	Segment	Structur	re	Part	Questionnaire	Household	Personal form
SECTION B: Labor Force Items							
	Only f	or people ag	ed 15 yea	ars and ove	r		
Line No Name Pho		Phon	e 	Informan Informan	nformant mant t from household t out of household	2 <b>→</b>	Line No
counting do (Remind info Saturday Yes	ne) work the past week, for at least one hour mestic chores or housework?  ormant: Past week refers to the one from Sund		Vacar paid from Beca or bu Asker Temp withor bad v in bu Unpa for a work Leave more date. Cease rever date Not b beca	tion, sick leave leave or leave or leave business	e, strike, suspension with supporting income with supporting income e with support income e with supporting income e with supporting income e without a private business for other examples in the work.	of activities, ome	(Skip to B9)
for people money or in superform of superformed money or a superformed money or a superformed superformed money or a superformed superform	of another household in exchange for n kind?	oney or in	No Does Reacl Becau Becau Becau childr Due t trave Could	not wish to whed old age use of permar use of illness use of domest ren and other to personal re ling)	y?  or at least in two w  y?  ork  nent disability  tic work (housework, people)  asons (studies, plann  g at a different mom		(Name) start  (Skip to Section I)
	own business to self-support, in which is ten		und	n no restrictio der certain wo	nsrking conditions (sch	nedule,	(Continue with B7)

# B7. In the past four weeks, did (Name) do any of the following activities to find a job or start an own business... (Read every option until you arrive at an affirmative answer) ...ask friends or relatives?...... 001 ...post or answer help wanted ads?...... 004 (Skip to ...send resumes via mail, in person or Section H) through email?..... 007 ...attend job interviews?...... 008 ...find customers or do paperwork to start own business?......009 ...set up a shop or office to start or to continue the business?..... 010 ...make other arrangements to find work or set up own business?......011 ...did not do anything in particular...... 012 — B8. Why did (Name) not look for a job in the past four weeks? Already found a job...... 001 Expecting resumption of operations or business reopening......O02 Waiting for an answer from employers...... 003 Does not have money for job search...... 004 (Skip to Tired of job searching...... 005 Section H) Is not offered a job based on age, gender, There are no vacant in the area...... 007 Knows that there are no jobs this time (Skip to Section I) Family duties...... 012 (Specify) B9. The past week, how many jobs did (Name) have? Only one job...... 01 Two jobs...... 02

Comments:					
Reminder for Determining v					
Usual or regular working hours	This includes:  • The hours that a person usually o regularly works.  • The additional hours that a person work when they become everyday.				
	+				
Overtime worked apart from usual hours during the reference period	This includes: • Extra or additional hours the person worked after the usual working hours.				
	_				
Usual hours of work not worked during the reference week	This includes:  • Time not worked due to injury or sick leave, vacation, holidays, leaves of absence and similar.				
=					
Actual or effective hours worked during the week of reference (the past week)					

## **SECTION C: Employed Persons**

## Only for the main job Interviewer: Inquire about the job at which the person spends the most time

#### Remember:

**Main job:** The one to which person spends most of the time. In case of having several jobs, and at least one is unpaid, consider the paid one as the main source. If all jobs are paid, and are given the same amount of time, the main job would be that one with the highest income.

C1. What is the Name of the business, organization, farm or institution where (Name) works or performs labor activities?
C2. In which province and canton is this business, organization, farm or institution (Name) located?
In this same canton
Canton At another country O3
C3. What kind of business or industry is the organization, farm or institution where (Name) works in? (What do the organization, farm or institution make or do?)
Remember: Only for interviewer
C3a. Which is the main product or service?
C4. What does (Name) do at his/her job? What are his/her main duties?
C5. Does (Name) normally use any kind of tool, machinery or equipment?
Yes O1 (Which ones?) No O2
C6. What is (Name)'s occupation?

