diploma with Grade 12 17= Bachelor's Degree 18= Bachelor's Degree and Diploma 19= Honour's degree 20= Higher Degree (Master's, Doctorate) 21= Other 22= Don't know If categories 99 or 00-12 go to P-18	If categories 13-20 in P-17 In which field is (the person's) post-school qualification? 01 = Agriculture or Renewable Natural Resources 02 = Architecture or Environmental Design 03 = Arts, Visual or Performing 04 = Business, Commerce or Management Sciences 05 = Communication 06 = Computer Science or Data Processing 07 = Education, Training or Development 08 = Engineering or Engineering Technology 09 = Health Care or Health Sciences 10 = Home Economics 11 = Industrial Arts, Trades or Technology 12 = Languages, Linguistics or Literature 13 = Law 14 = Libraries or Museums 15 = Life Sciences or Physical Sciences 16 = Mathematical Sciences 17 = Military Sciences 18 = Philosophy, Religion or Theology 19 = Physical Education or Leisure 20 = Psychology 21 = Public Administration or Social Services 22 = Social Sciences or Social Studies 23 = Other (Specify)
Y N D	Y N D			

ASK FOR ALL PERSONS WHO HAD WORK					
ANY WORK IN THE 7 DAYS BEFORE 10 OCTOBER (P-18)	DID NOT HAVE WORK			HAD WORK	
In the SEVEN DAYS before 10 October did (the person) do any work for PAY (in cash or in kind) PROFIT or FAMILY GAIN, for at least one hour?	REASON WHY NOT WORKING (P-18a)	ACTIVE STEPS (P-18b)	AVAILABILITY (P-18c)	WORK STATUS (P-19)	BUSINESS/COMPANY NAME (P-19a)
1 = Yes: formal registered (non-farming) 2 = Yes: informal unregistered (non-farming) 3 = Yes: farming 4 = Yes: has work but was temporarily absent 5 = No: did not have work If YES go to P-19	If NO to P-18 What is the main reason why (the person) did not have work in the seven days before 10 October? 1 = Scholar or student 2 = Home-maker or housewife 3 = Pensioner or retired person/ too old to work 4 = Unable to work due to illness or disability 5 = Seasonal worker not working presently 6 = Does not choose to work 7 = Cannot find work If more than one reason, write the code of the MAIN (most important) reason.	If NO to P-18 In the PAST FOUR WEEKS before 10 October has (the person) taken active steps to find employment? Y = Yes N = No For example, (the person) went to visit factories or other employment places, placed or answered advertisements, looked for land or a building or equipment to start own business or farm.	If NO to P-18 If offered work, how soon could (the person) start? 1 = Within one week 2 = More than 1 week, up to 2 weeks 3 = More than 2 weeks, up to 4 weeks 4 = Some time after 4 weeks 5 = Does not choose to work Go to P-20	If YES to P-18 How can one best describe (the person's) activities or work status? 1 = Paid employee 2 = Paid family worker 3 = Self-employed 4 = Employer 5 = Unpaid family worker 6 = Other (specify)	If YES to P-18 What is the FULL name of the business/company or organisation for whom (the person) works? If the person works for him/herself, and the business does not have a name, write SELF in the appropriate row. If doing PAID domestic work in a private household, write DOMESTIC SERVICE. Use CAPITAL LETTERS only.
		Y N			

