



Royal Government of Cambodia  
General Population Census of Cambodia, 1998



FORM A HOUSELIST

STRICTLY CONFIDENTIAL

Page Number .....  
Total Number of pages for the EA .....

Identification Particulars

|      |              |  |              |  |                |  |               |  |                      |  |
|------|--------------|--|--------------|--|----------------|--|---------------|--|----------------------|--|
| Name | Khet / Krong |  | Srok / Khand |  | Khum / Sangkat |  | Phum / Mondol |  | Enumeration Area No. |  |
|      |              |  |              |  |                |  |               |  |                      |  |
| Code |              |  |              |  |                |  |               |  |                      |  |

Building / Structure and Household Particulars

| Line No.  | Building / Structure Number | Predominant construction material of Building / Structure* |      |       | Purpose of Building / Structure<br>1: Residence<br>2: Residence & Shop<br>3: Residence & Workshop<br>4: Residence & any other establishment (specify)<br>(Enter Code) | Household No. | Particulars of Head of Household |   | Number of persons usually living in the household |         |         | Remarks |
|---|-----------------------------|--|------|-------|---|---------------|----------------------------------|---|---|---------|---------|---------|
|   |                             | Wall   | Roof | Floor |   |               | Name                             | Sex<br>1: Male<br>2: Female<br>(Enter Code) | Males   | Females | Persons |         |
| 1   | 2                           | 3  | 4    | 5     | 6   | 7             | 8                                | 9   | 10  | 11      | 12      | 13      |
| 1   |                             |  |      |       |   |               |                                  |   |   |         |         |         |
| 2   |                             |  |      |       |   |               |                                  |   |   |         |         |         |
| 3   |                             |  |      |       |   |               |                                  |   |   |         |         |         |
| 4   |                             |  |      |       |   |               |                                  |   |   |         |         |         |
| 5   |                             |  |      |       |   |               |                                  |   |   |         |         |         |
| 6   |                             |  |      |       |   |               |                                  |   |   |         |         |         |
| 7   |                             |  |      |       |   |               |                                  |   |   |         |         |         |
| 8   |                             |  |      |       |   |               |                                  |   |   |         |         |         |
| 9   |                             |  |      |       |   |               |                                  |   |   |         |         |         |
| 0   |                             |  |      |       |   |               |                                  |   |   |         |         |         |
| (** Count the number of entries and give total) **Total |                             |  |      |       |   |               | Total                            |   |   |         |         |         |

\*KEY TO CODES

Wall Material (Column 3)  
1 Bamboo / Thatch / Grass / Reeds  
2 Earth  
3 Wood / Plywood  
4 Concrete / Brick / Stone  
5 Galvanised Iron / Aluminium / Other metal sheets  
6 Asbestos cement sheets  
7 Salvaged / Improvised materials  
8 Other (specify)

Roof Material (Column 4)  
1. Bamboo / Thatch / Grass  
2. Tiles  
3 Wood / Plywood  
4. Concrete / Brick / Stone  
5. Galvanised Iron / Aluminium / Other metal sheets  
6. Asbestos cement sheets  
7. Plastic / Synthetic material she ets  
8 Other (specify)

Floor Material (Column 5)  
1. Earth / Clay  
2. Wood / Bamboo planks  
3. Cement / Brick / Stone  
4. Polished stone  
5. Parquet / Polished wood  
6. Mosaic / Ceramic tiles  
7. Other (specify)

Name of Enumerator: .....

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of Supervisor: .....

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

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Royal Government of Cambodia  
General Population Census of Cambodia, 1998



STRICTLY CONFIDENTIAL  
FORM B HOUSEHOLD QUESTIONNAIRE PART 1

Identification Particulars

| Khet / Krong | Srok / Khand | Khum / Sangkat | Phum / Mondol | Enumeration Area No. | Building No. | Household No. | Name of Head of Household |
|--------------|--------------|----------------|---------------|----------------------|--------------|---------------|---------------------------|
| Name         |              |                |               |                      |              |               |                           |
| Code         |              |                |               |                      |              |               |                           |

Population Particulars

Statement 1.1: Usual Members Present on Census Night

Statement 1.2: Visitors Present on Census Night

Type of Household / Population  
(Give appropriate code in the box below)

1: Normal or Regular Household  
2: Institutional Household \*  
3: Homeless Household \*  
4: Boat Population \*  
5: Transient Population \*  
(Specify location)

.....

| Sl. No. | Full Name | Relationship to Head of Household | Sex<br>1: Male<br>2: Female<br>(Enter Code) |
|---------|-----------|-----------------------------------|---|
| 1       | 2         | 3                                 | 4   |
| 1       |           |                                   |   |
| 2       |           |                                   |   |
| 3       |           |                                   |   |
| 4       |           |                                   |   |
| 5       |           |                                   |   |
| 6       |           |                                   |   |
| 7       |           |                                   |   |
| 8       |           |                                   |   |
| 9       |           |                                   |   |
| 0       |           |                                   |   |

| Sl. No. | Full Name | Relationship to Head of Household | Sex<br>1: Male<br>2: Female<br>(Enter Code) | Usual Residence   |  |
|---------|-----------|-----------------------------------|---|---|--|
|         |           |                                   |   | Within Cambodia<br>Give name of district and write name of province within brackets | Outside Cambodia<br>Give name of country |
| 1       | 2         | 3                                 | 4   | 5   | 6  |
| 1       |           |                                   |   |   |  |
| 2       |           |                                   |   |   |  |
| 3       |           |                                   |   |   |  |
| 4       |           |                                   |   |   |  |
| 5       |           |                                   |   |   |  |
| 6       |           |                                   |   |   |  |
| 7       |           |                                   |   |   |  |
| 8       |           |                                   |   |   |  |
| 9       |           |                                   |   |   |  |
| 0       |           |                                   |   |   |  |

