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Overview of Special Surveys 1992

Conducted by the
Household Surveys Division of Statistics Canada



*Years of
Excellence* *Ans
d'excellence*



Statistics
Canada

Statistique
Canada

Canada

ERRATUM

Overview of Special Surveys 1992

Note that prices will be revised October, 1993 for all data products emanating from the Household Surveys Division.

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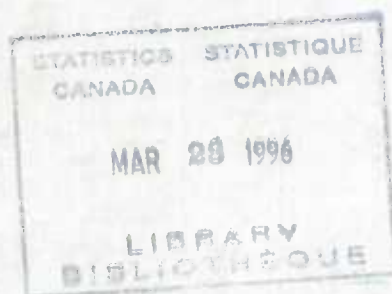


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INTRODUCTION

This report provides an overview of the Special Surveys Program managed by the Special Surveys Group within the Household Surveys Division of Statistics Canada.

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

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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 55,000 dwellings in the monthly Labour Force Survey. Statistical and methodological advice is provided by statisticians from the Bureau's Social Survey Methods Division.

DATA HOLDINGS OF THE SPECIAL SURVEYS GROUP

Since its 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. Included as Appendix A is a list of surveys conducted by the Special Surveys Group dating back to 1976. Data for most surveys are 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. Information on exactly what is available may be obtained by contacting:

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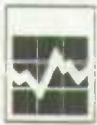
THE SPECIAL SURVEYS PROGRAM IN 1992

A number of interesting and innovative surveys were fielded in 1992. 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 the report were conducted as supplements to the monthly Labour Force Survey, copies of the LFS questionnaires and code sheets have been appended as Appendix B. This year, a list of abstracts of feasibility studies performed by the Special Surveys Group has been added. This list follows the list of surveys. Readers requiring additional information about any of the surveys contained in this report are encouraged to write or call the Dissemination and User Support Unit or the Project Manager listed with each survey. Interested users may also obtain copies of similar "Overviews" for the years 1966-1991.

Food Expenditure Survey in 1992



Survey Month:	January to December 1992		
Title:	Food Expenditure Survey in 1992		
Sponsor:	Statistics Canada		
Survey Method:	Personal interview placement and pick-up of two weekly diaries		
Sample Size:	1,350 households monthly		
Objectives:	<p>The Food Expenditure Survey collects detailed information on food expenditures.</p> <p>The Food Expenditure Survey is part of a wider programme of Family Expenditure Surveys which, since 1938, has collected detailed information on food, clothing, housing, transportation, and all other expenditures of households in Canada.</p>		
Project Manager:	Daniel Salois (951-4646)		
Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$1,100.00	



Food Expenditure Survey in 1992

Questionnaire

Confidential when completed

Collected under the Authority of the
Statistics Act, Revised Statutes of
Canada, 1985, Chapter S19.

Français au verso

FE2



P.S.U.	GROUP	CLUSTER	ROT	LIST

M	MONTH	N.I.

RECORD OF DROP-OFF AND PICK-UPS				
Visit	Date		Time (Use 24 hr. clock, hh:mm)	
	Day	Month	Began	Ended
Drop-off diaries				
Pick up first diary				
Pick up second diary				

Interviewer's signature	Code
-------------------------	------

O.C.

Office
Use

Record of Visits			
Visit Number	Date	Time	Comments

8-5100-14 1991-07-23 STC/HLD-045-60119



Canada

DETACH AND DESTROY BEFORE SHIPPING TO HEAD OFFICE

Listing address	Household contact:
	Telephone No.
	Area code

A. HOUSEHOLD COMPOSITION						
1.	2. What is relationship to the household reference person?	3.	4.	5.	6.	
<p>List given names of all members of this household who could be considered living here at the present time.</p> <p>List the household reference person first.</p>	<p>Related Person:</p> <p>02 Spouse</p> <p>03 Son/Daughter</p> <p>04 Grandchild</p> <p>05 Daughter-in-law/Son-in-law</p> <p>06 Foster child</p> <p>07 Father/Mother</p> <p>08 Mother-in-law/Father-in-law</p> <p>09 Brother/Sister</p> <p>10 Other relative (for example, nephew, cousin)</p> <p>Non-Related Person:</p> <p>11 Lodger</p> <p>12 Room-mate</p> <p>13 Other non-relative (for example, employee, lodger's wife)</p>	Age in years at time of interview	Sex: 1 Male 2 Female	Marital Status: 1 Married or common law spouse of a household member 2 Single, never married 3 Other	Office use	
Enter Person No.	Enter code		Enter code	Enter code		
001	002	003	004	005	006	
009	010	011	012	013	014	
017	018	019	020	021	022	
025	026	027	028	029	030	
033	034	035	036	037	038	
041	042	043	044	045	046	
049	050	051	052	053	054	
057	058	059	060	061	062	
065	066	067	068	069	070	
073	074	075	076	077	078	
081	082	083	084	085	086	
089	090	091	092	093	094	

HOUSEHOLD REFERENCE PERSON

The household reference person is the member of the household mainly responsible for its financial maintenance (i.e.: pays the rent, mortgage, taxes or electricity, etc.). This person can be either male or female. When all members of the household share equally, any member may be shown as the household reference person.

CHECK HOUSEHOLD MEMBERSHIP:

After listing members of the household, ask:

- Does anyone else live at this address?
- Are there any persons away who could be considered as living at this address?

Notes and Comments

◆ A											
<p>If age 15 or over and employed at any time in the last twelve months, report occupation of longest duration. If not employed report main activity.</p>	7.	8.	<p style="text-align: center;">Ask the following questions for reference person and spouse</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; padding: 5px;">REFERENCE PERSON</th> <th style="width: 50%; padding: 5px;">SPOUSE of Reference Person</th> </tr> <tr> <td colspan="2" style="padding: 5px;"> <p><input type="radio"/> No spouse ► Go to page 3</p> </td> </tr> <tr> <td style="padding: 5px;"> <p>9. What is the language this person first learned at home in childhood and still understands?</p> <p>01 <input type="radio"/> English</p> <p>02 <input type="radio"/> French</p> <p>03 <input type="radio"/> German</p> <p>04 <input type="radio"/> Italian</p> <p>05 <input type="radio"/> Ukrainian</p> <p><input type="radio"/> Other (Specify) _____</p> </td> <td style="padding: 5px;"> <p>13. What is the language this person first learned at home in childhood and still understands?</p> <p>01 <input type="radio"/> English</p> <p>02 <input type="radio"/> French</p> <p>03 <input type="radio"/> German</p> <p>04 <input type="radio"/> Italian</p> <p>05 <input type="radio"/> Ukrainian</p> <p><input type="radio"/> Other (Specify) _____</p> </td> </tr> <tr> <td style="text-align: center; padding: 5px;"> <div style="border: 1px solid black; display: inline-block; padding: 2px;">201</div> <div style="border: 1px solid black; width: 20px; height: 15px; display: inline-block; margin-left: 5px;"></div> Office use </td> <td style="text-align: center; padding: 5px;"> <div style="border: 1px solid black; display: inline-block; padding: 2px;">205</div> <div style="border: 1px solid black; width: 20px; height: 15px; display: inline-block; margin-left: 5px;"></div> Office use </td> </tr> </table>	REFERENCE PERSON	SPOUSE of Reference Person	<p><input type="radio"/> No spouse ► Go to page 3</p>		<p>9. What is the language this person first learned at home in childhood and still understands?</p> <p>01 <input type="radio"/> English</p> <p>02 <input type="radio"/> French</p> <p>03 <input type="radio"/> German</p> <p>04 <input type="radio"/> Italian</p> <p>05 <input type="radio"/> Ukrainian</p> <p><input type="radio"/> Other (Specify) _____</p>	<p>13. What is the language this person first learned at home in childhood and still understands?</p> <p>01 <input type="radio"/> English</p> <p>02 <input type="radio"/> French</p> <p>03 <input type="radio"/> German</p> <p>04 <input type="radio"/> Italian</p> <p>05 <input type="radio"/> Ukrainian</p> <p><input type="radio"/> Other (Specify) _____</p>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">201</div> <div style="border: 1px solid black; width: 20px; height: 15px; display: inline-block; margin-left: 5px;"></div> Office use	<div style="border: 1px solid black; display: inline-block; padding: 2px;">205</div> <div style="border: 1px solid black; width: 20px; height: 15px; display: inline-block; margin-left: 5px;"></div> Office use
	REFERENCE PERSON	SPOUSE of Reference Person									
<p><input type="radio"/> No spouse ► Go to page 3</p>											
<p>9. What is the language this person first learned at home in childhood and still understands?</p> <p>01 <input type="radio"/> English</p> <p>02 <input type="radio"/> French</p> <p>03 <input type="radio"/> German</p> <p>04 <input type="radio"/> Italian</p> <p>05 <input type="radio"/> Ukrainian</p> <p><input type="radio"/> Other (Specify) _____</p>	<p>13. What is the language this person first learned at home in childhood and still understands?</p> <p>01 <input type="radio"/> English</p> <p>02 <input type="radio"/> French</p> <p>03 <input type="radio"/> German</p> <p>04 <input type="radio"/> Italian</p> <p>05 <input type="radio"/> Ukrainian</p> <p><input type="radio"/> Other (Specify) _____</p>										
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007	008										
015	016	10.									
023	024	14.									
031	032	11.									
039	040	15.									
047	048	12.									
055	056	16.									
063	064										
071	072										
079	080										
087	088										
095	096										
<p>DEFINITIONS:</p> <p>ECONOMIC FAMILY:</p> <p>A group of TWO OR MORE persons who live in the same dwelling and are related to each other by BLOOD, MARRIAGE, ADOPTION OR COMMON-LAW.</p> <p>CENSUS FAMILY:</p> <p>Refers to a HUSBAND and a WIFE or TWO PERSONS LIVING COMMON-LAW with or without CHILDREN WHO HAVE NEVER BEEN MARRIED regardless of age; or a LONE-PARENT with one or more children who have NEVER been married, regardless of age. LIVING IN THE SAME DWELLING.</p>		<p>203 <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div></p> <p>204 <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div></p>									
		<p>202 <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div></p> <p>206 <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div></p> <p>207 <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div></p> <p>208 <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div></p>									

Notes and Comments

B. CHARACTERISTICS OF DWELLING OCCUPIED BY HOUSEHOLD

◆ B

1. Which type of dwelling does this household occupy...

1 Single Detached

6 Apartment in a building that has five or more storeys

Enter code

001

2 Double

8 Hotel, Rooming or Lodging House, Camp - Logging, Construction, etc.

3 Row or Terrace

9 Mobile Home

4 Duplex

0 Other - Specify

5 Apartment in a building that has less than five storeys

2. Is the above dwelling

1 Owned without mortgage

2 Owned with mortgage

3 Rented

4 Occupied rent-free

by a member of the household?

Enter code

002

003

1 ☐ Yes 2 ☐ No

004

1 ☐ Yes 2 ☐ No

005

1 ☐ Yes 2 ☐ No

3. In the last 12 months did any member of this household live on a farm?

4. In the last 12 months did any member of this household operate a farm?

5. Is your household equipped with a microwave oven?

C. HOUSEHOLD SPENDING HABITS

IN THE LAST FOUR WEEKS...

1. How much do you estimate this household spent on food and other groceries purchased from stores (including farmer stalls and home delivery)? **Exclude periods away from home overnight or longer.** Report bulk purchases of food for canning, freezing, etc. in Q.3.

Total cost

006

\$

007

\$

008

\$

009

1 ☐ Yes ☐ Continue

2 ☐ No ☐ Go to Question 5

010

\$

2. About how much of this amount was for non-food items such as paper products, household supplies, pet food, alcoholic beverages, etc.?

3. What amount was spent for bulk purchases of food, e.g. meat IN EXCESS of 25 kg. (55 lbs.); bulk quantities of fruit or vegetables for canning, freezing, etc.? (Include charges for cutting, wrapping and freezing)

4. Did this household buy any prepared food or non-alcoholic beverages from stores for parties, weddings and other occasions not reported in Q.1 or Q.3 above? (exclude restaurants and caterers)

a) What amount was spent?

IN THE LAST 12 MONTHS...

5. Has this household purchased any bulk quantities of meat IN EXCESS of 25 kg (55 lbs.) e.g. sides or quarters of beef, etc.?

Report quantities in either kilograms or pounds and indicate measure used.

Bulk meat reported in Q.3 above ('in the last four weeks') should also be reported here.

a) Beef in excess of 25 kg. (55 lbs.)

b) Pork in excess of 25 kg. (55 lbs.)

c) Other (specify) in excess of 25 kg. (55 lbs.)

How much was purchased?

012

☐ kg.

☐ lbs.

014

☐ kg.

☐ lbs.

016

☐ kg.

☐ lbs.

What was the total cost?

013

\$

015

\$

017

\$

Notes and Comments

D. FOOD AND BEVERAGES WHILE AWAY FROM HOME overnight or longer during the previous month

◆ D

1. Were any household members away from home overnight or longer during the month of _____?
(Interviewer: indicate previous month above)

001

1 ☐ Yes ► Continue

2 ☐ No ► Go to Section E

2. For each absence from home overnight or longer during the previous month, ...

	ABSENCE #1	ABSENCE #2	ABSENCE #3	ABSENCE #4
How many persons were away during this absence?	002 <input type="text"/>	004 <input type="text"/>	006 <input type="text"/>	008 <input type="text"/>
How many nights were these persons away?	003 <input type="text"/>	005 <input type="text"/>	007 <input type="text"/>	009 <input type="text"/>

Interviewer: Each meal taken by each person should be counted in question 3 and 4. For example, if two members were away for 3 nights and consumed three meals per day, then the total number of meals reported in Questions 3 and 4 should be 18 (i.e. 2 X 3 X 3).

3. How many of the meals consumed by members of the household while away overnight or longer, ...

a) were received free from friends or relatives?

020

b) were to be reimbursed as business expense?

021

c) were part of the price of a package trip?

022

d) were prepared from food brought from home or purchased from stores while away from home?

023

e) were part of board paid to other private households?

024

— how much board was paid?

025

\$

f) were received from any other source except restaurant?

026

For example, while in hospital.

4. Now, I would like to ask you some questions about food and non-alcoholic beverages purchased away from home, for which expenses were not reimbursed or part of package. Include tips, taxes and purchases made for guests.

PURCHASED FROM RESTAURANTS

"Restaurants" include a wide variety of food service outlets

		Table service restaurants	Fast food restaurants		Cafeterias	Other
			Eat-in or Drive-in	Take-out or Delivery		
BREAKFASTS	No. of meals	027 <input type="text"/>	029 <input type="text"/>	031 <input type="text"/>	033 <input type="text"/>	035 <input type="text"/>
	Expenditures	028 \$ <input type="text"/>	030 \$ <input type="text"/>	032 \$ <input type="text"/>	034 \$ <input type="text"/>	036 \$ <input type="text"/>
LUNCHES	No. of meals	037 <input type="text"/>	039 <input type="text"/>	041 <input type="text"/>	043 <input type="text"/>	045 <input type="text"/>
	Expenditures	038 \$ <input type="text"/>	040 \$ <input type="text"/>	042 \$ <input type="text"/>	044 \$ <input type="text"/>	046 \$ <input type="text"/>
DINNERS	No. of meals	047 <input type="text"/>	049 <input type="text"/>	051 <input type="text"/>	053 <input type="text"/>	055 <input type="text"/>
	Expenditures	048 \$ <input type="text"/>	050 \$ <input type="text"/>	052 \$ <input type="text"/>	054 \$ <input type="text"/>	056 \$ <input type="text"/>
BETWEEN MEAL FOOD, SNACKS AND NON-ALCOHOLIC BEVERAGES	Expenditures	057 \$ <input type="text"/>	058 \$ <input type="text"/>	059 \$ <input type="text"/>	060 \$ <input type="text"/>	061 \$ <input type="text"/>

Note: "Other" restaurants include refreshment stands, snack bars, vending machines, mobile canteens, chip wagons, caterers, coffee wagons, etc.

5. How much did this household spend on food and non-alcoholic beverages PURCHASED FROM STORES while away from home overnight or longer during the previous month. For example, snack food purchased from gasoline stations, food purchased from grocery stores, etc.?

062

\$

Notes and Comments

E. PERSONAL INCOME IN THE PAST TWELVE MONTHS

◆ E

Ask each of the following questions for each member 15 years of age or over. Transfer the given name for each household member from page 1 and enter here

Enter the person no. for each household member here

1. How many weeks did this member work in the past 12 months?
(a) full-time (include holidays with pay)

(b) part-time (include holidays with pay)

During the past 12 months what was this member's income from each of the following sources?

2. WAGES and SALARIES before deductions

3. MILITARY PAY and ALLOWANCES

4. NET income from SELF-EMPLOYMENT. Show gross income minus expenses. Deduct allowance for depreciation. In partnership give own share.

(a) NON-FARM unincorporated business and professional practice (include income in kind)

(i) Of the amount reported in 4a) how much is for income in kind?

(b) FARM (include income in kind)

(i) Of the amount reported in 4b) how much is for income in kind?

5. Gross income from ROOMERS and BOARDERS (exclude payments received from relatives)

6. INTEREST on bonds, deposits, savings certificates eg. interest on coupon bonds if coupons were cashed, etc. (exclude interest on RRSP)

7. DIVIDENDS (actual amount received, not taxable amount)

8. Other income from INVESTMENTS

a) Gross rent from owned property = \$
NET RENT from owned property (gross rent minus expenses)

b) OTHER income from estate or trust funds, interest from mortgage investments, dividends from insurance companies, etc.

9. FAMILY ALLOWANCE (to be reported by member who reported the non-refundable tax credit for dependant children. Include Quebec Allowance for Newborn Children.)

10. OLD AGE SECURITY, GUARANTEED INCOME SUPPLEMENT and SPOUSE'S ALLOWANCE (from federal government only)
Report Provincial Income Supplements in Question 13 below.

11. CANADA/QUEBEC PENSION PLAN benefits

12. UNEMPLOYMENT INSURANCE benefits. Report gross receipts before deductions for taxes, etc. (include sick and maternity benefits)

13. SOCIAL ASSISTANCE and PROVINCIAL INCOME SUPPLEMENTS

14. GOODS AND SERVICES TAX CREDIT

15. OTHER INCOME from GOVERNMENT SOURCES

Specify

16. Retirement pensions, superannuations, annuities

17. OTHER money income from child support, non-refundable scholarships and bursaries, money from other countries, or other money income not reported above (Please specify source of income in space below)

18. What amount was CLAIMED on 1991 income tax returns for:
18.1 Federal Child Tax Credits

18.2 Federal Sales Tax Credits

18.3 Provincial Tax Credits including Quebec Real Estate Tax Refund

Office
use only

001	027	053	079	105
002	028	054	080	106
003	029	055	081	107
004	\$ 030	\$ 056	\$ 082	\$ 108
005	031	057	083	109
006	032	058	084	110
007	033	059	085	111
008	034	060	086	112
009	035	061	087	113
010	036	062	088	114
011	037	063	089	115
012	038	064	090	116
013	039	065	091	117
014	040	066	092	118
015	041	067	093	119
016	042	068	094	120
017	043	069	095	121
018	044	070	096	122
019	045	071	097	123
020	046	072	098	124
021	047	073	099	125
022	048	074	100	126
023	049	075	101	127
024	050	076	102	128
025	051	077	103	129
026	052	078	104	130
251	252	253	254	255

Notes and Comments

F. DIARY FOLLOW-UP REPORT
◆ F

To be completed by the interviewer following each diary pick-up

Week 1

Week 2

1. a) Were any FOOD FROM STORES items entered on the diary during or after the follow-up? For example purchases recalled by respondent, or transcribed from cash register tapes.

