

Ce questionnaire est disponible en français 1 800 591-2001

OFFICE USE ONLY	Prov.	FED	EA	VN	CCD	2B	UD	FR	Forms 3	1.
	VR Line No.	Map Block No.	Form type 3	No. of persons	Questionnaire No.		TD	1 <input type="checkbox"/>	3 <input type="checkbox"/>	<input type="checkbox"/>
							NH/S	TR	Coll.	
							2 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="checkbox"/>	

FOR INFORMATION ONLY



CENSUS

Count yourself in! May 15, 2001

For over 300 years, the census has painted a picture of our people and the places in which we live. This census, on May 15, 2001, will continue the tradition by providing information needed by community groups, businesses and governments to develop plans for education and training, seniors' housing, day care, fire protection, public transport, and many other programs that are important to all of us.

As Canada's national statistics agency, Statistics Canada uses census data for producing statistical tables, analytical reports and for selecting samples or following up respondents for some of our surveys. These uses are strictly for statistical purposes and no one outside of the agency can have access to your identifiable information.

By law, Statistics Canada must take a census every five years, and every household must fill in a census form. Also, by law, Statistics Canada must protect the confidentiality of the personal information you provide. Our employees, including census takers, are personally liable to fines or imprisonment should they break the confidentiality of your information.

Please complete your census form and mail it back on May 15, 2001.

Thank you for your cooperation.

Ivan P. Fellegi
Chief Statistician of Canada

This information is collected under the authority of the *Statistics Act*, R.S.C. 1985, c. S-19, and must be provided by law.

CONFIDENTIAL WHEN COMPLETED

STEP A **Begin here**
by printing your address

No. and street or lot and concession		Apt. No.	
<input type="text"/>		<input type="text"/>	
City, town, village, Indian reserve		Province / territory	
<input type="text"/>		<input type="text"/>	
Postal code	Area code	Telephone number	
<input type="text"/>	<input type="text"/>	<input type="text"/> - <input type="text"/>	

? For information and instructions see the Guide

☎ Call us free of charge
1 800 591-2001

📞 TTY/TDD users call:
1 877 881-8301

WHOM TO INCLUDE IN

STEP B

- **EVERYONE WHO USUALLY LIVES HERE, AT THIS ADDRESS:** including newborn babies and room-mates;
- **STUDENTS:** students who return to live with their parents during the year should be included at their parents' address, even if they live elsewhere while attending school or working at a summer job;
- **CHILDREN IN JOINT CUSTODY:** children in joint custody who live here most of the time. Children who spend equal time with each parent should be included in the home of the parent where they are staying on May 15, 2001;
- **ABSENT SPOUSES:** spouses or common-law partners who live elsewhere while working or studying but who return here periodically;
- **LANDED IMMIGRANTS:** landed immigrants who usually live at this address;
- **REFUGEES:** persons claiming refugee status and family members living here with them;
- **PERSONS FROM ANOTHER COUNTRY WITH A WORK, STUDENT OR MINISTER'S PERMIT:** persons from another country who have an employment authorization, a student authorization or a Minister's permit, and family members living here with them;
- **PERSONS IN INSTITUTIONS:** persons who usually live here but are now in an institution (such as a home for the aged, a hospital or a prison), if they have been there less than six months;
- **PERSONS WITH NO OTHER HOME:** persons staying here on May 15, 2001, who have no usual home elsewhere.

FOR INFORMATION ONLY

DO NOT INCLUDE IN

STEP B

- Persons who have their usual home at another address in Canada and who are staying here temporarily (for example, persons visiting or persons who have their secondary residence here, at this address);
- Residents of another country visiting Canada (for example, on a business trip or on vacation);
- Government representatives of another country or members of the Armed Forces of another country and family members.

IF ALL PERSONS STAYING AT THIS ADDRESS on May 15, 2001, have their usual home elsewhere in Canada **OR** are visitors, government or military representatives of another country, mark this circle 01

90.

→ Do not complete this questionnaire. Mail it in the enclosed postage-paid envelope.



**STEP
B**

List below all persons who usually live here, at this address, as of May 15, 2001, even if they are temporarily away. Don't forget to include yourself!

Begin the list with an adult followed, if applicable, by that person's spouse or common-law partner and by their children who usually live here. Continue with all other persons who usually live here. Children should be listed immediately after their parent(s).

	Family name	Given name	Initial
Person 1			
Person 2			
Person 3			
Person 4			
Person 5			
Person 6			
Person 7			
Person 8			
Person 9			
Person 10			

FOR INFORMATION ONLY

If you need more space, use the "Comments" section on page 32.

**STEP
C**

Did you leave anyone out of Step B because you were not sure the person should be listed?

For example:

- a person living at this address who has another home;
- a person temporarily away.

No

00. Yes → Specify the name, the relationship and the reason.

Name
Relationship
Reason

Name
Relationship
Reason

If you need more space, use the "Comments" section on page 32.

**STEP
D**

Is anyone listed in Step B a farm operator?

02 No

03 Yes

A farm operator makes the day-to-day management decisions for a farm. Farms produce any of the following agricultural products intended for sale:

- crops
- livestock
- poultry
- other agricultural products (greenhouse or nursery products, Christmas trees, sod, honey, maple syrup products, furs, eggs, milk, etc.)

**STEP
E**

Copy the names from Step B to Question 1, on the top of the next page.

IF MORE THAN SIX PERSONS LIVE HERE and you do not have a second questionnaire to include them, note this in the "Comments" section on page 32. A Statistics Canada representative will contact you.



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1

Family name
Given name Initial

PERSON 2

Family name
Given name Initial

FOR INFORMATION ONLY

2 SEX

01. Male
 Female

02. Male
 Female

3 DATE OF BIRTH

Day Month Year
Example: 23 02 1954

If exact date is not known, enter best estimate.

Date of birth
Day Month Year
03

Date of birth
Day Month Year
03

4 MARITAL STATUS

Mark "⊗" one circle only.

04 Never legally married (single)
05 Legally married (and not separated)
06 Separated, but still legally married
07 Divorced
08 Widowed

04 Never legally married (single)
05 Legally married (and not separated)
06 Separated, but still legally married
07 Divorced
08 Widowed

5 IS THIS PERSON LIVING WITH A COMMON-LAW PARTNER?

Common-law refers to two people of the opposite sex or of the same sex who live together as a couple but who are not legally married to each other.

09 Yes
10 No

09 Yes
10 No

6 RELATIONSHIP TO PERSON 1

For **each** person usually living here, describe his/her relationship to Person 1.

Mark "⊗" or specify one response only.

Stepchildren, adopted children and children of a common-law partner should be considered sons and daughters.

If none of the choices apply, use the "Other" box to indicate this person's relationship to Person 1.

Examples of "Other" relationships to Person 1:

- grandparent
- cousin
- niece or nephew
- lodger's husband or wife
- room-mate's daughter or son
- employee

11 **PERSON 1**

- 12 Husband or wife of Person 1
- 13 Common-law partner (opposite-sex) of Person 1
- 14 Common-law partner (same-sex) of Person 1
- 15 Son or daughter of Person 1
- 16 Son-in-law or daughter-in-law of Person 1
- 17 Grandchild of Person 1
- 18 Father or mother of Person 1
- 19 Father-in-law or mother-in-law of Person 1
- 20 Brother or sister of Person 1
- 21 Brother-in-law or sister-in-law of Person 1
- 22 Lodger or boarder
- 23 Room-mate
- Other — Specify