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Statement 1.3: Usual Members Absent on Census Night

| Sl. No. | Full Name | Relationship to Head of Household | Sex<br>1: Male<br>2: Female<br>(Enter Code) | Age | Location on Census Night  |  | How long Absent<br>(in completed months)<br>Write 0 for less than 1 month |
|---------|-----------|-----------------------------------|---|-----|---|--|---|
|         |           |                                   |   |     | Within Cambodia<br>Give name of district and write name of province within brackets | Outside Cambodia<br>Give name of country |   |
| 1       | 2         | 3                                 | 4   | 5   | 6   | 7  | 8   |
| 1       |           |                                   |   |     |   |  |   |
| 2       |           |                                   |   |     |   |  |   |
| 3       |           |                                   |   |     |   |  |   |
| 4       |           |                                   |   |     |   |  |   |
| 5       |           |                                   |   |     |   |  |   |

Total No. of Persons in Statement 1.1

.....

Total No. of Persons in Statement 1.2

.....

Total No. of Persons in Statements 1.1 and 1.2

.....

Number of Form B used for the Household

\*In these cases, fill-in only Identification Particulars.  
Population Particulars in Statements 1.1, 1.2 and 1.3 are not to be collected in these cases.

Enumerator:.....  
Supervisor:.....

Name Signature Day Month Year

Continued

FORM B HOUSEHOLD QUESTIONNAIRE PART 2: INDIVIDUAL PARTICULARS

FOR ALL PERSONS

| Sl. No. | Full Name   | Relationship  | Sex                                | Age  | Marital Status   | Mother Tongue  | Religion   | Birth Place  | Previous Residence  | Duration of Stay   | Reason for Migration  |
|---------|---|---|------------------------------------|--|--|--|--|--|---|--|---|
| 1       | 2   | 3   | 4                                  | 5  | 6  | 7  | 8  | 9  | 10  | 11   | 12  |
|         | Names of Usual Members Present and Visitors<br>(Please refer to Statements 1.1 and 1.2 in Part 1) | Relationship to Head of Household<br>(Enter Code from list below) | 1 Male<br>2 Female<br>(Enter Code) | Age in completed years<br>00: Less than 1 year<br>01: 1 year<br>02: 2 years<br><br>97: 97 years<br>98: 98 years and over | Marital Status<br>1 Never<br>2 Married<br>3 Widowed<br>4 Divorced<br>5 Separated<br>(Enter Code) | Mother Tongue<br>1: Khmer<br>2: Vietnamese<br>3: Chinese<br>4: Lao<br>5: Thai<br>6: French<br>7: English<br>8: Other (specify) | Religion<br>1: Buddhism<br>2: Islam<br>3: Christianity<br>4: Other (specify) | Place of Birth<br>If in this village, enter code 1<br><br>If in another village, give name of district of that village and write name of province within brackets.<br><br>If outside Cambodia, write name of country | Where have you been living before?<br>If always lived in this village, enter code 1 and skip to 13.<br><br>If in another village give name of district of that village and write name of province within brackets.<br><br>If outside Cambodia write name of Country | How long have you lived in this village?<br>(Enter Code from list below) | Give reason for change of residence, if present residence is different from previous residence.<br>(Enter Code from list below) |
| 1       |   |   |                                    |  |  |  |  |  |   |  |   |
| 2       |   |   |                                    |  |  |  |  |  |   |  |   |
| 3       |   |   |                                    |  |  |  |  |  |   |  |   |
| 4       |   |   |                                    |  |  |  |  |  |   |  |   |
| 5       |   |   |                                    |  |  |  |  |  |   |  |   |
| 6       |   |   |                                    |  |  |  |  |  |   |  |   |
| 7       |   |   |                                    |  |  |  |  |  |   |  |   |
| 8       |   |   |                                    |  |  |  |  |  |   |  |   |
| 9       |   |   |                                    |  |  |  |  |  |   |  |   |
| 0       |   |   |                                    |  |  |  |  |  |   |  |   |

**Codes for Column 3  
Relationship to Head of Household**

- 1: Head
- 2: Wife / Husband
- 3: Son / Daughter
- 4: Father / Mother
- 5: Grand Child
- 6: Other Relative
- 7: Non-relative

**Codes for Column 11  
Duration of Stay**

- 00: Less than 1 year
- 01: 1 to less than 2 years
- 02: 2 to less than 3 years
- 
- 10: 10 to less than 11 years
- 20: 20 to less than 21 years
- 97: 97 to less than 98 years
- 98: 98 years and over

**Codes for Column 12  
Reason for Migration**

- 1: Transfer of work place
- 2: In search of employment
- 3: Education
- 4: Marriage
- 5: Family moved
- 6: Natural calamities or insecurity
- 7: Repatriation or Return after displacement
- 8: Visiting only
- 9: Other (specify)