001

- 1 ☐ All
2 ☐ None
3 ☐ Some of the items

009

- 1 ☐ All
2 ☐ None
3 ☐ Some of the items

 b) IF 'SOME'
What was the dollar value of these items?

002

\$

010

\$

2. a) Were any FOOD FROM RESTAURANTS items entered on the diary during or after the follow-up? For example purchases recalled by the respondent, or based on restaurant receipts.

003

- 1 ☐ All
2 ☐ None
3 ☐ Some of the items

011

- 1 ☐ All
2 ☐ None
3 ☐ Some of the items

 b) IF 'SOME'
What was the dollar value of these items?

004

\$

012

\$

3. What is the final completion status of each section of the diary?

a) Food and beverages from stores

005

- 1 ☐ Complete
2 ☐ Incomplete

013

- 1 ☐ Complete
2 ☐ Incomplete

b) Food and beverages from restaurants

006

- 1 ☐ Complete
2 ☐ Incomplete

014

- 1 ☐ Complete
2 ☐ Incomplete

4. If any sections were incomplete, or any problems were encountered in completing the diaries please comment below.

Week 1

007

Summary

Additional comments:

Week 2

008

Summary

Additional comments:

[illegible]



Food Expenditure Survey in 1992

Confidential when completed

Si vous préférez ce questionnaire en
français, veuillez cocher ☐

Collected under the Authority of the
Statistics Act, Revised Statutes of
Canada, 1985, Chapter S19

Diary of Food Purchases

FE3



- This diary covers 7 days beginning with
and ending with
- For each day, record all of your family's purchases of:
 - Food and beverages
 - Restaurant meals and snacks
- If you have any questions,
your Statistics Canada representative
can be contacted at
- He/She will return on
at to pick up this diary.

Thank you! We greatly appreciate your participation.

For office use only.

P.S.U.	GROUP	CLUSTER	ROT	LIST	M	MONTH	WK	START DATE	SCS/RCS	DATA CODE

H-5100-4.1: 1991-07-23 STC/HLD-045-60-13



Statistics
Canada

Statistique
Canada

Canada

Instructions

For each of the 7 days covered by this diary, list your household's **purchases** of:

- **food and non-alcoholic beverages purchased from stores**
- **food and all beverages purchased from restaurants**

Record **all of these** purchases, no matter how big or small — from packages of gum to sides of beef.

So you don't forget, make your entries as soon as possible after you get home.

Only record the day's **purchases**. Don't list home grown foods or gifts your household received.

Record bulk meat and freezer plans the day you receive your order.

Don't report purchases that are made while away from home overnight or longer.

Don't report purchases on the way to a vacation home, unless they were brought home first.

Indicate if a purchase was reported in U.S. dollars.

Start a new page each day of the diary. Write in the day of the week in the heading as shown here:

First day ►

Enter day
Tuesday

Check with members of your household at the end of each day to ensure all purchases are recorded. Snacks, soft drinks, and food from restaurants are easily forgotten.

Daily reminder list

Did you or other members of your household purchase . . .

- Food and beverages purchased from restaurants, cafeterias, snack bars, vending machines, etc.?
- Snacks such as potato chips, chocolate bars, soft drinks, etc.?
- Any other food or non-alcoholic beverages from stores?
- Beer, wine or spirits consumed in restaurants, bars, etc.?

Householder's notes

Instructions – continued

How to describe the food and beverages you purchase from stores:

The items you list in this diary will be grouped into about 300 different categories. To do this we need a detailed description of each item. Look at the descriptions in the example on the next page as well as the following pointers:

Milk

Specify if whole, 2%, 1%, skim, half and half, chocolate, condensed, evaporated, powdered, etc.

Cheese

Specify if processed cheese, cheese spread, cheese dip, cream cheese, grated cheese, etc.

Specify the type such as Cheddar, Gruyere, Parmesan, etc.

Meat and Poultry

Specify the type of meat and the cut. For example: beef round steak, pork loin roast, lamb shoulder chops, veal shank, pork livers, whole turkey, chicken giblets.

Uncooked Sausages

Specify if pure pork sausage, breakfast type, bratwurst, etc.

Cooked Meats

Specify if wieners, cooked sausage, sliced cooked meats or other cooked meats.

Fish and Seafood

Specify type (cod, tuna, scallops, shrimps, lobsters, etc) and if pre-cooked, breaded, canned, etc.

Fruits and Vegetables

Specify type (apples, cantaloupes, pineapples, green beans, broccoli, etc.). Describe if processed such as frozen french fried potatoes, stewed tomatoes or baked beans.

Infant and Junior Foods

Specify if formula, cereal, meat, vegetables, fruits, pudding, juice.

Beverages

Specify the type (orange juice, Hawaiian Punch, soft drinks, mineral water, etc.). Specify if it is carbonated, concentrated, etc.

Coffee

Specify if instant, ground or bean.

Nuts and Seeds

Specify type (peanuts, almonds, walnuts, sesame seeds, etc.). If they are in the shell, without shells, salted or unsalted.

Substitutes

Specify if non-butterfat substitute for cream including whipped cream, artificial sweetener, egg replacers, etc.

Bulk Meat

Specify the type of meat and if a side, front quarter, hind quarter. For other bulk purchases specify the cut.

The cash register tape is not a substitute for diarykeeping! Here's why:

Many store packaged items won't have specific descriptions. Words like "meat" and "bakery" don't tell us much.

Most people buy a number of non-food items at the grocery store. Items like laundry detergent, commercial pet food, light bulbs could be erroneously included in your food and beverage expenditures.

Many small purchases may be made by household members and the cash register tape may not be provided or is forgotten. These can add up to a lot of money over the week.

Use your tapes to help you record your food purchases.

Many modern check-out tapes contain the weights of produce, and in many cases are necessary to find out the price of an item. They will help you out when you can't list items in the diary before they are put away or eaten.

Use the step by step instructions on the following pages to enter your purchases in this diary.

Six steps to recording your food and non-alcoholic beverages purchased from stores

1 Write in your description of the item. (*Use the instructions on page 2 as a guide.*) Do not report alcoholic beverages. Report food for human consumption you purchased for a pet. (*for example, ground beef for a dog*). Don't report commercial pet food.

2 Enter one of the following codes to further describe the item:

Frozen (1)

- Items that are frozen at the time of purchase.
- Items defrosted by the grocer should be reported as "other" (code 4).

Canned/Bottled (2)

- Also include 'Tetra Pak' cartons and other aseptic containers.

Dried (3)

- Examples include: dried soups, dried fruits, instant mashed potatoes, powdered milk, etc.

Fresh and/or other (4)

- Any items that can't be described by the above three codes.
- Examples include: fluid milk, fresh fruits and vegetables, coffee beans, all purpose flour, fruit and nut mixtures.

3 Check the type of store this item was purchased from:

Food specialty stores:

Retail stores which offer a wide variety of a limited number of items. Included in this group are butcher stores, fresh produce stores, bakery shops, fish markets, candy and nut stores, delicatessens, health food stores, and soft drink outlets. Outdoor farmers' markets or stands are also included in this group, as are direct purchases from producers and frozen food provisioners.

Convenience stores:

Retail stores which offer a limited variety of a general line of groceries (food and non-food items). These stores normally have extended hours.

Supermarkets:

Retail stores which offer a wide variety of most grocery items (food and non-food). Retail co-operatives are included in this group.

Other:

Any other type of retail outlet involved in selling food items. Remember to include purchases of food items including confections and soft drinks obtained from non-food stores such as department stores, drug stores and other outlets. Purchases from restaurants (including vending machines) should be reported separately in the restaurant section.

4 Enter the number of items and the volume or weight of each item: Use either metric or imperial units of measurement, whichever is convenient.

& 5 When the weight or volume are unknown, try to estimate.

If unable to estimate, please describe the purchase. For example, 1 bunch of 6 small beets or, 3 cups of dried navy beans.

Alternative ways of entering quantity information:

For example, if a six-pack (170 ml each) of apple juice is purchased, the entries could be correctly entered in two different ways:

	Description	Number	Volume/Unit	Total cost
or	Apple juice	1	1.02 l	\$1.69
	Apple juice	6	170ml	\$1.69

6 **How much did this cost?**

Enter the total cost of the items described. For example, if you have listed 2 bunches of broccoli at \$.99 each, enter a total cost of \$1.98.

Do not include provincial sales taxes or the Goods and Services Tax (GST).

First day Enter day									
Food and beverages purchased from stores If none check here... <input type="checkbox"/>									
Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases. Enter code : (1) Frozen (2) Canned/bottled (3) Dried (4) Fresh/other	Office Use	Where was this item purchased				Number of cans, bottles, packages, etc.	Net weight or volume per unit (ex., 1 kg, 2 litres, 14 ozs. 5 lbs)	Total Cost <small>Exclude Any Sales Taxes</small>	
		Food specialty store	Convenience store	Super-market	Other store			\$	¢
Dairy, eggs and bakery products									
Processed cheese slices (4)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	250 g	2	29
Milk, 2% (4)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2	2 L	4	16
Layer cake ① (4)	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	9" diameter	3	29
② (2)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Meat, poultry, and fish (Indicate the cut of meat)									
Beef Striploin Steak (1)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2	5 lbs	52	16
Chicken livers (4)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	.98 lb	1	10
Pre-cooked codfish sticks (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	3	350 g	11	37
Pre-packaged sliced bologna (4)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	④	⑤ 175 g	1	54
()	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
()	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Fruits and vegetables									
Maraschino cherries (2)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	500 ml	4	97
Wax beans (2)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	2	14 ozs	1	64
Cauliflower (4)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	Head	2	49
()	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				⑥
()	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				

First day									
Food and beverages purchased from stores (Cont'd)									
Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases. Enter code : (1) Frozen (2) Canned/bottled (3) Dried (4) Fresh/other	Office Use	Where was this item purchased				Number of cans, bottles, packages, etc.	Net weight or volume per unit (ex., 1 kg, 2 litres, 14 ozs. 5 lbs)	Total Cost <small>Exclude Any Sales Taxes</small>	
		Food specialty store	Convenience store	Super-market	Other store			\$	¢
Beverages (Exclude alcoholic beverages)									
Orange juice concentrated (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	3	355 ml	3	24
Soft drinks carbonated (2)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	24	355 ml	9	49
()	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
()	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
All other food (Include snack foods)									
Ground cinnamon (2)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	113 g	3	79
Corn oil margarine (4)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	1 lb	1	68
Non-dairy coffee creamer (2)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	500 g	3	39
Peanuts without shells (4)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	500 g	2	25
Chocolate bar (4)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	100 g	1	22
All purpose flour (4)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	2.5 kg	4	29
Coffee beans (4)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	369 g	4	39
Frozen TV dinner (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	2	326 g	8	34
()	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
()	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
()	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				

Six steps to recording your restaurant purchases

Record all meals and snacks purchased by a member of the household, including meals purchased for guests.

- 1** Use the 'Breakfasts', 'Lunches', 'Dinners' and 'Between Meals Food and Beverages' categories in Column 1 to identify each of your purchases from restaurants. This space is for your own use to sort out purchases made by different members of the household. It will act as a reminder when reviewing your diary for completeness. It is not necessary to list the content of the purchases.
- 2** Indicate how many meals were included in your purchases. You should include meals for guests that were paid for by a member of the household.
- 3 & 4** **How much did you pay?** Include provincial sales taxes, the Goods and Services Tax (GST), and tips. If your bill included alcoholic beverages, subtract the cost from your total bill and report the costs separately in Columns 3 and 4. Don't report purchases that will be reimbursed such as expense account meals.
- 5** **Where was this purchased?**

"Restaurant" purchases include a wide variety of food service outlets. Mark a circle to indicate the type of restaurant for each purchase.

Table service restaurant:
Restaurants which take orders for and serve food and/or beverages at a table or eating counter. Tipping or service charges are often associated with this type of restaurant. If taverns, bars, pubs or lounges provide "table service", expenditures in these establishments are to be included in this category. *Note that this category should be indicated even if the purchases are taken out or delivered.*

Fast food restaurant:
Restaurants other than table service where food and beverages are ordered and received in a minimum of time. The menu tends to be limited and tipping is not a practice. These restaurants usually specialize in foods such as hamburgers, pizza, Chinese food, fried chicken, BBQ ribs, submarine sandwiches, ice cream, etc.

Eat-in or drive-in:
This type of fast food restaurant provides a sit-down eating area and/or a parking area for in-car consumption. This category should be indicated even though the purchase is consumed off the premises.

Take-out or delivery:
This type of restaurant normally does not provide any eating area, inside or out.

Cafeteria:
This is a private or public self-service eating place where a tray is provided on which to carry food items selected to a cashier. A sit-down eating area is provided and a limited hot food menu typically varies from day to day. The hours of operation are normally linked to those of an associated enterprise or institution such as school, factory, office buildings, hospital, shopping centre or department store.

Other:
Refreshment stands, snack bars, vending machines, mobile canteens, chip wagons, caterers, coffee wagons, etc.
A refreshment stand or snack bar is different from a fast food restaurant in that a sit-down or drive-in eating area is normally not provided although purchases are usually made for consumption in the vicinity. This service is generally provided in conjunction with other facilities or events such as shopping malls, supermarkets, theatres, exhibitions, sports events, parks, etc.
- 6** **Where was this consumed?**

Mark a circle to indicate whether the purchase was consumed on the premises or not. For example, if you brought a pizza home from a table service Italian restaurant, you would check "Table service restaurant" and "off the premises".

First day									
Food and beverages purchased from stores(Cont'd)									
Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases.	Office Use	Where was this item purchased				Number of cans, bottles, packages, etc.	Net weight or volume per unit (ex., 1 kg, 2 litres, 14 ozs, 5 lbs)	Total Cost <small>Exclude Any Sales Taxes</small>	
Enter code : _____ (1) Frozen (3) Dried (2) Canned/bottled (4) Fresh/other		Food specialty store	Convenience store	Super-market	Other store			\$	¢
Beverages (Exclude alcoholic beverages)									
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
All other food (Include snack foods)									
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮
()		1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>				⋮

Include: - meals bought for guests - purchases in restaurants, drive-ins, snack bars, vending machines, mobile canteens, etc. - meals, snacks, beverages, ice cream, candy, etc.	Office Use	If meals give num- ber	Total cost <i>Include tips and all sales taxes</i>		Where was this item purchased? <i>Mark one circle for each line</i>						Was this consumed ... <i>Mark one circle for each line</i>									
			Food and non-alcoholic beverages	Alcoholic beverages	Table service restau- rant	Fast food restaurant		Cafeteria	Other	on the premises	off the premises									
						Eat-in or drive-in	Take-out or delivery													
			\$	¢	\$	¢														
Use this space as a reminder (see examples)																				
Breakfasts																				
Husband on way to work		1	3	55			1	0	2	0	3	0	4	0	5	0	1	0	2	0
							1	0	2	X	3	0	4	0	5	0	1	X	2	0
							1	0	2	0	3	0	4	0	5	0	1	0	2	0
							1	0	2	0	3	0	4	0	5	0	1	0	2	0
Lunches																				
Son's school lunch		1	2	30			1	0	2	0	3	0	4	X	5	0	1	X	2	0
Outing with office		1	9	15	5	30	1	X	2	0	3	0	4	0	5	0	1	X	2	0
							1	0	2	0	3	0	4	0	5	0	1	0	2	0
							1	0	2	0	3	0	4	0	5	0	1	0	2	0
Dinners																				
Sent out		4	25	70			1	0	2	0	3	X	4	0	5	0	1	0	2	X
Son's date		2	54	00	9	50	1	X	2	0	3	0	4	0	5	0	1	X	2	0
							1	0	2	0	3	0	4	0	5	0	1	0	2	0
							1	0	2	0	3	0	4	0	5	0	1	0	2	0
Between meals food and beverages																				
Daughter Shopping			1	10			1	0	2	0	3	0	4	0	5	X	1	X	2	0
Coffee Breaks			1	50			1	0	2	0	3	0	4	X	5	0	1	0	2	X
After movies			9	50	12	75	1	X	2	0	3	0	4	0	5	0	1	X	2	0
Popcorn			2	50			1	0	2	0	3	0	4	0	5	X	1	X	2	0
							1	0	2	0	3	0	4	0	5	0	1	0	2	0

First day

Enter day

◆1

Food and beverages purchased from stores

If none check here... ☐

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases.

Enter code :

- (1) Frozen (3) Dried
(2) Canned/bottled (4) Fresh/other

Office Use

Where was this item purchased

Food specialty store

Convenience store

Super-market

Other store

Number of cans, bottles, packages, etc.

Net weight or volume per unit
(ex., 1 kg, 2 litres, 14 ozs, 5 lbs)

Total Cost
Exclude Any Sales taxes

\$ €

Dairy, eggs and bakery products

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Meat, poultry, and fish (Indicate the cut of meat)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Fruits and vegetables

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

► Note: If there is insufficient space to enter your purchases made this day, use pages 21 and 22.

First day

◆1

Food and beverages purchased from stores(Cont'd)

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases. Enter code : _____ (1) Frozen (3) Dried (2) Canned/bottled (4) Fresh/other	Office Use	Where was this item purchased				Number of cans, bottles, packages, etc.	Net weight or volume per unit (ex., 1 kg, 2 litres, 14 ozs, 5 lbs)	Total Cost Exclude Any Sales Taxes	
		Food specialty store	Convenience store	Super-market	Other store			\$	¢

Beverages (Exclude alcoholic beverages)

()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				

All other food (Include snack foods)

()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				

Food and beverages purchased from restaurants

If none check here... ○

Include: - meals bought for guests - purchases in restaurants, drive-ins, snack bars, vending machines, mobile canteens, etc. - meals, snacks, beverages, ice cream, candy, etc. Use this space as a reminder (see examples)	Office Use	If meals give number	Total cost Include tips and all sales taxes		Where was this item purchased? Mark one circle for each line					Was this consumed... Mark one circle for each line	
			Food and non-alcoholic beverages	Alcoholic beverages	Table service restaurant	Fast food restaurant		Cafeteria	Other	on the premises	off the premises
						Eat-in or drive-in	Take-out or delivery				

Breakfasts

					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○

Lunches

					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○

Dinners

					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○

Between meals food and beverages

					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○

► Note: Check the appropriate "none circle" if no purchases were made today.

Second day

Enter day

◆2

Food and beverages purchased from stores

If none check here... ☐

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases.

Enter code:

(1) Frozen
(2) Canned/bottled

(3) Dried
(4) Fresh/other

Office Use

Where was this item purchased

Food specialty store

Convenience store

Super-market

Other store

Number of cans, bottles, packages, etc.

Net weight or volume per unit
(ex., 1 kg, 2 litres, 14 ozs, 5 lbs)

Total Cost
Exclude Any Sales taxes

\$

¢

Dairy, eggs and bakery products

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Meat, poultry, and fish (Indicate the cut of meat)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Fruits and vegetables

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

► Note: If there is insufficient space to enter your purchases made this day, use pages 21 and 22.

Second day

◆2

Food and beverages purchased from stores(Cont'd)

Describe the item purchased such as *canned tuna, all purpose flour, soda crackers, etc.* Include any bulk purchases.

Enter code : _____

- (1) Frozen (3) Dried
(2) Canned/bottled (4) Fresh/other

Office Use

Where was this item purchased

Food specialty store Convenience store Super-market Other store

Number of cans, bottles, packages, etc.

Net weight or volume per unit
(ex., 1 kg, 2 litres, 14 ozs. 5 lbs)

Total Cost
Exclude Any Sales Taxes

\$: €

Beverages (Exclude alcoholic beverages)

()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				

All other food (Include snack foods)

()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				
()	1	2	3	4				

Food and beverages purchased from restaurants

If none check here... ☐

Include:

- meals bought for guests
- purchases in restaurants, drive-ins, snack bars, vending machines, mobile canteens, etc.
- meals, snacks, beverages, ice cream, candy, etc.