COMPANY/BUSINESSACTIVITY (P-19b)	OCCUPATION (P-19c)	HOURS WORKED (P-19d)	PLACE OF WORK (P-19e) (P-19f)
If YES to P-18 What does the business do (main economic activity)? Write the MAIN INDUSTRY, economic activity, product or service of (the person's) employer or company. For example, gold mining, road construction, supermarket, police service, healthcare, hairdressing, banking. OR Write the activity of the person if self-employed. For example, subsistence farming. If doing PAID domestic work in a private household, write DOMESTIC SERVICE. Use CAPITAL LETTERS only.	If YES to P-18 What is the main occupation of (the person) in this workplace? Occupation refers to the type of work (the person) performed in the seven days before 10 October. Use two or more words. For example, street trader, cattle farmer, primary school teacher, domestic worker, fruit vendor, truck driver, warehouse manager, filing clerk, etc.	If YES to P-18 How many hours did (the person) work in the seven days before 10 October? If (the person) was absent from work those seven days, but usually works, write the number of hours s/he usually works.	If YES to P-18 Does (the person) work in the same sub-place in which s/he usually lives? Y = Yes N = No Dot the appropriate box. If NO, where is this place of work? If NOT the same place, write PROVINCE P R , MAIN PLACE (city, town, tribal area, administrative area) and SUB-PLACE (suburb, ward, village, farm, informal settlement). If another country, write the name of the country in the boxes below.
			Y N P R M A I N P L A C E S U B P L A C E



CENSUS 2001

QUESTIONNAIRE FOR INDIVIDUALS IN INSTITUTIONS AND TOURIST HOTELS FOR STATISTICAL USE ONLY

FOR OFFICE USE

EA number: [] [] [] [] [] [] [] [] [] [] Institution number: [] [] Province: [] [] Local council: [] [] [] [] [] [] [] [] [] [] Main place: [] [] [] [] [] [] [] [] [] [] Homeless persons: [] dot the box Sub-place: [] [] [] [] [] [] [] [] [] []

Name of institution : Postal code: Physical address: Telephone no:

How many B Questionnaires were completed for this institution? [] [] [] [] Number of people: Total [] [] [] [] [] [] Male [] [] [] [] [] [] Female [] [] [] [] [] []

For institutions and tourist hotels only

(for example, tourist hotels, hospitals, childcare institutions, boarding schools, homes for the disabled, initiation schools, convents, defence force barracks, prisons, community and church halls, refugee camps etc.)

Completion of this questionnaire

Read every question carefully.

Look at the classifications where applicable and find the alternative that best applies to the response.

For example, in question H-27 gas belongs to category 2.

Who should be counted in Census 2001?

- Every person young or old in South Africa on census night, 10 October, shall be counted in the institution where they spent the night.
• Include: Babies born before 10 October 2001. Include also persons who died after midnight between 9 - 10 October 2001.
• Members of an institution who are absent overnight, for example working, travelling or at an entertainment venue, are to be counted in their institution if they return to it the next day, i.e. 10 October.

How to fill in the questionnaire

Write the codes in the appropriate boxes or dot the box.

Use a pencil. If you make a mistake, use a soft rubber to erase wrong dots, numbers or letters and write the correct answer.

Please write dots, numbers and letters clearly so that the scanning machine can read them. Always use CAPITAL LETTERS.

For example, for the use of gas as energy/fuel, write code 2 in the appropriate box in column H-27.

Make sure that all dots, numbers and letters stay inside the box.



(Correct)



(Incorrect)

List all persons on Questionnaire C and complete one B Questionnaire for each person in the institution, tourist hotel or for the homeless.

For example

1 2 3 4 5
6 7 8 9 0

SHOULD YOU ENCOUNTER ANY DIFFICULTIES IN THE COMPLETION OF THE QUESTIONNAIRE, PLEASE CONTACT

..... ONOR PHONE THE CENSUS HOTLINE, TOLL FREE, ON 0800110248





INSTITUTIONS

(H-23)

Which type of institution or collective living quarter is this?

- | | |
|--|---|
| 00 = Tourist hotel/motel/inn | 08 = Prison/correctional institution/police cells |
| 01 = Hospital/medical facility/clinic/frailcare centre | 09 = Community or church hall |
| 02 = Childcare institution/orphanage | 10 = Refugee camp/shelter for the homeless |
| 03 = Home for the disabled | 11 = Homeless END THE INTERVIEW |
| 04 = Boarding school hostel | 12 = Other (specify) |
| 05 = Initiation school | |
| 06 = Convent/monastery/religious retreat | |
| 07 = Defence force barracks/camp/ship in harbour | |

Write only one code in the boxes.