**FOR ALL PERSONS**

| Literacy   | Full Time Education  |  | Main Activity   | Employment Period                            | Occupation         | Employment Status  | Industry, Trade or Service           | Sector of Employment  |
|--|--|--|---|--|--------------------|--|--------------------------------------|---|
| 13   | 14   |  | 15  | 16   | 17                 | 18   | 19                                   | 20  |
| Can you read and write with understanding in any language?<br>1: Yes<br>2: No<br><i>(Enter Code)</i> | (a)<br>Have you ever attended School/ Educational institution?<br>1: Never<br>2: Now<br>3: Past<br><i>(Enter Code)</i> | (b)<br>What is the highest grade completed?<br><i>(Enter Code from list below)</i> | Main activity during last year<br><i>(Enter Code from list below)</i> | No. of months employed in the last 12 months | Name of Occupation | Employment Status / Class<br><i>(Enter Code from list below)</i> | Nature of Industry, Trade or Service | Sector in which Employed<br><i>(Enter Code from list below)</i> |
|  |  |  |   |  |                    |  |                                      |   |
|  |  |  |   |  |                    |  |                                      |   |
|  |  |  |   |  |                    |  |                                      |   |
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|  |  |  |   |  |                    |  |                                      |   |
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|  |  |  |   |  |                    |  |                                      |   |
|  |  |  |   |  |                    |  |                                      |   |
|  |  |  |   |  |                    |  |                                      |   |

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**Codes for Column 14 (b)**  
What is the highest grade completed?

For Never in 14 (a) put dash ( - )  
For Now or Past in 14 (a). Code as follows:-  
00: No class completed  
01: Class 1 completed  
02: Class 2 completed

11: Class 11 completed  
12: Class 12 completed  
13: Secondary School / Certificate / Diploma  
14: Undergraduate  
15: Graduate / Degree holder  
16: Postgraduate  
17: Other (specify)

**Codes for Column 15**  
Main Activity During Last Year

1: Employed (Fill in Cols. 16 to 20)  
2: Unemployed (Employed any time before)  
(Fill in Cols. 16 to 20 for last employment)  
3: Unemployed (Never employed any time before)  
Inactive  
4: Home maker  
5: Student  
6: Dependent  
7: Rent-receiver. Retired or other income recipient  
8: Other (Specify)  
(For codes 3 to 8, put dash ( - ) in Cols. 16 to 20)

**Codes for Column 18**  
Employment Status

1: Employer  
2: Paid employee  
3: Own - account worker  
4: Unpaid family worker  
5: Other (specify)

**Codes for Column 20**  
Sector of Employment

1: Government  
2: State-owned enterprise (Parastatal)  
3: Cooperative  
4: Private  
5: Other (specify)

**FORM B: HOUSEHOLD QUESTIONNAIRE PART 3: FERTILITY INFORMATION OF FEMALES AGED 15 AND OVER LISTED IN COLUMN 2 OF PART 2**

| Sl. No. | Full Name | Sl No. in Col. 1 of Part 2 | Fertility Information  |               |                              |               |                             |               |   |        |
|---------|-----------|----------------------------|--|---------------|------------------------------|---------------|-----------------------------|---------------|---|--------|
|         |           |                            | Number of Children Born<br><i>(Give number in two digits like 01, 02, ..... 10, 11 etc. If none, write 00)</i> |               |                              |               |                             |               | Particulars of Birth in the last 12 months  |        |
| 1       | 2         | 3                          | How many children have been born alive to the woman?   |               | How many of them are living? |               | How many of them have died? |               | Any child born alive to the woman during the last 12 months?<br><i>(Give actual number like 1, 2. If none, write 0)</i> |        |
|         |           |                            | (a)<br>Male  | (b)<br>Female | (c)<br>Male                  | (d)<br>Female | (e)<br>Male                 | (f)<br>Female | Male  | Female |
| 1       |           |                            |  |               |                              |               |                             |               |   |        |
| 2       |           |                            |  |               |                              |               |                             |               |   |        |
| 3       |           |                            |  |               |                              |               |                             |               |   |        |
| 4       |           |                            |  |               |                              |               |                             |               |   |        |
| 5       |           |                            |  |               |                              |               |                             |               |   |        |
| 6       |           |                            |  |               |                              |               |                             |               |   |        |
| 7       |           |                            |  |               |                              |               |                             |               |   |        |
| 8       |           |                            |  |               |                              |               |                             |               |   |        |
| 9       |           |                            |  |               |                              |               |                             |               |   |        |
| 0       |           |                            |  |               |                              |               |                             |               |   |        |

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**FORM B HOUSEHOLD QUESTIONNAIRE PART 4: HOUSING CONDITIONS AND FACILITIES\*\***  
*(Enter Code in the box below)*

| On what basis does the household occupy this dwelling?   | Main source of light   | Main cooking fuel   | Toilet facility within premises                                  | Main source of drinking water supply  | No. of rooms occupied by household (exclude kitchen, bathroom, toilet and storeroom)  |
|--|--|---|--|---|---|
| 1  | 2  | 3   | 4  | 5   | 6   |
| 1: Owner occupied<br>2: Rent<br>3: Not owner, but rent free<br>4: Other (specify)<br>.....<br><input type="checkbox"/> | 1: City power<br>2: Generator<br>3: Both city power and generator<br>4: Kerosene<br>5: Candle<br>6: Battery<br>7: Other (specify)<br>.....<br><input type="checkbox"/> | 1: Firewood<br>2: Charcoal<br>3: Kerosene<br>4: Liquefied Petroleum Gas (LPG)<br>5: Electricity<br>6: None<br>7: Other (specify)<br>.....<br><input type="checkbox"/> | 1: Available<br>2: Not available<br><br><input type="checkbox"/> | 1: Piped water<br>2: Tube / pipe well<br>3: Dug well<br>4: Spring, river, stream, lake / pond, rain<br>5: Bought<br>6: Other (specify)<br>.....<br><input type="checkbox"/> | 1: One Room<br>2: Two Rooms<br>3: Three Rooms<br>4: Four Rooms<br>5: Five Rooms<br>6: Six Rooms<br>7: Seven Rooms<br>8: Eight Rooms and above<br><input type="checkbox"/> |

\*\*Part 4 need not be filled-in for Institutional and Homeless Households and for Boat and Transient Population.