Use this space as a reminder
(see examples)

Office Use

If meals give number

Total cost
Include tips and all sales taxes

Food and non-alcoholic beverages
Alcoholic beverages
\$: € \$: €

Where was this item purchased?
Mark one circle for each line

Table service restaurant

Fast food restaurant
Eat-in or drive-in Take-out or delivery

Caterer Other

Was this consumed

Mark one circle for each line
on the premises off the premises

Breakfasts

					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2

Lunches

					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2

Dinners

					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2

Between meals food and beverages

					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2

► Note: Check the appropriate "none circle" if no purchases were made today.

Third day

Enter day

◆3

Food and beverages purchased from stores

If none check here... ☐

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases.

Enter code :

- (1) Frozen (3) Dried
(2) Canned/bottled (4) Fresh/other

Office Use

Where was this item purchased

Food specialty store Convenience store Super-market Other store

Number of cans, bottles, packages, etc.

Net weight or volume per unit
(ex., 1 kg, 2 litres, 14 ozs, 5 lbs)

Total Cost
Exclude Any Sales taxes

\$:

Dairy, eggs and bakery products

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Meat, poultry, and fish (Indicate the cut of meat)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Fruits and vegetables

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

► Note: If there is insufficient space to enter your purchases made this day, use pages 21 and 22.

Third day

◆3

Food and beverages purchased from stores(Cont'd)

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases.

Enter code :

- (1) Frozen (3) Dried
(2) Canned/bottled (4) Fresh/other

Office Use

Where was this item purchased

Number of cans, bottles, packages, etc.

Net weight or volume per unit
(ex., 1 kg, 2 litres, 14 ozs, 5 lbs)

Total Cost

Exclude Any Sales Taxes

\$: ¢

Beverages (Exclude alcoholic beverages)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

All other food (Include snack foods)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Food and beverages purchased from restaurants

If none check here... ☐

Include:

- meals bought for guests
- purchases in restaurants, drive-ins, snack bars, vending machines, mobile canteens, etc.
- meals, snacks, beverages, ice cream, candy, etc.

Use this space as a reminder (see examples)

Office Use

If meals give number

Total cost
Include tips and all sales taxes

Food and non-alcoholic beverages

Alcoholic beverages

\$: ¢

\$: ¢

Where was this item purchased?

Mark one circle for each line

Table service restaurant

Fast food restaurant

Eat-in or drive-in

Take-out or delivery

Cafeteria

Other

Was this consumed...

Mark one circle for each line

on the premises off the premises

Breakfasts

					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2

Lunches

					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2

Dinners

					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2

Between meals food and beverages

					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2
					1	2	3	4	5	1	2

► Note: Check the appropriate "none circle" if no purchases were made today.

Fourth day

Enter day

4

Food and beverages purchased from stores

If none check here... ☐

Describe the item purchased such as *canned tuna, all purpose flour, soda crackers, etc.* Include any bulk purchases.

Enter code :

(1) Frozen

(2) Canned/bottled

(3) Dried

(4) Fresh/other

Office
Use

Where was
this item purchased

Food
specialty
store

Conve-
nience
store

Super-
market

Other
store

Number of
cans,
bottles,
packages,
etc.

Net weight
or volume
per unit
(ex., 1 kg,
2 litres,
14 ozs, 5 lbs)

Total Cost
Exclude Any
Sales taxes

\$

¢

Dairy, eggs and bakery products

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Meat, poultry, and fish (Indicate the cut of meat)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Fruits and vegetables

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Note: If there is insufficient space to enter your purchases made this day, use pages 21 and 22.

Fourth day

◆4

Food and beverages purchased from stores(Cont'd)

Describe the item purchased such as <i>canned tuna</i> , all purpose flour, <i>soda crackers</i> , etc. Include any bulk purchases.	Office Use	Where was this item purchased				Number of cans, bottles, packages, etc.	Net weight or volume per unit (ex., 1 kg, 2 litres, 14 ozs, 5 lbs)	Total Cost <small>Exclude Any Sales Taxes</small>	
		Food specialty store	Convenience store	Super-market	Other store			\$	¢
Enter code : _____ (1) Frozen (3) Dried (2) Canned/bottled (4) Fresh/other									
Beverages (Exclude alcoholic beverages)									
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
All other food (Include snack foods)									
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				
_____ ()		1○	2○	3○	4○				

Food and beverages purchased from restaurants

If none check here... ○

Include: — meals bought for guests — purchases in restaurants, drive-ins, snack bars, vending machines, mobile canteens, etc. — meals, snacks, beverages, ice cream, candy, etc. Use this space as a reminder (see examples)	Office Use	If meals give number	Total cost <small>Include tips and all sales taxes</small>				Where was this item purchased? <small>Mark one circle for each line</small>					Was this consumed... <small>Mark one circle for each line</small>	
			Food and non-alcoholic beverages		Alcoholic beverages		Table service restaurant	Fast food restaurant		Cafeteria	Other	on the premises	off the premises
			\$	¢	\$	¢		Eat-in or drive-in	Take-out or delivery				
Breakfasts													
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
Lunches													
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
Dinners													
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
Between meals food and beverages													
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○
_____							1○	2○	3○	4○	5○	1○	2○

► Note: Check the appropriate "none circle" if no purchases were made today.

Enter day

◆5

Food and beverages purchased from stores

If none check here... ☐

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases.

Enter code :

- (1) Frozen (3) Dried
(2) Canned/bottled (4) Fresh/other

Off
Use

Where was
this item purchased

Food
specialty
store

Convenience store

Super-market

Other
store

Number
cans,
bottles,
etc.

**Net weight
or volume
per unit**
(ex., 1 kg.
2 litres,
14 ozs, 5 lbs)

Total Cost
Exclude Any
Sales taxes

\$: ¢

Dairy, eggs and bakery products

[illegible]

Meat, poultry, and fish (Indicate the cut of meat)

[illegible]

Fruits and vegetables

[illegible]

Fifth day

◆5

Food and beverages purchased from stores(Cont'd)

Describe the item purchased such as *canned tuna, all purpose flour, soda crackers, etc.* Include any bulk purchases.

Enter code :

(1) Frozen

(3) Dried

(2) Canned/bottled

(4) Fresh/other

Office Use

Where was this item purchased

Food specialty store

Convenience store

Supermarket

Other store

Number of cans, bottles, packages, etc.

Net weight or volume per unit

(ex., 1 kg, 2 litres, 14 ozs, 5 lbs)

Total Cost

Exclude Any Sales Taxes

\$

€

Beverages (Exclude alcoholic beverages)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

All other food (Include snack foods)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Food and beverages purchased from restaurants

If none check here... ☐

Include:

- meals bought for guests
- purchases in restaurants, drive-ins, snack bars, vending machines, mobile canteens, etc.
- meals, snacks, beverages, ice cream, candy, etc.

Use this space as a reminder (see examples)

Office Use

If meals give number

Total cost Include tips and all sales taxes

Food and non-alcoholic beverages

Alcoholic beverages

\$ € \$ €

Where was this item purchased? Mark one circle for each line

Fast food restaurant

Table service restaurant

Est-in or drive-in

Take-out or delivery

Cafeteria

Other

Was this consumed... Mark one circle for each line

on the premises

off the premises

Breakfasts

						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2

Lunches

						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2

Dinners

						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2

Between meals food and beverages

						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2

► Note: Check the appropriate "none circle" if no purchases were made today.

Food and beverages purchased from stores

If none check here... ☐

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases.

Enter code :

(1) Frozen

(3) Dried

(2) Canned/bottled

(4) Fresh/other

Office Use

Where was this item purchased

Food specialty store

Convenience store

Super-market

Other store

Number of cans, bottles, packages, etc.

Net weight or volume per unit
(ex., 1 kg, 2 litres, 14 ozs, 5 lbs)

Total Cost
Exclude Any Sales Taxes

\$

¢

Dairy, eggs and bakery products

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Meat, poultry, and fish (Indicate the cut of meat)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Fruits and vegetables

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Sixth day

◆6

Food and beverages purchased from stores(Cont'd)

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases. Enter code : _____ (1) Frozen (3) Dried (2) Canned/bottled (4) Fresh/other	Office Use	Where was this item purchased				Number of cans, bottles, packages, etc.	Net weight or volume per unit (ex., 1 kg, 2 litres, 14 ozs, 5 lbs)	Total Cost <small>Exclude Any Sales Taxes</small>	
		Food specialty store	Convenience store	Supermarket	Other store			\$	¢
Beverages (Exclude alcoholic beverages)									
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
All other food (Include snack foods)									
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				
()		1○	2○	3○	4○				

Food and beverages purchased from restaurants

If none check here... ○

Include: - meals bought for guests - purchases in restaurants, drive-ins, snack bars, vending machines, mobile canteens, etc. - meals, snacks, beverages, ice cream, candy, etc. Use this space as a reminder (see examples)	Office Use	If meals give number	Total cost <small>Include tips and all sales taxes</small>		Where was this item purchased? <small>Mark one circle for each line</small>					Was this consumed... <small>Mark one circle for each line</small>	
			Food and non-alcoholic beverages	Alcoholic beverages	Table service restaurant	Fast food restaurant		Cafeteria	Other	on the premises	off the premises
						Eat-in or drive-in	Take-out or delivery				
Breakfasts											
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
Lunches											
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
Dinners											
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
Between meals food and beverages											
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○
					1○	2○	3○	4○	5○	1○	2○

► Note: Check the appropriate "none circle" if no purchases were made today.

Page 18

Seventh day

Enter day

7

Food and beverages purchased from stores

If none check here... ☐

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases.

Enter code :

(1) Frozen

(3) Dried

(2) Canned/bottled

(4) Fresh/other

Office Use

Where was this item purchased

Food specialty store

Convenience store

Supermarket

Other store

Number of cans, bottles, packages, etc.

Net weight or volume per unit

(ex., 1 kg, 2 litres, 14 ozs, 5 lbs)

Total Cost Exclude Any Sales taxes

\$

¢

Dairy, eggs and bakery products

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Meat, poultry, and fish (Indicate the cut of meat)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Fruits and vegetables

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Note: If there is insufficient space to enter your purchases made this day, use pages 21 and 22.

Seventh day

◆7

Food and beverages purchased from stores(Cont'd)

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases.

Enter code :

(1) Frozen

(3) Dried

(2) Canned/bottled

(4) Fresh/other

Office Use

Where was this item purchased

Food specialty store

Convenience store

Super-market

Other store

Number of cans, bottles, packages, etc.

Net weight or volume per unit
(ex., 1 kg, 2 litres, 14 ozs, 5 lbs)

Total Cost

Exclude Am Sales Taxes

\$: €

Beverages (Exclude alcoholic beverages)

()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			

All other food (Include snack foods)

()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			
()		1	2	3	4			

Food and beverages purchased from restaurants

If none check here . . . ☐

Include:

- meals bought for guests
- purchases in restaurants, drive-ins, snack bars, vending machines, mobile canteens, etc.
- meals, snacks, beverages, ice cream, candy, etc.

Use this space as a reminder (see examples)

Office Use

If meals give number

Total cost
Include tips and all sales taxes

Food and non-alcoholic beverages

Alcoholic beverages

\$: € \$: €

Where was this item purchased?
Mark one circle for each line

Table service restaurant

Fast food restaurant

Eat-in or drive-in

Take-out or delivery

Cafeteria

Other

Was this consumed...

Mark one circle for each line

on the premises off the premises

Breakfasts

						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2

Lunches

						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2

Dinners

						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2

Between meals food and beverages

						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2
						1	2	3	4	5	1	2

► Note: Check the appropriate "none circle" if no purchases were made today.

Additional page

Use this page when you run out of space on a day page.
Enter the day number for each entry.

◆8

Food and beverages purchased from stores

If none check here... ☐

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases.

Enter code:

- (1) Frozen
(2) Canned/bottled

- (3) Dried
(4) Fresh/other

Office
Use

Where was
this item purchased

Food
specialty
store

Conve-
nience
store

Super-
market

Other
store

Number of
cans,
bottles,
packages,
etc.

Net weight
or volume
per unit
(ex., 1 kg,
2 litres,
14 ozs, 5 lbs)

Total Cost
Exclude Any
Sales taxes

\$ €

Dairy, eggs and bakery products

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Meat, poultry, and fish (Indicate the cut of meat)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
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()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Fruits and vegetables

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

► Note: If there is insufficient space to enter your purchases made this day, use pages 21 and 22.

Additional page

◆8

Food and beverages purchased from stores(Cont'd)

Describe the item purchased such as canned tuna, all purpose flour, soda crackers, etc. Include any bulk purchases.

Enter code :

(1) Frozen

(3) Dried

(2) Canned/bottled

(4) Fresh/other

Office Use

Where was this item purchased

Food specialty store

Convenience store

Super-market

Other store

Number of cans, bottles, packages, etc.

Net weight or volume per unit
(ex., 1 kg, 2 litres, 14 ozs, 5 lbs)

Total Cost
Exclude Any Sales Taxes

\$: ¢

Beverages (Exclude alcoholic beverages)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

All other food (Include snack foods)

()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			
()	1	2	3	4			

Food and beverages purchased from restaurants

If none check here . . . ☐

Include:

- meals bought for guests
- purchases in restaurants, drive-ins, snack bars, vending machines, mobile canteens, etc.
- meals, snacks, beverages, ice cream, candy, etc.

Office Use

If meals give number

Total cost
Include tips and all sales taxes

Food and non-alcoholic beverages

Alcoholic beverages

\$: ¢

\$: ¢

Where was this item purchased?

Mark one circle for each line

Table service restaurant

Fast food restaurant

Eat-in or drive-in

Take-out or delivery

Cafeteria

Other

Was this consumed...

Mark one circle for each line

on the premises

off the premises

Use this space as a reminder
(see examples)

Breakfasts

	1	2	3	4	5	1	2
	1	2	3	4	5	1	2
	1	2	3	4	5	1	2
	1	2	3	4	5	1	2

Lunches

	1	2	3	4	5	1	2
	1	2	3	4	5	1	2
	1	2	3	4	5	1	2
	1	2	3	4	5	1	2

Dinners

	1	2	3	4	5	1	2
	1	2	3	4	5	1	2
	1	2	3	4	5	1	2
	1	2	3	4	5	1	2

Between meals food and beverages

	1	2	3	4	5	1	2
	1	2	3	4	5	1	2
	1	2	3	4	5	1	2
	1	2	3	4	5	1	2
	1	2	3	4	5	1	2

► Note: Check the appropriate "none circle" if no purchases were made today.

1. In what city, town, or village were most of these expenditures made?

- ☐
- Same

☐ Different, specificity

Office
Use

001

2. Where any household members away from home overnight or longer during this 7 day period?

002

- 1 ☐ Yes
2 ☐ No

		Absence #1	Absence #2	Absence #3	Absence #4
If "Yes"	How many persons were away during this period?	003 <input type="text"/>	005 <input type="text"/>	007 <input type="text"/>	009 <input type="text"/>
	How many nights were these persons away?	004 <input type="text"/>	006 <input type="text"/>	008 <input type="text"/>	010 <input type="text"/>

The following questions refer to this diary's 7 day period and exclude activities away from home overnight or longer.

3. How many meals were purchased in restaurants for guests or other non-household members? (include takeout)

Interviewer : These meals should also be included in the restaurant expenditure section of the diary.

023

4. How many other meals did your household serve to guests or other non-household members?

024

5. How many restaurant meals did household members **receive** from friends or relatives?

025

6. How many other restaurant meals were **received** free or **reimbursed** (such as business lunches for which expenses will be reimbursed)?

026

7. How many other free meals were received (such as dinner at a friend's home)?

027

8. What was the estimated value of any gifts of food, food from your own farm or garden, or from hunting or fishing during this 7 day period?

028

6A

Verification — Review the diary for completeness. Check that . . .

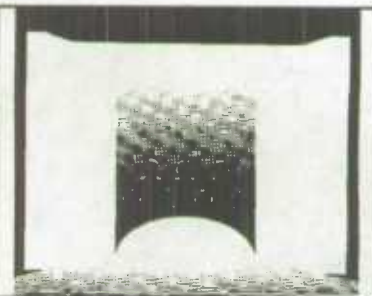
- food expenditures for each household member at home have been recorded.
- each food item has been recorded in the detail required.
- all meals eaten out by this household have been recorded.
- the day code is entered for each item recorded on the additional pages.

Where no entry has been made for a category and the 'none' circle is not checked, ask if any purchases were made.

NOTES AND COMMENTS

[illegible]

Adult Education and Training Survey



Survey Month:	January 1992		
Title:	Adult Education and Training Survey		
Sponsor:	Employment and Immigration Canada		
Survey Method:	Personal/Telephone Interview		
Sample Size:	Persons aged 17 years and over in LFS rotation groups 2, 3, 4, 5 and 6		
Objectives:	The basic objective is to provide data on the number of persons who participated in adult education and training programs and courses during 1991. The secondary objectives include: to identify the types of education/training received, to identify -- who provides education/training; the duration of education/training; the motivation for education/training; the types of financial assistance received; barriers to training and education; and the background characteristics of the respondent.		
Project Manager:	Stephen Arrowsmith (951-0566)		
Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$1,000.00	