C7. Hours at <u>main job</u>				
Have many have does (Nama)				
How many hours does (Name)				
usually work per week?				
How many <u>extra</u> hours did (Name) work last week? <i>(include paid and unpaid hours)</i>				
How many hours <u>less</u> the normal				
schedule did (Name) work last week				
(due to vacation, leaves, injuries, etc.)?				
(Confirm on Tablet)				
· · · · · · · · · · · · · · · · · · ·				
How many <u>effective</u> hours did				
(Name) work last week?				
C8. How many people <u>regularly</u> work here, including (Name) and the owner?				
(Remember: if this is a domestic worker at another house, do not				
include its householder)				
Less than 10 (enter the number)				
From 10 to less than 20				
10 or more From 20 to less than 30				
From 30 to less than 100				
100 or more				
C8a. Where does (Name) mainly perform his/her tasks?				
Always at the shop, company site or farm for the				
company you work for				
Always at the same shop, company site or farm where				
you provide services				
Alternating sites at the company your work for or give				
service to				
JC1 VICE (0				
For services provided				
Py piece or product 002				
At your home Exclusively over the internet				
Telecommuting005				
At the employer's household				
On the street, with a set station				
On the street, without station				
On the move (door-to-door, sales, paperwork)				
Transportation of any kind				
Construction site				
Outside of the country				
Other				
(Specify)				

C9. The place where (Name) perform his/her duties belongs to					
	own business or freelance? O1 (Skip to C13)				
private sector	institution or company? O2 private residence? O3 Continue with C10				
government or public institution? 04					
•	se or institution which pays a wage to (Name), is Name) performs his/her duties or business?				
Yes 01	No O2				
(Skip to C13)	<b>↓</b>				
C11. What is the f	Name of the company that pays your salary?				
	f business or industry is the company that is slary? (What do the company make or do?)				
C13. Is this job oran own business	activity s or private company (Skip to Section D:				
or enterprise?as an employee	O1 Self-Employed Persons)				
	itution?O2  (Skip to Section E: Employees Persons				
	elative or acquaintance ent in cash or in kind? O4				
not receiving parkind? (Aid for an empl	elative or acquaintance yment in cash or in				
C14. Does (Name) kind for this job?	receive a fixed amount payment in cash or in				
Yes 01 —	(Skip to Section E)				
No O2 —	"If the answer to C13 is code 5 skip to Section F, if not, continue with C15"				

C15. Does (Name) take part in the decision-making and management of the company?				
Yes O1 No O2				
C16. Does (Name) withdraw money or receive profit for this job?				
Yes O1 No O2 <b>──→ (Skip to Section F)</b>				
C17. The person with whom (Name) works is				
a member of this household?				
a member of another household? O2				
(Skip to Section D)				
Enter the line number for this person				
C18. How much money did (Name) receive last month?				
SKIP TO SECTION F				

Comments:	
	—
	—
	—
	—

# **SECTION D: Self-Employed Persons**

D1. Does (Name) hire personnel	D2. During the past week. How many people worked with (Name)?	D8. Is the business registeredwith a corporate number at Property Registry Office
yes, permanently O1	<b>→</b>	(Specify)it is not registered
yes, occasionally O2	<b>→</b>	D9. Does this business keep formal accounts periodically?
(Name) never hire personnel O3		(Those on a simplified tax regime are not included here)
D3. Is (Name)'s business or activity		Yes O1 No this is a NON-farming activity O2 (Skip to D16) this is a farming activity O3
for an indefinite or permanent time?only for the season?only for a fixed amount of time?	O2	(Continue on D10) (Skip to D22)
done only once?		Self-Employed Income
DA Ham lane did shie iah last a mill shie	inh look?	Corporations and quasi-corporations
A week or less		D10. Does (Name) have a salary assigned by his/her company?  Yes
More than six months to a year  More than a year		D12a. In the past twelve months, has (Name) received any payments for distribution of profits or earnings?
D5. How long has (Name) owned this bu continuously?	usiness or activity	Yes
(With interruptions of no more than 15 d	How many?	D13. In the past twelve months, did (Name) reinvest the profits or returns generated by his/her enterprise?  Yes
More than a month  A year or more	1 . 1	Remember for D14: Only if a salary was assigned on D11; if not, skip to D15
D6. To perform the duties of the busine		D14. At this job, does (Name) have deductions of social security? Yes
	ented? borrowed? No	D14a. Did the company assign a Christmas bonus (aguinaldo) to
tools01	02 03 04	(Name)? Yes 01 No 02
machinery01	02 03 04	D15. Did (Name) receive any of the following from the company:
shop or land 01	02 03 04	(Only payments in kind) What is the estimated value?
own vehicle only used for business O1	02 03 04	food?
D7. Does (Name) have partners in this b	ousiness?	No O2 home?Yes O1
And they are members of this h	nousehold01	No O2personal vehicle?Yes O1
And they are members of other	households O2	No O2
No		No O2 SKIP TO SECTION F