# General Population Census of Cambodia, 1998

## CHARGE REGISTER

Name of Province:..... Code:

Name of District:..... Code:

Name of Commune (Charge):..... Code:

| Village Code | Name of Village | EA No. | Approximate No. of Households | Approximate No. of Population | Enumerator |             |              | Supervisor |             |              |
|--------------|-----------------|--------|-------------------------------|-------------------------------|------------|-------------|--------------|------------|-------------|--------------|
|              |                 |        |                               |                               | Name       | Designation | Organisation | Name       | Designation | Organisation |
|              |                 |        |                               |                               |            |             |              |            |             |              |
|              |                 |        |                               |                               |            |             |              |            |             |              |
|              |                 |        |                               |                               |            |             |              |            |             |              |
|              |                 |        |                               |                               |            |             |              |            |             |              |
|              |                 |        |                               |                               |            |             |              |            |             |              |
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|              |                 |        |                               |                               |            |             |              |            |             |              |
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|              |                 |        |                               |                               |            |             |              |            |             |              |
|              |                 |        |                               |                               |            |             |              |            |             |              |
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|              |                 |        |                               |                               |            |             |              |            |             |              |
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|              |                 |        |                               |                               |            |             |              |            |             |              |
|              |                 |        |                               |                               |            |             |              |            |             |              |

Name of Commune Census Officer:..... Name of District Census Officer:..... Name of Province Census Officer:.....

Signature:..... Date:...../...../..... Signature:..... Date:...../...../..... Signature:..... Date:...../...../.....

**List of Defence Establishments**  
(Military Barracks etc. where Officers and Soldiers live)

Name of Province: \_\_\_\_\_

| District | Commune | Name of Establishment | Approx. No. of Persons living | Remarks |
|----------|---------|-----------------------|-------------------------------|---------|
|          |         |                       |                               |         |
|          |         |                       |                               |         |
|          |         |                       |                               |         |
|          |         |                       |                               |         |
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|          |         |                       |                               |         |
|          |         |                       |                               |         |

List of Police Quarters  
(where Police Officers and Sergeants live)

Name of Province: \_\_\_\_\_

| District | Commune | Name of the Police Quarters | Approx. No. of Persons living | Remarks |
|----------|---------|-----------------------------|-------------------------------|---------|
|          |         |                             |                               |         |
|          |         |                             |                               |         |
|          |         |                             |                               |         |
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|          |         |                             |                               |         |
|          |         |                             |                               |         |
|          |         |                             |                               |         |



**List of Major Institutions**  
 (Hotels, Guest Houses, Hospitals, Prisons and Other Institutions with more than  
 20 inmates on an average other than Defence and Police Establishments)

Name of Province: \_\_\_\_\_

| District | Commune | Village |                          | Name | No. of inmates |
|----------|---------|---------|--------------------------|------|----------------|
|          |         |         | Hotel                    |      |                |
|          |         |         | -                        |      |                |
|          |         |         | -                        |      |                |
|          |         |         | -                        |      |                |
|          |         |         | Hospital                 |      |                |
|          |         |         | -                        |      |                |
|          |         |         | -                        |      |                |
|          |         |         | Prison                   |      |                |
|          |         |         | -                        |      |                |
|          |         |         | -                        |      |                |
|          |         |         | Guest House              |      |                |
|          |         |         | -                        |      |                |
|          |         |         | -                        |      |                |
|          |         |         | Other Major Institutions |      |                |
|          |         |         | -                        |      |                |
|          |         |         | -                        |      |                |
|          |         |         | -                        |      |                |
|          |         |         | -                        |      |                |

### List of Villages with Boat Population

Name of Province: \_\_\_\_\_

| District | Commune | Name of Village | Approx. No. of Boats<br>staying in night | No. of Boat<br>Households |
|----------|---------|-----------------|--|---------------------------|
|          |         |                 |  |                           |
|          |         |                 |  |                           |
|          |         |                 |  |                           |
|          |         |                 |  |                           |
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|          |         |                 |  |                           |
|          |         |                 |  |                           |
|          |         |                 |  |                           |
|          |         |                 |  |                           |
|          |         |                 |  |                           |

List of Remote Villages difficult to Reach

Name of Province: \_\_\_\_\_

| District | Commune | Village | Name and Distance of the nearest roadside village |          | Mode of transport from nearest village | Approx. cost of return journey from the nearest village |
|----------|---------|---------|---|----------|--|---|
|          |         |         | Name  | Distance |  |   |
|          |         |         |   |          |  |   |

### List of Inaccessible Villages due to Security Reasons

Name of Province: \_\_\_\_\_

| District | Commune | Village | Approx. No. of Population | Reasons for insecurity |
|----------|---------|---------|---------------------------|------------------------|
|          |         |         |                           |                        |
|          |         |         |                           |                        |
|          |         |         |                           |                        |
|          |         |         |                           |                        |
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|          |         |         |                           |                        |
|          |         |         |                           |                        |
|          |         |         |                           |                        |
|          |         |         |                           |                        |