**Adult Education and Training Survey****F 06**

Confidential when completed

Collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985 Chapter S19

<div style="border: 1px solid black; height: 150px; margin-bottom: 10px;"></div> <p style="text-align: center; margin-top: 0;">AFFIX LABEL HERE</p>	<table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 33%; border-bottom: 1px solid black; text-align: center;">1</td><td style="width: 33%; border-bottom: 1px solid black; text-align: center;">2</td><td style="width: 33%; border-bottom: 1px solid black; text-align: center;">3</td></tr><tr><td style="text-align: center; font-size: small;">Docket No.</td><td style="text-align: center; font-size: small;">Sequence No.</td><td style="text-align: center; font-size: small;">Survey Date</td></tr><tr><td style="border-bottom: 1px solid black; text-align: center;">4</td><td style="border-bottom: 1px solid black; text-align: center;">5</td><td></td></tr><tr><td style="text-align: center; font-size: x-small;">HRD page line No.</td><td style="text-align: center; font-size: x-small;">Assignment</td><td></td></tr><tr><td style="border-bottom: 1px solid black; text-align: center;">6</td><td style="border-bottom: 1px solid black; text-align: center;">-</td><td style="border-bottom: 1px solid black; text-align: center;">-</td></tr><tr><td colspan="3" style="text-align: center; font-size: x-small;">Telephone No.</td></tr><tr><td colspan="3" style="border-bottom: 1px solid black;"></td></tr><tr><td colspan="3" style="text-align: center; font-size: x-small;">Given Name</td></tr><tr><td colspan="3" style="border-bottom: 1px solid black;"></td></tr><tr><td colspan="3" style="text-align: center; font-size: x-small;">Surname</td></tr><tr><td colspan="3" style="border-bottom: 1px solid black;"></td></tr><tr><td colspan="2" style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td></tr><tr><td colspan="2" style="text-align: center; font-size: x-small;">Language</td><td style="text-align: center; font-size: x-small;">Age</td></tr></table>	1	2	3	Docket No.	Sequence No.	Survey Date	4	5		HRD page line No.	Assignment		6	-	-	Telephone No.						Given Name						Surname									Language		Age
1	2	3																																						
Docket No.	Sequence No.	Survey Date																																						
4	5																																							
HRD page line No.	Assignment																																							
6	-	-																																						
Telephone No.																																								
Given Name																																								
Surname																																								
Language		Age																																						
10. Completion status: Completed <input type="radio"/> Partially Completed <input type="radio"/> Non-response to LFS <input type="radio"/> Other <input type="radio"/>	11. Record of calls/appointments: <table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 20%; text-align: left; font-size: small;">Date</th><th style="width: 80%; text-align: left; font-size: small;">Notes</th></tr></thead><tbody><tr><td>1.</td><td>_____</td></tr><tr><td>2.</td><td>_____</td></tr><tr><td>3.</td><td>_____</td></tr><tr><td>4.</td><td>_____</td></tr><tr><td>5.</td><td>_____</td></tr></tbody></table>	Date	Notes	1.	_____	2.	_____	3.	_____	4.	_____	5.	_____																											
Date	Notes																																							
1.	_____																																							
2.	_____																																							
3.	_____																																							
4.	_____																																							
5.	_____																																							
INTERVIEWER CHECK ITEM:																																								
12. Has there been any change in household members 17 years of age or over? Yes <input type="radio"/> Go to 13 No <input type="radio"/> Go to 14																																								
<table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%; vertical-align: top; padding: 5px;">13. List ages of all household members 17 or over from oldest to youngest. 1. _____ <input type="radio"/> 2. _____ <input type="radio"/> 3. _____ <input type="radio"/> 4. _____ <input type="radio"/> 5. _____ <input type="radio"/> 6. _____ <input type="radio"/> 7. _____ <input type="radio"/> 8. _____ <input type="radio"/> 9. _____ <input type="radio"/></td><td style="width: 50%; vertical-align: top; padding: 5px;">Refer to selection grid and mark an "X" beside selected respondent. COMPLETE ITEMS 1 TO 9 AND GO TO 14.</td></tr></table>		13. List ages of all household members 17 or over from oldest to youngest. 1. _____ <input type="radio"/> 2. _____ <input type="radio"/> 3. _____ <input type="radio"/> 4. _____ <input type="radio"/> 5. _____ <input type="radio"/> 6. _____ <input type="radio"/> 7. _____ <input type="radio"/> 8. _____ <input type="radio"/> 9. _____ <input type="radio"/>	Refer to selection grid and mark an "X" beside selected respondent. COMPLETE ITEMS 1 TO 9 AND GO TO 14.																																					
13. List ages of all household members 17 or over from oldest to youngest. 1. _____ <input type="radio"/> 2. _____ <input type="radio"/> 3. _____ <input type="radio"/> 4. _____ <input type="radio"/> 5. _____ <input type="radio"/> 6. _____ <input type="radio"/> 7. _____ <input type="radio"/> 8. _____ <input type="radio"/> 9. _____ <input type="radio"/>	Refer to selection grid and mark an "X" beside selected respondent. COMPLETE ITEMS 1 TO 9 AND GO TO 14.																																							
14. For this month's supplementary survey, the person selected for the interview is Is he/she there? Yes <input type="radio"/> Go to 15 No <input type="radio"/> Set up appointment and record in 11																																								
15. Hello! I'm ... from Statistics Canada. We are conducting a survey for Employment and Immigration Canada about education and training. Although the survey is voluntary, your participation is important if the results of the survey are to be accurate. Your answers will be kept confidential under the Statistics Act.																																								

SECTION A. SCREENING QUESTIONS

16. During the past 12 months, that is, since January 1991, did you receive any training or education including courses, private lessons, correspondence courses, workshops, on-the-job training, apprenticeship training, arts, crafts, recreation courses, or any other training or education?

Yes ¹ ☐ Go to 17

No ² ☐ Go to 21



INTERVIEWER CHECK ITEMS:

(Age and employment status)

17. Form 03

Is age in item 33, 70 or over?

Yes ☐ Go to 67

No ☐ Go to 18

21. Form 03

Is age in item 33, 70 or over?

Yes ☐ Go to 120

No ☐ Go to 22

18. Form 05

Is year in item 51 equal to 1991 or 1992?

Yes ☐ Go to 24

No ☐ Go to 19

22. Form 05

Is year in item 51 equal to 1991 or 1992?

Yes ☐ Go to 113

No ☐ Go to 22a

19. Form 05

Is year in item 51 blank?

Yes ☐ Go to 20

No ☐ Go to 67

22a. Form 05

Is year in item 51 blank?

Yes ☐ Go to 23

No ☐ Go to 120

20. Form 05

Is year in item 73 blank?

Yes ☐ Go to 67

No ☐ Go to 25

23. Form 05

Is year in item 73 blank?

Yes ☐ Go to 120

No ☐ Go to 113

24. Did you have a job or business while taking this training or education?

Yes ³ ☐

No ⁴ ☐ Go to 67




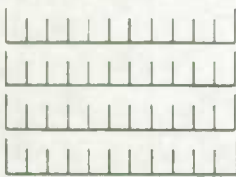
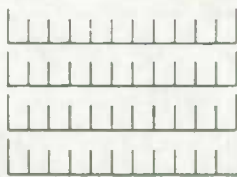
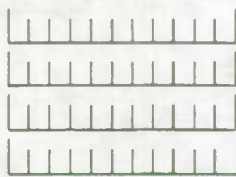
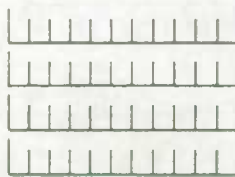
If the respondent is self-employed, substitute the word "business" for employer.

25. Did your employer support any of this training or education? By this I mean did the employer provide the training, pay for courses or transportation, give time-off or give support in any other way?

Yes ⁵ ☐

No ⁶ ☐ Go to 61

SECTION B. EMPLOYER-RELATED TRAINING PROGRAMS	Program 1																																																																																
<p>26. The next few questions are about the training or education that was supported by your employer.</p> <p>Were you taking this training or education towards ..</p> <p>(Read each category)</p>	<p>an elementary or high school diploma?</p> <p>Yes <input type="radio"/> 7</p> <p>No <input type="radio"/> 8</p> <p>→</p>																																																																																
<p>27. What was the major subject or field of study of your .. (read the item for which "YES" is marked in 26 and complete items 28 to 41)?</p>	<table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>																																																																																
<p>28. Did your employer support your training or education by ..</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>paying for fees or tuition?</td> <td><input type="radio"/> 01</td> <td><input type="radio"/> 02</td> </tr> <tr> <td>paying for course materials?</td> <td><input type="radio"/> 03</td> <td><input type="radio"/> 04</td> </tr> <tr> <td>providing time-off or educational leave?</td> <td><input type="radio"/> 05</td> <td><input type="radio"/> 06</td> </tr> <tr> <td>providing premises or supplies?</td> <td><input type="radio"/> 07</td> <td><input type="radio"/> 08</td> </tr> <tr> <td>providing transportation or accommodation?</td> <td><input type="radio"/> 09</td> <td><input type="radio"/> 10</td> </tr> <tr> <td>giving the training?</td> <td><input type="radio"/> 11</td> <td><input type="radio"/> 12</td> </tr> <tr> <td>providing any other support?</td> <td><input type="radio"/> 13</td> <td><input type="radio"/> 14</td> </tr> </tbody> </table> <p>If "YES" to any of the above complete items 29 to 41. <input type="radio"/> 1</p> <p>If "NO" to all of the above, Go to 27 and repeat for next program taken in 26. <input type="radio"/> 2</p> <p>If no other program taken, Go to 43.</p>		Yes	No	paying for fees or tuition?	<input type="radio"/> 01	<input type="radio"/> 02	paying for course materials?	<input type="radio"/> 03	<input type="radio"/> 04	providing time-off or educational leave?	<input type="radio"/> 05	<input type="radio"/> 06	providing premises or supplies?	<input type="radio"/> 07	<input type="radio"/> 08	providing transportation or accommodation?	<input type="radio"/> 09	<input type="radio"/> 10	giving the training?	<input type="radio"/> 11	<input type="radio"/> 12	providing any other support?	<input type="radio"/> 13	<input type="radio"/> 14																																																								
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<p>29. Other than the employer, who paid for this training or education?</p>	<p>(Mark all that apply)</p> <p>Self / family <input type="radio"/> 1</p> <p>Government <input type="radio"/> 2</p> <p>Other <input type="radio"/> 3</p> <p>No one else <input type="radio"/> 4</p> <p>No fees <input type="radio"/> 5</p> <p>Don't know <input type="radio"/> 6</p>																																																																																
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	Program 1
	Elementary/high school diploma
31. Since January 1991, did you take any of this employer-supported training or education on a full-time basis?	Yes <input type="radio"/> 1 No <input type="radio"/> 2 Go to 34
32. For how many weeks did you take this training or education on a full-time basis?	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Weeks
33. How many hours per week was it?	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Hours
34. Did you take any of this training or education on a part-time basis?	Yes <input type="radio"/> 3 No <input type="radio"/> 4 Go to 37
35. For how many weeks did you take this training or education on a part-time basis?	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Weeks
36. How many hours per week was it?	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Hours
37. To what extent are you using the skills or knowledge acquired in this training or education at work? (Read categories)	To a great extent <input type="radio"/> 5 Somewhat <input type="radio"/> 6 Very little <input type="radio"/> 7 Not at all <input type="radio"/> 8
38. Did your employer suggest this training?	Yes <input type="radio"/> 1 Go to 40 No <input type="radio"/> 2
39. Who initiated this training? (Read categories)	You or other employees requested it <input type="radio"/> 3 Written in collective agreement <input type="radio"/> 4 Union recommended or provided it <input type="radio"/> 5 Legal or professional requirement <input type="radio"/> 6 Other <input type="radio"/> 7 Don't know <input type="radio"/> 8
40. Since January 1991, did you receive a degree, diploma or certificate for this training?	Yes <input type="radio"/> 1 Go to 27 and repeat for next program taken in 26. If no other program in 26, Go to 43. No <input type="radio"/> 2
41. Are you still taking this training or education?	Yes <input type="radio"/> 3 No <input type="radio"/> 4 Go to 27 and repeat for next program taken in 26. If no other program in 26, Go to 43.

Program 2	Program 3	Program 4	Program 5
Apprenticeship certificate	Trade-vocational diploma/certificate	College diploma/certificate	University degree/diploma/certificate
Yes ¹ <input type="radio"/> No ² <input type="radio"/> Go to 34	Yes ¹ <input type="radio"/> No ² <input type="radio"/> Go to 34	Yes ¹ <input type="radio"/> No ² <input type="radio"/> Go to 34	Yes ¹ <input type="radio"/> No ² <input type="radio"/> Go to 34
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To a great extent ⁵ <input type="radio"/> Somewhat ⁶ <input type="radio"/> Very little ⁷ <input type="radio"/> Not at all ⁸ <input type="radio"/>	To a great extent ⁵ <input type="radio"/> Somewhat ⁶ <input type="radio"/> Very little ⁷ <input type="radio"/> Not at all ⁸ <input type="radio"/>	To a great extent ⁵ <input type="radio"/> Somewhat ⁶ <input type="radio"/> Very little ⁷ <input type="radio"/> Not at all ⁸ <input type="radio"/>	To a great extent ⁵ <input type="radio"/> Somewhat ⁶ <input type="radio"/> Very little ⁷ <input type="radio"/> Not at all ⁸ <input type="radio"/>
Yes ¹ <input type="radio"/> Go to 40 No ² <input type="radio"/>	Yes ¹ <input type="radio"/> Go to 40 No ² <input type="radio"/>	Yes ¹ <input type="radio"/> Go to 40 No ² <input type="radio"/>	Yes ¹ <input type="radio"/> Go to 40 No ² <input type="radio"/>
You or other employees requested it ³ <input type="radio"/> Written in collective agreement ⁴ <input type="radio"/> Union recommended or provided it ⁵ <input type="radio"/> Legal or professional requirement ⁶ <input type="radio"/> Other ⁷ <input type="radio"/> Don't know ⁸ <input type="radio"/>	You or other employees requested it ³ <input type="radio"/> Written in collective agreement ⁴ <input type="radio"/> Union recommended or provided it ⁵ <input type="radio"/> Legal or professional requirement ⁶ <input type="radio"/> Other ⁷ <input type="radio"/> Don't know ⁸ <input type="radio"/>	You or other employees requested it ³ <input type="radio"/> Written in collective agreement ⁴ <input type="radio"/> Union recommended or provided it ⁵ <input type="radio"/> Legal or professional requirement ⁶ <input type="radio"/> Other ⁷ <input type="radio"/> Don't know ⁸ <input type="radio"/>	You or other employees requested it ³ <input type="radio"/> Written in collective agreement ⁴ <input type="radio"/> Union recommended or provided it ⁵ <input type="radio"/> Legal or professional requirement ⁶ <input type="radio"/> Other ⁷ <input type="radio"/> Don't know ⁸ <input type="radio"/>
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SECTION C. EMPLOYER-RELATED TRAINING COURSES		Course 1																																																																								
42. Was this employer-supported training given as courses, workshops, seminars or tutorials?	Yes <input type="radio"/> 01 Go to 44 No <input type="radio"/> 02 Go to 59																																																																									
43. Since January 1991, did you take any other courses, workshops, seminars or tutorials that were supported by your employer and were not part of the program(s) we just discussed?	Yes <input type="radio"/> 03 No <input type="radio"/> 04 Go to 60																																																																									
44. What were the major subjects or fields of study of this training or education? (Record each subject separately in course 1 through 5 and complete items 45 to 58.)	<table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>																																																																									
45. Did your employer support .. (read subject from 44) by ..	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>paying for fees or tuition?</td> <td>01 <input type="radio"/></td> <td>02 <input type="radio"/></td> </tr> <tr> <td>paying for course materials?</td> <td>03 <input type="radio"/></td> <td>04 <input type="radio"/></td> </tr> <tr> <td>providing time-off or educational leave?</td> <td>05 <input type="radio"/></td> <td>06 <input type="radio"/></td> </tr> <tr> <td>providing premises or supplies?</td> <td>07 <input type="radio"/></td> <td>08 <input type="radio"/></td> </tr> <tr> <td>providing transportation or accommodation?</td> <td>09 <input type="radio"/></td> <td>10 <input type="radio"/></td> </tr> <tr> <td>giving the training?</td> <td>11 <input type="radio"/></td> <td>12 <input type="radio"/></td> </tr> <tr> <td>providing any other support?</td> <td>13 <input type="radio"/></td> <td>14 <input type="radio"/></td> </tr> </tbody> </table> <p>If "YES" to any of the above complete items 46 to 58. <input type="radio"/> 01</p> <p>If "NO" to all of the above. Go to 45 and repeat for next subject taken in 44. <input type="radio"/> 02</p> <p>If no other subject taken. Go to 60.</p>			Yes	No	paying for fees or tuition?	01 <input type="radio"/>	02 <input type="radio"/>	paying for course materials?	03 <input type="radio"/>	04 <input type="radio"/>	providing time-off or educational leave?	05 <input type="radio"/>	06 <input type="radio"/>	providing premises or supplies?	07 <input type="radio"/>	08 <input type="radio"/>	providing transportation or accommodation?	09 <input type="radio"/>	10 <input type="radio"/>	giving the training?	11 <input type="radio"/>	12 <input type="radio"/>	providing any other support?	13 <input type="radio"/>	14 <input type="radio"/>																																																
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46. Other than the employer, who paid for this training or education?	(Mark all that apply) <table border="1"> <tbody> <tr> <td>Self / family</td> <td>1 <input type="radio"/></td> </tr> <tr> <td>Government</td> <td>2 <input type="radio"/></td> </tr> <tr> <td>Other</td> <td>3 <input type="radio"/></td> </tr> <tr> <td>No one else</td> <td>4 <input type="radio"/></td> </tr> <tr> <td>No fees</td> <td>5 <input type="radio"/></td> </tr> <tr> <td>Don't know</td> <td>6 <input type="radio"/></td> </tr> </tbody> </table>		Self / family	1 <input type="radio"/>	Government	2 <input type="radio"/>	Other	3 <input type="radio"/>	No one else	4 <input type="radio"/>	No fees	5 <input type="radio"/>	Don't know	6 <input type="radio"/>																																																												
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47. Where did you take this training or education? Was it at ..	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>your place of work?</td> <td>01 <input type="radio"/></td> <td>02 <input type="radio"/></td> </tr> <tr> <td>a training centre?</td> <td>03 <input type="radio"/></td> <td>04 <input type="radio"/></td> </tr> <tr> <td>a university?</td> <td>05 <input type="radio"/></td> <td>06 <input type="radio"/></td> </tr> <tr> <td>a college?</td> <td>07 <input type="radio"/></td> <td>08 <input type="radio"/></td> </tr> <tr> <td>a high school/ elementary school?</td> <td>09 <input type="radio"/></td> <td>10 <input type="radio"/></td> </tr> <tr> <td>a business/ commercial school?</td> <td>11 <input type="radio"/></td> <td>12 <input type="radio"/></td> </tr> <tr> <td>elsewhere?</td> <td>13 <input type="radio"/></td> <td>14 <input type="radio"/></td> </tr> </tbody> </table>			Yes	No	your place of work?	01 <input type="radio"/>	02 <input type="radio"/>	a training centre?	03 <input type="radio"/>	04 <input type="radio"/>	a university?	05 <input type="radio"/>	06 <input type="radio"/>	a college?	07 <input type="radio"/>	08 <input type="radio"/>	a high school/ elementary school?	09 <input type="radio"/>	10 <input type="radio"/>	a business/ commercial school?	11 <input type="radio"/>	12 <input type="radio"/>	elsewhere?	13 <input type="radio"/>	14 <input type="radio"/>																																																
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Course 2	Course 3	Course 4	Course 5
<div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> <div></div> </div>
<p>Yes No</p> <p>paying for fees or tuition? 01 <input type="radio"/> 02 <input type="radio"/></p> <p>paying for course materials? 03 <input type="radio"/> 04 <input type="radio"/></p> <p>providing time-off or educational leave? 05 <input type="radio"/> 06 <input type="radio"/></p> <p>providing premises or supplies? 07 <input type="radio"/> 08 <input type="radio"/></p> <p>providing transportation or accommodation? 09 <input type="radio"/> 10 <input type="radio"/></p> <p>giving the training? 11 <input type="radio"/> 12 <input type="radio"/></p> <p>providing any other support? 13 <input type="radio"/> 14 <input type="radio"/></p>	<p>Yes No</p> <p>paying for fees or tuition? 01 <input type="radio"/> 02 <input type="radio"/></p> <p>paying for course materials? 03 <input type="radio"/> 04 <input type="radio"/></p> <p>providing time-off or educational leave? 05 <input type="radio"/> 06 <input type="radio"/></p> <p>providing premises or supplies? 07 <input type="radio"/> 08 <input type="radio"/></p> <p>providing transportation or accommodation? 09 <input type="radio"/> 10 <input type="radio"/></p> <p>giving the training? 11 <input type="radio"/> 12 <input type="radio"/></p> <p>providing any other support? 13 <input type="radio"/> 14 <input type="radio"/></p>	<p>Yes No</p> <p>paying for fees or tuition? 01 <input type="radio"/> 02 <input type="radio"/></p> <p>paying for course materials? 03 <input type="radio"/> 04 <input type="radio"/></p> <p>providing time-off or educational leave? 05 <input type="radio"/> 06 <input type="radio"/></p> <p>providing premises or supplies? 07 <input type="radio"/> 08 <input type="radio"/></p> <p>providing transportation or accommodation? 09 <input type="radio"/> 10 <input type="radio"/></p> <p>giving the training? 11 <input type="radio"/> 12 <input type="radio"/></p> <p>providing any other support? 13 <input type="radio"/> 14 <input type="radio"/></p>	<p>Yes No</p> <p>paying for fees or tuition? 01 <input type="radio"/> 02 <input type="radio"/></p> <p>paying for course materials? 03 <input type="radio"/> 04 <input type="radio"/></p> <p>providing time-off or educational leave? 05 <input type="radio"/> 06 <input type="radio"/></p> <p>providing premises or supplies? 07 <input type="radio"/> 08 <input type="radio"/></p> <p>providing transportation or accommodation? 09 <input type="radio"/> 10 <input type="radio"/></p> <p>giving the training? 11 <input type="radio"/> 12 <input type="radio"/></p> <p>providing any other support? 13 <input type="radio"/> 14 <input type="radio"/></p>
<p>If "YES" to any of the above complete items 46 to 58. 1 <input type="radio"/></p> <p>If "NO" to all of the above. Go to 45 and repeat for next subject taken in 44. 2 <input type="radio"/></p> <p>If no other subject taken. Go to 60.</p>	<p>If "YES" to any of the above complete items 46 to 58. 1 <input type="radio"/></p> <p>If "NO" to all of the above. Go to 45 and repeat for next subject taken in 44. 2 <input type="radio"/></p> <p>If no other subject taken. Go to 60.</p>	<p>If "YES" to any of the above complete items 46 to 58. 1 <input type="radio"/></p> <p>If "NO" to all of the above. Go to 45 and repeat for next subject taken in 44. 2 <input type="radio"/></p> <p>If no other subject taken. Go to 60.</p>	<p>If "YES" to any of the above complete items 46 to 58. 1 <input type="radio"/></p> <p>If "NO" to all of the above. Go to 60. 2 <input type="radio"/></p>
<p>(Mark all that apply)</p> <p>Self / family 1 <input type="radio"/></p> <p>Government 2 <input type="radio"/></p> <p>Other 3 <input type="radio"/></p> <p>No one else 4 <input type="radio"/></p> <p>No fees 5 <input type="radio"/></p> <p>Don't know 6 <input type="radio"/></p>	<p>(Mark all that apply)</p> <p>Self / family 1 <input type="radio"/></p> <p>Government 2 <input type="radio"/></p> <p>Other 3 <input type="radio"/></p> <p>No one else 4 <input type="radio"/></p> <p>No fees 5 <input type="radio"/></p> <p>Don't know 6 <input type="radio"/></p>	<p>(Mark all that apply)</p> <p>Self / family 1 <input type="radio"/></p> <p>Government 2 <input type="radio"/></p> <p>Other 3 <input type="radio"/></p> <p>No one else 4 <input type="radio"/></p> <p>No fees 5 <input type="radio"/></p> <p>Don't know 6 <input type="radio"/></p>	<p>(Mark all that apply)</p> <p>Self / family 1 <input type="radio"/></p> <p>Government 2 <input type="radio"/></p> <p>Other 3 <input type="radio"/></p> <p>No one else 4 <input type="radio"/></p> <p>No fees 5 <input type="radio"/></p> <p>Don't know 6 <input type="radio"/></p>
<p>Yes No</p> <p>your place of work? 01 <input type="radio"/> 02 <input type="radio"/></p> <p>a training centre? 03 <input type="radio"/> 04 <input type="radio"/></p> <p>a university? 05 <input type="radio"/> 06 <input type="radio"/></p> <p>a college? 07 <input type="radio"/> 08 <input type="radio"/></p> <p>a high school/ elementary school? 09 <input type="radio"/> 10 <input type="radio"/></p> <p>a business/ commercial school? 11 <input type="radio"/> 12 <input type="radio"/></p> <p>elsewhere? 13 <input type="radio"/> 14 <input type="radio"/></p>	<p>Yes No</p> <p>your place of work? 01 <input type="radio"/> 02 <input type="radio"/></p> <p>a training centre? 03 <input type="radio"/> 04 <input type="radio"/></p> <p>a university? 05 <input type="radio"/> 06 <input type="radio"/></p> <p>a college? 07 <input type="radio"/> 08 <input type="radio"/></p> <p>a high school/ elementary school? 09 <input type="radio"/> 10 <input type="radio"/></p> <p>a business/ commercial school? 11 <input type="radio"/> 12 <input type="radio"/></p> <p>elsewhere? 13 <input type="radio"/> 14 <input type="radio"/></p>	<p>Yes No</p> <p>your place of work? 01 <input type="radio"/> 02 <input type="radio"/></p> <p>a training centre? 03 <input type="radio"/> 04 <input type="radio"/></p> <p>a university? 05 <input type="radio"/> 06 <input type="radio"/></p> <p>a college? 07 <input type="radio"/> 08 <input type="radio"/></p> <p>a high school/ elementary school? 09 <input type="radio"/> 10 <input type="radio"/></p> <p>a business/ commercial school? 11 <input type="radio"/> 12 <input type="radio"/></p> <p>elsewhere? 13 <input type="radio"/> 14 <input type="radio"/></p>	<p>Yes No</p> <p>your place of work? 01 <input type="radio"/> 02 <input type="radio"/></p> <p>a training centre? 03 <input type="radio"/> 04 <input type="radio"/></p> <p>a university? 05 <input type="radio"/> 06 <input type="radio"/></p> <p>a college? 07 <input type="radio"/> 08 <input type="radio"/></p> <p>a high school/ elementary school? 09 <input type="radio"/> 10 <input type="radio"/></p> <p>a business/ commercial school? 11 <input type="radio"/> 12 <input type="radio"/></p> <p>elsewhere? 13 <input type="radio"/> 14 <input type="radio"/></p>

