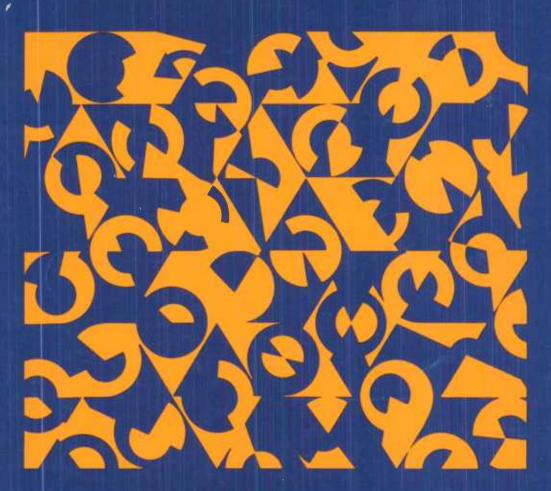
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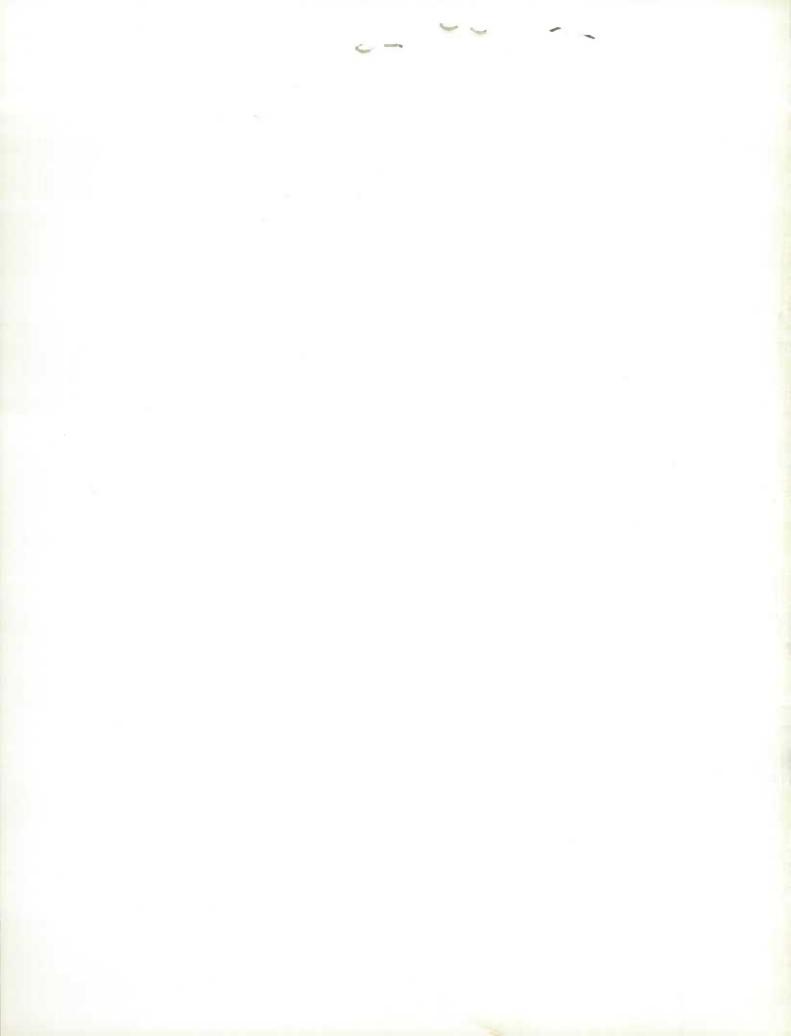


# Overview of Special Surveys 1988



conducted by the Household Surveys Division of Statistics Canada

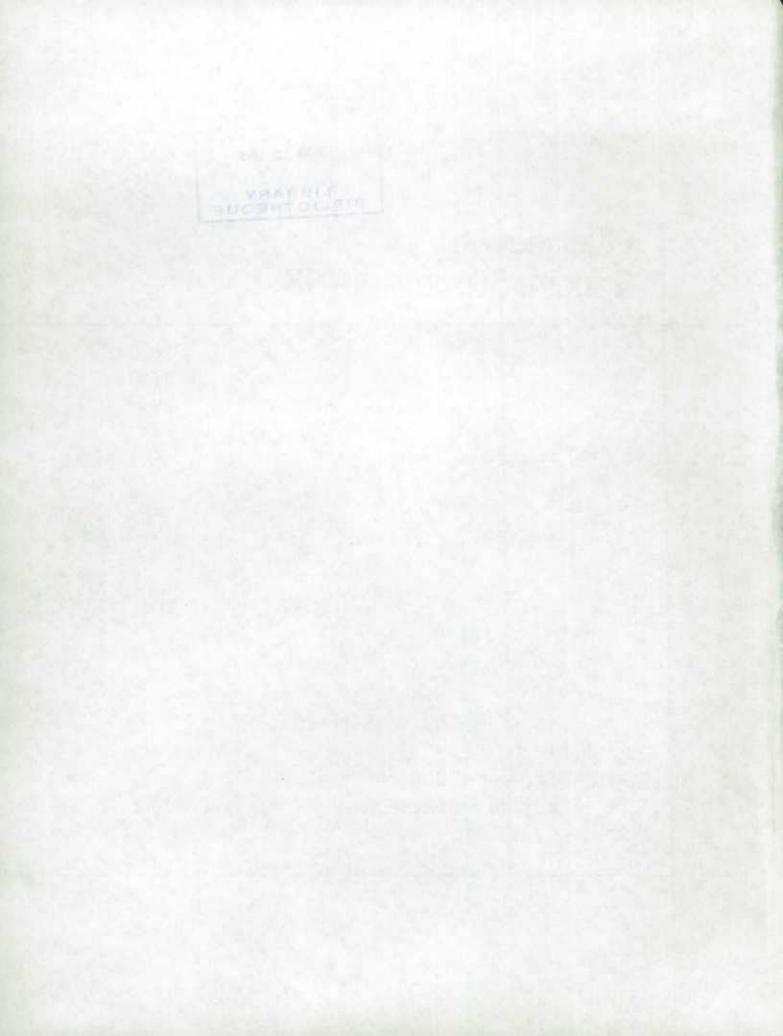
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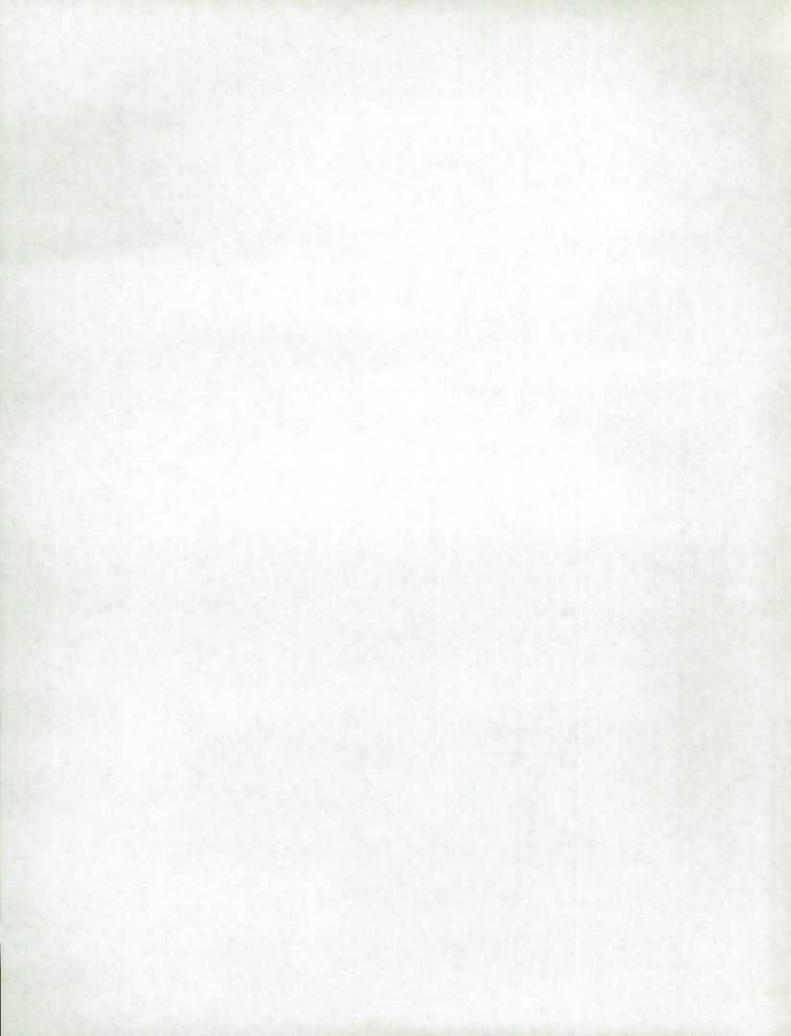
# Overview of Special Surveys 1988

conducted by the Special Surveys Group of the Household Surveys Division, Statistics Canada



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#### 1. INTRODUCTION

This report provides an overview of the Special Surveys Program managed by the Special Surveys Group within the Household Surveys Division of Statistics Canada. The report is divided into three parts. Section 1 of the report describes the mandate of the Special Surveys Program and the services offered. Section 2 provides a guide to surveys conducted under the auspices of the program since 1975 and Section 3 contains a copy of the questionnaire used for each survey conducted in 1988.

Further information on the survey activities of the Special Surveys Group may be obtained by contacting:

The Manager
The Special Surveys Group
Household Surveys Division
Statistics Canada
5D5 Jean Talon Building
Tunney's Pasture
Ottawa, Ontario
K1A 0T6

Telephone (613) 951-9476 Fax (613) 951-0562

#### 2. THE SPECIAL SURVEYS PROGRAM

The Special Surveys Program was established in 1973 to provide a focus for the design and implementation of surveys not provided for in Statistics Canada's regular program of surveys. Thus, the term "Special" refers to the fact that the program provides special interest data not available elsewhere. The program is managed by the Special Surveys Group, which is part of the Household Surveys Division in the Social, Institutions and Labour Statistics Field. The Group offers a broad range of survey design and implementation services on a cost recovery basis to federal and provincial government departments, institutions and private agencies. The Group specializes in the design and conduct of household surveys and has successfully used a variety of data collection methodologies including personal, telephone and mail. Related services are provided through Statistics Canada's national network of regional offices, which employ approximately 800 experienced interviewers and maintain sophisticated data capture facilities. The Group also has access to several cost effective and statistically reliable sampling methodologies, including the ability to conduct surveys as supplements to the 48,000 households in the monthly Labour Force Survey. Statistical and methodological advice is provided by statisticians from the Bureau's Social Survey Methods Division.

#### 3. THE DATA HOLDINGS OF THE SPECIAL SURVEYS GROUP

Since it's inception the Special Surveys Program has amassed a wealth of data relating to a wide variety of research topics, all of it in machine readable format. For many subjects these files represent the only source of national and provincial estimates. Data for most surveys is available in the form of public use microdata files relating to individual survey respondents, or in the form of user specified tabulations. In both cases users are required to pay a small amount to offset the marginal cost of producing the output. Copies of the Overview of Special Surveys for the years 1966 - 1987 are available on request.

#### 4. THE SPECIAL SURVEYS PROGRAM IN 1988

In terms of the number of surveys fielded and the amount of data collected, 1988 was an extraordinary year. The following section provides readers with the name of a contact for each study, a brief outline of the survey methodology, and copies of any questionnaires used. Since a number of the surveys included in this report were conducted as supplements to the monthly Labour Force Survey, copies of the LFS questionnaires and code sheets have been included for reference. Readers requiring additional information about any of the survey contained in this report are encouraged to write or call.

#### SPECIAL SURVEYS GROUP PROGRAMS

SURVEY MONTH: January 1988

TITLE: Labour Market Activity Survey

SPONSOR: Employment and Immigration Canada

SURVEY METHOD: Personal / Telephone Interview

SAMPLE SIZE: 5 rotation groups of the Labour Force Survey

OBJECTIVES: Information obtained from the Labour Market Activity
Survey will:

 measure the frequency and number of job changes occurring in the Canadian labour market over one and two year periods

provide information on the characteristics (wage rates, usual work schedules, etc.) of jobs held

 identify groups of people who would benefit from EIC programs

- identify participants of specific EIC programs

PROJECT MANAGER: T. Scott Murray

MICRODATA: Yes Price No X \$ 1000

## **Labour Market Activity Survey**

Confidential (when completed)

Authority – Statistics Act Statutes of Canada 1970, 71, 72 Chapter 15

		LABEL GOES HERE		COMPLETE FOR NEW HOUSEHOLD MEMBERS  1 0 8 2 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
			RECORD OF CALLS A	AND APPOINTMENTS	
#	Date		Not	es	
1					
2					
3					
4					
			COMPLETING	THE FORM 08	
•	Immigration mation about held during 1 confidential a Proxy respon However withousehold misupplementa made to tele correct inform the period.	e survey by saying: "Si rvey at the request of Canada. The purpose i the patterns of work ar 1987. All information was required by the Statist lise can be accepted then the person respondenters is unsure of the ry questions, arrange ephone at a convenier mation can be obtained son concerned, or from the household member.	s to collect infor- dd the types of jobs will be kept strictly ics Act."  for the Form 08. Inding for other ie answers to the ments should be it time when the id, either directly	if he/she:  a) changed employers or;  b) experienced a change in usual duties for an employ which was accompanied by an increase or decrease usual wages or salary.	bs er
		9.	START TIME  DATE		
10.	IN 1987, HOW	MANY EMPLOYERS DIC		O O Go to 95	

	JOB 1	108 2
19. WHEN IN 1987 DID FIRST START WORKING ATTHIS JOB OR BUSINESS?	D D M M Y Y	0 0 M M Y Y
20. LAST WEEK, DIO WORK AT THIS JOB OR BUSINESS?	Yes 3 Go to 24 No 4 Go to 21	Yes 3 Go to 24 No 4 Go to 21
21. LAST WEEK, DIO STILL HAVE THIS JOB OR BUSINESS?	Yes 5 ◯ Go to 24 No 6 ◯ Go to 22	Yes 5
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y	O D M M Y Y
COMPLETE ITEMS 11	THROUGH 18 FOR ALL JOBS BEFORE CON LIST JOBS IN CHRONOLOGICAL ORDER	IPLETING ITEM 19
11. FOR WHOM DID WORK?		
12. WHAT KIND OF BUSINESS, INDUSTRY OR SERVICE WAS THIS?	Confirmed Job 1 O	Confirmed job 1 O
13. WHAT KING OF WORK WAS DOING?	Confirmed job 2 O	Confirmed job 2 O
14. IN THIS WORK WHAT WERE 'S MOST IMPORTANT ACTIVITIES OR OUTIES?	Confirmed job <sup>3</sup> O	Confirmed job 3 O
15. CLASS OF WORKER	Enter code	Entercode
16. IN 1987 DID HAVE ANY OTHER JOBS WITH (repeat name of employer in Item 11)?	Yes 4 Go to next available job column  No 5 Go to 17	yes <sup>4</sup> Gotonext available job column No <sup>5</sup> Goto 17
17. IN 1987 DID HAVE ANY PROMOTIONS WITH (repeat name of employer in item 11)?	Yes <sup>6</sup> Go to next available job column  No <sup>7</sup> Go to 18	Yes <sup>6</sup> Go to next available job column No <sup>7</sup> Go to 18
18. IN 1987 DIO HAVE A JOB WITH ANY OTHER EMPLOYER?	Yes <sup>1</sup> Go to next available job column	Yes 1 Go to next available

108 3	108 4	108 5
D D M M Y Y	0 0 M M Y Y	0 D M M Y Y
Yes 3 Go to 24 No 4 Go to 21	yes 3 ○ Go to 24 No 4 ○ Go to 21	Yes 3 ◯ Go to 24 No 4 ◯ Go to 21
Yes 5 ○ Go to 24 No 6 ○ Go to 22	yes 5 ◯ Go to 24 No 6 ◯ Go to 22	Yes <sup>5</sup> Go to 24 No <sup>6</sup> Go to 22
D D M M Y Y	D D M M Y Y	O D M M Y Y
• COMPLETE ITEMS	11 THROUGH 18 FOR ALL JOBS BEFORE CO • LIST JOBS IN CHRONOLOGICAL OROER	MPLETING ITEM 19
Confirmed job 1 OR	Confirmed job 1 O	Confirmed job 1 OR
Confirmed job 2 O	Confirmed job 2 O	Confirmed job 2 O
Confirmed job 3 O	Confirmed tob 3 O	Confirmed job 3 O
Enter code	Enter code	Enter code
Yes <sup>4</sup> Go to next available job column  No <sup>5</sup> Go to 17	Yes 4 Go to next available job column  No 5 Go to 17	Yes <sup>4</sup> ○ No <sup>5</sup> ○ Go to 17
Yes 6 Go to next available job column  No 7 Go to 18	Yes 6 Go to next available job column  No 7 Go to 18	Yes 6 ○ No 7 ○ Goto 18
Yes 1 Go to next available job column No 2 Go to 19 8-5103-190 1	Yes 1 Go to next available job column  No 2 Go to 19	Yes 1 () No 2 () Goto 19

	108 1	108 2
9. WHEN IN 1987 DID FIRST START WORKING ATTHIS JOB OR BUSINESS?	0 0 M M Y Y	0 0 M M V V
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes 3 Go to 24 No 4 Go to 21	Yes 3 Goto 24 No 4 Goto 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes <sup>5</sup> Go to 24 No <sup>6</sup> Go to 22	Yes 5 ○ Go to 24 No 6 ○ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
• COMPLETE ITEMS 11 T	HROUGH 18 FOR ALL JOBS BEFORE COM ST JOBS IN CHRONOLOGICAL ORDER	PLETING ITEM 19
11. FOR WHOM DID WORK?		
23. WHAT WAS THE MAIN REASON LEFT THAT JOB OR BUSINESS?	Enter code .	Enter code
24. INTERVIEWER CHECK ITEM:  • If 010187 marked in Item 19  • Otherwise	7	7
25. WHEN BEFORE 1987 DID MOST RECENTLY START WORKING AT THIS JOB?	D D M M Y Y	Y Y M M C O
26. INTERVIEWER CHECK ITEM:		
If code 1 (Paid Worker) in Item 15      Otherwise	Go to 44  Go to next job; If "none", Go to 97	Go to 44  Go to next job:  If "none", Go to 97
	WORK AT EACH JOB BEFORE 1987	
27. DIDWORK AT THIS JOB BEFORE 1987?	Yes 3 ○ Go to 28 No 4 ○ Go to 36	Yes 3 Go to 28 No 4 Go to 35
28. WHEN BEFORE 1987 DID LAST WORK AT THIS JOB?	D D M M Y Y	O D M M Y Y
29. WHAT WAS THE MAIN REASON FOR STOPPING WORK?	Enter code and go to 36	Enter code and go to 35

108 3	100 4	108 5
D D M M Y Y	0 0 M M Y Y	D D M M Y Y
Yes 3 Go to 24 No 4 Go to 21	yes <sup>3</sup> ○ Go to 24 No <sup>4</sup> ○ Go to 21	yes 3 ○ Go to 24 No 4 ○ Go to 21
Yes 5 Go to 24 No 6 Go to 22	Yes <sup>5</sup> ○ Go to 24 No <sup>6</sup> ○ Go to 22	Yes 5 ○ Go to 24 No 6 ○ Go to 22
O D M M Y Y G0 t0 23	O M M Y Y	D D M M Y Y
• COMPLETE ITEMS 1	1 THROUGH 18 FOR ALL JOSS BEFORE CO LIST JOBS IN CHRONOLOGICAL ORDER	OMPLETING ITEM 19
Enter code	Entercode	Enter code
7 ○ Go to 25 8 ○ Go to 27	7 ○ Go to 25 8 ○ Go to 27	7 ○ Go to 25 8 ○ Go to 27
0 0 M M Y Y	DOMMYY	D O M M Y Y
1 Go to 44 2 Go to next job; If "none", Go to 97	1 Go to 44 2 Go to next job; If "nane" Go to 97	1
	WORK AT EACH JOB SEFORE 1987	
Yes 3 O Go to 28 No 4 O Go to 35	Yes 3 Go to 28 No 4 Go to 35	Yes 3 Go to 28 No 4 Go to 35
DOMMYY	O O M M Y Y	O D M M Y Y
Enter code and go to 35	Enter code and go to 35	Enter code and go to 35

	JOB 1	108 2
9. WHEN IN 1987 DID FIRST START WORKING ATTHIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
0. LAST WEEK, OHD WORK AT THIS JOB OR BUSINESS?	Yes 3 Go to 24 No 4 Go to 21	yes 3
1. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes 5○ Go to 24 No 6○ Go to 22	Yes <sup>5</sup> Go to 24 No <sup>6</sup> Go to 22
2. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
	THROUGH 18 FOR ALL JOBS BEFORE COM JST JOBS IN CHRONOLOGICAL ORDER	PLETING ITEM 19
1. FOR WHOM DID WORK?		
JOB SEARCH	ACTIVITIES BEFORE STARTING WORK AT	EACH JOB
35. IN 1987 JUST BEFORE STARTED WORKING AT THIS JOB WAS THERE A PERIOD DF A WEEK OR MORE IN WHICH WAS NOT WORKING?	DO NOT ASK	yes <sup>3</sup>
36 HAS REPORTED A PERIOD OF NOT WORKING BEFORE STARTING AT THIS JOB IN 1987. WHEN DID THIS PERIOD OF NOT WORKING START?	D D M M Y Y  OR  Never worked before 5	DO NOT ASK
37. DIO LOOK FOR WORK AT ANY TIME DURING THIS PERIOD?	yes 6	Yes 6○ Go to 38 No <sup>7</sup> ○ Go to 41
38. WHAT DID DO TO FIND WORK DURING THIS PERIOO? (Mark all methods reported)	Enter codes	Enter codes
39. IN HOW MANY CONSECUTIVE WEEKS WAS LOOKING FOR WORK JUST BEFORE THIS JOB?	Weeks	Weeks
40. DID ANY DF THE FOLLOWING CAUSE DIFFICULTY WHEN LOOKING FOR WORK?		
a)Not having enough information about available jobs	Ves No 01○ 02○	01 02 0
b) Not having the right skills for available jobs	03 040	03〇 04〇
c Not having enough education for available jobs	050 060	050 060
d)Not having enough experience for available jobs	07O 08O' Go to 42	07() 08() Go to 42
e Having a long-term physical condition, mental condition, or health problem	090 100	090 100
f) A shortage of jobs in the area	110 120	110 120
41. DID WANT A JOB AT ANY TIME DURING THIS PERIOD?	Yes 1 O Go to 42 No 2 O Go to 43	Yes 1
42. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS PERIOD?	Enter code	Enter code
43. INTERVIEWER CHECK ITEM:	10	20.6
If code 1 (Paid Worker) in Item 15  Otherwise	3	3 ○ Go to 44 4 ○ Go to next job, If "none", Go to 97

		Marin I of California
JOB 3	JO8 4	JOB S
0 0 M M Y Y	8.7 00 M M Y Y	0 0 M M Y Y
Yes 3 Go to 24	Yes 3 O Go to 24	Yes <sup>3</sup> ○ Go to 24
No 4 Go to 21	No 4 Go to 21	No 4 Goto21
Yes 5 Go to 24	Yes 5 Go to 24	Yes 5 Go to 24
No 6 Go to 22	No <sup>6</sup> ○ Go to 22	No <sup>6</sup> ○ Go to 22
D D M M Y Y	O O M M Y Y	D D M M Y Y
• COMPLETE ITEMS	11 THROUGH 18 FOR ALL JOSS BEFORE CO • LIST JOSS IN CHRONOLOGICAL ORDER T	MPLETING ITEM 19
108 SEARCH	ACTIVITIES BEFORE STARTING WORK AT	EACH JOB
Yes <sup>3</sup> O Go to 37	Yes 3 O Go to 37	Yes 3 O Go to 37
No 4  Go to 43	No 4 Go to 43	No 4 O Go to 43
DO NOT ASK	DO NOT ASK	DO NOT ASK
Yes 6  Go to 38 No 7  Go to 41	yes 6	yes 6
Enter codes	Enter codes	Enter codes
Weeks	Weeks	Weeks
Yes No	Yes No	Yes No
010 020	010 020	010 020
030 040	03 040	03 040
050 060	050 060	050 060
07 08 Go to 42	07 08 Go to 42	070 080 Go to 42
090 100	090 100	090 100
110 120	110 120	110 120
Yes 1 O Go to 42	Yes 1 O Go to 42	Yes 1 O Go to 42
No 20 Ga to 43	No 2 O Go to 43	No 2 O Go to 43
Entercode	Enter code	Enter code
3 O Go to 44	3 O Go to 44	3 O Go to 44
4 Go to next job; If "none", Go to 97	4 Go to next job; If "none", Ga to 97	4 O Go to 97

	108 1	108 2
WHEN IN 1987 DID FIRST START WORKING ATTHIS JOB OR BUSINESS?	0 0 M M Y Y	D D M M Y Y
LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes 3 ○ Go to 24 No 4 ○ Go to 21	Yes <sup>3</sup> ◯ Go to 24 No <sup>4</sup> ◯ Go to 21
LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes <sup>5</sup> ○ Go to 24 No <sup>6</sup> ○ Go to 22	Yes 5 ◯ Go to 24 No 6 ◯ Go to 22
WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y G0 t0 23
• COMPLETE ITEMS 11 TH	ROUGH 18 FOR ALL JOBS BEFORE CON ST JOBS IN CHRONOLOGICAL ORDER	APLETING ITEM 19
. FOR WHOM DIO WORK?		
JOB SEARCH A	CTIVITIES BEFORE STARTING WORK A	T EACH JOB
35. IN 1987 JUST BEFORE STARTED WORKING AT THIS JOB WAS THERE A PERIOD OF A WEEK OR MORE IN WHICH WAS NOT WORKING?	DO NOT ASK	yes 3 ○ Go to 37 No 4 ○ Go to 43
36 HAS REPORTED A PERIOD OF NOT WORKING BEFORE STARTING AT THIS JOB IN 1987. WHEN DID THIS PERIOD OF NOT WORKING START?	O D M M Y Y  OR  Never worked before 5 O	DO NOT ASK
37. DIO LOOK FOR WORK AT ANY TIME DURING THIS PERIOD?	yes 6	Yes 6 ○ Go to 38 No 7 ○ Go to 41
38. WHAT DID DO TO FIND WORK DURING THIS PERIOD? (Mark all methods reported)	Enter codes	Enter codes
39. IN HOW MANY CONSECUTIVE WEEKS WAS LOOKING FOR WORK JUST BEFORE THIS JOB?	Weeks	Weeks
40. DID ANY OF THE FOLLOWING CAUSE DIFFICULTY WHEN LOOKING FOR WORK?	Yes No ,	Yes No
a)Not having enough information about available jobs	010 020	010 020
b)Not having the right skills for available jobs	03 040	030 040
c) Not having enough education for available jobs	05O 06O Goto 42	05O 06O Go to 42
d)Not having enough experience for available jobs	07() 08()	070 080
e)Having a long-term physical condition, mental condition, or health problem	090 100	090 100
f) A shortage of jobs in the area	110 120	110 120 /
41. DID WANT A JOB AT ANY TIME DURING THIS PERIOD?	• Yes 1 ○ Go to 42 No 2 ○ Go to 43	Yes 1 ○ Go to 42 No 2 ○ Go to 43
42. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS PERIOD?	Enter code	Enter code
43. INTERVIEWER CHECK ITEM:		
if code 1 (Paid Worker) in Item 15     Otherwise	3 Goto 44 4 Goto nextjob; if "none", Goto 97	3 ○ Go to 44 4 ○ Go ta next job; if "none", Ga to 97

JOB 3	108 4	JOB 5
0 D M M Y Y	D D M M Y Y	0 0 M M Y Y
Yes 3 Go to 24	Yes 3 O Go to 24	Yes 3 Go to 24
No 4O Go to 21	No 40 Go to 21	No 4 Go to 21
Yes 5O Go to 24	Yes SO Go to 24	Yes 5 Go to 24
No 6 ◯ Go to 22	No 60 Go to 22	No 6 Go to 22
O D M M Y Y	O O M M Y Y	D D M M Y Y
• COMPLETE ITEMS	11 THROUGH 18 FOR ALL JOBS BEFORE CO • LIST JOBS IN CHRONOLOGICAL ORDER	MPLETING ITEM 19
JOB SEARCH	ACTIVITIES BEFORE STARTING WORK AT	EACH JOB
Yes 3 O Go to 37	Yes 3 O Go to 37	Yes 3 O Go to 37
No 4 Go to 43	No 4 O Go to 43	No 4 O Go to 43
DO NOT ASK	DO NOT ASK	DO NOT ASK
Yes 6	Yes 6 Go to 38  No 7 Go to 41	Yes 6 ○ Ga to 38 No 7 ○ Ga to 41
Enter codes	Enter codes	Enter codes
Weeks	Weeks	Weeks
Yes No 01	Yes No 01	Yes No 01
Go to 44  Go to next job; If "none", Go to 97	Go to 44  Go to next job.  If "none". Go to 97	3 O Go to 44 4 O Go to 97

108 2
8,7 M M Y Y
○ Go to 24 ○ Go to 21
○ Go to 24 ○ Go to 22
M M Y Y
9
me 5 O Go to 46 6 O Go to 45
O Go to 77 O Go to 46
○ Go to 77 ○ Go to 47
MMYY
Entercode
○ Go to 50 ○ Go to 51
Enter code(s) and Go to 52
○ Go to 52 ○ Go to 53
Enter code
turned <sup>7</sup> O Go to 77

1O8 3	108 4	JOB S
0 D M M Y Y	D D M M Y Y	0 D M M Y Y
Yes 3 ○ Go to 24 No 4 ○ Go to 21	Yes 3 ○ Go to 24 No 4 ○ Go to 21	Yes 3 Goto 24
Yes <sup>5</sup> Go to 24 No 6  Go to 22	Yes 5 O Go to 24	Yes 5 Go to 24
	S 11 THROUGH 18 FOR ALL IORS REFORE CO	
S		
	INPAID ABSENCES FROM EACH JOB IN 1987	
Always the same 5 O Go to 46	Always Phosamo 5 O Garage	
70		
D D M M Y Y	O O M M Y Y	0 D M M Y Y
Enter code	Entercode	Enter code
Enter code(s) and Go to 52	Enter code(s) and Go to 52	Enter code(s) and Go to 52
Enter code	Enter code	Enter code
OR	OR   Go to 54	OR

	JOB 1	100 2		
. WHEN IN 1987 DID FIRST START WORKING ATTHIS JOB OR BUSINESS?	D D M M Y Y	0 0 M M Y Y		
LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes 3 ○ Go to 24 No 4 ○ Go to 21	yes 3○ Ga to 24 No 4○ Ga to 21		
LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes 5 ◯ Go to 24 No 6 ◯ Go to 22	yes 5 ○ Go to 24 No 6 ○ Go to 22		
WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y		
• COMPLETE ITEMS 11	THROUGH 18 FOR ALL JOBS BEFORE COMP LIST JOBS IN CHRONOLOGICAL ORDER	PLETING ITEM 19		
1. FOR WHOM DID WORK?				
UN	IPAID ABSENCES FROM EACH JOB IN 1987			
S4. EXCLUDING FULLY PAID ABSENCES, DID	yes 1 ○ Ga to 77 No 2 ○ Go to 55	Yes 1 ○ Go to 77 No 2 ○ Go to 55		
55. IN 1987 WHEN DID NEXT STOP WORKING AT THIS JOB?	D D M M Y Y	D D M M Y Y		
56. WHAT WAS THE MAIN REASON FOR STOPPING WORK?	Enter code	Enter code		
57. DID LOOK FOR WORK AT ANY TIME DURING THIS ABSENCE?	Yes 3 Go to 58 No 4 Go to 59	yes 3 ○ Go to 58 No 4 ○ Go to 59		
S8. WHAT DID DO TO FIND WORK DURING THIS ABSENCE? (Mark all methods reported)	Enter code(s) and Go to 60	Enter code(s) and Go to 60		
59. DID WANT A JOB AT ANY TIME DURING THIS ABSENCE?	Yes 5 ◯ Go to 60 No 6 ◯ Go to 61	yes 5 ○ Ga to 60 No 6 ○ Go to 61		
60. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS ABSENCE?	Entercode	Entercode		
61. WHEN DIO RETURN TO THIS JOB?	Has not returned yet 7 O Go to 77  OR  OR  D D M M Y Y	Has not returned yet 7 O Go to 77  OR  D D M M Y Y		
62. EXCLUDING FULLY PAID ABSENCES, DID WORK AT THIS JOB CONTINUOUSLY FROM THEN UNTIL (repeat date in Item 22/last week) WITH NO BREAKS OF A WEEK OR MORE?	Yes 1 O Go to 77 No 2 O Go to 63	Yes 1 O Go to 77 No 2 O Go to 63		
63. WHEN IN 1987 OID NEXT STOP WORKING AT THIS JOB?	D D M M Y Y	D D M M V Y		
64. WHAT WAS THE MAIN REASON FOR STOPPING WORK?	Enter code	Enter code		
65. DID LOOK FOR WORK AT ANY TIME DURING THIS ABSENCE?	yes 3 ○ Go to 66 No 4 ○ Go to 67	yes 3 ○ Go to 66 No 4 ○ Go to 67		
66. WHAT DID DO TO FIND WORK DURING THIS ABSENCE? (Mark all methods reported)	Enter code(s) and Go to 68	Enter code		

108   13			
O	108 3	108 4	108 5
No		0 0 M M Y Y	
No		Yes 3 Goto 24	Yes 3 Go to 74
No 6   Goto 22   No 6   Goto 27   No 2   Goto 55   No 6   Goto 59   No 6   Goto 59   No 6   Goto 59   No 6   Goto 59   No 6   Goto 60   No 6   Goto 61   No 6   Goto 61   No 6   Goto 61   No 6   Goto 61   No 6   Goto 62   O D M M Y Y Y   Goto 62   O D M M M Y Y Y   Goto 62   O D M M M Y Y Y   Goto 62   O D M M M Y Y Y   Goto 62   O D M M M Y Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   Goto 62   O D M M M Y Y   O D M M M Y Y   O D M M M Y Y   O D M M M Y Y   O D M M M Y Y   O D M M M Y Y   O D M M M Y Y   O D M M M Y Y   O D M M M Y   O D M M M Y   O D M M M Y   O D M M M Y   O D M M M Y   O D M M M Y   O D M M M Y   O D M M M Y   O D M M M Y   O D M M M Y   O D M M M Y   O D M	No 4 Go to 21	No 40 Go to 21	
No 6   Goto 22	Yes SO Go to 24	Yes 5 Go to 24	Vm 50 50000
COMPLETE ITEMS 11 THROUGH 18 FOR ALL JOBS BEFORE COMPLETING ITEM 19	No 6 Go to 22	No 6 Goto 22	
Ves 1	D D M M Y Y	O D M M Y Y	D D M M Y Y
Yes 1 ○ Go to 77         No 2 ○ Go to 55         No 3 ○ Go to 55         No 3 ○ Go to 55         No 3 ○ Go to 56         Yes 3 ○ Go to 58         No 4 ○ Go to 59         Enter code(s) and Go to 60         Image: Enter code(s) and Go to 60         Yes 5 ○ Go to 60         Yes 5 ○ Go to 60         Yes 5 ○ Go to 60         No 6 ○ Go to 61         No 6 ○ Go to 62         D D M M M Y Y         D D M M M Y Y         OR	• COMPLETE ITEMS	11 THROUGH 18 FOR ALL JOBS BEFORE CO • LIST JOBS IN CHRONOLOGICAL ORDER	OMPLETING ITEM 19
Yes 1 ○ Ga to 77         Yes 1 ○ Go to 77         No 2 ○ Go to 55         No 3 ○ Go to 55         No 3 ○ Go to 58         Yes 3 ○ Go to 58         No 4 ○ Go to 59         Enter code(s) and Go to 60         Enter code(s) and Go to 60         Enter code(s) and Go to 60         Yes 5 ○ Go to 60         Yes 5 ○ Go to 60         Yes 5 ○ Go to 60         No 6 ○ Go to 61         Has not returned yet 7 ○ Go to 77         OR			
Yes 1 ○ Ga to 77         Yes 1 ○ Go to 77         No 2 ○ Go to 55         No 3 ○ Go to 55         No 3 ○ Go to 55         No 3 ○ Go to 58         Yes 3 ○ Go to 58         No 4 ○ Go to 59         Enter code(s) and Go to 60         Yes 5 ○ Go to 60         Yes 5 ○ Go to 60         Yes 5 ○ Go to 60         No 6 ○ Go to 60         No 6 ○ Go to 60         No 6 ○ Go to 61         No 6 ○ Go to 62         D D M M Y Y         D D M M Y Y         D D M M Y Y         D D M M Y Y         D D M M Y Y         Yes 1 ○ Go to 77			
Yes 1 ○ Go to 77         No 2 ○ Go to 55         No 3 ○ Go to 55         No 3 ○ Go to 55         No 3 ○ Go to 56         Yes 3 ○ Go to 58         No 4 ○ Go to 59         Enter code(s) and Go to 60         Image: Enter code(s) and Go to 60         Yes 5 ○ Go to 60         Yes 5 ○ Go to 60         Yes 5 ○ Go to 60         No 6 ○ Go to 61         No 6 ○ Go to 62         D D M M M Y Y         D D M M M Y Y         OR			
Yes 1 ○ Go to 77         No 2 ○ Go to 55         No 3 ○ Go to 55         No 3 ○ Go to 55         No 3 ○ Go to 56         Yes 3 ○ Go to 58         No 4 ○ Go to 59         Enter code(s) and Go to 60         Image: Enter code(s) and Go to 60         Yes 5 ○ Go to 60         Yes 5 ○ Go to 60         Yes 5 ○ Go to 60         No 6 ○ Go to 61         No 6 ○ Go to 62         D D M M M Y Y         D D M M M Y Y         OR			
No 2 ○ Go to 55         No 2 ○ Go to 55           No 2 ○ Go to 55         No 2 ○ Go to 55           No 2 ○ Go to 55         No 2 ○ Go to 55           No 4 ○ Go to 58         Yes 3 ○ Go to 58         Yes 3 ○ Go to 58           No 4 ○ Go to 59         Yes 3 ○ Go to 58         Yes 3 ○ Go to 58           No 4 ○ Go to 59         No 4 ○ Go to 59         No 4 ○ Go to 59           Yes 5 ○ Go to 60           No 6 ○ Go to 61           Has not returned yet 7 ○ Go to 77         OR         Has not returned yet 7 ○ Go to 77         OR           D D M M Y Y         Go to 62         D D M M Y Y         Yes 1 ○ Go to 77         Yes 1 ○ Go to 77	U	NPAIO ABSENCES FROM EACH JOB IN 1987	
No 2 ○ Go to 55         No 2 ○ Go to 55           No 2 ○ Go to 55         No 2 ○ Go to 55           No 2 ○ Go to 55         No 2 ○ Go to 55           No 4 ○ Go to 58         Yes 3 ○ Go to 58         Yes 3 ○ Go to 58           No 4 ○ Go to 59         Yes 3 ○ Go to 58         Yes 3 ○ Go to 58           No 4 ○ Go to 59         No 4 ○ Go to 59         No 4 ○ Go to 59           Yes 5 ○ Go to 60           No 6 ○ Go to 61           Has not returned yet 7 ○ Go to 77         OR         Has not returned yet 7 ○ Go to 77         OR           D D M M Y Y         Go to 62         D D M M Y Y         Yes 1 ○ Go to 77         Yes 1 ○ Go to 77			
D D M M Y Y   D D M M Y Y   D D M M Y Y			
Enter code  Finter code  Finter code  Yes 3 Go to 58  No 4 Go to 59  Finter code(s)  And Go to 59  Finter code(s)  And Go to 60  Yes 5 Go to 60  No 6 Go to 61  Finter code  Finter code  Finter code(s)  And Go to 60  Yes 5 Go to 60  No 6 Go to 61  Finter code  Finte	No 2O Go to 55	No 2 Goto 55	No 2 Go to 55
Yes 3 ○ Go to 58       No 4 ○ Go to 59       Enter code(s)       Enter code(s)       Enter code(s)       Enter code(s)       Enter code(s)       Enter code(s)       and Go to 60       Yes 5 ○ Go to 60       Yes 5 ○ Go to 60       Yes 5 ○ Go to 60       No 6 ○ Go to 61       No 6 ○	DOMMYY	O O M M Y Y	OOMMYY
No         4 ○ Go to 59         No         4 ○ Go to 59           No         4 ○ Go to 59         No         4 ○ Go to 59           Image: Enter code(s) and Go to 60         Enter code(s) and Go to 60         Enter code(s) and Go to 60           Yes         5 ○ Go to 60         Yes         5 ○ Go to 60           No         6 ○ Go to 61         No         6 ○ Go to 61           Enter code         Enter code         Enter code           Has not returned yet         7 ○ Go to 77         Has not returned yet         7 ○ Go to 77           OR         OR         OR         OR         OR           Yes         1 ○ Go to 77         Yes         1 ○ Go to 77         Yes         1 ○ Go to 77	Enter code	Entercode	Entercode
Enter code(s) and Go to 60  Yes 5 Go to 60  No 6 Go to 61  Enter code  Enter code(s) and Go to 60  Yes 5 Go to 60  No 6 Go to 61  Enter code  Enter code  Enter code  Enter code  Finter code(s) and Go to 60  Yes 5 Go to 60  No 6 Go to 61  Enter code  Enter code  Finter code  Fin			
Yes 5○ Go to 60         No 6○ Go to 61         Enter code         Enter code         Enter code         Enter code         Has not returned yet 7○ Go to 77         Has not returned yet 7○ Go to 77         Has not returned yet 7○ Go to 77         OR	Enter code(s) and Go to 60	Enter code(s)	Enter code(s)
No 6 Go to 61    Enter code   Enter code   Enter code			
Enter code  Enter code  Enter code  Enter code  Enter code  Has not returned yet 7 O Go to 77  OR  OR  OR  OR  OR  OR  OR  OR  Yes 1 O Go to 77			
Has not returned yet 7 O Go to 77  OR  OR  OR  OR  OR  OR  OR  OR  OR	30.001	No 30 Goto61	No 60 Go to 61
OR O	Enter code	Enter code	Enter code
OR O	Has not returned yet 7 O Go to 77	Has not returned yet 7 O Go to 77	Has not returned yet 7 O Go to 77
Yes 1 Go to 77	OR	OR	
Yes 1 Go to 77 Yes 1 Go to 77 Yes 1 Go to 77	Go to 62	Go to 62	Go to 62
161 0 00 00 77	D I I I I I I I	D D M M Y Y	D D M M Y Y
161 0 00 00 77			
.^			
No 2 Go to 63 No 2 Go to 63 No 2 Go to 63	No 20 Go to 63	No 2 Go to 63	No 2 Go to 63
D D M M Y Y D D M M Y Y	D D M M Y Y	D D M M Y Y	O O M M Y Y
Enter code Enter code Enter code	Enter code	Entercode	Enter code
Yes 3 Go to 66 Yes 3 Go to 66 Yes 3 Go to 66		Yes 3 O Go to 66	yes 3 Go to 66
No 4 Go to 67 No 4 Go to 67 No 4 Go to 67	No 40 Go to 67	No 40 Go to 67	
Enter code(s) Enter code(s) and Go to 68 Enter code(s) and Go to 68			

8-5103-1901

	106 1	108 Z
19. WHEN IN 1987 DID FIRST START WORKING AT THIS JOB OR BUSINESS?	0 0 M M Y Y	00000
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes 3 ○ Go to 24 No 4 ○ Go to 21	Yes 3 Go to 24 No 4 Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes 5 ○ Go to 24 No 6 ○ Go to 22	Yes <sup>5</sup> Go to 24 No <sup>6</sup> Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D O M M Y Y	D D M M Y Y
	THROUGH 18 FOR ALL JOBS BEFORE CON JST JOBS IN CHRONOLOGICAL ORDER	IPLETING ITEM 19
11. FOR WHOM DID WORK?		
UNI	PAID ABSENCES FROM EACH JOB IN 198	7
67. OIO WANT A JOB AT ANY TIME DURING THIS ABSENCE?	Yes 5 ○ Go to 68 No 6 ○ Go to 69	Yes <sup>5</sup> ◯ Go to 68 No 6 ◯ Go to 69
68. WAS THERE ANY REASON COULD NOT TAKE A JOB OURING THIS ABSENCE?	Entercode	Enter code .
69. WHEN DID RETURN TO THIS JOB?	Has not returned yet 7 O Go to 77  OR  D D M M Y Y	Has not returned yet 7 O Go to 77  OR  OR  ON M M Y Y
70. EXCLUDING FULLY PAID ABSENCES, DID	yes 1 ○ Go ta 77 No 2 ○ Go ta 71	Yes 1 ○ Go to 77 No 2 ○ Go to 71
71. WHEN IN 1987 DID NEXT STOP WORKING AT THIS JOB?	0 0 M M Y Y	0 0 M M Y Y
72. WHAT WAS THE MAIN REASON FOR STOPPING WORK?	Enter code	Enter code
73. DID LOOK FOR WORK AT ANY TIME DURING THIS ABSENCE?	Yes <sup>3</sup>	yes <sup>3</sup>
74. WHAT OIO OO TO FIND WORK DURING THIS ABSENCE? (Mark all methods reported)	Enter code(s) and Go to 76	Enter code(s
75. DID WANT A JOB AT ANY TIME DURING THIS ABSENCE?	Yes <sup>5</sup>	Yes <sup>5</sup>
76. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS ABSENCE?	Entercode	Enter code

108 3	108 4	108 5
0 0 M M Y Y	0 D M M Y Y	0 0 M M Y Y
Yes 3 Go to 24 No 4 Go to 21	Yes 3 ○ Go to 24 No 4 ○ Go to 21	Yes 3 ◯ Go to 24 No 4 ◯ Go to 21
Yes 5 ○ Go to 24 No 6 ○ Go to 22	Yes 5 Go to 24	Yes 5 Go to 24
No Go to 22	No 6 Go to 22	No 6 Go to 22
O O M M Y Y	O O NI NI Y	D D M M Y Y
• COMPLETE ITE	MS 11 THROUGH 18 FOR ALL JOBS 8EFORE  • LIST JOBS IN CHRONOLOGICAL ORD	COMPLETING ITEM 19
	UNPAID ABSENCES FROM EACH JOB IN 19	987
Yes <sup>5</sup> ○ Go to 68 No 6 ○ Go to 69	Yes SO Go to 68	Yes 5 Go to 68
No 0 Go to 69	No 6 Ga to 69	No 6 Go to 69
Enter code	Enter code	Enter code
Has not returned yet 7 O Go to 77	Has not returned yet 7 O Go to 77	Has not returned yet 7 O Go to 77
OR	OR	OR GUIDT
0 0 M M Y Y	D D M M Y Y	
O O M M Y Y	D D M M Y Y	D D M M Y Y
Yes 1 O Go to 77	Yes 1 O Go to 77	
No 2 Go to 71	No 20 Go to 71	Yes 1 O Go to 77 No 2 O Go to 71
HEAL STORY		No 2 Go to 71
OOMMYY	O O M M Y Y	0 0 M M Y Y
Enter code	Enter code	Enter code
Yes 3 Go to 74	secretified date in	
No 40 Go to 75	Yes 3 O Go to 74	Yes 3 O Go to 74
	No 4 Go to 75	No 4 O Go to 75
Enter code(s) and Go to 76	Enter code(s) and Go to 76	Enter code(s) and Go to 76
Yes <sup>5</sup> ○ Ga to 76 No <sup>6</sup> ○ Go to 77	Yes 5 Go to 76	Yes 5 Goto 76
0 60 (0 //	No 6 Go to 77	No 6 Go to 77
Enter code	Enter code	Enter code
103~190 1		

	JOB 1	108 2
19. WHEN IN 1987 DID FIRST START WORKING ATTHIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	yes 3 ○ Go to 24 No 4 ○ Go to 21	ves 3 ○ Ga to 24 No 4 ○ Ga to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes <sup>5</sup> ○ Go to 24 No <sup>6</sup> ○ Go to 22	Yes <sup>5</sup> Go to 24 No <sup>6</sup> Go to 22
22. WHEN OID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
	HROUGH 18 FOR ALL JOBS BEFORE CON IST JOBS IN CHRONOLOGICAL ORDER	APLETING ITEM 19
11. FOR WHOM DIDWORK?		
108	CHARACTERISTICS FOR EACH JOB IN 198	87
77. HOW MANY WEEKS PER MONTH OID USUALLY WORK AT THIS JOB?	Weeks	Weeks
78. IN THE WEEKS THAT WORKED AT THIS JOB HOW MANY PAID DAYS PER WEEK OID USUALLY WORK?	Days	Days
79. ON THE DAYS THAT WORKED AT THIS JOB HOW MANY PAID HOURS PER DAY OND USUALLY WORK?	Hours	Hours
80. INTERVIEWER CHECK ITEM:  • If less than '04' in Item 77  OR less than '05' in Item 78  OR less than '06' in Item 79  • Otherwise	7○ Go to 81 8○ Go to 83	7○ Go to 81 8○ Go to 83
81. HOW MANY ADDITIONAL HOURS PER MONTH, IF ANY, WOULD HAVE PREFERRED TO WORK AT THIS JOB?	Hours 11 0 0 Goto83	Hours  If 0 0 Go to 83
82. WHAT WERE THE REASONS DID NOT WORK THESE ADDITIONAL HOURS AT THIS JOB? (Mark all reasons reported)	Enter code(s)	Enter code(s)
83. IN THIS JOB WAS A MEMBER OF A UNION OR OTHER GROUP WHICH BARGAINS COLLECTIVELY WITH THIS EMPLOYER?	yes 1 ○ Go to 85 No 2 ○ Go to 84	Yes ¹ ○ Go to 85 No ² ○ Go to 84
84. ALTHOUGH WAS NOT A MEMBER OF A UNION, WERE 'S WAGES COVERED BY A COLLECTIVE AGREEMENT NEGOTIATED BY A UNION OR OTHER GROUP?	Yes 3 O No 4 O	Yes 3 () No 4 ()
85. WAS COVERED BY A PENSION PLAN CONNECTED WITH THIS JOB? (Do not count CPP-QPP deferred profit sharing plans or personal savings plans for retirement.)	Yes 5 No 6 O	Yes SO No 6O
86. AT THIS JOB WAS PAID BY THE HOUR?	Yes <sup>7</sup> Go to 87 No <sup>8</sup> Go to 90	Yes <sup>7</sup> ○ Go to 87 No 8 ○ Go to 90
87. AT THIS JOB WHAT WAS 'S USUAL HOURLY WAGE BEFORE TAXES AND OTHER DEDUCTIONS?	s	s

JOB 3	JOB 4	108 5
D D M M Y Y	D D M M Y Y	0 0 M M Y Y
Yes 3 Go to 24	Yes 3 Go to 24	Yes 3 Go to 24
No 40 Go to 21	No 4 Ga to 21	No 4 Go to 21
Yes SO Go to 24	Yes 5 Go to 24	Yes 5 Go to 24
No 6O Go to 22	No 6 Go to 22	No 6 Go to 22
D D M M Y Y	D D M M Y Y	D D M M Y Y Go to 23
• COMPLETE ITEMS	11 THROUGH 18 FOR ALL JOBS BEFORE CO • LIST JOBS IN CHRONOLOGICAL ORDER	MPLETING ITEM 19
JOI	B CHARACTERISTICS FOR EACH JOB IN 198	7
Weeks	Weeks	Weeks
Days	Oays	Days
Hours	Hours	Hours
7○ Go to 81	<sup>7</sup> ◯ Go to 81	7○ Go to 81
8O Go to 83	8 O Go to 83	8 O Go to 83
		The same of the sa
Hours	Hours	Hours
If 0 0 Go to 83	if 0 0 Go to 83	If 0 0 Go to 83
Enter code(s)	Enter code(s)	Enter code(s)
10 6	106	v. 10 s
Yes 1 ○ Go to 85 No 2 ○ Go to 84	Yes 1 O Go to 85 No 2 O Go to 84	Yes 1 O Go to 85 No 2 O Go to 84
Yes 3O	Yes 3O	Yes 3 O
No 40	No 40	No 40
Yes 5O	Yes 50	Yes 50
No 60	No 60	No 60
Yes <sup>7</sup> Go to 87	yes <sup>7</sup> ◯ Go to 87	Yes <sup>7</sup> O Go to 87
No 8 O Go to 90	No 8 Go to 90	No 8 O Go to 90
s	s	5

	JOB 1	JO8 2
19. WHEN IN 1987 OID FIRST START WORKING ATTHIS JOB OR BUSINESS?	0 0 M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOS OR BUSINESS?	yes 3	Yes 3 Go to 24 No 4 Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes 5 ○ Go to 24 No 6 ○ Go to 22	Yes 5 ○ Go to 24 No 5 ○ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	O D M M Y Y	O D M M Y Y
• COMPLETE ITEMS 1	1 THROUGH 18 FOR ALL JOBS BEFORE CO LIST JOBS IN CHRONOLOGICAL ORDER	MPLETING ITEM 19
11. FOR WHOM DID WORK?		
JO	B CHARACTERISTICS FOR EACH JOB IN 19	27
88. IN 1987 DID RECEIVE ANY COMMISSIONS, TIPS, BONUSES OR PAID OVERTIME FROM	Yes 1 O Go to 89	
THIS JOB?	No 2 Go to 92	Yes 1 O Go to 89 No 2 O Go to 92
89. IN 1987 WHAT WERE 'S TOTAL EARNINGS FROM THESE COMMISSIONS, TIPS, BONUSES OR PAIO OVERTIME?	s	s Go
90. AT THIS JOB WHAT WAS 'S USUAL WAGE OR SALARY BEFORE TAXES AND OTHER DEDUCTIONS FROM THIS EMPLOYER?	s	\$
	Go to 92  Twice a month  Monthly  Yearly  Other (please specify and go to 91)	3 Every two weeks 4 Twice a month 5 Monthly 6 Yearly 7 Other (please specify and go to 91)
91. IN 1987 WHAT WERE 'S TOTAL EARNINGS AT THIS JOB?	s	s
2. ABOUT HOW MANY PERSONS WERE EMPLOYED AT THE LOCATION WHERE WORKED FOR THIS EMPLOYER?	19 or less	19 or less
3. DID THIS EMPLOYER OPERATE AT MORE THAN ONE LOCATION IN CANADA?	Yes <sup>5</sup> ○ Go to 94  No <sup>6</sup> ○ Go to next job; If "none", Go to 97	Yes <sup>5</sup> ○ Go to 94  No <sup>6</sup> ○ Go to next job; If "none", Go to 97
IN TOTAL ABOUT HOW MANY PERSONS WERE EMPLOYED AT ALL LOCATIONS IN CANADA?	1	1 19 or less 2 20 to 99 3 100 to 499 4 500 or over
	5 Oon't know	5 O Don't know
		GO TO NEXT JOB

JOB 3	JOB 4	108 5
D D M M Y Y	D O M M Y Y	0 0 M M Y Y
Yes 3 Go to 24	yes 3 Go to 24	Yes 3 ◯ Go to 24
No 4 Go to 21	No 4 O Go to 21	No 4 Go to 21
Yes 5 Go to 24	Yes 5 Go to 24	Yes 5 Go to 24
No 6 Go to 22	No 6	No 60 Go to 22
D D M M Y Y	D D M M Y Y	D D M M Y - Y
• COMPLETE ITEMS	11 THROUGH 18 FOR ALL JOBS BEFORE CO • UST JOBS IN CHRONOLOGICAL OROER	DMPLETING ITEM 19
10	B CHARACTERISTICS FOR EACH JOB IN 198	7
Yes 1 O Go to 89	Yes 1 O Go to 89	Yes 1 O Go to 89
No 2 Go to 92	No 2 O Go to 92	No 2 Go to 92
s	5 Go to 92	5 Go to 92
S	S  1 O Daily 2 O Weekly 3 O Every two weeks 4 O Twice a month 5 O Monthly 6 O Yearly 7 O Other (please specify and go to 91)	\$ \\ \tag{1} \tag{Daily} \\ 2 \tag{Weekly} \\ 3 \tag{Every two weeks} \\ 4 \tag{Twice a month} \\ 5 \tag{Monthly} \\ 6 \tag{Vearly} \\ 7 \tag{Other (please specify and go to 91)} \\ \tag{Two or early} \\ Two or earl
s	\$	s
19 or less	19 or less	19 or less
Yes 5 Go 10 94	Yes 5 O Go to 94	Yes SO Go to 94
No 6 Go to next job; If "none". Go to 97	No 6 Go to next job; If "none", Go to 97	No 6 Go to 97
1	1	1
GO TO NEXT 108	GO TO NEXT JOB	607097

	108	1	108	2
B. WHEN IN 1987 DID FIRST START				8.7
WORKING AT THIS JOB OR BUSINESS?	0 0 M N	8,7 4 Y Y	0 0 M	
D. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes 3○ Go	to 24	Yes 3 G	o to 24
	No <sup>4</sup> O Go	to 21	No 40 G	o to 21
1. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes 5O Go		Yes 5 O G	
	No <sup>6</sup> ○ Go	to 22	No 6 ○ G	o to 22
2. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	O O M A	Go to 23	D D M	Go to 23
• COMPLETE ITEMS 11	THROUGH 18 FOR AI		MPLETING ITEM 19	
1. FOR WHOM DID WORK?		SCOGIONE ONDER		
	ACTIVITIES AFTER LA	CT DATE IN OBVEO	N THE VEAR	
95. HAS EVER WORKED AT A JOB OR BUSINES: LONGER?	S FOR SIX MONTHS OR	101. DID ANY OF THE F FOR WORK?	OLLOWING CAUSE DIFF	SICULTY WHEN LOOKING
Yes 1 O	YA L		Yes	No
No 2O		a) Not having enou about available		02 0
140		b) Not having the o	ight skills for 03	04 ()
96. IN 1987 DID LOOK FOR WORK AT ANY TIME	1	c) Not having enou	igh education 05 O	06 ()
		d) Not having enough		08 O Go to 10
Yes 3 O Go to 99		for available job		0.0
No 4 O Go to 102		e) Having a long-tr condition, ment or health proble	al condition,	10 🔾
AT INTERMENTALE PROPERTY ITEM.		f) A shortage of jo	obs in the area11 〇	120
97. INTERVIEWER CHECK ITEM:		102. DID WANT A J	DE AT ANY TIME DURING T	HIS PERIOD?
e If "Year" in Item 22 is 87 for every job Enter most worke	recent month at which id at a job or business			
from Item			Yes 1 O Go to 103	
			100 100 100 100 100 100 100 100 100 100	
Otherwise	o 105	103. IN WHICH MONTE	IS DID WANT A JOB?	
98. DIDLOOK FOR WORK AT ANY TIME FROM	d (repeat month in item		A M J J A 4 05 06 07 08 0	S O N O
97) UNTIL THE END OF DECEMBER 19877				0000
yes 6 ○ Go to 99			REASON COULD NOT	TAKE A JOB DURING TH
No 7 O Goto 102		PERIOD?	Enter code	
			Eurel cooe	
99. IN WHICH MONTH(S) DIO LOOK FOR WORL	K?	105. IN 1987 DID	RECEIVE INCOME FROM	
	10 11 12		nce Benefits	Ves No 02 ()
			nt Insurance Benefits	
100, WHAT DID OO TO FIND WORK DURING	THIS PERIOD? (Mark all	No. of the American	nce or Welfare Benefits	
methods reported)		d) Pension Incom	ne	
Enter code(	ie)	e) Worker's Com	pensation	09 0 10 0

JOB 3		- [-]	
We [3]	10	4	106 2
0 0 M M Y Y	D D M	, [8,7]	0 D M M Y Y
Yes 3 Go to 24	Yes 30	Go to 24	Yes 3 Goto 24
No 4O Go to 21	No 40		No 4 O Go to 21
Yes <sup>5</sup> Go to 24 No <sup>6</sup> Go to 22	Yes SO		Yes <sup>5</sup> ○ Go to 26 No <sup>6</sup> ○ Go to 22
D D M M Y Y	0 D M	M Y Y Go to 23	D D M M Y Y
		ALL JOBS BEFORE COI NOLOGICAL ORDER	MPLETING ITEM 19
			111111111
	11111		
106. INTERVIEWER CHECK ITEM:  If Item 10 (number		111. IN 1987 IN WHICH MI UNIVERSITY AS A FUI	ONTH(S) DIO ATTEND A SCHOOL, COLLEGE OR LL-TIME STUDENT?
of employers) = 00	o to 107	7 O NONE	
Otherwise	801 07	OR A	MIJASOND
107. IN 1987 DID ANY OF THE FOLLOWING PREVENT	FROM WORKING?	01 02 03 04	05 06 07 08 09 10 11 12
Yes No		112. IN 1987 IN WHICH MO	ONTH(S) DID ATTEND A SCHOOL, COLLEGE OR
a) Not having enough information about available jobs 01 02	0	8 O NONE	RT-TIME STUDENT?
b)Not having the right skills for available jobs 03 04	0	OR	
c) Not having enough education for available jobs 05 06	0	01 02 03 04 0 0 0 0	M J J A S O N D 05 06 07 08 09 10 11 12 O O O O O O
d)Not having enough experience for available jobs 07 08	Go to 110		ISIT A CANADA EMPLOYMENT CENTRE DR A
e)Not knowing what type of work or occupation to choose 09 10	0	Y	es 10
f) Having long-term physical condition, mental condition, or health problem 11 12	0	N	0 2 0
g)A shortage of jobs in the area 13 🔾 14	0	UPGRADING, OR W	ARTICIPATE IN ANY SKILL TRAINING, EDUCATION ORK EXPERIENCE PROGRAM SPONSORED BY MMIGRATION CANADA?
108. IN 1987 WAS SATISIFIED WITH THE NUMBER	OF WEEKS WORKED?	Ψ.	es 3 O Go to 115
Yes 1 O Go to 110		No	0 4 O Go to 117
No 2 O Go to 109		115. WHILE PARTICIPATIN	IG IN ANY OF THESE PROGRAMS OID 'S
109. IN 1987 DID WANT TO WORK MORE WEEKS O	OR FEWER WEEKS?	L DATE	Yes No
		a) Academic educatio	01 0 02 0
3 O Fewer weeks		b) Formal skill training	03 04 0
4 O More weeks		c) On the job training	05 06 0
110 AT AMY TIME IN 1002 DIE		d) Working at the job	07 08 0
110. AT ANY TIME IN 1987 DID ATTEND A SC UNIVERSITY AS A FULL-TIME OR PART-TIME STU	HODL, COLLEGE, OR DENT?	e) Other (please specif	(y)
Yes 5 Goto 111			
No 6 O Go to 113			
8-5103-190 1			

		JOB 1		JOB 2	
D. WHEN IN 1987 DID FIRST START WORKING AT THIS JOB OR BUSINESS?	0 0	8,7   M M Y Y		8,7 0 0 M M Y Y	
0. LAST WEEK, OID WORK AT THIS JOB OR BUSINESS?		O Go to 24		Yes 3 Go to 24 No 4 Go to 21	
1. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?		Go to 24		Yes 5 Go to 24 No 6 Go to 22	
2. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	0 0		to 23		o to 23
• COMPLETE ITEMS 11	THROUGH 18 F	OR ALL JOBS BEFO	ORE COMPLETING	ITEM 19	
1. FOR WHOM DID WORK?			L		
16. IN WHICH PROGRAM(S) DID PARTICIPATE?					
		When did start participating in this program?	When did stop participating in this program	m <sup>7</sup>	
a) The Job Entry/Re-entry program	01	MMYY	MMY	OR 02 Ostill particip	at ng
b) The Job Development program		30 MMYY	MMY	OR 04 O still particio	ating
c) The Skill Investment program	09	SO M M Y Y	MMY	OR 06 O still particip	oat ng
d) The Skill Shortages program	0	70 M M Y Y	MMY	OR 08 Ostili particis	pating
e) The Challenge 87 program	0	90 M M V V	MMY	OR 10 Ostell particu	
f) The Community Futures program	1	10 M M Y 1	MMY		
g) Other (please specify)	1	30 M M Y	Y M M Y	OR 14 Ostili partici	pating
117. DID TAKE ANY OTHER TRAINING WHICH LA	TED MORE THAN	25 HOURS TO LEARN	A NEW JOB RELATED	SKILL OR GET A NEW JOB?	
		No 2 O Go			
118. WAS THIS TRAINING FULL-TIME OR PART-TIME	,				
		-time 3 O			
		t-time 4 O			
	NG?		Tall 3		
119. IN WHICH MONTH(S) DID TAKE THIS TRAIN			5 0 1	V D	
	A A M 3 04 05	06 07 08		1 12	

108 3		10	8 4	100 S			
D D M M Y Y		00 0	8.7 M y y	0 D M M Y Y			
Yes 3 Go to 24		Yes 30	Go to 24	Yes 3 O Go to 24			
No 4O Go to 21		No 40	Go to 21	No 4 O Ga to 21			
Yes <sup>5</sup> O Go to 24		Yes 50	Go to 24	Yes 5 O Go to 24			
No 6 Go to 22		No 60	Go to 22	No 6 Go to 22			
D D M M Y Y		M a a	, Go to 23	O D M M Y Y			
• COMPLETE ITEMS 11	THROUG LIST JOB	SIN CHRO	ALL JOBS BEFORE CON NOLOGICAL OROER	MPLETING ITEM 19			
			11111				
	OHEST	TIONS ON	SPECIAL TOPICS				
121, FROM WHICH OF THE FOLLOWING GROUPS DIE				INORITY GROUP DOES BELONG? (include su			
GRAND-PARENTS DESCEND? (Mark all responses	reported)	ARENTS OR	groups as Blacks, Chin	rese. West Asians, etc.)			
	Yes	No					
a) Chinese	. 010	020					
b) Japanese		04 🔿	135 WHATIS 'S ASSESSED				
c) Korean d) Filiping		06 ()	125. WHAT IS 'S RELIGI				
of ringing	. 0,0	08 🔾		20			
e) East Indian (from India, Pakistan, Bangladesh, East Africa, Guyana, etc.)	. 090	10 (		30			
f) Black (from Africa, the Caribbean, Haiti, the U.S.A., Canada, etc.)		120		40			
g) North American Indian		12 ()	e) Lutheran	50			
h) Metis		160	f) Baptist	6 🔿			
i) Inuit (Eskimo)	-	18 ()		70			
j) Arab (from Egypt, Jordan, Lebanon, Iraq, etc.)	190	20 🔘		80			
k) West Asian (from Syria, Turkey, Afghanistan, Armenia, Iran, etc.)			i) Other (please speci	ı/y)9 ○			
	210	22 🔾					
Kampuchea, Laos, Thailand, Vietnam, etc.)	. 23 🔘	240					
m) North-African (from Egypt, Morocco, Algeria, Tunisia, etc.)	. 25 🔾	26 🔾	126. WHAT LANGUAGE DID	FIRST SPEAK IN CHILDHOOD?			
n) Latin American (from Mexico, Central America, or South America)	270	28 🔾					
o) British (from England, Scotland, Ireland, etc.)		30 🔾		10			
p) French	31 (	320		20			
q) Any other European groups	. 33 🔘	34 🔾	c) Other (please speci	fy)3 O			
r) Canadian	350	36 🔾					
122. ARE THERE ANY OTHER GROUPS FROM WHICH GRAND-PARENTS DESCENDED?	YOUR PAR	RENTS OR	177 184 1801 4 7 6 6 1 1 1 1				
Yes 1 O No 2	0		127. IN WHAT COUNTRY W				
No 2				10			
Please specify				30			
				3 O			
				(y)5 O			
23. BY VIRTUE OF HIS/HER RACE OR COLOUR, IS A VISIBLE MINORITY IN CANADA?							
Yes 3 O Go to 124 No 4	O Go to	125					

	108 1	108 2				
WHEN IN 1987 DID FIRST START WORKING AT THIS JOB OR BUSINESS?	FIRST START  DD M M Y Y  DD M M Y Y					
LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes 3 Goto24  No 4 Goto21  Yes 3 Goto24  No 4 Goto21					
LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	OR					
2. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	0 0 M M Y Y	D D M M Y Y				
• COMPLETE ITEMS	1 THROUGH 18 FOR ALL JOBS BEFORE CO LIST JOBS IN CHRONOLOGICAL ORDER	MPLETING ITEM 19				
1. FOR WHOM DID WORK?						
128. INTERVIEWER: Has this person moved since la	ast year's interview <sup>3</sup> 1 ○ Go to 129 No 2 ○ Go to 14.	2				
129. WHAT IS'S CURRENT ADDRESS?						
STREET AND NO LOT AND CONCESSION						
CITY, TOWN, VILLAGE, MUNCIPALITY						
PROVINCE DRITERRITORY						
POSTAL CODE						
POSTAL CODE  130. ON WHAT DATE DIO MOVE INTO THIS D	WELLING?					
	D D M M Y Y					
130. ON WHAT DATE DID MOVE INTO THIS D  131. WHAT WAS THE REASON FOR THIS MOVE	D D M M Y Y	10				
130. ON WHAT DATE DID MOVE INTO THIS D  131. WHAT WAS THE REASON FOR THIS MOVE:  a) Transferred by	D D M M Y Y					
130. ON WHAT DATE DIO MOVE INTO THIS D  131. WHAT WAS THE REASON FOR THIS MOVE:  a) Transferred by b) To accept a job c) To look for a jo	P (Mark only <u>one)</u> employer  Awork	3 🔾				
130. ON WHAT DATE DID MOVE INTO THIS D  131. WHAT WAS THE REASON FOR THIS MOVE:  a) Transferred by b) To accept a job c) To look for a job d) Spouse/parent	P (Mark only one)  employer  howork  moved	3 🔾				
130. ON WHAT DATE DID MOVE INTO THIS D  131. WHAT WAS THE REASON FOR THIS MOVE:  a) Transferred by b) To accept a job c) To look for a jo d) Spouse/parent e) To go to school	P (Mark only one)  employer	<sup>2</sup> ○ <sup>3</sup> ○ <sup>4</sup> ○				
130. ON WHAT DATE DIO MOVE INTO THIS DI  131. WHAT WAS THE REASON FOR THIS MOVE:  a) Transferred by b) To accept a job c) To look for a jo d) Spouse/parent e) To go to school f) To live with, o	P (Mark only one)  employer  work  moved  r close to, family/friend	<sup>2</sup> ○ <sup>3</sup> ○ <sup>4</sup> ○ <sup>5</sup> ○				
130. ON WHAT DATE DID MOVE INTO THIS DI  131. WHAT WAS THE REASON FOR THIS MOVE:  a) Transferred by b) To accept a job c) To look for a jo d) Spouse/parent e) To go to school f) To live with, o g) Retirement	P (Mark only one)  employer	<sup>2</sup> ○ <sup>3</sup> ○ <sup>4</sup> ○ <sup>5</sup> ○ <sup>6</sup> ○				

-	108 3			JOB 4				108 5		
		0 0 M M Y Y	D D	8     M M Y		D D M M Y Y				
		Yes 3 Go to 24	Yes 3(	) Go to 24		Yes 3 Go to 24				
-		No 4 Go to 21	No 40	) Go to 21		No 4 Go to 21				
		Yes SO Go to 24	Yes 5(	Go to 24		Yes <sup>5</sup> ○ Go to 24				
-	_	No 6 Go to 22	No 60	) Go to 22		No 6 ○ Go to 22				
L		D D M M Y Y		M M Y	Go to 23		D D M M Y Y			
COMPLETE ITEMS 11 THROUGH 18 FOR ALL JOBS BEFORE COMPLETING ITEM 19     LIST JOBS IN CHRONOLOGICAL OROER										
					11					
13	133. INTERVIEWER: Complete Item 133 (A) and (B) only once for this persons' new household.									
		Enter below the HSD-Pn/Lo /Itam 21 503a14		, new nouse	noig.					
		listed in item 32-F03A who moved to this dw	elling							
	Pg Ln Pg Ln Pg Ln Pg Ln									
	Pg Ln Pg Ln Pg Ln Pg Ln									
	(8) Complete the following for all other persons who live in this dwelling and who have no usual place of residence elsewhere.  No additional persons to be listed 3 Go to 142									
F	134 135 Names of household members			136 Age	137 Sex	138 M S	139 R to H	140 Educ	141 Memb	
Pg	FU	Given name						1 2		
9	1	Surname								
9	2	Given name Surname								
9	3	Given name								
F	-	Surname								
9	4	Surname Surname								
9	5	Given name								
-		Surname								
9	6	Given name Surname								
9	7	Given name Surname								
9	В	Given name								
142	INTE	Surname RVFWFR: Was this interview and								
	142. INTERVIEWER: Was this interview conducted mainly by telephone?  Yes 4 No 5 No									
143. HRD Page-line No. of information source										
	HRD page-line number				THANK YOU VERY MUCH FOR					
8-510	3-5103-1901				YOUR ASSISTANCE ON THIS PROJECT.					