### Training Centres at District Headquarters

Name of Province: \_\_\_\_\_

| District   | Name of 3 schools or offices with hall where training could be conducted during January - February 1998<br>(with seating arrangement for 50 persons and blackboard) |         |         |
|------------|---|---------|---------|
|            | Place 1   | Place 2 | Place 3 |
| District 1 |   |         |         |
| -          |   |         |         |
| -          |   |         |         |
| -          |   |         |         |
| -          |   |         |         |
| District 2 |   |         |         |
| -          |   |         |         |
| -          |   |         |         |
| -          |   |         |         |
| -          |   |         |         |

**តារាងព័ត៌មានពីឧបសម្ព័ន្ធ 3 ( អ្នកទទួលបន្ទុកសំរាប់ )**  
**TABULATION FORM FOR ANNEX 3 (Charge Register)**

ឈ្មោះខេត្ត-ក្រុង : ..... កូដ 

|  |  |
|--|--|
|  |  |
|--|--|

  
 Name of Province:..... Code: 

|  |  |
|--|--|
|  |  |
|--|--|

| កូដ<br>Code | ឈ្មោះស្រុក_ខ័ណ្ឌ<br>Name of District | កូដ<br>Code | ឈ្មោះឃុំ_សង្កាត់<br>Name of Commune | ចំនួនមន្ត្រីសម្ភាសន៍<br>No. of Enumerator | ចំនួនមន្ត្រីត្រួតពិនិត្យ<br>No. of Supervisor |
|-------------|--------------------------------------|-------------|-------------------------------------|---|---|
|             |                                      |             |                                     |   |   |
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|             |                                      |             |                                     |   |   |
|             |                                      |             |                                     |   |   |

### Training Centres at District Headquarters

Name of Province: \_\_\_\_\_

| District   | Name of 3 schools or offices with hall where training could be conducted during January - February 1998<br>(with seating arrangement for 50 persons and blackboard) |         |         |
|------------|---|---------|---------|
|            | Place 1   | Place 2 | Place 3 |
| District 1 |   |         |         |
| -          |   |         |         |
| -          |   |         |         |
| -          |   |         |         |
| -          |   |         |         |
| District 2 |   |         |         |
| -          |   |         |         |
| -          |   |         |         |
| -          |   |         |         |
| -          |   |         |         |

**តារាងត្រួតពិនិត្យសម្រាប់ 3 ( អ្នកទទួលបន្ទុកសំរង់ )**  
**TABULATION FORM FOR ANNEX 3 (Charge Register)**

ឈ្មោះខេត្ត-ក្រុង : ..... កូដ

Name of Province:..... Code:

| កូដ<br>Code | ឈ្មោះស្រុក_ខ័ណ្ឌ<br>Name of District | កូដ<br>Code | ឈ្មោះឃុំ_សង្កាត់<br>Name of Commune | ចំនួនមន្ត្រីសម្ភាសន៍<br>No. of<br>Enumerator | ចំនួនមន្ត្រីត្រួតពិនិត្យ<br>No. of<br>Supervisor |
|-------------|--------------------------------------|-------------|-------------------------------------|--|--|
|             |                                      |             |                                     |  |  |
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|             |                                      |             |                                     |  |  |
|             |                                      |             |                                     |  |  |
|             |                                      |             |                                     |  |  |
|             |                                      |             |                                     |  |  |



# Number of Trainers / Trainees

Name of Province: \_\_\_\_\_

| District |      | Commune |      | No. of Enumerators | No. of Supervisors | No. of Reserve staff | Total Trainees | No. of Training classes @ 40 per class | No. of Trainers @2 per class |
|----------|------|---------|------|--------------------|--------------------|----------------------|----------------|--|------------------------------|
| Code     | Name | Code    | Name |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |
|          |      |         |      |                    |                    |                      |                |  |                              |

### List of Census Officers

Name of Province: \_\_\_\_\_

| Area       | Designation | Name | Address | Phone No. | Remarks |
|------------|-------------|------|---------|-----------|---------|
| Province   | PCO         |      |         |           |         |
| District 1 | DCO         |      |         |           |         |
| Commune 1  | CCO         |      |         |           |         |
|            | DCCO        |      |         |           |         |
| Commune 2  | CCO         |      |         |           |         |
|            | DCCO        |      |         |           |         |
| -          | -           |      |         |           |         |
| -          | -           |      |         |           |         |
| -          | -           |      |         |           |         |
| -          | -           |      |         |           |         |
| District 2 | DCO         |      |         |           |         |
| Commune 1  | CCO         |      |         |           |         |
|            | DCCO        |      |         |           |         |
| Commune 2  | CCO         |      |         |           |         |
|            | DCCO        |      |         |           |         |
| -          | -           |      |         |           |         |
| -          | -           |      |         |           |         |
| -          | -           |      |         |           |         |
| -          | -           |      |         |           |         |
| -          | -           |      |         |           |         |
| -          | -           |      |         |           |         |

\* PCO: Province Census Officer, DCO: District Census Officer,  
 \* CCO: Commune Census Officer, DCCO: Deputy Commune Census Officer

GENERAL POPULATION CENSUS, 1998  
HOUSELIST SUMMARY

Identification Particulars

Form 1:

|      |              |  |              |  |
|------|--------------|--|--------------|--|
| Name | Khet / Krong |  | Srok / Khand |  |
|      | Code         |  |              |  |

|      |                |  |               |  |                      |  |
|------|----------------|--|---------------|--|----------------------|--|
| Name | Khum / Sangkat |  | Phum / Mondol |  | Enumeration Area No. |  |
|      | Code           |  |               |  |                      |  |

| Page No.<br>of Form A<br>Houselist | No. of<br>Households | No. of persons usually living<br>in the household |              |              | Remarks |
|------------------------------------|----------------------|---|--------------|--------------|---------|
|                                    |                      | Males<br>3  | Females<br>4 | Persons<br>5 |         |
| 1                                  | 2                    | 3   | 4            | 5            | 6       |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
|                                    |                      |   |              |              |         |
| Total                              |                      |   |              |              |         |

Name of Enumerator: .....