	Course 1
48. Was this training or education given by ..	<p>an educational institution? Yes No 1 <input type="radio"/> 2 <input type="radio"/></p> <p>employees of your company? 3 <input type="radio"/> 4 <input type="radio"/></p> <p>consultants? 5 <input type="radio"/> 6 <input type="radio"/></p> <p>someone else? 7 <input type="radio"/> 8 <input type="radio"/></p>
49. Was this training or education taken ..	<p>through classroom instruction? Yes No 01 <input type="radio"/> 02 <input type="radio"/></p> <p>through apprenticeship, articling, or internship training? 03 <input type="radio"/> 04 <input type="radio"/></p> <p>using a computer as a teaching tool? 05 <input type="radio"/> 06 <input type="radio"/></p> <p>through distance education (such as correspondence or television)? 07 <input type="radio"/> 08 <input type="radio"/></p> <p>through other methods? 09 <input type="radio"/> 10 <input type="radio"/></p>
50. Since January 1991, did you take any of this training or education for <u>6 or more</u> hours a day?	<p>Yes 1 <input type="radio"/></p> <p>No 2 <input type="radio"/> Go to 52</p>
51. For how many days did you take this training or education?	<p><input type="text"/> <input type="text"/> <input type="text"/> Days</p>
52. Did you take any of this training or education for <u>less than 6 hours</u> a day?	<p>Yes 3 <input type="radio"/></p> <p>No 4 <input type="radio"/> Go to 54</p>
53. How many hours of training was this?	<p><input type="text"/> <input type="text"/> <input type="text"/> Hours</p>
54. To what extent are you using the skills or knowledge acquired in this training or education at work? (Read categories)	<p>To a great extent 5 <input type="radio"/></p> <p>Somewhat 6 <input type="radio"/></p> <p>Very little 7 <input type="radio"/></p> <p>Not at all 8 <input type="radio"/></p>
55. Did your employer suggest this training?	<p>Yes 1 <input type="radio"/> Go to 57</p> <p>No 2 <input type="radio"/></p>
56. Who initiated this training? (Read categories)	<p>You or other employees requested it 3 <input type="radio"/></p> <p>Written in collective agreement 4 <input type="radio"/></p> <p>Union recommended or provided it 5 <input type="radio"/></p> <p>Legal or professional requirement 6 <input type="radio"/></p> <p>Other 7 <input type="radio"/></p> <p>Don't know 8 <input type="radio"/></p>
57. Did you complete this training?	<p>Yes 1 <input type="radio"/></p> <p>Go to 45 and repeat for next subject taken in 44.</p> <p>If no other subject taken, Go to 60.</p> <p>No 2 <input type="radio"/></p>
58. Are you still taking this training?	<p>Yes 3 <input type="radio"/></p> <p>No 4 <input type="radio"/></p> <p>Go to 45 and repeat for next subject taken in 44.</p> <p>If no other subject taken, Go to 60.</p>

Course 2		Course 3		Course 4		Course 5	
an educational institution? Yes No 1 <input type="radio"/> 2 <input type="radio"/>	an educational institution? Yes No 1 <input type="radio"/> 2 <input type="radio"/>	an educational institution? Yes No 1 <input type="radio"/> 2 <input type="radio"/>	an educational institution? Yes No 1 <input type="radio"/> 2 <input type="radio"/>				
employees of your company? 3 <input type="radio"/> 4 <input type="radio"/>	employees of your company? 3 <input type="radio"/> 4 <input type="radio"/>	employees of your company? 3 <input type="radio"/> 4 <input type="radio"/>	employees of your company? 3 <input type="radio"/> 4 <input type="radio"/>				
consultants? 5 <input type="radio"/> 6 <input type="radio"/>	consultants? 5 <input type="radio"/> 6 <input type="radio"/>	consultants? 5 <input type="radio"/> 6 <input type="radio"/>	consultants? 5 <input type="radio"/> 6 <input type="radio"/>				
someone else? 7 <input type="radio"/> 8 <input type="radio"/>	someone else? 7 <input type="radio"/> 8 <input type="radio"/>	someone else? 7 <input type="radio"/> 8 <input type="radio"/>	someone else? 7 <input type="radio"/> 8 <input type="radio"/>				
through classroom instruction? Yes No 01 <input type="radio"/> 02 <input type="radio"/>	through classroom instruction? Yes No 01 <input type="radio"/> 02 <input type="radio"/>	through classroom instruction? Yes No 01 <input type="radio"/> 02 <input type="radio"/>	through classroom instruction? Yes No 01 <input type="radio"/> 02 <input type="radio"/>				
through apprenticeship, articling, or internship training? 03 <input type="radio"/> 04 <input type="radio"/>	through apprenticeship, articling, or internship training? 03 <input type="radio"/> 04 <input type="radio"/>	through apprenticeship, articling, or internship training? 03 <input type="radio"/> 04 <input type="radio"/>	through apprenticeship, articling, or internship training? 03 <input type="radio"/> 04 <input type="radio"/>				
using a computer as a teaching tool? 05 <input type="radio"/> 06 <input type="radio"/>	using a computer as a teaching tool? 05 <input type="radio"/> 06 <input type="radio"/>	using a computer as a teaching tool? 05 <input type="radio"/> 06 <input type="radio"/>	using a computer as a teaching tool? 05 <input type="radio"/> 06 <input type="radio"/>				
through distance education (such as correspondence or television)? 07 <input type="radio"/> 08 <input type="radio"/>	through distance education (such as correspondence or television)? 07 <input type="radio"/> 08 <input type="radio"/>	through distance education (such as correspondence or television)? 07 <input type="radio"/> 08 <input type="radio"/>	through distance education (such as correspondence or television)? 07 <input type="radio"/> 08 <input type="radio"/>				
through other methods? 09 <input type="radio"/> 10 <input type="radio"/>	through other methods? 09 <input type="radio"/> 10 <input type="radio"/>	through other methods? 09 <input type="radio"/> 10 <input type="radio"/>	through other methods? 09 <input type="radio"/> 10 <input type="radio"/>				
Yes 1 <input type="radio"/> No 2 <input type="radio"/> Go to 52	Yes 1 <input type="radio"/> No 2 <input type="radio"/> Go to 52	Yes 1 <input type="radio"/> No 2 <input type="radio"/> Go to 52	Yes 1 <input type="radio"/> No 2 <input type="radio"/> Go to 52				
<input type="text"/> Days	<input type="text"/> Days	<input type="text"/> Days	<input type="text"/> Days				
Yes 3 <input type="radio"/> No 4 <input type="radio"/> Go to 54	Yes 3 <input type="radio"/> No 4 <input type="radio"/> Go to 54	Yes 3 <input type="radio"/> No 4 <input type="radio"/> Go to 54	Yes 3 <input type="radio"/> No 4 <input type="radio"/> Go to 54				
<input type="text"/> Hours	<input type="text"/> Hours	<input type="text"/> Hours	<input type="text"/> Hours				
To a great extent 5 <input type="radio"/> Somewhat 6 <input type="radio"/> Very little 7 <input type="radio"/> Not at all 8 <input type="radio"/>	To a great extent 5 <input type="radio"/> Somewhat 6 <input type="radio"/> Very little 7 <input type="radio"/> Not at all 8 <input type="radio"/>	To a great extent 5 <input type="radio"/> Somewhat 6 <input type="radio"/> Very little 7 <input type="radio"/> Not at all 8 <input type="radio"/>	To a great extent 5 <input type="radio"/> Somewhat 6 <input type="radio"/> Very little 7 <input type="radio"/> Not at all 8 <input type="radio"/>				
Yes 1 <input type="radio"/> Go to 57 No 2 <input type="radio"/>	Yes 1 <input type="radio"/> Go to 57 No 2 <input type="radio"/>	Yes 1 <input type="radio"/> Go to 57 No 2 <input type="radio"/>	Yes 1 <input type="radio"/> Go to 57 No 2 <input type="radio"/>				
You or other employees requested it 3 <input type="radio"/> Written in collective agreement 4 <input type="radio"/> Union recommended or provided it 5 <input type="radio"/> Legal or professional requirement 6 <input type="radio"/> Other 7 <input type="radio"/> Don't know 8 <input type="radio"/>	You or other employees requested it 3 <input type="radio"/> Written in collective agreement 4 <input type="radio"/> Union recommended or provided it 5 <input type="radio"/> Legal or professional requirement 6 <input type="radio"/> Other 7 <input type="radio"/> Don't know 8 <input type="radio"/>	You or other employees requested it 3 <input type="radio"/> Written in collective agreement 4 <input type="radio"/> Union recommended or provided it 5 <input type="radio"/> Legal or professional requirement 6 <input type="radio"/> Other 7 <input type="radio"/> Don't know 8 <input type="radio"/>	You or other employees requested it 3 <input type="radio"/> Written in collective agreement 4 <input type="radio"/> Union recommended or provided it 5 <input type="radio"/> Legal or professional requirement 6 <input type="radio"/> Other 7 <input type="radio"/> Don't know 8 <input type="radio"/>				
Yes 1 <input type="radio"/> Go to 45 and repeat for next subject taken in 44. If no other subject taken, Go to 60. No 2 <input type="radio"/>	Yes 1 <input type="radio"/> Go to 45 and repeat for next subject taken in 44. If no other subject taken, Go to 60. No 2 <input type="radio"/>	Yes 1 <input type="radio"/> Go to 45 and repeat for next subject taken in 44. If no other subject taken, Go to 60. No 2 <input type="radio"/>	Yes 1 <input type="radio"/> Go to 60 No 2 <input type="radio"/>				
Yes 3 <input type="radio"/> No 4 <input type="radio"/> Go to 45 and repeat for next subject taken in 44. If no other subject taken, Go to 60.	Yes 3 <input type="radio"/> No 4 <input type="radio"/> Go to 45 and repeat for next subject taken in 44. If no other subject taken, Go to 60.	Yes 3 <input type="radio"/> No 4 <input type="radio"/> Go to 45 and repeat for next subject taken in 44. If no other subject taken, Go to 60.	Yes 3 <input type="radio"/> No 4 <input type="radio"/> Go to 60				

No 2 ☐ Go to 66

No 4 ☐ Go to 66

No 2 ☐ Go to 66

Other ☐ 70

| | | | |

not applicable 90

not applicable 50

SECTION E. NON-EMPLOYER TRAINING PROGRAMS	Program 1																																																																
<p>66. The next few questions are about any training or education that was not supported by any employer.</p> <p>Since January 1991, did you take any training or education that was not supported by your employer?</p>	<p>Yes ¹ <input type="radio"/></p> <p>No ² <input type="radio"/> Go to 97</p>																																																																
<p>67. Were you taking this training or education towards ..</p> <p>(Read each category)</p>	<p>an elementary or high school diploma?</p> <p>Yes ³ <input type="radio"/></p> <p>No ⁴ <input type="radio"/></p> <p>→</p>																																																																
<p>68. What was the major subject or field of study of your .. (read the item for which "YES" is marked in 67 and complete items 69 to 80)?</p>	<table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>																																																																
<p>69. Was this training or education taken ..</p>	<p>Yes No</p> <p>through classroom instruction? ⁰¹ <input type="radio"/> ⁰² <input type="radio"/></p> <p>using a computer as a teaching tool? ⁰⁵ <input type="radio"/> ⁰⁶ <input type="radio"/></p> <p>through distance education (such as correspondence or television)? ⁰⁷ <input type="radio"/> ⁰⁸ <input type="radio"/></p> <p>through other methods? ⁰⁹ <input type="radio"/> ¹⁰ <input type="radio"/></p>																																																																
<p>70. Since January 1991, did you take any of this training or education on a full-time basis?</p>	<p>Yes ¹ <input type="radio"/></p> <p>No ² <input type="radio"/> Go to 73</p>																																																																
<p>71. For how many weeks did you take this training or education on a full-time basis?</p>	<p><table border="1"><tr><td></td><td></td></tr></table> Weeks</p>																																																																
<p>72. How many hours per week was it?</p>	<p><table border="1"><tr><td></td><td></td></tr></table> Hours</p>																																																																
<p>73. Did you take any of this training or education on a part-time basis?</p>	<p>Yes ³ <input type="radio"/></p> <p>No ⁴ <input type="radio"/> Go to 76</p>																																																																
<p>74. For how many weeks did you take this training or education on a part-time basis?</p>	<p><table border="1"><tr><td></td><td></td></tr></table> Weeks</p>																																																																
<p>75. How many hours per week was it?</p>	<p><table border="1"><tr><td></td><td></td></tr></table> Hours</p>																																																																
<p>76. Who paid the fees or tuition for this program?</p>	<p>(Mark all that apply)</p> <p>Self / family ¹ <input type="radio"/></p> <p>Government ² <input type="radio"/></p> <p>Union or professional organization ³ <input type="radio"/></p> <p>Other ⁴ <input type="radio"/></p> <p>No fees ⁵ <input type="radio"/></p> <p>Don't know ⁶ <input type="radio"/></p>																																																																

	Program 1 Elementary/high school diploma
77. What was the main reason you took this program? Was it for ..	<p>career/job related purposes? <input type="radio"/> 7 Go to 78</p> <p>personal interest? <input type="radio"/> 8 } Go to 79</p> <p>other <input type="radio"/> 9 }</p>
78. To what extent are you using the skills or knowledge acquired in this training or education at work? (Read categories)	<p>To a great extent <input type="radio"/> 1</p> <p>Somewhat <input type="radio"/> 2</p> <p>Very little <input type="radio"/> 3</p> <p>Not at all <input type="radio"/> 4</p> <p>Not applicable <input type="radio"/> 5</p>
79. Since January 1991, did you receive a degree, diploma or certificate for this training?	<p>Yes <input type="radio"/> 6</p> <p>Go to 68 and repeat for next program taken in 67.</p> <p>If no other program taken, Go to 82.</p> <p>No <input type="radio"/> 7</p>
80. Are you still taking this training or education?	<p>Yes <input type="radio"/> 8</p> <p>No <input type="radio"/> 9</p> <p>Go to 68 and repeat for next program taken in 67.</p> <p>If no other program taken, Go to 82.</p>