24



PERSON 3	PERSON 4	PERSON 5	PERSON 6
Family name	Family name	Family name	Family name
Given name Initial	Given name Initial	Given name Initial	Given name Initial
FOR INFORMATION ONLY			
03. <input type="text"/>	04. <input type="text"/>	05. <input type="text"/>	06. <input type="text"/>
01 <input type="radio"/> Male 02 <input type="radio"/> Female	01 <input type="radio"/> Male 02 <input type="radio"/> Female	01 <input type="radio"/> Male 02 <input type="radio"/> Female	01 <input type="radio"/> Male 02 <input type="radio"/> Female
Date of birth	Date of birth	Date of birth	Date of birth
Day Month Year	Day Month Year	Day Month Year	Day Month Year
03 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	03 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	03 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	03 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
04 <input type="radio"/> Never legally married (single) 05 <input type="radio"/> Legally married (and not separated) 06 <input type="radio"/> Separated, but still legally married 07 <input type="radio"/> Divorced 08 <input type="radio"/> Widowed	04 <input type="radio"/> Never legally married (single) 05 <input type="radio"/> Legally married (and not separated) 06 <input type="radio"/> Separated, but still legally married 07 <input type="radio"/> Divorced 08 <input type="radio"/> Widowed	04 <input type="radio"/> Never legally married (single) 05 <input type="radio"/> Legally married (and not separated) 06 <input type="radio"/> Separated, but still legally married 07 <input type="radio"/> Divorced 08 <input type="radio"/> Widowed	04 <input type="radio"/> Never legally married (single) 05 <input type="radio"/> Legally married (and not separated) 06 <input type="radio"/> Separated, but still legally married 07 <input type="radio"/> Divorced 08 <input type="radio"/> Widowed
09 <input type="radio"/> Yes 10 <input type="radio"/> No	09 <input type="radio"/> Yes 10 <input type="radio"/> No	09 <input type="radio"/> Yes 10 <input type="radio"/> No	09 <input type="radio"/> Yes 10 <input type="radio"/> No
15 <input type="radio"/> Son or daughter of Person 1 16 <input type="radio"/> Son-in-law or daughter-in-law of Person 1 17 <input type="radio"/> Grandchild of Person 1 18 <input type="radio"/> Father or mother of Person 1 19 <input type="radio"/> Father-in-law or mother-in-law of Person 1 20 <input type="radio"/> Brother or sister of Person 1 21 <input type="radio"/> Brother-in-law or sister-in-law of Person 1 22 <input type="radio"/> Lodger or boarder 23 <input type="radio"/> Room-mate Other — <i>Specify</i>	15 <input type="radio"/> Son or daughter of Person 1 16 <input type="radio"/> Son-in-law or daughter-in-law of Person 1 17 <input type="radio"/> Grandchild of Person 1 18 <input type="radio"/> Father or mother of Person 1 19 <input type="radio"/> Father-in-law or mother-in-law of Person 1 20 <input type="radio"/> Brother or sister of Person 1 21 <input type="radio"/> Brother-in-law or sister-in-law of Person 1 22 <input type="radio"/> Lodger or boarder 23 <input type="radio"/> Room-mate Other — <i>Specify</i>	15 <input type="radio"/> Son or daughter of Person 1 16 <input type="radio"/> Son-in-law or daughter-in-law of Person 1 17 <input type="radio"/> Grandchild of Person 1 18 <input type="radio"/> Father or mother of Person 1 19 <input type="radio"/> Father-in-law or mother-in-law of Person 1 20 <input type="radio"/> Brother or sister of Person 1 21 <input type="radio"/> Brother-in-law or sister-in-law of Person 1 22 <input type="radio"/> Lodger or boarder 23 <input type="radio"/> Room-mate Other — <i>Specify</i>	15 <input type="radio"/> Son or daughter of Person 1 16 <input type="radio"/> Son-in-law or daughter-in-law of Person 1 17 <input type="radio"/> Grandchild of Person 1 18 <input type="radio"/> Father or mother of Person 1 19 <input type="radio"/> Father-in-law or mother-in-law of Person 1 20 <input type="radio"/> Brother or sister of Person 1 21 <input type="radio"/> Brother-in-law or sister-in-law of Person 1 22 <input type="radio"/> Lodger or boarder 23 <input type="radio"/> Room-mate Other — <i>Specify</i>
24 <input type="text"/>	24 <input type="text"/>	24 <input type="text"/>	24 <input type="text"/>



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

ACTIVITIES OF DAILY LIVING

7 Does this person have any **difficulty** hearing, seeing, communicating, walking, climbing stairs, bending, learning or doing any similar activities?

07.

- 01 Yes, sometimes
 02 Yes, often
 03 No

08.

- 01 Yes, sometimes
 02 Yes, often
 03 No

8 Does a physical condition **or** mental condition **or** health problem **reduce the amount or the kind of activity** this person can do:

(a) at home?

- 04 Yes, sometimes
 05 Yes, often
 06 No

- 04 Yes, sometimes
 05 Yes, often
 06 No

(b) at work or at school?

- 07 Yes, sometimes
 08 Yes, often
 09 No
 10 Not applicable

- 07 Yes, sometimes
 08 Yes, often
 09 No
 10 Not applicable

(c) in other activities, for example, transportation or leisure?

- 11 Yes, sometimes
 12 Yes, often
 13 No

- 11 Yes, sometimes
 12 Yes, often
 13 No

SOCIOCULTURAL INFORMATION

9 Where was this person born?
 ■ *Specify one response only, according to present boundaries.*

Born in Canada
Specify province or territory

14

Born in Canada
Specify province or territory

14

Born outside Canada
Specify country

15

Born outside Canada
Specify country

15

10 Of what country is this person a citizen?
 ■ *Indicate **more than one** citizenship, if applicable.*
“Canada, by naturalization” refers to the process by which an immigrant is granted citizenship of Canada, under the Citizenship Act.

- 16 Canada, by birth
 17 Canada, by naturalization
 Other country — *Specify*

18

- 16 Canada, by birth
 17 Canada, by naturalization
 Other country — *Specify*

18

11 Is this person now, or has this person ever been, a **landed immigrant**?
 ■ *A “landed immigrant” is a person who has been granted the right to live in Canada permanently by immigration authorities.*

- 19 No **▶ Go to Question 13**
 20 Yes

- 19 No **▶ Go to Question 13**
 20 Yes

12 In what year did this person first become a landed immigrant?
If exact year is not known, enter best estimate.

Year

21

Year

21



PERSON 3	PERSON 4	PERSON 5	PERSON 6
Family name	Family name	Family name	Family name
Given name Initial	Given name Initial	Given name Initial	Given name Initial
FOR INFORMATION ONLY			
09. 01 <input type="radio"/> Yes, sometimes 02 <input type="radio"/> Yes, often 03 <input type="radio"/> No	10. 01 <input type="radio"/> Yes, sometimes 02 <input type="radio"/> Yes, often 03 <input type="radio"/> No	11. 01 <input type="radio"/> Yes, sometimes 02 <input type="radio"/> Yes, often 03 <input type="radio"/> No	12. 01 <input type="radio"/> Yes, sometimes 02 <input type="radio"/> Yes, often 03 <input type="radio"/> No
04 <input type="radio"/> Yes, sometimes 05 <input type="radio"/> Yes, often 06 <input type="radio"/> No	04 <input type="radio"/> Yes, sometimes 05 <input type="radio"/> Yes, often 06 <input type="radio"/> No	04 <input type="radio"/> Yes, sometimes 05 <input type="radio"/> Yes, often 06 <input type="radio"/> No	04 <input type="radio"/> Yes, sometimes 05 <input type="radio"/> Yes, often 06 <input type="radio"/> No
07 <input type="radio"/> Yes, sometimes 08 <input type="radio"/> Yes, often 09 <input type="radio"/> No 10 <input type="radio"/> Not applicable	07 <input type="radio"/> Yes, sometimes 08 <input type="radio"/> Yes, often 09 <input type="radio"/> No 10 <input type="radio"/> Not applicable	07 <input type="radio"/> Yes, sometimes 08 <input type="radio"/> Yes, often 09 <input type="radio"/> No 10 <input type="radio"/> Not applicable	07 <input type="radio"/> Yes, sometimes 08 <input type="radio"/> Yes, often 09 <input type="radio"/> No 10 <input type="radio"/> Not applicable
11 <input type="radio"/> Yes, sometimes 12 <input type="radio"/> Yes, often 13 <input type="radio"/> No	11 <input type="radio"/> Yes, sometimes 12 <input type="radio"/> Yes, often 13 <input type="radio"/> No	11 <input type="radio"/> Yes, sometimes 12 <input type="radio"/> Yes, often 13 <input type="radio"/> No	11 <input type="radio"/> Yes, sometimes 12 <input type="radio"/> Yes, often 13 <input type="radio"/> No
Born in Canada Specify province or territory 14 <input style="width: 100%;" type="text"/>	Born in Canada Specify province or territory 14 <input style="width: 100%;" type="text"/>	Born in Canada Specify province or territory 14 <input style="width: 100%;" type="text"/>	Born in Canada Specify province or territory 14 <input style="width: 100%;" type="text"/>
Born outside Canada Specify country 15 <input style="width: 100%;" type="text"/>	Born outside Canada Specify country 15 <input style="width: 100%;" type="text"/>	Born outside Canada Specify country 15 <input style="width: 100%;" type="text"/>	Born outside Canada Specify country 15 <input style="width: 100%;" type="text"/>
16 <input type="radio"/> Canada, by birth 17 <input type="radio"/> Canada, by naturalization Other country — Specify 18 <input style="width: 100%;" type="text"/>	16 <input type="radio"/> Canada, by birth 17 <input type="radio"/> Canada, by naturalization Other country — Specify 18 <input style="width: 100%;" type="text"/>	16 <input type="radio"/> Canada, by birth 17 <input type="radio"/> Canada, by naturalization Other country — Specify 18 <input style="width: 100%;" type="text"/>	16 <input type="radio"/> Canada, by birth 17 <input type="radio"/> Canada, by naturalization Other country — Specify 18 <input style="width: 100%;" type="text"/>
19 <input type="radio"/> No ▶ Go to Question 13 20 <input type="radio"/> Yes	19 <input type="radio"/> No ▶ Go to Question 13 20 <input type="radio"/> Yes	19 <input type="radio"/> No ▶ Go to Question 13 20 <input type="radio"/> Yes	19 <input type="radio"/> No ▶ Go to Question 13 20 <input type="radio"/> Yes
Year 21 <input style="width: 100%;" type="text"/>	Year 21 <input style="width: 100%;" type="text"/>	Year 21 <input style="width: 100%;" type="text"/>	Year 21 <input style="width: 100%;" type="text"/>



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

13 Can this person speak English or French well enough to conduct a conversation?

Mark "⊗" one circle only.

13.

- 01 English only
02 French only
03 Both English and French
04 Neither English nor French

14.

- 01 English only
02 French only
03 Both English and French
04 Neither English nor French

14 What language(s), **other than English or French**, can this person speak well enough to conduct a conversation?

- 05 None
OR
Specify other language(s)

06
07
08

- 05 None
OR
Specify other language(s)

06
07
08

15 (a) What language does this person speak **most often** at home?

- 09 English
10 French
Other — Specify

11

- 09 English
10 French
Other — Specify

11

(b) Does this person speak any other languages **on a regular basis** at home?

- 12 No
13 Yes, English
14 Yes, French
Yes, Other — Specify

15

- 12 No
13 Yes, English
14 Yes, French
Yes, Other — Specify

15

16 What is the language that this person **first learned** at home **in childhood** and **still understands**?

If this person no longer understands the first language learned, indicate the second language learned.