--	--

ROOMS (H-24)	PIPED WATER (H-26)	SOURCE OF WATER (H-26a)	TOILET FACILITY (H-27)
<p>How many rooms, including kitchens, are there for this institution?</p> <p>Count all rooms in all living quarters. Exclude bathrooms, sheds, garages, stables, etc. unless persons are living in them. For example, if 4 rooms write <input type="text" value="0"/> <input type="text" value="4"/> in the box.</p>	<p>In which way does this institution obtain PIPED WATER for domestic use?</p> <p>Write only one code in the box.</p> <p>1 = No access to piped (tap) water 2 = Piped (tap) water on community stand: distance greater than 200 m from institution 3 = Piped (tap) water on community stand: distance less than 200 m from institution 4 = Piped (tap) water inside yard 5 = Piped (tap) water inside institution</p>	<p>What is this institution's MAIN source of WATER for domestic use? Write only one code in the box.</p> <p>1 = Regional/local water scheme (operated by a Water Service Authority or Provider) 2 = Borehole 3 = Spring 4 = Rain-water tank 5 = Dam / pool / stagnant water 6 = River/stream 7 = Water vendor 8 = Other (specify)</p>	<p>What is the MAIN type of TOILET facility that is available for this institution?</p> <p>Write only one code in the box.</p> <p>1 = Flush toilet (connected to sewerage system) 2 = Flush toilet (with septic tank) 3 = Chemical toilet 4 = Pit latrine with ventilation (VIP) 5 = Pit latrine without ventilation 6 = Bucket latrine 7 = None</p>

ENERGY/FUEL
(H-28)

What type of energy/fuel does this institution MAINLY use for cooking, heating and lighting? Write one code in each box.

1 = Electricity	9 = Other (specify)	Note: - Wood (4), coal (5) and animal dung (7) cannot be used for lighting - Candles (6) cannot be used for cooking or heating
2 = Gas		
3 = Paraffin		
4 = Wood		
5 = Coal		
6 = Candles		
7 = Animal dung		
8 = Solar		

Cooking	Heating	Lighting
<input type="text"/>	<input type="text"/>	<input type="text"/>

HOUSEHOLD GOODS
(H-29)

Which of the following devices are available for the inhabitants of this institution and are in working condition?

Y = Yes
N = No

Dot the appropriate box for each item.

<input type="text" value="Y"/>	<input type="text" value="N"/>	Radio	<input type="text" value="Y"/>	<input type="text" value="N"/>	Refrigerator
<input type="text" value="Y"/>	<input type="text" value="N"/>	Television	<input type="text" value="Y"/>	<input type="text" value="N"/>	Telephone
<input type="text" value="Y"/>	<input type="text" value="N"/>	Computer	<input type="text" value="Y"/>	<input type="text" value="N"/>	Cell-phone

REFUSE OR RUBBISH
(H-30)

How is the refuse or rubbish of this institution MAINLY disposed of? Write only one code in the box.

1 = Removed by local authority at least once a week	4 = Own refuse dump
2 = Removed by local authority less often	5 = No rubbish disposal
3 = Communal refuse dump	6 = Other (specify)

Enumerator's name and signature (confirming that s/he has completed or checked the questionnaire).

Name: _____

Signature: _____

Date:

Supervisor's name and signature (to indicate that s/he has checked enumerator's work)

Name: _____

Signature: _____

Date:

LIST OF PERSONS LIVING IN THIS INSTITUTION OR TOURIST HOTEL ON CENSUS NIGHT

Record number from 09 book (1)	Room number, bed number or other identifier (2)	Surname and first initial (3)	Tick off when collected and checked (4)	Remarks (5)



LIST OF PERSONS LIVING IN THIS INSTITUTION OR TOURIST HOTEL ON CENSUS NIGHT

Record number from 09 book (1)	Room number, bed number or other identifier (2)	Surname and first initial (3)	Tick off when collected and checked (4)	Remarks (5)



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