#### SPECIAL SURVEYS GROUP PROGRAMS

SURVEY MONTH: February 1988

TITLE: Survey of the Importance of Wildlife to Canadians

SPONSOR: Canadian Wildlife Services of Environment Canada

SURVEY METHOD: Mailout / Mailback

SAMPLE SIZE: Each civilian household member in rotations 1, 3, 4, 5,

and 6.

OBJECTIVES: The major objective of this survey is to collect

information of watching, feeding, attracting,

photographing and hunting wildlife and what these

activities contributed to the Canadian economy in 1987.

PROJECT MANAGER: Anne Haining

Microdata: Yes Price No

X \$ 500

CONFIDENTIAL when completed

Authority Statistica Act. Statutes of Canada 1970 21-72 Chapter I

## SURVEY ON THE IMPORTANCE OF WILDLIFE **TO CANADIANS DURING 1987**

To the Respondent:

Thank you for taking a few minutes to answer these important questions on the value of wildlife in your day-to-day activities. Your answers, combined with those of other Canadians, will provide valuable insights into both the economic value of wildlife as well as the enjoyment Canadians derive from wildlife and wildlife-related activities in Canada. This survey is being conducted by Statistics Canada for the Canadian Wildlife Service of Environment Canada.

PI	rovincial wildlife agencies and several other agencies.	Your responses are strictly confidential.
A	ux francophones: Si ce questionnaire anglais vous a él	té posté par erreur et si vous en désirez un en français,
	euillez nous appeler à frais virès	part of all at 31 your an desirez on an mançais.
INSTRUCTIONS		
This questionnair	re to be completed by	
To answer the que	estions, enter a check in the appropriate circle For a num	nber in the boxes provided. For example, if you
contributed \$107	25 to wildlife related organizations report it as \$ 1/6	2 7 00 Mark your angivers clearly
riease return you	ir completed questionnaire within the next three days in	the postage paid envelope provided.
PLEASE READ T	HESE IMPORTANT DEFINITIONS	
WILDLIFE: Mean	ns wild animals, not pets or other domesticated animals	s. The 5 types of wildlife include waterfowl, other wild birds, small and
large mammais ar	nd other wildlife in a natural environment. They do not	include animals in zoos or game farms.
1		
# -		
11	WATERCOM	
1 Page	WATERFOWL: For example ducks, geese, herons, cranes	SMALL MAMMALS: Includes small game and non-game species. For
Sula		example, rabbits, squirrels, raccoons,
11	W.	foxes, groundhogs, beaver and other fur-bearers
will.	Market Market Comment	MAN
		AND
1	OTHER BIRDS: All other wild birds.	LARGE MAMMALS: Includes big
(Car	such as robins, sparrows, crows,	game and non-game species. For
A ST	pigeons, hawks, owis and upland game birds such as grouse, partndge,	example, deer, bears moose, mountain sheep
4	pheasants	
Auto-Alberta		
<b>東州市大学大学</b>		Mississippoda a residurant A. P.
1 3	OTHER WILDLIFE: Includes all	
# m	remaining wildlife such as butterflies. frogs. snakes, lizards but does	
A STATE OF THE STA	not include fish.	
- Back		
75. C	2	
	FOR USE BY STAT	ISTICS CANADA
. 0 6	0 2 8 8	
Form No 2	Oocket No Survey Date	
Assignment No	S HRO page-	
	ine No.	

Surname

A.	QUESTIONS ABOUT WILDLIFE IN GENER	RAL		
10.	DURING 1987 (JANUARY 1, 1987 TO DECEMBER 31, 1987) DID Y	OU TAKE PART IN	ANY OF THE FOLLOWING	ACTIVITIES?
		Yes	No	
	Read books, magazines or articles on wildlife	10	<sup>2</sup> 0	
	Watch films or T.V. programs on wildlife	.0	<sup>2</sup> O	
	Purchase art, crafts, posters of wildlife	0	<sup>2</sup> O	
	Visit a zoo, game farm, aquanum or museum of natural history	10	²⊖	
1.1_	FOR EACH ACTIVITY LISTED BELOW, CHECK THE CATEGORY THA have participated in any of these activities, please indicate your interest	T BEST DESCRIBES	S YOUR INTEREST IN PART	ICIPATING. (If you
		Great interest in participating	Some interest in participating	No interest in participating
	National and its		10	<sup>1</sup> C
	Watching wildlife		20	30
	Feeding or attracting wildlife	<u>'</u> O	•0	
	Collecting butterflies or other wildlife specimens	'0	20	,0
	Photographing, studying or recording wildlife	'0	°C	,0
	Hunting wildlife	10	<sup>2</sup> O	0
	Trapping for food or fur	'0	<sup>2</sup> O	,0
	Observing, collecting or creating wildlife related art or literature	'O	20	³C
	Being a member of any wildlife related organization	,0	<sup>2</sup> O	_ ³O
	Contributing to an organization which protects endangered wildlife	'0	²O	30
	Contributing to an organization which maintains abundant wildlife	'0	<sup>2</sup> O	30
12	DURING 1987, DID YOU BELONG OR CONTRIBUTE TO ANY WILDLIFE Clubs)  Yes ¹○ No ²○ → Go to Question		ZATION? (Naturalist, Conserv	ration or Sportsmans
13	IN 1987, HOW MUCH DID YOU SPEND ON YOUR MEMBERSHIP FE DONATION(S)?	E(S) OR		1
	Membership (eers) or donation(s) \$	00		
1.5	IN 1987 DID YOU MAINTAIN, IMPROVE OR PURCHASE ANY NATURA TO PROVIDE FOOD OR SHELTER FOR WILDLIFE? By natural areas wooded lots, hedges, marshes, open fields  Yes 'O No 2 O Go to Question	we mean		
15	5. IN 1987, HOW MUCH DID YOU SPEND TO MAINTAIN, IMPR PURCHASE THESE NATURAL AREAS FOR WILDLIFE?		Seven it Minner	
	Maintenance or improvement costs 1 \$	00	0	
	Purchase costs 2 \$	00		

16. PRESENTLY MAINTAINED	, MOST TYPES	OF WILDLI	FE ARE ABUNDA	ANT IN CANADA.	HOW IMPORTANT IS	IT TO YOU THA	T THIS ABUNDANCE BE
		ery contant	Fairty important	Of little importance	Of no importance	- Don't know	
		0	²O.	³€	10	†C	
17. PRESENTLY YOU THAT I	IN CANADA, SO THESE TYPES O	ME TYPES	S OF WILDLIFE A	RE DECLINING IN	NUMBER OR ARE EI	NDANGERED. HO	W IMPORTANT IS IT TO
		ery ortant	Fairty important	Of little importance	Of no importance	Don't know	
497	1	0	<sup>2</sup> O	O <sup>t</sup>	•0	50	
B WILDIT	EE ACTIV	ITIES	ADOUND	VOUD DE	SIDENCE OR	COTTAC	
18. IN 1987, IN (Mark all that	WHICH OF THE apply)	FOLLOWI	NG WILDLIFE AC	CTIVITIES DID YO	U PARTICIPATE ARC	OUND YOUR RES	IDENCE OR COTTAGE?
	Feeding wildlife	e with table	a scraps				'0
	Purchasing or	putting out	special feed for	wildlife			20
	Watching wildfl	fe					30
100	Studying and id	dentitying o	different types of	wildlife			40
				od or shelter for v			-50
	Photographing	wildlife					°O
	None of the ab	ove 'O-	Turn page	and go to Ques	tion 22.		1
19. IN 1987, ON	HOW MANY DIF	FERENT D	AYS DID YOU PA	ARTICIPATE IN TH	HESE ACTIVITIES ARC	OUND YOUR RES	IDENCE OR COTTAGE?
	1 to 9 days	'0		100 to 149 day	rs 50		
	10 to 19 days	<sup>2</sup> O		150 to 199 day	s <sup>6</sup>		
	20 to 49 days	<sup>3</sup> O		200 or more da	ys 'O		
	50 to 99 days	<b>'</b> O					
20. WHAT DID IT for feeders, for	COST YOU TO Dood for wildlife, b	PARTICIPA pirdhouses.	TE IN THESE AC magazines, film,	CTIVITIES AROUN cameras used p	4D YOUR RESIDENCE rimarily for wildlife)	E OR COTTAGE	N 1987? (include costs
	Nothing	O'		\$ 25 to \$ 49	50		
	Under \$5	<sup>2</sup> O		\$ 50 to \$ 99	°O		
	\$ 5 to \$ 9	O <sup>E</sup>		\$100 to \$200	<b>'</b> O		j g
	\$10 to 524	<b>O</b>		Over \$200	<b>°</b> O		
21. WOULD YOU BEEN MORE?	STILL HAVE PA	ARTICIPATE	ED IN THESE AC	CTIVITIES AROU	ND YOUR RESIDENC	E OR COTTAGE	IF YOUR COSTS HAD
	Yes ¹		No <sup>2</sup>				

# C. WILDLIFE ACTIVITIES AWAY FROM YOUR RESIDENCE OR COTTAGE

	TAKEN PRIMA	RILY TO ENCOUNTE	R WILDLIFE		
URING 1987, DID YOU TAKE A O WATCH, FEED, PHOTOGRA			ore than a day) FOF	R WHICH THE P	RIMARY PURPOSE V
Yes 'Q	No	<sup>2</sup> ○ → Go to next p	page and answer Qu	restion 29.	
URING THESE OUTINGS OR T	RIPS, IN WHICH O	F THE FOLLOWING ACT	TVITIES DID YOU P	ARTICIPATE? (	Mark all that apply)
Watching wildlife 1	Pho	tographing wildlife	°C		
Feeding wildlife <sup>2</sup>	Stud	dying and identifying wild	llite *		
HICH OF THE FOLLOWING TO	PES OF WILDLIFE	DID YOU WATCH, FEE	D, PHOTOGRAPH	OR STUDY? (M	ark all that apply)
Waterfowl 1	Lar	ge mammals <sup>4</sup>			
Other birds <sup>2</sup>	Oth	er wildlife 5			
Small mammals <sup>3</sup>					
				America.	
N HOW MANY DIFFERENT DAY inter the number of days in the			JRSTUDY WILDLIF	E WHILE ON TH	ESE OUTINGS OF TR
	Days			Days	
Newloundland	01	Saskato	:hewan	08	
Prince Edward Island	02	Alberta		09	
Nova Scotia	03	British	Columbia	10	
	04	Yukon		.,	
New Brunswick		Northw	est Territories	12	
New Brunswick Quebec	05				
	05				
Quebec	05   08   07   07   07   07   07   07   07	Outside	e Canada	13 1	
Quebec Ontario Manitoba	OT I	I DID YOU SPEND TO W	/ATCH, FEED, PHC	TOGRAPH OR	STUDY WILDLIFE? (
Ouebec Ontario Manitoba  URING THESE OUTINGS OR 1 EXPENditures in the boxes besid	7 FRIPS, HOW MUCH	I DID YOU SPEND TO W at apply. Break down the	VATCH, FEED, PHO	age lours into th	STUDY WILDLIFE? ( ne categories provide
Quebec Ontario Manitoba  URING THESE OUTINGS OR 1	7RIPS, HOW MUCHe the categories that its to operate private	I DID YOU SPEND TO Wat apply. Break down the	VATCH, FEED. PHC costs of any pack: airs, rentals, planes,	age lours into th	ne categories provide
Quebec Ontario Manitoba  URING THESE OUTINGS OR 1 expenditures in the boxes besid	O7 TRIPS, HOW MUCH e the categories that to operate private	I DID YOU SPEND TO Wat apply. Break down the	VATCH, FEED. PHC costs of any pack: airs, rentals, planes,	age tours into the trains, buses,	s categories provide

No 10 A Go To Ovestion 29  18 HOW MUCH MORE WOULD YOU HAVE SPENT BEFORE OECIDING NOT TO TAKE THESE OUTINGS OR TRIPS IN 1987?  \$ 1 to \$ 19 'O \$200 to \$299 'O \$300 to \$399 'O \$500 to more 'O \$100 to \$199 'O \$600 or more 'O \$100 to \$190 to \$100 to \$190 to \$100 to \$	27 WOULD YOU STILL HAV	TAKEN THESE OUTING	S OR TRIPS IF YOUR CO	STS HAD BEEN ME	ORE?
\$ 1 to \$ 19 '\circ \$200 to \$299 \$\circ \$200 to \$299 \$\circ \$200 to \$399 \$\circ \$200 to \$399 \$\circ \$500 to \$99 \$\circ \$500 to \$90 \$\circ \$100 to \$199 \$\circ \$500 to \$90 to \$100 to \$199 \$\circ \$100 to \$199 \$\circ \$100 to \$199 \$\circ \$100 to \$190 to \$100	Yes ¹O	No <sup>2</sup> O	→ Go to Question 29.		
\$ 1 to \$ 19 '\circ \$200 to \$299 \$\circ \$200 to \$299 \$\circ \$200 to \$399 \$\circ \$200 to \$399 \$\circ \$500 to \$99 \$\circ \$500 to \$90 \$\circ \$100 to \$199 \$\circ \$500 to \$90 to \$100 to \$199 \$\circ \$100 to \$199 \$\circ \$100 to \$199 \$\circ \$100 to \$190 to \$100					
\$ 1 to \$ 19 '\circ \$200 to \$299 \$\circ \$200 to \$299 \$\circ \$200 to \$399 \$\circ \$200 to \$399 \$\circ \$500 to \$99 \$\circ \$500 to \$90 \$\circ \$100 to \$199 \$\circ \$500 to \$90 to \$100 to \$199 \$\circ \$100 to \$199 \$\circ \$100 to \$199 \$\circ \$100 to \$190 to \$100	28 HOW MICH MORE MO	I O VOLUMANE COCKE DI	CEORE DECIRING NOT T		
\$ 20 to \$ 49 \( \) \$300 to \$399 \( \) \$50 to \$ 99 \( \) \$50 to \$ 99 \( \) \$400 to \$599 \( \) \$600 or more \( \) \( \) \$800 or more \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \( \) \$800 or more \( \) \( \) \$900 or more \( \) \$900 or more \( \)	ESTITUTE MOCH MORE WOI	ED TOO HAVE SPENT BI	EFORE DECIDING NOT I	O TAKE THESE OU	ITINGS OR TRIPS IN 1987?
\$ 50 to \$ 99 \(^2\) \$ \$100 to \$599 \(^2\) \$ \$100 to \$599 \(^2\) \$ \$100 to \$199 \(^2\) \$ \$600 or more \(^2\) \\  WILDLIFE ENCOUNTERS DURING OTHER OUTINGS OR TRIPS.    WILDLIFE ENCOUNTERS DURING OTHER OUTINGS (for example niking, picnics) OR TAKEN FOR OTHER PURPOSES (for example viscation, business)?    No \(^2\) \to Turn page and go to Question 35.    WHILE ON THESE OTHER OUTINGS OR TRIPS, IN WHICH OF THE FOLLOWING ACTIVITIES DID YOU PARTICIPATE? (Mark all that Watching widdle \(^2\) \to Studying & identifying widdle \(^2\) \to Studying & identifying widdle \(^2\) \to Studying & identifying widdle \(^2\) \to Other birds \(^2\) \to Other birds \(^2\) \to Other birds \(^2\) \to Other birds \(^2\) \to Other widdle	\$ 1 to \$	19 '〇	\$200 to \$299 °C		
WILDLIFE ENCOUNTERS DURING OTHER OUTINGS OR TRIPS  9 IN 1987, DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE DURING OTHER OUTINGS (for example nixing, picnics) OR TAKEN FOR OTHER PURPOSES (for example vacation, business)?  Yes '	\$ 20 to \$	49 20	\$300 to \$399 <sup>6</sup> C		
WILDLIFE ENCOUNTERS DURING OTHER OUTINGS OR TRIPS  9 IN 1987, DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE DURING OTHER OUTINGS (for example niking, picnics) OR TAKEN FOR OTHER PURPOSES (for example vacation, business)?  Yes '\text{No.} Turn page and go to Question 35.}  0 WHILE ON THESE OTHER OUTINGS OR TRIPS, IN WHICH OF THE FOLLOWING ACTIVITIES DID YOU PARTICIPATE? (Mark all that Watching wildlife '\text{O}' Photographing wildlife '\text{O}'  Feeding wildlife '\text{O}' Studying & identifying wildlife '\text{O}'  1. WHILE ON THESE OTHER OUTINGS OR TRIPS, WHICH OF THE FOLLOWING TYPES OF WILDLIFE DID YOU WATCH, FEED, PHOTOGOR STUDY? (Mark all that apopt)  Waterflow! '\text{O} Large mammals '\text{O}'  Other birds '\text{O} Other wildlife '\text{O}'  Small mammals '\text{O}'  1 to 9 days '\text{O} 150 to 199 days '\text{O}  20 ON HOW MANY DIFFERENT DAYS DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OUT OR TRIPS?  1 to 9 days '\text{O} 150 to 199 days '\text{O}  20 to 49 days '\text{O} 200 or more days '\text{O}  50 to 99 days '\text{O}  3. HOW MUCH EXTRA MONEY DID IT COST YOU TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OUT OR TRIPS?  Nothing '\text{O} \$25 to \$49 \text{O} \text{O}  Under \$5 \text{O} \$5 to \$9 \text{O} \$5 to \$9 \text{O} \$5 to \$5 9 \text{O}	\$ 50 to \$	99 1	\$400 to \$599 'C		
9 IN 1987. DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE DURING OTHER OUTINGS (for example niking, picnics) OR TAKEN FOR OTHER PURPOSES (for example vacation, business)?  Yes 'O No 2 Turn page and go to Question 35.  No 2 Turn page and go to Question 35.  O WHILE ON THESE OTHER OUTINGS OR TRIPS, IN WHICH OF THE FOLLOWING ACTIVITIES DID YOU PARTICIPATE? (Mark all that Watching wildlife 'O Studying & identifying wildlife 'O OR STUDY? (Mark all that apply)  Waterflowl 'O Large mammals 'O Other wildlife 'O Other wildlife 'O Small mammals 'O Other birds 'O Other wildlife 'O Other wildlife 'O Small mammals 'O Other birds 'O Other wildlife 'O OTHER OUT OR TRIPS?  1 to 9 days 'O 100 to 149 days 'O 100 to 149 days 'O 100 to 199 days 'O 150	\$100 to \$	199 4	\$600 or more *		
Ves ' No 2 Turn page and go to Question 35.    No 2 Turn page and go to Question 35.	WILDL	E ENCOUNTERS DU	RING OTHER OUTING	GS OR TRIPS	
Ves ' No 2 Turn page and go to Question 35.    No 2 Turn page and go to Question 35.	26 IN 1097 OIG VOLUMATO				
0. WHILE ON THESE OTHER OUTINGS OR TRIPS, IN WHICH OF THE FOLLOWING ACTIVITIES DID YOU PARTICIPATE? [Mark all that Watching wildlife 10 Photographing wildlife 10 Studying & identifying wildlife 10 OR STUDY? (Mark all that apply)  Waterfowl 10 Large mammals 10 Other wildlife 10 Small mammals 10 Other birds 10 Other wildlife 10 Small mammals 10 Other wildlife 10 Small mammals 10 Other wildlife 10 Other wildlife 10 Other wildlife 10 OTHERS?  1 to 9 days 10 100 to 149 days 10 100 to 149 days 10 100 to 199 days 10 100 to 190 days 10 100 to 199 days 10 1	TAKEN FOR OTHER PUR	POSES (for example vaca	thon, business)?	NG OTHER OUTING	S (for example hiking, picnics) OR TRIP:
Watching wildlife 'O Photographing wildlife 'O Studying & Identifying wildlife 'O  1. WHILE ON THESE OTHER OUTINGS OR TRIPS, WHICH OF THE FOLLOWING TYPES OF WILDLIFE DID YOU WATCH, FEED, PHOTOGOR STUDY? (Mark all that apply)  Waterfowl 'O Large mammals 'O Other birds 'O Other wildlife 'O Small mammals 'O Other birds 'O Other wildlife 'O Small mammals 'O Other wildlife 'O OR TRIPS?  1 to 9 days 'O 100 to 149 days 'O 100 to 149 days 'O 10 to 19 days 'O 10 to 19 days 'O 200 or more days 'O 50 to 99 days 'O 50 to \$99 days 'O 50 to \$90 da	Yes 'Q	No <sup>2</sup> O	Turn page and go to	Question 35.	
Watching wildlife 'O Photographing wildlife 'O Studying & Identifying wildlife 'O  1. WHILE ON THESE OTHER OUTINGS OR TRIPS, WHICH OF THE FOLLOWING TYPES OF WILDLIFE DID YOU WATCH, FEED, PHOTOGOR STUDY? (Mark all that apply)  Waterfowl 'O Large mammals 'O Other birds 'O Other wildlife 'O Small mammals 'O Other birds 'O Other wildlife 'O Small mammals 'O Other wildlife 'O OR TRIPS?  1 to 9 days 'O 100 to 149 days 'O 100 to 149 days 'O 10 to 19 days 'O 10 to 19 days 'O 200 or more days 'O 50 to 99 days 'O 50 to \$99 days 'O 50 to \$90 da					
Watching wildlife 'O Photographing wildlife 'O Studying & Identifying wildlife 'O  1. WHILE ON THESE OTHER OUTINGS OR TRIPS, WHICH OF THE FOLLOWING TYPES OF WILDLIFE DID YOU WATCH, FEED, PHOTOGOR STUDY? (Mark all that apply)  Waterfowl 'O Large mammals 'O Other birds 'O Other wildlife 'O Small mammals 'O Other birds 'O Other wildlife 'O Small mammals 'O Other wildlife 'O OR TRIPS?  1 to 9 days 'O 100 to 149 days 'O 100 to 149 days 'O 10 to 19 days 'O 10 to 19 days 'O 200 or more days 'O 50 to 99 days 'O 50 to \$99 days 'O 50 to \$90 da	*				
Feeding wildlife <sup>2</sup> Studying & identifying wildlife <sup>4</sup> 1. WHILE ON THESE OTHER OUTINGS OR TRIPS, WHICH OF THE FOLLOWING TYPES OF WILDLIFE DID YOU WATCH, FEED, PHOTOGOR STUDY? (Mark all that apply)  Waterfowl ' Large mammals <sup>4</sup> Other wildlife <sup>5</sup> Small mammals <sup>3</sup> Other wildlife <sup>5</sup> Small mammals <sup>3</sup> Other wildlife <sup>5</sup> Other wildlife <sup>5</sup> OTHER OUTINGS ON THE PROPERTY OF THE POUT OR TRIPS?  1 to 9 days <sup>1</sup> 100 to 149 days <sup>3</sup> 150 to 199 days <sup>4</sup> 200 or more days <sup>7</sup> 20 to 49 days <sup>3</sup> 200 or more days <sup>7</sup> 30 to 99 days <sup>4</sup> 30 OR TRIPS?  Nothing ' S 25 to \$ 49 <sup>3</sup> Under \$5 <sup>2</sup> \$ 50 to \$ 99 <sup>4</sup> \$ 50 to \$ 99 <sup>4</sup> \$ 50 to \$ 20 <sup>4</sup> OWER \$ 50 to \$ 24 <sup>4</sup> OWER \$ 50 to \$ 20 <sup>4</sup> OW	30. WHILE ON THESE OTHER	OUTINGS OR TRIPS, IN V	WHICH OF THE FOLLOWI	NG ACTIVITIES DID	YOU PARTICIPATE? (Mark all that apply
1. WHILE ON THESE OTHER OUTINGS OR TRIPS, WHICH OF THE FOLLOWING TYPES OF WILDLIFE DID YOU WATCH. FEED, PHOTOGOR STUDY? (Mark all that apply)  Waterlowd 'O Large mammals *O  Other birds *O Other wildlife *O  Small mammals *O  2. ON HOW MANY DIFFERENT DAYS DID YOU WATCH. FEED. PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OU OR TRIPS?  1 to 9 days *O 100 to 149 days *O 150 to 199 days *O 100 to 199 days *O 150 to 199 days *O	Watching	ildlife 'O	Photographing wildli	le <sup>3</sup> O	
Waterfowl 'O Large mammals *O Other birds 2*O Other wildlife 5*O  Small mammals 3*O  2. ON HOW MANY DIFFERENT DAYS DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OU OR TRIPS?  1 10 9 days 1*O 100 to 149 days 5*O 150 to 199 days 5*O 200 or more days 3*O 200 or more days 3*O 50 to 99 days 4*O  3. HOW MUCH EXTRA MONEY DID IT COST YOU TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OU OR TRIPS?  Nothing 1*O \$ 25 to \$ 49 3*O Under \$5 2*O \$ 50 to \$ 99 5*O \$ 100 to \$200 7*O \$	Feeding w	dife <sup>2</sup>	Studying & identifying	g wildlife <sup>4</sup>	
Waterfowl 'O Large mammals *O Other birds 2*O Other wildlife 5*O  Small mammals 3*O  2. ON HOW MANY DIFFERENT DAYS DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OU OR TRIPS?  1 10 9 days 1*O 100 to 149 days 5*O 150 to 199 days 5*O 200 or more days 3*O 200 or more days 3*O 50 to 99 days 4*O  3. HOW MUCH EXTRA MONEY DID IT COST YOU TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OU OR TRIPS?  Nothing 1*O \$ 25 to \$ 49 3*O Under \$5 2*O \$ 50 to \$ 99 5*O \$ 100 to \$200 7*O \$					
Other birds 2 Other wildlife 5 Other Out 5 Other Wildlife While On These Other Out 5 Other Study Wildlife While Out 5	J1. WHILE ON THESE OTHER OR STUDY? (Mark all that	OUTINGS OR TRIPS, WHIC apply)	CH OF THE FOLLOWING T	YPES OF WILDLIFE	DID YOU WATCH, FEED, PHOTOGRAPH
Small mammals 30  2. ON HOW MANY DIFFERENT DAYS DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OUT OR TRIPS?  1 to 9 days 10 100 to 149 days 10 150 to 199 days 10 200 or more days 10 200 or more days 10 50 to 99 days 10 200 or more days 10 3. HOW MUCH EXTRA MONEY DID IT COST YOU TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OUT OR TRIPS?  Nothing 10 \$ 25 to \$ 49 30 \$ 50 to \$ 99 90 \$ 5 to \$ 9 30 \$ 50 to \$ 99 90 \$ 50 to \$ 200 70 \$ 500 to \$ 200 70 \$ 500 to \$ 200 70 \$ 500 to \$ 200 90 \$ 500 \$ 500 to \$ 200 90 \$ 500	Waterlowl	'0	Large mammals *		
2. ON HOW MANY DIFFERENT DAYS DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OUT OR TRIPS?  1 to 9 days 1 150 to 149 days 2 150 to 199 days 4 200 or more days 7 50 to 99 days 4 200 or more days 7 50 to 99 days 4 200 or more days 5 50 to 99 days 5 50 to 99 days 5 50 to 99 days 6 25 to \$ 49 days 5 25 to \$ 49 days 6 200 or more days 7 50 to 99 days 6 25 to \$ 49 days 6 200 or more days 7 50 to 99 days 6 25 to \$ 49 days 6 200 or more days 7 50 to 99 days 6 25 to \$ 49 days 6 200 or more days 7 50 to 99 days 6 25 to \$ 49 days 6 200 or more days 7 50 to 99 days 6 25 to \$ 49 days 6 200 or more days 7 50 to 99 days 6 25 to \$ 49 days 6 200 or more days 7 50 to 90 days 6 200 or more days 7 50 to 90 days 6 200 or more days 7 50 to 90 days 6 200 or more days 7 50 to 90 days 6 200 or more days 7 50 to 90 days 6 200 or more days 7 50 to 90 days 6 200 or more days 7 50 to 90 days 7 50 to 90 days 6 200 or more days 7 50 to 90 days 7 50 to 90	Other birds	20	Other wildlife 5		
1 to 9 days 1 100 to 149 days 5 10 to 199 days 5 200 or more days 7 200 or more days 7 30 to 99 days 6 30 to 99 days 7 30 to 90 days 6 30 to 90 days 7 30 to 90 days 8 days 8 days 9 days	Small mam	nals <sup>3</sup>			
1 to 9 days 1 100 to 149 days 5 10 to 199 days 5 200 or more days 7 200 or more days 7 30 to 99 days 6 30 to 99 days 7 30 to 90 days 6 30 to 90 days 7 30 to 90 days 8 days 8 days 9 days	2 0111011111111111111111111111111111111				
10 to 19 days <sup>2</sup>	OR TRIPS?	IT DAYS DID YOU WATCH	H. FEED, PHOTOGRAPH	OR STUDY WILDLIF	E WHILE ON THESE OTHER OUTING
10 to 19 days <sup>2</sup>	1 to 9 c	ays 'O	100 to 149 days	°O	
20 to 49 days <sup>3</sup> C 200 or more days <sup>7</sup> C  50 to 99 days <sup>4</sup> C  3. HOW MUCH EXTRA MONEY DID IT COST YOU TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OU OR TRIPS?  Nothing <sup>1</sup> C \$ 25 to \$ 49 <sup>3</sup> C  Under \$5 <sup>2</sup> C \$ 50 to \$ 99 <sup>6</sup> C  \$ 5 to \$ 9 <sup>3</sup> C \$100 to \$200 <sup>7</sup> C  \$10 to \$24 <sup>4</sup> C Over \$200 <sup>6</sup> C	10 to 19 c	ays <sup>2</sup> ()		10	
\$0 to 99 days *\(\)  3. HOW MUCH EXTRA MONEY DID IT COST YOU TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OU OR TRIPS?  Nothing '\(\) \$ 25 to \$ 49 \(^{5}\)  Under \$5 \(^{2}\) \$ 50 to \$ 99 \(^{6}\)  \$ 5 to \$ 9 \(^{3}\) \$ \$100 to \$200 \(^{7}\)  \$ 10 to \$24 \(^{6}\) Over \$200 \(^{6}\)	20 to 49 d	avs <sup>3</sup> C		iO	
3. HOW MUCH EXTRA MONEY DID IT COST YOU TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OU OR TRIPS?  Nothing 'C \$ 25 to \$ 49 5 C  Under \$5 2 C \$ 50 to \$ 99 6 C  \$ 5 to \$ 9 3 C \$ 100 to \$200 7 C  \$10 to \$24 6 C Over \$200 6 C	50 to 99 d	avs 40			
Nothing ' \$ 25 to \$ 49 5 Under \$5 2 \$ 50 to \$ 99 6 \$ \$ 5 to \$ 9 3 \$ \$100 to \$200 7 \$ \$ 10 to \$24 6 \$ Over \$200 6 \$ \$					
Nothing 1 \$ 25 to \$ 49 5 Under \$5 2 \$ 50 to \$ 99 6 \$ \$ 5 to \$ 9 3 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	3. HOW MUCH EXTRA MONE OR TRIPS?	Y DID IT COST YOU TO WA	ATCH, FEED, PHOTOGRAP	H OR STUDY WILDL	IFE WHILE ON THESE OTHER OUTING
Under \$5 = 2 \$ 50 to \$ 99 6 \$ \$ 5 to \$ 9 3 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$					
\$ 5 to \$ 9 <sup>3</sup> \$100 to \$200 <sup>7</sup> S10 to \$24 <sup>4</sup> Over \$200 <sup>6</sup>		10			
\$10 to \$24 * Over \$200 * Over \$200			\$ 50 to \$ 99 °		
			\$100 to \$200 'C		
1. IN GENERAL, WHAT EFFECT DID ENCOUNTERING WILDLIFE HAVE ON THESE OTHER OUTINGS OR TRIPS?	\$10 to \$24	<b>*</b> O	Over \$200 °C		
	4. IN GENERAL, WHAT EFF	CT DID ENCOUNTERING	WILDLIFE HAVE ON THE	ESE OTHER OUTIN	GS OR TRIPS?
Increased Increased Decreased Decreased	increased	Increased		Decreased	Decreased
enjoyment enjoyment Made no enjoyment enjoyment very much somewhat difference somewhat very much	enjoyment	enjoyment		enjoyment	enjoyment
O* O* O*					

). HUNTING WILDLIFE  5. HAVE YOU EVER HUNTED WILDLIFE?	
Yes ¹Ç No ²C → Go to Qu	estion 78 on page 8.
6. DURING 1987. DID YOU HUNT WILDLIFE?  Yes □ No □ → Go to Qu	estion 78 on page 8
	Onys
7. IN TOTAL, ON HOW MANY DIFFERENT DAYS DID YOU HUNT V	VILDLIFE IN 1987?
7 IN TOTAL, ON HOW MANY DIPPERENT DAYS DID YOU HUNT V	GO to Question 3a.
A.S.	
Marie	And the advances of the Atlantage of the
Chamber of the first and the second s	
8 DURING 1987, DID YOU HUNT WATERFOWL?	48 DURING 1987 DID YOU HUNT OTHER BIRCS?
Yes 'O No <sup>2</sup> → Go to question 48.	Yes O No C → Go to question 58.
9. ENTER THE NUMBER OF DAYS BESIDE THE LOCATION(S)	49. ENTER THE NUMBER OF DAYS BESIDE THE LOCATION(S)
WHERE YOU HUNTED WATERFOWL IN 1987 Days Days	WHERE YOU HUNTED OTHER BIRDS IN 1987.  Days  Days
Newfoundland of L Saskatchewan of L	Newfoundland on Saskatchewan ce
P.E.I. 02 Alberta 09	P.E.I. 02 L. Alberta 09
Nova Scotia 03 British Columbia 10	Nova Scotia 03 British Columbia 10
New Brunswick 04 Yukon 11	New Brunswick 04 Yukon 11
Quebec os N.W.T. 12	Quebec 05 N.W.T. 12
Ontario 06	Ontario 06
Manitoba 07 Outside Canada 13	Manitoba 07  Outside Canada 3
O. DID YOU HARVEST ANY WATERFOWL?  Yes 'O No 2O	50. DID YOU HARVEST ANY OTHER BIRDS? Yes 1 No 2 No
HOW MUCH DID YOU SPEND ON TRANSPORTATION TO HUNT WATERFOWL IN 1987? (See definitions on page 7)	51. HOW MUCH DID YOU SPENO ON TRANSPORTATION TO HUNT OTHER BIRDS IN 1987? (See definitions on page 7)
\$ 00	\$ .00
2. HOW MUCH DID YOU SPEND ON ACCOMMODATIONS TO HUNT WATERFOWL IN 1987? (See definition)	52. HOW MUCH DID YOU SPEND ON ACCOMMODATIONS TO HUNT OTHER BIRDS IN 1987? (See definition)
\$ 00	\$ 00
3. HOW MUCH DID YOU SPEND ON FOOD WHILE HUNTING	53. HOW MUCH DID YOU SPEND ON FOOD WHILE HUNTING OTHER
WATERFOWL IN 1987? (See definition)	BIRDS IN 1987? (See definition)
4 IN 1987, HOW MUCH DID YOU SPEND ON EQUIPMENT USED PRIMARILY FOR HUNTING WATERFOWL? (See definition)	54. IN 1987, HOW MUCH DID YOU SPEND ON EQUIPMENT USED PRIMARILY FOR HUNTING OTHER BIRDS? (See definition)
\$ 00	\$ .00
5 HOW MUCH DID YOU SPEND ON AMMUNITION, REPAIRS, LICENCE FEES AND OTHER ITEMS FOR HUNTING WATER- FOWL IN 1987? (See definition)	55. HOW MUCH DID YOU SPEND ON AMMUNITION, REPAIRS LICENCE FEES AND OTHER ITEMS FOR HUNTING OTHER BIRDS IN 1987? (See definition)
\$ 00	\$ 00
6 WOULD YOU STILL HAVE HUNTED WATERFOWL IF YOUR COSTS HAD BEEN MORE?	56. WOULD YOU STILL HAVE HUNTED OTHER BIRDS IF YOUR COSTS HAD BEEN MORE?
Yes 'O No <sup>2</sup> O → Go to Question 48.	Yes ¹○ No ²○ → Go to question 58
7 HOW MUCH MORE WOULD YOU HAVE SPENT BEFORE DECIDING NOT TO HUNT WATERFOWL IN 1987?	57 HOW MUCH MORE WOULD YOU HAVE SPENT BEFORE DECIDING NOT TO HUNT OTHER BIRDS IN 1987?
	\$ 1 to \$ 49 '\cap \$200 to \$399 '\cap \tag{\tag{\tag{\tag{\tag{\tag{\tag{
\$ 1 to \$ 49 '\circ\ \$200 to \$399 '\circ\ \$50 to \$ 99 '\circ\ \$400 to \$799 '\circ\	\$ 50 to \$ 99 <sup>2</sup> \$400 to \$799 <sup>5</sup>

### DEFINITIONS FOR QUESTIONS ON YOUR EXPENSES

NOTE. Include the costs for any of these items only once if they were used for more than one type of hunting in 1987. Break down the costs of any hunting packages into the categories provided.

TRANSPORTATION: Include costs to operate private vehicles, gas, oil, repairs, rentals, planes, trains, buses, ferries

ACCOMMODATIONS. Include cottages, cabins, lodges, motels and campgrounds

FOOD include grocenes, beverages, restaurant meais

EQUIPMENT: Equipment which was purchased primarily for hunting. Include guns and accessories, game carriers, calls, dogs, decoys, camping gear, boats, trailers, snowmobiles, ATVs, trucks, clothing, footwear, luggage

01	HER ITEMS. Includ	de ammunition.	books, g	uide fees.	dog maintena	ance.	equipment rentals ar	nd repairs, lici	ence fees	. land use	fees
										100	
									CENTRAL PROPERTY.		
		20							1		
		1							1		
		A COLON	7.						1		
	war of the 1941 M. Manhatan		- de l'andre de	HACKOANI	2 M11 N 1		TAUL Mindaline	. Desire		Name and V	Reducers
	THE REAL PROPERTY.					100	The state of the s		la la como	CALL THE	
58	DUFING 1987. DI	D YOU HUNT	SMALL N	MAMMALS	?	68	DURING 1987 01	D YOU HUNT	LARGE	MAMMALS	?
	Yes 'Q	No 2	$\bigcirc$	Go to qu	uestion 68.		Yes 'Q	No	<sup>2</sup> C	Go to q	uestion 78.
	+						+				
59	ENTER THE NUM	BER OF DAY	S BESIDE	THE LO	CATION(S)	69	ENTER THE NUM	ISER OF DA	VS BESI	SE THE LO	CATIONICS
	WHERE YOU HUN	TED SMALL	MAMMALS	IN 1987			WHERE YOU HUN	TED LARGE	MAMMAI	S IN 1987	CATIONS
		Days			Days			Days			Days
	Newfoundland	01	Saskatch	newan	08		Newfoundland	21	Saskato	hewan	CB
	P.E.I.		A Dec. of								
	P.G.I.	02	Alberta		09		P.E.I.	02	Alberta		09
	Nova Scotia	03	British C	olumbia	10		Nova Scotia	03	British C	Columbia	10
	New Brunswick	04	Yukon		11		New Brunswick	04	Yukon		11
	Quenec	05	N.W.T.		13		Quebec	os	N.W.T.	_	12
	Ontario	>6					Ontario	06			
	Manitoba	07	Outside	Canada	13		Manitoba	07	Outside	Canada	13
60.	DID YOU HARVES	T ANY SMALL	MAMMA	LS?		70.	DID YOU HARVES	T ANY LARG	E MAMM	ALS?	
	Yes 'O	No <sup>2</sup>					Yes 'O	No <sup>2</sup>			
61.	HOW MUCH DID YOU SMALL MAMMALS					71.	HOW MUCH DID YOU LARGE MAMMALS				
	s		.00				s	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	00	non on pag	0 1 /
62	HOW MUCH DIO	VOLL CRENO	011 466						1		
02.	HOW MUCH DID HUNT SMALL MAN	MMALS IN 19	37? (See	definition)	TIONS TO	72.	HOW MUCH DID YOU LARGE MAMMALS	DU SPEND ON IN 19872 IS	ACCOM	MODATION	IS TO HUNT
	s		.00			-				(10/1)	
							, [		00		
63.	HOW MUCH DID SMALL MAMMALS				HUNTING	73.	HOW MUCH DID YOU MAMMALS IN 198	OU SPEND ON	FOOD W	HILE HUNT	ING LARGE
	s		00				5		00		
					AUT IT		" (		00		
64.	IN 1987, HOW MU PRIMARILY FOR H	CH DID YOU S	PEND ON	EQUIPM	ENT USED	74.	IN 1987, HOW MU	ICH DID YOU	SPEND (	ON EQUIPM	IENT USED
	- I	DIALITACI DIALAE		4F2, (266	definition)		PRIMARILY FOR H	UNTING LAR	GE MAM	MALS? (Se	e definition)
	\$ [		.00				\$ [		00		
65.	HOW MUCH DID	YOU SPEND	ON AMM	UNITION,	REPAIRS.	75.	HOW MUCH DID	YOU SPEND	ON AM	MUNITION	REPAIRS
	MAMMALS IN 198	NO OTHER IT	EMS FOR	HUNTIN	G SMALL		LICENCE FEES A	NO OTHER	TEMS F	OR HUNTI	NG LARGE
		/ (See denin					MAMMALS IN 198	72 (See defin	ition)		
	\$ [		.00				\$		00		
66.	WOULD YOU STILL	HAVE HUNTE	D SMALL	MAMMAL:	SIFYOUR	76.	WOULD YOU STILL	HAVE HUNT	ED LARG	E MAMMAI	SIEVOUR
	COSTS HAD BEEN				4		COSTS HAD BEEN	MORE?			
	Yes O	No <sup>2</sup> (			estion 68.		Yes 'O	No	°O—	Go to qu	uestion 78.
67.	HOW MUCH MOF DECIDING NOT TO	HUNT SMALL	OU HAV	E SPENT	BEFORE	77.	HOW MUCH MOR	RE WOULD	YOU HA	VE SPEN	T BEFORE
	\$ 1 to \$ 49 '			\$399 4C			DECIDING NOT TO			ALS IN 19 0 \$399 4	
	\$ 50 to \$ 99 2			\$799 5			\$ 50 to \$ 99 20			o \$799 5	
	\$100 to \$199 °C	)	\$800 or	more °			\$100 to \$199 3	)		or more	5
					-				-		
	G	o to question	68.					Turn Page.			

	- 8 -
78. DID YOU FISH FOR SPORT IN CANADA IN	1987?
Yes 'O	No <sup>2</sup> → Go to question 80.
79. ENTER THE NUMBER OF DAYS YOU SPE FISHED.	INT FISHING FOR SPORT IN CANADA IN 1987 BESIDE THE LOCATION(S) WHERE YOU
	Days
Freshwater: Lakes, rivers, streams	
Pacific Ocean	
Atlantic Ocean	
80. DURING 1987, DID YOU DO ANY TRAPPIN	IG OF SMALL MAMMALS?
Yes 'Q	No <sup>2</sup> Go to question 84.
81. WHAT WAS THE MAIN REASON YOU TRAF	PPED SMALL MAMMALS? (Mark one only.)
Food	Property protection *
Income 20	Sport or recreation 50
Fur for your own use 3	Other reason 6
GO IN TOTAL ON HOW MANY DISCEPTATION	YS DID YOU TRAP SMALL MAMMALS IN 1987?
BZ. IN TOTAL, ON HOW MANY DIFFERENT DA	Dake 42 DID AGG LIME SWAFE WAWWATZ IN 1801.
83. HOW MUCH WOULD IT COST TO REPLAC	E ALL THE TRAPS YOU OWN FOR SMALL MAMMALS?
Under \$50	\$500 to \$ 749 10
\$ 50 to \$249 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	\$750 to \$1000 ° More than \$1000 °
3230 10 3443	World thair \$1000
84. IN 1987, WHAT WAS YOUR TOTAL INCOM- other sources)	ME BEFORE DEDUCTIONS? (include income you received from wages, salaries, and all
No income	\$20,000 to \$29,999 5
Less than \$5,000 <sup>2</sup>	\$30,000 to \$39,999 °O
\$ 5,000 to \$ 9,999 <sup>3</sup> \$10,000 to \$19,999 <sup>4</sup>	\$40,000 or more ' (
0,0,000 to 0,000	
85. DO YOU HAVE ANY ADDITIONAL COMMEN	NTS?
	Service Control of the Control of th

THANK YOU FOR YOUR COOPERATION. PLEASE RETURN YOUR QUESTIONNAIRE TODAY.

#### SPECIAL SURVEYS GROUP PROGRAMS

SURVEY MONTH:

February 1988

TITLE :

Absence from Work

SPONSOR:

Actuarial Services Branch of Employment and Immigration

SURVEY METHOD:

Personal / Telephone Interview

SAMPLE SIZE :

Rotation groups 1, 3 and 4

OBJECTIVES :

These supplementary questions are designed to obtain information about the absences from work by paid employees during 1987; which were due to illness, accident or pregnancy and about the financial compensation they received as a result. The data from this survey provide government departments with important information on the amount of time lost from work by Canadians due to health reasons. This information also contributes to the development of programs to assist these who experience such absences.

PROJECT MANAGER:

Denis Lefebyre

MICRODATA:

Yes

Price \$ 300

No

5 6 Ma	7
JANUARY'S SUPPLEMENTARY QUESTIONS LARGELY CONCERNED 'S WORK LAST YEAR, WHILE THE FOLLOWING QUESTIONS CONCERN 'S ABSENCES FROM WORK DUE TO ILLNESS, ACCIDENT OR PREGNANCY, DURING THE LAST YEAR THAT IS, FROM JANUARY 1, 1987 TO DECEMBER 31, 1987	17 WHAT KIND OF FINANCIAL COMPENSATION DIDRECEIVE FOR THIS LAST PERIOD? (Mark all type of compensation received)  None  Go to 18  ARE THERE ANY OTHERS? (Mark all other types of compensation received)
10 DID WORK AS A PAID EMPLOYEE IN 1987?	For each type of compensation received, ask HOW MANY WEEKS OF DID RECEIVE?
Yes O No Go 10 24	(Repeat type of compensation)  Unemployment Insurance
11 HOW MANY HOURS A WEEK DID USUALLY WORK AS A PAID EMPLOYEE?	Workers' Compensation
No. of hours	Group Insurance 4 5
	Full pay from employer
12 AT ANY TIME IN 1987 DIDLEAVE A JOB, OR WASABSENT FROM WORK FOR 2 OR MORE CONSECUTIVE WEEKS BECAUSE OF HIS/HER OWN ILLNESS, ACCIDENT OR PREGNANCY?	Partial pay from employer
Yes No Go to 23	Other financial compensation
13 HOW MANY SEPARATE PERIODS OF 2 OR MORE	18 INTERVIEWER CHECK ITEM:  If 0 2 or more periods in 13 . Go to 19
CONSECUTIVE WEEKS WAS UNABLE TO WORK DUE TO HIS/HER OWN ILLNESS, ACCIDENT OR PREGNANCY? DO NOT INCLUDE ANY PERIOD	Otherwise Go to 22
No. of periods    If none, enter 00, and go to 23	19 THE FIRST QUESTIONS ASKED ABOUT'S LAST ABSENCE. THE NEXT 2 QUESTIONS CONCERN THE ABSENCE BEFORE THAT.
	20 WAS THIS PREVIOUS PERIOD OF ABSENCE DUE TO ILLNESS, DUE TO ACCIDENT OR DUE TO
14 OF THESE PERIODS, WAS THE LAST PERIOD DUE TO ILLNESS, DUE TO ACCIDENT OR DUE TO PREGNANCY?    Illness   Accident   Pregnancy	PREGNANCY?  Maness Accident Pregnancy  2 4
¹O ²O ⁴O	21 HOW MANY CONSECUTIVE WEEKS WAS THIS
15 HOW MANY CONSECUTIVE WEEKS WAS THIS LAST ABSENCE FROM BEGINNING TO END?	PREVIOUS ABSENCE?  No of weeks
No. of weeks	22 WITHOUT INCLUDING ABSENCES OF 2 OR MORE CONSECUTIVE WEEKS DUE TO'S OWN ILLNES ACCIDENT OR PREGNANCY, HOW MANY WEEKS
²O	1987 WAS A PAID EMPLOYEE? No of weeks Go to 24
Absence not ended Go to 16	23 HOW MANY WEEKS IN 1987 WASA PAID EMPLOYEE?
16 UP TO THE END OF LAST WEEK, HOW MANY	No of weeks
WEEKS HASBEEN CONTINUOUSLY ABSENT FROM WORK?	24 INTERVIEW:
No. of weeks	Proxy Non-proxy  O 2
\dagger	See over for additional NOTES
	2
	»

13.	The Shelter Cost Survey is being conducted in order to a major part of the household budget. I would like dwelling.	o obtain information of to ask some question	on expenditures related to housing, ons about your expenses for this			
14.	How many months did your household occupy this dwelling in 1987?					
	IF 00 → GO TO 18					
15.	Keep in mind that the following questions apply to contact are not included in the rent. You should exclude a					
	How much was spent on	Check if expenditure	S Total Cost			
	Parking at place of residence?	1 0	<u>                                      </u>			
	• Electricity?	2 0	S           00			
	Other fuels for heating and cooking?	3 0	S           00			
	• Water?		S           00			
	Repairs and maintenance on the rented dwelling?	5 0	S           00			
	Tenant's insurance?	6 0	S			
17.	Was there any person in the household last year rexpenses and is no longer a member?  Yes 1	this person contribute	nousehold descend from any of the			
	ТОИ	ES				
99	Item no					
99		99 1				
		1 1 1 1				
99	Item no	99 Item no				

19.	The Shelter Cost Survey is being conducted in order to obtain information on expenditures related to housing, a major part of the household budget. I would like to ask some questions about your expenses for this dwelling.					
20.	Is there a first mortgage on this dwelling?	26. is there a second mortgage on this dwelling?	32. Is there another loan that was used to pay for this dwelling or for additions, renovations, repairs and maintenance?	37. Is there another loan that was used to pay for this dwelling or for additions, renovations, repairs and maintenance?		
	Yes 19 No 20	Yes 10 No 20	Yes 19 No 20	Yes 10 No 20		
	Go to 32	Go to 32	Go to 42	Go to 42		
21.	What is the amount of the regular payments?	27. What is the amount of the regular payments?	33. What is the amount of the regular payments?	38. What is the amount of the regular payments?		
	<u>[\$]</u> 00	[5]]]]00	S       00	S 00		
22.	Are these payments made	28. Are these payments made	34. Are these payments made	39. Are these payments made		
	monthly?	monthly?	monthly?	monthly?		
	weekly? 2 O	weekly? 2 O	weekly? 2 O	weekly? 2 O		
	every two weeks? 3 ○	every two weeks? 3	every two weeks? 3	every two weeks? 30		
	at other intervals? 4 (specify)	at other intervals? 4 () (specify)	at other intervals? 4 (specify)	at other intervals? 4 (specify)		
23.	Do these payments include property taxes?	29. Do these payments include property taxes?				
	Yes 50	Yes 5O				
	No 60	No 60				
24.	What is the balance outstanding at this time?	30. What is the balance outstanding at this time?	35. What is the balance outstanding at this time?	40. What is the balance outstanding at this time?		
	5 1 1 1 00	S       00	\$       00	S 00		
25.	INTERVIEWER	31. INTERVIEWER	36. INTERVIEWER	41. INTERVIEWER		
	If the respondent can only provide an estimate of the amount outstanding on a different date, record the amount above and report the date to which it applies	If the respondent can only provide an estimate of the amount outstanding on a different date, record the amount above and report the date to which it applies	If the respondent can only provide an estimate of the amount outstanding on a different date, record the amount above and report the date to which it applies	If the respondent can only provide an estimate of the amount outstanding on a different date, record the amount above and report the date to which it applies		
	month year 26	month year 32	month year 37	month year 42		

12	What were the total property taxes on this dwe	elling in 19872				
42.	(include special service charges and local imp					
	<u>[s                                     </u>					
43.	3. For how much would this dwelling sell today?					
	<u>s</u>       00					
44.	How many months was this dwelling owned a	ind occupied by a mem	ber of this household in 1987?			
	// 00 → Go to 57					
45.	When answering the following series of quest the months you have just re you live.	stions about home-own eported. Only include t	er costs, keep in mind that they apply to those expenditures for the home in which			
46.	What was the total amount paid in 1987 for h	nome-owner's insurance	e?			
47	S 00	2				
47.	Yes 1 O Go to 48					
	No 2 O Go to 50					
48.	What was the total cost of the condominium of	charges?				
	<u>          00</u>					
49.	Did these condominium charges include					
	• Taxes?	Yes 1 O	No <sup>2</sup> O			
	• Heat?	Yes <sup>3</sup> O	No 4 O			
	• Electricity?	Yes <sup>5</sup> 🔾	No 6 O			
	• Water?	Yes <sup>7</sup> 🔘	No 8 O			
50.	What were the total expenses in 1987 for					
		Check if expenditure	\$ Total Cost			
	Water and sewage?	10	\$       00			
	Electricity (include rental charges)?	2 🔿	\$       00			
H	Piped gas (include any rental charges such as for hot water heaters)?	3 🔿	<u>          00</u>			
	Fuel oil and other liquid fuel?	4 🔘	\$ 00			
	Other fuels (such as bottled gas, stove and fireplace wood, coal, charcoal, etc.)?	5 🔿	[5]]]]00			

51. Were there expenditures in 1987 for the addition of		What was the total cost of work contracted out? (Excluding the cost of any materials which you purchased separately)	How much were materials which you purchased?
A garage or car port?	01 0	1 [ 5 ] ] ] ] 00	2 [5]     00
	95 03 🔾	3 [ \$ ] ] ] 00	4 [5]       00
3	es 05 O	5 [5] ] ] ] 00	6 [ 5 ] ] ] 00
	s 07 O	7 [S] ] ] ] 00	8   \$           00
	es 09 O	1 [5] 00	2 5 00
52. Were there expenditures for reno rooms, adding or replacing doors eavestroughing. Include any finis that were part of the renovation pr	and wind	or alterations in 1987? This includes, renovating exterior walls, up whomes, and the cost of any equ	grading insulation and adding
Yes 10 No 20	→ Go t	0 54	
53. Were there any renovations or alterations that involved		What was the total cost of work contracted out? (Excluding the cost of any materials which you purchased separately)	How much were materials which you purchased?
	es 10	1 [5] 00	2 5 00
			.101 1 1 1 1 1 1 00
exterior work only?  No	es 3 O	3 5 00	4 5 00
	es 5 O	5 5 1 00	6 [5] 00

8-5100-241

The following questions refer to	the ins	stallatio	on of	eq	uipi	me	חז ו	WNI	icn	rep	ace	dan	exi	stin	g ui	nit.			
Were there any expenditures in 1987 for the replacement of .			of v (Ex	at w work clud ma pur	cor ing teria	the	cos	t of	it?	y)		ma	w m teria u pu	als v	vhic	h			
Plumbing fixtures?	Yes	01 ()	1	S		-		i .	1	] 00		2	\$		1		1	1	_ 0
Heating and/or air conditioning equipment?	Yes		3 [	s	1	Ī	!			00		4	\$			1		1	
	No	040																	
Electrical fixtures     or equipment?     (including wiring)		05 🔾	5 [	s L			1		1	] 00		6	sl	1	1			1	_j 0
- Duite in continuos	No	06 🔾																	
Built-in appliances such as ovens. dishwashers?		07 🔾	7 (	5			1			_ 00		8	\$		1				
	No	080																	
Wall-to-wall carpeting?		09 🔾	1 [	5	1					00		2	S						(
Other fixtures and built-in equipment?	Yes	110	3	s					1	00		4	S						
	No	120																	
The following questions refer property, or which was installed Were there any expenditures in	d in add	insta	o the	e equ	uipm vas 1	nen: the	tota	the	e pi	whic	h did	Н	ow n	nucl	h w	ere	xis	ОГ	n ti
The following questions refer property, or which was installed	to the	insta	o the	e equality ma	vas to cooling	the ntra the als	tota cter co: whi	the doctor	ost ut?	opert	h did y.	Ho		nuci	h w	ere	xis	or	n ti
The following questions refer property, or which was installed Were there any expenditures in	to the	insta	o the	e equality and the equa	vas to cooling	the ntra the als	tota cter co: whi	the doctor	ost ut?	opert	h did	Ho	ow n	nuci	h w	ere	xis	or	יו נו
The following questions refer property, or which was installed Were there any expenditures in	to the d in add	insta	Whof (E)	e equality ma	vas to cooling	the ntra the als	tota cter co: whi	the doctor	ost ut?	opert	h did	Ho ma yo	ow n	nuci	h w	ere	xis	or	
The following questions refer property, or which was installed Were there any expenditures in 1987 for the new installation	to the d in add	instadition to	o the Wr of (E) an yo	e equality ma	vas to cooling	the ntra the als	tota cter co: whi	the doctor	ost ut?	iy)	h did y.	Ho ma yo	ow nateri	nuci	h w	ere	xis	or	
The following questions refer property, or which was installed Were there any expenditures in 1987 for the new installation  • Plumbing fixtures?  • Heating and/or air conditioning equipment?	to the d in add	instadition t	o the Wr of (E) an yo	e equality may be selected as a selected as	vas to cooling	the ntra the als	tota cter co: whi	the doctor	ost ut?	ely)	h did y.	Ho ma yo	ow material purpose	nuci	h w	ere	exis:	or	
The following questions refer property, or which was installed Were there any expenditures in 1987 for the new installation  • Plumbing fixtures?  • Heating and/or air	to the d in add	instadition to	o the Wrof (E) an yo	e equality may be selected as a selected as	vas to cooling	the ntra the als	tota cter co: whi	the doctor	ost ut?	ely)	h did y.	Ho ma you	ow material purpose	nuci	h w	ere	xis	: or	
The following questions refer property, or which was installed Were there any expenditures in 1987 for the new installation  • Plumbing fixtures?  • Heating and/or air conditioning equipment?  • Electrical fixtures or equipment?	to the d in add	01 0 02 0 03 0 04 0	o the Wrof (E) an yo	s	vas to cooling	the ntra the als	tota cter co: whi	the doctor	ost ut?	(iy) 00	h did	Ho ma you	s s	nuci	h w	ere	xis	or	
The following questions refer property, or which was installed Were there any expenditures in 1987 for the new installation  • Plumbing fixtures?  • Heating and/or air conditioning equipment?  • Electrical fixtures or equipment?	to the d in add of Yes No Yes No Yes No Yes No Yes No Yes No	01 0 02 0 03 0 04 0 05 0	o the Wrof of (Example)	s	vas to cooling	the ntra the als	tota cter co: whi	the doctor	ost ut?	(iy) 00	h did	Homa you 2	s s	nuci	h w	ere	exis	or	
The following questions refer property, or which was installed Were there any expenditures in 1987 for the new installation  • Plumbing fixtures?  • Heating and/or air conditioning equipment?  • Electrical fixtures or equipment? (including wiring)  • Built-in appliances such as ovens.	to the d in add of Yes No Yes No Yes No Yes No Yes No Yes No	01 0 02 0 04 0 05 0 06 0	o the Wrof of (Example)	s   s	vas to cooling	the ntra the als	tota cter co: whi	the doctor	ost ut?	open	h did	Homa you 2	s s	nuci	h w	ere	exis	Or	
The following questions refer property, or which was installed Were there any expenditures in 1987 for the new installation  • Plumbing fixtures?  • Heating and/or air conditioning equipment?  • Electrical fixtures or equipment? (including wiring)  • Built-in appliances such as ovens.	to the d in add	01 0 02 0 03 0 04 0 05 0 06 0 07 0	o the Wrof (Exan yo	s   s	vas to cooling	the ntra the	tota cter co: whi	the doctor	ost ut?	open	h did	2 4 6	s s	nuci	h w	ere	exis	OF	
The following questions refer property, or which was installed Were there any expenditures in 1987 for the new installation  • Plumbing fixtures?  • Heating and/or air conditioning equipment?  • Electrical fixtures or equipment? (including wiring)  • Built-in appliances such as ovens, dishwashers?	to the d in add	01 0 02 0 03 0 04 0 05 0 06 0 07 0 08 0 09 0	o the Wrof (Exan yo	s   s	vas to cooling	the ntra the	tota cter co: whi	the doctor	ost ut?	00   00   00	h did	2 4 6 8 2	s s	nuci	h w	ere	exis	Or	

56.	The following questions are about FE	naintenance costs for this de	welling in 1987.	
	Were there any expenditures for		What was the total cost of work contracted out? (Excluding the cost of any materials which you purchased separately)	How much were materials which you purchased?
	Painting (interior or exterior)?	Yes 01 O No 02 O	1 [ 5 ] ] ] 00	2 [ 5 ] ] ] ] 00
	Wall papering?	Yes 03 O No 04 O	3 5       00	4 [S]   00
	Repairs to walls and ceilings, plastering, drywall, panelling, tiling?	Yes 05 O	5 [ 5 ] ] ] ] 00	6 [ 5 ] ] ] 00
	Repairs to hard surface flooring and wall-to-wall carpeting? (excluding wooden flooring)	Yes 07 O	7 S         00	8 [ \$           00
	Complete re-roofing?	Yes 09 O	1 [5] 00	2 5       00
	Eavestroughing and other roof repairs?	Yes 11 O No 12 O	3 [ \$ ]   ]   00	4 [\$ ] ] ] 00
	Repairs to exterior walls including soffits, facia, foundations and chimneys? (include chimney cleaning)	Yes 130 No 140	5 [ \$ ] ] ] 00	6 5 00
	Caulking and weather stripping, etc.? (include replacement of insulation, vapour barriers, etc.)	Yes 150 No 160	7 S       00	8 5 1 00
	including soffits, facia, foundations and chimneys? (include chimney cleaning)      Caulking and weather stripping, etc.? (include replacement of insulation.	No 140 Yes 150 No 160		

	What was the total cost of work contracted out? (Excluding the cost of any materials which you purchased separately)	How much were materials which you purchased?
Yes 17 O No 18 O	1 [5] ] ] 00	2 [ \$ ]   ]   00
Yes 19 O No 20 O	3 [ S ]   ] 00	4 [S]         00
Yes 21 O	5 [\$ ] ] 00	6 [5 ] ] ] 00
Yes 23 O No 24 O	7 [ \$ ] ] 00	8 [\$ ] ] 00
Yes 25 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1 [\$ ] ] 00	2 [\$] ] ] 00
Yes 27 O	3 [\$ ] ] 00	4 [5] 00
IF YES SPECIFY .		
	Yes 17 \( \text{No} \) 18 \( \text{No} \) 18 \( \text{No} \) 20 \( \text{No} \) 22 \( \text{No} \) 22 \( \text{No} \) 24 \( \text{No} \) 24 \( \text{No} \) 26 \( \text{No} \) 26 \( \text{No} \) 27 \( \text{Yes} \) 27 \( \text{Yes} \)	What was the total cost of work contracted out? (Excluding the cost of any materials which you purchased separately)  Yes 17

57.	Did anyone in this housel Exclude vacation homes.	nold occupy any other dwelli	ngs in 1987 which they owned?						
	Yes 1 O How many? Go to 61								
	No 20								
58.	Was there any person in expenses and is no longer Yes 3 O	er a member?	tho made a significant contribution to these ho	using					
59.	Approximately what perce	entage of these expenses did	this person contribute?						
60.		dparents or those of any oth	er member of your household descend from any o	of the					
	or Inuit (Eskimo)	Yes 5 O No 6 O							
		INTERVIEWER: THANK R	ESPONDENT AND END						
		NOT	ES .						
99	Item no		Item no						
99			Item no 99						
99			Item no						
99			Item no						
99			Item no						
99			Item no						

61.	INTERVIEWER CHECK ITEM								
	Repeat items 62 to 79 for each dwelling identified in item 57. If more than one (resulting from frequent moves or changes in household composition), blank F08's may be used.								
	When all dwellings completed. Go to 58								
62.	INTERVIEWER: If more than one responsible	e nousenold member. Go to 63.							
	Otherwise Go to 66								
63.	Were you also responsible for the expenhousehold?	ses for the dwelling or should I speak to another member of the							
	Same household member 10 Go to 66								
	Other household member 20 Go to 64								
64.	is that person available?								
	Yes ○ Go to 65								
	No O (Set up appointment)	Name							
		Date							
		Telephone No.							
	a major part of the household budget. I welling.	eted in order to obtain information on expenditures related to housing, would like to ask some questions about your expenses for the							

66. In 1987 how many months was t	he dwelling owned a	nd occupied by a member of this household?
months		
67. When answering the following s the months you jived.	series of questions about home- u have just reported. Only inclu	owner costs, keep in mind that they apply to de those expenditures for the home in which
68. What was the total amount paid	in 1987 for home-owner's insur	ance?
s       00		
69. Were there any condominium ch	arges in 1987?	
Yes 1 O Go to 70		
No 2 0 Go to 72		
70. What was the total cost of the co	ondominium charges?	
s       00		
71. Did these condominium charges	include	
• Taxes?	Yes 1 O	No 2 🔾
• Heat?	Yes 3 🔾	No 4 O
Electricity?	Yes 5 O	No 6 O
• Water?	Yes <sup>7</sup> O	No 8 ()
72. What were the total expenses in		NUTRAL SECTION
	Check if expenditu	ure S Total Cost
Water and sewage?	.10	[\$]]]]]00
Electricity (include rental char	rges)?2 O	[5] 00
<ul> <li>Piped gas (include any rental such as for hot water heaters</li> </ul>	charges )?3 ○	s       00
Fuel oil and other liquid fuel?	40	[S]     00
Other fuels (such as bottled of stove and fireplace wood, concharcoal, etc.)?		s     00
2	NOTES	
Item no	lter 99	n no
Item no	Iter 99	n no
99		

73. Were there expenditures in 1987 for the addition of			What was the total cost of work contracted out? (Excluding the cost of any materials which you purchased separately)	How much were materials which you purchased?
A garage or car port?		01 ()	: [\$] 00	2 5 00
Other structural extensions such as rooms, decks, garden-sheds, etc.?.		03 ()	3 [ \$ ] ] ] 00	4 S         00
An inground swimming pool?		05 O 06 O	5 [\$ ] ] ] 00	6 5 00
• Fences, patios, driveways?		07 🔾	7 5         00	8 [ 5 ]   ]   00
• Landscaping?		09 🔾	1 5 00	2 5 00
74. Were there expenditures for re- rooms, adding or replacing do eavestroughing, include any fi that were part of the renovation	ors i	and wind ng in nev	ows repovating exterior walls t	cludes jobs such as remodelling upgrading insulation and adding quipment and built-in appliances
Yes 10 No 20		→ Go to	76	
75. Were there any renovations or alterations that involved .			What was the total cost of work contracted out? (Excluding the cost of any materials which you purchased separately)	How much were materials which you purchased?
both exterior and interior work?		10	1 5 00	2 5 1 1 1 00
• exterior work only?		30	3 5 00	4 [\$]   00
• interior work only?		50	5 5 1 1 00	6 [5 ] ] ] ] 00

76. The following questions refer to the installa	tion of equipment which replace	ced an existing unit.
Were there any expenditures in 1987 for the replacement of	What was the total cost of work contracted out? (Excluding the cost of any materials which you purchased separately)	How much were materials which you purchased?
Plumbing fixtures?  No 02 C	1 [5] 00	2 [ S   ]   ]   00
Heating and/or air conditioning equipment?  No 04 C	3 8 00	4 S 00
Electrical fixtures     or equipment?     (including wiring)		6 [ 5 ] ] ] ] 00
• Built-in appliances such as ovens, dishwashers? Yes 07 C		8 5 00
Wall-to-wall carpeting? Yes 09 C     No 10 C		2 [\$]   00
Other fixtures and built-in equipment?  No 12 C  IF YES SPECIFY	3 [\$ ] ] ] 00	4 [\$] 00
77. The following questions refer to the ins property, or which was installed in addition.  Were there any expenditures in 1987 for the new installation of	to the equipment on the property.  What was the total cost of work contracted out? (Excluding the cost of any materials which you purchased separately)	How much were materials which you purchased?
Plumbing fixtures? Yes 01 C     No 02 C		2 [ \$ ] ] ] 00
Heating and/or air     conditioning equipment? Yes 03 (     No 04 ()		4 5 00
Electrical fixtures     or equipment?     (including wiring)     No 06(		6 5 00
Built-in appliances     such as ovens,     dishwashers? Yes 07(  No 08(		8 [ 8 ]         00
• Wall-to-wall carpeting?		2 5 00
Other fixtures and built-in equipment?  No 120		4 [ 5 ]       00
IF YES SPECIF		

78.	The following questions are about Fep	airs and m	aintenance costs for this d	welling in 1987.
	Were there any expenditures for		What was the total cost of work contracted out? (Excluding the cost of any materials which you purchased separately)	How much were materials which you purchased?
	Painting (interior or exterior)?	Yes 01 O No 02 O	1 [ S ] ] ] ] 00	2 [ 5 ]   ]   ] 00
	Wall papering?	Yes 03 O	3 [ \$ ]   ] 00	4 5 1 1 00
	Repairs to walls and ceilings, plastering, drywall, panelling, tiling?	Yes 05 O	5 5 00	6 [ 5 ] ] ] ] 00
	Repairs to hard surface flooring and wall-to-wall carpeting? (excluding wooden flooring)	Yes 07 O	7 [ \$         ] 00	8 [ \$ ]   ]   00
	Complete re-roofing?	Yes 09 O	1 [5] ] ] ] 00	2 5 1 1 1 00
	Eavestroughing and other roof repairs?	Yes 11 O No 12 O	3 [ 5 ] ] 00	4 [ \$ ] ] ] 00
	Repairs to exterior walls including soffits, facia, foundations and chimneys? (include chimney cleaning)	Yes 130 No 140	5 [ S ] ] ] 00	6 [ 5 ] ] ] ] 00
	Caulking and weather stripping, etc.? (include replacement of insulation, vapour barriers, etc.)	Yes 150 No 160	7 [ \$ ]   00	8   \$           00
		CONTINUE	ON NEXT PAGE	

Were there any expenditures for	or	What was the total cost	How much were
		of work contracted out? (Excluding the cost of any materials which you purchased separately)	materials which you purchased?
Repairs to outdoor patios, fences and driveways?	Yes 170	1 [ \$ ] ] ] 00	2 5 1 1 1
	No 180		
Heating and air conditioning			
system including service contracts?	Yes 190	3   \$       00	4 5
	No 200		
• Plumbing?	Yes 21 O	5 \$ 1 1 00	6 5 1 1 1
	No 220		
Electrical?	Yes 23 〇	7 5 00	8 5
	No 240		
• Carpentry?			
(including wooden flooring)	Yes 250	1 \$     00	2 \$
	No 260		
Other repairs and maintenance?	Yes 27 〇	3   5	4   \$
and maintenance:	No 280		
	IF YES SPECIFY		

#### SPECIAL SURVEYS GROUP PROGRAMS

SURVEY MONTH:

March 1988

TITLE :

Survey on Drinking and Driving

SPONSOR:

Health and Welfare Canada

SURVEY METHOD:

Telephone Interview

SAMPLE SIZE :

1000 interviews by province

OBJECTIVES :

The objectives of the survey on Drinking and Driving are:

- 1. To collect etiological attitudinal, cognitive and behavioural information regarding drinking and driving
- To collect information that is representative (of the population with telephones and noninstitutionalized) and useful at both provincial and national levels.
- 3. To collect baseline data which can be used to assess trends and changes in variables overtime. (a follow-up survey will be done in a few years).

The overall program goal is to change the prevailing social acceptability of drinking and driving at the community level.