- 16 English
17 French
Other — Specify

18

- 16 English
17 French
Other — Specify

18

While most people in Canada view themselves as Canadians, information on their ancestral origins has been collected since the 1901 Census to capture the changing composition of Canada's diverse population. Therefore, this question refers to the **origins of the person's ancestors**.

17 To which ethnic or cultural group(s) did this person's **ancestors** belong?

For example, Canadian, French, English, Chinese, Italian, German, Scottish, Irish, Cree, Micmac, Métis, Inuit (Eskimo), East Indian, Ukrainian, Dutch, Polish, Portuguese, Filipino, Jewish, Greek, Jamaican, Vietnamese, Lebanese, Chilean, Somali, etc.

Specify as many groups as applicable

19
20
21
22

Specify as many groups as applicable

19
20
21
22



PERSON 3	PERSON 4	PERSON 5	PERSON 6
Family name	Family name	Family name	Family name
Given name Initial	Given name Initial	Given name Initial	Given name Initial
FOR INFORMATION ONLY			
15.	16.	17.	18.
01 <input type="radio"/> English only 02 <input type="radio"/> French only 03 <input type="radio"/> Both English and French 04 <input type="radio"/> Neither English nor French	01 <input type="radio"/> English only 02 <input type="radio"/> French only 03 <input type="radio"/> Both English and French 04 <input type="radio"/> Neither English nor French	01 <input type="radio"/> English only 02 <input type="radio"/> French only 03 <input type="radio"/> Both English and French 04 <input type="radio"/> Neither English nor French	01 <input type="radio"/> English only 02 <input type="radio"/> French only 03 <input type="radio"/> Both English and French 04 <input type="radio"/> Neither English nor French
05 <input type="radio"/> None OR Specify other language(s)	05 <input type="radio"/> None OR Specify other language(s)	05 <input type="radio"/> None OR Specify other language(s)	05 <input type="radio"/> None OR Specify other language(s)
06 <input type="text"/>	06 <input type="text"/>	06 <input type="text"/>	06 <input type="text"/>
07 <input type="text"/>	07 <input type="text"/>	07 <input type="text"/>	07 <input type="text"/>
08 <input type="text"/>	08 <input type="text"/>	08 <input type="text"/>	08 <input type="text"/>
09 <input type="radio"/> English 10 <input type="radio"/> French Other — Specify	09 <input type="radio"/> English 10 <input type="radio"/> French Other — Specify	09 <input type="radio"/> English 10 <input type="radio"/> French Other — Specify	09 <input type="radio"/> English 10 <input type="radio"/> French Other — Specify
11 <input type="text"/>	11 <input type="text"/>	11 <input type="text"/>	11 <input type="text"/>
12 <input type="radio"/> No 13 <input type="radio"/> Yes, English 14 <input type="radio"/> Yes, French Yes, Other — Specify	12 <input type="radio"/> No 13 <input type="radio"/> Yes, English 14 <input type="radio"/> Yes, French Yes, Other — Specify	12 <input type="radio"/> No 13 <input type="radio"/> Yes, English 14 <input type="radio"/> Yes, French Yes, Other — Specify	12 <input type="radio"/> No 13 <input type="radio"/> Yes, English 14 <input type="radio"/> Yes, French Yes, Other — Specify
15 <input type="text"/>	15 <input type="text"/>	15 <input type="text"/>	15 <input type="text"/>
16 <input type="radio"/> English 17 <input type="radio"/> French Other — Specify	16 <input type="radio"/> English 17 <input type="radio"/> French Other — Specify	16 <input type="radio"/> English 17 <input type="radio"/> French Other — Specify	16 <input type="radio"/> English 17 <input type="radio"/> French Other — Specify
18 <input type="text"/>	18 <input type="text"/>	18 <input type="text"/>	18 <input type="text"/>
Specify as many groups as applicable			
19 <input type="text"/>	19 <input type="text"/>	19 <input type="text"/>	19 <input type="text"/>
20 <input type="text"/>	20 <input type="text"/>	20 <input type="text"/>	20 <input type="text"/>
21 <input type="text"/>	21 <input type="text"/>	21 <input type="text"/>	21 <input type="text"/>
22 <input type="text"/>	22 <input type="text"/>	22 <input type="text"/>	22 <input type="text"/>



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

- 18** Is this person an Aboriginal person, that is, North American Indian, Métis or Inuit (Eskimo)?
- If "Yes", mark "⊗" the circle(s) that best describe(s) this person now.

- 19** Is this person:
- Mark "⊗" more than one or specify, if applicable.

This information is collected to support programs that promote equal opportunity for everyone to share in the social, cultural and economic life of Canada.

- 20** Is this person a member of an Indian Band/First Nation?

- 21** Is this person a Treaty Indian or a Registered Indian as defined by the *Indian Act* of Canada?

- 22** What is this person's religion?

Indicate a specific denomination or religion even if this person is not currently a practising member of that group.

For example, Roman Catholic, Ukrainian Catholic, United Church, Anglican, Lutheran, Baptist, Greek Orthodox, Jewish, Islam, Buddhist, Hindu, Sikh, etc.

19.

- 01 No **Continue with the next question**
- 02 Yes, North American Indian **Go to Question 20**
- 03 Yes, Métis
- 04 Yes, Inuit (Eskimo)

- 05 White
- 06 Chinese
- 07 South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)
- 08 Black
- 09 Filipino
- 10 Latin American
- 11 Southeast Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese, etc.)
- 12 Arab
- 13 West Asian (e.g., Afghan, Iranian, etc.)
- 14 Japanese
- 15 Korean
- Other — Specify
- 16

- 17 No
- 18 Yes, member of an Indian Band/First Nation
Specify Indian Band/
First Nation (for example,
Musqueam)
- 19

- 20 No
- 21 Yes, Treaty Indian or Registered Indian

- Specify one denomination or religion only
- 22
- 23 No religion

20.

- 01 No **Continue with the next question**
- 02 Yes, North American Indian **Go to Question 20**
- 03 Yes, Métis
- 04 Yes, Inuit (Eskimo)

- 05 White
- 06 Chinese
- 07 South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)
- 08 Black
- 09 Filipino
- 10 Latin American
- 11 Southeast Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese, etc.)
- 12 Arab
- 13 West Asian (e.g., Afghan, Iranian, etc.)
- 14 Japanese
- 15 Korean
- Other — Specify
- 16

- 17 No
- 18 Yes, member of an Indian Band/First Nation
Specify Indian Band/
First Nation (for example,
Musqueam)
- 19

- 20 No
- 21 Yes, Treaty Indian or Registered Indian

- Specify one denomination or religion only
- 22
- 23 No religion



PERSON 3	PERSON 4	PERSON 5	PERSON 6
Family name	Family name	Family name	Family name
Given name Initial	Given name Initial	Given name Initial	Given name Initial
FOR INFORMATION ONLY			
21.	22.	23.	24.
01 <input type="radio"/> No ▶ Continue with the next question	01 <input type="radio"/> No ▶ Continue with the next question	01 <input type="radio"/> No ▶ Continue with the next question	01 <input type="radio"/> No ▶ Continue with the next question
02 <input type="radio"/> Yes, North American Indian ▶ Go to Question 20	02 <input type="radio"/> Yes, North American Indian ▶ Go to Question 20	02 <input type="radio"/> Yes, North American Indian ▶ Go to Question 20	02 <input type="radio"/> Yes, North American Indian ▶ Go to Question 20
03 <input type="radio"/> Yes, Métis	03 <input type="radio"/> Yes, Métis	03 <input type="radio"/> Yes, Métis	03 <input type="radio"/> Yes, Métis
04 <input type="radio"/> Yes, Inuit (Eskimo)	04 <input type="radio"/> Yes, Inuit (Eskimo)	04 <input type="radio"/> Yes, Inuit (Eskimo)	04 <input type="radio"/> Yes, Inuit (Eskimo)
05 <input type="radio"/> White	05 <input type="radio"/> White	05 <input type="radio"/> White	05 <input type="radio"/> White
06 <input type="radio"/> Chinese	06 <input type="radio"/> Chinese	06 <input type="radio"/> Chinese	06 <input type="radio"/> Chinese
07 <input type="radio"/> South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)	07 <input type="radio"/> South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)	07 <input type="radio"/> South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)	07 <input type="radio"/> South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)
08 <input type="radio"/> Black	08 <input type="radio"/> Black	08 <input type="radio"/> Black	08 <input type="radio"/> Black
09 <input type="radio"/> Filipino	09 <input type="radio"/> Filipino	09 <input type="radio"/> Filipino	09 <input type="radio"/> Filipino
10 <input type="radio"/> Latin American	10 <input type="radio"/> Latin American	10 <input type="radio"/> Latin American	10 <input type="radio"/> Latin American
11 <input type="radio"/> Southeast Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese, etc.)	11 <input type="radio"/> Southeast Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese, etc.)	11 <input type="radio"/> Southeast Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese, etc.)	11 <input type="radio"/> Southeast Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese, etc.)
12 <input type="radio"/> Arab	12 <input type="radio"/> Arab	12 <input type="radio"/> Arab	12 <input type="radio"/> Arab
13 <input type="radio"/> West Asian (e.g., Afghan, Iranian, etc.)	13 <input type="radio"/> West Asian (e.g., Afghan, Iranian, etc.)	13 <input type="radio"/> West Asian (e.g., Afghan, Iranian, etc.)	13 <input type="radio"/> West Asian (e.g., Afghan, Iranian, etc.)
14 <input type="radio"/> Japanese	14 <input type="radio"/> Japanese	14 <input type="radio"/> Japanese	14 <input type="radio"/> Japanese
15 <input type="radio"/> Korean	15 <input type="radio"/> Korean	15 <input type="radio"/> Korean	15 <input type="radio"/> Korean
Other — Specify	Other — Specify	Other — Specify	Other — Specify
16 <input style="width: 100%;" type="text"/>	16 <input style="width: 100%;" type="text"/>	16 <input style="width: 100%;" type="text"/>	16 <input style="width: 100%;" type="text"/>
17 <input type="radio"/> No	17 <input type="radio"/> No	17 <input type="radio"/> No	17 <input type="radio"/> No
18 <input type="radio"/> Yes, member of an Indian Band/First Nation Specify Indian Band/First Nation (for example, Musqueam)	18 <input type="radio"/> Yes, member of an Indian Band/First Nation Specify Indian Band/First Nation (for example, Musqueam)	18 <input type="radio"/> Yes, member of an Indian Band/First Nation Specify Indian Band/First Nation (for example, Musqueam)	18 <input type="radio"/> Yes, member of an Indian Band/First Nation Specify Indian Band/First Nation (for example, Musqueam)
19 <input style="width: 100%;" type="text"/>	19 <input style="width: 100%;" type="text"/>	19 <input style="width: 100%;" type="text"/>	19 <input style="width: 100%;" type="text"/>
20 <input type="radio"/> No	20 <input type="radio"/> No	20 <input type="radio"/> No	20 <input type="radio"/> No
21 <input type="radio"/> Yes, Treaty Indian or Registered Indian	21 <input type="radio"/> Yes, Treaty Indian or Registered Indian	21 <input type="radio"/> Yes, Treaty Indian or Registered Indian	21 <input type="radio"/> Yes, Treaty Indian or Registered Indian
Specify one denomination or religion only	Specify one denomination or religion only	Specify one denomination or religion only	Specify one denomination or religion only
22 <input style="width: 100%;" type="text"/>	22 <input style="width: 100%;" type="text"/>	22 <input style="width: 100%;" type="text"/>	22 <input style="width: 100%;" type="text"/>
23 <input type="radio"/> No religion	23 <input type="radio"/> No religion	23 <input type="radio"/> No religion	23 <input type="radio"/> No religion