Program 2	Program 3	Program 4	Program 5
Apprenticeship certificate	Trade-vocational diploma/certificate	College diploma/certificate	University degree diploma/certificate
career/job related purposes? 7 <input type="radio"/> Go to 78 personal interest? 8 <input type="radio"/> } Go to 79 other 9 <input type="radio"/>	career/job related purposes? 7 <input type="radio"/> Go to 78 personal interest? 8 <input type="radio"/> } Go to 79 other 9 <input type="radio"/>	career/job related purposes? 7 <input type="radio"/> Go to 78 personal interest? 8 <input type="radio"/> } Go to 79 other 9 <input type="radio"/>	career/job related purposes? 7 <input type="radio"/> Go to 78 personal interest? 8 <input type="radio"/> } Go to 79 other 9 <input type="radio"/>
To a great extent 1 <input type="radio"/> Somewhat 2 <input type="radio"/> Very little 3 <input type="radio"/> Not at all 4 <input type="radio"/> Not applicable 5 <input type="radio"/>	To a great extent 1 <input type="radio"/> Somewhat 2 <input type="radio"/> Very little 3 <input type="radio"/> Not at all 4 <input type="radio"/> Not applicable 5 <input type="radio"/>	To a great extent 1 <input type="radio"/> Somewhat 2 <input type="radio"/> Very little 3 <input type="radio"/> Not at all 4 <input type="radio"/> Not applicable 5 <input type="radio"/>	To a great extent 1 <input type="radio"/> Somewhat 2 <input type="radio"/> Very little 3 <input type="radio"/> Not at all 4 <input type="radio"/> Not applicable 5 <input type="radio"/>
Yes 6 <input type="radio"/> Go to 68 and repeat for next program taken in 67. If no other program taken, <u>Go to 82.</u> No 7 <input type="radio"/>	Yes 6 <input type="radio"/> Go to 68 and repeat for next program taken in 67. If no other program taken, <u>Go to 82.</u> No 7 <input type="radio"/>	Yes 6 <input type="radio"/> Go to 68 and repeat for next program taken in 67. If no other program taken, <u>Go to 82.</u> No 7 <input type="radio"/>	Yes 6 <input type="radio"/> Go to 82 No 7 <input type="radio"/>
Yes 8 <input type="radio"/> No 9 <input type="radio"/> Go to 68 and repeat for next program taken in 67. If no other program taken, <u>Go to 82.</u>	Yes 8 <input type="radio"/> No 9 <input type="radio"/> Go to 68 and repeat for next program taken in 67. If no other program taken, <u>Go to 82.</u>	Yes 8 <input type="radio"/> No 9 <input type="radio"/> Go to 68 and repeat for next program taken in 67. If no other program taken, <u>Go to 82.</u>	Yes 8 <input type="radio"/> No 9 <input type="radio"/> <u>Go to 82</u>

SECTION F. NON-EMPLOYER COURSES		Course 1																		
81. Was this training taken as courses, workshops, seminars, or tutorials?	Yes <input type="radio"/> Go to 83 No <input type="radio"/> Go to 97																			
82. Since January 1991, did you take any <u>other</u> courses, workshops, seminars or tutorials that were not supported by your employer and were not part of the program(s) we just discussed?	Yes <input type="radio"/> No <input type="radio"/> Go to 97																			
83. What were the major subjects or fields of study of this training or education? (Record each subject separately in course 1 through 5 and complete items 84 to 96.)	<div style="border: 1px solid black; height: 40px; width: 100%;"></div> <div style="border: 1px solid black; height: 40px; width: 100%;"></div> <div style="border: 1px solid black; height: 40px; width: 100%;"></div> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>																			
84. What was the main reason you took .. (read subject from 83)? Was it for ..	career/job related purposes? <input type="radio"/> Go to 87 personal interest? <input type="radio"/> other <input type="radio"/>																			
85. Where did you take this training or education? Was it at a ..	<table border="0"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>school?</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>community centre?</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>recreational or sport facility centre?</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>elsewhere?</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> </tbody> </table>			Yes	No	school?	<input type="radio"/>	<input type="radio"/>	community centre?	<input type="radio"/>	<input type="radio"/>	recreational or sport facility centre?	<input type="radio"/>	<input type="radio"/>	elsewhere?	<input type="radio"/>	<input type="radio"/>			
	Yes	No																		
school?	<input type="radio"/>	<input type="radio"/>																		
community centre?	<input type="radio"/>	<input type="radio"/>																		
recreational or sport facility centre?	<input type="radio"/>	<input type="radio"/>																		
elsewhere?	<input type="radio"/>	<input type="radio"/>																		
86. How many hours of training was this?	<div style="border: 1px solid black; width: 100px; height: 30px; position: relative;"> <div style="position: absolute; top: 5px; right: 5px;">Hours</div> <div style="position: absolute; bottom: 5px; right: 5px;"> <input type="text"/> </div> </div> <div style="text-align: right;"> <input type="button" value="Go to 96"/> </div>																			
87. Where did you take this training or education? Was it at ..	<table border="0"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>a university?</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>a college?</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>a high school/ elementary school?</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>a business/ commercial school?</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>elsewhere?</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> </tbody> </table>			Yes	No	a university?	<input type="radio"/>	<input type="radio"/>	a college?	<input type="radio"/>	<input type="radio"/>	a high school/ elementary school?	<input type="radio"/>	<input type="radio"/>	a business/ commercial school?	<input type="radio"/>	<input type="radio"/>	elsewhere?	<input type="radio"/>	<input type="radio"/>
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Course 2	Course 3	Course 4	Course 5
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	Course 1			
89. Since January 1991, did you take any of this training or education for <u>6 or more</u> hours a day?	Yes ¹ <input type="radio"/> No ² <input type="radio"/> Go to 91			
90. For how many days did you take this training or education?	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> Days			
91. Did you take any of this training or education for <u>less than 6 hours</u> a day?	Yes ³ <input type="radio"/> No ⁴ <input type="radio"/> Go to 93			
92. How many hours of training was this?	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> Hours			
93. To what extent are you using the skills or knowledge acquired in this training or education at work? <i>(Read categories)</i>	To a great extent ⁵ <input type="radio"/> Somewhat ⁶ <input type="radio"/> Very little ⁷ <input type="radio"/> Not at all ⁸ <input type="radio"/> Not applicable ⁹ <input type="radio"/>			
94. Did you complete this training?	Yes ¹ <input type="radio"/> Go to 96 No ² <input type="radio"/>			
95. Are you still taking this training?	Yes ³ <input type="radio"/> No ⁴ <input type="radio"/>			
96. Who paid the fees or tuition for your training or education?	<i>(Mark all that apply)</i> Self / family ¹ <input type="radio"/> Government ² <input type="radio"/> Union or professional organization ³ <input type="radio"/> Other ⁴ <input type="radio"/> No fees ⁵ <input type="radio"/> Don't know ⁶ <input type="radio"/> Go to 84 and repeat for next subject taken in 83. If no other subject taken, Go to 97.			

Course 2	Course 3	Course 4	Course 5																
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SECTION G. NON-EMPLOYER - ANY OTHER COURSES	Course 1																		
97. Since January 1991, did you take any hobby, recreational or interest courses, personal development courses or any other training or education?	Yes ¹ <input type="radio"/> No ² <input type="radio"/> Go to 112																		
98. What were the major subjects or fields of study of this training or education? <i>(Record each subject separately in course 1 through 5 and complete items 99 to 111.)</i>	<div style="border: 1px solid black; height: 15px; width: 100%;"></div> <div style="border: 1px solid black; height: 15px; width: 100%;"></div> <div style="border: 1px solid black; height: 15px; width: 100%;"></div> <div style="border: 1px solid black; height: 15px; width: 100%;"></div>																		
99. What was the main reason you took .. (read subject from 98)? Was it for ..	career/job related purposes? ³ <input type="radio"/> Go to 102 personal interest? ⁴ <input type="radio"/> other ⁵ <input type="radio"/>																		
100. Where did you take this training or education? Was it at a ..	<table border="0"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>school?</td> <td>¹ <input type="radio"/></td> <td>² <input type="radio"/></td> </tr> <tr> <td>community centre?</td> <td>³ <input type="radio"/></td> <td>⁴ <input type="radio"/></td> </tr> <tr> <td>recreational or sport facility centre?</td> <td>⁵ <input type="radio"/></td> <td>⁶ <input type="radio"/></td> </tr> <tr> <td>elsewhere?</td> <td>⁷ <input type="radio"/></td> <td>⁸ <input type="radio"/></td> </tr> </tbody> </table>		Yes	No	school?	¹ <input type="radio"/>	² <input type="radio"/>	community centre?	³ <input type="radio"/>	⁴ <input type="radio"/>	recreational or sport facility centre?	⁵ <input type="radio"/>	⁶ <input type="radio"/>	elsewhere?	⁷ <input type="radio"/>	⁸ <input type="radio"/>			
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101. How many hours of training was this?	<div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center;"> <div style="border-right: 1px solid black; width: 10px; height: 10px;"></div> <div style="border-right: 1px solid black; width: 10px; height: 10px;"></div> <div style="border-right: 1px solid black; width: 10px; height: 10px;"></div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="width: 40px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> <div style="margin-top: 5px; border-left: 1px solid black; width: 10px; height: 10px;"></div> <div style="margin-left: 5px;">Hours</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="width: 40px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> <div style="margin-top: 5px; border-left: 1px solid black; width: 10px; height: 10px;"></div> <div style="margin-left: 5px;">Go to 111</div> </div>																		
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	Course 1
104. Since January 1991, did you take any of this training or education for <u>6 or more</u> hours a day?	Yes ¹ <input type="radio"/> No ² <input type="radio"/> Go to 106
105. For how many days did you take this training or education?	<div style="border: 1px solid black; width: 60px; height: 20px; margin: 0 auto; display: flex; justify-content: space-around;"> </div> Days
106. Did you take any of this training or education for <u>less than 6 hours</u> a day?	Yes ³ <input type="radio"/> No ⁴ <input type="radio"/> Go to 108
107. How many hours of training was this?	<div style="border: 1px solid black; width: 60px; height: 20px; margin: 0 auto; display: flex; justify-content: space-around;"> </div> Hours
108. To what extent are you using the skills or knowledge acquired in this training or education at work? <i>(Read categories)</i>	To a great extent ⁵ <input type="radio"/> Somewhat ⁶ <input type="radio"/> Very little ⁷ <input type="radio"/> Not at all ⁸ <input type="radio"/> Not applicable ⁹ <input type="radio"/>
109. Did you complete this training?	Yes ¹ <input type="radio"/> Go to 111 No ² <input type="radio"/>
110. Are you still taking this training?	Yes ³ <input type="radio"/> No ⁴ <input type="radio"/>
111. Who paid the fees or tuition for your training or education?	<i>(Mark all that apply)</i> Self / family ¹ <input type="radio"/> Government ² <input type="radio"/> Union or professional organization ³ <input type="radio"/> Other ⁴ <input type="radio"/> No fees ⁵ <input type="radio"/> Don't know ⁶ <input type="radio"/> Go to 99 and repeat for next subject taken in 98. If no other subject taken, Go to 112.

Course 2	Course 3	Course 4	Course 5
Yes ¹ <input type="radio"/> No ² <input type="radio"/> Go to 106	Yes ¹ <input type="radio"/> No ² <input type="radio"/> Go to 106	Yes ¹ <input type="radio"/> No ² <input type="radio"/> Go to 106	Yes ¹ <input type="radio"/> No ² <input type="radio"/> Go to 106
<input type="text"/> <input type="text"/> <input type="text"/> Days	<input type="text"/> <input type="text"/> <input type="text"/> Days	<input type="text"/> <input type="text"/> <input type="text"/> Days	<input type="text"/> <input type="text"/> <input type="text"/> Days
Yes ³ <input type="radio"/> No ⁴ <input type="radio"/> Go to 108	Yes ³ <input type="radio"/> No ⁴ <input type="radio"/> Go to 108	Yes ³ <input type="radio"/> No ⁴ <input type="radio"/> Go to 108	Yes ³ <input type="radio"/> No ⁴ <input type="radio"/> Go to 108
<input type="text"/> <input type="text"/> <input type="text"/> Hours	<input type="text"/> <input type="text"/> <input type="text"/> Hours	<input type="text"/> <input type="text"/> <input type="text"/> Hours	<input type="text"/> <input type="text"/> <input type="text"/> Hours
To a great extent ⁵ <input type="radio"/> Somewhat ⁶ <input type="radio"/> Very little ⁷ <input type="radio"/> Not at all ⁸ <input type="radio"/> Not applicable ⁹ <input type="radio"/>	To a great extent ⁵ <input type="radio"/> Somewhat ⁶ <input type="radio"/> Very little ⁷ <input type="radio"/> Not at all ⁸ <input type="radio"/> Not applicable ⁹ <input type="radio"/>	To a great extent ⁵ <input type="radio"/> Somewhat ⁶ <input type="radio"/> Very little ⁷ <input type="radio"/> Not at all ⁸ <input type="radio"/> Not applicable ⁹ <input type="radio"/>	To a great extent ⁵ <input type="radio"/> Somewhat ⁶ <input type="radio"/> Very little ⁷ <input type="radio"/> Not at all ⁸ <input type="radio"/> Not applicable ⁹ <input type="radio"/>
Yes ¹ <input type="radio"/> Go to 111 No ² <input type="radio"/>	Yes ¹ <input type="radio"/> Go to 111 No ² <input type="radio"/>	Yes ¹ <input type="radio"/> Go to 111 No ² <input type="radio"/>	Yes ¹ <input type="radio"/> Go to 111 No ² <input type="radio"/>
Yes ³ <input type="radio"/> No ⁴ <input type="radio"/>	Yes ³ <input type="radio"/> No ⁴ <input type="radio"/>	Yes ³ <input type="radio"/> No ⁴ <input type="radio"/>	Yes ³ <input type="radio"/> No ⁴ <input type="radio"/>
(Mark all that apply) Self / family ¹ <input type="radio"/> Government ² <input type="radio"/> Union or professional organization ³ <input type="radio"/> Other ⁴ <input type="radio"/> No fees ⁵ <input type="radio"/> Don't know ⁶ <input type="radio"/> Go to 99 and repeat for next subject taken in 98. If no other subject taken, Go to 112.	(Mark all that apply) Self / family ¹ <input type="radio"/> Government ² <input type="radio"/> Union or professional organization ³ <input type="radio"/> Other ⁴ <input type="radio"/> No fees ⁵ <input type="radio"/> Don't know ⁶ <input type="radio"/> Go to 99 and repeat for next subject taken in 98. If no other subject taken, Go to 112.	(Mark all that apply) Self / family ¹ <input type="radio"/> Government ² <input type="radio"/> Union or professional organization ³ <input type="radio"/> Other ⁴ <input type="radio"/> No fees ⁵ <input type="radio"/> Don't know ⁶ <input type="radio"/> Go to 99 and repeat for next subject taken in 98. If no other subject taken, Go to 112.	(Mark all that apply) Self / family ¹ <input type="radio"/> Government ² <input type="radio"/> Union or professional organization ³ <input type="radio"/> Other ⁴ <input type="radio"/> No fees ⁵ <input type="radio"/> Don't know ⁶ <input type="radio"/> Go to 112

SECTION H. GENERAL QUESTIONS

112. INTERVIEWER CHECK ITEM:

If "YES" in 18 }
 OR } 1 ☐ Go to 113
 "NO" in 20 }
 Otherwise 2 ☐ Go to 120

113. The next few questions are general questions.

(If the respondent is self employed, substitute the word "business" for employer.)

Does/did your employer operate at more than one location in Canada?

Yes 3 ☐

No 4 ☐

114. In total about how many persons are/were employed at all locations in Canada? Was it ..

less than 20? 5 ☐

20 to 99? 6 ☐

100 to 499? 7 ☐

500 or over? 8 ☐

don't know 9 ☐

115. In general, do you feel the training provided by your employer to you and your co-workers was ..

very adequate? 1 ☐

adequate? 2 ☐

somewhat adequate? 3 ☐

not adequate? 4 ☐

not applicable/no training 5 ☐

116. Since January 1991, was there any training or education that you NEEDED to take for career or job-related reasons but did not?

Yes 6 ☐

No 7 ☐ Go to 118

117. What were the reasons you did not take this training or education?

(Mark all that apply)

Too busy 1 ☐

Training programs not offered 2 ☐

Too expensive/have no money 3 ☐

Family responsibilities 4 ☐

Health reasons 5 ☐

Other 6 ☐

118. Were you a member of a union or other group which bargained collectively with your employer?

Yes ⁷ ☐ Go to 120

No ⁸ ☐

119. Although you were not a member of a union, were your wages covered by a collective agreement negotiated by a union or other group?

Yes ¹ ☐

No ² ☐

Don't know ³ ☐

120. Since January 1991, was there any training or education that you WANTED to take but did not? This includes hobby, recreational or interest courses.

Yes ⁴ ☐

No ⁵ ☐ Go to 122

121. What were the reasons you did not take this training or education?

(Mark all that apply)

Too busy ¹ ☐

Training programs not offered ² ☐

Too expensive/have no money ³ ☐

Family responsibilities ⁴ ☐

Health reasons ⁵ ☐

Other ⁶ ☐

122. For 1991, what was your annual income from the following sources?

Total income from wages and salaries before taxes or deductions

.00

No income ¹ ☐

Don't know ² ☐

Refused ³ ☐

Net income from self-employment (If "loss" mark "No income")

.00

No income ⁴ ☐

Don't know ⁵ ☐

Refused ⁶ ☐

Other income such as investment, scholarships, retirement pensions, etc.

.00

No income ⁷ ☐

Don't know ⁸ ☐

Refused ⁹ ☐

THANK YOU VERY MUCH FOR YOUR CO-OPERATION.

Survey on the Importance of Wildlife to Canadians During 1991



Survey Month:	February 1992		
Title:	Survey on the Importance of Wildlife to Canadians During 1991		
Sponsor:	Canadian Wildlife Service of Environment Canada, provincial wildlife agencies and several other groups		
Survey Method:	Mail-out/Mail-back self-administered questionnaire		
Sample Size:	5 LFS rotation groups. The survey collected information from all civilian household members aged 15 years and over.		
Objectives:	<p>The major objective of this survey is to collect information on watching, feeding, studying, photographing and hunting wildlife and what these activities contributed to the Canadian economy in 1991. The survey was run previously in 1982 and 1987, and this year's survey is designed to update information from the previous surveys and to provide strategic socio-economic insights on trends in wildlife-related activities.</p> <p>Data from this survey, as well as the previous studies will be published by Environment Canada under the generic title <i>The Importance of Wildlife to Canadians</i>.</p>		
Project Manager:	Anne Haining (951-4592)		
Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$500.00	

SURVEY ON THE IMPORTANCE OF WILDLIFE TO CANADIANS DURING 1991

To the Respondent:

Thank you for taking a few minutes to answer these questions on the importance of wildlife in your day-to-day activities. Your answers, combined with those of other Canadians, will provide valuable insights into the benefits Canadians derive from wildlife and wildlife-related activities. Knowledge of these benefits will help wildlife agencies to maintain an abundance and variety of wildlife for current and future generations of Canadians. This survey is being conducted by Statistics Canada for the Canadian Wildlife Service of Environment Canada, provincial wildlife agencies and several other agencies. Your responses are strictly confidential.

Aux francophones: Si ce questionnaire anglais vous a été posté par erreur et si vous en désirez un en français, veuillez nous appeler sans frais à l'un des numéros de téléphone figurant à l'endos de ce questionnaire.

INSTRUCTIONS

This questionnaire is to be completed by the person whose name appears on the label at the bottom of this page.

To answer the questions, enter a check in the appropriate circle ☒ or a number in the boxes provided.

For example, if you contributed \$107.25 to wildlife related organizations report it as \$ Mark your answers clearly.

Please return your completed questionnaire within the next three days in the postage paid envelope provided.