# Only for <u>non-farming production</u> (Only code 2 on question D9)

# Remember from D16 to D18a:

If the amount stated differs from that of a month, put it together

D16. <u>Last month</u> , how much did (Name) sell or charge for his/her products or services?				
D17. <u>Last month</u> , how much did (Name) spend making sales or providing services?				
(Confirm on Tablet) D18. Was the profit for the past month ? Yes O1 No O2				
(Skip to D19)				
D18a. So, how much has (Name) earned?				
Profit estimation. Only if the amount is ignored or "0".				
D18b. How much of the monthly expenses of the household is covered by the revenue of this activity?				
Did not assign an amount for household expenses 01				
For use of interviewer: D19. Is this a manufacturing or product sales activity? Yes O1  No O2				
(Continue on D20) SKIP TO SECTION F				
D20. About (Name)'s production, did (Name) take any amount for own consumption the past month?				
Yes				
SKIP TO SECTION F				

Only for <u>farming production, hunting, silviculture</u> <u>and fishing</u> (Only code 3 on question D9)

## Remember from D22 to D25:

If the amount stated corresponds to <u>less than a month</u>, put it together

D22 What was the total revenue of Harvest, production, the farming production or fishing fishing period activity in the last period?
D23. How much did (Name) invest in this production?
(Confirm on Tablet)  D24. Is the average return per month?  Yes O1 No O2
(Skin to D10)
(Skip to D19) ♥
D24a. So, what is the estimated monthly return?
Profit estimation. Only if the amount is ignored or "0".
D24b. How much of the monthly expenses of the household is covered by the revenue of this activity?
Did not assign an amount for household expenses
D25a. About (Name)'s production, did (Name) take any amount for own consumption the past month?
Yes O1 D26a. What would be the estimated value of the
No
for home consumption if they had been sold?
SKIP TO SECTION F
Occasional Income

# Occasional Income (Only for codes 1 and 2 in question D4)

D27. How much money did or will (Name) earn for this activity?

SKIP TO SECTION F

## This area is for notes of questions D16 to D24 only

Product	Quantity	Price per unit	Value of sales	Expenses	Profit	Period

#### Notes for D25 (self-consumption)

Quantity	Value	Period

# SECTION E: Employees Persons (refer only to main job)

E1. Is your job	E6. Does (Name) have to make use any of the following, without any form of compensation to perform the work
for an indefinite or permanent time?	instruments, or tools? Yes O1 No O2
done only once?	own vehicle or motorcycle?Yes 71 No 02
ony when needed of disked for	room or area within your household? Yes O1 No O2
E2. How long did this job last o will this job last?	machinery or equipment? Yes O1 No O2
A week or less	own capital? Yes O1 No O2
More than a month to three months	E7. Which is the form of payment
More than a year	only by comission? 001
E3. How long has (Name) worked continuously at this place?	wage and commissions? 002
(With interruptions of less than 15 days)	consulting or professional fees? 003
How many?	daily wage?004
Less than a month	piece-rate payment? 005
More than a month	hourly pay?
A year or more 03 years	fixed wage?007
	only in kind? O08 (Skip to E15)
E4. What is (Name)'s regular work shift?	was paid only once
Day shift (between 5 am and 7pm)	E8. Which is the pay period?
Alternating, rotating or staggered shifts O4	Daily01
Other	Weekly
Own shift O6 (Skip to E6)	Bi-weekly03
	Fortnight04
E5. How many straight work days does (Name) have? How many days off?	Monthly
Work days	Other
	(Specify)
Off days	
	E8a. How many working weekly hours were (Name) hired for?
E5a. Does the company assign an alternating on/off shift for (Name)?	Less than 15 hours 01
Yes 01 No 02	15 to less than 40 hours O2
	40 to 48 hours
Remember for E6:	Over 48 hours
Remember for E6:  Machinery or equipment: Machinery refers to the group of	Over 48 hours