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

23 Answer Questions 24 to 51 for each person aged 15 and over.

MOBILITY

24 Where did this person live **1 year ago**, that is, on **May 15, 2000**?

Mark “⊗” one circle only.

Note:

For those who mark circle 03:

Please give the name of the city or town rather than the metropolitan area of which it is a part.

For example:

- Saanich rather than Victoria (metropolitan area);
- St. Albert rather than Edmonton (metropolitan area);
- Laval rather than Montréal (metropolitan area).

25 Where did this person live **5 years ago**, that is, on **May 15, 1996**?

Mark “⊗” one circle only.

Note:

For those who mark circle 11:


Please give the name of the city or town rather than the metropolitan area of which it is a part.

For example:

- Saanich rather than Victoria (metropolitan area);
- St. Albert rather than Edmonton (metropolitan area);
- Laval rather than Montréal (metropolitan area).

PERSON 1

Family name
Given name Initial

 Continue only for each person aged 15 and over.

25.

01 Lived at the **same** address as now

02 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve

03 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve

04 →
Province/territory

05 →
Postal code

06 →

07 Lived **outside Canada**
Specify name of country

08 →

09 Lived at the **same** address as now

10 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve

11 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve

12 →
Province/territory


13 →

14 Lived **outside Canada**
Specify name of country

15 →

PERSON 2

Family name
Given name Initial

 Continue only for each person aged 15 and over.

26.

01 Lived at the **same** address as now

02 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve

03 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve

04 →
Province/territory

05 →
Postal code

06 →

07 Lived **outside Canada**
Specify name of country

08 →

09 Lived at the **same** address as now

10 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve

11 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve

12 →
Province/territory

13 →

14 Lived **outside Canada**
Specify name of country

15 →



PERSON 3

Family name

Given name Initial

PERSON 4

Family name

Given name Initial

PERSON 5

Family name

Given name Initial

PERSON 6

Family name

Given name Initial

FOR INFORMATION ONLY



Continue only for each person aged 15 and over.



Continue only for each person aged 15 and over.



Continue only for each person aged 15 and over.



Continue only for each person aged 15 and over.

27.

- 01 Lived at the **same** address as now
- 02 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 03 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve
- 04 →
Province/territory
- 05 →
Postal code
- 06 →
- 07 Lived **outside Canada**
Specify name of country
- 08 →

28.

- 01 Lived at the **same** address as now
- 02 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 03 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve
- 04 →
Province/territory
- 05 →
Postal code
- 06 →
- 07 Lived **outside Canada**
Specify name of country
- 08 →

29.

- 01 Lived at the **same** address as now
- 02 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 03 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve
- 04 →
Province/territory
- 05 →
Postal code
- 06 →
- 07 Lived **outside Canada**
Specify name of country
- 08 →

30.

- 01 Lived at the **same** address as now
- 02 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 03 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve
- 04 →
Province/territory
- 05 →
Postal code
- 06 →
- 07 Lived **outside Canada**
Specify name of country
- 08 →

- 09 Lived at the **same** address as now
- 10 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 11 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve
- 12 →
Province/territory
- 13 →
- 14 Lived **outside Canada**
Specify name of country
- 15 →

- 09 Lived at the **same** address as now
- 10 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 11 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve
- 12 →
Province/territory
- 13 →
- 14 Lived **outside Canada**
Specify name of country
- 15 →

- 09 Lived at the **same** address as now
- 10 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 11 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve
- 12 →
Province/territory
- 13 →
- 14 Lived **outside Canada**
Specify name of country
- 15 →

- 09 Lived at the **same** address as now
- 10 Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 11 Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify name of:
City, town, village, township, municipality or Indian reserve
- 12 →
Province/territory
- 13 →
- 14 Lived **outside Canada**
Specify name of country
- 15 →



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1		PERSON 2	
Family name		Family name	
Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

EDUCATION

26 What is the **highest** grade of **secondary** (high school) **or elementary** school attended by this person (completed or not)?

Enter highest grade (1 to 13) for elementary and secondary school only, excluding kindergarten.

*In the case where the person has attended secondary school in the province of Quebec, include the **total number** of years of elementary and secondary schooling.*

27 How many years of education has this person completed at **university**?

28 How many years of schooling has this person ever completed at an institution **other than** a university, a secondary (high) school or an elementary school?

Include years of schooling at community colleges, technical institutes, CEGEPs (general and professional), private trade schools or private business colleges, diploma schools of nursing, etc.

29 In the **past nine months** (that is, since last September), was this person attending a school, college or university?

Include attendance at elementary or secondary schools, business or trade schools, community colleges, technical institutes, CEGEPs, etc., for courses that can be used as credits towards a certificate, diploma or degree.

Mark “(X)” one circle only.

<p>31. <input type="text"/></p> <p>01 <input type="text"/> <input type="text"/> ◀ Number (1 to 13) of grades of secondary or elementary school</p> <p style="text-align: center;">OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>	<p>32. <input type="text"/></p> <p>01 <input type="text"/> <input type="text"/> ◀ Number (1 to 13) of grades of secondary or elementary school</p> <p style="text-align: center;">OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>
<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> <input type="text"/> ◀ Number of completed years at university</p>	<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> <input type="text"/> ◀ Number of completed years at university</p>
<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>	<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>
<p>09 <input type="radio"/> No, did not attend in the past nine months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>	<p>09 <input type="radio"/> No, did not attend in the past nine months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>



PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial
▼		▼		▼		▼	

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>33.</p> <p>01 <input type="text"/> <input type="text"/> ◀ Number (1 to 13) of grades of secondary or elementary school</p> <p style="text-align: center;">OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>	<p>34.</p> <p>01 <input type="text"/> <input type="text"/> ◀ Number (1 to 13) of grades of secondary or elementary school</p> <p style="text-align: center;">OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>	<p>35.</p> <p>01 <input type="text"/> <input type="text"/> ◀ Number (1 to 13) of grades of secondary or elementary school</p> <p style="text-align: center;">OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>	<p>36.</p> <p>01 <input type="text"/> <input type="text"/> ◀ Number (1 to 13) of grades of secondary or elementary school</p> <p style="text-align: center;">OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>
<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> <input type="text"/> ◀ Number of completed years at university</p>	<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> <input type="text"/> ◀ Number of completed years at university</p>	<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> <input type="text"/> ◀ Number of completed years at university</p>	<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> <input type="text"/> ◀ Number of completed years at university</p>
<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>	<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>	<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>	<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>
<p>09 <input type="radio"/> No, did not attend in the past nine months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>	<p>09 <input type="radio"/> No, did not attend in the past nine months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>	<p>09 <input type="radio"/> No, did not attend in the past nine months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>	<p>09 <input type="radio"/> No, did not attend in the past nine months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1		PERSON 2	
Family name		Family name	
Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

30 What certificates, diplomas or degrees has this person ever obtained?

Include **all qualifications** obtained from **secondary (high) schools, or trade schools and other postsecondary educational institutions.**

Mark “⊗” as many circles as applicable.

37.