Name of Supervisor: .....

Signature: .....

Signature: .....

Date: .....

Date: .....

GENERAL POPULATION CENSUS, 1998  
ENUMERATOR'S SUMMARY

Page No.: .....  
Total number of pages  
for the EA: .....

( To be entered from Columns of Form B Part 2 as indicated)

Identification Particulars

Form 2:

|      |              |              |                |               |                      |
|------|--------------|--------------|----------------|---------------|----------------------|
|      | Khet / Krong | Srok / Khand | Khum / Sangkat | Phum / Mondol | Enumeration Area No. |
| Name |              |              |                |               |                      |
| Code |              |              |                |               |                      |

| Line No.                   | Building No. | Household No. | No. of Questionnaires used | Population |         |         | Type of Household/ Population<br>1: Normal or Regular Household<br>2: Institutional Household<br>3: Homeless Household<br>4: Boat Population<br>5: Transient Population<br>(Enter Code) | Remarks |
|----------------------------|--------------|---------------|----------------------------|------------|---------|---------|---|---------|
|                            |              |               |                            | Males      | Females | Persons |   |         |
| 1                          | 2            | 3             | 4                          | 5          | 6       | 7       | 8   | 9       |
| 1                          |              |               |                            |            |         |         |   |         |
| 2                          |              |               |                            |            |         |         |   |         |
| 3                          |              |               |                            |            |         |         |   |         |
| 4                          |              |               |                            |            |         |         |   |         |
| 5                          |              |               |                            |            |         |         |   |         |
| 6                          |              |               |                            |            |         |         |   |         |
| 7                          |              |               |                            |            |         |         |   |         |
| 8                          |              |               |                            |            |         |         |   |         |
| 9                          |              |               |                            |            |         |         |   |         |
| 10                         |              |               |                            |            |         |         |   |         |
| 11                         |              |               |                            |            |         |         |   |         |
| 12                         |              |               |                            |            |         |         |   |         |
| 13                         |              |               |                            |            |         |         |   |         |
| 14                         |              |               |                            |            |         |         |   |         |
| 15                         |              |               |                            |            |         |         |   |         |
| 16                         |              |               |                            |            |         |         |   |         |
| 17                         |              |               |                            |            |         |         |   |         |
| 18                         |              |               |                            |            |         |         |   |         |
| 19                         |              |               |                            |            |         |         |   |         |
| 20                         |              |               |                            |            |         |         |   |         |
| 21                         |              |               |                            |            |         |         |   |         |
| 22                         |              |               |                            |            |         |         |   |         |
| 23                         |              |               |                            |            |         |         |   |         |
| 24                         |              |               |                            |            |         |         |   |         |
| 25                         |              |               |                            |            |         |         |   |         |
| 26                         |              |               |                            |            |         |         |   |         |
| 27                         |              |               |                            |            |         |         |   |         |
| 28                         |              |               |                            |            |         |         |   |         |
| 29                         |              |               |                            |            |         |         |   |         |
| 30                         |              |               |                            |            |         |         |   |         |
| <b>Page Total</b>          |              | @             |                            |            |         |         |   |         |
| <b>Grand Total for EA*</b> |              |               |                            |            |         |         |   |         |

Name of Enumerator: ..... Signature: ..... Date: ...../...../.....

Name of Supervisor: ..... Signature: ..... Date: ...../...../.....

@ Count the number of households and give that total here.

\* Give Grand Total for EA in the last page of Form 2 after adding page total of each Column.

## Account for Questionnaires Received by Enumerator

|      |              |              |                |               |                  |
|------|--------------|--------------|----------------|---------------|------------------|
|      | Khet / Krong | Srok / Khand | Khum / Sangkat | Phum / Mondol | Enumeration Area |
| Name |              |              |                |               |                  |
| Code |              |              |                |               |                  |

| Name of Questionnaire          | Number of Forms |      |           |                    | Remarks |
|--------------------------------|-----------------|------|-----------|--------------------|---------|
|                                | Received        | Used | Cancelled | Blank and Returned |         |
| 1                              | 2               | 3    | 4         | 5                  | 6       |
| Form A Houselist               |                 |      |           |                    |         |
| Form B Household Questionnaire |                 |      |           |                    |         |

Name of Enumerator : \_\_\_\_\_

Signature of Enumerator : \_\_\_\_\_

Date : \_\_\_\_ / \_\_\_\_ / 199\_\_

## Certificate by Village Chief

|      | Khet / Krong |  | Srok / Khand |  | Khum / Sangkat |  | Phum / Mondol |  | Enumeration Area |  |
|------|--------------|--|--------------|--|----------------|--|---------------|--|------------------|--|
| Name |              |  |              |  |                |  |               |  |                  |  |
| Code |              |  |              |  |                |  |               |  |                  |  |