E9. At this present job, does (Name) receive	E14a. Did (Name) receive any How muc	th was it?
Yes         No          paid sick leave?         O1         O2          paid vacation?         O1         O2          labor insurance?         O1         O2          paid extra hours?         O1         O2          travel expenses?         O1         O2	bonuses?	
E10. Does (Name) get any of the following deductions at his/her job  Yes Nosocial security?	extra hours?	
revenue tax? 01 02  Employees Income	E15. For this job, did (Name) receive any of the following (Only for payments in kind)  What is the estimate	
E11. At the present job, which was (Name) gross salary for the past month before deductions? (No tips, travel expenses or overtime)	food expenses?	
Continue with E12	lodging,Yes O1 →   accommodations? No O2	
Did not receive any payment the past month and have been there for over a month	personal vehicle? Yes O1 →   No O2	
Did not receive any payment the past month and will remain at work for a month or less	other payments	SECTION F
E12. How much were (Name) paid the past month after deductions of social security, taxes, etc.—including only those that are automatically deducted by the employer? (Do not include savings, payments or others)	E16. Which will be (Name)'s gross monthly salary?  SKIP TO	SECTION F
E13. During the past twelve months at this job, did (Name) receive any  How much was it?	E17. Which was or will be (Name)'s gross salary for the period? (Including tips)	hiring
year-end bonus?	period	SECTION F
E14. Did (Name) receive any bonuses, tips, paid extra hours or any other payment in cash during the past month?  Yes O1 (Continue with E14a) No O2 (Skip to E15)	Comments:	

# **SECTION F: Secondary Job**

F1. During the past week, did (Name) perform any other type of work besides the one discussed before?	F2b. What kind of business or industry is the organization, farm or institution where (Name) works in? (What do the organization, farm or institution make or do?)
No, (Name) only has this job O1	
Yes - (Name) has an additional job	
F1a. Besides the main job, did (Name) do any of the following activities for at least one hour, during the past week, in exchange for payment in cash or in kind  (Read every option until you have an affirmative answer, then confirm that it was for at least an hour) sold food or other products, raffle tickets,	F3a. What does (Name) do at this extra job, which are his/her main tasks?
home sales?01	
performed miscellaneous jobs or "gigs"? O2	F3b. Does (Name) make use of any tools, machinery or gear?
did tailoring, crafts or prepared food to sell?	Yes O1 (Which ones?) No O2
helped in farm labor, caretaking, cleaning or ironing for another household or a business in exchange for payment in cash or in kind? O4	
Did not do any of those activities	
F1b. Additionally the job mentioned before, do (Name) have a secondary own business or job from which were temporarily absent?	F3c. What is (Name)'s occupation?
Yes O1 No O2	
(Continue with F1 (Skip to Section G)	
F1c. Was (Name)'s absence for	F3d. Where does (Name) mainly perform his/her tasks?
	Always at the same company, farm, institution site
less than a month?	
	For services provided
Remember from F2a to F5:	At your home By piece or product
Make sure the following information belongs to the job having <b>the</b>	Telecommuting 005
most working hours besides the person's main job.	At the employer's household
	On the street, with a set station
F2a. What is the Name of the business, institution or farm where	On the street, no station
(Name) works?	On the move (door-to-door, sales, paperwork)
	Transportation of any kind O10
	Construction site
	Outside of the country
	Other
	(Specify)

F3e. Is (Name) job		
for an indefinite or permanent time?		
F4. Is this job or activity		
an own business or private company O1 or enterprise?  (Continue with F5: Self-Employed Persons)		
as an employee for a person, business or institution?		
as a domestic worker at one or more homes?		
as an aid for a relative or acquaintance receiving payment in cash or in kind? O4		
as an aid for a relative or acquaintance not receiving payment in cash or in kind?		
F5. Does (Name) hire personnel		
yes, permanently?		
F5a. Is the business registered		
with a corporate number at Property Registry Office? O1at another public entity? O2 (Specify)		
it is not registered 03		
F6. Hours spent at a secondary jobs (secondary job and other jobs)		
Secondary jobs		
How many hours does (Name)  usually work per week?		
How many <u>extra</u> hours did you work last week? <i>(include paid and</i> unpaid hours)		
How many hours <u>less</u> the normal schedule did (Name) work last week (due to vacation, leaves, injuries, etc.)?		
(Confirm on Tablet)How many <u>effective</u> hours did (Name) work last week?		