01 None **▶ Go to Question 32**

02 Secondary (high) school graduation certificate or equivalent

03 Trades certificate or diploma

04 Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)

05 University certificate or diploma **below** bachelor level

06 Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)

07 University certificate or diploma **above** bachelor level

08 Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)

09 Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)

10 Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)

38.

01 None **▶ Go to Question 32**

02 Secondary (high) school graduation certificate or equivalent

03 Trades certificate or diploma

04 Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)

05 University certificate or diploma **below** bachelor level

06 Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)

07 University certificate or diploma **above** bachelor level

08 Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)

09 Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)

10 Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)

31 What was the major field of study or training of this person's **highest** degree, certificate or diploma (**excluding** secondary or high school graduation certificates)?

For example, accounting, carpentry, civil engineering, history, legal secretary, welding, etc.

Major field of study or training

11

OR

12 This person's highest qualification is a secondary (high) school graduation certificate

Major field of study or training

11

OR

12 This person's highest qualification is a secondary (high) school graduation certificate



PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial
▼		▼		▼		▼	

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>39.</p> <p>01 <input type="radio"/> None ► Go to Question 32</p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma below bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma above bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p> <p>Major field of study or training</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p> <p style="text-align: center;">OR</p> <p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>	<p>40.</p> <p>01 <input type="radio"/> None ► Go to Question 32</p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma below bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma above bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p> <p>Major field of study or training</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p> <p style="text-align: center;">OR</p> <p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>	<p>41.</p> <p>01 <input type="radio"/> None ► Go to Question 32</p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma below bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma above bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p> <p>Major field of study or training</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p> <p style="text-align: center;">OR</p> <p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>	<p>42.</p> <p>01 <input type="radio"/> None ► Go to Question 32</p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma below bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma above bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p> <p>Major field of study or training</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p> <p style="text-align: center;">OR</p> <p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>
--	--	--	--



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1		PERSON 2	
Family name		Family name	
Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

PLACE OF BIRTH OF PARENTS

32 Where was **each** of this person's parents born?

- Mark "⊗" or specify country according to present boundaries.

(a) **Father**

(b) **Mother**

43.

Father

01 Born in Canada
Born outside Canada
Specify country

02

Mother

03 Born in Canada
Born outside Canada
Specify country

04

44.

Father

01 Born in Canada
Born outside Canada
Specify country

02

Mother

03 Born in Canada
Born outside Canada
Specify country

04

HOUSEHOLD ACTIVITIES

Note:

Last week refers to Sunday, May 6 to Saturday, May 12, 2001.

In Question 33, report all time spent on each activity, even if two or more activities took place at the same time. See the Guide for examples.

33 Last week, how many hours did this person spend doing the following activities:

(a) doing **unpaid** housework, yard work or home maintenance for members of this household, or others?

Some examples include: preparing meals, washing the car, doing laundry, cutting the grass, shopping, household planning, etc.

(b) looking after one or more of this person's own children, or the children of others, **without pay**?

Some examples include: bathing or playing with young children, driving children to sports activities or helping them with homework, talking with teens about their problems, etc.

(c) providing **unpaid** care or assistance to one or more seniors?

Some examples include: providing personal care to a senior family member, visiting seniors, talking with them on the telephone, helping them with shopping, banking or with taking medication, etc.

05 None
06 Less than 5 hours
07 5 to 14 hours
08 15 to 29 hours
09 30 to 59 hours
10 60 hours or more

11 None
12 Less than 5 hours
13 5 to 14 hours
14 15 to 29 hours
15 30 to 59 hours
16 60 hours or more

17 None
18 Less than 5 hours
19 5 to 9 hours
20 10 to 19 hours
21 20 hours or more

05 None
06 Less than 5 hours
07 5 to 14 hours
08 15 to 29 hours
09 30 to 59 hours
10 60 hours or more

11 None
12 Less than 5 hours
13 5 to 14 hours
14 15 to 29 hours
15 30 to 59 hours
16 60 hours or more

17 None
18 Less than 5 hours
19 5 to 9 hours
20 10 to 19 hours
21 20 hours or more



PERSON 3	PERSON 4	PERSON 5	PERSON 6
Family name	Family name	Family name	Family name
Given name Initial	Given name Initial	Given name Initial	Given name Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>45.</p> <p>Father</p> <p>01 <input type="radio"/> Born in Canada Born outside Canada <i>Specify country</i></p> <p>02 <input type="text"/></p> <p>Mother</p> <p>03 <input type="radio"/> Born in Canada Born outside Canada <i>Specify country</i></p> <p>04 <input type="text"/></p> <p>05 <input type="radio"/> None</p> <p>06 <input type="radio"/> Less than 5 hours</p> <p>07 <input type="radio"/> 5 to 14 hours</p> <p>08 <input type="radio"/> 15 to 29 hours</p> <p>09 <input type="radio"/> 30 to 59 hours</p> <p>10 <input type="radio"/> 60 hours or more</p> <p>11 <input type="radio"/> None</p> <p>12 <input type="radio"/> Less than 5 hours</p> <p>13 <input type="radio"/> 5 to 14 hours</p> <p>14 <input type="radio"/> 15 to 29 hours</p> <p>15 <input type="radio"/> 30 to 59 hours</p> <p>16 <input type="radio"/> 60 hours or more</p> <p>17 <input type="radio"/> None</p> <p>18 <input type="radio"/> Less than 5 hours</p> <p>19 <input type="radio"/> 5 to 9 hours</p> <p>20 <input type="radio"/> 10 to 19 hours</p> <p>21 <input type="radio"/> 20 hours or more</p>	<p>46.</p> <p>Father</p> <p>01 <input type="radio"/> Born in Canada Born outside Canada <i>Specify country</i></p> <p>02 <input type="text"/></p> <p>Mother</p> <p>03 <input type="radio"/> Born in Canada Born outside Canada <i>Specify country</i></p> <p>04 <input type="text"/></p> <p>05 <input type="radio"/> None</p> <p>06 <input type="radio"/> Less than 5 hours</p> <p>07 <input type="radio"/> 5 to 14 hours</p> <p>08 <input type="radio"/> 15 to 29 hours</p> <p>09 <input type="radio"/> 30 to 59 hours</p> <p>10 <input type="radio"/> 60 hours or more</p> <p>11 <input type="radio"/> None</p> <p>12 <input type="radio"/> Less than 5 hours</p> <p>13 <input type="radio"/> 5 to 14 hours</p> <p>14 <input type="radio"/> 15 to 29 hours</p> <p>15 <input type="radio"/> 30 to 59 hours</p> <p>16 <input type="radio"/> 60 hours or more</p> <p>17 <input type="radio"/> None</p> <p>18 <input type="radio"/> Less than 5 hours</p> <p>19 <input type="radio"/> 5 to 9 hours</p> <p>20 <input type="radio"/> 10 to 19 hours</p> <p>21 <input type="radio"/> 20 hours or more</p>	<p>47.</p> <p>Father</p> <p>01 <input type="radio"/> Born in Canada Born outside Canada <i>Specify country</i></p> <p>02 <input type="text"/></p> <p>Mother</p> <p>03 <input type="radio"/> Born in Canada Born outside Canada <i>Specify country</i></p> <p>04 <input type="text"/></p> <p>05 <input type="radio"/> None</p> <p>06 <input type="radio"/> Less than 5 hours</p> <p>07 <input type="radio"/> 5 to 14 hours</p> <p>08 <input type="radio"/> 15 to 29 hours</p> <p>09 <input type="radio"/> 30 to 59 hours</p> <p>10 <input type="radio"/> 60 hours or more</p> <p>11 <input type="radio"/> None</p> <p>12 <input type="radio"/> Less than 5 hours</p> <p>13 <input type="radio"/> 5 to 14 hours</p> <p>14 <input type="radio"/> 15 to 29 hours</p> <p>15 <input type="radio"/> 30 to 59 hours</p> <p>16 <input type="radio"/> 60 hours or more</p> <p>17 <input type="radio"/> None</p> <p>18 <input type="radio"/> Less than 5 hours</p> <p>19 <input type="radio"/> 5 to 9 hours</p> <p>20 <input type="radio"/> 10 to 19 hours</p> <p>21 <input type="radio"/> 20 hours or more</p>	<p>48.</p> <p>Father</p> <p>01 <input type="radio"/> Born in Canada Born outside Canada <i>Specify country</i></p> <p>02 <input type="text"/></p> <p>Mother</p> <p>03 <input type="radio"/> Born in Canada Born outside Canada <i>Specify country</i></p> <p>04 <input type="text"/></p> <p>05 <input type="radio"/> None</p> <p>06 <input type="radio"/> Less than 5 hours</p> <p>07 <input type="radio"/> 5 to 14 hours</p> <p>08 <input type="radio"/> 15 to 29 hours</p> <p>09 <input type="radio"/> 30 to 59 hours</p> <p>10 <input type="radio"/> 60 hours or more</p> <p>11 <input type="radio"/> None</p> <p>12 <input type="radio"/> Less than 5 hours</p> <p>13 <input type="radio"/> 5 to 14 hours</p> <p>14 <input type="radio"/> 15 to 29 hours</p> <p>15 <input type="radio"/> 30 to 59 hours</p> <p>16 <input type="radio"/> 60 hours or more</p> <p>17 <input type="radio"/> None</p> <p>18 <input type="radio"/> Less than 5 hours</p> <p>19 <input type="radio"/> 5 to 9 hours</p> <p>20 <input type="radio"/> 10 to 19 hours</p> <p>21 <input type="radio"/> 20 hours or more</p>
--	--	--	--



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

LABOUR MARKET ACTIVITIES

34 Last week, how many hours did this person spend working for pay **or** in self-employment?

Include:

- working for wages, salary, tips or commission;
- working in his/her own business, farm or professional practice, alone or in partnership;
- working directly towards the operation of a family farm or business without formal pay arrangements (e.g., assisting in seeding, doing accounts).