PROJECT MANAGER :

Anne Haining

MICRODATA:

Yes

Price \$ 500

No

### Survey on Drinking and Driving

FORM 20

1: Telephone num	aber	4: L Stratum	5: Sequence number
Interviewer Name:			
INTRODUCTION:			
(Heflo, I'm and driving.)	from Statistics Co	anada. We are doing a survey on	peoples' attitudes about drinking
This survey is being conducted stand and deal with the issue of the study are to be accurate	of drinking and driving. W	hile your participation is volur	enswers will help us better under- stary, it is essential if the results

I am going to ask your opinion on a number of Issues. Do you think the Issue of drinking and driving is more important, less important or equally important as...

	More important	Equally important	Less important	Don't know
cigarette smoking?	. **0	<b>~</b> C	***	<b>*</b> C
drug use?	. **0	<b>~</b> O	<b>67</b> 0	CPO
family violenca?	. "0	<b>"</b> O	<b>"</b> C	<b>3</b> 0
Juvenile delinquency?	. "0	<b>*</b> O	**0	<b>"</b> O
pernography?	. "0	**0	***	20°C
racism?	. **O	<b>=</b> 0	230	240
unemployment?	. 20	790	<b>5</b> 0	20
AIDS?	. 20	*0	770	220

Now I'm going to read some things that could be done to reduce drinking and driving. Tell me if you strongly agree, agree, disagree or strongly disagree with each of the following:

	Strongty Agree	Agree	Neither agree nor disagree	Disagree	Strongty Disagree
There should be more educational programs to teach people about drinking and driving	**0	***	<b>"</b> O	<b>*</b> 0	<b>*</b> 0
The police should set up more roadblocks and spot checks	*0	<b>"</b> C	<b>~</b> C	. **0	*0
There should be stricter enforcement of existing laws	"0	720	<b>°</b> O	*0	40
The drinking age should be raised	**	70	"*C	<b>"</b> C	***
The age at which people can drive should be raised	Cu	20	<b>2</b> C	240	#C
There should be more advertising against drinking and driving	280	270	#C	770	<b>**</b> C
The sale of alcohol should be more strictly controlled	210	32	#C	34 C	210
Free transportation should be provided to drivers who have had too much to drink	**	<sup>37</sup> C	<sup>14</sup> O	<sup>16</sup> C	<b>*</b> *C
More bars and taverns should set up designated driver programs	4"0	420	40	40	410
Driver education should include information on drinking and driving	<b>"</b> O	47°C	44°C	<b>"</b> C	50°C
There should be more treatment services for problem drinkers	"O	12 <sub>C</sub>	no C	MC.	***

Ph	w im going to describe a drinking il lives in your community, Friday ough to be impaired and then at	on his w	av home	fmm	work Shill	stone et e h	ne te delete mist	ble det : .	
1	What do you think the chances stopped by the police? Do you tow, medium or high?	are the	t he will chances	be	U14	Chances are	rith impaired diff that he will be o edium or high?	ving, what do y onvicted? Do y	rou thini rou thini
	10 Low 30 High				10	Low	<sup>2</sup> O Hilat		
	*O Medium *O Don't	know			30	Medium	4-	't know	
4.	If he is stopped by the police, we chances are that the police will impaired driving? Do you think to high?	rill cham	ne him w	arith.	CAF	et do you this eccident on medium or	nk the chances his way home? high?	are that he will Do you think	Il have they an
	O Low O High				*0	Low	O High		
	*O Medium *O Don't	know			6	Medium	<sup>4</sup> O Don'	't know	
8.	During the past 12 months, have anyway?  1 Yes —— Go to 9  Ouring the past 12 months, have to drink?  2 Yes 4 No ——	<sup>2</sup> O No							
).	The following are some ways to from driving after they have had to During the past 12 months, have the following:	prevent	a drink	10.	The last in person a someone	friend, a fami	this, was the ty member or	11. Were you	
		No	Yes		Friend	Family	Someone else	Yes	No
	Asked someone not to drive?	**0	· O	-	<b>12</b> 0	**0	**0	. mO	-
	Offered to drive someone else home yourself?	m <sub>O</sub>	···O -		*0	70	30	40	***
	Asked someone to take a taxt, bus or subway?	1ªO	*O -	-	70	TO TO	**0	**0	270
	Tried to take someone's car keys?	20	<b>=</b> 0	-	<sup>24</sup> O	**O	280	70	28 C
	Asked someone to stay at your home?	280	<b>*</b> 0 -	-	*O	io.	<b>**</b> 0	*0	240
2.	During the past 12 months, were much to drink?	lon ectri	ally a pes	senge	er in a moto	or vehicle in	which you thou	ght the driver	had too
	'O Yes 'O No	Go to 1	6						
3.	The last time this happened, wer  Yes	e you co	ncerned	about	t your safe	ty because t	he driver had :	oo much to di	rink?
	in No								
	Go :	0 15							
••	Even though you were concerned   One alternative transportation	about y	our salet	ry, wit					
							ave driver/to ke	ep driver alert	
	<ul> <li>Did not want to say no afraid :</li> <li>Not far to oo</li> </ul>	o say no			*O Othe	rr (specify) _			
					10 -				
_	C Everyone was doing if peer pr				O Don'	1 know/don't	remember		
	What was the driver's relationship	to you'	?						
	Spouse/partner				10 Othe	r friend			

Other

<sup>2</sup>O Other family member or relative

3 Boyfriend/girlfriend

_	21 A 1	NG QUESTIONS
6.		he past 3 years, have you driven a motor vehicle? By motor vehicle, I mean a car, truck, van or motorcycle.
	0	Yes <sup>2</sup> ○ No → Go to 37
7.	Dur	ing the past 12 months, how often, on average, did you drive? Was it
	'0	every day?
	o	4–6 days a week?
	o	2-3 days a week? Go to 19
	0	once a week?
	0	once or twice a month?
	0	less often than once a month?
	0	haven't driven in past 12 months —— Go to 18
8.	Why	did you not drive in the past 12 months?
	'0	Felt I was too old
	°0	Had an accident/car was wrecked
	O	My licence was suspended
	0	Didn't have a car Go to 31
	10	Oidn't need a car
	0	Other
9.	Do	you have a regular or a commercial driver's-licence?
	'0	Regular licence
	20	Regular learner's permit
	30	Commercial licence
	40	No licence
0.	Abo	ut how many kliometers or miles have you driven in the past 12 months? (Include all driving - job related, or ing in cars you don't own, including rentals.)
	0	1,600 km or less (1,000 miles or less)
	20	1,501 to 8,000 km (1,001 to 5,000 miles)
	30	8,001 to 16,000 km (5,001 to 10,000 miles)
	10	16,001 to 24,000 km (10,001 to 15,000 miles)
	10	24.001 to 32,000 km (15,001 to 20,000 miles)
	0	More than 32,000 km (more than 20,000 miles)
	<b>7</b> 0	Don't know
1.	How	many years have you been driving?
		Less than 1 year
	20	1–3 years
	30	4–5 years
	*	7-10 years
	5 -	11-15 years
		16-20 years
	70	More than 20 years
_	0::	
۷.		you ever take a driver education course?
	'0	
3.		Information about drinking and driving presented as part of the course?
	,0	Yes One Don't know
4,	Wha	t kind of motor vehicle do you drive most often - is it a car, a van, a light truck, motorcycle or something e
		Car 20 Light Truck 20 Something else (specify)
	200	

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25.	'C My own			400					
				0	Company	vehic	•		
	<sup>1</sup> C Parent's vehicle	family vehicle		0	Rental or	44500	f vehicle		
	<sup>5</sup> O Friend's vehicle			0	Other (spe	city) .			
26.	During the past 12	months, have yo	ou participated in	a des	ignated drh	er pr	ogram offers	d at a bar	or tevern?
		O No							or savering
27.	Other than this prog	ram, have you ac	reed beforehand	to be t	he one del-		4-4		
Ĭ		O No		10 00	ile iloiz-giin	ung (	HIVET TOF BIS O	ecasion i	wolving drink
d.	The following are sor or never true for you	ne statements e	bout the way peop	ple driv	e. Tell me if	each	statement wa	s often, s	ometimes set
	or never true for you	a during the pas	it 12 months.				-		
	Leves and to do					iten	Sometimes	Seldom	Never
	I swear out loud at					0	•••	440	*0
	I like to pass other o					0	~°	<b>"</b> O	<b>"</b> O
	I lose my temper wi					0	*0	"O	20
	Driving at high spee	ds is exciting .		,		o o	*0	*O	*0
	I make rude signs a					70	*0	*0	*0
	It is fun to manoeuv					0	***	20	*0
		onths, have you			or motorizat		Cie socii as i		
	10 Yes 20	) No Go	o to 31						
0.	O Yes Control Yes	) No Go	o to 31						
o.	O Yes Control Yes	No Gonnaths, did you  No  Motor vehicle se	o to 31	se vehic	cles for rea	sons	other than p	feasure o	r recreation?
0.	O Yes C  During the past 12 m  Yes C  Have you been in any	No Gonanths, did you No motor vehicle so fault?	o to 31  drive any of thesecidents during the	se vehic	cies for rea	sons	other than p	leasure o	r recreation?
). 	During the past 12 m  The past 13 years  The past 12 m  The pas	No Gonetha, did you hantha, did you had	drive any of these coldents during the	he past	gles for rea	tis,	other than palnos March 1	leasure of 1985) with to 33	r recreation?
	During the past 12 m  The second of the past 1 m  The second of the past 2 m  The second of the past 3 m  The s	No Gonetha, did you hantha, did you had	drive any of these coldents during the	he past	I yeers (the	tis,	other than paince March 1  Go  ehicle accide 7	leasure of 1985) with to 33	r recreation?
	During the past 12 m  The past 13 years  The past 14 m  The past 14 m  The past 15 years  The past 12 m  The past 12	No — Go nenths, did you No motor vehicle so fault? many accidents s (that is, since is or injury requiring many times?	drive any of these coldents during the coldents during the coldents for the coldents during the coldents d	he past	J yeers (that are more in any manyone inv	sons  it is, :  No  notor v	other than paince March 1  Go Go ehicle accide?	leasure of 1985) with to 33	r recreation?  you as the dri
. (	During the past 12 m  The past 13 years  The past 12 m  The pas	No Gonoths, did you not replicate so fault?  many accidents of injury requiring many times?	drive any of these coldents during the coldents during the coldents for the coldents during the coldents d	he past	O yeers (that of the same of t	sons  it is, :  No  notor v	other than paince March 1 Go Go ehicle accide ?	leasure of 1985) with to 33	r recreation?  you as the dri
. (	During the past 12 m  The second of the past 12 m  The second of the past 3 years of more than \$1,000 or than \$	No Gonoths, did you nonths, did you nonths, did you motor vehicle so fault?  many accidents (that is, since her injury requiris many times?  irs, have you recommany times?	drive any of these coldents during the coldent	you be	or really years (that any manyone investigation)	it is, :  Net object to the control of the control	other than paince March 1  Go ehicle accide?	1985) with to 33 into that re	you as the dri
. (	During the past 12 m  The past 13 years	No ——— Go nonths, did you No motor vehicle so fault? many accidents s (that is, since h or injury requiris many times? irs, have you res many times?	drive any of these coldents during the coldent	you be	or really years (that any manyone involved to the police, otherwise)	Noter the Notes	other than paince March 1 Go Go ehicle accide?	1985) with to 33 into that re	you as the dri
. (	During the past 12 m  The second of the past 12 m  The second of the past 3 years of more than \$1,000 or than \$	No ——— Go nonths, did you No motor vehicle so fault? many accidents s (that is, since h or injury requiris many times? irs, have you res many times?	drive any of these coldents during the coldent	you be	or really years (that any manyone investigation)	Noter the Norman	other than paince March 1 Go Go ehicle accide?	1985) with to 33 into that re	you as the dri
	During the past 12 m  The past 13 years  The past 14 yea	No ——— Go nonths, did you No motor vehicle so fault? many accidents s (that is, since h or injury requiris many times?  irs, have you res many times? irs, has your dri many times?	drive any of these coldents during the coldents during medical attentions.	you be tion to	J yeers (that any manyone investment of the series of the	No N	other than paince March 1  Go Go ehicle accide?	1985) with to 33 into that re	you as the dri
	During the past 12 m  The past 13 years	No Gononths, did you nonths, did you nonths, did you motor vehicle actifault?  many accidents a (that is, since hor injury requiris many times?  ors, have you remany times?  ors, has your dri many times?  ors, has your dri many times?	drive any of these coldents during the coldents during medical attentions.	you be tion to	or years (that any manyone investment of the content of the conten	No N	other than paince March 1  Go Go ehicle accide?  an a parking than 24 hou check?	1985) with to 33 that re 20 October? rs for any	you as the dri
. (c	During the past 12 m  The past 13 years of more than \$1,000 c  The past 13 years of more than \$1,000 c  The past 13 years of past 13 years of more than \$1,000 c  The past 13 years of past 14 years of pas	No —— Go nonths, did you nonths, did you notor vehicle ac fault? many accidents s (that is, since h or injury requirit many times? irs, have you re- many times? irs, has your dri many times? irs, have you be- many times?	drive any of these coldents during the coldent	you be tion to	or really years (that any manyone investment of the control of the	No N	other than paince March 1  Go Go ehicle accide?	1985) with to 33 that re 20 October? rs for any	you as the dri
). (c	During the past 12 m  The past 13 year  The past 13	No ——— Go nonths, did you No motor vehicle so fault? many accidents s (that is, since h or injury requiris many times? ers, have you re- many times? ers, have you dri many times? ers, have you be- many times? of these) was a	drive any of these coldents during the coldent	you be tion to	or really years (that any manyone investment of the control of the	No N	other than paince March 1  Go Go ehicle accide?  an a parking than 24 hou check?	1985) with to 33 that re 20 October? rs for any	you as the dri
). (c	During the past 12 m  The past 13 year  The past 13	No Gonorths, did you nonths, did you motor vehicle ac fault? many accidents (that is, since her injury requiris many times?  ors, have you remany times?  ors, have you dri many times?  rs, have you be many times?  of these) was a line of these was a line of the line	drive any of these coldents during the coldents during medical attentions. Coldents to the coldents during	you be tion to om the police and and	or read of the second of the during a second of driving?	No No No	other than paince March 1  Go Go ehicle accide?  In a parking  than 24 hou check?  Go h	leasure of 1985) with to 33 conts that reconstruction of 1985	you as the dri

38.	Now I would like to ask you some questions about aid	hol consumption. In these questions, when we	ha
	Ordina . It means one bottle of beer of glass of draft, on	small glass of wine, or one shot or mixed drink with ha	d lidno
	During the past 12 months, have you had a drink?  'O Yes		
	"○ Yes Go to 48		
19.	During the past 3 years would you say that you drank	often, sometimes, seidom or never?	
	¹O Often	<sup>3</sup> O Seldom	
	<sup>2</sup> O Sometimes	*O Never Go to 77	
0.	Why did you not drink in the past 12 months? (Mark a	that apply	
	10 II was a source of conflict with mends/tamily	*O it was affecting my day-to-day activities (i.e. jo	
	20 It was affecting my health/to lose weight	studies, etc.)	0,
	<sup>3</sup> O It was too expensive	1 joined AA or other treatment program	
	1 had a bad experience because of drinking	No particular reason	
		®O Other	
1.	INTERVIEWER CHECK ITEM:		
	• If Q16 marked "Yes" (code 1) 10 Go to 42		
	• Otherwise <sup>2</sup> C Go to 71		
2.	During the past 3 years, have you been stopped and c and driving?	ecked by the police because they suspected you of	drinkii
	°C Yes °O No		
	Yes — How many times?	O No Go to 77	
4.	During the past 3 years, have you been convicted or I		
	Yes — How many times?	<sup>8</sup> O No → Go to 71	
	Ouring the past 3 years, have you had your ficence suspe	<sup>8</sup> O No → Go to 71	offence
5.	O Yes — How many times?  During the past 3 years, have you had your ficence susperior Yes — How many times?	No Go to 71  nded for more than 24 hours for a drinking and driving.	offence
5.	Ouring the past 3 years, have you had your ficence suspe	<sup>8</sup> O No → Go to 71	offence
5.	O Yes — How many times?  During the past 3 years, have you had your ficence suspe  O Yes — How many times?  No	No —— Go to 71  nded for more than 24 hours for a drinking and driving  Go to 71	offence
5.	O Yes — How many times?  During the past 3 years, have you had your ficence susperior of Yes — How many times?	No —— Go to 77  Indeed for more than 24 hours for a drinking and driving.  Go to 77  you had a drink? Was it	offence
5.	O Yes — How many times?  During the past 3 years, have you had your ficence suspering the past 3 years, have you had your ficence suspering the past 12 months, how often, on average has	*O No —— Go to 77  Indeed for more than 24 hours for a drinking and driving.  —— Go to 77  If you had a drink? Was it  *O once a week?	offence
5.	O Yes — How many times?  During the past 3 years, have you had your ficence susper or Yes — How many times?  O No  During the past 12 months, how often, on average has every day?	No —— Go to 77  Indeed for more than 24 hours for a drinking and driving.  Go to 77  you had a drink? Was it	offenc
5.	During the past 3 years, have you had your ficence suspend on the past 3 years, have you had your ficence suspend on the past 3 years, have you had your ficence suspend on the past 12 months, how often, on sverage had every day?  4-6 times a week?  2-3 times a week?	*O No —— Go to 77  Indeed for more than 24 hours for a drinking and driving.  —— Go to 77  If you had a drink? Was it  *O once a week?  *O once or twice a month?  *O less often than once a month?	
5.	O Yes — How many times?  During the past 3 years, have you had your ficence suspend to Yes — How many times?  No ———————————————————————————————————	*O No —— Go to 77  Indeed for more than 24 hours for a drinking and driving.  —— Go to 77  If you had a drink? Was it  *O once a week?  *O once or twice a month?  It is soften than once a month?	
5.	O Yes — How many times?  During the past 3 years, have you had your ficence suspend to Yes — How many times?  No  During the past 12 months, how often, on average had every day?  4-6 times a week?  2-3 times a week?  Thinking back over the past 7 days, how many drinks how many drinks did you have on	No —— Go to 77  Indeed for more than 24 hours for a drinking and driving.  Go to 77  you had a drink? Was it  O once a week?  O once or twice a month?  Items often than once a month?  Items often than once a month?	
5.	O Yes — How many times?  During the past 3 years, have you had your ficence suspend to Yes — How many times?  No  During the past 12 months, how often, on average had every day?  4-6 times a week?  2-3 times a week?  Thinking back over the past 7 days, how many drinks how many drinks did you have on	*O No —— Go to 77  Indeed for more than 24 hours for a drinking and driving.  —— Go to 77  If you had a drink? Was it  *O once a week?  *O once or twice a month?  It is soften than once a month?	
5.	O Yes — How many times?  During the past 3 years, have you had your ficence suspend on Yes — How many times?  No  During the past 12 months, how often, on average had every day?  4-6 times a week?  2-3 times a week?  Thinking back over the past 7 days, how many drinks how many drinks did you have on	No —— Go to 77  anded for more than 24 hours for a drinking and driving.  Go to 77  you had a drink? Was it  O once a week?  O once or twice a month?  Its soften than once a month?  Itid you have on each day? Let's start with yesterday.  Did not have any drinks in the past 7 days OAY?	
5.	O Yes — How many times?  During the past 3 years, have you had your ficence suspend to Yes — How many times?  No  During the past 12 months, how often, on average had every day?  4-6 times a week?  2-3 times a week?  Thinking back over the past 7 days, how many drinks how many drinks did you have on	No —— Go to 77  Indeed for more than 24 hours for a drinking and driving.  Go to 77  you had a drink? Was it  O once a week?  O once or twice a month?  Items often than once a month?  Items often than once a month?	
5.	During the past 3 years, have you had your ficence suspend on the past 3 years, have you had your ficence suspend on the past 12 months, how often, on average had every day?  4-6 times a week?  Thinking back over the past 7 days, how many drinks how many drinks did you have on	No —— Go to 77  a you had a drink? Was it  once or twice a month?  less often than once a month?  did you have on each day? Let's start with yesterday Did not have any drinks in the past 7 days once once on each day?	
5.	O Yes — How many times?  During the past 3 years, have you had your ficence suspend on Yes — How many times?  No  During the past 12 months, how often, on average had every day?  4-6 times a week?  2-3 times a week?  Thinking back over the past 7 days, how many drinks how many drinks did you have on	No —— Go to 77  anded for more than 24 hours for a drinking and driving.  Go to 77  you had a drink? Was it  O once a week?  O once or twice a month?  Its soften than once a month?  Itid you have on each day? Let's start with yesterday.  Did not have any drinks in the past 7 days OAY?	
5.	During the past 3 years, have you had your ficence suspend on the past 3 years, have you had your ficence suspend on the past 12 months, how often, on average had every day?  4-6 times a week?  Thinking back over the past 7 days, how many drinks how many drinks did you have on	No —— Go to 77  a you had a drink? Was it  once or twice a month?  less often than once a month?  did you have on each day? Let's start with yesterday Did not have any drinks in the past 7 days once once on each day?	

48.	During the past 7 days, did you have an alcoholic drink			At any time i days, did ye after having drinks in the hour.	or more previous
		No '	Yes	Yes	No
	in a bar, tavern or pub?	"0	40	→ **0	<b>*</b> 0
	In a restaurant?	0	~0	- "0	**0
	at home?	0	*0	- "0	30°
	at someone elsa's home?	0	40	→ 0	**0
	at a social event such as a party, dance, wedding or club?	"0	*0	- 180	**0
	at a public event such as a concert, sports event or festival?	**0	20	<sup>22</sup> O	<b>*</b> O
	out of doors, e.g., while fishing, hiking or skiing?	±0;	*0	- 20	280
	in a motor vehicle?	250	30O	→ <sup>31</sup> O	***
	arrywhere else? (specify)		<b>*</b> 0	250	340
49.	In the past 7 days, have you had a drink together with any of the following drinking)?	ing people	(that is,	these people	were also
	Your spouse/partner or boyfriend/girlfriend?			az ()	
	Relatives other than your spouse?			<b>M</b> O	
	People you work with or business associates?			<b>04</b> 0	
	Friends of both sexes?			<b>080</b>	
	Only friends of the same sex as you?			*0	
	Only friends of the opposite sex?			*0	
	Strangers or people you met after you started drinking?			40	
	Alone, no one else was around?			**0	
50.	The following are some ressons why people drink. For each one tell me i true for you during the past 12 months.	t it was of	ten, somi	atimes, seldo	m or never
			ometimes		Never
		0	0	<b>**</b> O	<b>~</b> O
		0	<b>12</b> 0	e*O	**O
		0	0	. "0	90
		°C	MO	180	*O
		0	0	***	~
		0	<sup>22</sup> O	<sup>33</sup> O	24°C
		0	30°C	<b>7</b> 0	218 🔾
	I drink when I am sad, lonely or depressed	0	30°C	π <sub>C</sub>	120
51.	The following are some statements about drinking. For each one indicate true for you during the past 12 months.	if it was o	ten, som	etimes, seldo	m or never
		ften S	ometimes		Never
		0	# <b>2</b> O	<b>**</b> O	**
	People annoy me by criticizing my drinking	0	040	<b>"</b> O	940
		<b>*</b> O	<b>76</b> C	"0	<sup>18</sup> C
	i have a drink first thing in the morning to steady my nerves or to get rid of a hangover	20	140	78 C	140

<sup>52.</sup> During the past 12 months, have you tried to reduce your drinking?

Yes <sup>2</sup>O No — Go to 54

				nount you drink? Hav
			Yes	No
	skipped parties or other social events?		<b>"</b> O	#C
	avoided being with friends who drink a lot?			<sup>M</sup> O
	gone to bars and taverns less often?			•0
	ilmited the number of drinks you have?			<b>~</b> O
	switched from fiquor to beer or wine?		······•	*0
	started drinking low alcohol beer or wine?			<b>*</b> O
	started drinking non-alcoholic beverages?			MO
	looked for help to stop drinking such as A.A., or sought	med	ical assistance? **O	*0
4,	INTERVIEWER CHECK ITEM:			
	• If Code 1-8 in Item 17 (i.e., has driven in past 12 months) 1 Go to 55			
	• Otherwise <sup>2</sup> O Go to 71			
)R	INKING AND DRIVING QUESTIONS	į,		
6.	Ouring the past 12 months, were there any situations in w	vhict	you had to drive after having	g loo much to drink?
0	Yes O No — Go to 58			
7.	What were they? (Mark all that apply)			
	Alternatives available but not desirable	40	Unexpected emergency	
	2 Didn't want to leave car/needed car	O*	No public transportation	
	Responsible for driving others home	0	Other (specify)	
8.	During the past 12 months, have you done any of the follo	owin	g in order to evoid driving eff	er you had too much
	drink? Have you		Yes	No
				100
	asked someone else to drive?			***
	taken a taxi, bus, subway or walked?			000
	stayed overnight?			98.0
	stopped drinking early/waited at least one hour before dr			-
	send a breathalman took batam delelemen			Man.
	used a breathalyzer test before driving?			ార
9.	INTERVIEWER CHECK ITEM:			*0

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_		
50	. Wh	y did you try to avoid driving after you had too much to drink? (Mark all that apply)
	'0	I was afraid of getting caught by the police
	0	I was involved with the police for driving while impaired
	0	I was afraid of having an accident
	0	I was involved in an accident after drinking or my friends or family were involved in an accident
	0	I was afraid of losing my licence or going to jest
	0	I felt that it was wrong to drive while impaired
	0	Personal reasons, pressure from family, friends, work
62.		tried to prevent you from driving the last time this happened? Was it (Mark all that apply) your spouse/partner?
		some other relative?
		a triend?
	0	a bartender/waiter/waitress?
	<b>*</b> O	e stranger?
	0	someone else?
13.	Were	they successful?
	0'	Yes <sup>2</sup> O No

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30		it 3 years, have y						7.00	or connici
	Yes	10 No							
65. Out	ring the pas having a bi	t 3 years, have yo	ou been charged for a	drinking an	d driving d	ffense :	uch as driv	ing while in	npeired,
6	Yes	How many time	107		No				
66. Dur	ring the per	t 3 years, have y	ou been convicted o	r found quit	v of a drie	king an	d debda a		
0	Yes	How many time	167		No			rense?	
57. Our	ing the past	3 years, have you	had your ficence sus	pended for m	ore than 2	hours f	or a drinking	and debelo	a offense
0'	Yes	How many time	97	6				a end Ottall	g onense
is "i	impaired" witrongly disa	e mean they had gree with each :	nts about drinking an too much to drink to d stalement.	u arrying bet irive safely, P	eaviour, in liease indic	these st ate if yo	alements w surrongly a Nerther	hen we say gree, agree	someon , disagre
					Strongly agree	Agree	agree nor disagree	Disagree	Strongi
			make me feel impa			***	<b>47</b> O	040	**C
			few drinks		**O	<b>"</b> O	<b>*</b> O	**0	*0
My fr impai	riends or far ired	nity would disap	prove of me for drivi	ing while	"0	40	90	40	a <sub>C</sub>
There	ls no excu	se for driving w	hile while impaired .		*0	170	**0	"0	**0
	A bassa	drinks do you thi	nk you can have, over	a 2 have an	ind before	your ab	Hilly to drive	becomes	
Abou	Drinks	Don't kr	now <sup>68</sup> O	a 2-nour per	.00, 00,010				
	Urinks	Don't kr	now se o					80. to timil I	percenti
About	how many o	Don't kn	ik you can have, over	2-hour perio	od, before y	rou are o	wer the legal		
About	Drinks  Drinks  the past 34 had too much	Don't kn	now secondary, over the secondary over the secondar	2-hour perio	od, before y	rou are o	wer the legal		
Within have h	Drinks  Drinks  the past 34 had too muck	Don't kn Don't kn Don't kn O days, has your th to drink?	spouse or partner, o	2-hour perio	od, before y	rou are d	wer the legal	es driven (	ifter they

	What do you think are the legal naximum penalties?		What do you think are the <u>usuel</u> enaitles?		that do you think the pensitles hould be?
"0	Licence Suspensions	•0	Licence Suspension	0	Licence Suspension
	How long do you think the maximum suspension is?		How long do you think the usual suspension is?		How long do you think the suspension should be?
	12 hours or less		12 hours or less		*O 12 hours or less
	13-24 hours/one day		"O 13-24 hours/one day		13-24 hours/one day
	<sup>66</sup> ○ 2-7 days		™○ 2-7 days		<sup>60</sup> ○ 2-7 days
	** 2-3 weeks		™O 2-3 weeks		MO 2-3 weeks
	*O 1-2 months		™O 1-2 months		<sup>™</sup> O 1-2 months
	CO 3-5 months		™○ 3–5 months		<b>"</b> O 3–5 months
	<sup>M</sup> ○ 6 months - 1 year		6 months - 1 year		6 months - 1 year
	More than 1 year		More than 1 year		More than 1 year
	*O Dan't know		*O Don't know		Don't know
0	Fine	70	Fine	"0	Fine ,
	How much do you think the maximum fine is?		How much do you think the usual fine is?		How much do you think the fine should be?
	** \$50 or less		*O \$50 or less		*O \$50 or less
	*O \$51-\$100		<sup>10</sup> \$51-\$100		°O \$51-\$100
	MO \$101-\$200		™○ \$101-\$200		*O \$101-\$200
	*O \$201-\$500		*O \$201~\$500		*O \$201-\$500
	*O \$501-\$1,000		*O \$501-\$1,000		*O \$501-\$1,000
	1°O \$1,001-\$2,000		"O \$1,001-\$2,000		17O \$1,001-\$2,000
	*O Over \$2,000		*O Over \$2,000		*O Over \$2,000
	*O Don't know		*O Don't know		*O Don't know
0	Jail Sentence	-0	Jail Sentence	-0	Jail Sentence
	How long do you think the maximum sentence is?		How long do you think the usual sentence is?		How long do you think the sentence should be?
	*O 24 hours/oneday/overnight		<sup>M</sup> O 24 hours/oneday/overnight		<sup>20</sup> 24 hours/oneday/overnight
-	70 2-7 days		20 2-7 days		2-7 days
	<sup>22</sup> C 2-3 weeks		2-3 weeks		<sup>22</sup> O 2-3 weeks
	1-2 months		1-2 months		240 1-2 months
	and 3-5 months		<sup>25</sup> C 3-5 months		a 3-5 months
	14 6 months or more		NO 6 months or more		6 months or more
	Don't know		Don't know		<sup>™</sup> O Don't knów
oi	Insurance cancelled/rates raised	70	Insurance cancelled/rates raised	20	Insurance cancelled rates raise
	Loss of points	<b>*</b> O.	Loss of points	70	
	There are no penalties	*0	There are no penalties	*0	
	Other (specify)	70		"0	
	Don't know	#O		*0	Don't know

hat do you think the penalties <u>should be</u> for a first drinking and driving com omebody was seriously hurt or killed? Anything else?				
C Licence Suspension				
How long do you think the suspension should be?				
12 hours or less				
<sup>62</sup> O 13-24 hours/one day				
MO 2-7 days				
et 2-3 weeks				
es 1–2 months				
<sup>67</sup> ○ 3–5 months				
6 months - 1 year				
More than 1 year				
™O Don't know				
11 Fine				
How much do you think the fine should be?				
120 \$50 or less				
13 S51-\$100				
14O \$101-\$200				
¹5○ \$201~\$500				
<sup>16</sup> O \$501–\$1,000				
17O \$1,001-\$2,000				
<sup>16</sup> O Over \$2,000				
19 Don't know				
23 2-7 days  23 2-3 weeks  24 1-2 months  25 3-5 months  26 6 months or more  27 Don't know  Insurance cancelled rates raised				
29 Coss of points				
There are no penalties				
n Other (specify)				
12 C : Dan't know				
i. During the past 12 months, have you used any of the following substa	inces?	used	last time did you d hours of u	rive w
No	Yes	Yes	No	Don't
Prescription drugs such as sleeping pills, diet pills, tranquilizers or antidepressants?	<b>2</b> 0 -	→ <sup>63</sup> O	**C	05
Other prescription drugs such as heart medication, insulin or antibiotics?	<b>"</b> 0 —	→ °*0	on C	10
Over-the-counter drugs such as codeline, antihistimines or cold medications?	<sup>12</sup> O -	→ °0	14°C	15
Marijuana or hashish?	70 -	→ °C	***	2:
Citize drives such as I SD heroin, mescalin or cocaine?	22C -	→ <sup>2</sup> C	240	

CL	ASSIFICATION QUESTIONS
76.	Now I'd like to ask you a few questions about yourself.  INTERVIEWER: Ask or confirm  How old were you on your last birthday?
77.	Sex:  INTERVIEWER: Ask or confirm  1 Male 2 Female
78.	How much do you currently weigh?  2
	What is your current marital status?  ¹C Single (never married)  ²C Married, including common-law  ²C Living with partner  ⁴C Separated  ⁵C Divorced  ⑤ Widowed
80.	What is the highest level of education you have ever attended or complèted?  ¹O No schooling ²O Elementary school
	College diploma  Some secondary or some high school  College diploma
	Come university  Come university degree  Compared training
31.	Which of the following best describes your main activity during the past 12 months? Were you mainly  Go to 83  Go to 82  a student?  Go to 86  Go to 86  Go to 86

82.	Old you have a job or business at any time during the past 12 months?  7 Yes Go to 86
83.	For whom do (dld) you work?
84.	What kind of business, industry or service is (was) that?
85.	What kind of work do (dld) you do?
<b>87</b> .	French  Other  What was your household's total income from all sources before taxes and deductions for 1987? Was it
	³O Other
	<sup>18</sup> O less than \$20,0007
	20 \$10,000 or more? ————————————————————————————————————
	28 less than \$40,000? 28 less than \$30,000? 28 \$30,000 or more?
	22 S40,000 or more? 15 less than \$60,000? 260,000 or more?
	**C No income
	90 Don't know

The state of the s

AV	WARENESS QUESTIONS					
88.	With	nin the past 12 months, do you recall having seen or heard any advertising messages dealing with drinking and				
	10	Yes <sup>2</sup> O No —— Go to 91				
89.	Whe	ire did you see or hear these messages? Arrywhere else? (Mark all that apply)				
		In a newspaper				
	20	On a biliboard				
	83O	On the radio				
	40	On the television				
	**0	On public transportation				
	<b>*</b> 0	In a magazine				
	er 0	On a bumpersticker				
	040	Other (specify)				
		Dan't know				
90.	Wha	t do you recall most from the messages you saw or heard? (Mark ail that apply)				
		Don't drink and drive				
	20	Accidents happen/people can get hurt when you drink and drive				
		Penalties for driving while impaired				
	40	Friends don't let friends drink and drive				
		Personal responsibility to stop drinking and driving				
		Specific ad or image (Do not specify)				
		Other (specify)				
		Don't know/don't remember				
91.	Are :	you aware of any groups or organizations that have been campaigning against drinking and driving?				
	10					
92.	Whic	h ones? (Mark all that apply)				
	070	MADD, parents of victims groups				
	OZO	SADD, student groups				
	030	Government departments (federal, provincial or municipal)				
	04 5	AA (Alcoholics Ananymous)				
	95 -	EAP (Employee Assistance Programs)				
	<b>34</b> O	Breweries and distillers				
	<b>97</b> C	Police				
	080	Radio, TV stations, public personalities				
	O**	Church groups				
		Local community groups				
		Counterattack (B.C. only)				
		Other (specify)				
		Doe't know				

93.	Are you presently involved with any of these groups or organizations?
	'C Yes Go to 95
	2€ NO
4.	Would be prepared to support, either financially or with your time, activities in your community designed to reduce drinking and driving?
	TO Yes TO No To Con't know
15.	Are you aware of any programs that provide alternative transportation to people who have had too much to drink  'O Yes   'O No —— Thank respondent and end interview
6.	Which ones?
	10 University-based programs
	Municipal transportation (e.g., buses, subways)
	<sup>1</sup> C Brewery/distiller-sponsored program
	*O Hotel/tavern-operated program (e.g., designated driver program)
	Municipal program (e.g., Nez Rouge)
	OVolunteer organizations in the community
	Other (specify)
	O Don't know
	O CONT ADM
S.	Comments:

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## SPECIAL SURVEYS GROUP PROGRAMS

SURVEY MONTH: March 1988

TITLE: The Survey of Job Opportunities

SPONSOR: Labour Force Survey Activity Division

SURVEY METHOD: Personal / Telephone Interview

SAMPLE SIZE: All rotation groups

OBJECTIVES: The purpose of this survey is to identify

the actual participation patterns of persons inactive due to labour market conditions or their own preferences;

- 2) the desired participation patterns of persons inactive due to labour market conditions or their own preferences;
- 3) the type of work desired by such individuals;
- 4) those persons who have become discouraged looking for work and believe that no suitable jobs are available;
- 5) those persons who are seriously interested in taking a job but know that jobs are not available in their community due to seasonal or economic conditions.

PROJECT MANAGER: Denis Lefebyre

MICRODATA: Yes Price No X \$ 300

	Y OF JOB OPPORTUNITIES	CONFIDENTIAL when completed
NO page - the No. Green name	Assignment No. Surname	1 FORM NO 06
5 6		
TERVIEWER CHECK ITEM: On FORM 05  If blank in item 50 END.	14 DID WANT A JOB LAST WEEK?	19 DOES WANT A FULL-TIME JOB OR A PART-TIME JOB?
If "Yes" or "No" in item 50.	Yes 'O No 'O go to	Full-time
Complete the 2 reference items	15 WHAT WAS THE MAIN REAS	Part.time
below by copying from the FORM 05	WORK LAST WEEK?	Either full-time or part-time
6 IN THE PAST 6 MONTHS MAS: LOOKED FOR WORK? .: .		20 WOULD MOVE TO
Yes 1 No 2	16 WAS THERE ANY REASON	PROVINCE IF A SUITABLE JOB WERE OFFERED?
7 IN THE PAST 4 WEEKS WHAT HAS DONE TO FIND WORK?	THAT COULD NOT TAKE	A
Nothing O		Yes No 2
OMPLETE THE REMAINING ITEMS ON THIS FORM 06,	Enter code and	ANOTHER PROVINCE IF A SUITABLE JOB WERE
EFERRING TO ITEMS 56 AND 57 ABOVE. S NECESSARY	go to 24	OFFERED?
0 INTERVIEWER CHECK ITEM:	17 DOES WANT A JOB TO LAST FOR LESS THAN 6	Yes No No O
• If "Yes" in item 56 O go to 11	MONTHS OR MORE THAN 6 MONTHS?	WORKING AT ANYTIME IN THE NEXT 6 MONTHS?
• If blank in item 56 'O END	6 months or less	go to 18 Yes \( \) No \( \) \( \) \( \) 24
1 INTERVIEWER CHECK ITEM:  • If "Nothing" circle marked	More than 6 months <sup>2</sup>	23 DOES EXPECT TO BE
in Item 57 go to 14	Length of employ- ment does not	10 19 WORKING FOR A FORMER EMPLOYER?
2 HAS LOOKED FOR WORK AT ANYTIME IN THE	matter	Yes O No O
PAST 12 MONTHS?	18 WHAT IS THE MAIN REASO	
Yes 'O No 'O go to 14	THAT WANTS A JOB TO	Enter HRD page-line number of person
3 WHAT WAS THE MAIN REASON THATSTOPPED LOOKING FOR WORK?	MONTHS?	providing the above information.
	Enter Code	
Enter code	Enter Code	
Enter code CODES	A Own illne	ss or disability
	A Own illne B Child car C Other per	e responsibilities - own children sonal or family responsibilities
	A Own illne B Child car	e responsibilities - own children rsonal or family responsibilities school
CODES  A Own illness or disability	A Own illne B Child car C Other per 16 D Going to E Already h N No reaso	e responsibilities - own children rsonal or family responsibilities school ras a job n given
CODES	A Own illne B Child car C Other per 16 D Going to E Already h N No reaso O Other - S	e responsibilities - own children rsonal or family responsibilities school as a job
A Own illness or disability B Child care responsibilities – own child C Other personal or family responsibility D Going to school	A Own illne B Child car C Other per 16 D Going to E Already h N No reaso O Other - S	e responsibilities - own children sonal or family responsibilities school as a job n given pecify in NOTES
A Own illness or disability B Child care responsibilities – own child C Other personal or family responsibility D Going to school E No longer interested in finding work	A Own illne B Child car C Other per 16 D Going to E Already h N No reaso O Other - S ies  A Own illne	e responsibilities - own children rsonal or family responsibilities school ras a job n given
A Own illness or disability B Child care responsibilities – own child C Other personal or family responsibility D Going to school E No longer interested in finding work 13 F Waiting for recall (to former job) 15 G Has found new job	A Own illne B Child car C Other per 16 D Going to E Already h N No reaso O Other - S ies  A Own illne B Child car C Other pe	e responsibilities - own children resonal or family responsibilities school as a job n given pecify in NOTES  ess or disability e responsibilities - own children resonal or family responsibilities
A Own illness or disability B Child care responsibilities – own child C Other personal or family responsibility D Going to school E No longer interested in finding work 13 F Waiting for recall (to former job) 15 G Has found new job H Waiting for replies from employers	A Own illne B Child car C Other per 16 D Going to E Already h N No reaso O Other - S  A Own illne B Child car C Other pe D Continuir school fu	e responsibilities - own children resonal or family responsibilities school as a job n given pecify in NOTES  ess or disability e responsibilities - own children resonal or family responsibilities ag with education or returning to
A Own illness or disability B Child care responsibilities – own child C Other personal or family responsibility D Going to school E No longer interested in finding work 13 F Waiting for recall (to former job) 15 G Has found new job H Waiting for replies from employers I Believes no work available (in area, of suited to skills)	A Own illne B Child car C Other per 16 D Going to E Already h N No reaso O Other - S  A Own illne B Child car C Other pe D Continuir school fu No jobs a	e responsibilities - own children resonal or family responsibilities school as a job n given pecify in NOTES  ess or disability e responsibilities - own children resonal or family responsibilities ag with education or returning to ill-time available (in area or suited to skills
A Own illness or disability B Child care responsibilities – own child C Other personal or family responsibility D Going to school E No longer interested in finding work 13 F Waiting for recall (to former job) 15 G Has found new job H Waiting for replies from employers I Believes no work available (in area, or	A Own illne B Child car C Other per 16 D Going to E Already h N No reaso O Other - S  A Own illne B Child car C Other pe D Continuir school fu No jobs a which las F Expects 1	e responsibilities - own children resonal or family responsibilities school as a job n given pecify in NOTES  ess or disability e responsibilities - own children resonal or family responsibilities ag with education or returning to lil-time available (in area or suited to skills at more than six months) or return to a former job or
A Own illness or disability B Child care responsibilities – own child C Other personal or family responsibility D Going to school E No longer interested in finding work 13 F Waiting for recall (to former job) 15 G Has found new job H Waiting for replies from employers I Believes no work available (in area, or suited to skills) N reason given	A Own illne B Child car C Other per 16 D Going to E Already h N No reaso O Other - S  A Own illne B Child car C Other per D Continuir school fur 18 E No jobs a which las F Expects t employer	e responsibilities - own children resonal or family responsibilities school as a job n given pecify in NOTES  ess or disability e responsibilities - own children resonal or family responsibilities ag with education or returning to lil-time available (in area or suited to skills at more than six months) or return to a former job or
A Own illness or disability B Child care responsibilities – own child C Other personal or family responsibility D Going to school E No longer interested in finding work 13 F Waiting for recall (to former job) 15 G Has found new job H Waiting for replies from employers I Believes no work available (in area, or suited to skills) N reason given	A Own illne B Child car C Other per 16 D Going to E Already h N No reaso O Other - S  A Own illne B Child car C Other per D Continuir school fur 18 E No jobs a which las F Expects t employer	e responsibilities - own children resonal or family responsibilities school as a job n given pecify in NOTES  ess or disability e responsibilities resonal or family responsibilities gwith education or returning to ill-time available (in area or suited to skills at more than six months) or return to a former job or

FRANÇAIS AU VERSO

Authority - Statistics Act. Chapter 15-Statutes of Ganada 1970 - 71 - 72

### SPECIAL SURVEYS GROUP PROGRAMS

SURVEY MONTH :

April 1988

TITLE :

Survey of Consumer Finances

SPONSOR:

Household Surveys Division

SURVEY METHOD:

Mail/Telephone collection

SAMPLE SIZE :

Rotation group 1, 2, 3 and 6 and rotation 5 from SCF

1987

OBJECTIVES :

The survey is important because it is the only source providing up-to-date information on the distribution of income for families as well as average income for important socio-economic groups such as senior citizens, single parent families, unemployed individuals and the younger generation. Also income patterns of families of different sizes and from different provinces are essential in planning future policies that can provide

PROJECT MANAGER:

Kevin Bishop

MICRODATA:

Yes

Price \$800

for the well-being of all canadians.

No

	F	Please complete to			FORM No. CI	
lame of respondent					Français au	ABLRO
Statistics Canada Statistique Canada					7	
Household Division des Surveys enquêtes-		Authority - Statement Act. Chapter 15	Szan nes of	Canada 197	70-71-72	
Division menages		This act prohibits the discosure by				oould
1987 Income questionnaire To be completed by persons 15 years or age and		reveal the idenoity of an individual.				
R.O. Docket No		ev date Assignment	rt No		IRD page - time No.	
n.o. 333113						
1 2	3 Mo.	Yr.		,		
URING THE TWELVE MONTHS ENDING DECEM	MBER 31 1987 DID YOU	RECEIVE ANY INCOME FROM		2	0 1	Т
HE FOLLOWING SOURCES? IF "YES". PLEASE	"NO" CIRCLE AND PROC	CIRCLE AND ENTER AMOUNT	1	I.C.		
NOICATE A LOSS ENTER THE AMOUNT AND WE	RITE "LOSS" ABOVE.)		1	25		
LEASE CONSULT THE ACCOMPANYING GUID	E WITH ITS DETAILED I	NSTRUCTIONS. TO SIMPLIFY				lone
OMPLETION OF THIS FORM.			ive ↑	DOLL/	VAS	CEI
			40			
WAGES and SALARIES before deductions			Ys C+	02		
2. MILITARY PAY and ALLOWANCES			<b>WC</b>	An		
			18 () *	03		
3. Net income from NON-FARM SELF-EMPLOY	MENT		Vas ( ) ♦	04		
			100			
4. Net income from FARM SELF-EMPLOYMENT			1#C+	05		
5. Nel income from ROOMERS and BOARDERS			- VO C	-		
6. INTEREST on bonds, deposits and savings of	ertificates, Canada Savings	s Bonds, cash bonuses for	*#J*	06		
CSB's - see note in Guide, item 6			\w_() ♦	07		
	oble securit		<b>100</b>			
7. DIVIDENDS, actual amount received (not taxa			*±0 *	08		
<ol> <li>OTHER INVESTMENT INCOME (interest rece cash dividends from life insurance policies)</li> </ol>	eived from loans or monga	ges,	₩O.	09		-
			*≲⊜*	03		
9. FAMILY ALLOWANCES			's() ♦	10		
0. OLD AGE SECURITY PENSION. GUARANTEED INCOME SUPPLEMENT	from federal governmer Report provincial suppli		<b>%</b> C			
SPOUSE'S ALLOWANCE	in question 13		Yac () ♦	11		
11 CANADA or QUEBEC PENSION PLAN BENE	FEITS		₩0			
11. CANADA OF QUEBEC PERSION POOR BEING	SFITS		`*es	12		
12. UNEMPLOYMENT INSURANCE BENEFITS.	total benefits before tax de	eductions	No C	13		
			` 'es () •	13		
13. SOCIAL ASSISTANCE and PROVINCIAL IN			'asO#	14		
14. OTHER INCOME from GOVERNMENT SOUP PLEASE SPECIFY	RCES:		. 40			
Report provincial lax credits and allowances			7#O	15		
15. RETIREMENT PENSIONS, SUPERANNUATI	ION and ANNUITIES - see	note in Guide, tem 15.	40 €			
PLEASE SPECIFY			`#C	16		
16. OTHER MONEY INCOME: PLEASE SPECIF	Υ		40	17		-
17. TOTAL, sum of entries in questions 1 to 16		101007	\#○ \\0\			
17. TO TAC, Suitt of entries in questions - to 10				18		
<ol> <li>TAXABLE CAPITAL GAINS - Taxable portions See Guide, item 18</li> </ol>	on of capital gains realized	in 1987.	Yo C			
and dutie, not be a second			185.0	19		
19. INCOME TAX (federal plus provincial) - total	il payable on 1987 income	and capital gairs	135	▶ 20		
			¥0.			
20. PROVINCIAL TAX CREDITS and ALLOWAR	NCES - see Guide, item 2	U	-	<b>2</b> 1		
21. CHILD TAX CREDIT received from rederal p	program only - see Guide.	item 21	40			
			* 85.	<b>→</b> 22		
22. FEDERAL SALES TAX CREDIT - see Guide	e, rtem 22		,40			
Remarks:			2+			
			- 50			
			2.			

### SPECIAL SURVEYS GROUP PROGRAMS

SURVEY MONTH:

April 1988

TITLE :

Survey of 1986 Graduates

SPONSOR :

Employment and Immigration Canada

SURVEY MONTH:

Telephone Interview

SAMPLE SIZE :

53,136 persons

OBJECTIVES :

- To obtain information for labour market analysis of a key youth group at a key time, focussing on employment occupation and geographic shifts. These data and analyses will be useful for policy development with respect to education / training and the labour market.
- 2. To obtain information on the relationship between education / training and labour market experiences and the exposure of graduates to additional training in general and the Canadian Job Strategy programs in particular.
- 3. To extend available information required to improve occupational supply and demand projection models and to conduct related studies of supply-demand inbalances in the labour market.
- 4. To obtain data regarding labour-market experiences of graduates, with special emphasis on employment and occupations, for use in counselling on careers and postsecondary education course selections.
- 5. To obtain information on labour-market experiences of members of target groups (such as women, native people and the disabled, which permits comparative analyses useful in the formulation of job equity policies.

No

PROJECT MANAGER: Phil Stevens

Yes

MICRODATA:

Available upon request

# SURVEY OF 1986 GRADUATES UNIVERSITY AND COLLEGE PROGRAMS QUESTIONNAIRE

Confidential when completed Authority — Statistics Act, Statutes of Canada, 1970-71-72, Chapter 15.

				Sequence #:						
Inte	rviewer ni	umber		Interviewer's name			Senior Ir	iterviewer'	name	
			RI	ECORD OF CALLS/SUP	PLEMENT	ARY TRA	QNG			
	Date	Start Time	Finish Time	Con	nments/Re	suits		Telep Num		Inter- viewer's Initials
1										
2										
3										
4										
5							921			
6										
7										
8										
9										
10										
11										
12										
13.										
14										
15										
	Total n	umber of calls				l	Length of int	erview	mi	nutes
FINA	L STATUS	OF QUESTION	NAIRE;			-11				
Cont	tacted and	completed in	terview	010	Can't be	reached	by phone		. * * * * * * * * * * * * * * * * * * *	
Cont	tacted and	partial interv	iew		Unable	to trace	1 * 3 0 > 4 0 > 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0			010
Cont	tacted but	refused			Intervie	w ended	in item 2			190
Alre	ady contac	rted (duplicati	e)		No longer fiving in Canada				110	
Abse	ent for dur	ation of surve	y		Decease	d	***************************************	•••••	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	120
Unti	sted numb	er	******************************		Other				,	110
Noa	nswer	***************************************								

		A AMERICAN PROPERTY OF THE PARTY OF THE PART				
	A. POSTSECONDARY STUDIES	4. INTERVIEWER CHECK-ITEM:				
1.	Hello, I'm(your name)of Statistics Canada We're doing a survey of 1986 graduates for Employment and Immigration Canada. While your participation is voluntary, your assistance is essential to accurately	If entry in line B,  check ¹○ → go to 5				
	reflect the employment experiences of graduates. Your answers will be confidential under the Statistics Act.					
	Did you obtain or complete the requirements for a	Otherwise, 1 — go to 6				
	(read line A) program in 19867 (By "complete the requirements" I mean write the last exam or submit the last paper, report or project or defend your thesis)	5. Was your MAJOR field of study or specialization for this program in(read line 8)?				
	Yes 10 go to 4	Yes 30 go to 7a				
	No 2O	№ 4О				
2.	Did you obtain or complete the requirements for any degree, diploma or certificate in 1986?	<ol> <li>What was your MAJOR field of study or specialization for your(read line A) program in 1986? (If two of equal importance, enter both)</li> </ol>				
	Yes <sup>1</sup> O					
	No 4O —— end interview					
3.	What degree, diploma or certificate did you obtain or complete the requirements for in 1986? (Do not read					
	list; check one only; if more than one, check the highest-level degree etc.)					
	Trade-vocational:					
	Certificate or diploma 17 O					
	Community College, CEGEP, Technical Institute, School of Nursing:					
	Certificate or diploma					
	University:  Certificate or diploma below bachelorlevel	7a. Did you have any other MAJOR field(s) of study or specialization for your(read line A) program in 1986?				
	Bachelor's degree (e.g. B.A., B.Sc., B.A.Sc., 4-year B. Ed.)	Yes 10 - 7b. What was your other MAJOR field of study or specialization? (If more than one, enterall)				
	Certificate or diploma above bachelorlevel					
	Master's degree (e.g., M.A., M.Sc., M.Ed)					
	Degree in medicine, dentistry, veterinary medicine, law, optometry					
	or theology (M.D., D.D.S, D.M.D., D.V.M., LL.B., O.D., M.DIV.), or 1-year B. Ed. after another Bachelor's					
	degree					
	Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)					
	Other: (Specify)	8. In what month and year did you complete the				
		requirements for the (read line A) program? (By "complete the requirements" I mean write the last exam or submit the last paper, report or project, or defend your thesis.)				
INTE	ERVIEWER: Correct line A of the tracing form	1985 10 1986 10				
11/6	qui eu, tren cuntinue.	Month				

<ol> <li>What was the normal length in academic years of the (read line A) program? (Do not read list; check one</li> </ol>	14. INTERVIEWER CHECK-ITEM:  If yes in 11 OR yes in 13
only)	if yes in the one yes in to
Less than 6 months	check 10 go to 15
6 months – less than one year	Otherwise <sup>2</sup> O go to 18a
	15. How long did it take you to complete the (read line
One year 03 🔾	A) program, including any periods of absence from your studies?
13 months – less than two years	1. OR 2. Number of months years
Two years 45 🔾	
	16. How much of this time were you enrolled (read list)
Three years 06 🔾	full-time?
	ाधा-धानवर
Four years 07 O	1. OR 2.
Five years	Number of Number of years
	part-time?
More than five years	part-omer
	3 OR 4.
No "normal" length, it varies 16 O	Number of Number of months years
Don't know	17. What were the reasons you did not attend the program full-time or on a continuous basis? (Do no read list; check one or more)
10. Was it a co-op program? (This is a program that is	
specifically called a cooperative program by the institution, and that alternates periods of paid work and study)	Lack of money
Yes 1O	Family responsibilities
No 2O	Had a full-time job
11. Were you ever registered as a part-time student for	
the(read line A) program?	Had a part-time job
Yes 30	
	Health reasons 5 O
No •Ogo to 13	Stress
12. During your final term in the program were you	
12. During your final term in the program, were you enrolled as a full-time or as a part-time student?	Program not offered full-time
E. II simo	
Full-time 5 O	Other reasons (Specify)
Part-time	
13. During the(read line A) program did you ever take a leave of absence from your studies?	
Yes <sup>7</sup> O	

Before you started the program, what was the highest level of education you had completed? (Do not read list; mark one only)	18b. What was your major field of study or specializat (If two of equal importance, enter both)
Elementary •• O	
Secondary	go
Some secondary	to 19
Completed secondary or technical high school	
Trade-vocational	
Some trade-vocational 4 🔾	
Trade-vocational diploma or certificate	
	111111111111111111111111111111111111111
College	
Some college or some CEGEP	
Completed college or completed	
CEGEP or nursing school diploma or certificate 47 0	
University	
Some university (incl. university	
transfer in Alta. and B.C.)	
Diploma or certificate below bachelor level	
Bachelor degree (e.g. B.A., B. Sc. B.A.Sc, 4-year 8. Ed.)	1
5.7.3., - year 5. 20.7	
Diploma or certificate above bachelor	
level	
Masters degree (e.g., M.A., M.Sc., M.Ed.)	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Degree in medicine, dentistry,	
veterinary medicine, law, optometry or theology (M.D., D.D.S, D.M.D., D.V.M., LL.B., O.D., M.DIV.) or 1 year	
B.Ed. after another Bachelor's degree 13	
Earned doctorate (e.g., Ph.D., D Sc., D.	
	111111111111111111111111
Other (Specify)	
Linguistic	1111111111111111111111111

B. WORK AND OTHER EXPERIENCES BEFORE COMPLETING POSTSECONDARY STUDIES.	25. What kind of work did you do? (Give full description, e.g. elementary school teacher, manager of a				
19. Now some questions about the time before you completed the(read line A) program. During that period, did you ever work full-time, that is, 30 or more hours a week? Do not include summer jobs held while	biological research department, shoe salesperson)				
you were a student.					
Yes 1O					
W- 10					
No 10 go to 27					
20. What was the total number of months or years of full- time work experience you had before completing the (read line A)program? Please add up the durations of all your full-time jobs, except for summer jobs held while you were a student. (Do not read list; check one					
anly)	<ol> <li>In this work, what were your most importan activities or duties? (Give full description, e.g. teaching geography, managing a research lab., selling</li> </ol>				
Less than 6 months 1○ → go to 27	shoes)				
6 months – less than 1 year 2 O	to a second the				
From 1 year to less than 3 years 3 O					
From 3 years to less than 5 years 4 O					
From 5 years to less than 7 years 5 🔾					
7 years or more					
Dan'tknow					
21. Before you completed the(read line A) program,					
did you work at a full-time job for the same employer for a period of six consecutive months or more?  Yes 10	27. During the twelve months before you enrolled in th(read line A) program, what was your maje activity? For example, going to school, working looking for work, household responsibilities. (Chec				
4	one only)				
No 10 go to 27	Going to school				
22. In what year did you last work at a full-time job that lasted six months or more?	Working				
	Looking for work				
1 9 OR:	Household responsibilities 40				
Still working at it	Other (Specify)				
23. For whom did you work? (Name of business, government department or agency, or person)					
	28. What kind of school was that?				
24. What kind of business, industry or service is this? (Give full description, e.g. elementary school, municipal government, retail shoe store)	High school				
	Vocational school or institute 2				
	College or CEGEP				
	University				
	Other				

29.	During the 12 m (read line A). residence in(re		36. Was the job you had during that week a full-time job, that is, usually 30 or more hours a week?				
	Yes 'O	go to 32a					go to 41a
	No 20			No	o 10		
30.	In what province	was it?		37. Di	id you ha the futur	ve a fu	Il-time job to start at a definite date
	Nfld. 410	Man.	o, O	Y	es 10	-	go to 41a
	PEI 62 O	Sask.	<b>©</b>	N	0 40		go to 40
	N.S. 03 O	Alta.	09 🔘				eek of January 1987, did you have a
	N.8. 04O	8.C.	100				efinite date in the future?
	Quebec #O	Yukon or NWT	110	Υ.	es 10		38b. Was that job full-time, that
	Ontario ⊯O	Outside Canada	120	Tell's			is, 30 or more hours a week?
24	Did you may for	om that province/country	nacifically				Yes 10 go to 41a
31.		(read line A) program o		N	0		No ♥○ → go to 40
						l	
	Enroll	10			Vere you anuary 19		g for a job during the last week of
	Other reason	20					
	Did not move	30			es 10		
	CLASTIA		No → go to 41a  40. Were you looking for a full-time job?				
27.	C LAST W	nead since					
340.	you completed the last week of and a half ago,	tions about your experie the(read line A) progra January 1987, that is, ab were you enrolled in	am. During out a year any credit		'es 10		
			D. LAST WEEK OF OCTOBER 1987.				
	Yes 40	or part-	41a. Now, some questions about the last week of October 1987. During that week, were you enrolled in any credit courses at an educational or training				
	No 5O	Full-time <sup>2</sup> O			nstitution		
	Don't know 40	Part-time *		Y	es 10	-	41b. Was it full-time or part- time?
				1	40 °C	)	Full-time 40
33.	During that wee business?	k, did you do any work	at a job or	1	Don't		Part-time 10
	Yes 10	go to 36		42.	Ouring th	at we	ek, did you do any work at a job or
				,	res +0		➤ go to 45
34.	That week, did y you did not work	you have a job or busines ??	ss at which		No 70		
	Yes 10				That wee		you have a job or business at which k?
	No 40 -			Yes 10			
35.	Were you absen	temporary				⇒ go to 47a	
	layoff?			44.			t from work because of a temporary
					3,5117		
	No	.0			Yes 10		
	Don't remember	,0			No 40		

45. Was the job you had during that week a full-time job.	51. INTERVIEWER CHECK-ITEM:		
that is, usually 30 or more hours a week?	If any "Yes" in 50,		
Yes 10 go to 50	check O go to 53		
No •O	Otherwise 2O go to 52		
46. Did you have a full-time job to start at a definite date in the future?	52. Have you always had a job during the entire two years or so since you completed the(read line A) program?		
Yes 'O go to 50			
No 10 go to 49	Yes 30 go to 63		
47a. During the last week of October 1987, did you have a job to start at a definite date in the future?	No 4O		
Yes 10 — 47b. Was that job full-time, that is, 30 or more hours a week?	53. Considering all these reasons, how long in total were you without a job during that period?		
Yes 10 go to 50	Number of months		
No 10 No 40 go to 49	54. Was there any time during this(read answer in 53) period when you were NOT looking for a job?		
48. Were you looking for a job during the last week of October 1987?	Yes 10		
Yes 10	No 60 go to 61		
No 60 go to 50	55. At any time during this(read answer in 53) period,		
49. Were you looking for a full-time job?	was there any time you WERE looking for a job?		
Yes <sup>7</sup> O	Yes 70		
No ®O	No 4○ go to 59		
E. PERIOD SINCE COMPLETING POSTSECONDARY STUDIES.	S6. During this(read answer in 53) period, how long in		
50. Now some questions about the entire two years or so since you completed the(read line A) program. During that period, were you ever without a job	total were you looking for a job?		
(Read reasons)	Number of months		
Yes No			
a. because you were going to school?	(INTERVIEWER: Q.56 must not be more than Q.53)		
3010017	57. At any time during the(read answer in 56) period you were looking for a job, were you a full-time		
b. because you had personal or family responsibilities?	student?		
	Yes 10		
c. because you couldn't find work? 5 0	No 20 go to 59		
d. OR for any other reason? 10 = 60	58. How much of this(read answer in 56) period were you a full-time student?		
	Number of months		
	(INTERVIEWER: Q.58 must not be more than Q.56)		

59. During the period when you were <u>NOT</u> looking for a job, were you ever waiting to start a new job or return to an old job?	67. Old you have more than one job or business that week?
	Yes JO)
Yes IO	Yes JO go to 72
	No 10)
No ←	68a. During that week of May 1 to 7, did you have a job to start at a definite date in the future?
60. How long were you waiting? (That is, how long were you waiting to start a new job or return to an old job	
during the period you were NOT looking for a job?)	Yes 10 68b. Is that job full-time, that is,
	30 or more hours a week?
	Yes 10 ga to 72
go to 63	No. 10
Number of months	No 40 go to 71
61. At any time during the(read answer in 53) period	69a. During the week of May 1 to 7, were you looking for a job?
you were looking for a job, were you ever a full-time student?	
	Yes 10 69b. Were you looking for a full-time job?
Yes 50	
No •○ go to 63	Yes 10 go to 98
30 to 03	No 20 No 40)
62. How much of this (read answer in 53) period were you a full-time student?	NO 10
you a fair-time student?	70. What was the main reason you did not look for a joi that week? (Do not read list; check one only)
Number of months	Own illness or disability
(INTERVIEWER: Q.62 must not be more than Q.53)	Personal or family responsibilities
F. WEEK OF MAY 1 -7, 1988.	Going to school
63. The next few questions refer to the week of May 1 to 7, that is, week(s) ago. During that week, did you work at a job or business?	No longer interested in finding a job
	Waiting for recall (to former job) ☞○
Yes 10	
No 20 go to 65	Has already found a new job ⊶○ go to 98
64. Did you have more than one job or business that week?	Majoing for spelling from amplicate NO
	Waiting for replies from employer ***O
Yes 30)	Could not find the kind of job
go to 72	wanted
NO 40)	
65. That week, did you have a job or business at which you did not work?	Discouraged with looking
Yes 10	No reason given 10 O
No 60 — go to 68a	Other reason (Specify) 11 O
66. Were you absent from work because of a temporary	
layoff?	
Yes 10	
No 4O	

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71. What is the main reason you had a part-time job? (Do not read list; check one only)	<ol> <li>What kind of work did you do? (Give full description, e.g., elementary school teacher, manager of a biological research department, shoe salesperson)</li> </ol>			
Own illness or disability	Same kind of work as in 25 <sup>3</sup> O			
Common to the situation of the situation	OR:			
Personal or family responsibilities ↓ ○				
Going to school				
Could only find part-time work				
Did not want full-time work				
Full-time work is under 30 hours a week	75. In this work, what were your most important activities or duties? (Give full description, e.g., teaching geography, managing a research lab., selling shoes)			
Other reason (Specify)	Same activities or duties as in 26 40			
	OR:			
	1			
respondent had (or will have) more than one job, ask about the main job, i.e., the one usually worked at for the most number of hours.	\$ 0 0 0 0  Don't know 10  Refused 40			
72. For whom did you work? (Name of business,	77. Do you think the(read line A) program was			
government department or agency, or person)	intended to prepare you for a specific job or career?			
Same employer as in 23 10	Yes 10			
OR:				
	No 2O go to 79			
	78. Was the job you had in the week of May 1 to 7 one fo which your educational program was designed?			
	Yes			
	No			
73. What kind of business, industry or service is this? (Give full description, e.g. elementary school,	Don't know1 O			
municipal government, retail shoe store)	79. Were you a paid worker or self-employed?			
Same business as in 24 - 20	Paid worker			
OR:	raid worker			
	Self-employed			
	Self-employed			
	Other (e.g., unpaid family worker)			

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81. When you were selected for that job, what level of education was needed to get the job? (Do not read list; check one only)	92a. Did the employer specify that it must be in a specific field or fields of study?
Oon't know	Yes 1Ó 82b. What field(s) of study? (If two of equal importance, enter both)
No qualifications specified №  go	
High School ( 83	
Some high school	
Completed high school ⊶○	
General Postsecondary	
Some postsecondary education (level not specified)	No 20
	83. Did the employer specify that related work
Trade-Vocational	experience was essential for that job?
Trade-vocational, level not specified	Yes
Trade or vocational certificate/	No
College:	
Some college, CEGEP or similar institution	84. INTERVIEWER CHECK-ITEM:  If "Yes" in 68a,
Diploma or certificate from college, CEGEP or similar institution, incl. nursing school **O	check ←○ go to 98
	Otherwise 10 —— go to 85
University:	85. In this job, did you use any of the skills acquired from
Some university (incl. university transfer in Alta. and B.C.)	the(read line A) program?
University diploma or certificate below bachelor level	No ≀O
Degree, level not specified 12 O	
Bachelor's degree (e.g., 8.A., 8. Sc. 4-year 8.Ed.)	86. Considering all aspects of the job you had in the week of May 1 to 7, how satisfied were you with the job? Would you say that you were(read first four categories)
University diploma or certificate, level not specified	very satisfied?
University diploma or certificate above bachelor level	satisfied?
Master's degree (e.g., M.A., M.Sc., M.Ed.)	dissatisfied? 5 O
M.Ed.) 16 🔾	very dissatisfied?
Degree in medicine, dentistry, veterinary medicine, law, optometry or theology (M.D., D.D.S., D.M.D., D.V.M., LLB., O.D.,	Don't know, no opinion
M.DIV.) or 1-year B. Ed. after another Bachelor's degree	87. Considering the duties and responsibilities of that job, how satisfied were you with the money you made? Would you say that you were(read first four categories)
	very satisfied?
Other (Specify)	satisfied?
	dissatisfied?
	very dissatisfied?
	Don't know no opinion

88. Was the job you had during that week a full-time job, that is, usually 30 or more hours a week?	94. During that week, were you looking for a full-time job?
Yes 40	Yes ¬O ) go to 98
No ¹○ —→ go to 90	No 40
89. How many hours a week do you usually work at that job? (If respondent says "it varies", ask for an average of the last four weeks)	G. JOBS LASTING SIX MONTHS OR LONGER.
Number of hours	95. Have you worked at that job full-time for six months or more? (By this we mean doing the same kind of work for the same employer)
90. What is the main reason you had a part-time job? (Do not read list; check one only)	Yes 5O
Own illness or disability	
Personal or family responsibilities 2	No 6○ — go to 97
Going to school	96. Was that the FIRST job at which you worked full-time for six months or more AFTER completing the(read line A) program?
Could ony find part-time work	. Yes 10 go to 120
Did not want full-time work	No ⁴○ go to 100
Full-time work is under 30 hours a week 60	97. When did you begin that job?
Other reason (Specify)	Month 1 9
	98. Have you ever held a full-time job lasting six months or more?
	Yes 1O
91. How many hours a week do you usually work at that job? (If respondent says "it varies", ask for an average of the last four weeks)	No 2○ —— go to 121
Number of hours	99. Have you had a job at which you worked full-time for six months or more <u>AFTER</u> completing the(read line A) program?
92. When did you begin that job?	Yes 3○ —— ga to 101
Month Year	No 40 go to 121
93. Old you have a full-time job to start at a definite date in the future?	100. When did you begin the job you had in the week of May 1 to 7?
Yes 10 —— go to 98	Month 1 9
No 3O	(INTERVIEWER: The date should not be later than

101. When did you start the FIRST job at which you worked full-time for six months or more AFTER completing the(read line A) program? And when did you end it?	107. Now some questions about the time between completing the(read line A) program and the start of this job, that is, between (date in 106a) and (date in 106b). During that period, were you ever without a job(Read reasons)
Start: Month Year End: 2 1 9	Yes No
OR: Still working at it 30	a. because you were going to school?
102. For whom did you work? (Name of business, government department or agency or person)	b. because you had personal or family responsibilities?
	c. because you couldn't find work? 50 60
103. What kind of business, industry or service is this? (Give full description, e.g. elementary school, municipal government, retail shoe store)	d. OR for any other reason? (Specify)
104. What kind of work did you do? (Give full description, e.g., elementary school teacher, manager of a biological research department, shoe salesperson)	108. INTERVIEWER CHECK-ITEM;
1	If any "Yes" in 107,
	check 1○ — go to 110
1	Otherwise 2 go to 109
105. In this work, what were your most important activities or duties? (Give full description, e.g.,	109. Did you always have a job during the entire period between (date in 106a) and (date in 106b)?
teaching geography, managing a research lab., seiling shoes)	Yes 10 go to 121
	No 40
	110. Considering all these reasons, how long in total were you without a job during that period?
H. LABOUR FORCE ACTIVITIES BETWEEN STUDIES AND PRIST FULL-TIME 6-MONTH JOB.	Number of months
106. INTERVIEWER CHECK-ITEM:  a). Copy the date from item 8:	111. Was there any time during this(read answer in 110) period when you were NOT looking for a job?
Month Year	Yes 10
b). Copy the start-date from item 101:	No 20 go to 118
Month Year  If the date in b) is after the date in a).	112. At any time during this(read answer in 110) period, was there any time you WERE looking for a job?
	Yes 3O
check *O go to 107  Otherwise 'O go to 121	No 40 - go to 116