#### **Skipping:**

Check F4, if (Name)'s secondary job is:

- Self-Employed Persons (F4 = 1) move to F6e Secondary Self-Employed Income.
- Employees Persons (F4 = 2, 3 or 4) move to F8d: Secondary Employees Income.
- Unpaid workers (F4 = 5) move to Section G

## Secondary Self-employed Income

#### Reminder for Self-employed Income:

Take only the income that corresponds to the Main Secondary Job for questions F7 and F8.

F6e. Does this business keep formal accounts periodically? (Those on a simplified tax regime are not included here)	
<b>\</b>	No O2  (Continue with F7a)
<b>F7. Which was the net profit o</b> (Enter the period. If it is farm month)	f the business? ing, the period may be longer than a Period
F7a. Sold	
F7b. Spent	
F7c. Profit	
F8a. Did (Name) keep any prod for consumption at home?	uce
Yes O1 No O2	F8c. What is the estimated value of the items kept if they had been sold?
(Skip to Section G)	·
	F8b. Which was the period?

# Secondary Employees Income

## Reminder for Employees Income:

F8d. Which is the form of payment		
only by commission?		
wage and/or commissions? 002		
consulting or professional fees? 003		
daily wage? 004		
piece-rate payment?005		
hourly pay?		
fixed wage?		
only in kind? 008 (Skip to F13)		
F8e. Do (Name) get any deductions for		
Yes NoO1 O2		
F9. Which was (Name) total salary for the past month before any deductions (gross salary)?		
Continue with F10		
Did not receive any payment the past month and have been there for over a month		
have been there for over a month		
have been there for over a month		
have been there for over a month		
have been there for over a month		

F12. Which was or will be (Name) salary for the period?	
for	
period	
F13. Did (Name) receive meals, partial subsidies, lodging, fuel, a vehicle for personal use or any other form of payment in kind for the past month?	
Yes O1 What is the estimated value?	
No O2	
Reminder for F14:	
The question is only for persons who answered code 3 on F1 (Persons with two or more additional jobs).	
F14. How much did (Name) earn for his/her other jobs?	
<u> </u>	
(Name) did not have another job O1	
SKIP TO SECTION G	
Comments:	

# SECTION G: Insufficient working hours and inadequate employment

#### **Insufficient Working Hours**

If the person is on leave (B4 = 1) transcribe their <u>usually work hours</u>

Interviewer: Remember to transcribe total hours,

Effective total hours at main job (C7).....

Effective total hours at secondary jobs (F6) +

Total working hours..... =

G1. (Name) worked hours last week, would (Name) have wanted to work more hours? (If person was on leave, ask "would you have wanted to")  Yes	
G2. If (Name) had get more hours, would (Name) have worked	
last week?	
G3. Why would (Name) not work more hours on the week?	
Due to studies	
Inadequate Employment	
G4. Despite (Name) had a job last week, would (Name) like to change the job? (If person has two or more jobs, refer to the main job)	
Yes 01 Continue with G5	
No O2 (Skip to I2)	
G5. If (Name) found the job that wishes, would (Name) change his/her job on the next four weeks?	
Yes O1 No O2	
(Continue with G6) (Skip to G7)	

You are looking for a more stable job	
You are looking for better working conditions (closer distance, work climate, etc.)	
(closer distance, work climate, etc.)	
• • • • • • • • • • • • • • • • • • • •	
You do not like it; find it inconvenient 04	
To work fewer hours	
To earn more money 06	
To find a more suitable job for your career	
To gain experience	;
G7. During the past four weeks, did (Name) use any of the followin methods in the job search (Read every option until arriving at an answer)	ıg
asked friends or relatives?	
sought to establish your own business?	
offered home services?	
handed out resumes, participated in job fairs?	
inquired at sites?	
nothing?	
SKIP TO 12	7

# **SECTION H: Unemployed Persons**

	_
H1. How long ago did (Name) do something to find a job or to start an own business?	t
A week ago or lessO1	
More than a week to a month ago O2	
More than a month to three months ago	
More than three to six months ago 04	
More than six months to a year ago O5	
More than a year to three years ago	
More than three years ago O7	
Has not done anything	
H2. Have (Name) ever worked?	
Yes O1 No O2 (Skip to H12)	
H3. Since (Name) left his/her last job, how long ago have (Name) been looking for a work or to start an own business?	
A month or less	
More than a month to three months	
More than three to six months	
More than six months to a year O4	
More than a year to three years O5	
More than three years	