35 Last week, was this person on temporary lay-off or absent from his/her job or business?

Mark "⊗" one circle only.

36 Last week, did this person have definite arrangements to start a new job within the next four weeks?

37 Did this person look for paid work **during the past four weeks**?

For example, did this person contact an employment centre, check with employers, place or answer newspaper ads, etc.?

Mark "⊗" one circle only.

38 Could this person have started a job **last week** had one been available?

Mark "⊗" one circle only.

39 When did this person last work for pay **or** in self-employment, even for a few days?

Mark "⊗" one circle only.

49.

Number of hours (to the nearest hour)

01

▶ Go to Question 40

02

None

▶ Continue with the next question

03 No

04 Yes, on temporary lay-off from a job to which this person expects to return

05 Yes, on vacation, ill, on strike or locked out, or absent for other reasons

06 No

07 Yes

08 No

▶ Go to Question 39

09 Yes, looked for full-time work

10 Yes, looked for part-time work (less than 30 hours per week)

11 Yes, could have started a job

12 No, already had a job

13 No, because of temporary illness or disability

14 No, because of personal or family responsibilities

15 No, going to school

16 No, other reasons

17 In 2001

▶ Continue with the next question

18 In 2000

19 Before 2000

▶ Go to Question 51

20 Never

50.

Number of hours (to the nearest hour)

01

▶ Go to Question 40

02

None

▶ Continue with the next question

03 No

04 Yes, on temporary lay-off from a job to which this person expects to return

05 Yes, on vacation, ill, on strike or locked out, or absent for other reasons

06 No

07 Yes

08 No

▶ Go to Question 39

09 Yes, looked for full-time work

10 Yes, looked for part-time work (less than 30 hours per week)

11 Yes, could have started a job

12 No, already had a job

13 No, because of temporary illness or disability

14 No, because of personal or family responsibilities

15 No, going to school

16 No, other reasons

17 In 2001

▶ Continue with the next question

18 In 2000

19 Before 2000

▶ Go to Question 51

20 Never



PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial
▼		▼		▼		▼	

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>51.</p> <p>Number of hours (to the nearest hour)</p> <p>01 <input type="text"/> Go to Question 30</p> <p>02 <input type="radio"/> None Continue with the next question</p>	<p>52.</p> <p>Number of hours (to the nearest hour)</p> <p>01 <input type="text"/> Go to Question 40</p> <p>02 <input type="radio"/> None Continue with the next question</p>	<p>53.</p> <p>Number of hours (to the nearest hour)</p> <p>01 <input type="text"/> Go to Question 40</p> <p>02 <input type="radio"/> None Continue with the next question</p>	<p>54.</p> <p>Number of hours (to the nearest hour)</p> <p>01 <input type="text"/> Go to Question 40</p> <p>02 <input type="radio"/> None Continue with the next question</p>
<p>03 <input type="radio"/> No</p> <p>04 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>05 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>	<p>03 <input type="radio"/> No</p> <p>04 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>05 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>	<p>03 <input type="radio"/> No</p> <p>04 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>05 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>	<p>03 <input type="radio"/> No</p> <p>04 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>05 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>
<p>06 <input type="radio"/> No</p> <p>07 <input type="radio"/> Yes</p>	<p>06 <input type="radio"/> No</p> <p>07 <input type="radio"/> Yes</p>	<p>06 <input type="radio"/> No</p> <p>07 <input type="radio"/> Yes</p>	<p>06 <input type="radio"/> No</p> <p>07 <input type="radio"/> Yes</p>
<p>08 <input type="radio"/> No Go to Question 39</p> <p>09 <input type="radio"/> Yes, looked for full-time work</p> <p>10 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>	<p>08 <input type="radio"/> No Go to Question 39</p> <p>09 <input type="radio"/> Yes, looked for full-time work</p> <p>10 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>	<p>08 <input type="radio"/> No Go to Question 39</p> <p>09 <input type="radio"/> Yes, looked for full-time work</p> <p>10 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>	<p>08 <input type="radio"/> No Go to Question 39</p> <p>09 <input type="radio"/> Yes, looked for full-time work</p> <p>10 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>
<p>11 <input type="radio"/> Yes, could have started a job</p> <p>12 <input type="radio"/> No, already had a job</p> <p>13 <input type="radio"/> No, because of temporary illness or disability</p> <p>14 <input type="radio"/> No, because of personal or family responsibilities</p> <p>15 <input type="radio"/> No, going to school</p> <p>16 <input type="radio"/> No, other reasons</p>	<p>11 <input type="radio"/> Yes, could have started a job</p> <p>12 <input type="radio"/> No, already had a job</p> <p>13 <input type="radio"/> No, because of temporary illness or disability</p> <p>14 <input type="radio"/> No, because of personal or family responsibilities</p> <p>15 <input type="radio"/> No, going to school</p> <p>16 <input type="radio"/> No, other reasons</p>	<p>11 <input type="radio"/> Yes, could have started a job</p> <p>12 <input type="radio"/> No, already had a job</p> <p>13 <input type="radio"/> No, because of temporary illness or disability</p> <p>14 <input type="radio"/> No, because of personal or family responsibilities</p> <p>15 <input type="radio"/> No, going to school</p> <p>16 <input type="radio"/> No, other reasons</p>	<p>11 <input type="radio"/> Yes, could have started a job</p> <p>12 <input type="radio"/> No, already had a job</p> <p>13 <input type="radio"/> No, because of temporary illness or disability</p> <p>14 <input type="radio"/> No, because of personal or family responsibilities</p> <p>15 <input type="radio"/> No, going to school</p> <p>16 <input type="radio"/> No, other reasons</p>
<p>17 <input type="radio"/> In 2001 Continue with the next question</p> <p>18 <input type="radio"/> In 2000 Continue with the next question</p> <p>19 <input type="radio"/> Before 2000 Go to Question 51</p> <p>20 <input type="radio"/> Never Go to Question 51</p>	<p>17 <input type="radio"/> In 2001 Continue with the next question</p> <p>18 <input type="radio"/> In 2000 Continue with the next question</p> <p>19 <input type="radio"/> Before 2000 Go to Question 51</p> <p>20 <input type="radio"/> Never Go to Question 51</p>	<p>17 <input type="radio"/> In 2001 Continue with the next question</p> <p>18 <input type="radio"/> In 2000 Continue with the next question</p> <p>19 <input type="radio"/> Before 2000 Go to Question 51</p> <p>20 <input type="radio"/> Never Go to Question 51</p>	<p>17 <input type="radio"/> In 2001 Continue with the next question</p> <p>18 <input type="radio"/> In 2000 Continue with the next question</p> <p>19 <input type="radio"/> Before 2000 Go to Question 51</p> <p>20 <input type="radio"/> Never Go to Question 51</p>



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

Note:

Questions 40 to 48 refer to this person's job or business last week. If this person held no job last week, answer for the job of longest duration since January 1, 2000. If this person held more than one job last week, answer for the job at which he/she worked the most hours.

40 For whom did this person work?

For self-employed persons, enter the name of their business. If the business does not have a name, enter the person's name.

55.

Name of firm, government agency, etc.

01

Section, plant, department, etc. (if applicable)

02

56.

Name of firm, government agency, etc.

01

Section, plant, department, etc. (if applicable)

02

41 What kind of business, industry or service was this?

Please be specific. For example:

- road maintenance
- secondary school
- municipal police
- wheat farm
- retail shoe store
- temporary help agency
- full-service garage
- trapping

Kind of business, industry or service

03

04

Kind of business, industry or service

03

04

42 What was this person's work or occupation?

Please be specific. For example:

- legal secretary
- plumber
- fishing guide
- wood furniture assembler
- restaurant manager
- secondary school teacher

(If in the Armed Forces, give rank.)

Occupation

05

Occupation

05

43 In this work, what were this person's main activities?

Please give details. For example:

- prepared legal documents
- installed residential plumbing
- guided fishing parties
- made wood furniture products
- managed operations of a restaurant
- taught mathematics