PLEASE READ THESE IMPORTANT DEFINITIONS

WILDLIFE: Means wild birds and other wild animals. The 5 types of wildlife include waterfowl, other wild birds, small and large mammals and other wildlife in a natural environment. They do not include pets or other domesticated animals, animals in zoos or game farms, or fish.



WATERFOWL: For example ducks, geese, herons, cranes ...

SMALL MAMMALS: Includes small game and non-game species. For example, rabbits, squirrels, raccoons, foxes, groundhogs, beaver and other fur-bearers ...



OTHER BIRDS: All other wild birds, such as robins, sparrows, warblers, gulls, hawks, owls and upland game birds such as grouse, partridge, pheasants ...

LARGE MAMMALS: Includes big game and non-game species. For example, deer, bear, cougar, moose, mountain sheep, caribou ...



OTHER WILDLIFE: Includes all remaining wildlife such as butterflies, frogs, snakes, lizards ...



FOR USE BY STATISTICS CANADA

1 <input type="text" value="06"/> Form No.	2 <input type="text"/> Docket No.	3 <input type="text"/> HRD page- line No.	4 <input type="text"/> Fam ID
5 <input type="text"/> Assignment No.	6 <input type="text" value="0292"/> Survey Date	7 <input type="text"/> Lang	
8 Given Name <input type="text"/>			
9 Surname <input type="text"/>			

A. QUESTIONS ABOUT WILDLIFE IN GENERAL

A1. DURING 1991 (JANUARY 1, 1991 TO DECEMBER 31, 1991) DID YOU TAKE PART IN ANY OF THE FOLLOWING ACTIVITIES?

	Yes	No
Read books, magazines or articles on wildlife	1 <input type="radio"/>	2 <input type="radio"/>
Watch films or T.V. programs on wildlife	3 <input type="radio"/>	4 <input type="radio"/>
Purchase art, crafts or posters of wildlife	5 <input type="radio"/>	6 <input type="radio"/>
Visit a zoo, game farm, aquarium or museum of natural history ..	7 <input type="radio"/>	8 <input type="radio"/>

A2. FOR EACH ACTIVITY LISTED BELOW, CHECK THE CATEGORY THAT BEST DESCRIBES YOUR INTEREST IN PARTICIPATING. (If you have participated in any of these activities, please indicate your interest in continuing to take part in the activity.)

	Great interest in participating	Some interest in participating	No interest in participating
Watching, photographing or studying wildlife	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>
Feeding Wildlife	04 <input type="radio"/>	05 <input type="radio"/>	06 <input type="radio"/>
Collecting butterflies or other wildlife specimens	07 <input type="radio"/>	08 <input type="radio"/>	09 <input type="radio"/>
Hunting wildlife	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>
Trapping for food or fur	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>
Observing, collecting or creating wildlife-related art or literature ..	16 <input type="radio"/>	17 <input type="radio"/>	18 <input type="radio"/>
Joining or contributing to a wildlife-related organization (naturalist, conservation or sportsmans' clubs)	19 <input type="radio"/>	20 <input type="radio"/>	21 <input type="radio"/>

A3. DURING 1991, DID YOU BELONG OR CONTRIBUTE TO ANY WILDLIFE-RELATED ORGANIZATION? (naturalist, conservation or sportsmans' clubs)

Yes ¹ ☐ No ² ☐ ► Go to Question A5.

A4. IN 1991, HOW MUCH DID YOU SPEND ON YOUR MEMBERSHIP FEE(S) OR DONATION(S)?

\$.00

A5. IN 1991, DID YOU MAINTAIN, IMPROVE OR PURCHASE ANY NATURAL AREAS TO PROVIDE FOOD OR SHELTER FOR WILDLIFE? (By natural areas we mean wooded lots, hedges, marshes, open fields ...)

Yes ³ ☐ No ⁴ ☐ ► Go to Question A7.

A6. IN 1991, HOW MUCH DID YOU SPEND TO MAINTAIN, IMPROVE OR PURCHASE THESE NATURAL AREAS FOR WILDLIFE?

\$.00

A7. PRESENTLY, MOST TYPES OF WILDLIFE ARE ABUNDANT IN CANADA. HOW IMPORTANT IS IT TO YOU THAT THE ABUNDANCE OF THE FOLLOWING TYPES OF WILDLIFE BE MAINTAINED?

	Very important	Fairly important	Of little importance	Of no importance	Don't know
Waterfowl	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
Other birds	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	09 <input type="radio"/>	10 <input type="radio"/>
Small mammals	11 <input type="radio"/>	12 <input type="radio"/>	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>
Large mammals	16 <input type="radio"/>	17 <input type="radio"/>	18 <input type="radio"/>	19 <input type="radio"/>	20 <input type="radio"/>

- A8. CONSERVING WETLANDS, FORESTS AND OTHER HABITATS TO MAINTAIN ABUNDANT WILDLIFE POPULATIONS MAY REQUIRE YOUR HELP. THIS COULD MEAN INCREASES IN PRICES OR TAXES OF BETWEEN 1 AND 5 PERCENT. WOULD YOU PERSONALLY BE WILLING TO HELP WILDLIFE BY PAYING MORE IN THE FOLLOWING WAYS?

	Yes	No
Taxes on camping and outdoor recreation equipment	1 <input type="radio"/>	2 <input type="radio"/>
Food prices	3 <input type="radio"/>	4 <input type="radio"/>
Prices for wood and paper products	5 <input type="radio"/>	6 <input type="radio"/>
Personal income taxes	7 <input type="radio"/>	8 <input type="radio"/>

- A9. PRESENTLY IN CANADA, SOME WILDLIFE ARE DECLINING IN NUMBER OR ARE ENDANGERED. HOW IMPORTANT IS IT TO YOU THAT DECLINING OR ENDANGERED WILDLIFE BE PRESERVED?

Very important	Fairly important	Of little importance	Of no importance	Don't know
1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>

- A10. PROTECTING DECLINING OR ENDANGERED WILDLIFE BY REDUCING AIR POLLUTION, ACID RAIN, OIL SPILLS OR PESTICIDE USE MAY REQUIRE YOUR HELP. THIS COULD MEAN INCREASES IN PRICES OF BETWEEN 1 AND 5 PERCENT. WOULD YOU PERSONALLY BE WILLING TO HELP WILDLIFE BY PAYING INCREASED PRICES FOR THE FOLLOWING?

	Yes	No
Gasoline and oil	01 <input type="radio"/>	02 <input type="radio"/>
Electricity	03 <input type="radio"/>	04 <input type="radio"/>
Food	05 <input type="radio"/>	06 <input type="radio"/>
Wood and paper products	07 <input type="radio"/>	08 <input type="radio"/>
New cars and trucks	09 <input type="radio"/>	10 <input type="radio"/>

B. WILDLIFE ACTIVITIES AROUND YOUR RESIDENCE OR COTTAGE

- B1. IN 1991, IN WHICH OF THE FOLLOWING WILDLIFE ACTIVITIES DID YOU PARTICIPATE AROUND YOUR RESIDENCE OR COTTAGE? (Mark all that apply)

- Feeding wildlife with table scraps 1 ☐
- Purchasing or putting out special feed for wildlife 2 ☐
- Watching wildlife 3 ☐
- Studying and identifying different types of wildlife 4 ☐
- Maintaining plants, shrubs or birdhouses to provide food or shelter for wildlife 5 ☐
- Photographing wildlife 6 ☐

None of the above 7 ☐ ► Turn page and go to SECTION C.

- B2. IN 1991, ON HOW MANY DIFFERENT DAYS DID YOU PARTICIPATE IN THESE ACTIVITIES AROUND YOUR RESIDENCE OR COTTAGE?

- | | |
|---------------------------------------|--|
| 1 to 9 days 1 <input type="radio"/> | 100 to 149 days 5 <input type="radio"/> |
| 10 to 19 days 2 <input type="radio"/> | 150 to 199 days 6 <input type="radio"/> |
| 20 to 49 days 3 <input type="radio"/> | 200 or more days 7 <input type="radio"/> |
| 50 to 99 days 4 <input type="radio"/> | |

B3. WHAT DID IT COST YOU TO PARTICIPATE IN THESE ACTIVITIES AROUND YOUR RESIDENCE OR COTTAGE IN 1991? (Include costs for feeders, food for wildlife, birdhouses, magazines, film, cameras used primarily for wildlife)

- | | | | |
|--------------|----------------|----------------|----------------|
| Nothing | ¹ ○ | \$25 to \$49 | ⁵ ○ |
| Under \$5 | ² ○ | \$50 to \$99 | ⁶ ○ |
| \$5 to \$9 | ³ ○ | \$100 to \$200 | ⁷ ○ |
| \$10 to \$24 | ⁴ ○ | Over \$200 | ⁸ ○ |

C. WILDLIFE ACTIVITIES AWAY FROM YOUR RESIDENCE OR COTTAGE

OUTINGS OR TRIPS TAKEN PRIMARILY TO ENCOUNTER WILDLIFE IN CANADA

C1. DURING 1991, DID YOU TAKE ANY OUTINGS (a day or less) OR TRIPS (more than a day) WITHIN CANADA FOR WHICH THE PRIMARY PURPOSE WAS TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE? (include only outings or trips away from your residence or cottage)

Yes ¹○
▼

No ²○ ► Turn page and go to Question C8.

C2. DURING THESE OUTINGS OR TRIPS, IN WHICH OF THE FOLLOWING ACTIVITIES DID YOU PARTICIPATE? (Mark all that apply)

- | | | | |
|-------------------|----------------|-----------------------------------|----------------|
| Watching wildlife | ³ ○ | Photographing wildlife | ⁵ ○ |
| Feeding wildlife | ⁴ ○ | Studying and identifying wildlife | ⁶ ○ |

C3. WHICH OF THE FOLLOWING TYPES OF WILDLIFE DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY? (Mark all that apply)

- | | | | |
|---------------|----------------|----------------|----------------|
| Waterfowl | ¹ ○ | Large mammals | ⁴ ○ |
| Other birds | ² ○ | Other wildlife | ⁵ ○ |
| Small mammals | ³ ○ | | |

C4. ON HOW MANY DIFFERENT DAYS DURING 1991 DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OUTINGS OR TRIPS? (Enter the number of days in the boxes beside the locations that apply)

In your province ⁶ Days

In other provinces/
territories ⁷ Days

C5. DURING THESE OUTINGS OR TRIPS WITHIN CANADA, HOW MUCH DID YOU SPEND TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE? (Enter expenditures in the boxes beside the categories that apply. Break down the costs of any package trips into the categories provided. Enter 0 in the appropriate box if you did not spend anything on that category).

TRANSPORTATION (include costs to operate private vehicles, gas, oil, repairs, rentals, planes, trains, buses, ferries)

¹ \$.00

ACCOMMODATION (include campgrounds, lodges, motels)

² \$.00

FOOD (include groceries, beverages, restaurant meals)

³ \$.00

EQUIPMENT used primarily for these wildlife activities (include cameras, camping gear, binoculars, special clothing, recording equipment, boats & motors and other vehicles)

⁴ \$.00

OTHER ITEMS (include feed for wildlife, books, magazines, film and photographic services, equipment rentals and repairs, batteries)

⁵ \$.00



C6. WOULD YOU STILL HAVE TAKEN THESE OUTINGS OR TRIPS IF YOUR COSTS HAD BEEN MORE?

Yes ¹○
▼

No ²○ ► Go to Question C8.

C7. HOW MUCH MORE WOULD YOU HAVE SPENT BEFORE DECIDING NOT TO TAKE THESE OUTINGS OR TRIPS IN 1991?

\$1 to \$19 ¹○

\$200 to \$299 ⁵○

\$20 to \$49 ²○

\$300 to \$399 ⁶○

\$50 to \$99 ³○

\$400 to \$599 ⁷○

\$100 to \$199 ⁴○

\$600 or more ⁸○

WILDLIFE ENCOUNTERS DURING OTHER OUTINGS OR TRIPS IN CANADA

C8. IN 1991, DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE DURING OTHER OUTINGS (for example hiking, picnics) OR TRIPS IN CANADA TAKEN FOR PURPOSES SUCH AS VACATION OR BUSINESS?

Yes ¹○
▼

No ²○ ► Turn page and go to SECTION D.

C9. WHILE ON THESE OTHER OUTINGS OR TRIPS, IN WHICH OF THE FOLLOWING ACTIVITIES DID YOU PARTICIPATE? (Mark all that apply)

Watching wildlife ¹○

Photographing wildlife ³○

Feeding wildlife ²○

Studying & identifying wildlife ⁴○

C10. WHILE ON THESE OTHER OUTINGS OR TRIPS, WHICH OF THE FOLLOWING TYPES OF WILDLIFE DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY? (Mark all that apply)

Waterfowl ⁵○

Large mammals ⁸○

Other birds ⁶○

Other wildlife ⁹○

Small mammals ⁷○

C11. ON HOW MANY DIFFERENT DAYS DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OUTINGS OR TRIPS?

1 to 9 days ¹○

100 to 149 days ⁵○

10 to 19 days ²○

150 to 199 days ⁶○

20 to 49 days ³○

200 or more days ⁷○

50 to 99 days ⁴○

C12. HOW MUCH EXTRA MONEY DID IT COST YOU TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OTHER OUTINGS OR TRIPS?

Nothing ¹○

\$25 to \$49 ⁵○

Under \$5 ²○

\$50 to \$99 ⁶○

\$5 to \$9 ³○

\$100 to \$200 ⁷○

\$10 to \$24 ⁴○

Over \$200 ⁸○

D. HUNTING WILDLIFE

D1. HAVE YOU EVER HUNTED WILDLIFE?

Yes ¹○

No ²○ ► Go to SECTION E.

D2. DURING 1991, DID YOU HUNT WILDLIFE IN CANADA?

Yes ³○

No ⁴○ ► Go to SECTION E.

D3. IN TOTAL, ON HOW MANY DIFFERENT DAYS DID YOU HUNT WILDLIFE IN CANADA DURING 1991?

Days

► Go to Question D4.



D4. DURING 1991, DID YOU HUNT WATERFOWL IN CANADA?

Yes ¹○

No ²○ ► Go to Question D14.

D5. ENTER THE NUMBER OF DAYS BESIDE THE LOCATION(S) WHERE YOU HUNTED WATERFOWL IN 1991.

In your province ³ Days In other provinces/territories ⁴ Days

D6. DID YOU HARVEST ANY WATERFOWL?

Yes ⁵○

No ⁶○

D7. HOW MUCH DID YOU SPEND ON **TRANSPORTATION** TO HUNT WATERFOWL IN 1991? (See definitions on following page)

¹ \$.00

D8. HOW MUCH DID YOU SPEND ON **ACCOMMODATIONS** TO HUNT WATERFOWL IN 1991? (See definition)

² \$.00

D9. HOW MUCH DID YOU SPEND ON **FOOD** WHILE HUNTING WATERFOWL IN 1991? (See definition)

³ \$.00

D10. IN 1991, HOW MUCH DID YOU SPEND ON **EQUIPMENT** USED PRIMARILY FOR HUNTING WATERFOWL? (See definition)

⁴ \$.00

D11. HOW MUCH DID YOU SPEND ON **AMMUNITION, REPAIRS, LICENCE FEES AND OTHER ITEMS** FOR HUNTING WATERFOWL IN 1991? (See definition)

⁵ \$.00

D12. WOULD YOU STILL HAVE HUNTED WATERFOWL IF YOUR COSTS HAD BEEN MORE?

Yes ¹○

No ²○ ► Go to Question D14.

D13. HOW MUCH MORE WOULD YOU HAVE SPENT BEFORE DECIDING NOT TO HUNT WATERFOWL IN 1991?

\$1 to \$49 ³○ \$200 to \$399 ⁶○
\$50 to \$99 ⁴○ \$400 to \$799 ⁷○
\$100 to \$199 ⁵○ \$800 or more ⁸○

Go to Question D14.



D14. DURING 1991, DID YOU HUNT OTHER BIRDS IN CANADA?

Yes ¹○

No ²○ ► Go to Question D24 (next page.)

D15. ENTER THE NUMBER OF DAYS BESIDE THE LOCATION(S) WHERE YOU HUNTED OTHER BIRDS IN 1991.

In your province ³ Days In other provinces/territories ⁴ Days

D16. DID YOU HARVEST ANY OTHER BIRDS?

Yes ⁵○

No ⁶○

D17. HOW MUCH DID YOU SPEND ON **TRANSPORTATION** TO HUNT OTHER BIRDS IN 1991? (See definitions on following page)

¹ \$.00

D18. HOW MUCH DID YOU SPEND ON **ACCOMMODATIONS** TO HUNT OTHER BIRDS IN 1991? (See definition)

² \$.00

D19. HOW MUCH DID YOU SPEND ON **FOOD** WHILE HUNTING OTHER BIRDS IN 1991? (See definition)

³ \$.00

D20. IN 1991, HOW MUCH DID YOU SPEND ON **EQUIPMENT** USED PRIMARILY FOR HUNTING OTHER BIRDS? (See definition)

⁴ \$.00

D21. HOW MUCH DID YOU SPEND ON **AMMUNITION, REPAIRS, LICENCE FEES AND OTHER ITEMS** FOR HUNTING OTHER BIRDS IN 1991? (See definition)

⁵ \$.00

D22. WOULD YOU STILL HAVE HUNTED OTHER BIRDS IF YOUR COSTS HAD BEEN MORE?

Yes ¹○

No ²○ ► Go to Question D24 (next page).

D23. HOW MUCH MORE WOULD YOU HAVE SPENT BEFORE DECIDING NOT TO HUNT OTHER BIRDS IN 1991?

\$1 to \$49 ³○ \$200 to \$399 ⁶○
\$50 to \$99 ⁴○ \$400 to \$799 ⁷○
\$100 to \$199 ⁵○ \$800 or more ⁸○

Go to Question D24 (next page).

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 1991. 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 groceries, beverages, restaurant meals

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

OTHER ITEMS: Include ammunition, books, guide fees, dog maintenance, equipment rentals and repairs, licence fees, land use fees



D24. DURING 1991, DID YOU HUNT SMALL MAMMALS IN CANADA?

Yes ¹ ☐

No ² ☐ ► Go to Question D34.

D25. ENTER THE NUMBER OF DAYS BESIDE THE LOCATION(S) WHERE YOU HUNTED SMALL MAMMALS IN 1991.

	Days		Days
In your province	³ <input type="text"/>	In other provinces/territories	⁴ <input type="text"/>

D26. DID YOU HARVEST ANY SMALL MAMMALS?

Yes ⁵ ☐

No ⁶ ☐

D27. HOW MUCH DID YOU SPEND ON TRANSPORTATION TO HUNT SMALL MAMMALS IN 1991? (See definitions at top of page)

¹ \$.00

D28. HOW MUCH DID YOU SPEND ON ACCOMMODATIONS TO HUNT SMALL MAMMALS IN 1991? (See definition)

² \$.00

D29. HOW MUCH DID YOU SPEND ON FOOD WHILE HUNTING SMALL MAMMALS IN 1991? (See definition)

³ \$.00

D30. IN 1991, HOW MUCH DID YOU SPEND ON EQUIPMENT USED PRIMARILY FOR HUNTING SMALL MAMMALS? (See definition)

⁴ \$.00

D31. HOW MUCH DID YOU SPEND ON AMMUNITION, REPAIRS, LICENCE FEES AND OTHER ITEMS FOR HUNTING SMALL MAMMALS IN 1991? (See definition)

⁵ \$.00

D32. WOULD YOU STILL HAVE HUNTED SMALL MAMMALS IF YOUR COSTS HAD BEEN MORE?

Yes ¹ ☐ No ² ☐ ► Go to Question D34.