Certified that Mr. Mrs. \_\_\_\_\_ (give Enumerator's name) has enumerated

EA No. \_\_\_\_\_ in my village \_\_\_\_\_ (give name of village) for

1998 Census.

Name of Village Chief : \_\_\_\_\_

Signature of Village Chief : \_\_\_\_\_

Date : \_\_\_\_ / \_\_\_\_ / 199 \_\_\_\_

Supervisor's Circle No.: \_\_\_\_\_

Page No.: \_\_\_\_\_

**Supervisor's Summary**  
(To be prepared from Enumerator's Summary)

|      |            |            |              |
|------|------------|------------|--------------|
| Name | Khet/Krong | Srok/Khand | Khum/Sangkat |
| Code |            |            |              |

| Village Code                  | Name of Village | EA Number | Name of Enumerator | No. of Households | Population |         |         | Remarks<br>(Indicate if any EA was split<br>or if any EA was newly added ) |
|-------------------------------|-----------------|-----------|--------------------|-------------------|------------|---------|---------|--|
|                               |                 |           |                    |                   | Males      | Females | Persons |  |
| 1                             | 2               | 3         | 4                  | 5                 | 6          | 7       | 8       | 9  |
|                               |                 |           |                    |                   |            |         |         |  |
|                               |                 |           |                    |                   |            |         |         |  |
|                               |                 |           |                    |                   |            |         |         |  |
|                               |                 |           |                    |                   |            |         |         |  |
|                               |                 |           |                    |                   |            |         |         |  |
|                               |                 |           |                    |                   |            |         |         |  |
|                               |                 |           |                    |                   |            |         |         |  |
|                               |                 |           |                    |                   |            |         |         |  |
|                               |                 |           |                    |                   |            |         |         |  |
|                               |                 |           |                    |                   |            |         |         |  |
| Total for Supervisor's Circle |                 |           |                    |                   |            |         |         |  |

187

Name of Supervisor: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: . \_\_\_\_\_ / \_\_\_\_\_ / 199...

Name of Commune Officer/Nominated staff: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: . \_\_\_\_\_ / \_\_\_\_\_ / 199...

Continued

## GENERAL POPULATION CENSUS OF CAMBODIA, 1998

## RECEIPT FOR MATERIALS GIVEN

|      |              |  |              |  |                |  |               |      |        |  |
|------|--------------|--|--------------|--|----------------|--|---------------|------|--------|--|
| Name | Khet / Krong |  | Srok / Khand |  | Khum / Sangkat |  | Phum / Mondol |      | EA No. |  |
|      |              |  |              |  |                |  | Name          | Code |        |  |
| Code |              |  |              |  |                |  |               |      |        |  |
|      |              |  |              |  |                |  |               |      |        |  |
|      |              |  |              |  |                |  |               |      |        |  |
|      |              |  |              |  |                |  |               |      |        |  |
|      |              |  |              |  |                |  |               |      |        |  |

Following materials are received from Supervisor / CCO (*Tick appropriately*).

|    | Name of material                           | No |
|----|--|----|
| 1  | Form A Houelist                            |    |
| 2  | Form B Household Questionnaire             |    |
| 3  | Enumerator's Manual                        |    |
| 4  | Supervisor's Manual                        |    |
| 5  | EA map / village map                       |    |
| 6  | Conversion table for age                   |    |
| 7  | Chalk piece                                |    |
| 8  | Form 1 Houelist Summary                    |    |
| 9  | Form 2 Enumerator's Summary                |    |
| 10 | Form 3 Account for Questionnaires Received |    |
| 11 | Form 4 Certificate of village chief        |    |
| 12 | Call Back Card                             |    |
| 13 | Note Book                                  |    |
| 14 | Pencil                                     |    |
| 15 | Eraser                                     |    |
| 16 | Sharpener                                  |    |
| 17 | Ball point pen                             |    |
| 18 | Training Form A                            |    |
| 19 | Training Form B                            |    |
| 20 | Blank EA Map form                          |    |
| 21 | White paper                                |    |
| 22 | Bag  |    |
| 23 | Identity card                              |    |
| 24 | Stickers for house numbering               |    |
| 25 | Any other materials (list below)           |    |
|    |  |    |
|    |  |    |
|    |  |    |
|    |  |    |
|    |  |    |

Date: \_\_\_\_ / \_\_\_\_ / 1998

\_\_\_\_\_  
Place

\_\_\_\_\_  
Signature of Enumerator / Supervisor  
(Circle No. \_\_\_\_\_) (*Tick appropriately*)



## GENERAL POPULATION CENSUS OF CAMBODIA, 1998

LIST OF FILLED-IN RECORDS SUBMITTED BY ENUMERATOR  
(To be prepared by Enumerator and placed on top of Enumerator's folder)

| Name | Khet / Krong | Srok / Khand | Khum / Sangkat | Phum / Mondol | Enumeration Area |
|------|--------------|--------------|----------------|---------------|------------------|
|      |              |              |                |               |                  |
| Code |              |              |                |               |                  |

Submitted the following records of the above mentioned E.A.

|   | Name of material                           | No. |
|---|--|-----|
|   | <i>Filled-in Forms</i>                     |     |
| 1 | Form A Houselist                           |     |
| 2 | Form B Household Questionnaire             |     |
| 3 | Form 1 Houselist Summary                   |     |
| 4 | Form 2 Enumerator's Summary                |     |
| 5 | Form 3 Account for Questionnaires Received |     |
| 6 | Form 4 Village Chief Certificate           |     |
|   | <i>Other records</i>                       |     |
| 7 | Village / EA Maps                          |     |
| 8 | Enumerator's Manual                        |     |
| 9 | Any other document (list below)            |     |
|   |  |     |
|   |  |     |
|   |  |     |
|   |  |     |
|   |  |     |
|   |  |     |
|   |  |     |
|   |  |     |
|   |  |     |