Main activities

06

07

Main activities

06

07



PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial
▼		▼		▼		▼	

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>57.</p> <p>Name of firm, government agency, etc.</p> <p>01 <input style="width: 100%;" type="text"/></p> <p>Section, plant, department, etc. (if applicable)</p> <p>02 <input style="width: 100%;" type="text"/></p> <p>Kind of business, industry or service</p> <p>03 <input style="width: 100%;" type="text"/></p> <p>04 <input style="width: 100%;" type="text"/></p> <p>Occupation</p> <p>05 <input style="width: 100%;" type="text"/></p> <p>Main activities</p> <p>06 <input style="width: 100%;" type="text"/></p> <p>07 <input style="width: 100%;" type="text"/></p>	<p>58.</p> <p>Name of firm, government agency, etc.</p> <p>01 <input style="width: 100%;" type="text"/></p> <p>Section, plant, department, etc. (if applicable)</p> <p>02 <input style="width: 100%;" type="text"/></p> <p>Kind of business, industry or service</p> <p>03 <input style="width: 100%;" type="text"/></p> <p>04 <input style="width: 100%;" type="text"/></p> <p>Occupation</p> <p>05 <input style="width: 100%;" type="text"/></p> <p>Main activities</p> <p>06 <input style="width: 100%;" type="text"/></p> <p>07 <input style="width: 100%;" type="text"/></p>	<p>59.</p> <p>Name of firm, government agency, etc.</p> <p>01 <input style="width: 100%;" type="text"/></p> <p>Section, plant, department, etc. (if applicable)</p> <p>02 <input style="width: 100%;" type="text"/></p> <p>Kind of business, industry or service</p> <p>03 <input style="width: 100%;" type="text"/></p> <p>04 <input style="width: 100%;" type="text"/></p> <p>Occupation</p> <p>05 <input style="width: 100%;" type="text"/></p> <p>Main activities</p> <p>06 <input style="width: 100%;" type="text"/></p> <p>07 <input style="width: 100%;" type="text"/></p>	<p>60.</p> <p>Name of firm, government agency, etc.</p> <p>01 <input style="width: 100%;" type="text"/></p> <p>Section, plant, department, etc. (if applicable)</p> <p>02 <input style="width: 100%;" type="text"/></p> <p>Kind of business, industry or service</p> <p>03 <input style="width: 100%;" type="text"/></p> <p>04 <input style="width: 100%;" type="text"/></p> <p>Occupation</p> <p>05 <input style="width: 100%;" type="text"/></p> <p>Main activities</p> <p>06 <input style="width: 100%;" type="text"/></p> <p>07 <input style="width: 100%;" type="text"/></p>
---	---	---	---



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1		PERSON 2	
Family name		Family name	
Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

44 In this job or business, was this person mainly:

Mark "⊗" one circle only.

45 If self-employed, was this person's farm or business incorporated?

46 At what address did this person **usually** work most of the time?

Example: 365 Laurier Ave. West

Number

Name

Type

Direction

If direction (e.g., North, South, East or West) is a part of the street address, please include it.

If street address is unknown, specify the building or nearest street intersection.

Please give the name of the city or town rather than the metropolitan area of which it is a part.

For example:

- Saanich rather than Victoria (metropolitan area);
- St. Albert rather than Edmonton (metropolitan area);
- Laval rather than Montréal (metropolitan area).

If the address of work is different than the address of the employer, please provide the address where this person actually works (e.g., school teachers should provide the address of their school, not the address of the school board).

61.

01 working for wages, salary, tips or commission?
→ Go to Question 46

02 working without pay for his/her spouse or another relative in a family farm or business?
→ Go to Question 46

03 self-employed without paid help (alone or in partnership)?

04 self-employed with paid help (alone or in partnership)?

05 No

06 Yes

07 Worked at home (including farms)
→ Go to Question 48

08 Worked outside Canada
→ Go to Question 48

09 No fixed workplace address
→ Go to Question 47

10 Worked at the address specified below:
Specify complete address

Street address (see example)
11

City, town, village, township, municipality or Indian reserve
12

Province/territory
13

Postal code
14

62.

01 working for wages, salary, tips or commission?
→ Go to Question 46

02 working without pay for his/her spouse or another relative in a family farm or business?
→ Go to Question 46

03 self-employed without paid help (alone or in partnership)?

04 self-employed with paid help (alone or in partnership)?

05 No

06 Yes

07 Worked at home (including farms)
→ Go to Question 48

08 Worked outside Canada
→ Go to Question 48

09 No fixed workplace address
→ Go to Question 47

10 Worked at the address specified below:
Specify complete address

Street address (see example)
11

City, town, village, township, municipality or Indian reserve
12

Province/territory
13

Postal code
14



PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>63.</p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? ➔ Go to Question 46</p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? ➔ Go to Question 46</p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p>	<p>64.</p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? ➔ Go to Question 46</p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? ➔ Go to Question 46</p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p>	<p>65.</p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? ➔ Go to Question 46</p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? ➔ Go to Question 46</p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p>	<p>66.</p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? ➔ Go to Question 46</p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? ➔ Go to Question 46</p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p>
<p>07 <input type="radio"/> Worked at home (including farms) ➔ Go to Question 48</p> <p>08 <input type="radio"/> Worked outside Canada ➔ Go to Question 48</p> <p>09 <input type="radio"/> No fixed workplace address ➔ Go to Question 47</p> <p>10 <input type="radio"/> Worked at the address specified below: Specify complete address</p> <p>Street address (see example)</p> <p>11 <input style="width: 100%;" type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input style="width: 100%;" type="text"/></p> <p>Province/territory</p> <p>13 <input style="width: 100%;" type="text"/></p> <p>Postal code</p> <p>14 <input style="width: 50%;" type="text"/> <input style="width: 50%;" type="text"/></p>	<p>07 <input type="radio"/> Worked at home (including farms) ➔ Go to Question 48</p> <p>08 <input type="radio"/> Worked outside Canada ➔ Go to Question 48</p> <p>09 <input type="radio"/> No fixed workplace address ➔ Go to Question 47</p> <p>10 <input type="radio"/> Worked at the address specified below: Specify complete address</p> <p>Street address (see example)</p> <p>11 <input style="width: 100%;" type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input style="width: 100%;" type="text"/></p> <p>Province/territory</p> <p>13 <input style="width: 100%;" type="text"/></p> <p>Postal code</p> <p>14 <input style="width: 50%;" type="text"/> <input style="width: 50%;" type="text"/></p>	<p>07 <input type="radio"/> Worked at home (including farms) ➔ Go to Question 48</p> <p>08 <input type="radio"/> Worked outside Canada ➔ Go to Question 48</p> <p>09 <input type="radio"/> No fixed workplace address ➔ Go to Question 47</p> <p>10 <input type="radio"/> Worked at the address specified below: Specify complete address</p> <p>Street address (see example)</p> <p>11 <input style="width: 100%;" type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input style="width: 100%;" type="text"/></p> <p>Province/territory</p> <p>13 <input style="width: 100%;" type="text"/></p> <p>Postal code</p> <p>14 <input style="width: 50%;" type="text"/> <input style="width: 50%;" type="text"/></p>	<p>07 <input type="radio"/> Worked at home (including farms) ➔ Go to Question 48</p> <p>08 <input type="radio"/> Worked outside Canada ➔ Go to Question 48</p> <p>09 <input type="radio"/> No fixed workplace address ➔ Go to Question 47</p> <p>10 <input type="radio"/> Worked at the address specified below: Specify complete address</p> <p>Street address (see example)</p> <p>11 <input style="width: 100%;" type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input style="width: 100%;" type="text"/></p> <p>Province/territory</p> <p>13 <input style="width: 100%;" type="text"/></p> <p>Postal code</p> <p>14 <input style="width: 50%;" type="text"/> <input style="width: 50%;" type="text"/></p>



1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

47 How did this person **usually** get to work?

*If this person used more than one method of transportation, **mark the one used for most of the travel distance.***

67.

- 01 Car, truck or van — as driver
- 02 Car, truck or van — as passenger
- 03 Public transit (e.g., bus, streetcar, subway, light-rail transit, commuter train, ferry)
- 04 Walked to work
- 05 Bicycle
- 06 Motorcycle
- 07 Taxicab
- 08 Other method

68.

- 01 Car, truck or van — as driver
- 02 Car, truck or van — as passenger
- 03 Public transit (e.g., bus, streetcar, subway, light-rail transit, commuter train, ferry)
- 04 Walked to work
- 05 Bicycle
- 06 Motorcycle
- 07 Taxicab
- 08 Other method

48 (a) In this job, what language did this person use **most often**?

09 English

10 French

Other — Specify

11

09 English

10 French

Other — Specify

11

(b) Did this person use any other languages **on a regular basis** in this job?

12 No

13 Yes, English

14 Yes, French

Yes, Other — Specify

15

12 No

13 Yes, English

14 Yes, French

Yes, Other — Specify

15

49 In how many **weeks** did this person work in 2000?

Include those weeks in which this person:

- was on vacation or sick leave with pay;
- worked full time or part time;
- worked for wages, salary, tips or commission;
- was self-employed;
- worked directly towards the operation of a family farm or business without formal pay arrangements.

16 None **Go to Question 51**

OR

17 ◀ Number of weeks

16 None **Go to Question 51**

OR

17 ◀ Number of weeks

50 During **most** of those weeks, did this person work **full time** or **part time**?

Mark “(X)” one circle only.

18 Full time (30 hours or more per week)

19 Part time (less than 30 hours per week)

18 Full time (30 hours or more per week)

19 Part time (less than 30 hours per week)



PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>69.</p> <p>01 <input type="radio"/> Car, truck or van — as driver</p> <p>02 <input type="radio"/> Car, truck or van — as passenger</p> <p>03 <input type="radio"/> Public transit (e.g., bus, streetcar, subway, light-rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>	<p>70.</p> <p>01 <input type="radio"/> Car, truck or van — as driver</p> <p>02 <input type="radio"/> Car, truck or van — as passenger</p> <p>03 <input type="radio"/> Public transit (e.g., bus, streetcar, subway, light-rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>	<p>71.</p> <p>01 <input type="radio"/> Car, truck or van — as driver</p> <p>02 <input type="radio"/> Car, truck or van — as passenger</p> <p>03 <input type="radio"/> Public transit (e.g., bus, streetcar, subway, light-rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>	<p>72.</p> <p>01 <input type="radio"/> Car, truck or van — as driver</p> <p>02 <input type="radio"/> Car, truck or van — as passenger</p> <p>03 <input type="radio"/> Public transit (e.g., bus, streetcar, subway, light-rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>
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<p>16 <input type="radio"/> None ▶ Go to Question 51</p> <p style="text-align: center;">OR</p> <p>17 <input type="text"/> ◀ Number of weeks</p>	<p>16 <input type="radio"/> None ▶ Go to Question 51</p> <p style="text-align: center;">OR</p> <p>17 <input type="text"/> ◀ Number of weeks</p>	<p>16 <input type="radio"/> None ▶ Go to Question 51</p> <p style="text-align: center;">OR</p> <p>17 <input type="text"/> ◀ Number of weeks</p>	<p>16 <input type="radio"/> None ▶ Go to Question 51</p> <p style="text-align: center;">OR</p> <p>17 <input type="text"/> ◀ Number of weeks</p>
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1 NAME

In the spaces provided, copy the names in the same order as in **Step B**. Then answer the following questions for **each** person.