113.	<ol> <li>During this (read answer in 110) period, how long in total were you looking for a job?</li> </ol>		I. GENERAL TRAINING AND EDUCATION QUESTIONS.				
	Number of months	121.	of one to means "to	in the(rea four, where a great ex equire the	one means tent", how	t your reasons for program. On a scale "not at all" and four important was it for led in a particular	
	(INTERVIEWER: Q.113 must not be more than Q.110)		. 1	2	3	4	
114	At any time during this(read answer in 113) period you were looking for a job, were you a full-time student?		"not at ail"			"to a great extent"	
	Yes 10		,0	,O	,0	40	
	No 10 go to 116	122.	Given you	r experienc	e since grad	raduation, on the same	
115.	How much of this(read answer in 113) period were you a full-time student?		program	occupation	ou with the	skills needed in a	
	Number of months		not at	2	3	4 "to a great extent"	
	(INTERVIEWER: Q.115 must not be more than Q.113)		10	•0	10	•0	
116.	During the period when you were <u>NOT</u> looking for a job, were you ever waiting to start a new job or return to an old job?	123.	how impo	rtant was i	ane to four t for you to lemic discipli	, when you enrolled acquire an in-depth	
	Yes 10 No 40 —— go to 121		not at	2	3	4 "to a great extent"	
117.	How long were you waiting? (That is, how long were you waiting to start a new job or return to an old job during the period you were NOT looking for a job?)		10	10	10	40	
	go to 121	124.	To what e you with discipline?	an in-dept	ou feel you th knowled	r program provided ge of an academic	
119	Number of months  At any time during this (read answer in 110) period		not at	2	3	4 "to a great extent"	
	you were looking for a job, were you ever a full-time student?		°0	10	,0	*	
	Yes 1○ No 4○ → go to 121	125.	When you you to imp	decided to	enroil, how lif generally	important was it for	
119.	How much of this(read answer in 110) period were you a full-time student?		1 "not at all"	2	3	4 "to a great extent"	
	yo to 121 Number of months		10	<sup>2</sup> O	10	40	
120.	(INTERVIEWER: Q.119 must not be more than Q.110)  When did you begin the job you had in the week of	126.	To what e you with generally?	an oppor	ou feel you rtunity to	r program provided improve yoursel	
- 49 47 4	May 1 to 77		not at all	2	3	4 "to a great extent"	
	(INTERVIEWER: The date should not be later than		10	•0	,0	*0	

127. When you decided to enroll, how important was it for you to improve your changes of a good income?	132. What kind of program would you have taken: university, college or trade-vocational?		
1 2 3 4 "not at "to a great ail" extent"	University		
10 20 40	Other (Specify)		
128. To what extent do you feel your program provided you with improved chances of a good income?			
t 2 3 4 "not at "to a great extent"	133. What level of degree or diploma would you have		
10 10 10	University diploma or certificate below bachelor level		
129. Given your experiences since completing the(read line A) program in 1986, would you have selected the same educational program, a different program, or not taken any postsecondary program?			
Same	University diploma or certificate above bachelor level		
None	Master's degree (e.g., M.A., M.Sc., M.Ed.) *  Degree in medicine, dentistry, veterinary medicine, law, optometry or theology (M.D., D.D.S, D.M.D., D.V.M., LLB., O.D.,		
Different 40	M.DIV.), or 1-year 8. Ed. after another Bachelor's degee		
130. Would you have selected the same field of study or specialization?	Don't know 'O		
Yes	Other: (Specify)		
Don't know 1 go to 132			
131. What field of study or specialization would you have chosen? (If two, record the more important first)	134. In general, how important is it that any job you get be related to your field of study or specialization? Would you say it is (read first four categories)		
	important? 10		
	not important?		
	not at all important? 4〇		
	Don't know, no opinion 10  135. Since you completed the(read line A) program in		
	1986, have you taken any education or training programs leading to any degrees, diplomas, certificates or licences?		
	Yes 4O		
	No. 10 00 to 128		

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136a. What types of degrees, diplomas, certificates or licences were these? (Do not read list; check all that apply).	136b. What was the major field of study or specialization?	expect	at mon d you or to comp ments?	do you
		Month	Year	Don't know
Trade-vocational:				7
a. Certificate or diploma a O				0,0
Community College, CEGEP, Technical Institute, Nursing School:				
b. Certificate or diploma a O				7,0
University:				
c. Certificate or diploma below bachelor level @ 〇				0,0
d. Bachelor's degree (e.g. B.A., B.Sc., B.A.Sc., 4- year B.Ed.)				0.
e. Certificate or diploma above bachelor level 95				0,0
f. Master's degree (e.g., M.A., M.Sc., M.Ed) «O		-		0.0
g. Degree in medicine,				
dentistry, veterinary medicine, law, optometry or theology (M.D., D.D.S., D.M.D., D.V.M., LL.B., O.D.,				
M.DIV), or 1-year 8.Ed. after a Bachelor's degree	<del> </del>	-		10
				_
h. Earned doctorate (e.g.,				7.0
Ph.D., D.Sc., D.Ed.) 44				
Professional Association:  i. Diploma, certificate or				
licence such as in accounting, banking or insurance		-		0,0
				185
i Other (family)				
j. Other: (Specify)		-		7.0

-10	J*
137. Did you take any of these programs as a full-time student?	147a. Have-you had any difficulties in repaying the money you owe?
Yes 1○ — go to 148	Yes 10 —— 147b. What kinds of difficulties have you had? (Do not read list; check one or more)
138. Did you ever borrow money to finance ANY of your	a. Unemployed, couldn't get any work
education through the student loan program?	b. Could only get part- time work
Yes 10	
No 4○ — go to 142	c Don't earn enough, income too small
139. How much did you borrow in total through the student loan program? (Record to nearest \$100)	d. High debt load, owe too much to others 6〇
\$ 5 0 0	e. Other reasons (Specify)
14). How much money from the student loan program did you owe when you graduated in 1986? (Record to	
nearest \$100)	
\$ 6 0 0	
141. How much from the student loan program do you	148. INTERVIEWER CHECK-ITEM:
owe now? (Record to nearest \$100)	If line A reads "Master" or "Doctorate".
\$ 7 0 0	check 1○ —— go to 149  Otherwise 1○ —— go to 150
142. Did you ever borrow money to finance ANY of your education from other sources such as relatives or directly from a bank?	149. During your Master's/Doctorate program, did yo receive a grant or bursary from (read list)
Yes 10	Yes No
No 1○ go to 146	a. the Natural Sciences and Engineering Research Council, sometimes called "N-serc"? 10
143. How much did you borrow in total from these other sources? (Record to nearest \$100)	b. the Social Sciences and Humanities Research Council.
\$ 3 0 0	sometimes called "Sherc"? 10 40
	C the Quebec Research Training Fund?
144. How much did you owe these other sources when you graduated in 1986? (Record to nearest \$100)	d. some other fund or agency? (Specify)
\$ 4 0 0	
145. How much do you now owe to these other sources? (Record to nearest \$100)	
\$ 5 0 0	
146. INTERVIEWER CHECK-ITEM:	150. During the next 12 months, do you plan to take an courses or a program that could lead to a degre-diploma or certificate?
If Q. 141 or Q. 145 greater than zero,	
check 40 go to 147a	Yes 'O
Otherwise 10 go to 148	No 2O

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151	Since you completed the(read line A) program in 1986, have you ever registered to become an apprentice?	159. While you were studying for the(read line A) program, in what language did you take most of your courses? (Do not read list)					
	Yes 10	English					
	No •○ —— go to 154	French					
152	. Was this a formal registration with a provincial apprenticeship authority?						
	Yes 5O						
	No 4○ — go to 154	Another language 4 O					
153.	What trade was this?	160a. Do you have any dependent children?  Yes 30 — 160b. Please tell me their soor (Paront)					
	1:	Yes 3 — 160b. Please tell me their ages. (Record age in years as of last birthday)					
		No 4O a. b. c. d. e.					
		f. g. h. i. j.					
	J. GENERAL QUESTIONS.						
154.	And now, some general questions. In what month and year were you born?	161. What was your total personal income from all sources					
	Month Year	before taxes and deductions for the last 12 months? Was it					
155.	What is your marital status? Are you (Read the categories)	less than \$15,0007 100					
	now married or living common-law? 1	less than   \$20,000?     \$15,000					
	single, that is, never married? 2	less than					
	a widow or widower?	\$30,0007 10 \   less than					
	separated or divorced?	\$25,0007 120					
156a.	What language did you first speak in childhood? (Check one or more)	\$20,000 or more? *O					
	156b. Do you still understand it?	\$25,000 or more? 13O					
	Yes No						
	English 10 40 50	less than \$35,0007 14					
	French 10 60 70  Other language 10 60 90	less than					
157.	Other language 10	\$40,0007 'O \$35,000 or more? 15O					
	English	\$30,000 or mare? <sup>2</sup> (					
	French 2 O	less than \$45,0007 160					
	Other language	\$40,000					
158.	INTERVIEWER CHECK-ITEM:	or mare? +O					
	If line D reads "Bilingual",	No \$45,000 or more? 170					
	check 4 Ogo to 159	income 3O					
	Otherwise 1 Ogo to 160a	Don't know 40					

5103-1981

162.	What is the highest level of education your father and by your mother (or g not read list; check one only in each colu	uardia	leted by in)? (Do	163a. Do you consider yourself Inuit, North American Indian or Métis?
	,	ather	Mother	.No, none of
	School:			them
	No formal schooling	110	20 🔾	,0
				Inuit2 O
	Elementary school	MO	310	
				North American
	Some secondary (high school)		20	Indian 10 163b. Are you a status or a non-status Indian?
	Completed secondary school	*0	пО	Status50
	Trade-vocational:			
	Trade or vocational diploma or			Métis
	certificate	#O	240	Metis
	College:			
	Some college, CEGEP, Institute of technology or Nursing school	*0	35 O	164. Are you limited in the kind or amount of activity you can do because of a long-term physical condition, mental condition or health problem(Read list)
	Completed coilege, CEGEP, Inst.			
	Tech., or Nursing school	"0	*0	Yes No
	University:			a, at home? 10 20
	Some university	<b>~</b> O	33. (	
	Teachers' college	040	28 (	b. at school or work? 30 40
	University certificate or diploma below bachelor level	*0	**0	c. in other activities, such as transportation or leisure-time activities?
	Bachelor's degree(s) (e.g., 8.A., 8.Sc.,			
	B.A.Sc. 4-year B.Ed.)	"0	мО	
				165. INTERVIEWER CHECK-ITEM:
	University certificate or diploma above bachelor level	120	210	If any "yes" checked in 164,
				non, yes alleaded to to the
	Master's degree(s) (e.g., M.A., M.Sc., M. Ed.)		120	check 1○ —> go to 166a
	IW. 60./		20	
	Degree in medicine, dentistry,			Otherwise 1○ — go to 167a
	veterinary medicine, law, optometry			
	or theology (M.D., D.D.S, D.M.D., D.V.M., LLB., O.D., M.DIV.)			166a. Are you handicapped or disabled with regard to
	or 1-year B.Ed. after another			(read list)
	Bachelor's degree	140	33 🔾	166b. How many years have
				you been handicapped or
	Earned doctorate (e.g., Ph.D., D.Sc.,	15 ()	мО	disabled in this way?
	D.Ed.)	., (	~~	No Yes Number of years
	Dan's language		nO.	
	Don't know	16()	20	a. Mobility, agility? 010 020
	Other (See sife)		~ 0	a. Mobility, aginty? 40
	Other (Specify)	170	7201	
	Father:	K		b. Sight, seeing? 83
				c. Hearing? 05O 04O 3
			1	
			رىب	d. Speech, speaking? 970 080 4
	Mother:		-	d. speech, speechingr "O "O - 4
			1	e. Learning? 010 160 5
		111		
				f. Emotions, mental
				problems? 110 120 6

167a. During 15 Employme assistance	169. INTERVIEWER: Read the following statement concerning joint collection and data-sharing exactly as worded.							
	167b. Which of the Canada Employment and Immigration Commission financial assistance programs did you take part in?	ir or a d	nmig f Sta nd I epar nd w	acting this s gration Cana ate and the Labour. The tments will	urvey join ida, the De provincia e inform not cont onfident	quiry, Statis titly with Emerartment of Ministries nation pass ain personal ial and us	playment f the Secr of Educ- sed to to il inform	t and etary ation hese ation
No 2O								
		0	o yo	u agree to s	hare your	answers?		
		Y	'es 1	0	end intervi	ew		
18.18.13		N	io i	1	would you	nce with the	te to the	Chief
Don't	Any others?		Statistician of Canada, Ottawa Ontario, K1A 0T6, saying you do no				awa, lo not	
know 3O				,	wish to sha	are your ans	wers.	
		II je	NTER ust to	VIEWER: If tell you he	the respor	ndent asks if I't want to si	it isn't er nare, add:	nough
		y	ou ir hare	ndicating th	ing to w	need to hav ject to your hich depa	answers	being
	Any others?	-	ND (	OF INTERVIE	W. Thank	you for you	e particie	ation
				s survey.	. There	, , , , , , , , , , , , , , , , , , , ,	ar peruci	Ja (IOII
		(1	NTE	RVIEWER: P	lease chec	k questions	170 and 1	71)
				nce or terri		e responder	nt was lo	cated
		N	ıfld.	***	Quebec	05()	Alta.	on()
	Any others?							
11114		Р	EI	mO	Ontario	06 🔾	80	10 🔾
		N	IS	010	Man.	07 🔾	Yukon	110
		N	18	мО	Sask.	08 🔾	NWT	12 🔾
		171. L	angu	uage of inte	view:			
168. INTERVIEW	ER: Now go to items A and 8 on page 2 of	Ε	nglis	sh 10				
	Sheet							

# SURVEY OF 1986 GRADUATES TRADE-VOCATIONAL PROGRAM COMPLETERS QUESTIONNAIRE

Confidential when completed Authority — Statistics Act, Statutes of Canada, 1970-71-72, Chapter 15

				Sequence #:						
Interviewer number Interviewer's			Interviewer's name			Senior	Interviewer's r	name		
			RE	CORD OF CALLS/SUF	PLEMEN	TARY TE	RACING			
=	Date	Start Time	Finish Time	Cor	nments/R	esults		Telepho Numb		Inter- viewer's Initials
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	Total number of calls Length of interview minutes						nutes			
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Cont	acted but i	efused	***************		Intervie	w ende	d in item 2		**********	10 0
Alrea	idy contac	ted (duplicate	e)	⊶ ○	No long	jer livin	g in Canada			11 0
Abse	nt for dura	ition of surve	,	# O	Decease	ed	>14>*14********************************	••••••		12 ()
Unlis	ted numbe	HT	*****************		Other	***********	***************************************	****************	************	
No ar	rswer		***************							

A. POSTSECONDARY STUDIES  1. Hello, I'm(your name)of Statistics Canada. We're doing a survey of 1986 graduates for Employment and Immigration Canada. While your participation is voluntary, your assistance is essential to accurately	9 During the last three months you were in the(read line 8) program, did you study full-time or part-time)?  Still-time			
reflect the employment experiences of graduates. Your answers will be confidential under the Statistics Act.	- Constitution of the cons			
Did you obtain a vocational or technical certificate or diploma in 19867	Part-time ? O			
Yes ¹ ○ go to 3	10. During those three months, did you work at a job or business?			
No 2 O	Yes 1 O			
<ol> <li>Did you complete the requirements for a vocational or technical certificate or diploma in 1986? (By "complete the requirements" I mean write the last exam or submit the last paper, report or project)</li> </ol>	No 4 🔾			
Yes 10	11 During the(read line A) program did you ever take a leave of absence from your studies?			
No 4 O — end interview	Yes 3 O			
3. INTERVIEWER CHECK-ITEM: If entry in line 8,				
check 10 go to 4	No 6 O			
Otherwise 6 O go to 5	12. INTERVIEWER CHECK-ITEM:			
<ol> <li>Was(read line B) your MAJOR specialization for the vocational or technical program you completed in 1986?</li> </ol>	If yes in 10 OR yes in 11,			
Yes ' ○ —— go to 6 No + ○	check <sup>7</sup> O go to 13			
5 What was your MAJOR specialization? For example, carpentry, hairdressing, auto repair mechanic. (If respondent completed more than one vocational or	Otherwise 1 O go to 15			
technical program in 1986, ask about the last one that lasted three months or more)	13. How long did it take you to complete the(read line 8) program, including any periods of absence from your studies?			
	No. of weeks No. of months			
(INTERVIEWER: Correct line 8 on the Tracing Form, then go to 6)  6. In what month and year did you complete the requirements for the(read line 8) program? (8y "complete the requirements" I mean write the last	14. What were the reasons you did not attend the program full-time or on a continuous basis? (Do not read list; check one or more)			
exam or submit the last paper, report or project)	Lack of money			
1985 1 0 1986 2 0	Family responsibilities 2 O			
7 What was the normal length of the(read line 8)	Had a full-time job			
program?	Had a part-time job			
1. OR 2. No. of weeks	Stress			
8. Who paid the fees for the(read line 8) program? Was it Employment and Immigration Canada, the	Program not offered full-time			
Provincial government, you, or somebody else? (Check all mentioned)	Other reason (Specify)			
Employment and Immigration, Canada Manpower	/			
Provincial government				
Respondent				
Somebody else 4 O Don't know 5 O				
No fees	15. Was the(read line B) program part of an			
Other (Specify)	apprenticeship program in which you were registered at the time?			
	Yes + O			

Before you started the program, what was the highest level of education you had completed? (Do not read list; mark one only)	16b. What was your major field or study or specializat (If two of equal importance, enter both)
Elementary 61 🔾	
Secondary	go to
Some secondary	17
Completed secondary or technical high school	
Trade-vocational	
Some trade-vocational ⊶○	<u> </u>
Trade-vocational diploma or	
certificate os O	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
College	
Some college or some CEGEP	
Completed college or completed CEGEP or nursing school diploma or	
certificate 07 0	
University	
Some university (incl. university transfer in Alta. and B.C.)	-
Diploma or certificate below bachelor level	
Bachelor's degree (e.g. B.A., B.Sc. B.A.Sc., 4-year B. Ed.)	
	L.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Diploma or certificate above bachelor level	
Masters degree (e.g., M.A., M.Sc., 12 O	
Degree in medicine, dentistry, veterinary medicine, law, optometry or theology (M.D., D.D.S., D.M.D., D.V.M., LLB., O.D., M.DIV.) or 1-year	
B. Ed. after another Bachelor's degree 13 O	
Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)	
Other (Specify)	
lining the second	

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B. WORK AND OTHER EXPERIENCES BEFORE COMPLETING POSTSECONDARY STUDIES.	23. What kind of work did you do? (Give full description, e.g., shoe salesperson, elementary school teacher,			
17. Now some questions about the time before you started the(read line 8) program. Before you started the program, did you ever work full-time, that is, 30 or more hours a week? Do not include	invoice clerk) .			
summer jobs held while you were a student.				
Yes 10				
No 10 go to 25				
18. What was the total number of months or years of full- time work experience you had before starting the (read line 8) program? Please add up the duration of all your full-time jobs, except for summer jobs held while you were a student. (Do not read list; check one only)	24. In this work, what were your most important activities or duties? (Give full description, e.g., selling shoes, teaching geography, filing invoices)			
Less than 6 months O go to 25				
6 months – less than 1 year 2 O				
From 1 year to less than 3 years 3 O				
From 3 years to less than 5 years • O	25. During the twelve months before you started the			
From 5 years to less than 7 years s O	(read line B) program, what was your major activity? For example, going to school, working, looking for work, household responsibilities. (Check			
7 years or more 6 O	one only)			
Don't know , O	Going to school 90 ga to 26			
19. Before you started the(read line 8) program, did you work at a full-time job for the same employer for	Working 2 O			
a period of six consecutive months or more?	Looking for work 3 O go to			
Yes 10	Household responsibilities			
No ≥ ○ go to 25	Other (Specify) 1 0			
20. In what year did you last work at a full-time job that lasted six months or more?				
1 9 OR:				
Still working atit > 0				
21. For whom did you work? (Name of business, government department or agency, or person)	26. What kind of school was that?			
	High school			
	Vocational school or institute ≀ ○			
	College or CEGEP			
	University			
	Other 5 O			
22. What kind of business, industry or service is this? (Give full description, e.g. paper box manufacturing, retail shoe store, municipal government)	27. Ouring the 12 months before you started the(read line 8), program, were you without work and looking for work for a period of four months or more?			
	Yes O			
	No , O			
	Don't know • O			

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28	During the 12 months before you started the(read line 8) program, was your principal residence in(read line C)?	35. Was the job you had during that week a full-time job, that is, usually 30 or more hours a week?
	Yes 10 go to 31a	Yes 10 go to 40a
	No 10	No 1O
29	. In what province was it?	36. Did you have a full-time job to start at a definite date in the future?
	Nfld. *1 O Man. *7 O	Yes 10 go to 40a
146	PEI. 92 O Sask. 06 O	No 40 go to 39
	N.S. 03 O Alta. 09 O	37a. During the last week of January 1987, did you have a job to start at a definite date in the future?
7.	N.8. 44 O 8.C. 10 O	Yes 10
	Quebec ® O Yukon or NWT " O	37b. Was that job full-time, that is, 30 or more hours a week?
	Ontario % O Outside Canada 12 O •	
30	. Did you move from that province/country specifically to enroll in the(read line 8) program or for some	Yes ¹ ○ go to 40a
	other reason?	No 1○ go to 39
	Enroll	38. Were you looking for a job during the last week of January 1987?
	Other reason	January 1907.
	Did not move	Yes 'O
		. No 10 go to 40a
	C. LAST WEEK OF JANUARY 1987.	39. Were you looking for a full-time job?
31a	. Now, some questions about your experiences since you completed the(read line 8) program. During the last week of January 1987, that is, about a year and a half ago, were you enrolled in any credit courses at an educational or training institution?	
		D. LAST WEEK OF OCTOBER 1987.
	Yes 4 O 31b. Was it full-time or part-time?	40a. Now, some questions about the last week of October 1987. During that week, were you enrolled in any credit courses at an educational or training
	No 10 - Full-time 70	institution?
	Don't know ⊕ ○ Part-time ■ ○	Yes 10- 40b. Was it full-time or part- time?
		No 20 Full-time 40
32	During that week, did you do any work at a job or business?	Don't Part-time 1 O
	Yes 1 O go to 35	41. During that week, did you do any work at a job or
	No : O	business?
33.	. That week, did you have a job or business at which	Yes O go to 44
	you did not work?	No 'O
	Yes 1 O	42. That week, did you have a job or business at which you did not work?
	No 4 O go to 37a	Yes 1 O
34.	Were you absent from work because of a temporary layoff?	No 2 O go to 46a
	Yes 5 O	43. Were you absent from work because of a temporary layoff?
	No O	Yes 1 O
	Pon't remember	No. 4 C
	WARL VERLIEBER	04/7 * 1 /

44. Was the job you had during that week a full-time job,	SO. INTERVIEWER CHECK-ITEM:			
that is, usually 30 or more hours a week?	If any "Yes" in 49,			
Yes 10 go to 49	check 9 go to 52			
No 6 O	Otherwise 1 O ga to 51			
45. Did you have a full-time job to start at a definite date in the future?  Yes 'O go to 49	51. Have you always had a job during the entire two years or so since you completed the(read line B) program?			
No 10 go to 48	Yes 1 O go to 62			
46a. During the last week of October 1987, did you have a job to start at a definite date in the future?	No 4 O			
Yes 10 — 46b. Was that job full-time, that is, 30 or more hours a week?	52. Considering all these reasons, how long in total were you without a job during that period?			
Yes 1 ○ go to 49	Number of months			
No 10 No 10 go to 48	53. Was there any time during this(read answer in 52) period, when you were NOT looking for a job?			
47. Were you looking for a job during the last week of October 1987?	Yes 1 O			
Yes 1 O	No • O go to 60			
No + O go to 49	50 Annual Condenses 53) posied			
48. Were you looking for a full-time job?	54. At any time during this(read answer in 52)period, was there any time you WERE looking for a job?			
Yes 'O	Yes 1 O			
No • O	No • O go to 58			
E. PERIOD SINCE COMPLETING POSTSECONDARY STUDIES.				
49. Now some questions about the entire two years or so since you completed the(read line β) program. During that period, were you ever without a job(read reasons)	SS. During this(read answer in 52), period, how long in total were you looking for a job?  Number of months			
Yes No	(INTERVIEWER: Q. 55 must not be more than Q. 52)			
a. because you were going to school?				
	S6. At any time during the(read answer in 55) period you were looking for a job, were you a full-time student?			
b. because you had personal or family responsibilities? 3 0 4 0	Yes 1 O			
c. because you couldn't find work?	No 1 O go to 58			
d. OR for any other reason? (Specify)	57. How much of this(read answer in 55) period were you a full-time student?			
	Number of months			
	(INTERVIEWER: Q. 57 must not be more than Q. 55)			
	die			

58. During the period when you were NOT looking for a job, were you ever waiting to start a new job or return to an old job?	66. Did you have more than one job or business that week?
	Yes 10)
Yes 10	Yes 1 O go to 71
No 4 O go to 62	- NO 10)
No . O go to 62	67s. During that week of May 1 to 7, did you have a job to
59. How long were you waiting? (That is, how long were	start at a definite date in the future?
you waiting to start a new job or return to an old job during the period you were NOT looking for a job?)	
	Yes 1 O — 67b. Is that job full-time, that is, 30 or more hours a week?
	30 or more nours a week?
go to 62	Yes 10 go to 71
Number of months	No ← ○ No ← ○ go to 70
60. At any time during the(read answer in 52) period you were looking for a job, were you ever a full-time student?	68a. During the week of May 1 to 7, were you looking for a job?
	Yes 10 68b. Were you looking for a full- time job?
Yes 1 O	time job?
No 6 ○ go to 62	Yes 10)
NO 10 90 to a2	Yes 10 go to 96
61. How much of this(read answer in 52) period were	No 10 No 10)
you a full-time student?	
	69. What was the main reason you did not look for a job that week? (Do not read list; check one only)
Number of months	
Number of months	Own illness or disability
(INTERVIEWER: Q. 61 must not be more than Q. 52)	Personal or family responsibilities a O
	Going to school
F. WEEK OF MAY 1 - 7, 1988.	
62. The next few questions refer to the week of May 1 to 7, that is,week(s) ago. During that week, did you work at a job or business?	No longer interested in finding a job ⊶ ○
	Maining for small for favore into
Yes 1 O	Waiting for recall (to former job) 🕫 🔾
No 2 ○ → go to 64	go
90 to 64	Has already found a new job → 0 } to 96
63. Did you have more than one job or business that	
week?	Waiting for replies from employer O
× (0)	
Yes 1 O go to 71	Could not find the kind of job wanted
No 4 O)	
64. That week, did you have a job or business at which you did not work?	Discouraged with looking 🕶 🔾
Yes 1 O	No reason given 16 🔾
No 6 O go to 67a	
g0 10 0/a	Other reason (Specify)
65. Were you absent from work because of a temporary	
layoff?	
Yes ' O	A Liver Control of the Control of th
No 6 O	

70. What is the main reason you had a part-time job? (Do not read list; check one only)	73. What kind of work did you do? (Give full description, e.g., shoe salesperson, elementary school teacher, invoice clerk)
Own illness or disability	Same kind of work as in 23 3 O
Personal or family responsibilities 2 〇	OR:
Going to school	
Could only find part-time work 4 〇	
Did not want full-time work	
Full-time work is under 30 hours a week • O	
Other reason (Specify)	74. In this work, what were your most importan activities or duties? (Give full description, e.g., selling shoes, teaching geography, filing invoices)
1	Same activities or duties as in 24 4 🔾
	OR:
DESCRIPTION OF MAIN 108.	
INTERVIEWER: For questions 71 through 92, if the	
respondent had (or will have) more than one job, ask about the main job, i.e., the one usually worked at for the most number of hours.	75. If you were to work your usual hours at that job for 1: months, approximately what would be your gros earnings? (Record to the nearest thousand dollars)
	\$ 0000
11. For whom did you work? (Name of business, government department or agency, or person)	, , , , , , ,
Same employer as in 21 1 O	Don't know 5 🔾
OR:	Refused 6 🔾
	76. Was the job you had in the week of May 1 to 7 one for which your (read line 8) program was designed?
	Yes 1 ()
	No 4 O
	Don't know 5 O
72. What kind of business, industry or service is this? - (Give full description, e.g. paper box manufacturing, retail shoe store, municipal government)	77. Were you a paid worker or self-employed?
Same business as in 22 1	Paid worker 6 〇
OR:	Self-employed 7 O go to 82
	Other (e.g., unpaid family worker) go to 86
	78. Is this a permanent position or a temporary position?  Permanent 1 0
	Temporary 2 O

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79. When you got the job you had in the week of May 1 to 7, what was the level of education or training needed to get the job? (Do not read list; check one only)	80. Did the employer specify that the(read line 8) program was necessary to get the job?
	- Yes
Oon't know	
No qualifications specified 40	No 1 O
High School:	Don't know 3 O
Some high school (level not specified)	81. Did the employer specify that related work
Grade 10 or less	experience was essential for that job?
Grade 11 85 O	
Grade 12 or 13, completed high	Yes
school	No 5 O
General Postsecondary:	Don't know
Some postsecondary education (level not specified)	Dan (know
	82. INTERVIEWER CHECK-ITEM:
Trade-Vocational:	If "Yes" in 67a,
Trade-vocational, level not specified	11 Tes 111 0/4,
Trade or vocational certificate/	check ¹○go to 96
College:	Otherwise O go to 83
Some college, CEGEP or similar institution	
Diploma or certificate from college, CEGEP or similar institution, incl. nursing school 11 〇	83. In this job, did you use any of the skills acquired from the(read line 8) program?
	Yes 10
University:  Some university (incl. university	No 2 O
transfer in Alta, and B.C.)	NO .
University diploma or certificate below bachelor level	
Degree, level not specified	84. Considering all aspects of the job you had in the week of May 1 to 7, how satisfied were you with the job?
Bachelor's degree (e.g., B.A., B.Sc., 4-year B.Ed.)	Would you say that you were(read first four categories)
University diploma or certificate, level not specified	very satisfied?
University diploma or certificate	satisfied?
above bachelor level	dissatisfied?
Master's degree (e.g., M.A., M.Sc., M.Ed.)	
	very dissatisfied? 6 O
Degree in medicine, dentistry, veterinary medicine, law, optometry or theology (M.D.,	Don't know, no opinion
D.D.S., D.M.D., D.V.M., LL.B., O.D., M.DIV.) or I-year B. Ed. after another Bachelor's degree	85. Considering the duties and responsibilities of that job, how satisfied were you with the money you made? Would you say that you were(read first four categories)
Earned Doctorate (e.g. Ph.D., D.Sc., D.Ed.)	
Other (Specify)	very satisfied?
	satisfied? 2 O
	dissatisfied?
	very dissatisfied? 4 〇
	Dan't know, no opinions O

86. Is the job you had during that week a full-time job, that is, usually 30 or more hours a week?	92. During that week, were you looking for a full-time job?
Yes • O	_ Yes 10)
No → 90 to 88	go to 96
87. How many hours a week do you usually work at that job? (If respondent says "it varies", ask for an average of the last four weeks)	G. JOBS LASTING SIX MONTHS OR LONGER.
Number of hours	93. Have you worked at that job full-time for six months or more? (By this we mean doing the same kind of work for the same employer)
88. What is the main reason you had a part-time job? (Do not read list; check one only)	work to the same employer)
Own illness or disability	Yes <sup>5</sup> O
Personal or family responsibilities 2 O	No ○○ — go to 95
Going to school	94. Was that the <u>FIRST</u> job at which you worked full-time for six months or more <u>AFTER</u> completing the(read line 8) program?
Could only find part-time work 4 O	Yes ' O go to 118
Full-time work is under 30 hours a week 6 O	No *○ go to 98
Other reason (Specify)	95. When did you begin that job?
	1 9 Year
	96. Have you ever held a full-time job lasting six months or more?
	Yes 1 O
89. How many hours a week do you usually work at that job? (If respondent says "it varies", ask for an average of the last four weeks)	No 1○ —> go to 119
Number of hours	97. Have you had a job at which you worked full-time for six months or more <u>AFTER</u> completing the(read line B) program?
90. When did you begin that job?	Yes 1 ○ → go to 99
1 9	No 10 go to 119
91. Did you have a full-time job to start at a definite date in the future?	98. When did you begin the job you had in the week of May 1 to 77
Yes 1 O go to 96	Month Year
No 2 O	(INTERVIEWER: The date should not be later that January 1988)

99. When did you start the <u>FIRST</u> job at which you worked full-time for six months or more <u>AFTER</u> completing the(read line β) program? And when did you end it?	completing the found of
Start: 1 9	
End: 2 1 9	Yes No
Month Year	
OR: Still working at it 1 O	a. because you were going to school? 1 0 2 0
100. For whom did you work? (Name of business,	
government department or agency, or person)	b. because you had personal or
	family responsibilities? 1 • • •
	c. because you couldn't find work _ s O 6 O
	d. OR for any other reason?
101. What kind of business, industry or service is this?	
(Give full description, e.g. paper box manufacturing, retail shoe store, municipal government)	
government)	
102. What kind of work did you do? (Give full description, e.g., shoe salesperson, elementary school teacher,	106. INTERVIEWER CHECK-ITEM:
invoice clerk)	TOG. INTERVIEWER CHECK-TEM:
	If any "Yes" in 105,
	check O go to 108
	Otherwise 1 O go to 107
103. In this work, what were your most important activities or duties? (Give full description, e.g., selling shoes, teaching geography, filling invoices)	107. Did you always have a job during the entire period between (date in 104a) and (date in 104b)?
	Yes 1 O go to 119
	No 4 O
	108. Considering all these reasons, how long in total were
	you without a job during that period?
H. LABOUR FORCE ACTIVITIES BETWEEN STUDIES AND FIRST FULL-TIME 6-MONTH JOB.	
	Number of months
104. INTERVIEWER CHECK-ITEM:	
a). Copy the date from item 6:	109. Was there any time during this(read answer in
4 1 9	108) period when you were NOT looking for a job?
	Yes 1 O
b). Copy the start-date from item 99:	No ≀ ○ go to 116
5 1 9	go to 11e
Month Year	110. At any time during this (read answer in
If the date in b) is after the date in a)	108)period, was there any time you WERE looking for a job?
of the case in a)	
check • O go to 105	Yes 1 O
Otherwise 1 O go to 119	No AO

8-5103-199.1

111. During this(read answer in 108), pe in total were you looking for a job?	riod, how long I. GENERAL TRAINING AND EDUCATION QUESTIONS.
Number of months	119. Given your experiences since completing the(read line 8) program in 1986, would you have selected the same educational program, a different program.
number of months	or not taken any postsecondary program?
(INTERVIEWER: Q. 111 must not be more	e than Q. 108) Same
112. At any time during this(read answer i you were looking for a job, were you student?	ou a full-time
	Don't know 1 O /
Yes 'O	Different 4 O
No : O go to 114	120. Would you have selected the same field of study o specialization?
113. How much of this(read answer in were you a full-time student?	111) period  Yes
Number of months	No 60
(INTERVIEWER: Q. 113 must not be more	Don't know , O go to 122
(INTERVIEWER, Q. 113 must not be more	121. What field of study or specialization would you have chosen? (If two, record the more important first)
114. During the period when you were NOT job, were you ever waiting to start return to an old job?	T looking for a
Yes 3 O go to 119	
No 10 age to 119	
15. How long were you waiting? (That is, h you waiting to start a new job or return during the period you were <u>NOT</u> looking	n to an old job
Number of months	122. Would you have taken a different vocational o technical program, or taken a program in a differentype of school?
116. At any time during this(read answer in you were looking for a job, were you e	n 108) period Different trade-vocational program 1 O
student?	Same program but in a different college/school
Yes 1 O	College program 1 O
No • O —— go to 119  17. How much of this(read answer in	University program
were you a full-time student?	Don't know, no opinion
	Other (Specify)
Number of months	
(INTERVIEWER: Q. 117 must not be more	e than Q. 108)
118. When did you begin the job you had in May 1 to 77	n the week of  123. Since you completed the(read line 8) program i 1986, have you taken any educational or trainin programs leading to any degrees, diplomas certificates or licences?
Month Year	Yes 10
(INTERVIEWER: The date should not	

124a. What types of degree diplomas, certificates licences were these? (into read list; check all the apply)	Or study or specialization?	expec	hat monified you or to complete to complet	do vou
		Month	Year	Don't
Trade-vocational:				know
a. Certificate or diploma	"0	-		.0
Community Colleg CEGEP, Technical Institut Nursing School:	te.			
b. Certificate or diploma	40			0
University:				
c. Certificate or diplom below bachelor level		-		7.0
d. Bachelor's degree (e.g. B.A., B.Sc., B.A.Sc	9-			7.0
4-year B.Ed.)				],0
e. Certificate or diplom above bachelor level	05 0	-		] .0
Maria de la companya				
f. Master's degree (e.g. M.A., M.Sc., M.Ed.)		-		0.
g. Degree in medicine dentistry, veterinary				
try or theology (M.O. D.D.S., D.M.D., D.V.M. LL.B., O.D., M.DIV.)				
1-year B. Ed. after a Bachelor's degree		-		] .0
h. Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)		-		,0
Professional Association:				
Diploma, certificate or licence such as in accounting, banking or				
insurance	0		3.1	.0
j. Other: (Specify)	0			
		-		.0

125.	During the next 12 months, do you plan to take any	133. INTERVIEWER CHECK-ITEM:
	courses or a program that could lead to a degree, diploma or certificate?	If line D reads "Bilingual"
		check • O go to 134
	Yes 1 O	Otherwise 1 O go to 135a
	No 2 O	134. In what language did you take the(read line B)
126	Since you completed the(read line 8) program in	program? (Do not read list)
12,0.	1986, have you ever registered to become an apprentice?	English 'O
		French 2 O
	Yes <sup>3</sup> O	English and French about equally
	No 4 0 go to 129	Another language 4 O
127.	Was this a formal registration with a provincial	135a. Do you have any dependent children?
	apprenticeship authority?	Yes 5 O — 135b. Please tell me their ages. (Record
	Yes 1 O	age in years as of last birthday)
	No • O go to 129	a. b. c. d. e.
128.	What trade was this?	
		f. g. h. i. j.
		136. What was your total personal income from all sources before taxes and deductions for the last 12 months?
		Was it
-		Less than
400	J. GENERAL QUESTIONS.	\$15,000? 10 0
129.	And now, some general questions. In what month and year were you born?	Less than \$20,000? 5 O
		\$15,000 or more? '1 O
	Month Year	
130.	What is your marital status? Are you(read the	000,000
	categories)	Less than \$25,000? 12 O
	now married or living common-law? 1 O	\$20,000
		or mare? • O
	single, that is, never married? 2 O	\$25,000 or mare? 13 C
	a widow or widower?	
	separated or divorced?	Less than
131a.	. What language did you first speak in childhood	
	(Check one or more) 131b. Do you still	Less than \$40,0007 7 O
	131b. Do you still understand it?	\$35,000
	Yes No	or more? 15 C
	English 10 40 50	\$30,000 or more? <sup>1</sup> O
	French 20	Less than \$45,000? 14 C
	Other language 1 O 8 O 1 O	
132	. What language do you speak most often at home? (Check one or more)	\$40,000 or more? • O
	(cheek one or more)	\$45,000 or more? 17
	English	No income 1 O
	French 20	Don't
	Other language	know • O

137. What is the highest level of educat your father and by your mother (o not read list; check one only in each	or quard	pleted by ian)? (Do	138a.	Do you consider yourself Inuit, North American Indian or Metis?
	Father	Mother		No, none of them
School:				
No formal schooling	. •• O	юО		Inuit 2 O
Elementary school	. 40	21 ()		North
Some secondary (high school)	. 43 🔾	22 ()		American Indian 138b. Are you a status or a non-status Indian?
Completed secondary school	<b>∞</b> O	23 🔾		Status 1 O
Trade-vocational:				
Trade or vocational diploma or certificate	m O	24 ()		Métis Non-status 4
College:				
Some college, CEGEP, Institute of technology or Nursing school	× O	25 ()		Are you limited in the kind or amount of activity you can do because of a long-term physical condition, mental condition or health problem(Read list)
Completed college, CEGEP, Institute of Technology or Nursing school		* 0		Yes No
Heimesian				
University: Some university	. 08 ()	" O	a.	at home? 1 O 1 O
Teachers' college	•• 0	28 🔾	b.	at school or work?
University certificate or diploma below bachelor level	• 0	» O		in other activities, such as transportation or leisure-time
8achelor's degree(s) (e.g., 8.A., 8.Sc., 8.A.Sc., 4-year 8.Ed.)	0	.n ()		activities? 5 O 6 O
University certificate or diploma above bachelor level	12 0	» O		INTERVIEWER CHECK-ITEM: If any "yes" checked in 139,
Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)	11 O	» О	The s	check 1○ —> go to 141a
Degree in medicine, dentistry, veterinary medicine, law, optometry or theology (M.D.				Otherwise 1 O - go to 142a
O.O.S., O.M.O., D.V.M., ĽĹB., O.O., M.DIV.) or 1-year B.Ed. after another Bachelor's degree	14 ()	и О	141a.	Are you handicapped or disabled with regard to(read list)
Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)	15 0	» О		141b. How many years have you been handicapped or disabled in this way?
Don't know	. 0	в О		No Yes Number of years
Other (Specify)	"07	0	a. I	Mobility, agility? 10 02 0 1
Father:			b. :	Sight, seeing? 03 0 04 0 2
	111		c. )	Hearing?
Mère:			d. 5	Speech, speaking? 37 🔾 08 🔾 🙀 4
	111		e. L	.earning?
				imotional, mental
	111			problems?

Employme	987, did you take part in any Canada ent and Immigration Commission financial programs?	144.	INTERVIEWER: Read the following statement concerning joint collection and data-sharing exactly as worded:
Yes 'O	142b. Which of the Canada Employment and Immigration Commission financial assistance programs did you take part in?		To avoid duplication of enquiry, Statistics Canada is conducting this survey jointly with Employment and Immigration Canada, the Department of the Secretary of State and the provincial Ministries of Education and Labour. The information passed to these departments will not contain personal information and will be kept confidential and used only for statistical purposes.
No 2 O			Do you agree to share your answers?
			Yes ◆ ○ —— end interview
			No 1 O In accordance with the Statistics Act, would you please write to the Chief Statistician of Canada, Ottawa, Ontario, K1A 0T6.
Don't	Any others?		
know <sup>3</sup> O			INTERVIEWER: If the respondent asks if it isn't enough just to tell you he/she doesn't want to share, add:
			According to the law, we need to have a letter from you indicating that you object to your answers being shared, specifying to which departments your objections apply.
	Any others?		END OF INTERVIEW: Thank you for your participation in this survey.
			(INTERVIEWER: Please check questions 145 and 146)
		145.	Province or territory where respondent was located when interviewed:
			Nfld. 49 Quebec 45 Quebec 45 Q
	Any others?		PEI a O Ontario a O 8C a O
		-11	NS 43 O Man. 47 O Yukon 11 O
			NB № ○ Sask. № ○ NWT 12 ○
		146.	Language of interview:
143. INTERVIEW	VER: Now go to items Aland 8 on page 2 of g Sheet.		English O
			French <sup>2</sup> O

SURVEY MONTH: April 1988

TITLE: Travel Survey

SPONSOR: Tourism Canada

SURVEY METHOD: Personal / Telephone Interview

SAMPLE SIZE: One civilian member, 15 years of age or over, from each

household in rotation group 5 throughout Canada

OBJECTIVES: The data collected during this survey will provide the

sponsor with information on travel by Canadians in terms of its contribution to the Canadian economy and the utilization of various travel related services (example: transportation, accommodation facilities). The data will also be used to provide an understanding of the travel habits of Canadians, their destination, the purpose of their trip, the length of stay, etc. and to provide a picture of the socio-economic characteristics

of Canadians who travel.

PROJECT MANAGER: Denis Lefebyre

MICRODATA: Yes Price No

X \$ 300

Statistics Canada Statistique Canada

Household Surveys Division des Division enquêtes-menages

Confidential when completed

Authority Statistics Act. Statules of Canada 1970 - 71 - 72 Chapter 15

# Travel Survey (First Quarter)

avel Survey
Bacx
Telephone No
ey. This survey is being s.  Area month period from the fell during this three three month period?
nonth period? Other trips festival, etc.
y reason, during this three

TRIP 1  BEGINNING WITH THE FIRST TRIP THAT ENDED DURING THI PERIOD:	Visiting friends
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	relatives Pleasure 2 Personal 1
	Business 40 A convention 30
Inearest) CITY-TOWN	Was it to attend a convention? Yes 5 No 1
	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
12. WHAT WAS YOUR OESTINATION ON THIS TRIP? If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home.	Visiting Triends Provincial. Regional Park or retatives of Historic site
	Feshvals or events 02 Attend sports events 110
Nearesii City Town PROVINCE STATE	Shopping 03 Participate in sports or out- door activity (specify) 120
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS	Sightseeing 040 Swimming 130
THEPEAT DESTINATION FROM QUESTION (2)	Attend cultural events e.g. plays, concerts 050 Other water sports 140
Miles 10 Enter number	Nightlite: enterfainment 060 Hunting or fishing 150.
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	Dining at high quality restaurants 070 Cross country skiing 180
under 15 years 15 years and over	Visit a theme park Se Downhill skiing
	Visit zoo museum
15. WAS THIS A WEEK-END TRIP?	natural display 090 Other
Yes 10 No 10	None of the above 197
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?  Enter number	22. IF VISIT NATIONAL PROVINCIAL REGIONAL PARK OR HISTORIC SITE MARKED IN 21 ASK WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	enter code(s)  Oid not visit a  National park or Historic site  23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE
Newtoundland 01 Saskatchewan 08 P E.I. 02 Alberta 09	HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
Nova Scotia 03 British Columbia 10	Prepaid packages (i.e. package tours) , S Transportation to and from destination .
New Brunswick 04 N.W.T. or Yukon 11	including expenditures for gas
Quebec	Local transportation (i.e. taxis, bus, etc.) 3
Ontario 08 United States 12	Accommodation (Si ) 100
Manitoba 07 All other countries 13	Food and beverages 5 S 1 1 1 100
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND	Recreation and entertainment 6 5 1 1 1 00
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.)
	Total (if no breakdown given) a St. 1 1 100
Motel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK. WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives	Yourself?
Private cottage or vacation home	Other member(s) of your household?
Commercial cottage or cabin	
Other (hostels, universities, etc.)	25. IN WHICH MONTH DID THIS TRIP END?  January 1 February 2 March 2 Ma
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU
TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers, Include as "other" motorcycles and bicycles, (Mark one only,)	1988?
The same of the sa	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 17 Rail 37 Other 50	
Other .	28. INTERVIEWER CHECK ITEM:
Arr 6 Did year root	Last Irip Go to 29
a car?	Otherwise 20 Go to TRIP 2
103-27	

199	TRIP 2	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
	CONTINUING WITH THE NEXT TRIP	Visiting friends relatives 1 Pleasure 2 Personal 3
11. w	HERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Business 40 A convention 50
_	inearest) CITY TOWN	Was it to attend a convention? Yes 6 No C
		FOLLOWING ACTIVITIES? (Read list and mark all that apply)
de	PROVINCE FOR OFFICE USE ONLY  THAT WAS YOUR DESTINATION ON THIS TRIP? (If the respon- ent went to more than one place on this trip, enter name of place at is furthest from his/her home)	Visit a national.  Visiting friends Provincial, Regional Park or relatives 01 or Historic sile 02 Attend sports events 110
_	(Nearest) CITY TOWN PROVINCE STATE	Shopping  Participate in sports or outdoor activity (specify)
	COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Sightseeing 040 Swimming 130
	PPROXIMATELY HOW FAR FROM YOUR HOME IS ?  EPEAT DESTINATION FROM QUESTION 12)	Attend cultural events e.g. plays, concerts  Other water sports  140
	lles 10 Enter number	Nightlife/ entertainment 06 Hunting or fishing 15
14. IN	CLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN	Dining all high quality restaurants 070 Cross country skiing 160
	nder 15 years and over	Visit a theme park  Visit zoo.museum  Other
4.5		natural display
15. W	AS THIS A WEEK-END TRIP?	None of the above 197
	Yes 1 No 2 No	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK, WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
	Enter number If 000 go to 19	enter code(s) Did not visit a
DII	WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES D YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID DU SPEND IN EACH ONE?	National park or Historic site 22 23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE
	ewfoundland 01 Saskatchewan 08 Saskatchewan 09	TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
No	ova Scotia o3 British Columbia 10	Prepaid packages (i.e. package tours)   S
W.	ew Brunswick 04 N.W T or Yukon 1:	Local transportation (i.e. taxis, bus, etc.) 3 S S S S S S S S S S S S S S S S S S
	of United States 12	Accommodation 4 S   S   S   S   S   S   S   S   S   S
Ma	anitoba 07 All other countries 13	
	WHAT TYPES OF ACCOMMODATION DID YOU STAY AND DW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Recreation and entertainment 6 S   S   S   S   S   S   S   S   S   S
		Total (if no breakdown given)
LI.		
	otel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK; WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Ca	mping or trailer park	An employer?
Ho	me of friends or relatives	Yourself?
	vate cottage or vacation home	Other member(s) of your household?
	immercial cottage or cabin 6	25. IN WHICH MONTH DID THIS TRIP END?  January 1 February 2 March 3 Ma
19. WH	her (hostels, universities, etc.)  HAT MEANS OF TRANSPORTATION DID YOU USE TO AVEL THE GREATEST DISTANCE ON THIS TRIP? Include	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD JANUARY 1St TO MARCH 31. 1988?
	"auto" motor homes, jeeps, trucks, vans and campers, Include "other" motorcycles and bicycles (Mark one only.)	None 1 Go to 28 OR (Enter number)
Acres	tomobile 10 Rail 30 Other 5	27. HOW MANY DF THESE IDENTICAL TRIPS ENDED IN  January? • February? 2 March? 3
Bu:		28. INTERVIEWER CHECK ITEM:
	®○ → Did you rent Yes 7○ No ®○	Control of the Contro

TRIP 3	20 14/147 11/20 12/20
	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?  (Mark one only)  Visiting friends.
CONTINUING WITH THE NEXT TRIP	relatives 10 Pleasure 20 Personal 30
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Business 40 ¬ A convention 50
	Was it to attend a convention? Yes 50 No 70
(nearest) CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY	Visit a national
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his her home)	Visiting friends Provincial Regional Park or relatives or Historic site
	Festivals or events 32/ Attend sports events 110
(Nearest) CITY TOWN PROVINCE STATE	Shopping Participate in sports or out-
	Y
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ?	Sightseeing 340 Swimming 130
(REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events e.g. plays, concerts
Miles 10 )	Nightlife/ Hunting or lishing 150
Kilometres 20 Enter number	Dinog at
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	high quality restaurants Cross country skiing
under t5 years 15 years and over	theme park 390 Downhill skiing 170
	Visit zoo museum . natural display
15. WAS THIS A WEEK-END TRIP?	
Yes O. No 2O	None of the above 1913
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU WISTERD
Enter number If 000 go to 19	AISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY DVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH DNE?	enter code(s)  Did not visit a  National park or  Historic site  39
Newfoundland of Saskatchewan of P.E.I. 02 Alberta 09	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?  Prepaid packages (i.e. package lours)
Nova Scotia 03 British Columbia 10	Transportation to and from destination
New Brunswick 04 N.W.T. or Yukon 11	Local transportation (i.e. taxis, bus, etc.) 3 5 1 1 100
Quebec 05	
Ontario 06 United States 12	
Manitoba 07 All other countries :3	Food and beverages 5 5 1 1 1 1 200
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND	Recreation and entertainment 6 5 1 1 1 30
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.)
	Total (if no breakdown given)
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK:
Motel 2	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives	Yourself?
Private cottage or vacation home 5	Other member(s) of your household?
Commercial cottage or cabin	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	Income 10
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU
TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, Jeeps, trucks, vans and campers Include as "other" motorcycles and bicycles. (Mark one only)	TAKE DURING THE PERIOD JANUARY 1st TO MARCH 31, 1988?  None 1 Go to 28 DR Enter number:
TOTAL STATE OF STATE OF	27. HOW MANY DF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Rail 3 Other 5	march:
Bus 30 Boat 40	28. INTERVIEWER CHECK ITEM:
Air <sup>6</sup> → Did you rent Yes <sup>7</sup> No <sup>8</sup>	010 23
	Go to TRIP 4

TRIP 4	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
CONTINUING WITH THE NEXT TRIP	Visiting friends relatives : Pleasure 20 Personal 30
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Pleasure 2○ Personal 3○ Business 4○ A convention 5○
	Was it to attend a convention? Yes ⁵○ No ७○
(nearest) CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY	Visit a national,
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Visiting friends Provincial, Regional Park or relatives 01 or Historic site 100
	Festivals or events 02 Attend sports events 11 Participate in sports or out-
(Nearesti City Town PROVINCE STATE	Shopping 03 door activity (specify) 2
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Sightseeing 040 Swimming 13/01
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ? (REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events Other water sports 14
Miles 10 )	e.g. plays, concerts 05
Kilometres 20 Enter number	entertainment 060 hunting or tishing
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	Dining at high quality restaurants 07 Cross country skiing 16
under 15 years 15 years and over	Visit a theme park 08 Oownhill skiing 17 O
	Visit zoo museum natural display 09/ Other 18
15. WAS THIS A WEEK-END TRIP?	None of the above 1973
Yes ¹⊖ No ³⊖	22. IF VISIT NATIONAL PROVINCIAL REGIONAL PARK OR
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU
Enter number 11 000 go to 19	VISITED?  enter code(s)  Did not visit a
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 39
Newfoundland of Saskatchewan of Saskatchewan of Merta of Saskatchewan of Saska	TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?  Prepaid packages (i.e. package tours)
Nova Scotia c3 8ritish Columbia 10	Transportation to and from destination including expenditures for gas
New Brunswick 64 N.W.T or Yukon 11	Local transportation (i.e. taxis, bus, etc.) 3 S 1 1 1 100
Quebec 95	Accommodation
Ontario 36 United States 12	Food and beverages 5 S 1 1 100
Manitoba 37 All other countries 13	
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND	Recreation and entertainment 6 5 1 1 1 00
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.)
	Total (if no breakdown given) 8 5 1 1 1 20
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK. WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	
	An employer?
Home of friends or relatives	Yourself?
Private cottage or vacation name	Other member(s) of your household?
Commercial cottage or cabin 6	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.) 7	January 1 February 2 March 3
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers, Include as "other" motorcycles and bicycles. [Mark one only.]	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD JANUARY 1st TO MARCH 31, 1988?  None Go to 28 OR (Friet number)
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Aail 3 Other 5	28. INTERVIEWER CHECK ITEM:
Bus Boat 4/0	Last trip Go to 29
Air 8○ → Did you rent Yes 7○ No 8○	Otherwise 2 Go to TRIP 5

TRIP 5	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
CONTINUING WITH THE NEXT TRIP	Visiting friends
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	relatives 10 Pleasure 20 Personal 10
	Business 4() A convention 5() Was it to attend a convention? Yes 5() No 7()
ineeresti CITY-TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE
inegrasi) CITY-TOWN	FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY	Visit a national.
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place.)	
that is furthest from his her home)	Festivals or events 02 Attend sports events 10
(Newest) CITY-TOWN PROVINCE STATE	Shopping 63 door activity (specify)
COUNTRY III outside Canada) FOR OFFICE USE ONL	Sightseeing 34 Swimming 130
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS	? Attend cultural events Other water sports 147
(REPEAT DESTINATION FROM QUESTION 12)	e.g. plays, concerts C5
Miles 10 )	Nightlife: Hunting or fishing 15
Kilometres 20 Enter number	Dining at Cross country sking 160
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IT	N high quality restaurants 375
under 15 years 15 years and over	theme park 05 Downhill skiing
	- Visit zoo museum Other 18 C
15. WAS THIS A WEEK-END TRIP?	None of the above 13
Yes 10 No 20	
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THI TRIP?	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU
Enter number // // // // // // // // // // // // //	VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIE	enter code(s)  Did not visit a  National park or
DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DI YOU SPEND IN EACH ONE?	
	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER
Newfoundland 01 Saskatchewan 08	HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR ?
P.E.I. 02 Alberta 09	Prepaid packages ii e package tours
Nova Scotia oa British Columbia to	Transportation to and from destination ,
New Brunswick 04 N.W.T. or Yukon 11	including expenditures for gas
	Local transportation (i.e. taxis bus. etc.) 3 5
Quebec 05	Accommodation 4 5
Ontario 08 United States 12	Food and beverages 5 S S S S S S S S S S S S S S S S S S
Manitoba 07 All other countries 13	Recreation and entertainment
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AN HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.) 7 5 1 1 100
	Total (if no breakdown given) a s 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK.
Motel 2	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives	Yourself? 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Private cottage or vacation home 5	Other member(s) of your household?
Commercial cottage or cabin 6	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	January 10 February 20 March 30
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include	THE TORREST THE PERIOD JANUARY 151 TO MARCH 31,
as "auto" motor homes, jeeps, trucks, vans and campers, includ as "other" motorcycles and bicycles, (Mark one only.)	None 10 Go to 28 OR Enter numbers
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
	January? February? March?
Automobile (0)         Rail         3○         Other (0)           Bus         3○         Boat         4○	28. INTERVIEWER CHECK ITEM:
Air 6 → Did you rent yes 7 No 8	Last trip Go to 29
a car?	Otherwise Go to TRIP 6

TRIP 6	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
CONTINUING WITH THE NEXT TRIP	Visiting friends relatives 10 Pleasure 20 Personal 30
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Business 40 - A convention 50
	Was it to attend a convention? Yes 60 No 70
(nearest) CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY	
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home)	or Aistone site
	Festivals or events 02 Attend sports events 110
I Newesti CITY TOWN PROVINCE STATE	Shopping 03 Participate in sports or out-door activity (specify) 12
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Sightseeing 04O Swimming 13C
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ? (REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events e.g. plays, concerts 050 Other water sports 140
Miles 10 )	Nightlife Husting or fishing
Kilometres 20 Enter number	entertainment 060
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	high quality restaurants 07
under 15 years 15 years and over	theme park 09 Downhill skiing 170
	Visit zoo museum natural display 090 Other :80
15. WAS THIS A WEEK-END TRIP?	None of the above 190
Yes 10 No 20	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
Enter number 11 000 go to 19	enter code(s) Did not visit a
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 990
Newfoundland 01 Saskatchewan 08 P.E.I. 02 Alberta 09 Nova Scotia 03 British Columbia 10	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?  Prepaid packages in ellipackage tours:  Transportation to and from destination
New Brunswick 04 N.W.T or Yukon 11	including expenditures for gas 2 \$1 1 1 120
Quebec 05	Local transportation (i.e. taxis, bus, etc.) 3 S1 1 1 1 120
Ontario 06 United States 12	Accommodation 4 S1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Sinted States 12	Food and beverages 5 S 1 1 100
All other countries 13	Recreation and entertainment 6 S 1 1 1 20
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.)
	Total (if no breakdown given)
Hotel (including tourist homes)	
Motel 2	24. IF "BUSINESS" MARKED IN 20 ASK: WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives	Vauranita .
Private cottage or vacation home	Other member(s) of your household?
Commercial cottage or cabin	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	January 17
9. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, Irucks, vans and campers, Include as "other" motorcycles and bicycles. (Mark one only.)	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD JANUARY 1st TO MARCH 31, 1988?
and the one only.)	None Go to 28 OR (Enter number)
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Rail 3 Other 5	January? · February? 2 Merch? 3
Bus <sup>2</sup> C Boat <sup>4</sup> O	28. INTERVIEWER CHECK ITEM:
Air 5○ → Did you rent Yes 7○ No 8○	Last trip Go to 29
a car?	Otherwise Go to TRIP 7

TRIP 7	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
CONTINUING WITH THE NEXT TRIP	Visiting friends
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Pursonal 10
WALLES TO THE RESIDENCE OF THE PARTY OF THE	Was it to attend a second and
(nearest) CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR SEFECE USE ONLY	
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home).	Visiting friends Provincial Regional Park or relatives 01 or Historic site 10
	Festivals or events 02 Attend sports events 110
(Newrest) CITY TOWN PROVINCE STATE	Shopping 03 Participate in sports or out-
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ?	Sightseeing 04 Swimming 137
(REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events e.g. plays, concerts 050 Other water sports 140
Miles  Kilometres  Kilometres  Kilometres	Nightlife: entertainment 060 Hunting or fishing 150
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN	Dirring at night quality restaurants 07 Cross country skiing 16
THIS HOUSEHOLD WENT ON THIS TRIP? under 15 years 15 years and over	Visit a theme park oa Downhill skring
	· Visit zoo museum Other
15. WAS THIS A WEEK-END TRIP?	natural display 09
Yes ¹() No ²()	None of the above 190
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	22. IF "VISIT NATIONAL. PROVINCIAL. REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK. WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
Enter number 11 000 go to 19	enter code(s) Did not visit a
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 19
Newfoundland 01 Saskatchewan 08 P.E.1. 02 Alberta 09 Nova Scotia 03 British Columbia 10 New Brunswick 04 N.W.T. or Yukon 1. Quebec 05 United States 12 Manitoba 07 All other countries 13	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?  Prepaid packages it e package tours)  Transportation to and Irom destination including expenditures for gas  Local transportation (i.e. taxis, bus, etc.)  Accommodation  Food and beverages
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND	Recreation and entertainment 6 5 1 20
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.)
	Total (if no breakdown given) 5 5 1 1 20
Hotel (including tourist nomes)	24. IF "BUSINESS" MARKED IN 20 ASK WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives	
	Yourself?
Private cottage or vacation home 5	Other member(s) of your household?
Commercial cottage or cabin	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities erc.)	January 10 February 10 March 10
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "aulo" motor homes, jeeps, trucks, vans and campers, include as "other" motorcycles and bicycles. (Mark one only.)	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD JANUARY 1st TO MARCH 31, 1988?  None 6 Go to 28 OR (Enter number)
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 10 Rail 30 Other 50	January? February? 2 March? 3
Bus <sup>2</sup> O Boat <sup>4</sup> O	28. INTERVIEWER CHECK ITEM:
Air 6 Did you rent Yes 7 No 6 No	Otherwise Go to 29  Otherwise Go to TRIP 8

TRIP 8	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
CONTINUING WITH THE NEXT TRIP	Visiting friends relatives Pleasure 20 Personal 30
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Business A convention 5 A convention 5 No 10
(nearest) CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY  12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respon-	Visiting friends  Visiting friends  Or relatives  Visit a national.  Provincial Regional Park  Or Historic site
dent went to more than one place on this trip, enter name of place that is furthest from his her home)	Festivals or events 02 Attend sports events 110
INEMESTI CITY TOWN PROVINCE STATE	Shopping 03 Participate in sports or out-door activity (specify)
COUNTRY (If outside Canada) FOR OFFICE USE ONLY	Sightseeing 04C Swimming 13.0
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS	Attend cultural events e.g. plays, concerts 050
Miles Denter number	Nightlife entertainment 06 Hunting or fishing 150
14. INCLUDING YOURSELF, HOW MANY PEDPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	high quality restaurants 07.
under 15 years 15 years and over	theme park 080 Visit zoo museum Other 180
15. WAS THIS A WEEK-END TRIP?	natural display 090 None of the above 190
Yes 10 No 20	22. IF VISIT NATIONAL PROVINCIAL REGIONAL PARK OR
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	HISTORIC SITE" MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) DR HISTORIC SITE(S) YOU VISITED?
Enter number If 000 go to 19	enter code(s) Oid not visit a
17. IN WHICH PROVINCES, TERRITORIES, OR DTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 990
Newfoundland 31 Saskatchewan 08	TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
PE! 02 Alberta 09 Nova Scotia 03 British Columbia 10	Prepaid packages (i.e. package tours)  Transportation to and from destination (i.e. package)  Prepaid packages (i.e. package tours)
New Brunswick 04 N.W.T or Yukon 11	lincluding expenditures for gas 2 2 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Ouebec 05	Accommodation 4 S 1 L 1 P
Ontario de United States 12	Food and beverages 5 S 1 1 1 20
Manitoba 27 All other countries 13	Recreation and entertainment 6 S 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
18. IN WHAT TYPES OF ACCOMMDDATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.)
	Total (if no breakdown given)
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK: WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Motel	An employer?
Camping or trailer park	Yourself? 2 00
Home of friends or relatives	Other member(s) of your household?
Private cottage or vacation home 5	25. IN WHICH MONTH DID THIS TRIP END?
Commercial cottage or cabin 8	January 10 February 2/0 March 3/0
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include	1988?
as "auto" motor homes, leeps, trucks, vans and campers, include as "other" motorcycles and bicycles, (Mark one only.)	None Go to 28 OR (Enter number)  27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
	January? : February? 2 March? :
Automobile 1 Rail 3 Other 5 Bos 8 Boat 4 O	28. INTERVIEWER CHECK ITEM:  Last Inp Go to 29
Air 60 - Did you rent Yes 70 No 80	

		Yes	No	
	within the province?	'0	<sup>2</sup> O	
	to some other province(s)?	³O	*O	
	to the United States?	50	°0	
	to a foreign country other than the United States?	<b>'</b> O	*0	
). FOR THE YEAR 1987, IN VIDEDUCTIONS? INCLUDE IN	WHICH OF THE FOLLOWING RANGES WA	S YOUR TOTAL H	OUSEHOLD INCOME BEFORE T	AXES AF
Less than \$10,000	\$30.000 to \$39.999	40	\$60,000 to \$69.999	
\$10,000 to \$19,999	²O \$40.000 to \$49.999	50	\$70,000 and over	8
\$20,000 to \$29,999	\$50,000 to \$59,999	•0	Not Stated	٥
. HOW MANY PEOPLE CON	TRIBUTED TO THIS HOUSEHOLD INCOME	?		
One	Three .	3○		
Two	<sup>2</sup> Four or more	40		
ARE YOU A MEMBER OF A	FREQUENT FLYER PROGRAM?			
Yes ¹O	No s○			

SURVEY MONTH :

May 1988

TITLE :

1988 Veterans Survey

SPONSOR:

Veterans Affairs Canada

SURVEY METHOD:

Telephone / Personal Interview

SAMPLE SIZE :

Each person 50 years of age and over in rotations 1, 2,

3 and 6

OBJECTIVES :

Answers to these questions will be used to plan for the

future needs of veterans and their families.

PROJECT MANAGER:

Penny Barclay

MICRODATA:

Yes Price No

Refer to Survey of Consumer Finance

# 1988 Veterans Survey "Q" Card

0 | 5 | 8 | 8

Item 50 on F03 - Supplementary questions and codes

Ask every applicable supplementary question as indicated on F03 for each person 50 years of age and over, and enter a code in every applicable item

Answers to the next few questions will be used to plan for the future needs of veterans and their families. NOTE: be sure to ask every question exactly as worded

# WARTIME SERVICE

Did....... have wartime service as a member of the Canadian or Allied Armed Forces in:

- 1 World War I ?
- 2 World War II ?
- 3 Korea ?
- 4 No wartime service ---
- Go 10 "CS" 5 - Don't know -

(If more than one response, record lowest code only)

#### CANADA / ALLIES

Was this service with the Canadian Forces or Allied Forces?

CA 1 - Canadian Forces

Ε

F

G

W

Н

- 2 Allied Forces
- 3 Don't know

(If more than one response, record lowest code only)

#### SERVICE OVERSEAS

Was this wartime service overseas?

- S 0
  - 1 Yes\_
    - 2 No \_ 3 - Don't know -

End for this person; continue with "WS" for next eligible respondent

### CIVILIAN SERVICE

- Did...... serve in World Wars I or II in a civilian capacity such as in the Merchant Marine? CS

  - 2 No
    - 3 Don't know

### WIDOWED WARTIME

Is...... the widowed spouse of a person with wartime service?

- W. 1 - Yes
  - 2 No -

3 - Don't know \_\_\_ End for this person; continue with "WS" for next eligible respondent

## WIDOWED OVERSEAS

Is..... the widowed spouse of a person with overseas service? W

- 2 No -
- 3 Don't know -
- Continue with "WS" for next eligible respondent

## Examples of "CIVILIAN SERVICE":

- Merchant Marine
- Salvation Army
- Red Cross
- Knights of Columbus War Workers
- St. John Ambulance Corps
  - Civilian instructors in service schools or establishments
- RCMP - Civilian Fire Fighters
- Civilians attached to reserve units of the military

SURVEY MONTH :

May 1988

TITLE :

The Household Facilities and Equipment Survey

SPONSOR:

Statistics Canada

SURVEY METHOD:

Telephone / Personal Interview

SAMPLE SIZE :

Rotation groups 1,2,3 and 6

OBJECTIVES :

The information collected from this year's survey will be compared with that of previous years to show any changes that have occurred, particularly in housing. This information helps government agencies and private builders forecast public demand for specific types of

housing.

PROJECT MANAGER :

Penny Barclay

MICRODATA:

Yes

Price

No

Refer to Survey of Consumer Finances

8-5100-9 1 04-01-88 SOC/ENM - 050-60061

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1988 HOUSEHOLD FACILITIES & EQUIPMENT SURVEY

R.O. Docket No. Survey date Assignment No.