Date: \_\_\_\_ / \_\_\_\_ / 1998

\_\_\_\_\_

Signature of Enumerator

\_\_\_\_\_

Name

*Certified/Checked. Remarks if any:-*

|   |   |
|---|---|
| _____<br>Signature of Supervisor<br>Date: ____ / ____ / 1998<br><br>_____<br>Name | _____<br>_____<br>_____<br>_____<br>_____ |
|---|---|

*Certified/Checked. Remarks if any:-*

|  |   |
|--|---|
| _____<br>Signature of CCO<br>Date: ____ / ____ / 1998<br><br>_____<br>Name | _____<br>_____<br>_____<br>_____<br>_____ |
|--|---|

# General Population Census of Cambodia, 1998

Commune Population Statement (Provisional)  
(To be prepared by CCO from Enumerator's Summary)

|      |              |  |              |  |                |  |
|------|--------------|--|--------------|--|----------------|--|
| Name | Khet / Krong |  | Srok / Khand |  | Khum / Sangkat |  |
|      |              |  |              |  |                |  |
| Code |              |  |              |  |                |  |

| Phum /<br>Mondul<br>Code | Name of Phum / Mondul                        | EA No. | No. of<br>Households | Population |        |         |
|--------------------------|--|--------|----------------------|------------|--------|---------|
|                          |  |        |                      | Male       | Female | Persons |
| 01                       |  |        |                      |            |        |         |
|                          |  |        |                      |            |        |         |
|                          |  |        |                      |            |        |         |
|                          | Total for Phum / Mondul 1                    |        |                      |            |        |         |
| 02                       |  |        |                      |            |        |         |
|                          |  |        |                      |            |        |         |
|                          |  |        |                      |            |        |         |
|                          | Total for Phum / Mondul 2                    |        |                      |            |        |         |
|                          |  |        |                      |            |        |         |
|                          |  |        |                      |            |        |         |
|                          |  |        |                      |            |        |         |
|                          | Grand Total for Commune or<br>Khum / Sangkat |        |                      |            |        |         |

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\_\_\_\_\_  
Signature of CCO

Continued

## General Population Census of Cambodia, 1998

### District Population Statement (Provisional)

(To be prepared by DCO from Commune Population Statement which should be attached)

|      |              |              |
|------|--------------|--------------|
|      | Khet / Krong | Srok / Khand |
| Name |              |              |
| Code |              |              |

| Khum /<br>Sangkat | Name of Khum / Sangkat              | No. of<br>Households | Population |        |         |
|-------------------|-------------------------------------|----------------------|------------|--------|---------|
|                   |                                     |                      | Male       | Female | Persons |
| Code              |                                     |                      |            |        |         |
| 01                |                                     |                      |            |        |         |
| 02                |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
| .                 |                                     |                      |            |        |         |
|                   | <b>Grand Total for Srok / Khand</b> |                      |            |        |         |

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\_\_\_\_\_  
Signature of DCO

Continued

# GENERAL POPULATION CENSUS OF CAMBODIA, 1998

## Appointment Order Form For Enumerators / Supervisors

General Population Census of Cambodia, 1998 is to be held during February-March, 1998. In this connection, Mr / Ms \_\_\_\_\_ Designation \_\_\_\_\_ Organization \_\_\_\_\_ is hereby appointed as Enumerator / Supervisor in the following EA / EAs:-

Enumeration Area No. : \_\_\_\_\_

Phum / Mondol

Name : \_\_\_\_\_

Code : \_\_\_\_\_

Khum / Sangkat

Name : \_\_\_\_\_

Code : \_\_\_\_\_

Srok / Khand

Name : \_\_\_\_\_

Code : \_\_\_\_\_

Khet / Krong

Name : \_\_\_\_\_

Code : \_\_\_\_\_

Please note that the census is conducted under the authority of the Royal Decree (Kret) No. JS/RKT/02-96/98 dated February 29, 1996. According to this Royal Decree you have to perform your duties as 1998 Census official diligently and keep the information collected at the census confidential.

\_\_\_\_\_

Place

\_\_\_\_\_

Governor / Authorized Officer (with seal)

\_\_\_\_\_/\_\_\_\_\_/1998

## GENERAL POPULATION CENSUS OF CAMBODIA, 1998

## Appointment Order Form For the Census Officer

General Population Census of Cambodia, 1998 is to be held during February-March, 1998. In this connection, Mr / Ms \_\_\_\_\_ Designation \_\_\_\_\_ Organization \_\_\_\_\_ is hereby appointed as \*Regional Officer / Assistant Regional Officer / Province Census Officer / Deputy Province Census Officer / District Census Officer / Deputy District Census Officer / Commune Census Officer / Deputy Commune Census Officer / Trainer for the following area:

Khum / Sangkat : \_\_\_\_\_ Code: \_\_\_\_\_

Srok / Khand : \_\_\_\_\_ Code: \_\_\_\_\_

Khet / Krong : \_\_\_\_\_ Code: \_\_\_\_\_

Please note that the census is conducted under the authority of the Royal Decree (Kret) No. JS/RKT/02-96/98 dated February 29, 1996. According to this Royal Decree you have to perform your duties as 1998 Census official diligently and keep the information collected at the census confidential.

\_\_\_\_\_  
Place

\_\_\_\_\_  
HE Minister of Planning / Authorized Officer  
(with seal)

\_\_\_\_\_/\_\_\_\_\_/1998

\*Tick appropriately