PERSON 1		PERSON 2	
Family name		Family name	
Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

INCOME IN 2000

51 During the year ending December 31, 2000, did this person receive any income from the sources listed below?

- **Answer "Yes" or "No" for all sources.**
- **If "Yes", also enter the amount; in case of a loss, also mark "Loss".**
- **Do not include child tax benefits.**

PAID EMPLOYMENT:

(a) Total **wages** and **salaries**, including commissions, bonuses, tips, etc., before any deductions

SELF-EMPLOYMENT:

(b) **Net farm income** (gross receipts minus expenses), including grants and subsidies under farm-support programs, marketing board payments, gross insurance proceeds

(c) **Net non-farm income** from **unincorporated business, professional practice, etc.** (gross receipts minus expenses)

INCOME FROM GOVERNMENT:

(d) **Old Age Security Pension, Guaranteed Income Supplement and Spouse's Allowance** from federal government only (provincial income supplements should be reported in (g))

(e) Benefits from **Canada or Quebec Pension Plan**

(f) Benefits from **Employment Insurance** (total benefits before tax deductions)

(g) **Other income** from **government sources**, such as provincial income supplements and grants, the GST/HST credit, provincial tax credits, workers' compensation, veterans' pensions, welfare payments (Do **not** include child tax benefits.)

OTHER INCOME:

(h) **Dividends, interest** on bonds, deposits and savings certificates, and **other investment income**, such as net rents from real estate, interest from mortgages

(i) **Retirement pensions, superannuation and annuities**, including those from RRSPs and RRIFs

(j) **Other money income**, such as alimony, child support, scholarships

TOTAL INCOME FROM ALL OF THE ABOVE SOURCES

Remember,

73.	74.
01 <input type="radio"/> Yes ▶ [] []	01 <input type="radio"/> Yes ▶ [] []
02 <input type="radio"/> No	02 <input type="radio"/> No
03 <input type="radio"/> Yes ▶ [] []	03 <input type="radio"/> Yes ▶ [] []
05 <input type="radio"/> No	04 <input type="radio"/> Loss
06 <input type="radio"/> Yes ▶ [] []	06 <input type="radio"/> Yes ▶ [] []
08 <input type="radio"/> No	07 <input type="radio"/> Loss
09 <input type="radio"/> Yes ▶ [] []	09 <input type="radio"/> Yes ▶ [] []
10 <input type="radio"/> No	10 <input type="radio"/> No
11 <input type="radio"/> Yes ▶ [] []	11 <input type="radio"/> Yes ▶ [] []
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16 <input type="radio"/> No	16 <input type="radio"/> No
17 <input type="radio"/> Yes ▶ [] []	17 <input type="radio"/> Yes ▶ [] []
19 <input type="radio"/> No	18 <input type="radio"/> Loss
20 <input type="radio"/> Yes ▶ [] []	20 <input type="radio"/> Yes ▶ [] []
21 <input type="radio"/> No	21 <input type="radio"/> No
22 <input type="radio"/> Yes ▶ [] []	22 <input type="radio"/> Yes ▶ [] []
23 <input type="radio"/> No	23 <input type="radio"/> No
24 <input type="radio"/> Yes ▶ [] []	24 <input type="radio"/> Yes ▶ [] []
26 <input type="radio"/> No	25 <input type="radio"/> Loss



PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

this question is only for persons aged 15 and over.

75.	76.	77.	78.								
01 <input type="radio"/> Yes ▶ <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;">Dollars</td><td style="width: 20px; height: 20px;">Cents</td></tr></table>	Dollars	Cents	01 <input type="radio"/> Yes ▶ <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;">Dollars</td><td style="width: 20px; height: 20px;">Cents</td></tr></table>	Dollars	Cents	01 <input type="radio"/> Yes ▶ <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;">Dollars</td><td style="width: 20px; height: 20px;">Cents</td></tr></table>	Dollars	Cents	01 <input type="radio"/> Yes ▶ <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;">Dollars</td><td style="width: 20px; height: 20px;">Cents</td></tr></table>	Dollars	Cents
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26 <input type="radio"/> No	26 <input type="radio"/> No	26 <input type="radio"/> No	26 <input type="radio"/> No								



Answer Questions H1 to H8 about this dwelling.

A **dwelling** is a separate set of living quarters with a **private entrance** from the outside or from a common hallway or stairway inside the building. This entrance should not be through someone else's living quarters.

79.

H1. Who pays the rent or mortgage, taxes, electricity, etc., for this dwelling?

If more than one person contributes to such payments, mark "⊗" as many circles as apply.

- 01 Person 1
- 02 Person 2
- 03 Person 3
- 04 Person 4
- 05 Person 5
- 06 Person 6
- 07 A person who is listed on another questionnaire for this dwelling
- 08 A person who does not live here

H2. Is this dwelling:

Mark "⊗" one circle only.

- 10 owned by you or a member of this household (even if it is still being paid for)?
- 11 rented (even if no cash rent is paid)?

H3. (a) How many rooms are there in this dwelling?

Include kitchen, bedrooms, finished rooms in attic or basement, etc.

Do not count bathrooms, halls, vestibules and rooms used solely for business purposes.

12 ◀ Number of rooms

FOR INFORMATION ONLY

(b) How many of these rooms are bedrooms?

13 ◀ Number of bedrooms

H4. When was this dwelling originally built?

Mark the period in which the building was completed, not the time of any later remodelling, additions or conversions. If year is not known, give best estimate.

- 14 1920 or before
- 15 1921-1945
- 16 1946-1960
- 17 1961-1970
- 18 1971-1980
- 19 1981-1985
- 20 1986-1990
- 21 1991-1995
- 22 1996-2001

H5. Is this dwelling in need of any repairs?

Do not include desirable remodelling or additions.

- 23 No, only **regular maintenance** is needed (painting, furnace cleaning, etc.)
- 24 Yes, **minor repairs** are needed (missing or loose floor tiles, bricks or shingles, defective steps, railing or siding, etc.)
- 25 Yes, **major repairs** are needed (defective plumbing or electrical wiring, structural repairs to walls, floors or ceilings, etc.)



Answer Questions **H6** to **H8** for only the dwelling that you **now occupy**, even if you own or rent more than one dwelling. If the exact amount is not known, please give best estimate.

80.

Note: If you are a farm operator living on the farm you operate, mark "X" here 01 and go to **Step G** on next page.

H6. For this dwelling, what are the YEARLY payments (last 12 months) for:

FOR INFORMATION ONLY

(a) electricity? 02 None
03 Included in rent or other payments **OR** 04

Dollars	Cents
<input type="text"/>	<input type="text"/>

 per year

(b) oil, gas, coal, wood or other fuels? 05 None
06 Included in rent or other payments **OR** 07

Dollars	Cents
<input type="text"/>	<input type="text"/>

 per year

(c) water and other municipal services? 08 None
09 Included in rent or other payments **OR** 10

Dollars	Cents
<input type="text"/>	<input type="text"/>

 per year

H7. For RENTERS only:

What is the **monthly rent** paid for this dwelling? 11 Rented without payment of cash rent **OR** 12

Dollars	Cents
<input type="text"/>	<input type="text"/>

 per month

H8. For OWNERS only, answer parts (a) through (f):

(a) What are the total regular **monthly** mortgage or loan payments for this dwelling? 13 None **Go to part (c)** **OR** 14

Dollars	Cents
<input type="text"/>	<input type="text"/>

 per month

(b) Are the property taxes (municipal and school) included in the amount shown in part (a)? 15 Yes **Go to part (d)**
16 No

(c) What are the estimated **yearly** property taxes (municipal and school) for this dwelling? 17 None **OR** 18

Dollars	Cents
<input type="text"/>	<input type="text"/>

 per year

(d) If you were to sell this dwelling now, for how much would you expect to sell it? 19

Dollars
<input type="text"/>

(e) Is this dwelling part of a registered condominium? 20 Yes **Continue with part (f)**
21 No **Go to Step G on next page**

(f) What are the **monthly** condominium fees? 22 None **OR** 23

Dollars	Cents
<input type="text"/>	<input type="text"/>

 per month



**STEP
G**

You have now completed your questionnaire. Please mail it today.

Thank you for your cooperation.

COMMENTS

FOR INFORMATION ONLY

THE LAW PROTECTS WHAT YOU TELL US

The confidentiality of your census questionnaire is protected by law. All Statistics Canada employees have taken an oath of secrecy. Your personal census information cannot be given to anyone outside Statistics Canada — not the police, not another government department, not another person. This is your right.

Your census questionnaire will be retained in accordance with legislative requirements and will be stored securely. You can ask to see the information you gave about yourself on your 2001 Census questionnaire after November 2001. To do this, write to the Privacy Coordinator, Statistics Canada, 25th Floor, R.H. Coats Building, Ottawa, Ontario K1A 0T6.