FORM NO HE 06

\*Authority - Statistics Act. Chapter 15, Statutes of Canada

1 2	3 4	]
10. DATE STRUCTURE ORIGINALLY BUILT	19. SUPPLEMENTARY HEATING EQUIPMENT	27. MICROWAVE OVEN
Belore 1941	(excluding fireplace) Heating stove	Yes O No O
1941 - 1950	2 ^	28, GAS BARBECUE
1951 - 1960	Cookstove or range	Yes O No O
1961 - 1970	Portable heater	29. NUMBER OF REFRIGERATORS (11 none enter 0)
1971 - 1960 5	Other (Specify in NOTES)	30. HOME FREEZER SEPARATE FROM
1981 - 1984	None Go to 21.	REFRIGERATOR
1985	20. FUEL FOR SUPPLEMENTARY HEATING EQUIPMENT	Yes O No O
1986.	Oil or other liquid fuel	31. AUTOMATIC DISHWASHER
9 🔿	Gas 20	Built-in
1987 or later	Electricity 3	Portable
USE QUESTION CARD FOR 11	Wood	None
11. IS THIS DWELLING IN NEED OF ANY REPAIRS?  (Do NOT include desirable remodelling,	Other (Specify in NOTES)	32. WASHING MACHINE
additions, conversions or energy improvements).	21. HOME AIR CONDITIONING	Automatic washer
Yes, MAJOR REPAIRS	Window type	Electric wringer-washer
2 🔿	Central unit	Other electric washer
Yes, MINOR REPAIRS	None 3	None 4 O
No. only REGULAR MAINTENANCE	22. TYPE OF WATER SUPPLY	33. CLOTHES DRYER
12. TOTAL NUMBER OF ROOMS (Including bedrooms)	Hot and cold running water O	Electric O
13. NUMBER OF BEDROOMS	Cold running water only 2 Ge to 24.	Gas 2
(if none enter 0)	No running weter	None
14. PRINCIPAL HEATING EQUIPMENT	23. PRINCIPAL FUEL FOR PIPED HOT WATER SUPPLY	TOTAL NUMBER OF:
Steam or hot water furnace	Oil or other liquid fuel	(If none enter 0)
Forced hot air furnace	Piped gas	24. RADIOS IN DWELLING (7/ "0", go to 36)
Other hot air furnace	Bottled gas	
Heating stove (incl. wood stove)	Electricity	35. RADIOS WITH FM BAND
Electric heating 5	Wood or other (Specify in NOTES)	
6 (	24. INSTALLED BATHTUB OR SHOWER	36. COLOUR TV SETS
Cookstove or other (Specify)  15. AGE OF PRINCIPAL HEATING EQUIPMENT	In one bathroom .	37. BLACK AND WHITE TV SETS
10	In two or more bathrooms	DOES THIS HOUSEHOLD HAVE THE
5 years or less	Beth facilities shared with another household	FOLLOWING:
6 to 10 years	No installed bathtub or shower	1 _ 2 _ 0e te
Over 10 years	25. TOILET FACILITIES	38. CABLE TELEVISION 40
16. PRINCIPAL FUEL FOR THIS HEATING EQUIPMENT	One flush tollet	39. PAY TELEVISION
Oil or other liquid fuel	Two flush toilets	1 ~ 2 ~
Piped gas	Three or more flush tailets	40. CABLE CONVENTER
Bottled gas	Chemical or other type	41. VIDEO RECORDER
Electricity	Toilet facilities shared with another household 5	42 CAMCORDER 1020
Wood	No installed toilet	
Other (Specify in NOTES)	26. FLIEL FOR PRINCIPAL COOKING EQUIPMENT	43. TURNTABLE OR RECORD PLAYER
17. DOES THIS HEATING EQUIPMENT HAVE ANY SPECIAL FEATURES?	28. FUEL FOR PRINCIPAL COOKING EQUIPMENT	
Heat pump	Oil or other liquid fuel	44. CASSETTE RECONDER
Solar panels 2	Piped gas	OR TAPE RECORDER
Dual-fuel system (Specify)	Bottled gas	45, COMPACT DISC PLAYER 10 20
4 0	Electricity	10.20
Other (Specify)	Wood or other (Specify in NOTES)	46, HOME COMPUTER *
No special features	6	47. SMOKE DETECTOR 1 2
18. FUEL-BURNING FIREPLACE	None	48. PORTABLE FIRE EXTINGUISHEN 1 2
Yes O No O		(inside dwelling)
NOTES — See over for additional NOTES	rigina mg	
99 1 1 1 1 1 1 1 1 1 1	<u> </u>	
99	99 1 1 1	

NUMBER OF VEHICLES OWNED BY HOUSEHOLD MEMBERS: (If none enter 0)	57. IS THERE TELEPHONE SERVICE IN THE VACATION HOME?			
(Exclude those used for business)	Yes 10 No 2 0			
19. AUTOMOBILES	S& INTERVIEWER CHECK ITEM:			
	H *No* in item 42 on F03			
50. VANS, TRUCKS	Otherwise 2 G to 59			
51. NUMBER OF TELEPHONES	58. IS THIS DWELLING A CONDOMINIUM?			
ilf "0" specify reason in NOTES and Go to 55)	Yes 1 0 No 2 0			
S2. NUMBER OF TELEPHONE NUMBERS	50. IS THERE A MORTGAGE ON THIS DWELLING?			
	Yes 1 C No 2 C			
53. DOES THIS HOUSEHOLD HAVE A PRIVATE LINE OR A PARTY LINE?	QUESTIONS 61 TO 63 APPLY TO THE HEAD OF HOUSEHOLD			
1 Private line	61, WHEN DID MOVE INTO THIS DWELLING?			
2 Party line	Before 1983 1983 1984 1985 1986 1987 1988			
54. HAS THIS HOUSEHOLD BEEN WITHOUT TELEPHONE SERVICE FOR 2 MONTHS OR MORE SINCE FEBRUARY 1, 1988?	1 ○ → End 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○			
Yes 1 Specify reason in NOTES) No 2	62. DID OWN OR RENT HIS/HER PREVIOUS DWELLING?			
55. DOES ANYONE IN THIS HOUSEHOLD OWN A VACATION HOME?	Owned			
$_{\text{Yes}}$ $^{1}$ $\bigcirc$ No $^{2}$ $\bigcirc$ $\rightarrow$ Go to 58	Rented 2			
S6. IS THE VACATION HOME IN -	Did not maintain own dwelling			
Ontario 1 0				
Quebec 2	63. BEFORE MOVING HERE, HAS EVER OCCUPIED A DWELLING WHICH HE/SME OWNED?			
10				
direction to the state of the s	Yes 1 No 2 Don't know 3			
Outside of Canada				
NOTES				
18th no.	Rem no.			
99	99			
99	99			
99	99			
99	99			
79				
99	99			

8-5100-9.1 04-01-88

SURVEY MONTH:

July 1988

TITLE :

Travel Survey

SPONSOR:

Tourism Canada

SURVEY METHOD :

Personal / Telephone Interview

SAMPLE SIZE :

One civilian member, 15 years of age or over, from each household in rotation 4 throughout Canada. In addition, rotation groups 5 and 6 in the provinces of Newfoundland, New Brunswick, Quebec, Manitoba and

Alberta.

OBJECTIVES :

This survey will provide the sponsor with information on travel by Canadians in terms of their contribution to the Canadian economy and the utilization of various travel related services (example: transportation, accommodation facilities). The data will also be used to provide are understanding of the Canadian traveller's habits, their destination; the purpose of their trips, the length of stay, etc. and to provide a picture of the socio-economic characteristics of Canadians who travel.

PROJECT MANAGER:

Denis Lefebyre

MICRODATA:

Yes

Price \$ 300

No

Statistics Canada

Household Surveys
Division

Statistique Canada

Division des
enquêtes-menages

Confidential when completed

Travel Survey (Second Quarter)

Authority Statistics Act. Statutes of Canada 1970 - 71 - 72. Chapter 15

		100	2	3 0 7 8
		Form t	to Docker	
		4		5 6
		7		RD page-line No Household :
		7 Given Nam	ie III	
		8 Surname		
	INTRODUCTION AT	TIME OF LABOUR FOR	RCE SURVEY	
has base	energe entre			
riss deen	randomly selected from you	or household as a respond	ent for the 1988 Tra	rvel Survey
Is he/she avai	lable?	Date	1.	
		Date.	Time	
Yes O	Conduct interview	Call Back	Call E	act .
No.O	Maria		0.00	AGC K.
	Make an appointment ——	Address:		Telephone No.
				Toropriorie 140.
this three month period as a	member of an operating cre		etc.:	
as a comm	member of an operating cre nuting to work or school; ng to a new residence.		etc.:	
as a comm movir	member of an operating cre nutting to work or school; ng to a new residence.	ew of a bus, plane, truck, o		nonth period?
as a como movir	member of an operating cre nuting to work or school; ng to a new residence.	ew of a bus, plane, truck, of	uring this three n	nonth period?
as a commovir	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night of  Yes  How	or more which ended d	uring this three n	
as a commovir	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night of  Yes  How	or more which ended d	uring this three n	
as a commoving and a commoving a commo	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night of  Yes  How	or more which ended duri	uring this three n No O ng this three mo	
A. Did you take any busin  B. Did you take any other include: taking a vacati	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night or Yes  How  trips of one night or no On, visiting friends or re	or more which ended d many?  nore which ended duri elatives, attending a we	uring this three n  No O  ng this three moedding, fair or fes	nth period? Other trips tival, etc.
A. Did you take any busin  B. Did you take any other include: taking a vacati	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night or Yes  How  trips of one night or no On, visiting friends or re	or more which ended during a wind many?	uring this three n  No O  ng this three moedding, fair or fes	nth period? Other trips tival, etc.
A. Did you take any busing the include: taking a vacation on the include: taking a vacation on the include: taking a vacation of taking a va	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night or Yes  How  trips of one night or non, visiting friends or re Yes  How  Yes  How  How residence.	or more which ended during a wind many?	ng this three mondding, fair or fesson	nth period? Other trips tival, etc.
A. Did you take any busing a vacation of the common of the	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night or Yes  How  trips of one night or non, visiting friends or re Yes  How  day trips of at least 50 m	or more which ended during a wind many?	ng this three mondding, fair or fesson	nth period? Other trips tival, etc.
A. Did you take any busing the include: taking a vacation on the include: taking a vacation on the include: taking a vacation of taking a va	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night or Yes  How  trips of one night or non, visiting friends or re Yes  How  Yes  How  How residence.	or more which ended during a wind many?	ng this three mondding, fair or fesson	nth period? Other trips tival, etc.
A. Did you take any busin  B. Did you take any other include: taking a vacati  C. Did you take any same month period?	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night or Yes  How  trips of one night or non, visiting friends or re Yes  How  H "Yes" in A, B or C  Otherwise	or more which ended during a with many?  Indies (80 km) or more, or many?  1 Go to 10  2 Go to 29	uring this three n  No O  ng this three mo edding, fair or fee  No O  ne way, for any re	nth period? Other trips tival, etc.
A. Did you take any other	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night or Yes  How  trips of one night or non, visiting friends or re Yes  How of  Yes  How of  Yes  How of  Yes  A, B or C  Otherwise  Add entries in A, B and C	many? Go to 10  2 Go to 29  C above: Enter total number	ng this three mondaing, fair or fea	nth period? Other trips tival, etc.
A. Did you take any busin  B. Did you take any other include: taking a vacati  C. Did you take any same month period?	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night or Yes  How  trips of one night or non, visiting friends or re Yes  How of  Yes  How of  Yes  How of  Add entries in A, B and C  Then read the following sta	many? Go to 10  Go to 10  above: Enter total number stement to the respondent:	ng this three mondaing, fair or feather way, for any restrictions of trips laken.	nth period? Other trips tival, etc.
A. Did you take any busin  B. Did you take any other include: taking a vacati  C. Did you take any same month period?	member of an operating cre nuting to work or school; ig to a new residence.  Yes  How  trips of one night or non, visiting friends or re  Yes  How  Wes  How  The rips of at least 50 m  Yes  How of the read the following state a few more details about	many? Go to 10  2 Go to 29  C above: Enter total number	ng this three mondaing, fair or feather way, for any restrictions of trips laken.	nth period? Other trips tival, etc.
A. Did you take any busin  B. Did you take any other include: taking a vacati  C. Did you take any same month period?	member of an operating cre nuting to work or school; ng to a new residence.  ess trips of one night or Yes  How  trips of one night or non, visiting friends or re Yes  How of  Yes  How of  Yes  How of  Add entries in A, B and C  Then read the following sta	or more which ended during a with many?  """  """  """  """  """  """  """	ng this three mondaing, fair or feather way, for any restrictions of trips laken.	nth period? Other trips tival, etc.

TRIP 1 BEGINNING WITH THE FIRST TRIP THAT ENDED DURING THI PERIOD:	Visiting friends/
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	relatives 1 Pleasure 2 Personal 3 Business 4
	Was it to attend a convention? Yes 6 No 7
(nearest) CITY TOWN	21. ON THIS TRIP, DID YOU BARTICIDATE IN ANY OF
PROVINCE SOO OFFICE	FOLLOWING ACTIVITIES? (Read list and mark all that apply)
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home).	Visiting friends Visit a National.  Visiting friends Provincial. Regional Park or Historic site
	Festivals or events 02 Attend sports events 11
(Nearest) CITY-TOWN PROVINCE STATE	Shopping 03 Participate in sports or out-door activity (specify) 12
COUNTRY (if outside Canada) FOR OFFICE LIFE ONLY	January (specify)
13. APPROXIMATELY HOWEAR EROM YOUR HOLES	Swimming 13
(REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events e.g plays, concerts 050 Other water sports 140
Miles 1 Enter number	Nightlile/ entertainment os Hunting or fishing 15
14. INCLUDING YOURSELF HOW MANY BEOR! THOMAS	Dining at high quality restaurants 07 Cross country skiing 16
THIS HOUSEHOLD WENT ON THIS TRIP? under 15 years 15 years and over	Visit a Downhill skiing 170
	Visit 700/museum/
15. WAS THIS A WEEK-END TRIP?	natural display 090 Other 160
Yes 10 No 20	None of the above 19
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	22. IF "VISIT NATIONAL, PROVINCIAL, REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK: WHAT WAS THE NAME
Enter number # 000 go to 19	OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	enter code(s)  Did not visit a  National park or  Historic site  99
Newfoundland	23. INCLUDING CHARGES ON CREDIT CARDS. WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?  Prepaid packages (i.e. package tours) 1
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND	Recreation and entertainment 6 5 1 1 1 100
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.)
	Total (if no breakdown given)
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK
Motel 2	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives	Yourself?
Private cottage or vacation home 5	Other member(s) of your household?
Commercial cottage or cabin 6	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	April 1 May 2 June 3
WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.)	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD APRIL 1st TO JUNE 30, 1988?  None 1 Go to 28 OR (Enter number)
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Rail 3 Other 5	April? 1 May? 2 June? 3
Bus 20 Boat 40	28. INTERVIEWER CHECK ITEM:
Air 6 → Did you rent Yes 7 No 8	Last trip 1 Go to 29
s car? Yes ( No 8)	Otherwise 2 Go to TRIP 2

TRIP 2	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
CONTINUING WITH THE NEXT TRIP	Visiting friends/ relatives 1 Pleasure 2 Personal 3
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Business 40 ¬ A convention 50
	Was it to attend a convention? Yes 8 No 7
(nearest) CITY:TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY	Vieit a National
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Visiting friends or relatives  O1  OF Historic site  O1  OF Historic site
	Festivals or events 02 Attend sports events 11
(Newest) CITY.TOWN PROVINCE/STATE	Shopping 03 Participate in sports or out- door activity (specify) 12
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Sightseeing 040 Swimming 130
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS (REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events
Miles 10	Nightlite/
Kilometres 20 Enter number	ontertainment uso
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?  under 15 years 15 years and over	Visit a
under 15 years 15 years and over	theme park os Downhill skiing 17
15. WAS THIS A WEEK-END TRIP?	natural display 09 Other 18
Yes ¹O No ²O	None of the above 19
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED:
Enter number # 000 go to 19	violico:
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	enter codets)  Did not visit a  National park or  Historic site 99
Newfoundland 01 Saskatchewan 08	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR ?
P.E.I. 02 Alberta 09	
Nova Scotia 03 British Columbia 10	Prepaid packages (i.e. package tours) 18 100
New Brunswick 04 N.W.T. or Yukon 11	ricidang expenditures for gas 2 1 1 1 100
Quebec 05	Local transportation (i.e. taxis, bus, etc.) 3 \$1 1 1 100
Ontario 06 United States 12	Accommodation 4 s 00
Manitoba 07 All other countries 13	Food and beverages 5 S S S S S S S S S S S S S S S S S S
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Recreation and entertainment 6 5 1 100
	Other (souvenirs, etc.) 7 \$ 1 1 100  Total (if no breakdown given) 6 \$ 1 1 100
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK:
Motel 2	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives	Yourself? 2 4
Private cottage or vacation home 5	Other member(s) of your household?
Commercial cottage or cabin 6	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	April 1 May 2 June 3
9. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, seeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.)	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD APRIL 1st TO JUNE 30, 1988?  None 1 Go to 28 OR (Egles cumber)
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Rail 3 Other 5	April? : May? 2 June? 3 June?
Bus 2 Boat 4	28. INTERVIEWER CHECK ITEM:
Air 6 → Did you rent	Last trip Go to 29
a car? YES / No 8	Otherwise 2 Go to TRIP 3

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TRIP 3  CONTINUING WITH THE NEXT TRIP	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?  (Mark one only)  Visiting frends/
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	relatives 1 Pleasure 2 Personal 3
	Was it to attend a convention? Yes 6 No 7
(nearest) CITY TOWN  PROVINCE FOR DESCRIPTION OF THE PROVINCE	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY  12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Visit a National.  Visiting friends or relatives  O1  O1  Festivals or events  Visit a National. Provincial, Regional Park or Historic site  10  Attend sports events  11  Attend sports events
(Nearest) CITY/TOWN PROVINCE/STATE  COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Shopping 03 Participate in sports or out-door activity (specify) 120
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ? (REPEAT DESTINATION FROM QUESTION 12)	Sightseeing 040 Swimming 130  Attend cultural events 050 Other water sports 140
Miles 10 Kilometres 20 Enter number	e.g. plays, concerts 050 Nightlife/ entertainment 060 Hunting or fishing 150
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	Dining at high quality restaurants 07 Cross country skiing 16
under 15 years 15 years and over	theme park  Visit zoo/museum/ natural display  Other  Downhill skling  17  Other  16
15. WAS THIS A WEEK-END TRIP?	None of the above 190
Yes 1 No 2	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL SACK OF
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	HISTORIC SITE" MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES	enter code(s) Did not visit a
DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 99
Newfoundland 01 Saskatchewan 08 P.E.I. 02 Alberta 09	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?  Prepaid packages (i.e. package tours)
Nova Scotia 03 British Columbia 10	Transportation to and from destination including expenditures for gas
New Brunswick 04 N.W.T. or Yukon 11	Local transportation (i.e. taxis, bus, etc.) 3 \$1 1 1 CO
Ontario 06 United States 12	Accommodation 4 \$ 1 00 Food and beverages 5 \$ 1 1 100
Manitoba 07 All other countries 13	
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Recreation and entertainment 6 \$ 000 Other (souvenirs, etc.) 7 \$ 1 1 100
	Total (II no breakdown given)
Motel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK
Motel 2	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives	Yourself? 2 06
Private cottage or vacation home	Other member(s) of your household?
Commercial cottage or cabin e	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	April 1 May 2 June 3
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.)	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD APRIL 1st TO JUNE 30, 1988?  None 1 Go to 28 OR (Enter number)
Automobile 1 Rail 3 Other 5	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Bus 2 Boat 4	28. INTERVIEWER CHECK ITEM:
Air ( → Did you rent Yes 7 No 6	Last trip

TRIP 4	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP
CONTINUING	(Mark one only) Visiting friends/
11. WHERE DID YOU ARE	relatives 1 Pleasure 2 Personal 3
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Business 40 A convention 5
	Was it to attend a convention? Yes 6 No 7
(nearest) CITY TOWN	21. ON THIS TRIP DID YOU PARTICIPATE IN ANY OF THE
	FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY	Visit a National
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Visiting friends Provincial, Regional Park or relatives 01 or Historic site 10
	Festivals or events 02 Attend sports events 110
(Nearest) CITY/TOWN PROVINCE/STATE	Shopping 03 door activity (specific
	Snopping 03 door activity (specify) 12
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Sightseeing 04 Swimming 13
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS?	-
Miles 10 )	Nightlife/
Kilometres 2 Enter number	entertainment 06 Hunting or fishing 15
14. INCLUDING YOURSELF HOW MANY BEOR! E NOW!	Dining at high quality restaurants 07 Cross country skiing 16
THIS TROUBERIOLD WENT ON THIS TRIP?	Visit a
under 15 years 15 years and over	theme park . oa Downhill skiing 17
	Visit zoo/museum/ natural display 09/ Other 18/
15. WAS THIS A WEEK-END TRIP?	natural display
Yes ¹○ No ²○	None of the above 19
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	22. IF "VISIT NATIONAL, PROVINCIAL, REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED!
Enter number	VISITED?
17. IN WHICH PROVINCES TERRITORIES OF OTHER PROVINCES	enter code(s) Did not visit a
DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 99
Newfoundland of Saskatchewan os	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
P.E.I. 02 Alberta 09	Broneid posture of
Nova Scotia 03 British Columbia 10	Prepaid packages (i.e. package tours) , \$1 100  Transportation to and from destination
New Brunswick 04 N.W.T. or Yukon 11	including expenditures for gas
Quebec 05	Local transportation (i.e. laxis, bus, etc.) 3 5 1 1 1 100
Ontario 06 United States 12	Accommodation 4 s 1 1 100
Manifoba 07 All other countries 13	Food and beverages 5 \$ 1 1 1 100
8. IN WHAT TYPES OF ACCOMMODIATION DID YOU STAY AND	Recreation and entertainment 6 5 1 1 1 00
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.) 7 \$1 1 1 100
	Total (if no breakdown given) a S 1 1 1 1 100
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK:
Motel 2	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives	Yourself?
Private cottage or vacation home	Other member(s) of your household?
Commercial cottage or cabin 6	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	April 10
9. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE DN THIS TRIP? Include as "auto" motor homes peans tracks.	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD APRIL 151 TO JUNE 30, 1988?
as "other" motorcycles and bicycles. (Mark one only.)	None 1 Go to 28 OR (Enter number)
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Rail 3 One 50	April 1
Other 30	June? 3
	28. INTERVIEWER CHECK ITEM:
Air 6 Did you rent Yes 7 No 8	Otherwee
02-07	Otherwise 2 Go to TRIP 5

TRIP 5  CONTINUING WITH THE NEXT TRIP	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?  (Mark one only)  Visiting trends:
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	relatives 1 Pleasure 2 Personal 3
	Business 40 A convention 50
	Was it to attend a convention? Yes 6 No 7
(nearest) CITY TOWN	<ol> <li>ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)</li> </ol>
PROVINCE FOR OFFICE USE ONLY	Visit a National
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Visiting friends or relatives Provincial, Regional Park or Historic site
	Festivals or events 02 Attend sports events 11
INtervesti CITY TOWN PROVINCE STATE	Shopping 03 Participate in sports or out- door activity (specify) 12
CCUNTRY (il outside Canada) FOR OFFICE USE ONLY	Sightseeing 04 Swimming 13
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ? (REPEAT DESTINATION FROM QUESTION 12)	
THEFER DESTINATION FROM QUESTION 12)	Attend cultural events e.g plays, concerts 05 Other water sports
Miles 10	Nightlife Hunting or fishing 15
Kilometres 20 Enter number	Cining at
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	high quality restaurants 07 Cross country skiing 16
under 15 years 15 years and over	theme park 080 Downhill skiing 120
	Visit 200 museum natural display 09 Other 18
15. WAS THIS A WEEK-END TRIP?	
Yes 10 No 20	None of the above 19
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
	enter code(s) Did not visit a
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 99
Newfoundland of Saskatchewan os P.E.L. 02 Alberts	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
NOOTES 09	Prepaid packages (i.e. package tours)
Nova Scotia 03 British Columbia 10	Transportation to and from destination including expenditures for gas
New Brunswick 04 N.W.T. or Yukon 11	Local transportation (i.e. taxis, bus, etc.) 3 s
	Accommodation
Ontario 06 United States 12	Food and beverages 5 5 1 1 1 100
Manitoba 07 All other countries 13	Recreation and entertainment 6 5 1 100
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	
The state of the s	Other (souvenirs, etc.) 7 S 1 1 100
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK.
Motel	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives	Yourself?
Private cottage or vacation home	Other member(s) of your household?
Commercial cottage or cabin 6	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	April 'C May 2 June 3
9. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers include as "other" motorcycles and bicycles. (Mark one only.)	26. HOW MANY DTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD APRIL 121 TO JUNE 30, 1988?
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Rail 3 Other 5	April? 1 May? 2 June? 3
Bus 2 Boat 4	28. INTERVIEWER CHECK ITEM:
Air 6 - Did you rent	Last trip 1 Go to 29
a car? Yes * No 8	Otherwise 2 Go to TRIP 6

TRIP 6  CONTINUING WITH THE NEXT TRIP	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only) Visiting friends/
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Business 4 A convention? Yes 6 No 7
Inearesti CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his her home)	Visit a National.  Visit a Regional Park or relatives  O1
(New est) CITY TOWN PROVINCE:STATE	Festivals or events 02 Attend sports events 11 Participate in sports or outdoor activity (specify 12)
COUNTRY (it outside Canada) FOR OFFICE USE ONLY  13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ?	Sightseeing 04 Swimming 13
(REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events e.g. plays, concerts  Other water sports  14  Hunting or fishing  15
Kilometres 2 Enter number	Dining at Cross country sking 16
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?  under 15 years 15 years and over	Visit a theme park
	Visit zoo/museum/ natural display 090
15. WAS THIS A WEEK-END TRIP?	None of the above 19
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	22. IF "VISIT NATIONAL. PROVINCIAL. REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU
Enter number # 000 go to 19	VISiTED?  enter code(s) Did not visit a
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 990  23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE
Newfoundland 01 Saskatchewan 06 P.E.I. 02 Alberta 09	TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?  Prepaid packages (i.e. package tours)
Nova Scolia 03 British Columbia 10 New Brunswick 04 NWT or Yukon 11	Transportation to and from destination including expenditures for gas 2 s 1 1 100
Quebec os	Local transportation (i.e. taxis, bus, etc.) 3 5 1 1 1 100
Ontario 05 United States 12	Accommodation 4 S 1 1 1 00 Food and beverages 5 S 1 1 1 100
Manitoba 07 All other countries 13	Recreation and entertainment 6 5 1 1 100
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.)
	Total (if no breakdown given) 8 1 1 1 100
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK. WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID
Motel 2  Camping or trailer park 3	FOR BY:
Home of friends or relatives	An employer? 1 % Yourself? 2 %
Private cottage or vacation home 5	Other member(s) of your household?
Commercial coffage or cabin 6	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	April 1 May 2 June 3
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, frucks, vans and campers, include as "other" motorcycles and bicycles (Mark one only.)	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD APRIL 1st TO JUNE 30, 1988?  None 1 Go to 28 OR (Enter number)
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Rail 3 Other 5	April?   May? 2 June? 3
Bus 20 Bost 40	28. INTERVIEWER CHECK ITEM:  Last trip  Go to 29
Air <sup>6</sup> ○ → Did you rent Yes <sup>7</sup> ○ No <sup>8</sup> ○	Otherwise 2 Go to TRIP 7

TRIP 7	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
CONTINUING WITH THE NEXT TRIP	Visiting friends,
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	relatives 10 Pleasure 20 Personal 30
	Business A convention 5
	Was if to attend a convention? Yes 60 No 10
(nearest) CITY/TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY	Visit a National.
<ol> <li>WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respon- dent went to more than one place on this trip, enter name of place that is 'urthest from his/her home)</li> </ol>	Visiting friends Provincial Regional Park
	Festivals or events 02 Attend sports events 10
(Nearest) CITY TOWN PROVINCE STATE	Shopping 030 door activity (specific) 120
	Snopping 03 door activity (specify) 12
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Sightseeing 04 Swimming 130
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ? (REPEAT DESTINATION FROM QUESTION (2)	Attend cultural events Other water sports
Addes	e.g. plays, concerts 050
Miles 10	Nightlite: Hunting or fishing
Midifiel es (	Dining at
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	high quality restaurants 07 Cross country skiing
under 15 years 15 years and over	Visit a theme park 080 Downhill skiing
	Visit zoo/museum
15. WAS THIS A WEEK-END TRIP?	natural display 090 Other 60
	None of the above 19
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR
TRIP?	HISTORIC SITE" MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
	enter code(s) Did not visit a
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site
Newfouridland 01 Saskatchewan 08 P.E.I. 02 Alberta 09	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL DTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR ?
Nova Scotia 03 British Columbia 10	Prepaid packages (i.e. package (ours) , s ,
New Brunswick 04 N.W.T. or Yukon 11	including expenditures for gas 2
Ouebec 05	Local transportation (i.e. taxis, bus, etc.) 3
Ontario oa United States 12	Accommodation 4
Manitoba 07 All other countries 13	Food and beverages 5 S
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Recreation and entertainment e
THE THE PROPERTY OF THE PACE TYPE?	Other (souvenirs, etc.)
Hotel (including to your buy	Total (if no breakdown given) a b 1 1 1 100
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK: WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID
Camping or trailer park	FOR BY:
Home of friends or relatives	An employer?
Private cottage or vacation home	Other member(s) of your household?
Commercial cottage or cabin	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	April 10
19. WHAT MEANS OF TRANSPORTATION DIC YOU USE TO-	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU
as "auto" motor homes, leeps trucks, year and campare leading	TAKE DURING THE PERIOD APRIL 18 TO JUNE 30, 1988?
as "other" motorcycles and bicycles. (Mark one only.)	None 1 Go to 28 OR (Enter number)
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Raii 3 Other 5	April? 1 May? 2 June? 3
Bus 2 Boat 4	28. INTERVIEWER CHECK ITEM:
Air 6 Did you rent yes 7 No 6	Last trip Go to 29
a car?	Otherwise 2 Go to TRIP 8

TRIP 8	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
CONTINUING WITH THE NEXT TRIP	(Mark one only) Visiting friends
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	relatives 1 Pleasure 2 Personal 3
	Business 4 A convention 5  Was it to attend a convention? Yes 6 No 7
Inewesti CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE ONLY	Visit a National.
WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home).	Visiting friends Provincial, Regional Park
( North Control (Norther Norther)	Festivals or events 02 Attend sports events 110
(Neares) City Town PROVINCE STATE	Shopping 93 Participate in sports or out-door activity (specify) 12
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Sightseeing 04 Swimming 13
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ? (REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events e.g. plays, concerts  Other water sports  14
Miles Control Enter number	Nightifer entertainment 06 Hunting or fishing 15
Kilometres 2 14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN	Dining at high quality restaurants 07 Cross country skiing 16
THIS HOUSEHOLD WENT ON THIS TRIP? under 15 years 15 years and over	Visit a theme park 08 Downhill skiing 17
15 was the	Visit zoo:/museum/ natural display 09/ Other 18/
15. WAS THIS A WEEK-END TRIP?	None of the above 19
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK. WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU
Enter number	VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	enter code(s)  Did not visit a  National park or  Historic site  99,
Newfoundland 01 Saskatchewan 08 P.E.i. 02 Alberta 09	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?  Prepaid packages (i.e. package tours)
Nova Scotia 03 British Columbia 10 New Brunswick 04 N.W.T or Yukon 11	Transportation to and from destination including expenditures for gas 2 2 1 1 1 100
Quebec 05	Local transportation (i.e. taxis, bus, etc.) 3 \$1 1 100
Ontario 06 United States 12	Accommodation 4 S 00
Manitoba 07 All other countries 13	Food and beverages 5 5 1 1 100
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND	Recreation and entertainment 6 5 1 100
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.) 7 5 100
	Total (if no breakdown given) 8 5 1 1 1 100
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK. WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives	Yourself? 2 9%
Private cottage or vacation home 5	Other member(s) of your household?
Commercial cottage or cabin	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	April 10 May 20 June 30
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD APRIL 181 TO JUNE 30, 1988?
as "auto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.)	None 1 Go to 28 OR (Enter number)
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Rail 3 Other 5	April? 1 May? 2 June? 3
Bus <sup>2</sup> Boat <sup>4</sup>	28. INTERVIEWER CHECK ITEM:
Air 6 → Did you ren! Yes 7 No 8	Last trip 1 Go to 29

		TO A DESTINAT		Yes	No	
		within the p	province?	10	2°C	
	**	to some oth	ner province(s)?	30	40	
		to the Unite	ed States?	50	60	
		to a loreign United State	country other than the	70	60	
COD THE	VF 40 4007 (4)	AUTON OF THE C				
DEDUCTIO	NS? INCLUDE I	NCOME FROM W	AGES, SALARIES, TIPS, CO	MMISSIONS, PEN	USEHOLD INCOME BEFORE TAX ISIONS, INTEREST AND RENTS.	ETC.
Less than \$	10,000	10	\$30,000 to \$39,999	40	\$60,000 to \$69,999	7
\$10,000 to	\$19,999	20	\$40,000 to \$49,999	50	\$70,000 and over	6
\$20,000 to	\$29.999	3 <sub>0</sub>	\$50,000 to \$59,999	60	Not Stated	0
. HOW MAN	Y PEOPLE CON	TRIBUTED TO TH	IIS HOUSEHOLD INCOME?		· ·	
	One	10	Three	3○		
	Two	20	Four or more	40		
ARE YOU	A MEMBER OF	A FREQUENT FLY	ER PROGRAM?			
	Yes 1	No 4	0			
TES:						

SURVEY MONTH: September 1988

TITLE: National Child Care Survey

SPONSOR: Health and Welfare Canada

SURVEY METHOD: Personal / Telephone Interview

SAMPLE SIZE: 13 rotation groups

OBJECTIVES: The objectives of the Child Care Survey are:

 to accurately describes the nature of child care needs in Canada;

to accurately show current child care use patterns;

 to find out what child care arrangements and options parents prefer;

 to find out what influences child care needs, use patterns and preferences;

 to examine how different child care patterns effect children, mothers and fathers, both on an individual basis and in relationship to each other; and

 to find out how parents feel about the affordability, availability and quality of major child care options.

PROJECT MANAGER: T. Scott Murray

MICRODATA: Yes Price No

X \$ 1,000

## 1988 NATIONAL CHILD CARE SURVEY

	CONFIDENTIAL (when complete					
1. 2	COMPLETING THE FORM 06					
Dochar No. Fam. Id.	FOLLOWING COMPLETION OF POSFOS					
3	- Affix F06 label or enter label information.					
Allegraters No. Lang gret	- Correct label information if required.					
PSU Group Classer Box	- Enter the name and page line of the designated adult is from 10 Enter the page line of the DA's spouse in from 11.					
7.0	- Identify the reference week in Item 13.					
Lating No. Must	- Transfer the F05 items into items 15 and 16 below					
	Enter the given name, page line and the age of each child under the age of 13 in the DA's economic family in the spaces provided on the inside cover.					
Lating Address	BEFORE THE FOS INTERVIEW					
9. Teleprone Number	- Complete the Interviewer items on the F06 with the appropriate F05 information entered below in items 15 and					
AFFIX LABEL IN SPACE ABOVE OR ENTER THE	These are					
10.	41 01					
Green Name	A15 86 K1 P10 T23 T59					
Pgi. Summe	A28 812 L1 R1 T35 T71					
DA CAMERO	A35 L3 S5					
11. Ppt.1 Socue	- Affix the selection grid label on the inside cover and mark					
12 RECORD OF CALLS AND APPOINTMENTS	the target child circle in the appropriate column					
r Dass Noses	AT THE INTERVIEW					
1	- Introduce the purpose of the survey.					
2 2	Inform the respondent that all the information provided will be lept strictly confidential as required by the Statistics.					
Sept. 11 - 17	14.					
Sept. 18 - 24 2 O Oct. 18 - 22 4 O						
Sept 25 - Oct. 1 3 Oct. 23 - 29 7 O	FINAL STATUS CODE					
Oct. 2 - Oct. 8 + O						
S. DESIGNATED ADULT (Form 05 homs)	16. SPOUSE (Form 05 tioms)					
0. Last week, did _ do any work at a job or business? Yes	10. Last week, did do any work at a job or business?					
No	Yes					
Permanently unable to work 30	Permanently unable to work 30					
Last week, did _ have a job or business at which he/she did not work?	30 Last week, did have a job or business at which hershe did not work?					
Yes 40 No 50	Yes					
1. Willy was _ absent from work last week?	No 5O  22. Why was _ absent from work lest week?					
E. Clinss of worker:						
Main job Enter code	76. Class of worker  Main job					
I. Was _ enrolled as a full-time or pert-time student?  Full-time	81. Was enrolled as a full-time or pert-time student? Full-time 4○					
Part-time 10	Part-time 7〇					

Selection Grid Laber Goes Here

- SELECTING A CHILD
  If more than one cross under the age of 13 or the hamey
  in Assign 4 street from numbers to each chies aged 0 to 5
  in Assign 1 section numbers to each chies aged 0 to 12
  in Assign 1 section numbers to each chies aged 6 to 12
  in On the Sections Gred Label serge time renderin number
  sections number designed
  into the chies the chies depend of section for the chies the chies chies
  the care of the chies the chies depend only care of the chies the chi

A.S. Interpretation Content (Author)  ### Type in hem 10	^	DESIGNATED ADULT'S WORKSTUDY		START TIME
e if "Yes" in filem 10	A1.		A7.	Upon returning do you expect to work full-time a
Partiene • O  Partiene • O  Ref 'Yes' in liem 30 å code 2 in nem 33 ² O Go to A/2  e if 'Yes' in liem 30 å any code but 2 or 3 O Go to A/2  e o minem 33 • O Go to A/2  e o minem 33 • O Go to A/3  a Omerwise • O Go to A/3  A2 Are you currently on materinty/peterntly or extended child care leave? • O  No ¹ O Go to A/2  A3 Minem you received any of the following sinds of inavirous compensation while on materity/paterntly laws • O  A sitter or nesigndour in their home • O  A sitter or nesigndour in their home • O  A sitter or nesigndour in their home • O  A sitter or nesigndour in their home • O  A sitter or nesigndour in their home • O  A sitter or nesigndour in their home • O  A sitter or nesigndour in their home • O  A sitter or nesigndour in their home • O  A sitter or nesigndour in their home • O  A sitter or nesigndour in their home • O  A sitter or nesigndour in their home • O  A sitter or nesigndour in their home • O  OR  On to some other arrangement (specify) • O  OR  On to sepect to return to work? • Go to A5  A5. When are the main reasons you have decided not to return to work? (Mark at that apoly)  Discontinuous of arrangements • O  A sitter or neighbour in discontinuous prefer to use? I Mark nowly one uses the respondent would prefer to use? or only one uses the respondent would prefer to use? • O  Other (specify) • O  Other (specify) • O  A sitter or neighbour in their home • O  A15  Yes ¹ O  Other (specify) • O  A sitter or neighbour in their home • O  A15  A6. Do you aspect to return to the same employer?  Yes ¹ O  Other (specify) • O  A sitter or neighbour in their home • O  A sitter or neighbour in their home • O  A sitter or neighbour in their home • O  A15  Your socue  A6. Do you aspect to return to the same employer?		e E 'Yes' in been 10		
A. When do you expect to return to work?  A. Siter or nanny in your home.  A. Siter or nan				
# 198 A men 3.0 a styr code but 2 or 3 O Go to A12  # Otherwise	1	# "Yes" in Rem 30 & code 2 in Rem 33 2 O Go to A2	_	
A2. Are you currently on maternity-paternity or extended child care leave?  Yes \$ 0  No \$ 0 Go to A12  A2. Are you received any of the following strids of financial compensation while on maternity-paternity issue?  A2. Are you received any of the following strids of financial compensation while on maternity-paternity issue?  A3. New you received any of the following strids of financial compensation while on maternity-paternity issue?  A4. Striar or neighbour in their home 4 0  Your spouse		If "Yes" in Rem 30 & any code but 2 or 6 in Rem 33	-	expect to use for your baby when you return to work! [Mark only one unless the respondent expects to use a
Child care leave?  Yes 1		Otherwise		Workplace daycare centre
As after or neighbour in their home.  A sitter or neighbour in their home.  A sitter or neighbour in their home.  One of their call compensation while on maternity-paternity leave?  Yes No  Unemployment insurance of as A relative A	A2	Are you currently on maternity/paternity or extended child care leave?		Other daycare centre
A3. Nave you received any of the following kinds of financial compensation while on maternity/paternity leave?  Ves No  Unemployment insurance 0:0 or 0  Group insurance 0:0 or 0  Full pay from employer 0:0 or 0  Other financial compensation 0:0 or 0  Other financial compensation 0:0 or 0  Other financial compensation 0:0 or 0  A4. When do you expect to return to work?  I go to A6  Full pay from employer 0:0 or 0  Other financial compensation 0:0 or 0  A5. Is this [are those) the type(a) of care you would most preter to use?  Yes 1 O to not expect to return to work?  A6. What are the main reasons you have decided not to return to work? (Mark at that apoly)  Final pay from employer 0:0 or 0  A7. What are the main reasons you have decided not to return to work? (Mark at that apoly)  A7. What are the main reasons you have decided not to return to work? (Mark at that apoly)  A7. What are the main reasons you have decided not to return to work? (Mark at that apoly)  A7. What are the main reasons you have decided not to return to work? (Mark at that apoly)  A7. What are the main reasons you have decided not to return to work? (Mark at that apoly)  A7. What are the main reasons you have decided not to return to work? (Mark at that apoly)  A7. What are the main reasons you have decided not to return to work? (Mark at that apoly)  A7. What are the main reasons you have decided not to return to work? (Mark at that apoly)  A7. What are the main reasons you have decided not to return to work? (Mark at that apoly)  A7. Is this [are those) the type(a) of care would you prefer to use? (Mark at that apoly)  A7. Is this [are those) the type(a) of care would you prefer to use? (Mark at that apoly)  A7. Is this [are those) the type(a) of care would you prefer to use? (Mark at that apoly)  A7. Is this [are those) the type(a) of care would you prefer to use? (Mark at that apoly)  A7. Is this [are those) the type(a) of care would you prefer to use? (Mark at that apoly)  A7. Is the are the main time to work?  A7. Is this [are those) t				A sitter or nanny in your home 3 O
Training   Compensation while on maternity-paternity leave?   A relative   a   A relative		No <sup>8</sup> O Go to A12		A sitter or neighbour in their home 4 O
Ves No  Unemployment insurance 0:0 oz 0  Group insurance 0:0 oz 0  Full pay from employer 0:0 0 oz 0  Other financial compensation 0:0 oz 0  Other financial compensation 0:0 oz 0  A3. What are the main reasons you have decided not to return to work?  Freter to be with children) 2  Lacs of analysis child care 3 0 Go to A15  Cost of child care too high 4 0  Other (specify) 5 Qo to A15  A5. Is this (are these) the type(a) of care you would most prefer to use?  What are the main reasons you have decided not to return to work?  Workplace daycare cares 10  A sitter or nanny in your home 10  A sitter or nanny in your home 10  A sitter or nanny in your home 10  A sitter or neighbour in their home 10  A sitter or neighbour in	A3.	Have you received any of the following kinds of financial compensation while on maternity-maternity		Your spouse 5 O
Unemployment insurance 01 02 0  Group Insurance 03 04 0  Full pay from employer 05 06 06 0  Partial pay from employer 05 06 06 0  Other financial compensation 05 07 06 07 06 0  A3. Is this jare these) the type(s) of care you would most prefer to use?  Yes 1 0 06 to A15  No 2 0  A10. What are the main reasons you have decided not to return to work? (Mark at that apply)  Figure to be with child(ren) 1 0  Lack of employer support 2 0  Lack of employer support 2 0  Cost of child care too high 4 0  Other (specify) 5 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  A sitter or narry in your home 3 0  Your socuse \$ 0  Your socuse \$ 0  Some other arrangement (Specify) 7  Ves 1 0		leave?		A relative 0 O
Group insurance		Yes No		Some other arrangement (specific) 1 O
Pull pay from employer os		Unemployment insurance 01 O 02 O		
Partial pay from employer		Group Insurance 03 O 04 O	3	
Don't know 8 Go to A15  Don't know 8 Go to A15  A4. When do you expect to return to work?  A5. Is this (are these) the type(s) of care you would most prefer to use?  Yes 1 Go to A5  A6. What are the main reasons you have decided not to return to work? (Mark at that apply)  A6. What or employer support		Full pay from employer 05 0 00 0		
A4. When do you expect to return to work?  A5. Is this (are these) the type(a) of care you would most prefer to use?  Yes 1		Partial pay from employer er 🔾 os 🔾		
prefer to use?  Ves ¹ ○ Go to A15  No ² ○  A5. What are the main reasons you have decided not to return to work? (Mark all that apply)  A16. What type(s) of care would you prefer to use? (Mark only one unless the respondent would prefer to use a combination of arrangements.)  Lack of employer support		Other financial compensation 99 0		GO ID A75
The state of child care to high a state of child care to high a state or neighbour in their home a state of the state of t	A4.	When do you expect to return to work?	AS.	is this (are these) the type(s) of care you would mos
AS. What are the main reasons you have decided not to return to work? (Mark all that apply)  A18. What type(s) of care would you prefer to use? (Mark only one unless the respondent would prefer to use a combination of arrangements.)  Lack of employer support		Go to A6		
A16. What type(s) of care would you prefer to use? (Mark only one uness the respondent would prefer to use a combination of arrangements.)  Workplace daycare centre		or Do not expect to return to work 10 - Go to A5		No <sup>2</sup> O
Prefer to be with child(ren)	AS.	What are the main reasons you have decided not to return to work? (Mark at that apply)	A10	What behalf a see would up a contract to up 6 its
Cost of child care too high		Previer to be with child(ren)		only one unless the respondent would prefer to use a
Cost of child care too high		Lack of employer support 2 O		Workplace daycare centre
A sitter or neighbour in their home		Lack of available child care		Other daycare centre
A sittle of neighbour in their home 10 A15  Your spouse 50  A relative 50  Some other arrangement (Specify) 70  Yes 10		Cost of child care too high		A sitter or nanny in your home
Af relative		Other (specify) s Q		
A6. Do you expect to return to the same employer?  Yes 10				Your spouse
A6. Do you expect to return to the same employer?  Yes 1 O				A relative
Yes ' O				Some other arrangement (Specify) 10)
	AL	Do you expect to return to the same employer?		
No <sup>2</sup> ○		Yes ' O		
		No 2 O		

A.

A11.

First, I'd like to ask you some questions about your job(s) for the week of (reference week).

This will help us understand when you might need child care.

What days and times did you work during that week? Exclude travel time to and from your place of work.

Day	Didn't Work	Worked		Hours	of Work	
Sunday	91 🔾	02 🔘		to	to	to
Monday	63 🔿	04 🔾		to	to	10
Tuesday	05 🔾	∞ ○	97 O Same as Monday OR	to	to	10
Wednesday	08 🔾	∞ ○	10 O Same as Monday OR	to	to	to
Thursday	"0	12 🔾	13 O Same as Monday OR	10	to	to
Fnday	140	15 🔾	16 O Same as Monday OR	to	to	to
Saturday	17 🔾	18 🔾	19 O Same as Monday OR	to	to	to

A12. Does your work schedule very from week to week?	d) Can you bring your child(ren) to work with you on a regular basis?
Yes 1 O	Yes 4 🔾
No <sup>2</sup> O Go to A14	No 5 O
A13. Do you generally know these changes in advance?	
	Don't Know # O
Yes 3 O	e) Can you be flexible in the hours you work?
No 4 O	Yes 7 O
A14. What is the approximate distance from your home to	No & O
your (main) place of work?	Don't Know • O
1 O Miles	f) Can you take paid leave, other than your own sic
2 O Kilometres	days or vecation leave, if your child(ren) is(are) it or if your regular child care arrangement break down?
OR	Yes 1 O
Less than 1 mile or 1 knometre 3 O	No 2 🔾
Varies from day to day 4 O	Don't Know 3 O
None, works at home 5 ○ — Go to A18	g) Would your employer allow you the option o working part-time in your present job?
A15. INTERVIEWER CHECK ITEM (Form 05 for Designated Adult)	Yes 4 🔾
If code 1 "Paid Worker" in Item 78 1 O Go to A16	No 5 O
Otherwise	Don't Know e O
- O 00 D X/8	Already works part-time 7 O
A16. Jobs differ in how much support and flexibility they give working parents. Thinking about your (main) job	h) Would your employer allow you the option of sharing your job with someone else?
a) Are there facilities available for the care of children at your place of work?	Yes 1 O
Yes 3 🔾	No 2 0 Å
No 4 O	Don't Know 3 O
Don't Know 5 O Go to d	f) The Unemployment Insurance Program generall provides 60% of a person's salary as a maternit benefit for 15 weeks. Does your employer provid any additional pay during these 15 weeks?
b) Are these facilities available for children	Yes 4 O
Yes No Know	No 5 🔘
-under the age of 2? 1 O 2 O 3 O	Don't Know 0 O
-from 2-5 years? 4 O 5 O	j) Will your employer hold a job for longer than 1 weeks for a person on maternity leave?
-from 6-12 years? 7 O 8 O 9 O	Yes 7 🔾
***************************************	No . O )
c) Can these facilities be used on an occasional or	Go to A17
short term basis?	k) Does your employer provide pay (partial or full) (
Yes 'O	any of these additional weeks?
No 2 O	Yes O
	No 2 O
Don't Know 3 O	2007 100

A17. What one child-related benefit would you most like your employer to provide to support you in your role as a perent? (Mark only one)  Workplace daycare	ice the cost of
Workplace daycare 4 O Did you anniv for a daycare authorize in	
The second substitution of the second substituti	half of the child. In the last year?
Paid maternity/paternity leave _ 5 O	
Flexible work hours 6 O	
Option of working part-time 7 O	
Other (specify) 6 O	
A23. Were you able to get a subsidized day	ycare space?
Yes 10	
No 40	
None 9 O	
A18. Provincial governments offer subsidized child care to some working parents to help reduce the cost of child care. Funds are either given directly to the parents or to a daycare agency on behalf of the child.  Did you apply for a daycare subsidy in the last year?	easonable cos
hull-time. 5 O	
Yes 1 O No 2 O Go to A28 part-time. • O	
A19. Did you want a job during the week of (reference week)?  or not at ail? 7	
Yes 3 O  A25. Do you regularly provide care for children?	other people'
No 4 O Go to A 21	
Yes 4 Q	
the week of (reference week)? (Mark only one)  No o Go to A28	
Available child care too expensive 1 O Go to A22 A26. Approximately how many hours of	4 4
Couldn't make suitable child care arrangements 2	ir care do you
Wanted to stay home to look after	
children	
other personal or family 4 O A27. Do you receive any pay for providing	this care?
Own illness or disability 5 O Go to A25	
Going to school	
Other reason	
No reason	
(Form 05 for Designated Adult) - Student	Status
during the week of (reference week)?  (Mark only one)  • If "full-time" in Item 81 3 Go it	o A31
Available child care too expensive 1 0 Go to A22 e if "part-time" in Item 81 4 O Go to	o A29
Couldn't make suitable child care arrangements	o A35
Wanted to stay home to look after 3 C	
Other personal or family (associated as a second collection of the following is the most you were enrolled in a school, collection of the week of (reference week) (Marx only one)	ege or universit
Own illness or disability	
Going to school	
Other reason r O development, to increase earnings, or	

A30.	What is the main reason you are enrolled as a part- time student rather than a full-time student? (Mark only one)	
	Working full or part-time 1 O	
	Not available as a full-time program 2O	
	Full-time child care too expensive 3 O	
	Full-time child care unavailable 40	
	Child care responsibilities	
	Other personal or family responsibilities *	
	Other reason 7 🔾	
	No reason	
A31.	During the week of (reference week), how many hours did you spend outside the home studying, attending class etc., excluding travel time?	
	Hours (If 00, go to A33)	
A30	Were these hours during the day, during the evening or a mix of days and evenings?	
	Days 1 O	
	Evenings 2 🔾	
	Mix of days and evenings <sup>1</sup> O	
A33.	Are these facilities available at your place of study for the care of children?	
	Yes 40	
	No 5 O Go to A35	
	Don't know 4 O	
A34.	Are these facilities available for children	
	Yes No	
	- under the age of 27 1 2 0	
	- from 2-5 years old7 2 O 4 O	
	- from 6-12 years old2 5 O 6 O	
A35.	INTERVIEWER: Does Designated Adult have a spouse living in the household?	
	Yes 10 Go to SECTION 8	
	No 20 Go to SECTION C	

- 7 -

B. SPOUSE	S WORK/STUD	4					
H "Yes"  H "Yes"  N TYes"  Any code	in Item 10in Item 30 and a but 6 in Item 33	1 O Go to 82	S2. Now, I'd like to ask you some questions about your spouse/partner's job(s) for the week of (reference week).  What days and times did your spouse/partner work during that week? Exclude travel time to and from his/her place of work.				
Otherwis		3 O Go to 89					
Day	Didn't Work	Worked		Hours	of Work		
Sunday	01 🔾	02 🔾		to	to	to	
Monday	63 🔾	04 🔾		to	10	to	
Tuesday	05 🔾	06 🔾	or O Same as Monday OR	to	to	to	
Wednesday	08 🔾	00 🔾	10 O Same as Monday OR	to	to	to	
Thursday	"0	12 🔾	13 O Same as Monday OR	po	to	to	
Fnday	14 0	15 🔾	16 O Same as Monday OR	to	to	to	
Saturday	17 🔾	18 🔾	19 O Same as Monday	to	to	to	

83.	Does his/her work schedule vary from week to week?		d) Can hershe bring the child(ren) to work with him/her on a regular basis?					
	Yes 10				Yes	40		
	No 20 Go to 85				No	50		
84.	Does he/she generall advance?	y kno	these	changes in	Don't Know	•0		
							le in the hours he/she wo	orks?
	Yes ¹O				Yes	70		
28	What is the approximate				No	•0		
64	his/her (main) place of w	rork?	ice irom y	our name to	Don't Know	•0		
	1 Miles 2 Glome	itres			f) Can he/sh sick days	or vecat	d leave, other than his/hiton leave, if your chiregular child care arrang	d(ren)
	OR				Yes	0		
	Less than 1 mile or 1 kilon	netre3 (	0		No	20		
	Varies from day to day	4 (	0		Don't Know	10		
	None, works at home	5 (	O — G	io 10 B12			yer allow him/her the op his/her present job?	tion of
B6.	INTERVIEWER CHECK ITT (Form 05 for Spouse)	ЕМ	3.8		Yes		40	
	a Manda I Maid Mara		<b>-</b> . O		No		50	
	If code 1 "Paid Worker"      Otherwise				Don't Know		•0	
					Aiready wo	rks part-tim	• 70	
87,	Jobs differ in how much support and flexibility they give working parents. Thinking about your spouse's/pertner's (main) job		bout your	h) Would his/her employer allow him/her the option sharing his/her job with someone else?		tion of		
	e) Are facilities available his/her place of work?	e for th	ne care of	children at	Yes	10		
	Yes 3 O				No	20 1		
	No 40)					-0		
		Go to d			provides 6 benefit fo	pioyment 0% of a p	Insurance Program ge person's salary as a mi sks. Does his/her em al pay during these 15 w	player
	b) Are these facilities av	allabie	for childre	n	Yes	40		
		Yes	No	Don't Know	No	10		
	-under the age of 27	.0	2 0	30	Don't Know	•0		
	-from 2-5 years?	40	50	•0			r hold a job for longer ton maternity leave?	than 15
	-from 6-12 years?	70	.0	• 0	Yes	70		
					No	.0)		
	c) Can these facilities to short term basis?	e used	on an o	ccasional or	Don't Know	,0}	Go to B8	
	Yes 1 O				k) Does his/r for any of	her emplo these add	yer provide pay (partial itional weeks?	or full
	No 2 O				Yes	10		
					No	20		
	Don't Know 3 O				Don't Know	30		

	3 -
88. What one child-related benefit would you most like his/her employer to provide to support you in your role as parents? (Mark only one)	B13. Which of the following is the most important reason he/she was enrolled in a school, college or university during the week of (reference week)?  (Mark only one)
Workplace daycare 4 O	
Paid maternity/paternity leave 5 O	To improve job opportunities or career development, to increase semings, or 10
Flexible work hours 6 O	for personal interest
Option of working part-time 7 O	
Other (specify)	B14. What is the main reason hashe is enrolled as part- time student rather than a full-time student? (Mark only one)
	Westure toll as and area
	Working full or part-time 1 🔾
	Not available as a full-time program 2 〇
None	
<ol> <li>Did he/she want a job during the week of <u>(reference week)</u>?</li> </ol>	Full-time child care too expensive 3 〇
Yes 'O	Full-time child care unavailable
No 2 ○ —— Go to B11	Child care responsibilities
310. Was there any reason he/she could not take a job during the week of (reference week)? (Mark only one)	Other personal or family responsibilities (
Available child care too expensive 1 0	Other reason 7 O
Couldn't make suitable child care arrangements	No reason
Wanted to stay home to look after children 3 O	B15. During the week of (reference week), how many hours
Other personal or family responsibilities	did he/she spend outside the home studying,
Own illness or disability 5 🔾	Hours (N 00, go to 817)
Going to school 6 O	
Other reason 7 O	B16. Were these hours during the day, during the evening or a mix of days and evenings?
No reason	Days 10
311. What is the main reason he/she did not want a job during the week of (reference week)? (Mark only one)	Evenings 20 Mix of days and evenings 30
Available child care too expensive 1 O	B47 Am tacilible evallable at his flag place of about for the
Couldn't make suitable child care arrangements	817. Are facilities available at his/her place of study for the care of children?
arrangements 2	Yes 4O
Wanted to stay home to look after children	No 50 GO TO SECTION C
Other personal or family responsibilities 4	Don't know (O)
Own illness or disability 5 O	B18. Are these facilities available for children
Going to school	Yes No Don't know
Other reason	- under the age of 2? 10 20 30
No reason	- from 2-5 years old? 40 50 60
312. INTERVIEWER CHECK ITEM - Student Status (Form 05 for Spouse)	- from 6-12 years old2 7 6 9 90
• If 'full-time' in Item 81 1 © Go to 815	
● If "part-time" in item 81 3 ○ Go to 813	CO TO SECTION O
Otherwise 3	

Yes 10 Yes 10 Yes 10 Yes 10 No ≥O → Go to next child No 20 - Go to next child No 20 -Go to next child No 2○ -Go to next section C Yes 30 Yes 30 Yes 10 Yes JO No 40 0 No 40 No 40 No 40

Yes 50

No 60

Yes

No

No other children under the age of 13

70

.0

90

3

4

Yes 50

No 60

No other children under the age of 13

Yes

.0

90

70

.0

90

30 TO NEXT CHILI		GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT SECTION
1	•	2	3	4
Yes 10		Yes 10	Yes 10	
				Yes 10
No 20-Go !	o next child	No 20 Go to next chik	d No 2○ → Go to next child	No 2○ ← Go to next section
caregiver	30	caregiver 3 🔘	caregiver 1 O	caregiver 3 O
child ill	40	child ill	child ill 4 O	child ill 40
child off school	50	child off school 5 O	child off school 5 O	child off school 5 O
DA/spouse off work	0	DA/spouse aff work 6 O	DA spouse off work # O	DA spouse off work 6 O
other (specify)	70	other (specify) 7 〇	other (specify) 7 🔿	other (specify) 7 O

Yes 50

No #0

No other children under the age of 13

Yes

Yes 50

No 60

No other children under the age of 13

Yes

No

70

.0

90

E.	SCHOOL ATTENDANCE	
£1.	Now I'd like to ask about school. Did any of your children go to school during the week of <a href="reference">(reference week)</a> ?  Please include any time apent in a graded or ungraded school program but exclude kindergarten, nursery school or time apent in a daycare centra.	school during reference week.
	Yes <sup>5</sup> O — Determine which child(ren) in E10 and Go to E2.	Grade  OR  e ungraded special school/program
	No <sup>6</sup> ○ — Go to Section F	E12. On what days during the week of (reference week) did attend school?
E2.	While some children are more mature than others, at what age do you think most children are old enough to look after themselves for two or three hours?	E13. Is this school operated by a provincially funded board of education?
	Age	E14. How much, if anything, did you pay for to attend school during (reference week)?
	Parents have different views about whether after- achool child care programs are needed or desirable. For children 6 to 9 years old, do you think the development of after school programs is	E15. Was this because the full cost of this care was sub- sidized by the government?
i	very important 7〇	E16. Was the amount you paid subsidized by the government?
	somewhat important *O	
	or not important2 +O	E17. Approximately how much would it cost you to send to this school per week, if it were not subsidized?
E4.	in your view, when offered, should after school programs:	
	a) be supervised by trained staff?  Yes I O	E18. What kind of care arrangements did you have for during lunch time the week of (reference week)? (Mark all that apoly)
	No 2 O	stayed at school for lunch
	No opinion 3 O	went home to parent or other caregiver
t	b) be licenced by the provincial government?	went home on his/her own  went to caregiver outside the home (relative or non-relative)
	Yes 4 O	enrolled in a before or after school program for lunch
	No 5 O	● other
	include structured activities or be loosely structured with no planned activity program?	
	Include structured activities	540 Wall
	Loosely structured	Ets. While was at school during (reference week) was your main activity . , .
	• No opinion • 🔾	working at a job or business, studying,
ES. 10	NTERVIEWER: Continue with E11 for first child indicated in	caring for your family's needs, OR

	- 1	3 -	
	2	3	4
Yes #O	Yes ®O	Yes 4O	Yes €O
No PO Go to next child	No ♥○ → Go to next child	No ₱○ → Go to mext child	No ♥ → Go to next section
Ungraded 10	Ungraded 10	Ungraded 1O	Ungraded 10
SMTWTFS	SMTWTFS	SMTWTFS	SMTWTFS
0000000	0000000	0000000	0000000
Yes 1 ○ → Go to E18  No 2 ○ → Go to E14	Yes 1○ — Go to E18 No 2○ — Go to E14	Yes 1○ → Go to E18 No 2○ → Go to E14	Yes 10 — Go to E18  No 20 — Go to E14
Don't sO Go to E18	Don't know 3○ → Go to E18	Don't know 3 ○ → Go to E18	Don't know 30 Go to E18
s ∞	\$	\$	\$ 00
(If > "000" go to E16)	(M > °900° go to E16)	(M > "000" go to £16)	(H > "000" go to E16)
Yes 4○ → Go to £17 No 5○	Yes 4○ → Go to £17 No 5○]	Yes 40 → Go 10 E17	Yes 40 Go to E17
Don't know •O	Don't know 60 Go to E18	Don't know •O	Don't co
Yes 70	Yes 70	Yes 7O	Yes 70
No ODON'T GO to E18	No Operation of the second of	No Onit Go to E18	No ODON'S RNOW OO GO to E18
s 00	\$ 00	s 00	\$
OR	OR	OR	OR
Don't know ! O	Don't know 1 O	Don't know 1 O	Don't know 1 O
Staryed at school for funch 10	Stayed at achool for lunch 10	Stayed at school for lunch 10	Stayed at school for lunch 10
Home to caregiver 2 🔘	Home to caregiver 2 🔾	Home to caregiver 2 O	Home to caregiver 2 O
Home on own 3 O	Hame on own	Hame on own	
Out to caregiver	Out to caregiver	Out to careover	
Before/after school program 5 🔾	Before after school program 5 O	Out to caregiver	Out to caregiver
Other (specify)	Other (specify)	Other (specify)	Other (specify) 6 0
Working 10	Working 10	Wanung 10	Working 10
Studying 20	Salaying 20	Saudying 20	Studying 20
Family 3O	Family 3O	Family 3O	Family 3 O
Something else 40	Something ease 40	Something ease 40	Sometring else 40
GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT SECTION
8-6102 200 -			

NB. (A daycare centre provides care for children on a full day basis, even if some children attend part-time.)

Yes 1 O —— Determine which child(ren) in F10 and complete the appropriate items.

No 2 O Go to Section G.

- F10. INTERVIEWER: Indicate for each child if he/she attended kindergarten or nursery school during reference week.
- F11. Is the program that . . . attended . . . .
  - a kindergarten (or junior kindergarten) program,
  - a nursery school or preschool,
  - a group program for infants or toddlers.
  - a program run by parents for children,

OR

other?

- F12. On which mornings or afternoons did . . . attend this program during (reference week)?
- F13. In total, for how many hours was . . . there during the week of (reference week)?
- F14. Is this program operated by . . . (READ EACH CATEGORY UNTIL RESPONDENT SAYS YES)
  - a school board,
  - a university or college,
  - the municipal government,
  - a non-profit, community-based agency such as the YMYWCA or a church, if
  - a group of parents on a non-profit basis,
- an individual or group for profit,

other?

- F18. How much did you pay for this care arrangement for ... for the week of (reference week)?
- F16. Do you or a member of your family intend to claim this cost for income tax purposes?
- F17. Was this because the full cost of this care was subsidized by the government?

F.

	- 1	3 -	
1	2	3	4
Yes 10	Yes 10	Yes 10	Yes 10
No 20 Go to next child	No 20 Go to next child	No 20 - Go to next child	No 2○ → Go to next section
Kindergarten 3 O	Kindergarten 3 🔿	Kindergarten 3 🔾	(Gndergarten 3 )
Nursery school 4 O	Nursery school 4 O	Nursery school 4 O	Nursery school 4 O
Group program 5 O	Group program 5 O	Group program 5 O	Group program 5 O
Parents • O	Parents 6 〇	Parents 4 O	Parents 6 O
Other (specify) 7 🔾	Other (specify) 7	Other (specify) 7 〇	Other (specify) 7 O
SMTWTFS	SMTWTFS	6 11 7 11 7 7	
Morn- 01 02 03 04 05 06 07 ings	Morn- 01 02 03 04 05 06 07	S M T W T F S Morn- 01 02 03 04 05 06 07	S M T W T F S Morn- 01 02 03 04 05 06 07
After- 08 09 10 11 12 13 14	After- 08 09 10 11 12 13 14	Ings 000000 After- 08 09 10 11 12 13 14	Ings 000000 After- 08 09 10 11 12 13 14
noons	noons OOOOO 1	noons	noons 000000
attend 000000	attend 000000	Did not 15 16 17 18 19 20 21 attend	Did not 15 16 17 18 19 20 21 attend
Hours	Hours	Hours 'Hours	Hours
Yes No	Yes No	Yes No	Yes No
01 O Go to F20 02O	01 0 - Go to F20 020	01 O Go to F20 02O	01 O - Go to F20 02O
20 → Go 10 F15 20	83 - Go to F15 040	03 0 Go 10 F15 040	00 - Go 10 F15 040
05 O → Go to F15 00	06 O Go to F15 06 O	05 O Go to F15 06O	05 O - Go to F15 06O
07 O Go to F15 04O	01 - Go to F15 060	07 0 - Go 10 F15 000	07 0 - Go to F15 040
∞ ○ → Go to F15 10○	∞ O → Go 10 F15 10 O	08 0 - Go 10 F15 100	00 - Go to F15 100
11 0 - Go to F15 120	11 0 - Go to F15 120	11 O - Go to F15 12O	11 0 - Go to F15 120
13 O - Go to F15 14O		13 0 - GO 10 F15 140	
\$	\$00	\$ 00	\$
# "000" go to F17	ff "000" go to F17	If "000" go to F17	H "000" go to F17
Yes 10	Yes 107	Yes 10)	Yes 10)
No 20 Go to F18	No 20 Go to F18	No 2 O Go to F18	No 20 Go to F18
Don't Know 3 O	Don't Know 3 O	Cont Know 3 O	Don't Know 2 O
Yes + O Gc to F19	Yes + C Go to F13	Yes 4 O So to F19	Yes 4 O Go to 7:19
No 50	No 50)	No 50)	No 50)
Don't Go to F20	Don't Go to F20	Don't Go to F20	Don't Go to F20
Know ( )	Know ( O )	Know # O	Know # O

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- 17 -					
1	2	3	4		
Yes 7 ○  No 6 ○	Yes 7 O  No 6 O  Don't know 9 O	Yes 7 O  No 8 O  Don't know 9 O	Yes 7 O  No 8 O  Don't know 9 O		
\$ 00 per week	\$ 00 per week	s 00 per week	s 00 per week		
Don't know ¹○	Don't know ¹○	Don't know 10	Don't know 'O		
Working 1 O Studying 2 O	Working ! O Studying 2 O	Working 1 O	Working 1 O		
Family 1 🔾	Family 3	Family 30	Family 3		
Something else 4 🔾	Something else 4	Something else 4 O	Something else 4 O		
No reservations *O  Minor reservations *O	No reservations 50	No reservations 50 Minor reservations 60	No reservations ©		
Some important reservations 70	Some important reservations	Some important reservations 70	Some important reservations		
Major reservations ®O	Major reservations <sup>®</sup> ○	Major reservations (	Major reservations #O		
TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT SECTION		

G.	CARE IN A BEFORE OR AFTER SCHOOL PROGRAM	M
Q1.	During the week of (reference week) were any of your children cared for in a before or after school program?  By a before or after school program I mean a program	G10. INTERVIEWER: Indicate for each child if he/she was in this care during reference week.
	operated by a board of education or some other agency to provide care for children during the hours	
	before school, after school, and/or during lunch. Please do NOT include activities such as brownles, band practice, little league games etc.	G11. On which day(s) during the week of (reference week) was in this program?
	Yes 3 O Determine which child(ren) in G10 and complete the appropriate items.	
	Complete the appropriate name.	G12. Was there before school, after school, or during lunch?
	No 40 Go to Section H	(Mark all that apply)
	30 10 Section 11	
		G13. In total, for how many hours was in this program during the week of (reference week)?
		G14. Were any of your other children, under the age of 13 in this program during these hours?
		G15. Is this program sponsored by
		•a board of education,
		ea municipal government,
		ea non-profit organization like the YM/YWCA, or parent group,
		•a group or individuals for profit,
		or other?
		Q16. Is this program located at 's school?
		G17. How much did you pay for's care in this program for the week of (reference week)?
		Q18. Does the program provide receipts?
		G19. Do you or a member of your family intend to claim this cost for income lax purposes?

- 19 -				
1	2	э	4	
Yes 1 O	Yes 1 O	Yes 1 O	Yes 1 O	
No <sup>2</sup> ○ → Go to next child	No <sup>2</sup> ○ — Go to next child	No 2 ○ → Go to next child	No <sup>2</sup> ○ → Go to next section	
SMTWTFS	SMTWTFS	SMTWTFS	SMTWTFS	
0000000	0000000	0000000	0000000	
Before school 10	Before school 10	Before school 10	Before school 10	
After school 2 O	After school 20	After school 2 O	After school 20	
During lunch 3 O	During lunch 3 O	During lunch 3 O	During lunch 3 O	
Hours	Hours	Hours	Hours	
Yes 40	Yes 40	Yes 40	Yes 40	
No 50	No other children 40	No 50	No sther children 60	
		THE STATE OF THE S	NO Other Chiristen	
Board of education 10		B-M		
	Board of education 10	Board of education 10	Board of education 10	
Municipal government 20	Municipal government 20	Municipal government 20	Municipal government 20	
Non-profit organization 3O	Non-profit organization 30	Non-profit organization 3O	Non-profit organization 30	
Individuals or group for profit	Individuals or group for profit	Individuals or group for profit	Individuals or group for profit	
Other 5 〇	Other 5 〇	Other	Other 5O	
Don't know 4 〇	Don't know 4 🔾	Don't know 4 O	Don't know 6O	
Yes 7 O	Yes 7 O	Yes 7 O	Yes 70	
No 8 O	No 80	No # O	No 40	
s 000° go to G20)	\$ 00 (H *000* go to G20)	\$ 000 00 (H "000" go to G20)	\$ 00 00 (Iff *000* go to G20)	
Yes 10	Yes 10	Yes 10	Yes 10	
No 2O Don't know 3O	No 2O Don't know 3O	No 2O Con't know 3O	No 20 Don't know 30	
Yes 40 No 50 Go to G21	Yes 40 No 50 Go to G21	Yes 40 No 50 Go to G21	Yes 40 No 50 Go to G21	
Don't know (O)	Don't know (C)	Don't know (O)	Don't know (O)	
NO WE STATE				
J-5103-209.1				

G20. Was this because the full cost of this care was sub- sidized by the government?
G21. Was the amount you paid subsidized by the government?
G22. Approximately how much would it cost you to send to this program per week, if it were not subsidized?
G21. While was in this program during (reference week) was your main activity
working at a job or business,     studying,
caring for your tamity's needs, OR
e something else?
G24. Overall, how do you feel about this care arrangement for ?
would you say you have  • no reservations
minor reservations
some important reservations, OR
major reservations about this arrangement?

1	2	3	4
			Yes 10 - Go to G22
No 40	No 40	No •0 )	No 80
Don't know PO	Don't know PO	Don't	No ≉○ Don't know ♥○  Ton't know ♥○
			200
Yes 10		Yes 10	Yes 10
No 20	No 20	No 20	No 20
Don't know 30	Don't know 30	Don't Isnow 3O	No 2○ Don't show 3○
			1000
\$ 00 per week	\$ 00 per week	\$ 00 per week	S 00 per week
OR	OR	OR	OR
Don't know 10	Don't know 10	Don't know 10	Don't know 10
Working 10	Working 10	Working	Working
Studying 20	Studying 20	Studying 20	Studying 20
Family 30	Family 3O	Family 30	Family 3O
Something else 40	Something else 4O	Something else 40	Something else 40
		- 4	
		*	
No reservations 5 O	No reservations 5 O	No reservations 5 O	No reservations 5 O
Minor reservations 6 O	Minor reservations *O	Minor reservations # O	Minor reservations 4 O
Some important reservations 7 O	Some important reservations 7 O	Some impostant	Some important
		reservations 7 O	reservations 7 O
Major reservations 8 O	Major reservations # O	M	
		Major reservations * O	Major reservations * O
O TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT CHILD	

14:		CARE CENTRE	
H1.	During the week of (reterence week) did any of your children spend any time in a daycare centre?		H10. INTERVIEWER: Indicate for each child if he/she was in this care during reference week.
	Yes 5 O Determine which child(ren) in H10 and complete the appropriate ferms.		
			H11. In this deycare centre located
	No + O	Go to Section !	at your place of work or study,
			at your spouse's place of work or study,
			at a neighbourhood school,
			or somewhere else?
			H12. On which day(s) was there during the week of (reference week)?
			M13. In total for how many hours was there during the week of (reference week)?
			H14. Were any of your other children, under the age of 13 in this program during these hours?
			H15. Is this centre operated by or affiliated with
			a municipal government,
			a school, college or university,
			a church,
			a community or daycare agency,
			you or your spouse's employer,
			an individual or group on a private basis,
			OR
			e something else?
	AM		
			H16. Does the centre operate on a profit or non-profibesis?
			H17. Is this a parent co-operative in which you ar expected to provide unpaid hours working with th children?