H4. When did (Name) leave his/her	last job?
Less than three months ago	01
Three to six months ago	
Six months to a year ago	
A year to three years ago	
Three years ago or more	
H5. What was the Name of the com last worked in?	pany or business where (Name)
H6. What kind of business or indusinstitution where (Name) last worker farm or institution make or do?)	stry is the organization, farm or ed in? (What do the organization,
H7. Which was the reason for leaving	ng this job?
Closure due to:	
Lack of clientele	
Delinquent customers	
Fierce competition	
Was unable to cover for expenses	
Not enough capital, machinery or ed	
Motives related to the Labor Marke	et:
Closure, bankruptcy, relocation	006
Reorganization or reduction in force	007
End of seasonal job	008
Forced layoff, layoff agreement	009
Contract termination	010
Other labor reasons	011
Personal motives:	
Voluntary resignation	
Prolonged injury leave, labor accide	
Personal reasons (studies, illness, tra	
Family reasons (marriage, pregnance	
Did not like job, was inconvenient	
Bad working climate, poor labor con	• •
sanitary conditions, retaliation, sexu	
Retirement or permanent disability.	
Was not paid enough or at all	019
H8. The job mentioned was	
an own business?	
as an employee for a person, busi	
institution?	
as a domestic worker for one or n	
as an aid for a relative or acquaint	
without any form of payment in c	asn or in king? 04

H8a. How long did (Name) work at his/her last	iob? How many?	
Less than a month O1	· · · · · · · · · · · · · · · · · · ·	
More than a month O2	months	
A year or more O3	years	
H9. In which field or industry is (Name) looking for work		
farming or fishing?	01	
manufacture?	O2	
commerce (clothing, goods, etc.)?	03	
services (teaching, call center, etc.)?	04	
other?(Specify)	O5	
	. (2)	
H10. What is the most important condition that to get at the job that is looking for?	at (Name) would like	
Fewer working hours	01	
More flexible shifts (non-continuous, part-time,		
night shift, etc.)		
Akin to your knowledge or experience		
Good wage conditions		
Good working climate		
A minimum wage	06	
H11. During the time unemployed, have (Name) found an alternative source of income?		
Yes O1 No O2	SKIP TO 12	
H12. How long have (Name) been trying to business of his/her own?	find a job or start a	
A month or less	01	
More than a month to three months	02	
More than three to six months	03	
More than six months to a year	O4	
More than a year to three years	O5	
More than three years	O6	
Has not done anything	07	
	CVID TO 12	
	SKIP TO 12	

# **SECTION I: Primary Production for Own-consumption at the Household**

<ol><li>I1. Does (Name) look for month or some ways to</li></ol>	•	or seasonal work at a given	I6. Did (Name) do any tailoring exclusively for use at the household during the past week?
Yes O1 No O2			Yes O1 — I6a. How many hours did (Name) spend?
At which months?	Yes	No	No O2
January	_	<b>○2</b>	17. Did (Name) do any community or volunteer work the past week?
February	_	<u>2</u>	
March		<u>2</u>	Yes 01 17a. How many hours did (Name) spend?
April	_	<u>2</u>	
May	_	<u>2</u>	
June	_	<b>○</b> 2	
July		<b>○</b> 2	No O2 — End of questionnaire
August	_	<b>○</b> 2	<u> </u>
September		<b>○</b> 2	
October		<b>○</b> 2	I8. What is the Name of the place where does (Name) volunteer or
November		<u>2</u>	community work?
		pasture poultry, participate in ucts during the past week	
exclusively for own-con		acts during the past week	I9. Did (Name) receive any form of payment for the volunteer work?
			Yes 01
Yes 01 -> H	ow many hour	s did (Name) spend?	No O2
No 02	Skip to 15		I10. How much did (Name) get or will be paid?
I3. Was the activity relate	ed to		
farming?	.01	Specify,	Comments:
pasturing?	O2	Which type?	
fishing?	. O3		
other?	04		
		n would (Name) have spent on ame) had paid for them?	
I5. During the last we construction activities e		e) do remodeling, repairs or his/her home?	
Yes 01	I5a. How ma	any hours did (Name) spend?	
No O2			