11_	2	3	4
Yes 10	Yes 10	Yes 10	Yes 10
No 2○ Go to next child	No <sup>3</sup> O → Go to next child	No ≥O → Go to next child	No <sup>2</sup> ○ → Go to next section
DA's work/study 3O	DA's work/study 3O	DA's work/study 3O	DA's work/study 3O
Spouse's work/study 40	Spouse's work-study 40	Spouse's work/study 40	Spouse's work/study 40
School 50	School 50	School 50	School 5 〇
Other	Other	Other 4○	Other
SMTWTFS	SMTWTFS	SMTWTFS	SMTWTFS
0000000	0000000	0000000	0000000
Hours	Hours	Hours	Hours H
Yes 10	Yes 10	Yes 10	Yes 10
No 20	No 20	No 20	No 20
No other children 3O	No other children 3O	No other children 3O	No other children 3O
Municipal government 10			Municipal government 10
Municipal government 10	Municipal government 10	Municipal government 10	
Community/daycare agency 40	Community/daycare agency 40	Church	Community/daycare agency 40
Employer 50	Employer 50	Employer 50	Employer 50
Private basis	Private basis	Private basis	Private basis 60
Other (specify) 7 〇	Other (specify) 7O	Other (specify) 7 O	Other (specify) 7 〇
Profit 10-Go to H18	Profit 10-Go to H18	Profit 10-Go to H18	Profit 10—Go to H18
Non-profit 2O	Non-profit 20	Non-profit 20	Non-profit 20
Continow 3O	Don't know 3O	Don t know 3O	Don't know 3O
Yes 4 O	Yes 4 O	Yes 4 O	Yes 4 O
No 5 O	No 5 O	No 5 O	No 5 O

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H18. How much did you pay for this care for during (reference week)?
H19. Does this deycare centre provide receipts?
H20. Do you or a member of your family intend to claim this cost for income tax purposes?
H21. Was this because the full cost of this care was subsidized by the government?
H22. Was the amount you paid subsidized by the government?
H23. Approximately how much would it cost to send to this daycare centre per week if it were not sub-sidized?
M24. While was in this care during the week of (reference week) was your main activity
working at a job or business.     studying,
caring for your family's needs, OR
• something else?
H25. Overall, how do you feel about this care arrangement for?  Would you say you have
• no reservations,
• minor reservations,
some important reservations.  OR
major reservations about this arrangement?

		25 -	
1	2	3	4
\$00	\$	\$	\$
(# "000" go to H21)	(# "000" go to H21)	(If "000" go to H21)	(If "000" go to H21)
Yes • O	Yes • O	Yes •O	Yes 6 O
No 7 O Don t know 8 O	No 7 O Don't know # O	No 7 O Don't know 4 O	No 7 O Don't know 6 O
Yes 10 No 20 Go to H22	Yes 10 No 20 Go to M22	Yes 10 No 20 Go to H22	Yes 10 No 20 Go to H22
Don't know 30)	Don't know 3O	Don't know 3O)	Don't know 3O)
			Yes 10 — Go to H23
No 20	No 20	No 20	No 20
Don't know 3 O	No 2O Don't know 3O	No 2○ Don't know 3○  Go to M24	No 20 Don't know 30
Yes 40 - Go 10 H23	Yes ◆○ → Go to H23	Yes 40 - Go to H23	Yes 40 - Go to H23
No 50	No 50	No 50	No 50
Don't (O) Go to H24	Don't know #O	No 5○ Don't know 6○	No 5○ Don't know 6○  Go to H24
\$	\$ 00	\$	\$ 00
OR	OR	OR	OR
Don't know 1 O			
Working 1 O	Working 1 O	Working 1 O	Working 1 O
Studying 20	Studying 2 〇	Studying 2 🔾	Studying 2 O
Family 3 🔾	Family 3 O	Family 3 🔿	Family 3 🔾
Something else 4 🔾	Something else 4 O	Something else	Something else 4 O
No reservations 5 🔾	No reservations 50	No reservations 5O	No reservations 50
Minor reservations 40	Minor reservations 40	Minor reservations *O	Minor reservations 60
Some important reservations 70	Some important reservations 70	Some important reservations 70	Some important reservations
Major reservations 40	Major reservations 40	Major reservations *	Major reservations #0
GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT SECTION

11.	neighbour, a ba- include care give	of (reference week) did any of your any time in the care of a nelative, a bysitter, or a nenny? Please do not in by your spouse or an older brother hild who lives in your home.	110.	INTERVIEWER: Indicate for each child if hershe was in this type of care during reference week.
	Yes 70	Determine which child(ren) in 110 and complete the appropriate rems.	111.	How many different care arrangements of this type did you have for during the week of (reference week)?
	No 40	Go to Section J	112	INTERVIEWER:  READ: I would like to ask you some questions about each of these arrangements. Could we please start with the caregiver who provided the most hours of care for during the week of (reference week)?
		1	113	On which days was In this (first) person's care during the week of (reference week)?
			114.	in total, for how many hours was in this (first person's care during the week of <u>(reference week)</u> ?
			115.	Were any of your other children, under the age of 13 in the care of this (first) person during these hours?
			116.	Old this (first) person care for In your home, is his/her home, or somewhere else?
			117.	Does this (first) person live in your household?
			118.	is this (first) person related to?
			119.	What is his/her relationship to?
			120.	Mow much did you pay for this (first) carrangement for during the week of (reference week)?
			121.	INTERVIEWER CHECK ITEM:
			122	Does this cost include other services such as light housekeeping etc.?

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1	2	3	4
Yes 10	Yes 10	Yes 10	Yes 1O
No ≥O → Go to next Child	No 10 Go to next Child	No 20 Go to next Child	No 20-Go to next Section
# 01 Go to 113			
S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S
Hours	Hours	Hours	Hours
Yes 1 No 2 No other children 3 No	Yes 10 No 20 No other children 30	Yes 1 O No 2 O No other children 3 O	Yes 10 No 20 No other children 30
At your home 40 At caregiver's home 50 Go to 118	At your home 40 At caregiver's home 50 Go to 118	At your home 40 At caregiver's 50 Go to 500 Somewhere else 40	At your home 4 At caregiver's home 5 Go to 118
Yes 7O No 8O	Yes 70	Yes 70 No 40	Yes 70 No 60
Yes 1○ No 2○ → Go to 120	Yes ¹○ No ²○ → Go to 120	Yes 10 No 20 Go to 120	Yes 10 No 20 Go to /20
Parent/step-parent 3 ○ Grandparent 4 ○ Aunt/uncle 5 ○ Other relative 6 ○	Parent/step-parent 3 O Grandparent 4 O Aunt/uncle 5 O Other relative 6 O	Parent/step-parent 3 C Grandparent 4 C Aunt/uncle 5 C Other relative 6 C	Parent/step-parent 3 O Grandparent 4 O Aunt/uncle 5 O Other relative 6 O
\$ 000° go to 125	\$ 000° go to 125	\$ 00 11° 000° go to 125	\$ 000° 90 to 125
If Item I16 = all your name TO Go to /22  Otherwise TO Go to /23	H Item I16 = at your name Go to I22  Otherwise Go to I23	# frem 116 = 10 Go to /22 Otherwise © Go to /23	If Item I16 = at your name IO Go to 22 Otherwise IO Go to I23
Yes 10	Yes 10 No 20	Yes 10	Yes 10 No 20

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128. Was the amount you paid for this care subsidized by the government?  129. Approximately how much would this care arrangement cost for per week if it were not subsidized?  130. Is this (first) care arrangement a babysitting cooperative in which you are expected to provide care part-time?	
125. INTERVIEWER CHECK ITEM:  126. INTERVIEWER CHECK ITEM:  127. Is the person providing this care licenced by the government or approved by a family daycare agency?  128. Was the amount you paid for this care subsidized by the government?  129. Approximately how mijch would this care arrangement cost for par week if it were not subsidized?  130. Is this (first) care arrangement a babysitting cooperative in which you are expected to provide care part-time?  131. While was in this (first) person's care during the week of (reference week) was your main activity	I23. Does this (first) caregiver provide receipts?
125. INTERVIEWER CHECK ITEM:  127. Is the person providing this care licenced by the government or approved by a family daycare agency?  128. Was the amount you paid for this care subsidized by the government?  129. Approximately how mylch would this care arrangement cost for par week if it were not subsidized?  130. Is this (first) care arrangement a babysitting cooperative in which you are expected to provide care part-time?  131. While was in this (first) person's care during the week of (reference week) was your main activity  135. While was in this (first) person's care during the week of (reference week) was your main activity  136. While was in this (first) person's care during the week of (reference week) was your main activity  137. While was in this (first) person's care during the week of (reference week) was your main activity	t24. Do you or a member of your family intend to claim this cost for income tax purposes?
127. Is the person providing this care licenced by the government or approved by a family daycare agency?  128. Was the amount you paid for this care subsidized by the government?  129. Approximately how mulch would this care arrangement cost for per week if it were not subsidized?  130. Is this (first) care arrangement a babysitting cooperative in which you are expected to provide care part-time?  131. While was in this (first) person's care during the week of (reference week) was your main activity	125. INTERVIEWER CHECK ITEM:
129. Approximately how mulch would this care arrangement cost for per week if it were not subsidized?  130. Is this (first) care arrangement a babysitting cooperative in which you are expected to provide care part-time?  131. While was in this (first) person's care during the week of (reference week) was your main activity  • working at a job or business.  • studying,  • caring for your family's needs,	126. INTERVIEWER CHECK ITEM:
130. Is this (first) care arrangement a babysitting cooperative in which you are expected to provide care part-time?  131. While was in this (first) person's care during the week of (reference week) was your main activity  • working at a job or business.  • studying.  • caring for your family's needs,	I27. Is the person providing this care licenced by the government or approved by a family daycare agency?
is this (first) care arrangement a babysitting co- operative in which you are expected to provide care part-time?  IS1. While was in this (first) person's care during the week of (reference week) was your main activity  e working at a job or business.  e studying,  caring for your family's needs,	IZ8. Was the amount you paid for this care subsidized by the government?
While was in this (first) person's care during the week of (reference week) was your main activity  working at a job or business.  studying,  caring for your family's needs,	129. Approximately how much would this care arrangement cost for per week if it were not subsidized?
working at a job or business.     studying,     caring for your family's needs,	operative in which you are expected to provide care
studying,     caring for your family's needs,	week of (reference week) was your main activity
OR	studying,

1	2	3	-
Yes 10	Yes 10	Yes 10	Yes 10
No 20	No 20	No *O	No 20
Yes 3O	Yes 3O	Yes 3O	Yes 3O
No 40	No 40	No 40	No 40
If Item I18 = yes (relative) 50 Go to I31	If Item 118 = yes (relative) 50 Go to /31	If item I18 = yes (relative) 50 Go to /31	# Item I18= yes (relative) SO Go to /31
Otherwise © Go to 126	Otherwise © Go to /26	Otherwise © Go to /26	yes (relative) 5○ Go to /31  Otherwise 5○ Go to /26
If Item 116 * at your home	If item 116 = at your home O Go to /30	If Item I16 = at your home <sup>2</sup> Go to /30	If Item i16 = at your home O Go to i30
Otherwise O Go to 127	Otherwise © Go to /27	Otherwise 60 Go to /27	Otherwise © Go to /27
Yes 'O	Yes 10	Yes 10	Yes ¹O
NO 20	No 20	No 20	No 20
Don't so Go to /30	Don't know 3O	Don't know 3O	Don't     Go to 130
/es 40	Yes 4Q	Yes 40	Yes 40
No 50)	No 90	No 50	No 50
Don't Chow 60	Don't know #O	Don't know #O Go to /31	Don't know (C)
\$ 00 OR Go to /31	\$	\$00	s
OR Go to 131  Don't know O	OR Go to 131  Don't know (O)	Don't know O	OR Go to 131  Don't know 10
ves 10	Yes 10	Yes 10	Yes 10
lo 20 Don't know 30	No 2O Don't know 3O	No 2O Don't know 3O	No 20 Don't know 30
Vorking 40	Working4	Working4O	Working 40
Studying 5O	Studying 50	Studying 50	Studying 5O
amily e 🔾	Family 6〇	Family	Family 50
omething else <sup>7</sup> O	Something else 70	Something else 7	Something else 7

	- 30 -
	t32. Overall, how do you feel about this care arrangement for?  Would you say you have  • no reservations,  • minor reservations,  • some important reservations,  OR  • major reservations about this arrangement?
2	134. Now I would like to ask you some questions about the caregiver who provided the second most hours of care for during the week of (reference week).
	I38. On which days was in this second person's care during the week of (reference week)?
	136. In total, for how many hours was In this second person's care during the week of (reference week)?
	137. Were any of your other children, under the age of 13, in the care of this second person during these hours?
	I38. Did this second person care for in your home, in his/her home, or somewhere else?
	I39. Does this second person live in your household?
	140. Is this second person related to?
	i41. What is his/her relationship to?

	- 3	-	
	2	3	4
No reservations 1 O	No reservations 10	No reservations 10	No reservations 10
Minor reservations <sup>2</sup> O	Minor reservations <sup>2</sup> O	Minor reservations <sup>2</sup> O	Minor reservations <sup>2</sup> O
Some important reservations 3 O	Some important reservations 3 O	Some important reservations 3 O	Some important reservations 3 (
M 40			
Major reservations 4 O	Major reservations 4 O	Major reservations 4 O	Major reservations 4 🔾
If item I11 > 1 go to Item I34 and ask questions about the caregiver who provided the second most number of hours of care during reference week  5	If Item II1 > 1 go to Item I34 and ask questions about the caregiver who provided the second most number of hours of care during reference week 5	If Item II1 > 1 go to Item I34 and ask questions about The caregiver who provided the second most number of hours of care during reference week 5	If item iii > t go to item iii > t go to item iii > t go to item iii = ii = ii = ii = ii = ii = ii = i
Otherwise 60 - Go to next child	Otherwise #O Go to next child	Otherwise 60 - Go to next child	Otherwise ( ) - Go to next Section
2 3 4 5 6 7	S M T W T F S	S M T W T F S	S M T W T F S
Hours	Hours	Hours &	Hours
Yes 10 No 20 No other children 30	Yes 10 No 20 No other children 30	Yes 10 No 20 No other children 30	Yes 10 No 20 No other children 30
Yes 10 No. 20	Yes 1 No 2 No other children 3	Yes 1 No 2 No other children 3 O	Yes 10 No 20 No other children 30
Yes 10 No 20 No other children 30 At your home 40 At caregiver's 40	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 60	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 40	Yes 10 No 20 No other children 30  At your home 40 At caregiver's
Yes 10 No 20 No other children 30 At your home 40	Yes 10 No 20 No other children 30 At your home 40	Yes 10 No 20 No other children 30  At your home 40	Yes 10 No 20 No other children 30  At your home 40
Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Go to	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to 140	Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Somewhere else 60  Go to 140
Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Somewhere else 80  Yes 70	Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Somewhere else 60  Yes 10	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to 140  Yes 10	Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Somewhere else 60  Yes 70
Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Somewhere else 80  Go to	Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Somewhere else 60  Ido	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to 140	Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Somewhere else 60  Go to 140
Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Somewhere else 80  Yes 70	Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Somewhere else 60  Yes 10	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to 140  Yes 10	Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Somewhere else 60  Yes 70
Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to Somewhere else 80  Yes 70 No 80	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to Somewhere else 60 140  Yes 10 No 60	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to Somewhere else 60  Yes 10 No 80	Yes 10 No 20 No other children 30  At your home 40 At caregiver's home 50 Somewhere else 60  Yes 70 No 80
Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Somewhere else 80  Yes 70 No 80	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 home 50 Go to Somewhere else 60  Yes 10	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Somewhere else 60  Yes 10  No 80  Yes 10  No 20	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Somewhere else 60  Yes 70 No 80  Yes 10 No 20 35 to 42
Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to 50 Somewhere else 80  Yes 70 No 80  Yes 10  10 20 — 30 to 142	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 home 50 Somewhere else 60  Yes 10 Yes 10 Yes 10	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to Somewhere else 60  Yes 10  Yes 10	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to 30  Yes 70 No 80  Yes 10  No 20 30 to 42  Parent/step-parent 30
Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to 140  Yes 70 No 80  Yes 10  Yes 10	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to 50 Yes 10	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to 140  Yes 10 No 80  Yes 10 No 20 Go:0142  Parent/step-parent 30	Yes 10 No 20 No other children 30  At your home 40 At caregiver's 50 Go to 140  Yes 70 No 80  Yes 10 No 20

H2. How much did you pay for this second care arrangement for during the week of (reference week)?
M3. INTERVIEWER CHECK ITEM:
I44. Does this cost include other services such as light housekeeping etc.?
145. Does this second caregiver provide receipts?
I46. Do you or a member of your family intend to claim this cost for income tax purposes?
147. INTERVIEWER CHECK ITEM:
IAS. INTERVIEWER CHECK ITEM:
I49. is the person providing this care licenced by the government or approved by a family daycare agency?
150. Was the amount you paid for this core subsidized by the government?
IS1. Approximately how much would this care arrangement cost for per week if it were not subsidized?
IS2. is this second care arrangement a babysitting co- operative in which you are expected to provide care

- 33 -			
1	2	3	4
\$ 00	\$00	\$00	\$00
(If "000" go to I47)	(ff *000* go to I47)	(H *000* go to 147)	(H "000" go to 147)
If Item 138 = at your home 10 Go to 144  Otherwise 20 Go to 145	If them 138 = at your home TO Go to 144  Otherwise TO Go to 145	If item 138 = at your home 10 Go to 144  Otherwise 20 Go to 145	If Item 138 = at your home 10 Go to 144  Otherwise 20 Go to 145
Yes 3O	Yes 3O	Yes 3O	Yes 30
No 4O	No 40	No 40	No 40
Yes 50	Yes 5O	Yes 5O	Yes 50
No 60	No 60	No 40	No 6O
Yes 70	Yes 7O	Yes 7O	Yes 7O
No 8O	No 80	No 80	No 50
If Item I40 = yes (relative) 10 Go to 153	If Item I40 = yes (relative) *O Go to I53	If hem I40 = yes (relative) 10 Go to /53	If Item I40 = yes (relative) 'O Go to I53
Otherwise 20 Go to 148	Otherwise 20 Go to 148	Otherwise 20 Go to 148	Otherwise 20 Go to /48
If Item I38 = at your home 30 Go to /52	If Item 138 = at your home 30 Go to /52	If Item 138 = at your home 30 Go to 152	If Item 138 = at your home 30 Go to 152
Otherwise 4O Go to 149	Otherwise 40 Go to 149	Otherwise Go to 149	Otherwise 40 Go to 149
Yes 50	Yes 50	Yes 50	Yes 50
Don't know 70	Don't     Go to 152	Don't know 70	Don't know 70 Go to /52
Yes 10	Yes 10	Yes 10	Yes 10
No 2O Go to /53	No 20   Go to /53   Go to /53	No 2O Don't spow 3O	No 20 Don't Innow 30
			,
\$00 OR Go to 153	\$00 Go to 153		S 00 00 Go :c /53
Don't know 10		Don t know 10	
Yes 10 No 20 Don't know 30	Yes 10 No 20 Don't know 30	Yes 10 No 20 Don't know 30	Yes 'O No 2O Don't know 3O
No 🛪 🔾	No 20	No ZO	No 80

week of (reference week) was your main activity  • working at a job or business, • sbudying, • caring for your family's needs.  OR  • something else?  154. Overall, how do you heel about this care arrangement for?  Would you say you have • no reservations, • minor reservations, • minor reservations.  OR • major reservations about this arrangement?  155. INTERVIEWER CHECK ITEM:  156. INTERVIEWER CHECK ITEM:  157. On which days was in this third person's carduring the week of (reference week)?  158. In total, for how many hours was in this third person's carduring the week of (reference week)?  159. Were any of your other children, under the age of this third person during these hours?	-:	34 -
a something else?  154. Overall, how do you feel about this care arrangement for?  Would you say you have  a no reservations,  b minor reservations,  con major reservations about this arrangement?  156. Interviewer CHECK ITEM:  156. Now i would like to ask you some questions about the caregiver who provided the third most hours of care during the week of (reference week)?  157. On which days was in this third person's care during the week of (reference week)?  158. In total, for how many hours was in this person's care during the week of (reference week)?  159. Were any of your other children, under the age of 1 in the care of this third person during these hours?  150. Dut this third person care for in your home, his/her home or somewhere else?		
Would you say you have  e no reservations,  e minor reservations,  or some important reservations,  OR  e major reservations about this arrangement?  156. Now I would like to sak you some questions about the draggiver who provided the third ment bours of caregiver who provided the third person's care during the week of (reference week)?  157. On which days was In this third person's care during the week of (reference week)?  158. In total, for how many hours was In this third person's care during the week of (reference week)?  159. Were any of your other children, under the age of 1 in the care of this third person during these hours?  160. Did this third person care for in your home, his/her home or somewhere sise?		OR • something else?
156. Now i would like to ask you some questions about the caregiver who provided the third most hours of car for during the week of (reference week).  157. On which days was In this third person's car during the week of (reference week)?  158. In total, for how many hours was In this thir person's care during the week of (reference week)?  159. Were any of your other children, under the age of 1 in the care of this third person during these hours?  160. Did this third person care for in your home, his/her home or somewhere else?		for?  Would you say you have  no reservations,  minor reservations,  some important reservations,  OR
ISS. In total, for how many hours was In this third person's call during the week of (reference week)?  ISS. In total, for how many hours was In this third person's care during the week of (reference week)?  ISS. Were any of your other children, under the age of 1 in the care of this third person during these hours?  ISO. Did this third person care for In your home, his/her home or somewhere else?	3	156. Now i would like to ask you some questions about the
ISS. Were any of your other children, under the age of 1 in the care of this third person during these hours?  ISO. Did this third person care for In your home, his/her home or somewhere else?		for during the week of (reference week).  [157. On which days was in this third person's care
in the care of this third person during these hours?  160. Did this third person care for in your home, his/her home or somewhere else?  161. Does this third person live in your household?		156. In total, for how many hours was In this third person's care during the week of (reference week)?
Nis/her home or somewhere else?  161. Does this third person live in your household?		ISS. Were any of your other children, under the age of 13 in the care of this third person during these hours?
		I60. Did this third person care for In your home, is his/her home or somewhere else?
M62. Is this third person related to?		161. Does this third person live in your household?
		162. Is this third person related to ?

	- 39		
1	2	3	4
	The large		
Working 4〇	Working 40	Working 40	Working 40
Studying 50	Studying 50	Studying 50	Studying 50
Family 6〇	Family	Family	Family
Something else <sup>7</sup> O	Something else 70	Something else 70	Something else 70
No reservations	No reservations 10	No reservations 10	No reservations 10
Minor reservations <sup>2</sup> O	Minor reservations <sup>2</sup>	Minor reservations <sup>2</sup> O	Minor reservations <sup>2</sup>
Some important reservations 3 (	Some important reservations 3 (	Some important reservations 3	Some important reservations 3 (
Major reservations 40	Major reservations 40	Major reservations 40	Major reservations 4 O
If Item It1 > 2 go to Item It5 and ask questions about the caregiver who provided the third most number of hours of care during reference week  Go to Otherwise 60	If Item 111 > 2 go to Item 156 and ask questions about the caregiver who provided the third most number of hours of care during reference week  Go to Otherwise Go to	If Item II1 > 2 go to Item I56 and ask questions about the caregiver who provided the third most number of hours of care during reference week  Go to Otherwise O next	If Item I11 > 2 go to Item I56 and ask questions about the caregiver who provided the third most number of hours of care during reference week  Go to Otherwise O next
Child	Child	child	Section
S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S
Hours			
	Hours	Hours	Hours
	Yes 10	Yes 10	Yes 10
No 20			Yes 10 No 20
	Yes 10 No 20	Yes 10 No 20	Yes 10
No other children 3 O	Yes (O) No 2O No other children 3O	Yes 10 No 20 No other children 30	Yes 10 Na 20 No other children 30
No 20 No other children 30 At your home 40 At caregner's home 50 Somewhere else 60	Yes 10 No 20 No other children 30 At your home 40 At caregiver's home 50 Go to	Yes 10 No 20 No other children 30 At your home 40 At caregiver's home 50 Go to	Yes 10 Na 20 No other children 30 Al your home 40 At caregiver's home 50 I62
No 20 No other children 30 At your home 40 At caregiver's 50 Go to 162	Yes 10 No 20 No other children 30 At your home 40 At caregiver's home 50 Somewhere else 50 If 52	Yes 10 No 20 No other children 30 At your home 40 At caregiver's home 50 Somewhere else 50 152	Yes 10 Na 20 No other children 30 Al your home 40 At caregiver's home 50 Somewhere eise 90  Go to
No 20 No other children 30 At your home 40 At caregiver's home 50 Go to	Yes 10 No 20 No other children 30 At your home 40 At caregiver's home 50 Somewhere else 50 Yes 70	Yes 10 No 20 No other children 30 At your home 40 At caregiver's home 50 Somewhere else 50 fee	Yes 10 Na 20 No other children 30 Al your home 40 At caregiver's home 50 Somewhere eise 50 Yes 10 No other children 30 Al your home 40 At caregiver's 50 I52

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M3. What is his/her relationship to?
I64. How much did you pay for this third care arrangement
for during the week of (reference week)?
165. INTERVIEWER CHECK ITEM:
M66. Does this cost include other services such as light housekeeping etc.?
167. Does this third caregiver provide receipts?
I68. Do you or a member of your family intend to claim this cost for income tax purposes?
IGS. INTERVIEWER CHECK ITEM:
170. INTERVIEWER CHECK ITEM:
<u>u</u>
171. Is the person providing this care licenced by the government or approved by a family daycare agency?
I72. Was the amount you paid for this care subsidized by the government?
173. Approximately how much would this care arrangement cost for per week if it were not subsidized?
174. Is this third care arrangement a babysitting co- operative in which you are expected to provide care part-time?

		37 -	
1	2	3	4
Paremustep-parent 3 Grandparent 4 Aunt/uncle 5 Other relative 6 Grandparent 6 Grandparent 9 Other relative 9	Parent/step-parent 3 C Grandparent 4 C Aunt/uncle 5 C Other relative 6 C	Parent/step-parent 3  Grandparent 4  Aunt/uncle 5  Other relative 6	Parent/step-parent 3 Grandparent 4 Aunt/uncle 5 Other relative 6 O
\$ 00 00 (II "000" go to 169)	\$ 000° go to 169)	\$ 000" go to 169)	s 000° go to 169)
If Item 160 = at your home 10 Go to 166  Otherwise 20 Go to 167	# Nem 160 = at your home 10 Go to 166 Otherwise 20 Go to 157	If Item I60 = at your home 10 Go to I66  Otherwise 20 Go to I67	If Item I60 = at your home 10 Go to I66
Yes 3O	Yes 30	Yes 30	Otherwise Go to 167
No 40	No 40	No 40	No 40
Yes 5O	Yes 9O	Yes 50	Yes 5O
No 4O	No •O	No 60	No 40
Yes 7O	Yes 70	Yes 7O	Yes 70
No 80	No 10	No 80	No #O
H Item I62 * Yes (relative) 10 Go to I75	If hem 162 = Yes (relative) 10 Go to 175	If Item I62 = Yes (relative) 10 Go to 175	If Item I62 = Yes (relative) 10 Go to I75
Otherwise 20 Go to 170	Otherwise 20 Go to 170	Otherwise S Go to 170	Otherwise 20 Go to 170
If Item I60 = at your home 3O Go to 174	If item i60 = at your home 30 Go to 174	If item 160 = at your home 30 Go to 174	If Item i60 ≈ at your home 3 Go to 174
Otherwise Go to 171	Otherwise Go to 171	Otherwise 40 Go to 171	Otherwise 40 Go to 171
Yes 5O	Yes 50	Yes 50	Yes 50
No	No 6○   Go to 174   Innow 7○	No 60 Don't know 70 Go to 174	No 60 Don't know 70 Go to 174
Yes 10  No 20  Don't know 30  Go to 175	Yes 10  No 20  Don't sknow 30	Yes 10  No 20  Don't Go to 175  Know 30	Yes 1 O No 2 O Don't snow 3 O
S 00 OR Go to /75	s ∞	\$ 00 OR Go to 175	\$ 00
Yes 10 No 20 Don't know 30	Yes 10 No 20 Don't know 30	Yes 10 No 20 Dan't know 30	Yes 10 No 20 Don'i know 30

175. While . . . was in this third person's care during the week of (reference week) was your main activity. · working at a job or business. e studying, · caring for your family's needs, OR something else? 176. Overall, how do you feel about this care arrangement Would you say you have . . . . · no reservations, minor reservations, e some important reservations. · major reservations about this arrangement? 177. INTERVIEWER CHECK ITEM: 4 Now I would like to ask you some questions about the caregiver who provided the fourth most hours of care for . . . during the week of (reference week). 178. 179. On which days was . . . in this fourth person's care during the week of (reference week)? 180. In total for how many hours was . . . in this fourth person's care during the week of (reference week)? IS1. Were any of your other children, under the age of 13, in the care of this fourth person during these hours? 182. Did this fourth person care for . . . in your home, his/her home, or somewhere else? 183. Does this fourth person live in your household? 184. Is this fourth person related to . . .?

1.

	- J		
1	2	3	4
Working 40	Working 40	Working 40	Working 40
Studying 5〇	Studying 50	Studying 50	Studying 50
Family 8 🔾	Family 4〇	Family 80	Family 6 🔾
Something else <sup>7</sup> O	Something else <sup>7</sup> O	Something else 70	Something else 70
No reservations	No reservations 10	No reservations 10	No reservations 10
Minor reservations <sup>2</sup> O	Minor reservations 2	Minor reservations <sup>2</sup>	Minor reservations 20
reservations 3 O	Some important reservations 3	Some important reservations 3 O	Some important reservations 3 O
Major reservations 4 O	Major reservations <sup>4</sup> O	Major reservations 4 🔾	Major reservations 4 🔾
If hem III > 3 go to Item I78 and ask questions about the	If item I11 > 3 go to Item I78 and ask	If Item It 1 > 3 go to Item I78 and ask	if item it1 > 3 go to item i78 and ask
caregiver who provided the fourth most number	questions about the caregiver who provided the fourth most number	questions about the caregiver who provided the fourth most number	questions about the caregiver who provided the fourth most number
of hours of care during reference week 5	of hours of care during reference week 50	of hours of care during reference week 50	of hours of care during reference week 5
Otherwise 6O Go to next child	Otherwise 6O - Go to next child	Otherwise 60 - Go to next child	Otherwise 6 Go to next Section
		t	
SMTWTFS	SMTWTFS	SMTWTFS	SMTWTFS
0000000	0000000	0000000	0000000
Hours	Hours	Hours	Hours
			Hours
Yes 10	Yes 10	Yes 10	Yes 10
No 20	No 20	Yes 10 No 20	
No 20 No other children 30	No other children 3 O	No 20 No other children 30	Yes 10 No 20 No other children 30
No other children 30  At your home 40  At caregiver's	No 20 No other children 30 At your home 40 At caregiver's	No 20 No other children 30 At your home 40 At caregiver's	Yes 10 No 20 No other children 30 At your home 40 At caregiver's
No cther children 3 At your home 4	No 20 No other children 30 At your home 40	No 20 No other children 30 At your home 40	Yes 10 No 20 No other children 30 At your home 40
No cther children 3 O  Al your home 4 O  Al caregiver's home 5 O Go to	No 20 No other children 30 At your home 40 At caregiver's home 50 Go to	No 20 No other children 30  At your home 40  At caregiver's nome \$0 Go to	Yes 10 No 20 No other children 30 At your home 40 At caregiver's home 50 Go to
No 20 No other children 30 At your home 40 At caregiver's home 50 Somewhere else 60 IB4	No 20 No other children 30 At your home 40 At caregiver's home 50 Somewhere else 50 I84	No 20 No other children 30  At your home 40 At caregiver's nome 50  Somewhere eise 50  No 20  Ro to 184	Yes 1 O No 2 O No other children 3 O At your home 4 O At caregiver's home 5 O Somewhere else 5 O 184
No 20 No other children 30 At your home 40 At caregiver's home 50 Go to 184  Yes 70	No 20 No other children 30 At your home 40 At caregiver's home 50 Somewhere alse 50 I84 Yes 70	No 20 No other children 30  At your home 40 At caregiver's nome 50 Somewhere eise 50  Yes 70	Yes 10 No 20 No other children 30 At your home 40 At caregiver's home 50 Somewhere else 50 184 Yes 70

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IBS. What is his/her relationship to ?
I86. How much did you pay for this fourth care arrangement for during the week of (reference week)?
187. INTERVIEWER CHECK ITEM:
188. Does this cost include other services as light house keeping etc.?
189. Does this fourth caregiver provide receipts?
i90. Do you or a member of your family intend to claim this cost for income tax purposes?
191. INTERVIEWER CHECK ITEM:
192. INTERVIEWER CHECK ITEM:
is the person providing this care licenced by the government or approved by a family daycare agency?
194. Was the amount you paid for this care subsidized by the government?
iss. Approximately how much would this care arrangement cost for per week if it were not subsidized?
i96. Is this fourth care arrangement a babysitting co- operative in shich you are expected to provide care part-time?

	- 4	•	
· ·	2	3	4
Parent/step-parent 3 ○ Grandparent 4 ○ Aunt/uncle 5 ○ Other relative 6 ○	Parent/step-parent 3 ○ Grandparent 4 ○ Aunt/uncle 5 ○ Other relative 6 ○	Parent/step-parent 2 ○ Grandparent 4 ○ Aunt/uncle 5 ○ Other relative 6 ○	Parent/step-parent 3 O Grandparent 4 O Aunt/uncle 5 O Other relative 6 O
\$ 000° go to 191)	\$00 (If *0000* go to 191)	s oo (H *000* go to !91)	\$ 00 00 (M '000' 90 to 191)
If hem 182 = at your home 10 Go to 188 Otherwise 20 Go to 189	If Item I82 = at your home Go to I88 Otherwise Go to I89	If item I82 = at your home 10 Go to I88 Otherwise 20 Go to I89	If Item 182 = at your home 1 Go to 188 Otherwise 2 Go to 189
Yes 30	Yes 3O No 4O	Yes 3O No 4O	Yes 30
Yes 50	Yes SO	Yes SQ	Yes 50
No ©	No ®O Yes 7O	No 60 Yes 70	No 60
No 80  If item I84 = Yes (relative) 1 O Go to 197	No 60  If item I84 = Yes (relative) 10 Go to 197	No #O  If hem I84 = Yes (relative) 1 O Go to /97	No 80
Otherwise 2 O Go to /92	Otherwise <sup>2</sup> O Go to 192	Otherwise 2 Go to /92	Yes (relative) 1   Go to /97 Otherwise 2   Go to /92
If Item I82 = at your home 3 © Go to /95  Otherwise 4 © Go to /93	If Item I82 = at your home 3 Go to 196 Otherwise Go to 193	If Item I82 = at your home 3 O Go to /96 Otherwise 4 O Go to /93	If Item I82 = at your home 3 Go to /96 Otherwise 4 Go to /93
Yes 5○ No 6○ Don't know 7○ Go to /96	Yes 50 No 60 Don's 70 Go to 196	Yes 50  No 60  Don't 70  Go to /96	Yes 10  No 60  Don't 70  Go to 196
Yes 10  No 20  Don't know 30  Go to 197	Yes 10 No 20 Don't 10 know 30 Go to 197	Yes 10 No 20 Don 1 Go to 197 know 30	Yes 10  No 20  Don't 10  Know 30  Go to /97
\$ 00 OR Go to 197	S CO TO 197	S 00 00 Go to 197	
Yes 10 No 20 Don't know 30	Yes 10 No 20 Don't know 30	Yes IO No © Don't know IO	Yes 10 No 20 Don't know 30

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197. While was in this fourth person's care during the week of (reference week) was your main ectivity
working at a job or business,
• studying,
caring for your family's needs,
OR
• something else?
196. Overall, how do you feel about this care arrangement for?
Would you say you have
no reservations,
minor reservations.
some important reservations.
OR
major reservations about this arrangement?

		- 43 -	
1	2	3	4
Working 40	Working 40	Working 40	Working 40
Studying 5O	Studying 50	Studying 5 〇	Studying 50
Family (0)	Family	Family 6〇	Family (O
Something else 70	Something else 70	Something else 70	Something else 70
No reservations (O	No reservations 10	No reservations ¹ 〇	No reservations
Minor reservations <sup>2</sup> O	Minor reservations 20	Minor reservations <sup>2</sup> O	Minor reservations <sup>2</sup> O
Some important reservations 3 O	Some important reservations 3 (	Some important reservations 3 ()	Some important reservations 3 (
Major reservations 4 🔾	Major reservations 4	Major reservations 4 O	Major reservations 4
SO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT SECTION

	- 4	4 -				
J.	CARE BY DESIGNATED ADULT WHILE WORKING					
J0.	INTERVIEWER CHECK ITEM: (Form 05 for Designated Adul	n)				
	• 11 'yes' in Item 10					
	e If 'tull-ome' in from 81					
	Go 8					
	If 'part-time' in Item 81 and any code but 7 (personal inter-	est) in A29 (page 5 Form 06) 3 O				
	Otherwise	4 O Go to SECTION R				
J1.	During the week of (reference week) did any of your children spend any time with you while you were working at a job or business?	J10. INTERVIEWER: Indicate for each child if he/she was in this care during reference week.				
	Yes 5 O Determine which child(ren) in J10 and					
	complete the appropriate items.	J11. On which day(s) during (reference week) was with				
	No ® ○ Go to Section K	you while you were working?				
_		J12. In total, for how many hours was with you while				
		you were working during the week of (reference week)?				
		J13. Were any of your other children, under the age of 13 with you during these hours?				
		J14. Overall, how do you feel about this care arrangement for?				
		Would you say you have				
		• no reservations,				
		* minor reservations.				
		some important reservations,				
		OR				
		major reservations about this arrangement?				
		J15. What are these reservations?				
		The transfer of the second				

	- 45	-	
t	2	3	4
Yes ¹○ No ²○ → Go to next child	Yes 10	Yes 10	Yes ¹○ No ²○ → Go to next section
SMTWTFS	S M T W T F S	SMTWTFS	S M T W T F S
Hours	Hours	Hours	Hours
Yes 1 No 2 No other children 3 O	Yes 10 No 20 No other children 30	Yes 1 No 2 No other children 3 No	Yes 1 O No 2 O No other children 3 O
No Go to reservations 4 — next child Minor reservations 5 — Some important reservations 6 — Major reservations 7 —	No reservations 4 — next child  Minor reservations 5 —  Some important reservations 4 —  Major reservations 7 —	No reservations 4 — Go to reservations 5 — Some important reservations 6 — Major reservations 7 —	No reservations 4 ———————————————————————————————————
SPECIFY	Same reservations as first child 1 O	Same reservations as first child 1 O	Same reservations as first child 1 O
	SPECIFY 2 O	SPECIFY 2 O	SPECIFY 2 O
GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT SECTION

Property of the content of the con	W-4	INTERVENER CAPON TOTAL	
EX2. During the week of (reference week) did any of your children spend any time with your spouse/partner while he/she was working at a job or business while you were working or studying?  EX3. During the week of (reference week) did any of your children spend any time with your spouse/partner while he/she was working at a job or business while you were working or studying?  EX4. In total, for how many hours was with him/he will he/she was working during the week (reference week)?  EX5. One of the complete the appropriate items.  EX6. While	K1.	INTERVIEWER CHECK ITEM: (Form 05 for Spo	
(C2. During the week of (reference week) did any of your children spend any time with your spouse/partner white he/she was working at a job or business white he/she was working at a job or business white he/she was working or studying?  Yes 3  Determine which children) in K10 and complete the appropriate items.  No 4  So to Section L  K13. Were any of your other children, under the age of 1 in his/her care during these hours?  K14. White was being cared for by him/her during the hours, was your main activity working at a job business or was it studying?  K15. Overall, how do you feel about this care arrangeme for?  Would you say you have  • no reservations,  • minor reservations,  • major reservations about this arrangement?			
children spend any time with your spouse/partner while he/she was working at a job or business while you were working or studying?  Yes 3 O — Determine which children) in K10 and complete the appropriate items.  No 4 O — Go to Section L  K14. While was being cared for by him/her during the hours, was your main activity working at a job business or was it studying?  K15. Overall, how do you feel about this care arrangeme for?  Would you say you have  In no reservations,  In minor reservations,		Otherwise 20 Go to S.	K11. On which day(s) during (reference week) was with
No 4 O — Go to Section L  K13. Were any of your other children, under the age of 1 in his/her care during these hours?  K14. While was being cared for by him/her during the hours, was your main activity working at a job business or was it studying?  K15. Overall, how do you feel about this care arrangeme for?  Would you say you have  • no reservations,  • minor reservations,  • more important reservations,  OR  • major reservations about this arrangement?	K2.	while he/she was working at a job or busing	te/partner while he/she was morking during the week of
R14. While was being cared for by him/her during the hours, was your main activity working at a job business or was it studying?  R15. Overall, how do you feel about this care arrangeme for?  Would you say you have  • no reservations,  • minor reservations,  • some important reservations,  OR  • major reservations about this arrangement?		Yes 3 O — Determine which child(ren) in complete the appropriate items	K13. Were any of your other children, under the age of 13.
K15. Overall, how do you feel about this care arrangeme for?  Would you say you have  • no reservations,  • minor reservations,  • some important reservations,  OR  • major reservations about this arrangement?		No ⁴○ — Go to Section L	
for?  Would you say you have  no reservations,  minor reservations,  some important reservations,  OR  major reservations about this arrangement?			K14. While was being cared for by him/her during these hours, was your main activity working at a job or business or was it studying?
no reservations,     minor reservations,     some important reservations,  OR     in major reservations about this arrangement?			Kts. Overall, how do you feel about this care arrangement for?
some important reservations,  OR     ### Additional Control of the Control o			
OR  • major reservations about this arrangement?			• minor reservations,
major reservations about this arrangement?			
K16. What are these reservations?			
			K16. What are these reservations?

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1	2	3	4
Yes (O	Yes 10	Yes 10	Yes 10
No 2○ Go to next child	No 2○ Go to next child	No 2○ — Go to next child	No 2○ → Go to next section
S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S
Hours	Hours	Hours	Hours
Yes 1 No 2 No other children 3 No	Yes 1 No 2 No other children 3 O	Yes 1 No 2 No other children 3	Yes 1 No 2 No other children 3 O
Working 4 O Studying 5 O	Working 4 O	Working 40 Studying 50	Working 4 O
No reservations 6 — next child  Minor reservations 7   Some important reservations 8   Major reservations 6   Major reservations 6	No reservations 6 ——next child  Minor reservations 7 —  Some important reservations 6 —  Major reservations 9 —	No reservations 6 — next child Minor reservations 7 — Some important reservations 8 — Major reservations 9 —	No reservations 6 ———————————————————————————————————
SPECIFY	Same reservations as first child 1 O OR SPECIFY 2 O	Same reservations as first child 1 O OR SPECIFY 2 O	Same reservations as first child 1 O OR SPECIFY 2 O
GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT SECTION

	CARE IN OWN HOME BY SPOUSE	
.1.	INTERVIEWER:  Does Designated Adult have a spouse living in household?  Yes 5O	L10. INTERVIEWER: Indicate for each child if he/she was in this type of care during reference week.
	No ◆○ → Go to Section M	L11. On which day(s) during the week of (reference week) was cared for by your spouse/partner while you were working or studying?
12	During the week of (reference week) did any of your children spend any time at home in the care of your spouse or partner while you were working at a job or business or while you were studying? Please exclude any time spent with your spouse while he/she was working (which was airsady recorted in Section K)	L12. In total, for how many hours was in this care while
	Yes <sup>7</sup> O — Determine which child(ren) in L10 and go to L3.	you were working or studying during (reference week)?
	No ♣○ — Go to Section M	L13. Were any of your other children, under the age of 13, in his/her care during these hours?
L	INTERVIEWER CHECK ITEM: (Form 05 for Spouse)	
	If 'yes' in Item 10	L14. While was being cared for by him/her during these hours, was your main activity working at a job or business or was it studying?
	Otherwise	L15. Overall, how do you feel about this care arrangement for?  Would you say you have
L4.	Have you and your spouse deliberately arranged work (and study) schedules so as to eliminate or reduce the number of hours of care you would otherwise require for your children?	no reservations,     minor reservations,
	Yes 4O	some important reservations,
	No 5○ → Go to L8	major reservations about this arrangement?
LS	What are the main reasons you have decided to do this? (Mark all that apply)	L16. What are these reservations?
	Wanted to share child care 1 O	
	Thought it best for child 2 O	
	Could not afford other child care/reduce other child care costs	
	Could not find suitable care arrangement 4 O	
	Other (specify) 5 〇	
LS.	INTERVIEWER:	

\_ 49 -

	- 49 -				
1	2	3	4		
Yes 10	Yes 10	Yes 10	Yes 10		
No 20 - Go to next child	No 20 Go to next child	No ≥O Go to next child	No 2O→ Go to next section		
S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S		
Hours	Hours Hours	Hours	Hours		
Yes 10 No 20 No other children 30	Yes 10 No 20 No other children 30	Yes 10 No 20 No other children 30	Yes 10 No 20 No other children 30		
Working 40	Working 40	Working 40	Working 4 O		
Studying 5	Studying 5	Studying 5	Studying 5		
No reservations 4 — Rest child  Minor reservations 5 —  Some important reservations 6 —  Major reservations 7 —	No reservations 4 — next child  Minor reservations 5   Some important reservations 6   Major reservations 7	No reservations 4 — next child  Minor reservations 5 —  Some important reservations 6 —  Major reservations 7 —	No Go to reservations 4 —— next sec- Minor reservations 5 —  Some important reservations 6 —  Major reservations 7 —		
SPECIFY	Same reservations as first child 1 OR SPECIFY 2 O	Same reservations as first child 1 OR SPECIFY 2 O	Same reservations as first child 1 OR  OR  SPECIFY 2 O		
GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT SECTION		

- 50 -M. M. CARE IN OWN HOME BY AN OLDER BROTHER OR SISTER M1. During the week of (reference week) did any of your children spend any time at home in the care of an older brother or sister while you were working or studying?

M10. INTERVIEWER: Indicate for each child if he/sne was in this care during reference week. Yes 6 O --- Determine which child(ren) in M10 and complete the appropriate items. M11. How old is this brother/sister? No <sup>↑</sup>O → Go to Section N M12. On which day(s) during the week of (reference week) was . . . in this care? M13. In total, for how many hours was . . . In this care while you were working or studying during (reference week)? M14. Were any of your other children, under the age of 13, in his/her care during these hours? M15. While . . . was being cared for by him/her during (reference week) was your main activity working at a job or business or was it studying? M16. Overall, how do you feel about this care arrangement Would you say you have . . . . · no reservations, · minor reservations. · some important reservations. OR major reservations about this arrangement? M17. What are these reservations?

- 51 -

M.

1 2 Yes 10 Yes 10 Yes 10 Yes 10 No 2○ -Go to next child No 20 - Go to next child No 20 - Go to next child No 2○ -- Go to next section SMTWTFS SMTWTFS SMTWTFS SMTWTFS 0000000 0000000 0000000 0000000 Hours Hours Hours Hours 10 .0 Yes Yes Yes 10 10 Yes No 20 20 No 20 No 20 No No other children 3 O No other children 30 No other children 30 No other children 30 Working 40 Working 40 Worlding 40 Working 40 Studying 50 Studying 5 () Studying 50 Studying 50 Go to next child No reservations No Go to reservations € ○ → next Go 10 Go to No Go to .0-10 reservations reservations 60child sec-Minor reservations Minor Minor reservations Minor 10 reservations 7 O 70 70 reservations Some Some Some important Some .0 reservations + O reservations . 0 .0 reservations reservations Major Major reservations • O Major reservations Major reservations .0 reservations .0 .0 Same reservations as first child Same Same reservations as first child SPECIFY reservations as first child 10 10 10 OR OR OR SPECIFY 20 SPECIFY 2 0 2 0 SPECIFY GO TO NEXT CHILD GO TO NEXT CHILD GO TO NEXT CHILD GO TO NEXT SECTION

## CHILD IN OWN CARE

N1. Frequently, children look after themselves while their parents are working or studying. Last week, were there any times when any of your children were taking care of themselves while you were working or studying?

Yes 4 O --- Determine which child(ren) in N10 and complete the appropriate items.

N11. On which day(s) during the week of (reference week) was... In his/her own care?

No 10 - Go to Section 0

N12. In total, for how many hours was . . . In his/her own care while you were working or studying during the week of (reference week)?

N13. While . . . was taking care of himself/herself during the week of (reference week) was your main activity. . .

· working at a job or business

OR

• studying?

N14. Overall, how do you feel about this care arrangement for . . . ?

Would you say you have . . .

e no reservations,

· minor reservations,

· some important reservations,

OR

major reservations about this arrangement?

N15. What are these reservations?

	- 22		
1	2	3	4
Yes 10	Yes 10	Yes 10	Yes 10
No <sup>2</sup> O → Go to next child	No 2○ → Go to next child	No ≥O Go to next child	No ≥O → Go to next section
S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S
Hours	Hours	Hours	Hours
Working 10	Working 10	Working 1 O	Working 10
Studying <sup>2</sup>	Studying <sup>2</sup>	Studying <sup>2</sup>	Studying <sup>2</sup> O
No reservations • O — next child Minor reservations 7 O Some important reservations • O — Major reservations • O	No reservations # O	No reservations 0 — next child Minor reservations 7 — Some important reservations 8 — Major reservations 9 — 1	No reservations 6 — next section reservations 7
SPECIFY	Same reservations as first child 1 O OR SPECIFY 2 O	Same reservations as first child 1 O OR SPECIFY 2 O	Same reservations as first child 1 O OR SPECIFY 2 O
GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT CHILD	GO TO NEXT SECTION

## O. PREFERRED CHILD CARE ARRANGEMENTS

O1. INTERVIEWER CHECK ITEM: (Form O5 for Designated Aguit)

If yes in item 10 ... 1 O Go to 010

Otherwise ...... 2 O Go to SECTION Q

O10. Given your current work schedule and your present income, which type of arrangement would you most prefer to use for ... while you are working? (Mart only one unless the respondent would prefer to use a combination of arrangements).

Daycare centre

Would you prefer that this centre be at your place of work?

Care in a nursery school program

Care in a before or after school program

Care by a non-relative in your home

Care by a non-relative in another home

Would you prefer that this caregiver be a licenced family home day care provider?

Care by your spouse/partner

Care by a brother/sister of your child

Care by other relative

Care by you while working

Child in his/her own care

OR

Child is currently at school during all the hours you work ———— No need for care

O11. Are you currently using this arrangement (these arrangements) for . . .?

O12. What factors are preventing you from using this type (these types) of care for . . .? (Mark all that apply)

It costs too much

Care method is not available

Poor quality in options that are available

Transportation problems

Child has special needs that make this type of care unsuitable

Does not match your work schedule

Some other lactor

1		2		3		4	
		-					
Daycare centre	010	Daycare centre	010	Daycare centre	010	Daycare centre	010
Yes	02O	Yee	020	Yes	020	Yes	E 0
No	030	No	030	No	030	No	ಬ೦
No preference	040	No preference	040	No preference	040	No preference	040
program	05 🔾	Nursery school program	05 🔾	Nursery school program	05 🔾	Nursery school program	05 🔾
Before or after school program	060	Before or after school program	060	Before or after school program	000	Before or after school program	×O
Non-relative at home	07	Non-relative at home	070	Non-relative at home	07 🔾	Non-relative at home	07 🔾
Non-relative in another home	080	Non-relative in another home	080	Non-relative in another home	000	Non-relative in another home	2 <b>4</b> O
Yes	∞○	Yes	090	Yee	990	Yee	090
No	·•O	No	190	No	100	No	:∞○
No preference	110	No preference	10	No preference	110	No preference	0.0
Spouse/partner	120	Spouse/partner	150	Spouse/partner	120	Spouse partner	150
Brotherisister	130	Brother/sister	130	Brother sister	120	Brother:sister	.30
Other relative	140	Other relative	140	Other relative	140	Other relative	0
You while working	15 🔾	You while working	150	You while working	150	You while working	150
Child in his/her own care	160	Child in his/her own care	100	Child in his her own care	180	Child in his/her own care	160
Child at school = no need		Child at school — no need		Child at school -		Child at school -	
or care	17 Go next child	for care	17 Go next child	no need for care	17 Go next child	no need for care	17 O Go next sectio
Yes ¹○ → Go	next child	for care  Yes ¹○ → Go	next child		child		next sectio
Yes 1○→Go	next child		next child	for care	child	for care	next sectio
Yes ¹○→Go	next child	Yes 1○ → Go No 2○	next child to next child	Ves 1○ → Go	child	Yes 10 + Go	next sectio
Yes 1○→Go	next child	Yes ¹○ → Go No ²○	next child	Yes 1○ → Go No 2○ Cost	child	Yes 10 + Go	next secur
/es 1○ → Go	next child	Yes 1○ → Go No 2○	next child to next child	Ves 1○→Go	next child to next child	Yes 10 - Go I	next secur to next secti
/es 1○ → Go	next child	Yes 1○ → Go No 2○  Cost Care method	next child	Yes 1○ → Go No 2○  Cost Care method	next child	Yes 10 - Go I No 20  Cost Care method	next section next section
Yes 10 Go	next child	Yes 1○ → Go No 2○  Cost Care method not available	next child	Yes 1○ → Go No 2○  Cost Care method not available	to next child	Yes 10 - Go i No 20  Cost Care method not available	rext sector for hext sector 2
Yes 10 Go	next child  1 O  2 O  3 O	Yes 1○ → Go No 2○  Cost Care method not available  Quality	next child	Yes 1○ → Go No 2○  Cost Care method not available Quality	to next child	Yes 10 - Go i No 20  Cost Care method not available Ouality	next section next
Yes 10 Go INo 20 Cost Care method lot available Quality Transportation Child's special ne	next child  1 O  2 O  3 O	Yes 1○ → Go No 2○  Cost Care method not available Quality Transportation	next child	Yes 1○ → Go No 2○  Cost Care method not available Quality Transportation	to next child	Yes 10 - Go I No 20  Cost Care method not available Ouality Transportation	next section next
res 10 Go   No 20 Cost Care method lot available Quality Iransportation Child's special nei	next child  1 O  2 O  3 O  4 O  eds 5 O	Yes 1○ → Go No 2○  Cost Care method not available Quality Transportation Child's special ne	next child  to next child  1	Yes 1○ → Go No 2○  Cost Care method not available Quality Transportation Child's special ne	to next child	Yes 10 - Go i No 20  Cost Care method not available Ouality Transportation Child's special in	next section next
Yes 10 Go INo 20 Cost Care method not available Quality Fransportation Child's special nei Nork schedule	next child  1 O 2 O 4 O eds 5 O 6 O	Yes 1○ → Go No 2○  Cost Care method not available Ouality Transportation Child's special ne Work schedule	next child  to next child  1	Yes 10 —Go No 20  Cost Care method not available Quality Transportation Child's special new Work schedule	to next child	Yes 10 - Go i No 20  Cost Care method not available Ouality Transportation Child's special in Work schedule	next section next
	next child  1 O 2 O 4 O eds 5 O 6 O	Yes 1○ → Go No 2○  Cost Care method not available Ouality Transportation Child's special ne Work schedule	next child  to next child  1	Yes 10 —Go No 20  Cost Care method not available Quality Transportation Child's special new Work schedule	to next child	Yes 10 - Go i No 20  Cost Care method not available Ouality Transportation Child's special in Work schedule	next section next
Yes 10 Go   No 20  Cost Care method not available Quality Fransportation Child's special net Work schedule	next child  1 O 2 O 4 O eds 5 O 6 O	Yes 1○ → Go No 2○  Cost Care method not available Ouality Transportation Child's special ne Work schedule	next child  to next child  1	Yes 10 —Go No 20  Cost Care method not available Quality Transportation Child's special new Work schedule	to next child	Yes 10 - Go i No 20  Cost Care method not available Ouality Transportation Child's special in Work schedule	rext sector to next sector 2 0 2 0 4 0 eecs 5 0 9 0
Yes 10 Go INo 20 Cost Care method lot available Quality Transportation Child's special neighbors schedule	next child  1 O 2 O 4 O eds 5 O 6 O	Yes 1○ → Go No 2○  Cost Care method not available Ouality Transportation Child's special ne Work schedule	next child  to next child  1	Yes 10 —Go No 20  Cost Care method not available Quality Transportation Child's special new Work schedule	to next child	Yes 10 - Go i No 20  Cost Care method not available Ouality Transportation Child's special in Work schedule	rext sector to next sector 2 0 2 0 4 0 eecs 5 0 9 0

	Does anyone other than you or your spouse look after a  Yes 1 O — Go to P2  No 2 O — Go to Section Q	eny of	your (	chlide	en (ye	our ci	hild) w	vhile :	you a	re wo	orking	,
P2.	Juggling work, family and child care responsibilities of tension for parents, while others can reduce tension. Gillike to know how much tension or discomfort you peneron a scale of 1 to 10 how much tension each factor or meaning no tension and a 10 a great deal of tension.	ven yo	Aur Cu	ment	work	and o	child o	care s	gname	eme	nts, i	would
		No Ten	sion								A Gre Deal	of
	The total number of hours you are working each week	0	OB	90	80	08	0 8	07	80	00	Tensa 10	on 00 O
	Your work schedule	0	08	80	0.0	05	0 0	07	80	80	00	80
	The total number of hours your spouse or partner is working	01	OB	80	80	0 8	0.80	67	# O	80	10	80
	Your spouse's/pertner's work schedule	01	OR	80	04 O	06 O	<b>%</b> O	87	# C	00	900	80
	Concerns about your child's safety and well-being while you are at work	5 C	08	90	0.80	0 % (	80	0 %	00	09	10	00
	Maintaining a balance between work demands and family responsibilities	0 50	O a C	) aC	0.80	0 % (	0.80	0 % C	0 80	0 % 0	0 0 0	0 8 0
	Getting to work on time when dropping off your child at his/her daycars setting or picking him/her up on time	50	08	08	0 80	80	0 80	0 %	0 80	0 80	0 00	0 80
	Feeling that your job or career is being hampered by family responsibilities	000	08	08	30	0.80	0.00	0.20	80	980	000	0 8 0
	The extent to which you feel your employer/work situation is inflexible or uncaring about your role as a parent	01	OB	80	30	80	80	87	80	80	900	80
	Working out arrangements with your spouse or partner over who will pick up and drop off your child	01	OB	80	84 O	06	40	07 O	a C	06	000	80
	Not being able to talk to your child or caregiver while you are at work	01 O	S C	80	40	80	8 C	67 C	80	8 C	0 0 0	80
	Worrying that your caregiver or care arrangement may break down or not be available for much longer	e1 C	80	80	0.8	0.80	80	5 C	80	98 (	000	0 8 0
	Scheduling child care with your spouse or partner so that one of you is generally available to be with your child	91 ()	08	80	0.8	80	80	50	80	80	90	08
	Managing the costs of high quality care	01	0.8	80	30	05	o O	87	06	œ ()	10	œ O
	Feeting tired or overloaded because of your job	01	08	80	0.0	80	80	07	80	0 %	90	80
٧	s there any other factor that is causing tension for you a  (es 3	s you	Juggid	e wor	k, fam	nily, a	nd ch	ild ca	are re	spon	siblin	ies?
Ci Ci	While things vary from day to day, overall, how much ension do you feel in juggling work, family and child are responsibilities? Please use the same scale of 1	No Tens	00								A Grea	

P	
\$ 1.00 m	

	Having a child care provider or arrangement that is flexible and can	01		
	Having a child care provider or arrangement that is flexible and can	A.	02	83
	accommodate your needs	0	0	0
	Feeling fulfilled because you are working	04	os O	01
	Having a child care provider or arrangement that offers you support or	07	08	09
	advice	0	0	0
	Having a backup arrangement you can use if your regular child care	10	0	0
	arrangement breaks down	13	14	15
	Having a spouse or partner who shares child care responsibilities	0	0	0
		16	17	18
	Having older children help out with family and child care responsibilities	0	0	0
	Having a stable arrangement for your child(ren) that you feel good about	0	200	21
	Having a child care provider who does light housekeeping and other	22	23	24
	chores for you	0	0	0
	Having a child care provider/arrangement who can care for your child(ren) when your child(ren) is/are sick.	25	26	0
	Having an employer or supervisor who is supportive of you in your role	28	29	30
	as a parent	0	0	0
	to work part-time. 4 O			
	not work at a job or business? 5 O		11.5	
	If you had a choice, would you prefer to change the schedule of hours you :  Yes   Co  Co  Co  Co  Co  Co  Co  Co  Co  C	are curren	tly working?	
	What changes would you make? (Mark all that apply)			
	Work only during school hours 1 O			
	Not work evenings 2 O			
	Not work on week-ends			
	Have consistent hours No changing shifts 4 O			
	Work no more than 8 hours per shift 5 O			
	Other (Specify) •O			
10	INTERVIEWER: Does the designated adult have a spouse living in the household?			
	Yes ¹ O			
	No ≥ C Go to SECTION O			
	No 12 Go to SECTION 0  When considering your own needs and those of your family, would you mos	t prefer th	at your spo	use
11.		t prefer th	at your spo	use

Q.	MAIN METHOD EVALUATION			
Q1	. INTERVIEWER:	SHOE II AN	O5. At that time did you consider using a daycare of	centr
	Read: (We have randomly selected or and) I'd like to ask you son questions about's child care a the week of (reference week).	the more detailed		vse .
Q2.	MAIN METHOD OF CHILD CARE FO	OR THE WEEK OF		
	(Not counting any time spent at sch methods of child care you told me you consider to be the main method for him/her the week of (reference w to work or study? (Mark only one)	about for do	Respondent is using a daycare cent	70 23
			No 2 O Why didn't you consider having attend a daycare centre?	9
	Care in a pre/junior kindergarten program or nursery school program 010	Go to Q3	No reason	
	Care in a daycare centre (including at workplace) 02()			
	Care in a before or after school program 03C	Go to Q26		
	Care in someone else's home by a non-relative	Go to 047	O6. In many parts of Canada, an option availab parents is to use an individual, who is licence the provincial government or approved by a da	ed b
	Care in someone else's home by a relative os C	Go to Q96 (p. 74)	agency, to provide care in his/her home. Have heard of licenced family home daycare?  Yes 10 ——— Go to Q8	e you
	Care in own home by a non-relative	Go to Q72 (p 70)	No 20	
	Care in own home by spouse 07 C		Q7. If you had known about licensed family daycars, would you have considered using it	hom
	Care by spouse while working 0e C		you made this last main care arrangement for	.?
	Care by designated adult while working (at home or outside home)	) Go to	Yes 3 O Go to O	
	Care in own home by brother or sister 10 C	Q96 (p, 74)	Q6. Did you consider using a licenced family daycare provider when you made this last main arrangement for?	home can
	Care in own home by other relative		Yes 1 O Why did you decide not to u ilcenced family home day provider?	Car
	Child in his/her own care			
	Did not use a care arrangement during reference week	Go to Section \$ (p. 80)		
	JUNIOR KINDERGARTEN PROGRA SCHOOL PROGRAM/DAYCARE CE	M/NURSERY NTRE	OR Respondent is using a licenced	famil
23.	When did you most recently beg (program/centre) as your main citor?	in to use this	home daycare provider as a secon arrangement for 30  No 20	ondar
	Month Year	4 10 - 10	licenced family home daycare pro- for?	ovide
34.	INTERVIEWER CHECK ITEM		No reason	
	N Q2 = 2 (daycare centre) 1	O Go to Os		5
	Otherwise	O Go to O5		=

Q9.	friend or nei	use care provided by a paid bebysitter, ighbour either in their home or in the a, when you made this last main care for did you consider using a sitter?	Q12. What are the main reasons you chose this particular (program/centre)?
	Yes 5 O	Why did you decide not to use care by a sitter?	1.
		OR OR	2.
	No 8 ○ →	Respondent is using a sitter as a secondary care arrangement for	3.
		No reason	Q13. Did you have to search for this care arrangement for or did you know right away what arrangement you would use?
-			Yes, looked around 1
Q10.	their child carefully carefully contact the contact to the contact	s rely on a relative to provide much of are. Did you consider using care by a ir than your spouse or an older child) de your last main care arrangement for	No. arrangement already existed for other children or search not required 2 Go to G17
	Yes 1 🔾 🛶	Why did you decide not to use care by a relative?	Q14. What sources of information did you use when searching for this care arrangement for? (Mark all that apply)
		OR	Friends, neighbours, co-workers 01 C
		Respondent is using care by a relative as a secondary care arrangement for 3	Previous caregivers
	No 2 O →	Why didn't you consider using care by a relative for ?	Referrals from prolessionals (eg. doctors, psychologists) 04 (
		No reason	Bulletin boards: newspapers 06 🔾
			Pamphlets and books 06 O
			A daycare information service 04 O
Q11.	ijunior kind	main reasons you decided to use a lengarten program/nursery school are centre) as your main care method	A family home daycare agency OP O
			A community centre (e.g. 10 )
	1.		A church, ethnic or religious organization
			A school or school board 12 🔾
	2.		Other (specify) 13 O
	3.		

				Yes	No	Not Applicable
	Knowing where to get information about available child care?	edeloghomod/ronne,	.4	010	<b>65</b> ()	03 🔾
	Finding good quality caregivers?	******************		a 0	060	08 (
	Knowing what to look for to ensure good quality care for your child	2		07 🔾	040	<b>∞</b> ○
	Finding out about available caregivers?			100	110	12 (
	Visiting homes or daycare centres during the day?	* ****-*********		130	140	15 🔾
	Did you have any difficulties in finding care for the hours you needs	ed H7		0	170	**0
	How about having few or no options to choose from?			••0	200	21 (
	Not having enough time to consider alternatives?			22 🔾	530	24 🔾
	Finding good quality care that you could afford?	****************		<b>5</b> 0	*0	27 🔾
	Trusting someone you didn't know to care for your child?		4	0	29()	30 🔾
	Yes 1 O What were they?					
	No 2O					
717.	No 20 When deciding on 's child care arrangement how important wimportant, somewhat important, or not important that  Very important	y So	the folia	Not impo		Was it ve Not Applicable
n7.	No 20 When deciding on 's child care arrangement how important wimportant, somewhat important, or not important that  Ven	y So cortaint Im	mewhat	Not	rtant	Not
n7.	No 20  When deciding on 's child care arrangement how important wimportant, somewhat important, or not important that  Very important that  The caregiver provide care in your home?	y So containt in	mewhat	Not	ortant O	Not Applicable
117.	No 20  When deciding on 's child care arrangement how important wimportant, somewhat important, or not important that  Very important caregiver provide care in your home?	y So containt lim	portant	Not impo	ortant O	Not Applicable 04
n7.	When deciding on 's child care arrangement how important w important, somewhat important, or not important that  Very important that  Very important that  The caregiver provide care in your home?	y Soortant Im	omewhat portant iz O	Not impo	ortant O	Not Applicable 04
m7.	When deciding on 's child care arrangement how important w important, somewhat important, or not important that  Very important that  Very important that  The caregiver provide care in your home?	y Soortant im	mewhat portant	Not impo s3 (	ortant O	Not Applicable 04 0
217.	When deciding on 's child care arrangement how important w important, somewhat important, or not important that  Very important, somewhat important, or not important that  Very important that  Very important that  The caregiver provide care in your home?  On the caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  12(  The caregiver/arrangement was subsidized?  17(	y Solortant im	mewhat portant 12 0	Not impo 83 (	ortant O	Not Applicable 04 0 12 0 19 0 20 0
118.	When deciding on 's child care arrangement how important w important, somewhat important, or not important that  Very important, somewhat important, or not important that  Very important that  Very important that  The caregiver provide care in your home?  The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The caregiver/arrangement was subsidized?  The caregiver/arrangement have a similar language or cultural background to your own?  Different methods of child care can affect children in different Considering the main care arrangement you used for the week any specific positive effects on him/hor?	y Soloritant im	mewhat portant 120 Jij	Not impo 83 (	o o	Not Applicable 04 0 12 0 19 0 20 0 24 0
18.	When deciding on 's child care arrangement how important w important, somewhat important, or not important that  Ven important, somewhat important, or not important that  Ven important that  Ven important that  The caregiver provide care in your home?  The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The caregiver/arrangement was subsidized?  The caregiver/arrangement have a similar language or cultural background to your own?  Different methods of child care can affect children in different Considering the main care arrangement you used for the week	y Soloritant im	mewhat portant 120 Jij	Not impo 83 (	o o	Not Applicable 04 0 12 0 19 0 20 0 24 0
18.	When deciding on 's child care arrangement how important w important, somewhat important, or not important that  Very important, somewhat important, or not important that  Very important that  Very important that  The caregiver provide care in your home?  The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The caregiver/arrangement was subsidized?  The caregiver/arrangement have a similar language or cultural background to your own?  Different methods of child care can affect children in different Considering the main care arrangement you used for the week any specific positive effects on him/hor?	y Soloritant im	mewhat portant 120 Jij	Not impo 83 (	o o	Not Applicable 04 0 12 0 19 0 20 0 24 0
18.	When deciding on 's child care arrangement how important w important, somewhat important, or not important that  Very important, somewhat important, or not important that  Very important that  Very important that  The caregiver provide care in your home?  The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The caregiver/arrangement was subsidized?  The caregiver/arrangement have a similar language or cultural background to your own?  Different methods of child care can affect children in different Considering the main care arrangement you used for the week any specific positive effects on him/hor?	y Soloritant im	mewhat portant 120 Jij	Not impo 83 (	o o	Not Applicable 04 0 12 0 19 0 20 0 24 0

Q1	9. Has this arrangement had any specific negative eff	ects on . ?	_			_
	Yes 5 O What are these effects?					
	what are these effects?					
	1.					
	2.					
	3.					
	No 6 O					
220	. How satisfied are you with your main care arrange that you are very satisfied, somewhat satisfied, somewhat satisfied, somewhat satisfied.	ement for In	terms of the	following ass	ects? Would	you say
	Sense of the sense	Very Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Very Dissatisfied	NA
	The convenience of the location	0,0	02 🔾	03 🔾	040	os ()
	The cost of the care	0 <del>6</del> O	07 🔾	00	00 🔾	·° O
	The availability of care for the hours you need it	110	120	13 🔾	140	15 🔾
	The quality of food served	16()	170	100	100	50 🔾
	Cleanliness and safety	210	22 🔾	23 🔾	240	25 🔾
	The number of caregivers for children	260	27 🔾	26 🔾	29 🔾	» O
	The caregivers' education and training related to child care	310	350	23 🔾	340	35 🔘
	The caregivers' skills and experience in working with young children	36()	37 🔾	30 🔾	39 🔾	40 ()
	The caregivers' sensitivity to your child's needs	410	420	43()	40	40
	Communication between you and the caregivers.	460	47 🔾	40	490	50 🔾
	The amount of turnover among staff	510	220	nO	540	95 🔾
	The amount of influence you have in decisions that affect your child's program	56 🔾	57 🔾	940	50 🔾	60 🔘
	The size and design of Indoor play space	610	<b>42</b> O	63 🔾	40	95 🔘
	The available indoor toys and equipment	860	670	84 🔾	***	70 0
	The outdoor play space, toys and equipment	710	20	700	740	75 ()
	The amount of television watched	76()	770	78 🔾	790	90 🔾
	The availability of Interesting learning activities	910	820	80	840	95 🔘
21.	is there anything else you would like to tell me arrangement?	about that you	are particul	arly satisfied	with about th	is care
	Yes 1 O What is It?					
22.	No 20 is there anything else that you are particularly dissa	tisfied with?				
		The William				
	Yes 3 What is R?					
	No 4O					

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	- (	2 -		
	Ask if not known) Are you paying for the main care arrangement that you used for the week of (reference week)?	Q29.	Did you con daycare prov arrangement	sider using a licenced family homoder when you made this last main cafor?
,	Yes 10		Yes 1 0	Why did you decide not to use ilcenced family home daycar provider?
P	40 2O Go to Q117 (p. 78)	1		
0	Suppose the cost of this care arrangement was to ncrease. Which of the following categories best describes by how much it would have to increase before you would start looking for another care irrangement for?			OR
	By 0%, you can't afford any	133		Respondent is using a licenced familiary home daycare provider as a secondary arrangement for
	by 25%		No 2 ○ →	Why didn't you consider using licenced family home daycare provid for?
	by 50%	3		No reason 40
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13		OR
8	by 100%			
	OR			
- fi	ou wouldn't consider looking or another child care	030	friend or nei	use care provided by a paid babysitti ghbour either in their home or in t
ı	mangement even if the cost nore than doubled		arrangement	a. When you made this last main ca for did you consider using a sitter?
h	Which of the following categories best describes by low much it would have to increase before you rould guit your job (or schooling)?		Yes 5 O	Why did you decide not to use care a sitter?
	ly 0%, you can't afford any	1		
	ncrease			
	20			OR
8	ry 50%	16		Respondent is using a sitter as a second care arrangement for
	Go to 0117 (p. 78)	1	No • ○ →	Why didn't you consider using a sitt to care for?
	OR			No reason
Y	ou wouldn't consider			* OR
- 84	chooling) even if the cost			
п	nore than doubled			
8	EFORE OR AFTER SCHOOL PROGRAM	Q31.	their child c	s rely on a relative to provide much are. Did you consider using care by
76. W	then did you most recently begin to use this rogram as your main care arrangement for ?		when you ma	er than your spouse or an older chi de your last main care arrangement
			Yes 1 0 ->	Why did you decide not to use care a relative?
	Month Year			
p.	n many perts of Canada, an option available to arents is to use an individual, who is licenced by			
- 10	he provincial government or approved by a daycare gency, to provide care in his/her home. Have you eard of licenced family home daycare?	H		OR
Y	es 10 — Go to 029			Respondent is using care by a relative a secondary care arrangement for
N	10 2O		No 2 0	Why didn't you consider using care a relative for?
d.	you had known about licenced family home aycare would you have considered using it when ou made this last main care arrangement for?			No reason
Y		1		
N ZEL H	you had known about licenced family home sycars would you have considered using it when		No 2 O	Why didn't you consider using a relative for ?  No reason

32. What are the main reasons you decided to use a before or after school program as your main care method for?	Q35. What sources of information did you use when searching for this care arrangement for ? (Mark all that apply)
1.	Friends, neighbours, co-workers 01 O
	Relatives 02 🔘
2.	Previous caregivers
3.	Referrals from professionals (eg doctors, psychologists)
	Bulletin boards, newspapers 05 🔾
233. What are the main reasons you chose this particular program?	Pamphiets and books 06 🔘
1.	A daycare centre
	A daycare information service 08 O
2.	A family home daycare agency 09 O
3	A community centre (e.g. 10 )
	A church, ethnic or religious organization
34. Did you have to search for this care arrangement for, or did you know right away what arrangement you would use?	A school or school board 12 O
Yes, looked around 10	Other (specify)
No, arrangement already existed for other child(ren) or search not required <sup>2</sup> Go to Q38	

				Yes No	Not Applicab
	Knowing where to get information about available child care?	***********	*******	010 020	03 ()
	Finding good quality caregivers?		***********	04O 04O	on ()
	Knowing what to look for to ensure good quality care for your	child?	*********	07 080	000
	Finding out about available caregivers?	**************	*************	100 110	12 (
	Visiting homes or daycare centres during the day?	********************	· · · · · · · · · · · · · · · · · · ·	130 140	150
	Did you have any difficulties in finding care for the hours you	needed It7	*********	100 170	10 0
	How about having few or no options to choose from?	*** ***********		***	21 0
	Not having enough time to consider alternatives?	7 T 0 0 + 0 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		22 230	24 🔾
	Finding good quality care that you could afford?	***************		30 NO	27 🔾
	Trusting someone you didn't know to care for your child?		************	29 29 (	30 🔾
Q38.	No 2 O  When deciding on 's child care arrangement how impor	tant was eac	ch of the foil	owing factors	? Was it vo
	Important, somewhat important, or not important that	Very	Somewhat	Not	
		Important	Important	important	Not Applicable
	The caregiver provide care in your home?	en 🔾	important e2 🔾		
	The caregiver or arrangement accommodate more than one child in your family?	1 11		important	Applicable
	The caregiver or arrangement accommodate more than	010	<b>62</b> ()	important es O	Applicable 04O
	The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when	e1O	00 Og	important cs ()	Applicable 04O
	The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is alca?  The caregiver would give you receipts?	***	00 Og	important 03 O 07 O	Applicable 04O 04O 12O
	The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?	81 O 86 O 80 O 13 O	00 Og	97 O	Applicable 04() 08() 12() 16()
Q33.	The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The care arrangement was subsidized?	81 O	00 Og 10 O 14 O 18 O 22	11 O 15 O 23 O 23 O 25 O 25 O 25 O 25 O 25 O 2	Applicable 040 080 120 160 200 240
039.	The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The care arrangement was subsidized?  The caregiver/arrangement have a similar language or cultural background to your own?  Different methods of child care can affect children in diff Considering the main care arrangement you used for the	81 O	00 Og 10 O 14 O 18 O 22	11 O 15 O 23 O 23 O 25 O 25 O 25 O 25 O 25 O 2	Applicable 040 080 120 160 200 240
Q33.	The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The caregiver/arrangement was subsidized?  The caregiver/arrangement have a similar language or cultural background to your own?  Different methods of child care can affect children in diff Considering the main care arrangement you used for the any specific positive effects on him/her?	81 O	00 Og 10 O 14 O 18 O 22	11 O 15 O 23 O 23 O 25 O 25 O 25 O 25 O 25 O 2	Applicable 040 080 120 160 200 240
Q33.	The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The care arrangement was subsidized?  The caregiver/arrangement have a similar language or cultural background to your own?  Different methods of child care can affect children in diff Considering the main care arrangement you used for the any specific positive effects on him/her?  Yes 1 O	81 O	00 Og	11 O 15 O 23 O 23 O 25 O 25 O 25 O 25 O 25 O 2	Applicable 040 080 120 160 200 240
033.	The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The care arrangement was subsidized?  The caregiver/arrangement have a similar language or cultural background to your own?  Different methods of child care can affect children in diff Considering the main care arrangement you used for the any specific positive effects on him/her?  Yes 1 O	81 O	00 Og	11 O 15 O 23 O 23 O 25 O 25 O 25 O 25 O 25 O 2	Applicable 040 080 120 160 200 240
Q33.	The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The caregiver/arrangement was subsidized?  The caregiver/arrangement have a similar language or cultural background to your own?  Different methods of child care can affect children in diff Considering the main care arrangement you used for the any specific positive effects on him/her?  Yes 1 O — What are these effects?	et O  os O  i3 O  i7 O  erent ways, week of [ref	00 Og	11 O 15 O 23 O 23 O 25 O 25 O 25 O 25 O 25 O 2	Applicable 040 080 120 160 200 240
Q33.	The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?	et O  os O  i3 O  i7 O  erent ways, week of [ref	00 Og	11 O 15 O 23 O 23 O 25 O 25 O 25 O 25 O 25 O 2	Applicable 040 080 120 160 200 240
Q33.	The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?	et O  os O  se O  13 O  17 O  21 O  erent ways, week of [ref	00 Og	11 O 15 O 23 O 23 O 25 O 25 O 25 O 25 O 25 O 2	Applicable 040 080 120 160 200 240

	Very Satisfied	Satisfied	Somewhat Dissatisfied	Very Dissatished	NA
The convenience of the location	010	02O	830	⊶ ○	05 (
The cost of the care	000	07 🔾	08 🔾	<b>∞</b> ○	10 (
The availability of care for the hours you need it	110	120	130	140	15 (
The transporation between the school and this program	100	170	160	190	20 (
The quality of food served	210	20	20	24 ()	25 (
Cleanliness and safety	240	270	28 ()	29()	30 (
The number of caregivers for children	310	120	nO	иО	35
The caregivers' education and training related to child care	360	370	34 🔾	39 🔾	40
The caregivers' skills and experience in working with children	410	420	40	40	45
The caregivers' sensitivity to your child's needs	40	470	40	49 🔾	50
The availability of interesting learning activities for your child's age group	510	520	20 🔾	54 🔾	55
Communication between you and the caregivers	<b>%</b> O	57 🔾	98 🔾	59 🔾	60
The amount of turnover among staff	410	620	63 🔾	40	65
The amount of influence you have in decisions that affect your child's program	••0	erO	••0	••0	76
The size and design of indoor play space	710	20	1 130	74 🔾	75
The available indoor toys and equipment	76()	770	78 🔾	79 🔾	84
The outdoor play space, toys and equipment	••0	820	e>0	**0	85
Is there anything else you would like to tell me a arrangement?  Yes 1 O	about that	you are parti	cularly satisfi	ed with about	this o
L is there anything else that you are particularly dissa	tisfied with	1	4		
Yes 3 O What is it?					

-	O44. (Ask if not known)  Are you paying for the main care arrangement that you used for the week of (reference week)?	O50. When you made this main care arrangement for did you consider using a devoare centre?  Yes 1 O
3	Yes 10	use a daycare centre?
-	No 10 —— Go to Q117 (p. 78)	
1	245. Suppose the cost of this care arrangement was to increase. Which of the following categories best describes by how much it would have to increase before you would start looking for another care arrangement for?	
	By 0%, you can't afford any increase	secondary arrangement for. 3
	By 25%	No 2 — Why didn't you consider having attend a daycare centre?
	By 50% 5 🔾	No reason 4Q
	By 100%	OR
Q.	OR	
	You wouldn't consider looking for another child care arrangement even if the cost	
0	more than doubled	QS1. When you made this main care arrangement for did you consider using a before or after school program?
	would quit your job (or schooling)?  By 0%, you can't afford any increase	Yes 50 — Why did you decide not to use a before or after school program?
	By 25% 2 🔾	
	By 50%	OR
	By 100% Go to 0117 (p. 78)	Respondent is using a before or after school program as a secondary arrangement for
	You wouldn't consider quitting your job (or schooling) even if the cost more than doubled	No 8 O Why dign't you consider using a before or after school program for ?  No reason
T	CARE IN SOMEONE ELSE'S HOME BY A NON-RELATIVE	OR
0	67. When did you most recently begin to use this caregiver as your main care arrangement for ?	
	Monds Year	Q52. In many parts of Canada, an option available to parents is to use an individual, who is licenced by the provincial government or approved by a daycare
0.	18. When you first considered using this person as's caregiver how well did you know him/her? Was he/she	agency, to provide care in his/her home, is the caregiver you are using for a licenced family home daycare provider?
1	well-known to you?	Yes © —— Go to Q56
	a casual acquaintance? 2O	No ®
	not known to you at aH? 30	Don't know 3O
04	9. INTERVIEWER CHECK ITEM:	Q63. When you made this care arrangement for had you heard about licenced family home daycare?
	If age of target child is less than 5 4 Go to 050	Yes 40
	A Otherwse	

Q54.	would you ha	ard about licenced family home daycare are considered using it when you made in care arrangement for?	Q58. What are the main reasons you chose this particular caregiver for ?
	v 40 )		1.
	Yes *O	Go to Q58	
-			
Q55.	daycare prov arrangement	sider using a licenced family home ider when you made this last main care for?	2.
	Yes 1 O	Why did you decide not to use a licenced family home daycare provider?	
		OR	3.
		Respondent is using a licenced family home daycare provider as a secondary arrangement for	QS9. Did you have to search for this care arrangement for or did you know right away what arrangement you would use?
	No 20-	Why didn't you consider using a licenced family home daycare provider for?	
		No reason 4 O	Yes, looked around 1Q
		OR	No, arrangement already existed for other child(ren) or search not required 20 —— Go to Q63
			GO 10 COS
1			
			Q60. What sources of information did you use when
056	Some parents	s rely on a relative to provide much of	searching for this care arrangement for?  (Mark all that apply)
334	their child ca relative (other	ire. Did you consider using care by a r than your spouse or an older child) i made your last main care	
	Yes 50 -	Why did you decide not to use care by	Friends, neighbours, co-workers 01 O
	163 -0 -	a relative?	Relatives 02 🔾
			Previous caregivers
			Referrals from professionals (eq.
		OR	doctors, psychologists) 04 O
		Respondent is using care by a relative as a secondary care arrangement for ?	Bulletin boards, newspapers 06 🔾
	No 40	Why didn't you consider using care by a relative for?	Pamphiets and books 06 🔾
		No reason 4 O	A daycare centre 07 🔾
		OR	A daycare information service 08 〇
			A family home daycare agency 06 〇
			A community centre (e.g. 10 O
Q57.	What are the looked after b	main reasons you decided to have y a Caregiver in his/her home?	A church, ethnic or religious organization
	1.		A school or school board 12 🔾
	2.		Other (specify)
	3		

				M	Nic	84.4
			100	Yes	No	Not Applicab
	Knowing where to get information about available child care?	************	*********	010	<b>020</b>	83 O
	Finding good quality caregivers?	*****************		MO	05()	06 (
	Knowing what to look for to ensure good quality care for your ch	hild?	THE S	97 ()	04O	oo O
	Finding out about available caregivers?			100	110	12 0
	Visiting homes or daycare centres during the day.?	*********	******	120	140	16 ()
	Did you have any difficulties in finding care for the hours you ne	eded it?		100	170	18 🔾
	How about having few or no options to choose from?	^~~~	PB- ( * * B&B# * * *	100	200	21 0
	Not having enough time to consider alternatives?		********	20	20	24 🔾
	Finding good quality care that you could afford?	***************************************		×0	38 <b>O</b>	27 🔾
	Trusting someone you didn't know to care for your child?		19.,,,,,,	28 🔾	29()	30 🔾
262.	Did you experience any other difficulties I haven't mentioned?			_		
	Yes 1 O What were they?					
	n- 10					
	No 2O					
263	No 20 When deciding on 's child care arrangement how important important, somewhat important, or not important that	ant was eac	th of the fol	lowing	factors?	Was it v
)63.	When deciding on 's child care arrangement how imports	Very	Somewhat	Not		Not
263.	When deciding on 's child care arrangement how important important, or not important that	Very Important	Somewhat Important	Not	ortant	Not Applicable
263.	When deciding on 's child care arrangement how imports	Very	Somewhat	Not		Not
D63.	When deciding on 's child care arrangement how imports important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important	Somewhat Important	Not	ortant	Not Applicable
D63.	When deciding on 's child care arrangement how important important, or not important that	Very Important	Somewhat Important	Not imp	ortant	Not Applicable
263.	When deciding on 's child care arrangement how imports important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important	Somewhat Important 02 O	Not imp	ortant	Not Applicable
063	When deciding on 's child care arrangement how important important, or not important that  The caregiver provide care in your home?	Very Important	Somewhat Important 02 O	Not imp	ortant	Not Applicable
263.	When deciding on 's child care arrangement how imports important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important 01 0	Somewhat Important oz O	Not imp	ortant	Not Applicable 04
267	When deciding on 's child care arrangement how imports important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important 01 0	Somewhat Important oz O	Not imp	ortant	Not Applicable 04
263	When deciding on 's child care arrangement how importation important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important of O	Somewhat Important oz O	Not imp	ortant	Not Applicable 04 0 08 0 12 0 18 0
0063	When deciding on 's child care arrangement how imports important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important e1 O	Somewhat Important 02 O	Not imp	ortant	Not Applicable 04 O
963	When deciding on 's child care arrangement how importation important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important of O	Somewhat Important oz O	Not imp	ortant	Not Applicable 04 0 08 0 12 0 18 0
263	When deciding on 's child care arrangement how importation important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important of O	Somewhat Important oz O	Not imp	ortant	Not Applicable of O
	When deciding on 's child care arrangement how importation important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important e1 0 0 0 0 0 12 0 17 0 erent ways.	Somewhat Important of O	Not imp	ortant	Not Applicable 04 0 08 0 12 0 18 0 24 0 24 0
	When deciding on 's child care arrangement how important important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important e1 0 0 0 0 0 12 0 17 0 erent ways.	Somewhat Important of O	Not imp	ortant	Not Applicable 04 0 08 0 12 0 18 0 24 0 24 0
	When deciding on 's child care arrangement how importate important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important e1 0 0 0 0 0 12 0 17 0 erent ways.	Somewhat Important of O	Not imp	ortant	Not Applicable 04 0 08 0 12 0 18 0 24 0 24 0
	When deciding on 's child care arrangement how imports important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important e1 0 0 0 0 0 12 0 17 0 erent ways.	Somewhat Important of O	Not imp	ortant	Not Applicable 04 0 08 0 12 0 18 0 24 0 24 0
	When deciding on 's child care arrangement how importate important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important e1 0 0 0 0 0 12 0 17 0 erent ways.	Somewhat Important of O	Not imp	ortant	Not Applicable 04 0 08 0 12 0 18 0 24 0 24 0
	When deciding on 's child care arrangement how importate important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important e1 0 0 0 0 0 12 0 17 0 erent ways.	Somewhat Important of O	Not imp	ortant	Not Applicable 04 0 08 0 12 0 18 0 24 0 24 0
	When deciding on 's child care arrangement how importate important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important e1 0 0 0 0 0 12 0 17 0 erent ways.	Somewhat Important of O	Not imp	ortant	Not Applicable 04 0 08 0 12 0 18 0 24 0 24 0
	When deciding on 's child care arrangement how importate important, somewhat important, or not important that  The caregiver provide care in your home?	Very Important e1 0 0 0 0 0 12 0 17 0 erent ways.	Somewhat Important of O	Not imp	ortant	Not Applicable 04 0 08 0 12 0 18 0 24 0 24 0

Q65	. Has this arrange	eme	nt n	ad	anv	304	cit	ic o	-0	n Hay		Ma	- 65		-	_	-	_	_	_		-		
													- (3	OH	!									
	Yes 5 O	WI	hat :	916	thes		ffe	cts7																
		1.								1										I				
		2.							I	T		1												
		1								T														
	No # O	a.							_	-														
O66.	How satisfied ar	e y	ou v	with	you	ir m	air	ca	re	arr.	ang	err	neni	fo	F	. in	terr	ns of	the f	ollow	ing as	LDec	ts? Would	VOII CAV
	that you are very	y 8-8	CIST	ed,	som	ewi	hat	sat	isti	ed,	\$0	me	90 (1)	Ver	1135354	etist	rieg (	or very	dis:	satisf	led wr	th .	7	,00 30,
															stie	ď		shed		Some Dissal			Very Dissatisfied	N/A
	The convenience													01	0		32	0		03 (	)		04 ()	05 🔾
	The cost of the c	care												06	0		07	0		08 (	)		09 🔾	10 0
	The availability of	of ca	re f	or (	the h	our	<b>3</b> y	ou	ne	ed i	t			19	0		12	0		13 (			14 ()	15 🔾
	The quality of for	od s	ervi	ed										10	0		17	0		18 (			10 (	20 🔾
	Cleanliness and	safe	ety											21	0		22	0		23 (			24 ()	25 (
	The number of ci	hild	ren	pre	sent									26	0		27	0		28 (			29 🔘	30 🔾
	The number of pi	layn	nate	s/fr	ilend	is to	ог у	our	ch	ild				31	0		32	0		33 (			34 🔾	35 🔾
	The number of	time	. y	/ou	r ca	reg	IVe	r ha	8 5	be	en									'n				
	unavailable													36	_			0		38 (			39 🔾	40 ()
	The caregiver's tr													41	0		42	0		43 (			40	45 🔾
	The caregiver's swith children	B 86.2 (14)	3 20	id i	вхре	rier	ice	in	wo	rkl	ng			46	0		47	0		48 (			0	50 🔾
	The caregiver's s	ens	itivi	ty t	o yo	ur c	hik	d's	ne	eds				51	0		52	0		53 (			54 ()	55 🔘
	Communication b	Hetw	reen	yo	u an	d tr	10 (	care	ngin	rer,				56	0		57	0		58 (			59 🔾	eo O
	The caregiver's a	ppri	paci	h to	disc	cipii	ine							61(	0		6.2	0	4	63 (			e4 O	95 🔾
	The quality of the	10 i	ndo	or	play	sp.	ABC.	e u	5.0	d f	10									Н				
	your child													96 (			87			44 (			•• 0	70 🔾
	The available indo													716			72	0		73 (			74 🔾	75 ()
	The outdoor play													76 (	0		77	0		78 (			79 ()	•• ○
	The amount of tel													81(	0		82	0		83 (			40	85 🔾
•	The variety of act during the day	tiviti	es	you	ir ch	ild	is	invo	ivi	d	in			86 (	0		87	0		н (			19 ()	90 🔘
7	The caregiver's s re/she is playing i	upe	rvis	lon	of	you	IF (	chile	d v	whe	n			/				_						
_													_	91(			921			93 (			94 🔾	95 🔾
a	s there anything strangement?	#13	- y	bu	wou	ו סוו	1 lice	to	te	il n	710	ab	out	th	at y	ou	are	partic	ulari	y sat	isfled	wit	h about thi	is care
1	'es ¹○ → ¥	Vha	t is	117																				
P	10 20					1							i			i	-			,				
58. 1:	there anything e	130	tha	t yo	ou ar	e p	arti	cul	arh	di	552	tis	fied	w	th?	0								
Y	es 3 0 W	Vhal	l in i	17																				
						I						I	T	I	I			II						

O69. (Ask if not known) Are you paying for the main care arrangement that you used for the week of (reference week)?	Q75. When you made this main care arrangement fordid you consider using a daycare centre?
Yes 10	Yes 1 O Why did you decide not to use a daycare centra?
No 20 Go to Q117 (p. 78)	
Q70. Suppose the cost of this care arrangement was to increase. Which of the following categories best describes by how much it would have to increase before you would start looking for another care arrangement for?	
By 0%, you can't afford any increase 10	OR Go
By 25% 4 O	Respondent is using a formal daycare centre as a Q77 secondary arrangement for 3 O
By 100% 5 ○	No 2 O Why didn't you consider having attend a daycare centre?
	No reason 4 O
OR You wouldn't consider looking	OR
for another child care arrangement even if the cost more than doubled	
Q71. Which of the following categories best describes by how much it would have to increase before you would quit your job (or schooling)?	
By 0%, you can't afford any increase	Q78. When you made this main care arrangement for dld you consider using a before or after school program?
By 25% 2 O	
By 50%	Yee 5 O
By 100%	
OR You wouldn't consider	
quitting your job (or schooling) even if the cost more than doubled	OR
CARE IN OWN HOME BY A NON-RELATIVE	Respondent is using a before or after school program as a secondary arrangement for
Q72. When did you most recently begin to use this caregiver as your main care arrangement for ?	No 8
Month Year	No reason
Q73. When you first considered using this person as 's caregiver how well did you know him/her? Was	
he/she	
not known to you at all? 3 O	Q77. In many parts of Canada, an option available to parents is to use an individual, who is itemed by the provincial government or approved by a daycare agency, to provide care in his/her home. Have you heard of licenced family home daycare?
O74. INTERVIEWER CHECK ITEM:  If age of target child is less than 5 4 Go to Q75	Yes 1○ → Go to 079
Otherwise	No 2O

794	
些	

<u>- 7</u>	71 -
Q78. If you had known about licenced family home daycare would you have considered using it when you made this last main care arrangement for?	O82. What are the main reasons you chose this particular caregiver for ?
you made and less man determined for	
Yes 30 )	
Go to Q80	
No 40	2.
070 014	
Q79. Did you consider using a licenced family home daycare provider when you made this last main care	
arrangement for?	
Yes 'O Why did you decide not to use a	3.
licenced family home daycare	
provider?	
	Q83. Did you have to search for this care arrangement for or did you know right away what arrangement you
	would use?
	Yes, looked around 1 O
OR	No. arrangement aiready
Bases deed to the format death	existed for other child(ren) or search not required 20 — Go to Q87
Respondent is using a licenced family home daycare provider as a secondary	
arrangement for 3Q	Q84. What sources of Information did you use when
No 20 - Why didn't you consider using a	searching for this care arrangement for? (Mark all that apply)
licenced family home daycare provider for?	
No reason 4O	Friends, nekyllickors, on-workers 91 C
OR	
	Helatives
	Previous caregivers 03 O
Q80. Some parents rely on a relative to provide much of	
their child care. Did you consider using care by a relative (other than your spouse or an older child) when you made your last main care arrangement for?	Referrals from professionals (eg. doctors, psychologists)
Yes 50 Why did you decide not to use care by	
a relative?	Bulletin boards, newspapers 05 O
	Anna de la
	Pamphiets and books
OR	
	A daycare centre
Respondent is using care by a relative as a secondary care arrangement for	
No <sup>6</sup> ○ → Why didn't you consider using care by a relative for?	A daycare information service 08 O
No reason	
OR	A family home daycare agency 09 O
	A community centre (e.g
One What are the party	
Q81. What are the main reasons you decided that , , . should be cared for by a sitter or a nanny in your	A church, ethnic or religious
home?	organization
	A school or school hears 12 O
	A school or school beard
2.	Other (specify)
3.	

				Yes	No	Not Applicable
	Knowing where to get information about available child care 2.	**** ** *************		010	<b>02</b> ()	83 🔾
	Finding good quality caregivers?	******************		0	05O	∞ O
	Knowing what to look for to ensure good quality care for your	child?		70	080	· O
	Finding out about available caregivers?	************	17744000000	•0	110	12 🔾
	Visiting homes or daycare centres during the day?	************	***************************************	30	140	10 0
	Did you have any difficulties in finding care for the hours you r	needed It7	***************************	•0	170	18 🔾
	How about having lew or no options to choose from?	***************************************		•0	200	21 ()
	Not having enough time to consider alternatives?	F74:040.40aaa.00.y.4		20	20	24 🔾
	Finding good quality care that you could afford?			15 (	28()	27 🔾
	Trusting someone you didn't know to care for your child?	**************		m ()	27()	30 🔾
	Yes 1 O What were they?					
187.	No 2O	M was each	of the follows	no taci	tors 2 W/r	as if uspy is
287.	No 20 When deciding on's child care arrangement how importate portant, somewhat important, or not important that	nt was each Very Important	of the fellowi	Not	tors? Wa	as it very it Not Applicable
987.	No 20 When deciding on's child care arrangement how importate	Very	Somewhat	Not	ortant	Not
	No 20 When deciding on's child care arrangement how importate portant, somewhat important, or not important that	Very Important	Somewhat Important	Not	ortant	Not Applicable
	No 20 When deciding on 's child care arrangement how important portant, somewhat important, or not important that  The caregiver provide care in your home?  The caregiver or arrangement accommodate more than	Very Important 01 O	Somewhat important oz O	Not impo	ortant	Not Applicable 04()
	When deciding on 's child care arrangement how important portant, somewhat important, or not important that  The caregiver provide care in your home?  The caregiver or arrangement accommodate more than one child in your family?	Very Important e1 O	Somewhat important oz O	Not impo	ortant O	Not Applicable or Or
	When deciding on 's child care arrangement how important portant, somewhat important, or not important that  The caregiver provide care in your home?  The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?	Very Important of O	Somewhat important oz O	Not impo as (	ortant O	Not Applicable of O
	When deciding on 's child care arrangement how important portant, somewhat important, or not important that  The caregiver provide care in your home?  The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?	Very Important of O	Somewhat important 02 0	Not impo as ( a7 ( 11 (	ortant O	Not Applicable of O
988.	When deciding on 's child care arrangement how important portant, somewhat important, or not important that  The caregiver provide care in your home?  The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The care arrangement was subsidized?	Very important of 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Somewhat important oz O	Not impo as (	ortant	Not Applicable of O
288.	When deciding on 's child care arrangement how important portant, somewhat important, or not important that  The caregiver provide care in your home?  The caregiver or arrangement accommodate more than one child in your family?  The caregiver or arrangement would provide care when your child is sick?  The caregiver would give you receipts?  The care arrangement was subsidized?  The caregiver/arrangement have a similar language or cultural background to your own?  Different methods of child care can affect children in diff. Considering the main care arrangement you used for the any specific positive effects on him/her?	Very important of 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Somewhat important oz O	Not impo as (	ortant	Not Applicable of O

Q89.	Has this arrangement had any specific negative effect	s on?				
	Yes 5 O What are these effects?					
	1.					
	2					
	3. No 6 O					
Q90.	How satisfied are you with your main care arrangemental you are very satisfied, somewhat satisfied, somewhat satisfied, somewhat satisfied, somewhat satisfied are your satisfied.					ou say
		Very Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Very Dissatisfied	N/A
	The cost of the care	010	02 🔾	03 🔾	04 🔘	05 🔾
	The availability of care for the hours you need it	<b>∞</b> ○	07 🔾	OH ()	oo 🔿	100
	The availability of playmates/friends for your child	110	120	13 🔾	14 ()	15 🔾
	The number of times your caregiver has been unavailable	180	170	16 🔾	19 🔾	20 🔾
	The caregiver's training related to child care,	210	20	23 🔾	24 🔾	25 🔾
	The caregiver's skills and experience in working with children	260	27 🔾	28 🔾	29 🔾	30 🔾
	The caregiver's sensitivity to your child's needs	310	22 🔾	72 🔾	и О	35 🔾
	Communication between you and the caregiver	<b>26</b> 0	37 🔾	4 20 0	39 🔾	40 ()
	The caregiver's approach to discipline	410	420	43 🔾	40	45 🔾
	The amount of television watched	40	47 🔾	44 ()	40 🔾	50 🔾
	The variety of activities your child is involved in during the day	510	520	20 🔾	54 ()	55 🔾
	The caregiver's supervision of your child when he/she is playing outside	<b>4</b> 0	57 🔾	54 🔾	59 🔿	60 🔿
Q91.	Is there anything else you would like to tell me a arrangement?	bout that yo	u are partic	ularly satisfied	d with about t	his care
	Yes 1 0 — What Is it? No 2 0					
092	Is there anything else that you are particularly dissat	Istied with?				
	Yes 3 O What is it?					
	No 40					

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•	/4 -
O93. (Ask if not known) Are you paying for the main care arrangement that you used for the week of (reference week)?	Q99. When you made this main care arrangement for did you consider using a daycare centre?
Yes 10	Yes 1 > Why did you decide not to use a daycare centre?
4 <b>44</b> 10	
No 20 Go to 0117 (p. 78)	
Q94. Suppose the cost of this care arrangement was to	
increase. Which of the following categories best describes by how much it would have to increase before you would start looking for another care	
arrangement for?	OR
By 0%, you can't afford any increase	Respondent is using a daycare centre as a secondary arrangement for 3 Go
By 25%	No 2○ → Why didn't you consider having attend a daycare
8y 50% 5 O	centre?
By 100%	No reason
OR	
You wouldn't consider looking	
for another child care	
more than doubled	
G95. Which of the following categories best describes by how much it would have to increase before you would gult your job (or schooling)?	Q100. When you made this main care arrangement for did you consider using a before or after school program?
Pr. Off. who does affect an	Yes 5 0 Why did you decide not to use
By 0%, you can't afford any increase	before or after school program?
By 25% 2 🔾	
By 50%	
By 100% 40 Go lo	OR Bernandest is using a hoters or att
(p. 78)	Respondent is using a before or aft school program as a secondar arrangement for
OR	
You wouldn't consider quitting your job (or	No <sup>4</sup> ○ → Why didn't you consider using a before or after school program for?
schooling) even if the cost more than doubled 5	
	No reason ♦ 〇
	OR
CARE BY RELATIVES	
Q96. When did you most recently begin to use this as your main care arrangement for ?	
Month Year	
	Q101, in many parts of Canada, an option available to parents is to use an individual, who is licenced by
O97. At that time did you consider using any other type of care arrangement for ?	the provincial povernment or approved by a daycar
	Ves 10 - Go to 0103
Yes 10	Action 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
No 3○ Go to €105	No 2O
30 10 9 103	Q102 If you had known about licenced family hom
098. INTERVIEWER CHECK ITEM:	daycare would you have considered using it whe you made this last main care arrangement for?
e If age of target child is less than 5 3 Go to 099	Yes 30
	No. 40 Go to Q104

Q103. Did you co daycare pro arrangemen	insider using a licenced family home wider when you made this last main care it for?	O105. What are the main reasons you decided to have (you care for
Yes 10 -	Why did you decide not to use a licenced family home daycare provider?	care for him/herself) as opposed to some other arrangement?  This relative was available 1
		or/and (Specify reason) 2 O
La Contract		
	OR	2.
	Respondent is using a licenced family	
	home daycare provider as a secondary arrangement for	3
The state of		,
No 20-	Why didn't you consider using a licenced family home daycare provider	Q106. Did you have to look around when you were making
	for?	this main care arrangement for or did you know right away what arrangement you would use?
	No reason	
	OR	Yes, looked around
		No. no search required 4 O Go to Q110
		Q107. What sources of information did you use when you were last searching for a care arrangement for?
		(Mark all that apply)
O104 Mague sassa		Friends, neighbours, co-workers 01 🔾
or in the sit	nts use care provided by a paid lend or neighbour either in their home ter's home. When you made this last trangement for did you consider	Relatives 02 🔾
using a sitter		Previous caregivers
Yes 50 —	Why did you decide not to use care by a sitter?	Referrals from professionals (eg. doctors, psychologists)
		Bulletin boards, newspapers 05 🔘
		Pamphlets and books 06 〇
		A daycare centre
	OR	A daycare information service 06 🔿
	Respondent is using a sitter as a secondary care arrangement for	A family home daycare agency 06 〇
No #0 -	Why didn't you consider using a sitter to care for?	A community centre (e.g. YWCAYMCA)
	No reason	A church, ethnic or religious organization
	OR	A school or school board 12 🔾
		Other (specify):::::::::::::::::::::::::::::::

Q108. Did you experience any of the following difficulties w	rhen you were looking	ng for this care	errangement	for?						
			res No	Not Applicable						
Knowing where to get information about available ch	ildcare t		10 00	<b>83</b> O						
Finding good quality caregivers?	***************************************	4	40 %0	os ()						
Knowing what to look for to ensure good quality care	for your child?		70 000	on ()						
Finding out about available caregivers?	***************************************		0 10	12 0						
Visiting homes or daycare centres during the day2			30 140	15 🔿						
Did you have any difficulties in finding care for the h	ours you needed It?	1	•0 170	140						
How about having few or no options to choose from?			00 200	21 ()						
Not having enough time to consider alternatives?	*****************************		20 20	24 ()						
Finding good quality care that you could afford?	••••••		50 280	27 ()						
Trusting someone you didn't know to care for your cl	hild?		*O **O	20 🔾						
No 2 O										
	If Q2 (page 58) = 05 (care in someone else's home by a relative) 3									
• If Q2 (page 58) = 11 (care in own home by other re	elative) 4 O Go	10 0113								
Otherwise	5 Q Go	to Q117								
Q111. When deciding on 's child care arrangement ho important, somewhat important, or not important that	w important was ea	ich of the folio	owing factors	? Was It very						
	Very Important	Somewhat Important	Not Important	Not Applicable						
The caregiver provide care in your home?	010	<b>«</b> O	00C	940						
The caregiver or arrangement accommodate more one child in your family?	than os 🔾	on ()	070	080						
The caregiver or arrangement would provide care your child is sick?	when	•••	110	130						
The caregiver would give you receipts?	:0	40	·•C	.40						
The care arrangement was subsidized?		*0	180	20()						
The caregiver/arrangement have a similar language cultural background to your own?	21 O	20	230	240						

	Very Satisfied	Somewhat Sabsfied	Somewhat Dissatisfied	Very Dissatisfied	N
The convenience of the location	010	02 🔾	as ()	04 ()	05
The cost of care	000	07 🔾	00 🔘	00 🔾	10
The availability of care for the hours you need it	110	120	13 🔘	14 ()	15
The number of children present	16 🔾	170	18 🔘	19 🔾	20
The availability of playmates/friends for your child	210	22 🔾	23 🔾	24 🔾	25
The number of times your caregiver has been unavailable	26 ( )	27 🔘	29 ()	29 🔿	30
The caregiver's sensitivity to your child's needs	310	32 ()	33 O	34 ()	35
The ease of discussing things you would like			Tolkins		
your relative to do differently	34 🔾	37 🔾	34 🔾	39 🔾	40
The caregiver's approach to discipline	410	420	40	44 ()	4
The quality of the indoor play space used for child care.	40	47 🔾	44 ()	49 🔾	5
The available indoor toys, materials and equipment	510	520	23 🔾	54 ()	5
The outdoor play space, toys and equipment	56 🔾	57 🔾	58 🔘	59 🔘	
The variety of activities your child is involved in during the day	*10	620	83 ()	40	6
The amount of television watched	•••	67 🔾	84 O	•• ○	7
The caregiver's supervision of your child when he/she is playing outside	710	72()	n ()	74 🔾	,
GO TO Q114			1		
. How satisfied are you with your main care arranger that you are very satisfied, somewhat satisfied are your satisfied.					you
	Very Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Very Dissabsfied	
The cost of the care	010	02 ()	ω O	04 🔾	1
The availability of care for the hours you need it	0#O	07 🔾	OB ()	00 🔾	
The availability of playmates/friends for your child	110	120	13 🔾	14 0	
The number of times your caregiver has been unavailable	160	170	18 🔾	19 🔾	
The ease of communication between you and the caregiver about things you would like him/her to do differently	2:O	22 ()	22 ()	24 ()	
The caregiver's approach to discipline	290	27 🔾	28 🔾	29 🔾	
The variety of activities your child is involved in					
during the day	310	32 🔾	23 🔾	34 🔾	

Q114	L (Ask if not known) Are you paying for the main cayou used for the week of <u>(re</u> )			7
1	Yes 10		Yes 3O	
	No 20 Go to 0117		No 4○ → Go to SECTION S	
Q115	Suppose the cost of this care increase. Which of the follow describes by how much it wou before you would start lookin arrangement for?	ing categories best ald have to increase	t O115. What are the reasons you have decided to use	e this
	By 0%, you can't afford any increase	30		No
	By 25%	40	Yes	No
	By 50%	50	To cover the hours you work/study 010	02 🔾
	By 100%	•0	To reduce the costs of care 03 🔾	04 ()
	OR		To give your child a mix of experiences	06 ()
2.	You wouldn't consider looking for another child care arrangement even if the cost more than doubled	70	Because a relative/spouse/sibling is available part of the time	o# ()
0116	. Which of the following categoris how much it would have to i would quit your job (or schooling)	ncrease before you		10 0
1	By 0%, you can't afford any increase	10	What is this reason?	
	By 25%	20	·	
1	By 50%	30		
	By 100%	40		
	OR You wouldn't consider quitting your job (or		Q120. Have you experienced either of the folio problems while daing this combinatio arrangements for?	
	schooling) even if the cost more than doubled	10	Yes No	
	COMBINATION ARRANGEMEN	TS	Frequent breakdown in arrangements and rejuggling 10 20	
Q117.	in addition to the main care a used for the week of <u>(refer</u> use any other arrangement to a study?	rence week) did you	Go n SEC Sifficulties in ar- ranging transport-	TION
	Yes 10		ation between child care arrangements 30 40	
	No PO - Go to SECTIO	ON S		

_												
R.	TENSION ISSUES FOR NON-WORKING DESIGNA	TED A	DUL.	rs	D.	00	W)	1				
R1.	INTERVIEWER CHECK ITEM: (Form 05 for Designated Ac	dult)		110								
	• If "no" in Item 30 1 O Gc to R2											
_	Otherwise											
R2.	Juggling homemaking responsibilities and your own life can be a difficult task. Current social attitudes towho are not working at a job for pay. Given your tension or discomfort you feel about each of the folio and 10 means a great deal of tension.	wards e current wing, P	mplo	ymen	t can	also l	be a :	ourc	e of to	ensiq dicat mear	e how n	nuch ision
		No Tensi	on								A Great Deal of Tension	N/A
	Not having enough time for yourself	0	000	03	00	05	0	07	06	30 O	°	000
	Having to do without things for your children that you could afford if you were employed	00	03	30	30	08	0 00	07	06	09	10	00
	Having the major responsibility for child rearing and care in your family	00	02	03	30	05	06	07	00	00	10	80
	Feeling isolated from other adults during the day	:0	02	90	30	os O	80	07	040	39	°°	× 0
	Dealing with social attitudes that seem to value income over full-time parenting	00	02	30	30	85 O	04 O	07	06	00	°°°	00
	Feeling concerned about finding a job at a future time	0:0	80	30	0.8	80	œ O	07	06	80	.0	80
	Feeling that your job or career is being hampered by family responsibilities	50	02	03	30	80	80	300	08	29		0 % (
	Feeling that your child(ren) is(are) too dependent on you	0	92 O	000	30	80	80	° C	80	30	999	×
12	Is there any other factor that is causing tension for y		_	_	_	_		_				
	Ves 3 ○ → What is it?							7				
34.			-10-	4.			_					
	Taking everything into consideration, overall, how muthe same 10 point scale as before.	uch ten	sion	ao ye				un'er	it situ	ation	7 Please	use
	No Tension				0	Great leaf of ension	ŀ					
	01 02 03 04 05	08	07	08	06	10	•					
-	00000	0	0	0	0	0						
5.	In your current situation of being at home with your tension or discomfort that you might otherwise feel if 10 where 1 means the factor does not reduce tensi	VOU W	ere ir	the.	paid I	about	f forc	a? Pl		1188 8	scale o	f 1 to
	great deal.	Does									leduces	N/A
		reduc	8		3					te	ension a	
	Knowing on a first hand basis how your child spends his/her day and being there if he/she needs or wants you	0.0	0.88	90	3 C	80	06 O	07	80	80	.0	00
	Feeling that you are being a good parent	:0	02	03	30	80	80	07	80	200	0 ; 0	80
	Being able to be involved in parent groups or	01	05	03	04	05	06	07	08	29	10	20
	neighbourhood activities	0	02	03	0	05	06	07	08	09	:0	00
	Not having to deal with unpleasant work situations	0	0	0	0	0	0	0	0	0	0	0
	Baing the primary lafturence to the control of	. 01	02	23	04	35	06	C7	38	29	.0	30
	Being the primary Influence in your child's development	0	0	0	0	0	0	0	0	0	0	0
6.	Are there any other factors that help reduce tension of	0			O conu			on to			0	-
6.	development	0			O c			on to			0	-



	12-MONTH WORK STUDY PROGRAM					
	The next questions are about your family's work activities during the past 12 months, that is from October 1987 s September 1988.					
\$1.	During the 12 month period from October 1987 to September 1988 did you work at a job or business for at least or month?					
	Yes 1 O					
	No 2○ → Go to S4					
\$2	During those 12 months, in how many weeks did you work at a job or business?  Weeks					
51	Was your work in that period entirely full-time, entirely pert-time, or some of each? By full-time I mean 30 hou or more a week?					
	Entirety full-time 3 O					
	Entirely part-time 4O					
	Some of each 10					
S4.	During the 12 month period from October 1987 to September 1988, did you attend a school, college or university a full-time student for at least one month?  Yes 6					
	No 7O					
S4.	INTERVIEWER:  Does the designated adult have a spouse living in the household?					
	Yes ®O					
	No 9O Go to \$10					
56.	During the 12 month period from October 1987 to September 1988 did your spouse/partner work at a job for at least one month?					
	Yes 1 O					
	No 2O Go to 59					
57.	During those 12 months, in how many weeks did he/she work at a job or business?					
	Weeks					
SA.	Was his/her work in that period entirely full-time, entirely part-time or some of each? By full-time I mean hours or more a week?					
	Entirety full-time 3 O					
	Entirely part-time 4 O					
	Entirely part-time 4 O  Some of each 5 O					
59.						
59.	Some of each 5 O  During the 12 month period from October 1987 to September 1988, did he/she attend school, coilege or university.					
5.9.	Some of each 5 O  During the 12 month period from October 1987 to September 1988, did he/she attend school, college or universes a full-time student for at least one month?					
	Some of each SO  During the 12 month period from October 1987 to September 1988, did he/she attend school, college or university as a full-time student for at least one month?  Yes 4O					
	Some of each \$ \infty \text{During the 12 month period from October 1987 to September 1988, did he/she attend school, college or universe as a full-time student for at least one month?  Yes \$ \infty \text{NO 7 \infty} \text{INTERVIEWER CHECK   TEM: (Form 06)} \text{INTERVIEWER CHECK   TEM: (Form 06)} INTERVIEWER IN S1					
	Some of each 5 O  During the 12 month period from October 1987 to September 1988, did he/she attend school, college or university as a full-time student for at least one month?  Yes 4 O  No 7 O  INTERVIEWER CHECK ITEM: (Form 06)  If "Yes" in S1 1 O Go to S72  If "Yes" in S4 2 O Go to S74					
\$10.	Some of each 5 O  During the 12 month period from October 1987 to September 1988, did he/she attend school, college or universe as a full-time student for at least one month?  Yes 6 O  No 7 O  INTERVIEWER CHECK ITEM: (Form 06)  If "Yes" in S1					
\$10.	Some of each 5 O  During the 12 month period from October 1987 to September 1988, did he/she attend school, coilege or universals a full-time student for at least one month?  Yes 6 O  No 7 O  INTERVIEWER CHECK ITEM: (Form 06)  If "Yes" in S1					
\$10.	Some of each 5 ©  During the 12 month period from October 1987 to September 1988, did he/she attend school, coilege or universal a full-time student for at least one month?  Yes 6 ©  No 7 ©  INTERVIEWER CHECK ITEM: (Form 06)  If "Yes" in S1					

\$12	INTERVIEWER:
312	INI EVALENCE.
	M teams and has an about
	If target child has not already been introduced read the introduction below if there is more than one child.
	We have randomly selected one of your children, , and I'd like to ask you some questions about
	how's child care arrangements have affected your work over the past 12 months.
19	Parameter 10
13.	During the 12 month period from October 1987 to September 1988, approximately?
L.	
,	low many days of work did you miss because was ill.
H	low many days of work did you miss because your child care arrangements for fell through
H	low many times were you late for work because was #
H	ow many times were you late for work because your child care arrangements for fell through
	that you sale for work because your child care arrangements for fell through
H	ow many times did you have to leave work suddenly because was iti
H	ow many times did you have to leave work suddenly because your child care arrangements for
74	all through
	GO TO SECTION
	NTERVIEWER:  Ne have randomly selected one of your children,
	Ne have randomly selected one of your children, ,
	Ne have randomly selected one of your children, ,
	Ne have randomly selected one of your children, ,
	Ne have randomly selected one of your children, ,
	We have randomly selected one of your children ,
	We have randomly selected one of your children ,
	We have randomly selected one of your children ,
	We have randomly selected one of your children ,
	We have randomly selected one of your children ,
	We have randomly selected one of your children
	We have randomly selected one of your children,
	We have randomly selected one of your children
	We have randomly selected one of your children,
	We have randomly selected one of your children,
	We have randomly selected one of your children,
	We have randomly selected one of your children,
	We have randomly selected one of your children,
	We have randomly selected one of your children

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I						
	The next questions are about the main method(s) of care you used for during the 12 month period from October 1987 to September 1988. We're only interested in care arrangements you used for one	76.	Was this caregiver licenced or approved by a familihome daycare agency?			
	month or longer.		Yes •O			
			No 7O			
T1.	I'd like you to think back to the first main care arrangement you used for for one month or					
	longer since October 1987. Please include periods of		Don't know # O			
1	time for which you or your spouse were the main care provider or was in his/her own care. Do not					
	include school as a care arrangement. Was this first care arrangement the same one you used for	T7.	When did you start using this care arrangement to			
	during (reference week)?					
	Yes 1 O		Magneth Year			
	No 2 O Go to 73	T&	When did you stop using this care arrangement for			
T2.			1			
	then until (reference week), that is, with no breaks of more than a month?					
			Month Yeer			
	Yes 3 O Go to SECTION U (p. 88)	TS.	What was the main reason you stopped using this			
	No 40		your main care arrangement for? [Mark only one)			
T3.	Since October 1987, which of the following was the					
	first main method of care you used for for a month or longer? (Mark only one)		Caregiver program no longer available 1 O			
			Dissatisfied with caregiver program 2 O			
	A daycare centre 010		OR			
	A before or after school program 020		Other (Specify one reason)			
	A pre-kindergarten, junior					
	kindergarten, or nursery school program 02					
	A special summer program 04 O Go to					
		T10. When was in this arrangement what was main activity?				
	You took care of 050					
	Your spouse took care of 040					
			(Mark only one) *			
	An older brother/sixter took care of 07		Working at a full-time job or business 1 O			
			Working at a part-time job or business 2 O			
	took care of himself/herself 080		Full-time student			
	A babysitter, nanny or relative took care of					
			Part-time student			
	was in some other type of care 10O		Canng for family's needs			
	Specify		Without work and looking for work 6 O			
			Other (specify)			
-		-				
T4.	Was this care given in your own home, in someone else's home, or somewhere else altogether?					
	in own home					
	Someone else 3 home 20 T1 Somewhere else 30					
			INTERVIEWER			
			Does Designated Adult have a spouse living in household?			
15.	Was this care given by a relative?					
	Yes 4 O Go to 77		Yes ' O			
	No 50		No 2 0 Go 10 T13			

T12. What was your spouse's/partner's main activity when	Ter Was Mile and a
was in this care arrangement? (Mark only one)	
Working at a full time in a full time.	Yes 4O Go to 719
Working at a full-time job or business 1 O	No 10
Working at a part-time job or business 2 O	T18. Was this caregiver licenced or approved by a family
Full-time student	home daycare agency?
Part-time student 4 0	Yes 4 🔾
Canng for family's needs	No 7 🔿
Without work and looking for work 6 O	Don't know # O
Other (specify) ? 〇	
	T19. When did you start using this care arrangement for?
T13 Was the next main and	Month Year
T13. Was the next main care arrangement you used for the same as the one you used for him/her during the week of {reference week}?	T20. When did you stop using this care arrangement to?
Yes 1 O	
	Month Year
No <sup>2</sup> ○ — Go to 715	T21. What was the main reason you stopped using this a your main care arrangement for?
T14. Have you used this arrangement continuously from then until (reference week), that is, with no breaks of more than a month?	(Mark only one)
	Caregiver:program no longer available 1
Yes 3 O Go to SECTION U (p. 88)	Dissatisfied with caregiver program 2 O
No 40	OR
T15. What is the next main method of care you used for for a month or longer? (Mark only one)	Other (Specify one reason) 3 O
A daycare centre	
A before or after school program 02 O	
A pre-kindergarten, junior	
kindergarten, or nursery school program 030	T22. When was in this arrangement what was your main activity?
4	(Mark only one)
A special summer program	Working at a full-time job or business 1 O
You took care of	Working at a part-time job or business 2 O
Your spouse took care of	Full-time student
An older brother-sister	Part-time student
took care of	Caring for family's needs
took care of himself-herself 08 🔾	Without work and looking for work 4 O
A babysitter, nanny or relative took care of	
was in some other type of care 190	Other (specify) 7 O
Specify	
	T23. INTERVIEWER:
16. Was this care given in your own home, in someone	Does Designated Adult have a spouse living in the
else's home, or somewhere else altogether?	household?
Someone else's home	Yes ¹ O
Somewhere eise 3O	No 2 O Gc to 725

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T24. What was your spouse's partner's main activity when was in this care arrangement?	T29. Was this care given by a relative?
(Mark only one)	Yes 4O Go to 731
Working at a full-time job or business 1 O	0 000131
Working at a part-time job or business 2 O	No sO
Full-time student	T30. Was this caregiver licenced or approved by a family home daycare agency?
	Yes •O
Part-time student	165
Caring for family's needs	No 7O
Without work and looking for work 6 O	Don't know #O
Other (specify) 7 O	T31. When did you start using this care arrangement for
	7
T25. Was the next main care arrangement you used for	Month Year
the same as the one you used for him/her during the week of (reference week)?	T32. When did you stop using this care arrangement for?
Yes 1 O	
	Month Year
No <sup>2</sup> ○ → Go to 727	T33. What was the main reason you stopped using this as your main care arrangement for?
726. Have you used this arrangement continuously from then until (reference week), that is, with no breaks of more than a month?	(Marx only one)
	Caregiver/program no longer available 1 O
Yes 3 Go to SECTION U (p. 88)	Dissatisfied with caregiver program 2 O
<sup>8</sup> No 4O	OR
T27. What is the next main method of care you used for for a month or longer? (Mark only one)	Other (Specify one reason) 3 〇
A daycare centre	
A before or after school program, ©	
A pre-kindergarten, junior kindergarten, or nursery school	T34. When was in this arrangement what was your
program as O	main activity?  (Mark only one)
A special summer program	Working at a full-time job or business 1 O
You took care of	Working at a part-time job or business 2 O
Your spouse took care of	Full-time student
An older brother sister	
took care of	Part-time student
took care of himself herself 04 O	Canng for family's needs 5 O
A babysitter, nanny or relative took	Without work and looking for work 6 O
care of	Other (specify) 7 🔘
was in some other type of care 190	
Specify	
	T3S. INTERVIEWER:
T28. Was this care given in your own home, in someone else's home, or somewhere else altogether?	Does Designated Adult have a spouse living in the household?
In own hame	-caseriou:
Someone eise s home . 2 O	Yes ' O

T36. What was your spouse's/partner's main activity when was in this care arrangement? (Mark only one)	T41. Was this care given by a relative?
	Yes 4 O Go to 743
Working at a full-time job or business 1 O	
Working at a part-time job or business 2 O	No SO
Full-time student	T42. Was this caregiver ticenced or approved by a family home daycare agency?
Part-time student 4 O	Yes •O
Caring for family's needs	No 70
Without work and looking for work 6 O	Don't know # O
Other (specify) 7 〇	T43. When did you start using this care arrangement for
	?
	Month Year
T37. Was the next main care arrangement you used for the same as the one you used for him/her during the week of (reference week)?	T44. When did you stop using this care arrangement for?
Yes 1 O	Month Year
No 2 O Go to 739	T45. What was the main reason you stopped using this as
T38. Have you used this arrangement continuously from then until {reference week}, that is, with no breaks of more than a month?	your main care arrangement for? (Mark only one)
Yes 3 O Go to SECTION U (p. 88)	Caregiver program no longer available 1 O
No 4O	Dissatisfied with caregiver program 2 O
T39. What is the next main method of care you used for	OR -
Tot a month or longer? (Mark only one)	Other (Specify one reason)
A daycare centre	
A before or after school program 62	
A pre-kindergarten, junior kindergarten, or nursery school program	T46. When was in this arrangement what was your main activity?
A special summer program, ea O Go	(Mark only one)
You took care of	Working at a full-time job or business 1 O
Your spouse took care of os 🔾	Working at a part-time job or business 2 O
An older brother sister	Full-time student
took care of	Part-time student
took care of himself-herself 080	Canng for family's needs 5 🔾
A babysitter, nanny or relative took care of	Without work and looking for work 6 O
	Other (specify) 1 🔘
was in some other type of care 10 O Specify	
	T47. INTERVIEWER:
T40. Was this care given in your own home, in someone else's home, or somewhere else altogether?	Does Designated Adult have a spouse living in the household?
In own home	THE RESERVE OF THE PARTY OF THE
Someone else's home 2 O	Yes ¹ 🔘
Somewhere else 3 O	No 2 O Go to 749

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T48	What was your spouse's/partner's main activity when was in this care arrangement?	T53. Was this care given by a relative?
	(Mark only one)	Yes 4Q Go to 755
	Working at a full-time job or business 1 O	No 8O
1	Worlung at a part-time job or business 2 O	
	Full-time student	T54. Was this caregiver licenced or approved by a family home daycare agency?
	Part-time student	Yes • O
	Caring for family's needs	No ¹O
	Without work and looking for work	Don't know # O
	Other (specify)	TSS. When did you start using this care arrangement for?
T49	. Was the next main care arrangement you used for	Month Year
5	the same as the one you used for him/her during the week of (reference week)?	T56. When did you stop using this care arrangement for?
2	Yes ! O	Marrier Vaer
	****	
-	No 2 O Go to 751	T57. What was the main reason you stopped using this as your main care arrangement for?
150.	Have you used this arrangement continuously from then until (reference week), that is, with no breaks of more than a month?	(Mark only one)
	Yes 3 O Go to SECTION U (p. 88)	Caregiver/program no longer available 1 O
0.5		Dissatisfied with caregiver program 2 O
-	No 4O	OR
T51.	What is the next main method of care you used for for a month or longer? (Mark only one)	Other (Specify one reason) 3 〇
170	A daycare centre 010	
	A before or after school program . 02 🔾	
	A pre-kindergarten, junior	
	kindergarten, or nursery school program as O	T58. When was in this arrangement what was your main activity?  (Mark only one)
3	A special summer program 04O Go	Working at a fulf-time job or business 1 O
	You took care of	Working at a part-time job or business 2 O
	Your spouse took care of oe 🔾	Full-time student 3 O
	An older brother-sister	Part-time student 4 O
	took care of	Canng for family's needs
	took care of himself/herself 060	Without work and looking for work 4 O
	A babysiter, nanny or relative took care of	Other (specify) 7 O
1	was in some other type of care 10 O	
	Specify	
		T59. INTERVIEWER:
T52.	Was this care given in your own home, in someone else's home, or somewhere else altogether?	Does Designated Adult have a spouse living in the household?
1	in own home	I AMOUNT OF THE PROPERTY OF TH
	Someone etse's home	Yes ¹ 〇
	Somewhere else 3 O	No 2 ○ — Go to 7€1
		10 - 00 10 161

T60. What was your spouse's/partner's main activity when	
was in this care arrangement? (Mark only one)	nome daycare agency?
Working at a full-time job or business 1 O	Yes 4O
Working at a part-time job or business 2 O	Don't know # O
	T67. When did you start using this care arrangement for
Full-time student	?
Part-time student	Month Year
Canng for family's needs 5 〇	T68. When did you stop using this care arrangement for?
Without work and looking for work # O	
Other (specify) 7 〇	T69. What was the main reason you stopped using this as
	your main care arrangement for ? (Mark only one)
	Caregiver/program no longer available 1 O
T51. Was the next main care arrangement you used for the same as the one you used for him/her during the	Dissatisfied with caregiver/program 2 O
week of (reference week)?	OR OR
Yes 1 O	Other (Specify one reason)
No 2 O Go to 763	
T62. Have you used this arrangement continuously from	
then until (reference week), that is, with no breaks of more than a month?	T70 When was to this
Yes 3 O Go to SECTION U (p. 88)	T70. When was in this arrangement what was your main activity?
No. 4 O	(Mark only one)
	Working at a full-time job or business 1 O
T63. What is the next main method of care you used for for a month or longer? (Mark only one)	Working at a part-time job or business 2 O
A daycare centre 010	Full-time student
A before or after school program 020	Part-time student 4 O
A pre-kindergarten, junior	
kindergarten, or nursery school program as a	Caring for family's needs
	Without work and looking for work 6 O
, to	Other (specify) 4 7 O
You took care of	
Your spouse took care of	
An older brother sister	T71. INTERVIEWER:
Look care of	Does Designated Adult have a spouse living in the household?
took care of himself-herself 06	Yes 1 O
A babysitter, namely or relative took care of	No 2 O Go to Section U
	T72. What was your spouse's/partner's main activity when
Specify	was in this care arrangement? (Mark only one)
	Working at a full-time job or business 1 O
	Working at a part-time job or business 2 O
764. Was this care given in your own home, in someone else's home, or somewhere else altogether?	Full-time student
in own home	Part-time student 4 〇
Someone else's home 2 O	Caring for family's needs
65. Was this care given by a relative?	Other (specify)
Yes 4 O Go to 767	
No 5O	

following problems did you expe	during the	rangementi	ments you'	na had	for over the p	Go to U2 usst 12 months. The re- in thinking about mber 1988, which of
		xperience	# "Yes". h	ow upa	etting would you	say this problem wa
	No	Yes		et all	Somewhat Upsetting?	Very Upsetting?
Maintaining good quality care for throughout the year?	010	œO .	0.3	0	40	05 🔾
Having unexpected breakdowns in's care arrangements because the caregiver was unreliable?	08()	erO _	1 0 0	0	<b>*</b> O	10 🔾
Worrying about's safety and well-being?	110	120	11	0	14 ()	15 🔾
Finding care in the summer months for?	160	170 _	11	0	••0	20 🔾
Finding care for you could afford?	210	20 _	27	0	24 🔘	*0
Arranging for back-up care when arrangement(s) broke down?	28 🔾	270_	21	0	290	30 🔾
Finding consistent care for to cover evening or weekend work hours?	31 🔾	20 _	33	0	34 🔘	29 🔘
Finding consistent care for that would be flexible enough to meet your needs and schedule?	MO	370 .	34	0	200	40 🔾
Arranging for child care for during peak work periods?	410	420 _	4	0	440	45 🔘
Ves 3 O		nce any oth	er problem	s I have	en't mentioned?	

D Contraction

U4.	Looking back	over the	past 12 mont	hs, have concern	is about 's care	arrangement(s)

	0 0 0 0		1918	(Ask if DA has a spouse-partner living the household)		
	6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			And what partner?	about your	spouse/
	Yes	No	N/A	Yes	No	N/A
Caused you to consider leaving a job?	010	02 <b>O</b>	23 🔾	04O	05 🔾	06()
Caused you to actually leave a job?	07 🔾	08 🔾	00 O	100	0	12 🔾
Caused you to turn down a job offer?	13 🔾	140	15 🔾	160	17 🔾	18 🔾
Caused you to consider reducing your hours of work?	10 0	20 🔾	21 🔾	20	23 🔾	24 🔾
Caused you to actually reduce your hours of work?	80	26 🔾	27 🔾	28 🔾	29 🔾	30 🔾
Prevented you from working overtime?	31 ()	22 🔾	Ou	340	35 🔘	36 🔾
Caused you to reduce your commitment to a job or career?	37 🔾	28 O .	39 O	40 0	41 0	42 0
Caused you to worry about 's care while you were at work?	40	40	45 🔾	40	47 🔾	44 ()
Affected your job performance?	**0	90 🔾	510	10	20 ○	54 ()
Caused you to postpone plans to enroll in an educational or training program?	** ()	<b>%</b> O	57 🔾	*0	59 🔾	∞ ○
Caused you to change from full-time to part-time enrollment in an educational or training program?	•• 0	62 🔾	410	**0	65 🔾	•• ○
Affected your school performance?	67 🔾	44 🔾	•••	700	71 🔾	72 ()

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٧.	NEIGHBOURHOOD SUPPORT					113	
	This next section asks about per upon for help with unusual child c about conditions in your neighbour	men allerat	can call tions and	VS.	Is there someone, other than your you could turn to for unexpected day or two, including overnight?	spouse	partner, ig for a
¥1.	is there someone, other than you you could turn to for unexpected hour or two?	# apousi	a/partner, ng for an		Yes 1 O		
	Yes 1 O				No <sup>2</sup> ○ — Go to V9		
	No 2 O Go to V5			V6.	How many such people could you tu	m to?	
V2.	How many such people could you to	im to?			One 1O		
	One 3 O				Two 40		
	Two 40				Three or more \$O		
	Three or more 50			¥7.	Is this person a / Are any of these	persons	?
/3	is this person a / Are any of these	e persons	7			Yes	No
		Yes	No		Family member(s) living in this household?	010	03 🔾
	Family member(s) living in this household?	010	02 O		Live-in caregiver7	010	040
	Live-in caregiver?	030	940		Boarder(s) or other person(s) living in your household?	<b>%</b> O	060
	Boarder(s) or other person(s) living in your household?	05()	000		Relatives (include ex-spouse) not living in your household?	07()	08 ()
	Relatives (include ex-spouse) not living in your household?	070	040		Neighbour(s)?	<b>000</b>	100
	Neighbour(s)?	060	100		Friend(s)?	110	120
	Friend(s)?	110	120		Child care giver(s) nds living in your household?	130	140
	Child care giver(s) not living in your household?	130	140		Other (Specify)	150	140
	Other (Specify)	150	160				
6.	in the past four weeks how many asked someone to do unexpected be hour or two?	times ha abysitting	lor an	V8.	In the past four weeks how many asked someone to do unexpected to day or two?	times ha	ve you g for a
	None 1 O				None + O		
	1 time 2 ()				1 bme 2 O		
	2 times 3 O				2 times 3 O		
	3 times 4 O				3 times 4 O		
	4 times 5 O				4 times 5 🔾		
	5 times or more 4 O				5 times or more # O		

	Please answer the follow neighbourhood.	ring que	stions	about your
		Yes	No	Don't know
•	Are there nice places for children to play within easy welking distance of	21.0		
	your home?	91 ()	82O	03O
	<ul> <li>Are there recreational facilities such as a community centre or a YWCA/YMCA in your neighbourhood?</li> </ul>	04 ()	05()	oe○
	Are there other children for your child(ren) to play with in your neighbour hood?	07 🔾	∞0	ow○
	e Are there programs for children that offer interesting things to do, such as Brownies or Cubs?	10 🔾	110	120
	e is there a drop-in daycare centre in your neighbour- hood?	13 ()	10	150
	Is there a play group for children in your neighbourhood?	18 🔾	170	110
	• is there a toy- lending library in your neigh- bourhood?	10 0	20 0	21 🔾
	Are there parenting groups offering information and advice to parents in your neighbourhood?	20	20	24 ()
	Are there Referral Services available that can give you information on child care programs or	* 0	**	27.0
	providers?	25 (	28 (	27 🔾

- N

W. DEMOGRAPHICS	
These lest questions will help us to classify people into groups for statistical purposes.  W1. In 1987, approximately how much did your family apend on child care arrangements, for all of your children to allow you to work/study?  .00	W3. What language did you first speak at home in your childhood? (Mark all that apply)  English 1 O  French 2 O  Other (Specify) 3 O
No child care expenses 1 O	
Don't know 2 🔘	W4. In what country were you born?
W2. For 1987, what was your annual income from the following sources?	Canada 4 ○ → Go to W6
e Total income from wages and salaries before taxes or deductions  No income 2	Country outside Canada (Specify) 5 O
Don't know 3 O	WS. In what year-did you first immigrate to Canada?
	19
Net income from self-employment	Canadian critizen by birth 1 O
(If "loss", mark 'No oo 4 oo income')	W6. In what country was your mother born?
No income 9 O	Canada 2 🔾
Don't know 4 O	Country outside Canada (Specify) 3 O
ment sources such as Family Allowance, 00 7 0	W7. In what country was your father born?
UIC, Social Assistance, CPP/QPP or Old Age Security No income # O	Canada 4 O
Dan't know ♥ ○	Country outside Canada (Specify) 5 O
Other money income such as investment income, scholarships, alimony, retirement	W8. INTERVIEWER:  Does Designated Adult have a spouse living in the household?
penaloris etc. No income 2 O	Yes 1 O
Don't know 3 🔾	No <sup>2</sup> ○ → Go to W15

W.

W9. For 1987, what was the annual income of your spouse/partner from the following sources?	W12. in what year did he/she first immigrate to Canada?
e Total income from wages and salaries before taxes or deductions	Canadian crizzen by birth 9 O W13. In what country was your spouse's/partner's mother
Don't know 3 O	Canada 1 🔾
Net Income from self-employment (If "loss", mark 'No income')  No income 5	Country outside Canada. (Specify) ? O  W14. In what country was his/her father born?
Don't know € ○	Canada 3 C
e Income from govern- ment sources such as Family Allowance, UIC, Social Assis- tance, CPP/QPP or	W15. INFORMATION SOURCE:
Old Age Security No income # O	HRD-Pg-Ln of person providing (most of) the information for Form 06.
Other money income	W16. INTERVIEWER:
such as investment income, scholarships, allmony, retirement pensions etc.	a) Read Data-Sharing Agreement in W17 to respondent
No income 2 O	b) Thank respondent for his/her assistance.  c) Enter Stop time:
W10. What language did your spouse/partner first speak at home in his/her childhood? (Mark all that apply)	d) Enter Final Status Gode in Item 14 on front cover of F06.
English 4 🔾	e) Was interview conducted?
French 5 O	8y telephone 1 O
Other (Specify)   O	In person 2 O
W11. in what country was your spouse/partner born?	
Canada 7 O Go to Wf3	w
Country outside Canada (Specify) 8 O	

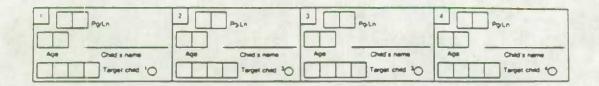
W17. INTERVIEWER: Read the following Data-sharing Agreement, providing actual names of organizations, listed in the brackets, only if required. Concerned respondents may confirm an objection to the sharing of their answers by writing the Chief Statistician of Canada, Ottawa, Ontario, K1A 076.

Statistics Canada is conducting this survey jointly with four Canadian Universities (the University of Guelph, the University of British Columbia, the University of Manitoba and the University of Victoria), the provincial ministries responsible for child care in Ontario, Quebec and Alberta, (the Ontario Ministry of Community and Social Services, the Quebec office des services de garde à l'enfance, the Alberta Ministry of Social Services). Health and Welfare Canada, and Employment and Immigration Canada. The information collected will be kept confidential and used only for statistical purposes.

Do you agree to share your answers with these groups?

Yes No

THANK YOU VERY MUCH FOR YOUR ASSISTANCE!



## SPECIAL SURVEYS GROUP PROGRAMS

SURVEY MONTH:

October 1988

TITLE :

Travel Survey

SPONSOR:

Tourism Canada

SURVEY METHOD:

Personal / Telephone Interview

SAMPLE SIZE :

One civilian member, 15 years of age and over, from each household in rotation group 1 throughout Canada. In addition, the survey will be conducted in rotation groups 2 and 3 in the provinces of Newfoundland, New Brunswick, Quebec, Manitoba, Saskatchewan and Alberta.

**OBJECTIVES:** 

The data collected during this survey will provide the sponsor with information on travel by Canadians in terms of its contribution to the Canadian economy and the utilization of various travel related services (example transportation, accommodation facilities). The data will also be used to provide an understanding of the travel habits of Canadians, their destination, the purpose of their trip, the length of stay, etc. and to provide a picture of the socio-economic characteristics of Canadians who travel.

PROJECT MANAGER:

Denis Lefebyre

MICRODATA:

Yes

Price \$ 300

No

Statistics Canada Statistique Canada

Household Sulveys Division des Division Division des enquéles menages

Confidential when completed

Authority Statistics Act Statutes of Canada 1970 - 71 - 72 Chapter 15

## Travel Survey (Third Quarter)

•		1 0	6 2 T	Doc+et No	3 1 0 4
		4	Saignment No	5	Age his No Household
		7 Given s 8 Surnam			
	INTRODUCTION AT	TIME OF LABOUR F	OBCE CHOVE		
has bee	in randomly selected from yo				C
is he she av		Date		Time	Survey
Yes 🔾 —	Conduct interview	Call Back			
No 🔾	➤ Make an appointment ——			Call Back	
		Acdress		T	elephone No
or relatives. Please do	re month period. Also July and on of include any trips you to ill member of an operating cre imuting to work or school	August are popular month ok	is for taking vacat	Civic Ho lions or tri	onth period from hiday and Labour ps to visit friends
or relatives. Please do as a com	re month period. Also July and o not include any trips you to i member of an operating cre imuting to work or school: ing to a new residence.	August are popular month lok w of a bus, plane, truck,	etc.	Civic Mo	os lo visil friends
or relatives Please do	ne month period. Also July and on not include any trips you to immember of an operating creaming to work or school: and to a new residence.	August are popular montholk w of a bus, plane, truck, r more which ended	etc	Civic Mo	os lo visil friends
or relatives Please do as a commove  A. Did you take any busit	the month period. Also July and on not include any trips you to a member of an operating cremiting to work or school: sing to a new residence.  The strips of one night of the strips of one night of the school.	August are popular month ok word a bus, plane, truck, word a bus, plane, truck, or more which ended many?	etc  during this thr	ee mont	h period?
or relatives Please do as a commove  A. Did you take any busit	the month period. Also July and on not include any trips you to a member of an operating creaming to work or school; sing to a new residence.  The school of	August are popular month ok w of a bus, plane, truck, r more which ended many?	etc  during this thr	ee mont	h period?
A. Did you take any busing include: taking a vacat	nemonh period. Also July and on not include any trips you to member of an operating creamuting to work or school: sing to a new residence.  The school of th	August are popular month lock  w of a bus, plane, truck,  r more which ended  many?  tore which ended du latives, attending a w	etc  during this thr  No   tring this three redding, fair or	ee mont	h period?  period? Other trips
A. Did you take any busing include: taking a vacat	nemonh period. Also July and on not include any trips you to member of an operating creamuting to work or school: sing to a new residence.  The school of th	August are popular month ok w of a bus, plane, truck, w of a bus, plane, truck, r more which ended many? here which ended du latives, attending a w nany? illes (80 km) or more,	etc  during this thr  No   tring this three redding, fair or	ee mont	h period?  period? Other trips
A. Did you take any other include: taking a vacat  C. Did you take any same month period?	nemonth period. Also July and on our include any trips you to a member of an operating creaming to work or school: sing to a new residence.  The strips of one night or residence in trips of one night or residence.  The strips of one night or residence in the strips of one night or residence.  The strips of one night or residence in the strips of one night or resid	August are popular month ok w of a bus, plane, truck, w of a bus, plane, truck, r more which ended many? here which ended du latives, attending a w nany? illes (80 km) or more,	etc  during this three redding, fair or No One way, for an	ee mont	h period?  period? Other trips
A. Did you take any other include: taking a vacat  C. Did you take any same month period?	nemonth period. Also July and on our include any trips you to a member of an operating creamuting to work or school: sing to a new residence.  The school of	August are popular month ok w of a bus, plane, truck, w of a bus, plane, truck, r more which ended many?  tore which ended dulatives, attending a w many?  illes (80 km) or more,	etc  during this three redding, fair or No One way, for an	ee mont	h period?  period? Other trips
or relatives Please do as a commove  A. Did you take any busin	the month period. Also July and to not include any trips you to a member of an operating creaming to a new residence.  The member of an operating creaming to a new residence.  The member of an operating creaming to a new residence.  The member of an operating to a new residence.  The member of one night or member of the member of one night or residence.  The member of one night or residence of the member of at least 50 mm.  The member of an operating creaming to the member of an operating to the member of an operating creaming to the member of the	August are popular month ok  w of a bus, plane, truck,  r more which ended du many?  lore which ended du latives, attending a w many?  iles (80 km) or more,  any?  1 Go to 10  2 Go to 29	etc  during this three redding, fair of the way, for an arm to the way.	ee mont	h period?  period? Other trips l, etc.
A. Did you take any other include: taking a vacat  C. Did you take any same month period?	the month period. Also July and to not include any trips you to a member of an operating creamuling to work or school: the proof of the member of an operating creamuling to work or school: the proof of the member of an operating creaming to a new residence.  The proof one night or make the proof of the member of the proof of	August are popular month ok w of a bus, plane, truck, w of a bus, plane, truck, or more which ended du latives, attending a w latives, attending a w liles (80 km) or more, liles (80 km) or more, any?  1 Go to 10 2 Go to 29 above: Enter total numberement to the respondent:	etc  during this three redding, fair of the way, for an arm of the three redding this three redding this three redding.	ee mont month r festival	h period?  period? Other trips l, etc.
A. Did you take any other include: taking a vacat  C. Did you take any same month period?	the month period. Also July and to not include any trips you to a member of an operating creaming to a new residence.  The member of an operating creaming to a new residence.  The member of an operating creaming to a new residence.  The member of an operating to a new residence.  The member of one night or member of the member of one night or residence.  The member of one night or residence of the member of at least 50 mm.  The member of an operating creaming to the member of an operating to the member of an operating creaming to the member of the	August are popular month ok w of a bus, plane, truck, w of a bus, plane, truck, r more which ended many?  lore which ended du latives, attending a w many?  "Go to 10  "Go to 29  above: Enter total numberement to the respondent."	etc  during this three redding, fair of the way, for an arm of the three redding this three redding this three redding.	ee mont month r festival	h period?  period? Other trips l, etc.

TRIP 1 ①  BEGINNING WITH THE FIRST TRIP THAT ENDED DURING THE PERIOD:	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP- (Mark one only) Visiting friends:
11 WHERE DID YOU WAS	relatives 10 Ptersure 20 P
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Rusiness
	A convention of
	Was it to attend a convention? Yes 6 No 7
(nearest) CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE
	FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY	
12. WHAT WAS YOUR DESTINATION ON THE PERSON	Visiting friends
	or relatives 01 or Historic site 100
that is furthest from his/her home)	
	Festivals or events 02 Attend sports events 11
(Nearest) CITY TOWN PROVINCE STATE	Shopping 93 door solve in sports or oul-
	Shopping 03 door activity (specify) 120
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Sightseeing 040
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS	Swimming 13
(REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events Other water
	e.g. plays, concerts 050 Other water sports 140
Miles 10 )	Nightlife/
Kilometres 20 Enter number	entertainment os Hunting or fishing 150
	Dining at Cross country skiing 160
4. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	
under 15 years 15 years and over	Visit a theme park OF Downhill skiing 17
7.03	merite bank
	Visit 200/museum Other 180
5. WAS THIS A WEEK-END TRIP?	natural display 090 Other
Yes 1 No 2	None of the above 19
140 -( )	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR
6. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	
Enter number # 000 mg to 10	
" 000 go to 79	11011001
7. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES	enter code(s) Did not visit a
DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or
TOO SPEND IN EACH ONE?	Historic site 99
	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE
Newfoundland of Saskatchewan os	TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
P.E.I. 02 Atherts	The west on this trip POH?
Alberta 09	Prepaid packages (i.e. package tours)
Nova Scotia 03 British Columbia 10	Transportation to and from destination
	including expenditures for gas 2 S1 1 1 1 100
New Brunswick 04 N.W.T. or Yukon 11	
Quebec 05	Local transportation (i.e. taxis, busi etc.) 3 51 1 1 100
Ontario ne I Helter Cour	Accommodation 4 S 1 1 1 100
United States 12	
Manifoba 07 All other countries 13	Food and beverages s s
	Recreation and entertainment 6 S 1 1 1 100
IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	
OU SPEND IN EACH TYPE?	Other (souvenirs, etc.) , S, S
	Total (if no breakdown given)
Hotel (including tourist homes)	
( source nomes)	24. IF "BUSINESS" MARKED IN 20 ASK:
Motel	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID
Camping or trailer park	TON 81.
Sampling of trailer park	An employer?
Home of friends or relatives	Yannada
	Yourself? 2 1 %
Private cottage or vacation home 5	Other member(s) of your household? 3 %
Commercial cottage or cabin	
	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	July 1 August 2 September 3
WHAT MEANS OF TRANSPORTATION DID YOU USE TO	26. HOW MANY OTHER TRIPS IDENTICAL TO THE DESTRUCTION
THE UNCATES! DISTANCE DE TRIC TRICA	THE PENIUD AULY 181 TO CEDTEMBED 40
as auto /rexp/ normal mane favore man and	
as "other" molorcycles and bicycles. (Mark one only.)	None 1 Go to 28 OR (Enter number)
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Rail 3 Other 5	July? 1 August? 2 September? 3
Bus 20 Boat 40	28. INTERVIEWER CHECK ITEM:
	Leat the
a car? Yes ?O No 6O	0 00 10 29
Air * Did you rent a car? Yes ? No *	Otherwise 20 Go to 29

TRIP 2 ①	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?		
CONTINUING WITH THE NEXT TRIP	(Mark one only) Visiting friends		
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	relatives 10 Pleasure 20 Personal 30		
The state when too rook this laip?	Business 4C A convention 5C		
(regress) CITY TOWN	Was it to attend a convention? Yes 6 No 7		
- CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)		
PROVINCE FOR OFFICE USE ONLY	Visit a National		
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respon- dent went to more than one place on this trip, enter name of place that is furthest from his her home)	Visiting friends Provincial, Regional Park or relatives 01 or Historic site 10		
	Festivals or events 02C Attend sports events 11C		
PROVINCE STATE	Shopping 03 Participate in sports or out-door activity (specify) 12		
COUNTRY Id outside Canada) FOR OFFICE USE ONLY	Sightseeing 04C Swimming 13C		
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS?  (REPEAT DESTINATION FROM OUESTION 12)	Attend cultural events e.g. plays, concerts 050 Other water sports 140		
Miles 10 Enter number	Nightide enfertainment oe Hunting or fishing 15C		
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	Dining at high quality restaurants or Cross country skiing 160		
under 15 years 15 years and over	theme park oac Downhill skiing 120		
	Visit zoo museum natural display 09 Other		
15. WAS THIS A WEEK-END TRIP?			
Yes 1C No 2O	None of the above 190		
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	22. IF "VISIT NATIONAL. PROVINCIAL. REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK. WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?		
Enter number	enter code(s) Did not visit a		
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site		
Newfoundland of Saskalchewan oe	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?		
P.E.I. 02 Alberta 09	Prepaid packages (i.e. package tours)		
Nova Scotia 03 British Columbia 10	Transportation to and from destination including expenditures for gas 2 5 1 1 100		
TO THE PARTY OF TORON THE PARTY OF THE	Local transportation (i.e. taxis, bus, etc.) 3 6, 1 1 100		
	Accommodation		
Ontario oe United States 12	Food and beverages		
Manitoba 07 All other countries 13	Recreation and entertainment		
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.)		
Hotel (including tourist homes)	Total (if no breakdown given) a Sili 100		
Motel   2	24. IF "BUSINESS" MARKED IN 20 ASK: WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:		
Camping or trailer park	An employer?		
Home of Imends or relatives	Yourself?		
Private cottage or vacation home	Other member(s) of your household?		
Commercial cottage or cabin			
	25. IN WHICH MONTH DID THIS TRIP END?		
Other (hostels, universities, etc.) 7	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU		
IN "BUTO" MOTOR HOMES, MEDS, INJURY MADS and Campaign Inches	1988?		
as "other" motorcycles and bicycles. (Mark one only.)	None 1 Go to 28 OR (Enter number)		
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN		
Automobile 1 Rail 3 Other 5	July? 1 August? 2 September? 3		
Elus 20 Boat 40	28. INTERVIEWER CHECK ITEM:		
Air <sup>®</sup> ○ → Did you rent Yes <sup>7</sup> ○ No <sup>®</sup> ○	Last trip 10 Go to 29		
103-27	Otherwise 2 Go to TRIP 2		

TRIP 3 ③ CONTINUING WITH THE NEXT TRIP	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only) Visiting frends:			
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	relatives 1 Pleasure 2 Personal 3 Business 4 Personal 3 Accounts 5 C			
	Was it to attend a convention? Yes 6 No 7			
Ineerest CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE			
PROVINCE SAR OFFICE LIFE ONLY	FOLLOWING ACTIVITIES? (Read list and mark all that apply)			
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Visiting friends  Visiting friends  Or relatives  Visit a National,  Provincial, Regional Park  or Historic site  10			
man is furthest from his/her home)	Festivals or events 02 Attend sports events 11			
(Nearost) CITY/TOWN PROVINCE STATE	Shopping 03 Participate in sports or out-door activity (specify) 12			
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Sightseeing 04 Swimming 13C			
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS?  (REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events e.g. plays, concerts 05 Other water sports 14			
Miles 10 Enter number	Nightlife entertainment of Hunting or fishing 15			
Kilometres 20 )  14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN	Dining al high quality restaurants 07 Cross country skiing 16			
THIS HOUSEHOLD WENT ON THIS TRIP? under 15 years 15 years and over	Visit a theme park 060 Downhill skiing 170			
	Visit zoo museum. natural display 090 Other 180			
15. WAS THIS A WEEK-END TRIP?	None of the above 190			
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK. WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU			
Enter number II 000 go to 19	VISITED?  enler code(s) Did not visit a			
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 990			
Newfoundland on Saskatchewan oe P.E.I. o2 Alberta o9 Nova Scotia o3 Bhitsh Columbia 10 New Brunswick o4 N.W.T. or Yukon 11	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?  Prepaid packages (i.e. package tours) ,  S			
Quebec os	Local transportation (i.e. taxis, but etc.) 3 51 1 1 100			
Ontario os United States 12	Accommodation 4 5 1 1 1 100			
Maniloba 07 All other countries 13	Food and beverages 5 5 1 1 1 1 20			
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Recreation and entertainment 6 5 1 1 100 Other (souvenirs, etc.) 7 5 1 1 100			
THE PROPERTY OF CHAPTER THE PR	Total [if no breakdown given]			
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK:			
Motel	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:			
Camping or trailer park	An employer?			
Home of friends or relatives 4	Yourself? 2 46			
Private cottage or vacation home	Other member(s) of your household? 3 5			
Commercial cottage or cabin	25. IN WHICH MONTH DID THIS TRIP END?			
Other (hostels, universities, etc.)	July 1 August 2 September 3			
<ol> <li>WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers, include as "other" motorcycles and bicycles. (Mark one only.)</li> </ol>	26. HOW MANY DTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD JULY 1st TO SEPTEMBER 30, 1988?  None 1 Go to 28 OR (Enter number)			
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN			
Automobile 1 Rail 3 Other 5	July? 1 August? 2 September? 3			
Bus 2 Boat 4	28, INTERVIEWER CHECK ITEM:			
Air <sup>®</sup> ○ → Did you rent Yes <sup>7</sup> ○ No <sup>®</sup> ○	Last trip 1 Go to 29 Otherwise 2 Go to 7RIP 4			

TRIP 4 ①	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?			
CONTINUING WITH THE NEXT TRIP	Visiting friends/			
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	relatives 10 Pleasure 20 Personal 30			
	Business 40 A convention 50			
(Mearest) CITY TOWN	Was it to attend a convention? Yes 40 No 70			
•	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)			
PROVINCE FOR OFFICE USE ONLY	- Mark No.			
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his her home)	Visiting friends Projected Description			
	Festivals or events 02 Attend sports events 11			
(Neares) CITY TOWN PROVINCE STATE	Shopping 03 Participate in sports or out- door activity (specify) 12			
COUNTRY (if ourside Canada) FOR OFFICE USE ONLY	Sightseeing 040 Swimming 130			
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS (REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events			
	e.g plays, concerts 050 Other water sports 140			
Miles  Krometres  Enter number	Nightlite entertainment on Hunting or fishing 150			
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN				
THE TRIP?	Vieit a			
under 15 years 15 years and over	theme park 08 Downhill skuing 17			
	Visit 200 museum natural display 09 Other			
15. WAS THIS A WEEK-END TRIP?				
Yes 10 No 20	None of the above 19			
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS	OF THE NATIONAL PARKS OR HISTORIC STEEL HOLL			
Enter number # 000 go to 19	VISITED:			
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 990			
Newfoundland of Saskatchewan of	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT DN THIS TRIP FOR?			
PEL STILL				
Nova Scotia	Prepaid packages (i.e. package tours) 1 5 1 1 100			
British Columbia 10	Transportation to and from destination including expenditures for gas			
TO TUKON II	Legal transaction in the contract of the contr			
Quebec 05	Account			
Ontario 06 United States 12				
Manifoba 07 All other countries 13	Food and beverages 5 5 1 1 1 100			
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND	Recreation and entertainment 6 5 1 1 1 100			
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenirs, etc.) , 5, 1, 1, 1,00			
and the second second second	Total lif no breakdown given:			
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK.			
Morel 2	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:			
Camping or trailer park	An employer?			
Home of friends or relatives	Yourself?			
Private cottage or vacation home	Other member(s) of your household?			
Commercial cottage or cabin				
Other (hostels, universities, etc.)	25. IN WHICH MONTH DID THIS TRIP END?  July 1 August 2 September 3			
19. WHAT MEANS OF TRANSPORTATION DES MANUEL	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DIRECT THE REPORT OF THE PROPERTY			
TRAVEL THE GREATEST DISTANCE ON THIS TRIP? include" as "auto" motor homes, leeps, trucks, vans and campers, include as "other" motorcycles and bicycles. (Mark one only.)	1988?			
and bicycles. (Mark one only.)	None 1 Go to 28 OR (Enter number)			
	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN			
Automobile 1 Rail 3 Other 5	July? 1 August? 2 September? 3			
Bus 20 Boat 40	28. INTERVIEWER CHECK ITEM:			
Air ® → Did you ren! Yes 7 No ®	Last trip 10 Go to 29			
103-27	Otherwise 2 Go to TRIP \$			

TRIP 6 D	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
CONTINUING WITH THE NEXT TRIP	(Mark one only)  Visiting friends/ relatives 1 Pleasure 2 Personal 2
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Business 40 A convention 50
	Was it to attend a convention? Yes 60 No 70
(newest) CITY TOWN	21. ON THIS TRIP. DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE DNLY	Visit a National.
<ol> <li>WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respon- dent went to more than one place on this trip, enter name of place that is furthest from his her home)</li> </ol>	Visiting thends Provincial. Regional Park or relatives 01 or Historic site 10
individual restriction (i.g. right)	Festivals or events 02 Attend sports events 110
(Newrest) CITY TOWN PROVINCE STATE	Shopping 03 Participate in sports or out- door activity (specify) 12
COUNTRY (if ourside Canada) FOR OFFICE USE DNLY	Sightseeing 04 Swimming 13
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ? (REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events e.g. plays, concerts 050 Other water sports 140
Miles 10	Nightlife entertainment 060 Hunting or fishing 150
Kilometres 2C }  14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN	Dining at high quality restaurants 07 Cross country skiing 16
THIS HOUSEHOLD WENT ON THIS TRIP? under 15 years 15 years and over	Visit a theme park on Downhill skiing 17
	Visit zoo museum os Other 180
15. WAS THIS A WEEK-END TRIP?	None of the above 19
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK. WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
Enter number 1/1 000 go to 19	enter code(s) Did not visit a
7. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 990
Newfoundland of Saskatchewan oe	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
P E I 02 Alberta 09 Nova Scotia 03 British Columbia 10	Prepaid packages (i.e. package tours)   5   1   1   00    Transportation to and from destination
New Brunswick 04 N.W.T. or Yukon 11	including expenditures for gas 2 51 1 1 100
Ouebec os	Local transportation (i.e taxis, bus etc.) 3 8 1 1 100
Ontario of United States 12	Accommodation 4 8 1 1 100
Manitoba 07 All other countries 13	Food and beverages 5 5 1 1 1 100
8. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Pecreation and entertainment 6 5 1 1 100 Other (souvenirs, etc.) 7 5 1 1 1 100
	Total (if no breakdown given)
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK.
Motel 2	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of hiends or relatives	Yoursett?
Private cottage or vacation home 5	Other member(s) of your household?
Commercial cottage or cabin	25. IN WHICH MONTH DID THIS TRIP END?  July 1 August 2 Sentember 3
Other (hostels, universities, etc.)	July 1 August 2 September 3 26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU
<ol> <li>WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? include as "auto" motor homes, peeps, trucks, vans and campers, include as "control" motor homes.</li> </ol>	TAKE DURING THE PERIOD JULY 181 TO SEPTEMBER 30,
as "other" motorcycles and bicycles, (Mark one only.)	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 10	July? 1 August? 2 September? 3
Automobile 1 Rail 3 Other 5 Bus 2 Boat 4	28. INTERVIEWER CHECK ITEM:
Air <sup>6</sup> ○ → Did you rent	Last trip 1 Go to 29
a car? Yes 70 No 90	Otherwise 2 Go to TRIP 7

TRIP 7 ①	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
CONTINUING WITH THE NEXT TRIP	Visiting mends/ relatives 1 Pleasure 2 Personal 3
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Business 40 A convention 50  Was it to attend a convention? Yes 60 No 70
(newest) CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY  12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respon-	Visit a National.  Visiting friends Provincial, Regional Park or relatives 01 or Historic site 10 ○
dent went to more than one place on this top, enter name of place that is furthest from his her home)	Festivals or events 02 Attend sports events 110
(Newwor) CITY TOWN PROVINCE STATE	Shopping 030 Participate in sports or out- door activity (specify) 120
CCUNTRY (4 outside Canada) FOR OFFICE USE ONLY  13. APPROXIMATELY HOW FAR FROM YOUR HOME IS	Sightseeing 04 Swimming 13
(REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events e.g. plays, concerts  Other water sports  14  Nighting or Jishing
Miles 10   Enter number 11   Enter number 11   Enter number 12   Enter number 12   Enter number 13   Enter number 14   Enter number 15   E	Nightkite/ entertainment 06 Hunting or tishing 15  Dining at Cross country skiing 16
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	high quality restaurants 070 Visit a Downhill sluing 170
under 15 years 15 years and over	theme park  Visit 200: museum natural display  09  Other
15. WAS THIS A WEEK-END TRIP?	None of the above 190
Yes 1 No 2	22. IF "VISIT NATIONAL. PROVINCIAL. REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK. WHAT WAS THE NAME
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?  Enter number # 000 go to 19	OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITEO?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 990
Newfoundland 01 Saskatchewan 08	TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
P.E.I. 02 Alberta 09	Prepaid packages (i.e. package lours) 1811 100  Transportation to and from destination 100
Nova Scoba 03 British Columbia 10	including expenditures for gas 2
New Brunswick 04 N.W.T. or Yukon 11	Local transportation (i.e. taxis, bus. etc.) 1 3 1 1 1 100
Ontano os United States 12	Accommodation 4 5 100
Manifoba 07 All other countries 13	Pood and beverages
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND	k
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Other (souvenes, etc.)  Total (if no breakdown given)  8 8 1 1 00
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK. WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID
Motel 2	FOR BY: An employer?
Camping or trailer park 3 Home of friends or relatives 4	Yourself? 2 1 %
Private cottage or vacation home 5	Other member(s) of your household?
Commercial cottage or cabin 6	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.) 7	July 1 August 2 September 3
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD JULY 1st TO SEPTEMBER 30, 1988?  None 1 Go to 28 OR (Enter number)
as "other" motorcycles and bicycles. (Mark one only.)	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Rail 3 Other 5	28. INTERVIEWER CHECK ITEM:
Bus 20 Boat 40	Last trip 10 Go to 29
Air <sup>®</sup> C) → Did you rent Yes <sup>7</sup> O No <sup>®</sup> O	Otherwise 2 Go to TRIP 8

TRIP # ①	20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?
CONTINUING WITH THE NEXT TRIP	(Mark one only) Visiting friends-
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Business 4 A convention 5 Was it to attend a convention? Yes 6 No 7
rnewesti CITY TOWN	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES? (Read list and mark all that apply)
PROVINCE FOR OFFICE USE ONLY	Visit a National.
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place	Visiting frends or relatives  Provincial, Regional Park or Historic site  10
that is furthest from his/her home)	Festivals or events 02 Attend sports events 110
(Newes) CITY TOWN PROVINCE STATE	Shopping 03 door activity (specify) 120
COUNTRY If ourside Canada) FOR OFFICE USE ONLY	Sightseeing 04 Swimming 13
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ? (REPEAT DESTINATION FROM QUESTION 12)	Attend cultural events e.g. plays: concerts 050 Other water sports 140
Miles  Kilometres 2  Enter number	Nightlife entertainment 060 Hunting or lishing 150
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	Dining at high quality restaurants 0? Cross country skiing 16
under 15 years 15 years and over	Visit a theme park 080 Downhill skiing 170
45	Visit zoo museum natural display 09 Other 18
15. WAS THIS A WEEK-END TRIP?	None of the above 190
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?	22. IF "VISIT NATIONAL PROVINCIAL REGIONAL PARK OR HISTORIC SITE" MARKED IN 21 ASK WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
Enter number 11 000 go to 19	enter code(s) Did not visit a
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	National park or Historic site 990  23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE
Newfoundland of Saskatchewan of	TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
P.E.I. 02 Alberta 06	Prepaid packages (i.e. package tours)   5   1   00   Transportation to and from destination
Nova Scotia 03 British Columbia 10	including expenditures for gas 2 51 1 1 1 CC
Quebec 05	Local transportation (i.e. taxis, bus, etc.) 3 1 1 CC
Ontario os United States 12	Accommodation 4 5 1 1 CC
Manitoba 07 All other countries 13	Food and beverages 5 S 1 1 1 CC Recreation and entertainment 6 S 1 1 1 CC
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	
THE PARTY HIGHTS DID TOU SPEND IN EACH TYPE?	Other (souvenirs, etc.)  Total (if no breakdown given)  s s s s s s s s s s s s s s s s s s s
Hotel (including tourist homes)	24. IF "BUSINESS" MARKED IN 20 ASK:
Motel	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Camping or trailer park	An employer?
Home of friends or relatives 4	Yourself? 2 2
Private cottage or vacation home	Other member(s) of your household?
Commercial cottage or cabin	25. IN WHICH MONTH DID THIS TRIP END?
Other (hostels, universities, etc.)	July 1 August 2 September 3
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers, include	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD JULY 1st TO SEPTEMBER 30, 1888?
as "other" motorcycles and bicycles. (Mark one only.)	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
Automobile 1 Rail 3 Other 5	July? 1 August? 2 September? 3
Bus 20 Boat 40	28. INTERVIEWER CHECK ITEM:
Air 6 Did you rent yes 7 No 6	Last trip 'O Go to 29

within the province?  to some other province(1)?  to the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  \$ 50.000 to \$1.000 to \$1.		within the o					N-BUSINESS TRE
to some other provinces?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States?  to a foreign country other than the United States and States?  to a foreign country other than the United States and Country of the States and Rents. ETC Country of States and Country of		WINDER THE O				No	
to the United States?  to a foreign country other than the United States?  To a foreign country other than the United States?  To a foreign country other than the United States?  To a foreign country other than the United States?  To a foreign country other than the United States?  To a foreign country other than the United States?  To a foreign country other than the United States?  To a foreign country other than the United States?  To a foreign country other than the United States and Foreign country other than the United States and Foreign country other than the United States and Sta	• •					°C	
to a foreign country other than the United States?  O. FOR THE YEAR 1987, IN WILLON OF THE FOLLOWING RANGES WAS YOUR TOTAL HOUSEHOLD INCOME BEFORE TAXES. DEGUCTIONS INCLUDE INCOME FROM WAGES, SALARIES, ITES, COMMISSIONS, PENSIONS, INTEREST AND RENTS, ETC 1999.  \$30,000 to \$39,999. \$50,000 to \$39,999. \$50,000 to \$39,999. \$50,000 to \$29,999. \$50,000 to \$29,999. \$50,000 to \$59,999. \$50,		to some other	er province(s)?		30	**	
O. FOR THE YEAR 1987, IN WHICH OF THE FOLLOWING RANGES WAS YOUR TOTAL HOUSEHOLD INCOME BEFORE TAXES IDEQUICTIONS? INCLUDE INCOME FROM WAGES. SALARIES. TIPS, COMMISSIONS, PENSIONS. INTEREST AND RENTS. ETC.  Less ham \$10,000  \$30,000 to \$39,999  \$50,000 to \$19,999  \$50,000 to \$19,999  \$50,000 to \$29,999  \$5		to the United	States?		50	6	
0. FOR THE YEAR 1987, IN WHICH OF THE FOLLOWING RANCES WAS YOUR TOTAL HOUSEHOLD INCOME BEFORE TAXES. DEDUCTIONS? INCLUDE INCOME FROM WAGES. SALARIES. TIPS. COMMISSIONS. PENSIONS. INTEREST AND RENTS. ETC Less than \$10,000		to a foreign	country other (	han th	•		
Less than \$10 000  \$30 000 to \$39 999  \$40 560 000 to \$69 999  \$50 000 to \$19 999  \$20 000 to \$19 999  \$50 000 to \$59 999  \$50 00	O. FOR THE YEAR 1987 IN WI	Michigan and Triangle			- 0		
Less fam \$10.000   \$30.000 to \$39.999	DEDUCTIONS? INCLUDE INC	COME FROM WA	GES, SALARIE	GES V	VAS YOUR TOTAL H	OUSEHOLD INCOME B	EFORE TAXES A
\$10.000 to \$19.999 \$20.000 to \$19.999 \$20.000 to \$29.999 \$30.\$50.000 to \$59.999 \$50.000 to \$29.999 \$50.000 t	Less than \$10,000						
S20 000 to \$29.999  \$50.000 to \$59.999  \$0 Not Stated  Not Stated  Not Many People Contributed to this Household income?  One  Two  Two  Two  Four or more  A REYOU A MEMBER OF A FREQUENT FLYER PROGRAM?  Yes 10 No 20  INTERVIEWER CHECK ITEM  If no trip taken  If only 1 trip taken  Otherwise  Otherwise  Otherwise  Otherwise  Otherwise  Otherwise  Otherwise  Otherwise  These questions are about your trip to and ended in  125 - mone:  SEFORE THIS TRIP. HOW MANY LONG DISTANCE CALLS, DID YOU PERSONALLY MAKE, TO DISCUSS THIS TRIP WITH travel services such as information bureaus, cair renal, hotels, moles etc?  Itiends and relatives?  During This Trip. HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE, TO DISCUSS THIS TRIP WITH travel services such as information bureaus, cair renal, hotels, moles etc?  During This Trip. HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE, TO DISCUSS THIS TRIP WITH travel services such as information bureaus, cair renal, hotels, moles etc?  DURING THIS TRIP. HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE, TO DISCUSS TRIP WITH travel services such as information bureaus, cair renal, hotels, moles etc?  DURING THIS TRIP. HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE TO DESCRIPT STANCE CALLS WERE  Personal reasons?  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS WERE  A business reasons?  A During This Trip. HOW MANY LONG DISTANCE CALLS WERE  A partiplication of the SE LONG DISTANCE CALLS WERE  A business office?  A DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS WERE  A DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS WERE  A Business office?  A DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS WERE  A Business office?  A DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS WERE  A DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS WERE  A DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS WERE  A BUSINESS RESIDENCE?  A DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS WERE  A DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS WERE  A DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS WERE  A DURI	\$10,000 to \$19,999	20					
ARE YOU A MEMBER OF A FREQUENT FLYER PROGRAM?  Yes 'O No 20  INTERVIEWER CHECK ITEM  If no trip taken	\$20,000 to \$29,999	30					
Two 20 Four or more 40  ARE YOU A MEMBER OF A FREQUENT FLYER PROGRAM?  Yes 10 No 20  INTERVIEWER CHECK ITEM  If no Irip taken 30 end 80 select it  Otherwise 10 go to selection grid 40  ROCUCTION: "I would now like to ask you a few questions about long distance calls associated with one of your trips. Long distance calls include, 1-800 calls, calls billed to calling cards, collect calls, those billed to a third number, and long distance calls include, 1-800 calls, calls billed to calling cards, collect calls, those billed to a third number, and long distance calls include, 1-800 calls, calls billed to calling cards, collect calls, those billed to a third number, and long distance calls are one of the property	HOW MANY PEOPLE CONTE	DIRLITED TO THE				Not Stated	
Two 20 Four or more 40  ARE YOU A MEMBER OF A FREQUENT FLYER PROGRAM?  Yes 10 No 20  INTERVIEWER CHECK ITEM  If no Irip taken 30 end 80 elect it 00 floring taken 30 elect it 00 floring taken 30 elect it 00 floring taken 40 select it 00 floring taken 40 select it 00 floring taken 40 select it 00 floring taken 40 elect it 00 floring taken 40 elect it 10 floring ta			S HOUSEHOLD	INCOM	4E?		
ARE YOU A MEMBER OF A FREQUENT FLYER PROGRAM?  Yes 'O No 2  INTERVIEWER CHECK ITEM  If no trip taken  If only 1 trip taken  Otherwise  Select it  Otherwis			Three		30		
### SELECTION GRID  ### A = Number of trips taken  ### SELECTION GRID  ### A = Number of trips taken  ### SELECTION GRID  ### A = Number of trips taken  ### SELECTION GRID  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Number of trips taken  ### B = Select trip no.  ### A = Select trip no.  #### A = Select trip no.  #### A = Number of trips taken  ### B = Select trip no.  #### A = Select trip no.  ###################################				x more	40		
If no trip taken  If only 1 trip taken  Otherwise  Select it  Select itip no.  A = Number of trips taken  Select trip no.  A = Number of trips trip to trips taken  Select trip	. ARE YOU A MEMBER OF A F	REQUENT FLYE	R PROGRAM?				
## A = Number of trips taken  ## Office it it  ## Office it  #	Yes 10	No 20					
## A = Number of Imps taken  ## Office of the imps of the imps taken  ## A = Number of Imps taken  ## B = Select Imp no.  ## Would now like to ask you a few questions about long distance calls associated with one of your trips. Long distance calls include, 1-800 calls, calls billed to calling cards, collect calls, those billed to a third number, and long distance calls you paid for.  ### These questions are about your trip to and ended in	INTERVIEWER CHECK ITEM						
Select it   Otherwise   Select it		30 and		A =	Number of trips take		
Otherwise  3				8 =	Select trip no		
RODUCTION: "It would now like to ask you a few questions about long distance calls associated with one of your trips. Long distance calls include, 1-800 calls, calls billed to calling cards, collect calls, those billed to a third number, and long distance calls you paid to.  These questions are about your trip to							
ROCUCTION: "I would now like to ask you a few questions about long distance calls associated with one of your trips. Long distance calls include, 1-800 calls, calls billed to calling cards, collect calls, those billed to a third number, and long distance calls you paid for.  These questions are about your trip to and ended in 125 - mone)  BEFORE THIS TRIP, HOW MANY LONG DISTANCE CALLS, DID YDU PERSONALLY MAKE, TO DISCUSS THIS TRIP WITH travel services such as information bureaus, car rental, hotels, motels etc?  It iends and relatives?  Dustiness associates?  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE FOR Personal calls?  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE FOR Personal calls?  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE FOR Personal calls?  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE FOR Personal calls?  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE FOR Personal calls?  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS WERE Yes 7 No 9 Personal calls?  A payabone?	Otherwise	⁵⊜ go to	selection				
These questions are about your trip to		giid -					
BEFORE THIS TRIP, HOW MANY LONG DISTANCE CALLS, DID YOU PERSONALLY MAKE. TO DISCUSS THIS TRIP WITH  travel services such as information bureaus, car rental, hotels, motels etc?  business associates?  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE FOR  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE FOR  DUSINESS reasons?  a private residence?  a business office?  7			trip to	112 - 1	desination: which	h lasted for	of regress
travel services such as information bureaus, car rental, hotels, motels etc?  friends and relatives?  business associates?  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE FOR.  personal reasons?  business reasons?  personal reasons?  a private residence?  a business office?  a payphone?  CARD'' ISSUED BY YOUR TELEPHONE COMPANY?  Yes 1	and ended in	(25 – month)					
travel services such as information bureaus, car rental, hotels, motels etc?  friends and relatives?  business associates?  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE FOR.  Dusiness reasons?  business reasons?  business reasons?  business reasons?  a private residence?  a business office?  a payphone?	BEFORE THIS TRIP, HOW MAN YOU PERSONALLY MAKE, TO	Y LONG DISTAN	CE CALLS, DID	37.	WHEN YOU TOOK	THIS TRIP, DID YOU	HAVE A "CALLI
triends and relatives?  business associates?  DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE FOR.  personal reasons?  business reasons?  business reasons?  business reasons?  business reasons?  business reasons?  a private residence?  a business office?  a payphone?  business calls?  business calls?  continuous your "CALLING CARD" NUMBER TO CHARGE  business calls?  business calls?  continuous your personal calls?  continuous your personal calls?  continuous your may business calls?  continuous your may your may business calls?  continuous your may your may business calls?  continuous your may your may business calls?  continuous your may business calls?  continuous your may business calls?  continuous your may busines	travel services such as in	formation burns			CARD" ISSUED BY	YOUR TELEPHONE C	OMPANY?
DURING THIS TRIP. HOW MANY LONG DISTANCE CALLS DID YOU PERSONALLY MAKE FOR.  Desiness reasons?  Dusiness rea	car rental, hotels, motels	etc?	1		Yes 10	H 00 m 35	go to 39 🗇
DURING THIS TRIP. HOW MANY LONG DISTANCE CALLS DID  Personal reasons?  Dusiness reasons?  Dusiness reasons?  Dusiness reasons?  While On this trip, DID YOU USE A DATA TERMINAL SEND ANY ELECTRONIC MAIL OR MESSAGES?  WHILE ON THIS TRIP, DID YOU USE A DATA TERMINAL SEND ANY ELECTRONIC MAIL OR MESSAGES?  PLACED FROM  Dusiness reasons?  A private residence?  Dusiness calls?  While On this trip, DID YOU USE A DATA TERMINAL SEND ANY ELECTRONIC MAIL OR MESSAGES?  Yes 70  A private residence?  Dusiness calls?  A personal calls?  WHILE ON THIS TRIP, DID YOU USE A DATA TERMINAL SEND ANY ELECTRONIC MAIL OR MESSAGES?  YOU PERSONALLY MAKE, THAT WERE SPECIFICAL RELATED TO THIS TRIP?	friends and relatives?		,		No 20	Go to 39	
DURING THIS TRIP, HOW MANY LONG DISTANCE CALLS DID  Personal reasons?  Dusiness calls?  Dusi	business associates?		, 🔲	38.	DID YOU USE YOU	"CALLING CARD" N	IUMBER TO
personal reasons?  business reasons?  business reasons?  business reasons?  a personal calls?  personal call	DURING THIS TRIP. HOW MAN	Y LONG DISTAN	CE CALLE DE			100	
business reasons?  s	YOU PERSONALLY MAKE FOR	1	OF CWEEZ DID		business calls?		0
business reasons?  s	personal reasons?	. []	90 10		personal calls?	50	*0
HOW MANY OF THESE LONG DISTANCE CALLS WERE  Yes 7  A private residence?  A business office?  A business office?  A Despidence?  A Despidence?  A Despidence?  A Despidence?	business reasons?	· [] } "		39.	WHILE ON THIS TR	IP. DID YOU USE A D	ATA TERMINAL
a business office?  a business office?  a hoteUmotel room?  a Devoluce?	HOW MANY OF THESE LONG	DISTANCE CALI	LS WERE		ACTION AND CEECIN	ONIC MAIL OR MESSA	GES?
a business office?  40. AFTER YOUR TRIP, HOW MANY LONG DISTANCE CALLS I YOU PERSONALLY MAKE, THAT WERE SPECIFICAL RELATED TO THIS TRIP?	- LACES PROM				0		
a hotel/motel room?  a Dayphone?			•				
a hotel/motel room?  a Dayphone?	a business office?		, 🔲	40.	AFTER YOUR TRIP,	HOW MANY LONG DIS	TANCE CALLS D
& Davohone?	a hotelimetel		. [		TOU PERSUNALLY	MAKE, THAT WEE	E SPECIFICALI
• Number	- a moraeusorai Loom ;				_		
e.					Number		
S:					Number	1	
	a payphone?						

## SPECIAL SURVEYS GROUP PROGRAMS

SURVEY MONTH:

October 1988

TITLE :

Survey of Apprentices and Journeymen in Alberta

SPONSOR:

Alberta Manpower

SURVEY METHOD:

Telephone / Personal Interview

SAMPLE SIZE :

Rotation groups 1, 2, 3, 5 and 6 in the province of

Alberta

OBJECTIVES :

The information obtained from this survey should identify the number of Alberta registered apprentices and Alberta certified Journeymen who are active in their trade, as well as the trades in which they are active.

PROJECT MANAGER:

Denis Lefebyre

MICRODATA :

Yes

Price \$ 500 No

HOUSEHOLD SURVEYS DIVISION	
SURVEY OF APPRENTICES AND JOURNEYMEN	
1 0 6 2 Docket No Survey Date	
5	
Assignment No HRD page-line No	
6 Given Name Surname Surname	
Telephone no	INTRODUCTION: APPRENTICESHIP IS A COMBINATION OF ON-THE-JOB AND TECHNICAL TRAINING WHICH
CALL BACK NOTES	LEADS TO CERTIFICATION AS A QUALIFIED JOURNEY-MAN. IN ALBERTA, THE APPRENTICESHIP PROGRAM COMES UNDER THE DIRECTION OF APPRENTICESHIP AND TRADE CERTIFICATION BRANCH OF ALBERTA MANPOWER WHO IS SPONSORING THIS SURVEY. THE SURVEY IS BEING CONDUCTED TO DETERMINE THE NUMBER OF EMPLOYED AND UNEMPLOYED JOURNEYMEN AND APPRENTICES BY TRADE, AND THE NUMBER OF JOURNEYMEN AND APPRENTICES NOT WORKING IN THEIR TRADE.
NOTE: ORTAIN ANSWERS DIRECTLY STORY	
BE MADE BEFORE ACCEPTING PROXY RESPON	SPONDENT. THREE TELEPHONE CALL BACKS SHOULD
10. IS A REGISTERED APPRENTICE IN ALBERTA?	YES ' O NO ' O GO TO 13
11. IN WHICH TRADE IS TAKING HIS/HER APPRENT	ENTER CODE
12. LAST WEEK DID WORK IN A "HANDS-ON" CAP	ACITY IN THIS TRADE?
	YES 'O NO 'O
13. IS A JOURNEYMAN WITH AN ALBERTA TRADE	CERTIFICATE?
	YES 'O NO 'O GO TO 17
14. IN WHICH TRADE DOES HOLD AN ALBERTA TR	ADE CERTIFICATE?
	ENTER CODE  DE CERTIFICATE ENTER CODE OF TRADE WHICH
15. LAST WEEK, DID WORK IN A "HANDS-ON" CAP	PACITY IN THIS TRADE?
	YES OGO TO 17 NO O
6. HAS WORKED IN AN "HANDS-ON" CAPACITY	
	YES O NO O
7. INFORMATION SOURCE: ENTER HRD PAGE-LINE PROVIDING THE ABOV	NUMBER OF PERSON
" 99 NO	TES See over for additional NOTES tem No
FRANÇAIS AU VERS	- Author Committee
	O "Authority – Statistics Act, Chapter 15, Statutes of Canada 1970 – 71 – 72 "

## SPECIAL SURVEYS GROUP PROGRAMS

SURVEY MONTH:

November 1988

TITLE :

Health and Employment Survey

SPONSOR:

Statistics Canada

SURVEY METHOD:

Personal/Telephone Interview

SAMPLE SIZE :

5 rotation groups

OBJECTIVES :

The purpose of this survey is to identify the limitations or disabilities that they experience and the

barriers they face in the labour market. This information is essential, particularly to government and

private organizations in order to develop programs and policies to eliminate barriers which may be faced by

these Canadians

PROJECT MANAGER:

William Magnus

MICRODATA :

Yes

Price

No

May be produced

# Health and Employment Status Survey

Confidential when completed Authority Statistics Act. Statutes of Canada 1970-71-72. Chapter 15

					1 0 6 Form No	2	Docket No		3	1 1 8 8 Survey Date
					4 Assignment I	No.		5 HA	ID page-iin	e No
					6 Given Name 7 Surname	e Age				
				CALL B	ACKS					
	Date			Notes				1 - 1		
1										
2										
3										
4										
FIN	AL STATUS									
(C)	Fully Completed	0	(R) Refusal	0	(O) Oth	er O				
(P) I	Partial	0	(N) No contact	0						
	a) Do you have in a group o	e any trouble hear	out your ability to cted to last six mo ring what is said at least three othe formally used)?	onths or mo	re.					report only
	b) Do you have	e any trouble read with glasses if no	ling ordinary			Yes		No 0:		
						163		140 0		
	and being u		The Real Property			Yes	05()	No 00	50	
•	or they expe	a familiar person trience moments you have any on	going problems	ething new,						
	with your ab	ility to remember	or learn?			Yes	07()	No 06	0	
•	) Do you have without rest	any trouble walking (about three o	ing 400 yards/met ity blocks)?	res		Yes	09()	No 10	0	
f	) Do you have down a fligh	any trouble walk t of stairs (about	ing up and 12 steps)?			Yes	110	No 12	20	
g	) Do you have periods of til	any trouble stand me, that is, more	ding for long than 20 minutes?			Yes	13()	No 14	0	
h	) When standi picking up ar	ng, do you have a n object from the	ny trouble bendin floor (for example	g down and e, a shoe)?		Yes	15()	No 16	0	
i)		any trouble using to grasp or handl				Yes	70	No 18	0	

Because of a long-term physical condition or health properties are you limited in the kind or amount of activity you can.	oblem, that is, one th	at is expected to	last six months or mor
a) at home?			
a) at home?	Yes 01C	No 02 🔾	
b) at school?			
b) at schoql?	Yes 03	No 04 (	Not applicable 05
c) at work?			
c) at work?	Yes 060	No 07 🔾	Not applicable 080
d) in other activities such as,			
travel, sports, or leisure?	Yes 090	No 10 O	
		,,,,	
<ol> <li>Because of a long-term emotional, psychological, nervo the kind or amount of activity you can do</li> </ol>	US. Or mental health	condition or our	. h 4 -
the kind or amount of activity you can do		condition or pro	olem, are you limited i
a) at home?			
a) at home?	Yes 010	No 02 ()	
b) at school?			
b) at school?	Yes 03O	No 04 O	Not applicable 05 〇
c) at work?			
	Yes 06()	No 07 O	Not applicable 08
d) in other activities such as,			
travel, sports, or leisure?	Yes 090	No 10 O	
		140 100	
3. INTERVIEWER CHECK ITEM			
<ul> <li>If any "Yes" is checked in the shaded column in 10, 11, or</li> </ul>	100		
Otherwise	2 O Go to	33	
INTERVIEWER CHECK ITEM			
Page 1	18. In terms of you job security as	r present job, w	ould you describe you
• If "Age" on page 1	,		
is 70 or over	excellent? 1 〇		
	and district .		
Form 05			
	good? 2		
• If "Yes" in 10 4 O	good? 2 of fair? 3 of fair?	} [19.	s your job security
• If "Yes" in 10	good? 2	)	s your job security air/poor because of
• If "Yes" in 10 4 O	good? 2 of fair? 3 of fair?	)	s your job security air/poor because of your condition(s)?
• If "Yes" in 10	good? 2 of fair? 3 of fair?	)	air/poor because of
• If "Yes" in 10	good? 2 of fair? 3 of fair?		air/poor because of your condition(s)?
If "Yes" in 10	good? 2 of fair? 3 of fair?		air/poor because of
• If "Yes" in 10	good? 2 of fair? 3 of fair?		air/poor because of your condition(s)?
If "Yes" in 10	good? 2 of fair? 3 of fair?		air/poor because of your condition(s)?
If "Yes" in 10	good? 2 of fair? 3 of fair?		air/poor because of your condition(s)?
If "Yes" in 10	good? 20 fair? 30 poor? 40	Go to 33	rest/poor because of your condition(s)?
If "Yes" in 10	good? 20 fair? 30 poor? 40	Go to 33	rest/poor because of your condition(s)?
If "Yes" in 10	good? 20 fair? 30 poor? 40  20. What are your comonths? Are the	Go to 33	rest/poor because of your condition(s)?
If "Yes" in 10  If code 0 to 5, 7 or 8 entered in 33  If code 0 to 5, 7 or 8 entered in 33  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If anything marked in "method used" column in 57  Otherwise  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 20  If anything marked in "method used" column in 57  Otherwise  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 20  If code 0 to 0 to 20  Otherwise  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 6,	good? 20 fair? 30 poor? 40	Go to 33	rest/poor because of your condition(s)?
If "Yes" in 10  If code 0 to 5. 7 or 8 entered in 33  If code 0 to 5. 7 or 8 entered in 33  If 00 to 04 weeks entered in 32  If anything marked in "method used" column in 57  Otherwise  Otherwise  B Go to 24  Do(es) the condition(s) you now have make it difficult for you to change jobs or get a better job?	good? 20 fair? 30 poor? 40  20. What are your comonths? Are the	Go to 33	rest/poor because of your condition(s)?
If "Yes" in 10  If code 0 to 5, 7 or 8 entered in 32  If 00 to 04 weeks entered in 32  If anything marked in "method used" column in 57  Otherwise 8 Go to 24  Do(es) the condition(s) you now have make it difficult for you to change jobs or get a better job?  Yes 1 No 2	good? 2 fair? 3 poor? 4 2  20. What are your comonths? Are the excellent? 1 0	Go to 33	res 5 No 6 No 6
If "Yes" in 10  If code 0 to 5. 7 or 8 entered in 33  If code 0 to 5. 7 or 8 entered in 32  If 00 to 04 weeks entered in 32  If anything marked in "method used" column in 57  Otherwise  Otherwise  Otherwise  No 20  Does your present employer offer acress by the condition of the condition of the column in 57  No 20  Does your present employer offer acress by the condition of th	good? 2 fair? 3 poor? 4 comonths? Are the excellent? 1 good? 2 fair? 3 compared.	Go to 33 hances of gettin	g a job in the next six
If "Yes" in 10  If code 0 to 5. 7 or 8 entered in 32  If code 0 to 5. 7 or 8 entered in 32  If 00 to 04 weeks entered in 32  If anything marked in "method used" column in 57  Otherwise  Otherwise  Otherwise  No 20  Does your present employer offer any on-the-job training or courses to employees?	good? 2 or fair? 3 or poor? 4 or poor? 4 or months? Are the excellent? 1 or good? 2 or pood? 2 or pood?	Go to 33 hances of gettiny	g a job in the next six  re your chances of etting a job fair/poor ecause of your
If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If 00 to 04 weeks entered in 32  If anything marked in "method used" column in 57  Otherwise 8 Go to 24  Do(es) the condition(s) you now have make it difficult for you to change jobs or get a better job?  Yes 1 No 2 No 4 No 4	good? 2 fair? 3 poor? 4 comonths? Are the excellent? 1 good? 2 fair? 3 compared.	Go to 33 hances of gettiny	g a job in the next six
If "Yes" in 10  If code 0 to 5, 7 or 8 entered in 32  If 00 to 04 weeks entered in 32  If anything marked in "method used" column in 57  Otherwise  Otherwise  No 2  Does your present employer offer any on-the-job training or courses to employees?  Yes 3  No 4  Go to 15  Go to 15  Go to 20  Go to 20  Go to 20  Go to 24  Doles; the condition(s) you now have make it difficult for you to change jobs or get a better job?  Yes 1  No 2  Does your present employer offer any on-the-job training or courses to employees?	good? 2 fair? 3 poor? 4 comonths? Are the excellent? 1 good? 2 fair? 3 compared.	Go to 33 hances of gettiny	g a job in the next six  re your chances of etting a job fair/poor ecause of your
If "Yes" in 10  If code 0 to 5, 7 or 8 entered in 32  If code 0 to 5, 7 or 8 entered in 32  If 00 to 04 weeks entered in 32  If anything marked in "method used" column in 57  Otherwise 80 Go to 24  Do(es) the condition(s) you now have make it difficult for you to change jobs or get a better job?  Yes 10  No 20  Does your present employer offer any on-the-job training or courses to employees?  Yes 30  No 40  Go to 15  Go to 15  Go to 15  Go to 20  Go to 24	good? 2 fair? 3 poor? 4 comonths? Are the excellent? 1 good? 2 fair? 3 compared.	Go to 33 hances of gettiny	g a job in the next six  re your chances of etting a job fair/poor ecause of your
If "Yes" in 10  If code 0 to 5, 7 or 8 entered in 33  If code 0 to 5, 7 or 8 entered in 32  If 00 to 04 weeks entered in 32  If anything marked in "method used" column in 57  Otherwise 80 Go to 24  Do(es) the condition(s) you now have make it difficult for you to change jobs or get a better job?  Yes 10  No 20  Does your present employer offer any on-the-job training or courses to employees?  Yes 30  No 40  Go to 15  Go to 18	good? 2 fair? 3 poor? 4 comonths? Are the excellent? 1 good? 2 fair? 3 compared.	Go to 33 hances of gettiny	g a job in the next six  re your chances of etting a job fair/poor ecause of your ondition(s)?
If code 0 to 5. 7 or 8 entered in 32  If code 0 to 5. 7 or 8 entered in 32  If 00 to 04 weeks entered in 32  If anything marked in method used column in 57  Otherwise 80 Go to 24  Do(es) the condition(s) you now have make it difficult for you to change jobs or get a better job?  Yes 1 No 2  Does your present employer offer any on-the-job training or courses to employees?  Yes 30 No 40  Self-amployed 50 Go to 33 Don't know 60	good? 20 fair? 30 poor? 40  20. What are your comonths? Are the excellent? 10 good? 20 fair? 30 poor? 40	Go to 33 hances of gettiny  21. A g b co	g a job in the next six  re your chances of etting a job fair/poor ecause of your ondition(s)?
If code 0 to 5. 7 or 8 entered in 32  If code 0 to 5. 7 or 8 entered in 32  If 00 to 04 weeks entered in 32  If anything marked in method used column in 57  Otherwise 80 Go to 24  Do(es) the condition(s) you now have make it difficult for you to change jobs or get a better job?  Yes 1 No 2  Does your present employer offer any on-the-job training or courses to employees?  Yes 30 No 40  Self-amployed 50 Go to 33 Don't know 60	good? 20 fair? 30 poor? 40  20. What are your comonths? Are the excellent? 10 good? 20 fair? 30 poor? 40	Go to 33 hances of gettiny  21. A g b co	g a job in the next six  re your chances of etting a job fair/poor ecause of your ondition(s)?
If "Yes" in 10  If code 0 to 5. 7 or 8 entered in 32  If code 0 to 5. 7 or 8 entered in 32  If anything marked in "method used" column in 57  Otherwise  Otherwise  No 2  Does your present employer offer any on-the-job training or courses to employees?  Yes 3  No 4  Go to 15  Go to 20  Go to 20  The condition(s) you now have make it difficult for you to change jobs or get a better job?  Ones your present employer offer any on-the-job training or courses to employees?  Yes 3  No 4  Go to 18  Go to 18  Go to 18  Ones, your condition(s) limit or prevent you from taking these courses?	good? 20 fair? 30 poor? 40  20. What are your comonths? Are the excellent? 10 good? 20 fair? 30 poor? 40	Go to 33 hances of gettiny  21. A g b co	g a job in the next six  re your chances of etting a job fair/poor ecause of your ondition(s)?
If "Yes" in 10  If code 0 to 5, 7 or 8 entered in 32  If 00 to 04 weeks entered in 32  If anything marked in "method used" column in 57  Otherwise  Otherwise  No 20  Does your present employer offer any on-the-job training or courses to employees?  Yes 30  No 40  Go to 15  Go to 15  Go to 15  Go to 20  Go to 20  Go to 24  Do(es) the condition(s) you now have make it difficult for you to change jobs or get a better job?  Yes 10  No 20  Does your present employer offer any on-the-job training or courses to employees?  Yes 30  No 40  Go to 18	good? 20 fair? 30 poor? 40  20. What are your comonths? Are the excellent? 10 good? 20 fair? 30 poor? 40	Go to 33 hances of getting  21. A g b co	g a job in the next six  re your chances of etting a job fair/poor ecause of your ondition(s)?

23. Beck difficult for you to find work?	27. Have you looke	d for work in the last two years?
a) Physical access to buildings Yes 1 O No 2 O	Yes 3 〇	No 4 O Go to 33
b) Lack of special aids or equipment Yes 3 No 4 O	20 111	
	related to your	reason you stopped looking for condition(s)?
c) Inadequate transportation Yes 5 No 6	Yes 5 〇	No 6 ()
d) Lack of suitable employment Yes 7 O No 8 O		
Go to 33	29. Last week, did y	ou want a job?
24. Do(es) your condition(s) completely prevent you from working at a job or business?	Yes 7 O	No 8 🔾
Yes 1 O Go to 33 No 2 O	30. Do you think you six months?	will look for work at any time in the
25. Because of your condition(s), do any of the following make it difficult for you to find work?	Yes 1 O	No <sup>2</sup> O Go to 33
a) Physical access to buildings Yes 1 O No 2 O	31. In your opinion,	what are your chances of finding a onths? Are they
b) Lack of special aids or equipment Yes 3 No 4 No 4		onths? Are they
10,70	excellent? 3 O	
c) Inadequate transportation Yes 5 No 5	good? 4 o	
d) Lack of suitable employment Yes 7 O No 8 O	poor? 60	32. Are your chances fair/poor because o
you could do at a job or business?		
Yes 1 No 2 Go to 33  3. I would now like to ask you about any special aids (such a hearing aid) which you expect to be will also such a hearing aid).	as glasses, a wheelc	Yes 7 No 8 C
3. I would now like to ask you about any special aids (such a hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?	The state of the s	hair, medically prescribed shoes or
I would now like to ask you about any special aids (such a hearing aid) which you expect to be using for a duration of management.	The state of the s	hair, medically prescribed shoes or
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  4. Do you use	Yes	hair, medically prescribed shoes or
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  4. Do you use  a) glasses or contact lenses?	Yes O	hair, medically prescribed shoes or  No 2 O Go to 35
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  4. Do you use  a) glasses or contact lenses?  b) a wheelchair?	Yes 0	hair, medically prescribed shoes or  No 2 O Go to 35
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  a) glasses or contact lenses?  b) a wheelchair?  c) crutches or other walking aids?	Yes 0	hair, medically prescribed shoes or  No 2 O Go to 35  No 02 O  No 04 O
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  a) glasses or contact lenses?  b) a wheelchair?  c) crutches or other walking aids?  d) any kind of brace excluding braces for teeth?	Yes O	hair, medically prescribed shoes or  No 2 Go to 35  No 02 O  No 04 O  No 06 O
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  a) glasses or contact lenses?  b) a wheelchair?  c) crutches or other walking aids?	Yes O	hair, medically prescribed shoes or  No 2 Go to 35  No 02 O  No 04 O  No 06 O  No 08 O
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  a) glasses or contact lenses?  b) a wheelchair?  c) crutches or other walking aids?  d) any kind of brace excluding braces for teeth?	Yes O	hair, medically prescribed shoes or  No 2 O Go to 35  No 02 O  No 04 O  No 06 O  No 08 O  No 10 O
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  4. Do you use  a) glasses or contact lenses?  b) a wheelchair?  c) crutches or other walking aids?  d) any kind of brace excluding braces for teeth?  e) medically prescribed orthopedic shoes?	Yes 0 Yes 0 Yes 0 Yes 0 Yes 0	hair, medically prescribed shoes or  1
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  a) glasses or contact lenses?  b) a wheelchair?  c) crutches or other walking aids?  d) any kind of brace excluding braces for teeth?  e) medically prescribed orthopedic shoes?  f) artificial limb(s)?	Yes 0 Yes 0 Yes 0 Yes 11 Yes 11	hair, medically prescribed shoes or  1
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  4. Do you use  a) glasses or contact lenses?  b) a wheelchair?  c) crutches or other walking aids?  d) any kind of brace excluding braces for teeth?  e) medically prescribed orthopedic shoes?  f) artificial limb(s)?  g) a hearing aid?	Yes 0 Yes 0 Yes 0 Yes 11 Yes 15	hair, medically prescribed shoes or  No 2 Go to 35  No 02 O  No 04 O  No 08 O  No 10 O  No 12 O  No 14 O  No 16 O
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  4. Do you use  a) glasses or contact lenses?  b) a wheelchair?  c) crutches or other walking aids?  d) any kind of brace excluding braces for teeth?  e) medically prescribed orthopedic shoes?  f) artificial limb(s)?  g) a hearing aid?  h) a guide dog?	Yes 0 Yes 0 Yes 0 Yes 11 Yes 11	hair, medically prescribed shoes or  No 2 Go to 35  No 02 O  No 04 O  No 08 O  No 10 O  No 12 O  No 14 O  No 16 O
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  4. Do you use  a) glasses or contact lenses?  b) a wheelchair?  c) crutches or other walking aids?  d) any kind of brace excluding braces for teeth?  e) medically prescribed orthopedic shoes?  f) artificial limb(s)?  g) a hearing aid?  h) a guide dog?	Yes 0 Yes 0 Yes 0 Yes 11 Yes 15	hair, medically prescribed shoes or  1
3. I would now like to ask you about any special aids (such hearing aid) which you expect to be using for a duration of m.  Do you use any special aid?  4. Do you use  a) glasses or contact lenses?  b) a wheelchair?  c) crutches or other walking aids?  d) any kind of brace excluding braces for teeth?  e) medically prescribed orthopedic shoes?  f) artificial limb(s)?  g) a hearing aid?  h) a guide dog?	Yes 0  Yes 0  Yes 0  Yes 11  Yes 12	hair, medically prescribed shoes or  1

	I would now like to ask you about any long-term health pro Do you have	are you may nave.	-	
	a) high blood pressure?	Yes 01 O	No 02 O	
	b) diabetes?		No 04 O	
	c) heart disease?		No 06 O	
	d) thyroid trouble or goiter? (thye-roid goy-ter)		No 08 O	ME
	e) arthritis or rheumatism?		No 10 O	
	f) osteoporosis? (ost-ee-o-po-ro-sis)		No 12 O	
	g) asthma? (az-ma)		No 14 O	
	h) hay fever or other allergies?	Yes 15 O	No 16 O	
	i) emphysema or chronic bronchitis?			
	(em-fizz-ee-ma-braun-kite-iss)		No 18 O	
	j) cancer?		No 20 O	
	k) liver disease?	Market Committee	No 22 O	
	i) stomach ulcer?	Yes 23 O	No 24 O	
	m) ulcerative colitis or Crohn's disease? (ul-cer-a-tive-co-ligh-tiss-or-cron's)	Yes 25 O	No 26 O	
	n) celiac disease? (see-lee-ack)	Yes 27 O	No 28 🔾	
	o) kidney disease?		No 30 O	
	p) recurring migraine headaches?	Yes 31 O	No 32 O	
	q) senility or Alzheimer's disease? (alz-hi-mers)	Yes 33 O	No 34 O	
	r) other mental or emotional disorder?			
	(excluding senility and Alzheimer's disease)	Yes 35 🔾	No 36 O	
	s) paralysis / paraplegia? (pa-ra-plee-gee-a)	Yes 37 O	No 38 O	
	t) muscular dystrophy? (dis-tro-fee)	Yes 39 O	No 40 O	
	u) Cerebral palsy? (se-ree-brul pall-zee)	Yes 41 O	No 42 O	
	v) cystic fibrosis? (cist-ick figh-bro-sis)	Yes 43 O	No 44 O	
	w) multiple sclerosis? (scluh-row-sis)	Yes 45 O	No 46 O	
	x) Parkinson's disease?	Yes 47 O	No 48 O	
	y) epilepsy?	Yes 49 O	No 50 O	
	z) other long-term health problem(s)? (Specify)	Yes 51 O	No 52 O	
		<b>□</b>		
36.	Do you have			
	a) any missing arms or legs?	Yes 1 O	No 2 O	
	b) any missing fingers or toes?	Yes 3 O	No 4 O	
37.	Excluding any health problem(s) mentioned earlier, do you	have		
	a) serious trouble with your back or spine?	Yes 1 O	No 20	
	b) serious trouble with your legs or hips?	Yes 3 O	No 4 O	
	c) serious trouble with your arms or shoulders?	Yes 5 O	No 6 O	
	d) serious trouble with your bones or joints?	Yes 7 O	No 8 O	
	INTERVIEWER	NOTES/COMMENTS		
	Was this interview completed by proxy?			
	Yes 10 - Enter page-line number of person			
	providing the above information.	Service Control		
	END OF INTERVIEW			

# SPECIAL SURVEYS GROUP PROGRAMS

SURVEY MONTH:

November 1988

TITLE :

Survey on Telephone Services

SPONSOR:

Bell Canada

SURVEY METHOO :

Personal / Telephone Interview

SAMPLE SIZE :

6 rotation groups

OBJECTIVES :

It is not possible to tell from telephone company records just how many households have telephone service and how many don't. For example, some households have more than one telephone number in their home, and some of these households also have cottages with telephone services. From time to time surveys such as the Survey on Telephone Services are conducted to collect this information.

PROJECT MANAGER :

Denis Lefebyre

MICRODATA :

Yes

Price \$ 300 No

#### Statistics Canada Statistique Canada QUESTION CARD 11 88 1988 Survey of Telephone Services Item 50 on F03 - Supplementary questions and codes Ask every applicable supplementary question as indicated on "Q" Card. Enter a code in every applicable column. NOTE: be sure to ask every question exactly as worded. How many telephones are there in your household? . If no telephone enter "O" in Item 50% and go to 50% If one or more enter (1-9) in Item 50A and go to 50C. If more than 9 telephones enter 9 and go to 50C. A What is the reason there is no telephone in your household? Telephone service not available in this area Just moved in and waiting for service 50 Have access to someone else's telephone B Enter code in 50B Can't afford, too expensive then go to 50E 5 Don't want or need one No reason given Other Now many different telephone numbers are there in your household? (Enter the number in 500 then go to 50D.) 50 Does this household have a private line or a party line? D 1 Private Line 2 Party Line Has this household been without telephone service for 2 months or 50 more since August 1, 1988? E 2 Yes -2 No----go to 50G What is the reason this household has been without service? Telephone service not available in this area Just moved in and waiting for service 50 Have access to someone else's telephone Can't afford, too expensive 5 Don't want or need one 6 No reason given Other 50 Does anyone in this household own a vacation home? 1 Yes-2 No----go to 50K Is the vacation home in: Newfoundland 05 Quebec P.E.I. 06 Ontario 01 50 09 02 H 10 British Columbia Nova Scotia 11 03 07 Manitoba 2 N.W.T. or Yukon Saskatchewan 04 New Brunswick 08 I 12 Outside of Canada If vacation homes in two or more provinces enter code for the vacation home used most often in columns 50H and 50I. Is there telephone service in the vacation home? 50 J 1 Yes -2 No----go to 50K For the year 1987, in which of the following ranges was your total 50 household income before taxes and deductions? (Include income from K wages, salaries, tips, commissions, pensions, interest and rents, etc.) 2 Less than \$10,000 6 \$50,000 to 59,999 20,000 to 19,999 20,000 to 29,999 8 \$10,000 to 19,999 60,000 to 69,999 70,000 and over

30,000 to 39,999

40,000 to 49,999

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7-5030-1143: D1-11-88

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Not stated

LABOUR FORCE SURVEY QUESTIONNAIRES AND CODE SHEETS

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Brear code	OFF LAST WEEK?	• WHEN DID LAST (Repair method) ?
18 HOW MANY HOURS DID ACTUALLY WORK	10 10 10 °C	No. of weeks Method ago (emo)
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## CODE SHEET

# Household Record Docket (Form 03)

	1	Single Detached
	2	Double
	3	Row or Terrace
1	4	Duplex
0	5	Apartment, Flat
0		Institution
1	7	Hotel, Rooming or Lodging House
	8	Camp - Logging, Construction, etc.
	9	Mobile Home
	0	Other - Specify in NOTES

34	M Male F Female	
	WHAT IS MARITAL STATUS? (Read categories to respondent)	
	Now married or living common-law     Single (never married)     Widow or widower     Separated or divorced	

362	Assign one letter to all household members re- lated to the head of a family by one of the rela- tionships listed in Item 37. ('A' for each member of the first family, 'B' for each member of the second family, etc.)
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Each different letter used in Item 36 requires a different 'Head of Family' in Item 37.

1 Head of family

2 Spouse

Son or daughter (natural, adopted or step)

4 Grandchild

5 Son-in-law or daughter-in-law 37 6 Foster child (less than age 18)

7 Parent 8 Parent-in-law

9 Brother or sister

0 Other relative - Specify in NOTES

Unrelated roomers, boarders and friends require a separate family identifier in Item 36.

### (Read questions to respondent)

Column 1: HOW MANY YEARS OF PRIMARY AND SECONDARY EDUCATION HAS . . . . COMPLETED?

0 No schooling

1 to 8 years of primary and secondary education

2 9 or 10 years of primary and secondary education 3 11 years of primary and secondary education 4 12 years of primary and secondary education

5 13 years of primary and secondary education

Column 2: A. HAS . HAS . . . . TAKEN A TAKEN ANY POST-SEC-

38 0 No (No post-secondary education)

Yes -- B. DID THIS EDUCATION NORMALLY REQUIRE HIGH SCHOOL GRADUA-TION?

0 No (No post-secondary education)

Yes -- C. DID . . . .. RECEIVE A DEGREE, CER-TIFICATE, OR DIPLOMA?

1 No (Took some post-secondary education) 2 Yes (Received a post-secondary certificate or diploma)

3 Yes (Received a university degree)

O Not a household member this month

Civilian household member this month
Full-time member of Canadian Armed Forces this month 402

3 Household member 70 years of age and over (non-birth interview only)

FIRST CDDE: Entered by interviewer

NOTE: for any code other than X, explain situation on appropriate form(s) FORMS X LFS questionnaire completed for all 22 eligible household members E LFS questionnaire completed for some 15/22 (not all) eligible household members N No one at home (after several calls) 15/22 R Household refusal 15/22 K Interview prevented by death, sickness, 15/22 language problem or other unusual circumstances related to the household L Interview prevented by weather condi-15/22 tions Household temporarily absent 15/22 Vacant dwelling (or trailer stall and vacant seasonal dwelling) C Dwelling under construction 22 45 B Dwelling occupied by persons not to be 15/22 interviewed D. Dwelling demolished, converted to busi-12/22 ness premises, moved, abandoned (unfit for habitation), listed in error A Interview cancelled for lack of an interviewer (Regional Office use only)

SECOND CODE: Regional Office use only

Blank Interview or attempt to interview again

Do not interview unless there is a complete change in household membership

Attempt to interview again, a letter was

Attempt to interview again, personal contact made by Regional Office staff

#### **ACTION CODES** FOR CLUSTER LIST (FORM 02)

1 ADDITION, i.e., new listing line
2 CORRECTION, i.e., to the original listing line
3 CHANGE IN STATUS, i.e., should be deleted from

## USING TEMPORARY DOCKET NUMBERS

Always start with 'T' for Temporary

Use the last 4 digits of your assignment number

'A' for the first additional dwelling, 'B' for the second, 'C' for the third, etc.

_				
	SURVEY	ROTATION	SURVEY	ROTATION
	01 (Jan.) 02 (Feb.) 03 (Mar.)	2	07 (July) 08 (Aug.)	2
	04 (Apr.) 05 (May)	5	10 (Oct.)	5
	06 (June)		12 (Dec.)	

# CODE SHEET

# Labour Force Survey Questionnaire (Form 05)

Exemplaire français disponible sur demande

- 1 Own illness or disability
- 2 Personal or family responsibilities
- 3 Going to school
- 4 Could only find part-time work
- 36 5 Did not want full-time work
  - 6 Full-time work under 30 hours per week
  - 0 Other Specify in NOTES
  - 1 Own illness or disability
  - 2 Personal or family responsibilities
  - 3 Weather
  - 4 Labour dispute (strike or lockout)
  - 5 Layoff, expects to return (Paid Workers Only)
  - 6 New job started during week, or job terminated (does not expect to return)
  - 7 Vacation
    - 8 Holiday (legal or religious)
    - 9 Working short-time (because of material shortages, plant maintenance or repair, etc.)
    - 0 Other Specify in NOTES
    - 1 Own illness or disability
    - 2 Personal or family responsibilities (Include maternity leave)
    - 3 Weather
  - 4 Labour dispute (strike or lockout)
- 33 5 Temporary layoff, expects to return (Paid Workers Only)
  - 6 New job to start in the future
  - 7 Vacation
  - 8 Seasonal Business (Excl. Paid Workers)
  - 0 Other Specify in NOTES
  - 1 Own illness or disability
  - 2 Personal or family responsibilities Include: Marriage, pregnancy, trip, vacation, family illness, etc.
  - 3 Going to school
  - 4 Quit job for no specific reason
  - 5 Lost job or laid off job (Paid Workers Only)

Include: Seasonal job, on-call arrangement, temporary job, dismissal (fired), company moved or went out of business, economic conditions, etc.

6 Changed residence

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7 Dissatisfied with job

Include: Low pay, poor hours, transportation problems, working conditions, conflict with employer or co-workers, no opportunity for advancement, etc.

- 8 Retired
- 0 Other Specify in NOTES

- 1 Working
- 2 Keeping house
- 3 Going to school
- 0 Other DO NOT specify in NOTES
- 1 Own illness or disability
- 2 Personal or family responsibilities
- 3 Going to school
- 4 No longer interested in finding work
- 5 Waiting for recall (to former job)
- 62 6 Has found new job
  - 7 Waiting for replies from employers
  - 8 Believes no work available (in area, or suited to skills)
  - 9 No reason given
  - 0 Other Specify in NOTES
    - Yes, because of:
  - 1 Own illness or disability
  - 2 Personal or family responsibilities
  - 3 Going to school
- 63 4 Already has a job
  - 0 Other Specify in NOTES
  - 5 No (Was available for work)
- "IN . . . "S JOB, WAS HE/SHE A PAID WORKER, SELF-EMPLOYED OR AN UNPAID FAMILY WORKER?"
  - 771N . . . S OTHER JOB, WAS HE/SHE A PAID WORKER, SELF-EMPLOYED OR AN UNPAID FAMILY WORKER?"

## Worked for Others

- 1 Paid worker
- 2 Unpaid family worker

## Self-Employed

- 3 Incorporated business With paid help
- 4 Incorporated business No paid help
- 5 Not incorporated business With paid help
- 6 Not incorporated business (Include self-employed without a business) - No paid help
- 1 Primary or secondary school
- 2 Community college, junior college, or CEGEP
- 3 University
- 0 Other Specify in NOTES

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