D33. HOW MUCH MORE WOULD YOU HAVE SPENT BEFORE DECIDING NOT TO HUNT SMALL MAMMALS IN 1991?

\$1 to \$49	³ <input type="radio"/>	\$200 to \$399	⁶ <input type="radio"/>
\$50 to \$99	⁴ <input type="radio"/>	\$400 to \$799	⁷ <input type="radio"/>
\$100 to \$199	⁵ <input type="radio"/>	\$800 or more	⁸ <input type="radio"/>

Go to Question D34.



D34. DURING 1991, DID YOU HUNT LARGE MAMMALS IN CANADA?

Yes ¹ ☐

No ² ☐ ► Go to SECTION E (next page).

D35. ENTER THE NUMBER OF DAYS BESIDE THE LOCATION(S) WHERE YOU HUNTED LARGE MAMMALS IN 1991.

	Days		Days
In your province	³ <input type="text"/>	In other provinces/territories	⁴ <input type="text"/>

D36. DID YOU HARVEST ANY LARGE MAMMALS?

Yes ⁵ ☐

No ⁶ ☐

D37. HOW MUCH DID YOU SPEND ON TRANSPORTATION TO HUNT LARGE MAMMALS IN 1991? (See definitions at top of page)

¹ \$.00

D38. HOW MUCH DID YOU SPEND ON ACCOMMODATIONS TO HUNT LARGE MAMMALS IN 1991? (See definition)

² \$.00

D39. HOW MUCH DID YOU SPEND ON FOOD WHILE HUNTING LARGE MAMMALS IN 1991? (See definition)

³ \$.00

D40. IN 1991, HOW MUCH DID YOU SPEND ON EQUIPMENT USED PRIMARILY FOR HUNTING LARGE MAMMALS? (See definition)

⁴ \$.00

D41. HOW MUCH DID YOU SPEND ON AMMUNITION, REPAIRS, LICENCE FEES AND OTHER ITEMS FOR HUNTING LARGE MAMMALS IN 1991? (See definition)

⁵ \$.00

D42. WOULD YOU STILL HAVE HUNTED LARGE MAMMALS IF YOUR COSTS HAD BEEN MORE?

Yes ¹ ☐ No ² ☐ ► Go to SECTION E (next page).

D43. HOW MUCH MORE WOULD YOU HAVE SPENT BEFORE DECIDING NOT TO HUNT LARGE MAMMALS IN 1991?

\$1 to \$49	³ <input type="radio"/>	\$200 to \$399	⁶ <input type="radio"/>
\$50 to \$99	⁴ <input type="radio"/>	\$400 to \$799	⁷ <input type="radio"/>
\$100 to \$199	⁵ <input type="radio"/>	\$800 or more	⁸ <input type="radio"/>

Turn Page and go to SECTION E.

E. FISHING FOR RECREATION

E1. HOW INTERESTED ARE YOU IN PARTICIPATING IN FISHING FOR RECREATION?

Great interest ¹ ☐

Some interest ² ☐

No interest ³ ☐

E2. DID YOU FISH FOR RECREATION IN CANADA DURING 1991?

Yes ⁴ ☐

No ⁵ ☐ ► Go to Question F1

E3. ENTER THE NUMBER OF DAYS YOU SPENT FISHING FOR RECREATION IN CANADA IN 1991 BESIDE THE LOCATION(S) WHERE YOU FISHED:

	Days
Freshwater: Lakes, rivers, streams	6 <input type="text"/>
Pacific Ocean	7 <input type="text"/>
Atlantic Ocean	8 <input type="text"/>

E4. HOW MUCH DID YOU SPEND TO FISH FOR RECREATION IN CANADA DURING 1991? (Enter expenditures in the boxes beside the categories that apply. Break down the costs of any package trips into the categories provided. Enter 0 in the appropriate box if you did not spend anything on that category.)

TRANSPORTATION (include costs to operate private vehicles, gas, oil, repairs, rentals, planes, trains, buses, ferries)	¹ <input type="text"/> .00
ACCOMMODATION (include campgrounds, lodges, motels)	² <input type="text"/> .00
FOOD (include groceries, beverages, restaurant meals)	³ <input type="text"/> .00
EQUIPMENT used primarily for fishing (include rods, reels, camping gear, boats, motors, ATVs, trucks, clothing)	⁴ <input type="text"/> .00
OTHER ITEMS (include bait, tackle, line, books, guide fees, equipment rentals and repairs, licence fees, park fees)	⁵ <input type="text"/> .00

F. TRAPPING

F1. DURING 1991, DID YOU DO ANY TRAPPING OF SMALL MAMMALS? (For example beaver, muskrats, rabbits, coyotes, raccoons, squirrels, marten).

Yes ¹ ☐

No ² ☐ ► Go to SECTION G (next page).

F2. WHAT WAS THE MAIN REASON YOU TRAPPED SMALL MAMMALS? (Mark one only.)

Food ³ ☐

Income ⁴ ☐

Sport or recreation ⁵ ☐

Property protection
(do not include pest
control in the house) ⁶ ☐

Other reasons ⁷ ☐

F3. IN TOTAL, ON HOW MANY DIFFERENT DAYS DID YOU TRAP SMALL MAMMALS IN 1991?

Days

F4. HOW MUCH WOULD IT COST TO REPLACE ALL THE TRAPS YOU OWN FOR SMALL MAMMALS?

Under \$50 ¹ ☐

\$50 to \$249 ² ☐

\$250 to \$499 ³ ☐

\$500 to \$749 ⁴ ☐

\$750 to \$1000 ⁵ ☐

More than \$1000 ⁶ ☐

G. WILDLIFE ACTIVITIES IN THE UNITED STATES

G1. DURING 1991, DID YOU TAKE ANY OUTINGS (a day or less) OR TRIPS (more than a day) TO THE UNITED STATES FOR WHICH THE PRIMARY PURPOSE WAS TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE?

Yes ¹ ☐
 ▼

No ² ☐ ► Go to Question G4.

G2. ON HOW MANY DIFFERENT DAYS DID YOU WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE WHILE ON THESE OUTINGS OR TRIPS?

Days

G3. HOW MUCH DID YOU SPEND IN TOTAL TO WATCH, FEED, PHOTOGRAPH OR STUDY WILDLIFE DURING THESE OUTINGS OR TRIPS? (Include only amounts spent within the borders of the United States on transportation, accommodation, food and other items. Report your answer in U.S. dollars.)

\$ US .00

G4. DURING 1991, DID YOU HUNT WILDLIFE IN THE UNITED STATES?

Yes ¹ ☐
 ▼

No ² ☐ ► Go to question G7.

G5. ON HOW MANY DIFFERENT DAYS DID YOU HUNT IN THE UNITED STATES?

Days

G6. HOW MUCH DID YOU SPEND IN TOTAL TO HUNT IN THE UNITED STATES? (include only amounts spent within the borders of the United States on transportation, accommodation, food and other items. Report your answer in U.S. dollars.)

\$ US .00

G7. DID YOU FISH FOR RECREATION IN THE UNITED STATES IN 1991?

Yes ¹ ☐
 ▼

No ² ☐ ► Go to Question H1.

G8. ON HOW MANY DIFFERENT DAYS DID YOU FISH FOR RECREATION IN THE UNITED STATES?

Days

G9. HOW MUCH DID YOU SPEND IN TOTAL TO FISH FOR RECREATION IN THE UNITED STATES? (Include only amounts spent within the borders of the United States on transportation, accommodation, food and other items. Report your answer in U.S. dollars.)

\$ US .00

H1. IN 1991, WHAT WAS YOUR TOTAL INCOME BEFORE DEDUCTIONS? (include income you received from wages, salaries, and all other sources)

No income ¹ ☐

\$20,000 to \$29,999 ⁵ ☐

Less than \$5,000 ² ☐

\$30,000 to \$39,999 ⁶ ☐

\$5,000 to \$9,999 ³ ☐

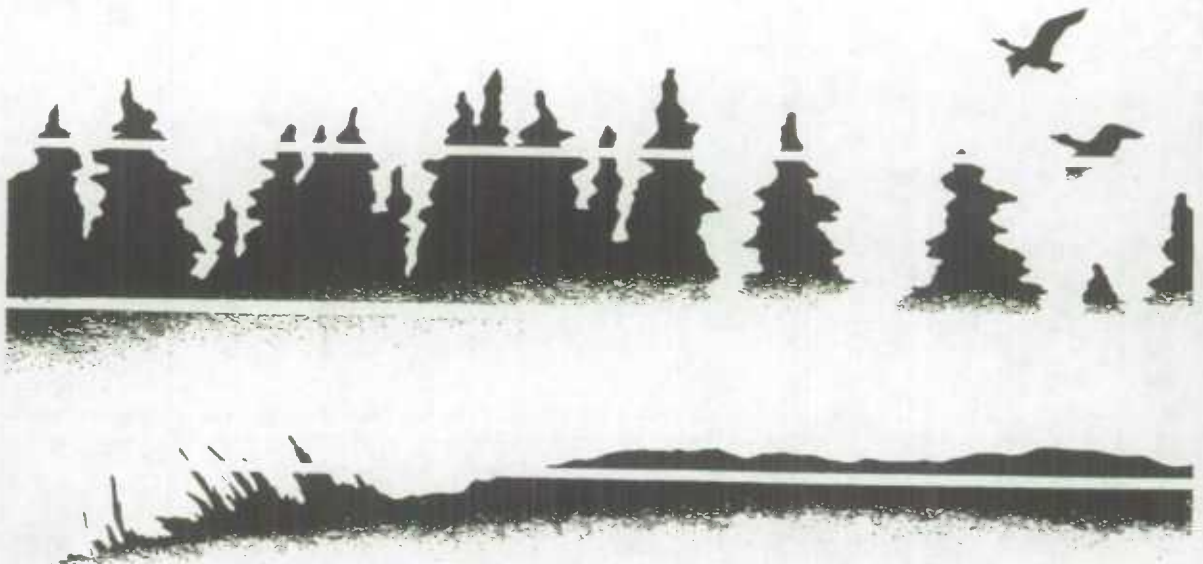
\$40,000 to \$49,999 ⁷ ☐

\$10,000 to \$19,999 ⁴ ☐

\$50,000 or more ⁸ ☐

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

DO YOU HAVE ANY COMMENTS?



FOR INFORMATION ON HOW THESE SURVEY RESULTS ARE USED TO CONSERVE AND PROTECT WILDLIFE, WRITE FOR A FREE COPY OF THE FOLDER THE BENEFITS OF WILDLIFE TO:

PUBLICATIONS
CANADIAN WILDLIFE SERVICE
ENVIRONMENT CANADA
OTTAWA, ONTARIO
K1A 0H3





STATISTICS CANADA REGIONAL OFFICES/BUREAUX RÉGIONAUX DE STATISTIQUE CANADA:

Newfoundland and Labrador/Terre-Neuve et Labrador
St. John's: 772-4601
Toll free service/Service d'appel sans frais:
1-800-563-4255

Maritime provinces/Provinces Maritimes
Halifax: 426-3110
Toll free service/Service d'appel sans frais:
1-800-565-7192

Québec
Montreal: 283-7942
Toll free service/Service d'appel sans frais:
1-800-361-2831

Southern and Eastern Ontario/
Sud et Ouest de l'Ontario
Toronto: 973-6104
Toll free service/Service d'appel sans frais:
1-800-387-0714

Northern and Eastern Ontario/
Nord et Est de l'Ontario
Sturgeon Falls: 753-4888
Toll free service/Service d'appel sans frais:
1-800-461-1662

Manitoba and Southern Saskatchewan/
Manitoba et Sud de la Saskatchewan
Winnipeg: 983-4022
Toll free service/Service d'appel sans frais:
1-800-542-3404

Alberta and Northern Saskatchewan/
Alberta et Nord de la Saskatchewan
Edmonton: 495-4589
Toll free service/Service d'appel sans frais:
1-800-282-3907

British Columbia/Colombie-Britannique
Vancouver: 666-3553
Toll free service/Service d'appel sans frais:
1-800-663-1551

Absence from Work 1992



Survey Month:	February 1992		
Title:	Absence from Work 1992		
Sponsor:	Employment and Immigration Canada		
Survey Method:	Personal/Telephone Interview		
Sample Size:	All civilian members 15 to 69 years of age in LFS rotation groups 3 and 4		
Objectives:	These supplementary questions are designed to obtain information about the absences from work by paid employees during 1991, 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 those who experience such absences.		
Project Manager:	Nancy Brooks (951-4589)		
Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$500.00	

Docket No. 2 Survey Date 3 Assignment No. 4

HRD page-line No. 5 Given name 6 Surname 7

1 FORM NO 06

FEBRUARY'S SUPPLEMENTARY QUESTIONS CONCERN ...'S ABSENCES FROM WORK DUE TO ILLNESS, ACCIDENT OR PREGNANCY, DURING THE LAST YEAR THAT IS, FROM JANUARY 1, 1991 TO DECEMBER 31, 1991.

10. Did ... work as a paid employee in 1991?

Yes ☐ No ☐ Go to 24

11. How many hours a week did ... usually work as a paid employee?

No. of hours

12. At any time in 1991 did ... leave a job, or was ... absent from work for 2 or more consecutive weeks because of his/her own illness, accident or pregnancy?

Yes ☐ No ☐ Go to 23

13. How many separate periods of 2 or more consecutive weeks was ... unable to work due to his/her own illness, accident or pregnancy? Do not include any period that began before January 1, 1991.

No. of periods
 If none, enter 00, and go to 23

14. Of these periods, was the last period due to illness, due to accident or due to pregnancy?

Illness Accident Pregnancy
1 ☐ 2 ☐ 4 ☐

15. How many consecutive weeks was this last absence from beginning to end?

No. of weeks
1 Go to 17

Absence not ended 2 ☐ Go to 16

16. Up to the end of last week, how many weeks has ... been continuously absent from work?

No. of weeks

17. What kind of financial compensation did ... receive for this last period? (Mark all types of compensation received)

None ☐ Go to 18

Are there any others? (Mark all other types of compensation received)

For each type of compensation received, ask:
How many weeks of ... did ... receive?
(Repeat type of compensation)

	No. of weeks
Unemployment Insurance	2 <input type="radio"/> <input type="text"/>
Worker's Compensation	3 <input type="radio"/> <input type="text"/>
Group Insurance	4 <input type="radio"/> <input type="text"/>
Automobile Insurance	5 <input type="radio"/> <input type="text"/>
Full pay from employer	6 <input type="radio"/> <input type="text"/>
Partial pay from employer	7 <input type="radio"/> <input type="text"/>
Other financial compensation	8 <input type="radio"/> <input type="text"/>

18. Interviewer Check Item:

• If 0 2 or more periods in 13 ☐ Go to 19
• Otherwise ☐ Go to 22

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 pregnancy?

Illness Accident Pregnancy
1 ☐ 2 ☐ 4 ☐

21. How many consecutive weeks was this previous absence?

No. of weeks

22. Without including absences of 2 or more consecutive weeks due to ...'s own illness, accident or pregnancy, how many weeks in 1991 was ... a paid employee?

No. of weeks
 Go to 24

23. How many weeks in 1991 was ... a paid employee?

No. of weeks

24. Interview:

Proxy Non-proxy
1 ☐ 2 ☐

Survey of Job Opportunities



Survey Month:	March 1992		
Title:	Survey of Job Opportunities		
Sponsor:	Statistics Canada		
Survey Method:	Personal/Telephone Interview		
Sample Size:	All LFS rotation groups		
Objectives:	<p>The purpose of this survey is to identify:</p> <ul style="list-style-type: none">- the actual participation patterns of persons inactive due to labour market conditions or their own preferences,- the desired participation patterns of persons inactive due to labour market conditions or their own preferences,- the type of work desired by such individuals,- those persons who have become discouraged looking for work and believe that no suitable jobs are available,- 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:	Ernest Akyeampong (951-4624)		
Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$500.00	



Docket No. 2 Survey date 3 Assignment No. 4 1 FORM NO. 06
HRD page - line No. Given name Mo. Yr. Surname
5 6 7

INTERVIEWER CHECK ITEM: On FORM 05

- If blank in Item 50 ☐ END
- If "Yes" or "No" in Item 50 ☐
Complete the 2 reference items below by copying from the FORM 05

56 IN THE PAST 6 MONTHS HAS ... LOOKED FOR WORK?Yes ☐ No ☐**57** IN THE PAST 4 WEEKS WHAT HAS ... DONE TO FIND WORK?Nothing ☐ 1

COMPLETE THE REMAINING ITEMS ON THIS FORM 06.
REFERRING TO ITEMS 56 AND 57 ABOVE,
AS NECESSARY.

10 INTERVIEWER CHECK ITEM:

- If "Yes" in Item 56 ☐ go to 11
- If "No" in Item 56 ☐ go to 12
- If "Blank" in Item 56 ... ☐ END

11 INTERVIEWER CHECK ITEM:

- If "Nothing" circle marked in Item 57 ☐ go to 14
- Otherwise ☐ END

12 HAS ... LOOKED FOR WORK AT ANYTIME IN THE PAST 12 MONTHS?Yes ☐ No ☐ go to 14**13** WHAT WAS THE MAIN REASON THAT ... STOPPED LOOKING FOR WORK?☐ Enter code**14** DID ... WANT A JOB LAST WEEK?Yes ☐ No ☐ go to 24**15** WHAT WAS THE MAIN REASON THAT ... DID NOT LOOK FOR WORK LAST WEEK?☐ Enter code**16** WAS THERE ANY REASON THAT ... COULD NOT TAKE A JOB LAST WEEK?☐ Enter code and if code 0 or D go to 24**17** DOES ... WANT A JOB TO LAST FOR LESS THAN 6 MONTHS OR MORE THAN 6 MONTHS?6 months or less ☐ go to 18More than 6 months ☐Length of employment does not matter ☐ go to 19**18** WHAT IS THE MAIN REASON THAT ... WANTS A JOB TO LAST FOR LESS THAN 6 MONTHS?☐ Enter code**19** DOES ... WANT A FULL-TIME JOB OR A PART-TIME JOB?Full-time ☐Part-time ☐Either full-time or part-time ☐**20** WOULD ... MOVE TO ANOTHER LOCATION IN THIS PROVINCE IF A SUITABLE JOB WERE OFFERED?Yes ☐ No ☐**21** WOULD ... MOVE TO ANOTHER PROVINCE IF A SUITABLE JOB WERE OFFERED?Yes ☐ No ☐**22** DOES ... EXPECT TO BE WORKING AT ANYTIME IN THE NEXT 6 MONTHS?Yes ☐ No ☐ go to 24**23** DOES ... EXPECT TO BE WORKING FOR A FORMER EMPLOYER?Yes ☐ No ☐**24 INFORMATION SOURCE:**

Enter HRD page-line number of person providing the above information.

CODES

- 13** A Own illness or disability
B Child care responsibilities - own children
C Other personal or family responsibilities
D Going to school
E No longer interested in finding work
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 No reason given
O Other - Do not specify in NOTES

16

- A Own illness or disability
B Child care responsibilities - own children
C Other personal or family responsibilities
D Going to school
E Already has a job
N No reason given
O Other - Specify in NOTES

18

- A Own illness or disability
B Child care responsibilities - own children
C Other personal or family responsibilities
D Continuing with education or returning to school full-time
E No jobs available (in area or suited to skills) which last more than six months
F Expects to return to a former job or employer
O Other - Specify in NOTES

99 NOTES

See over for additional NOTES ☐

Item No.

1991 Housing Repair and Renovation Survey



Survey Month:	March 1992		
Title:	1991 Housing Repair and Renovation Survey		
Sponsor:	Statistics Canada		
Survey Method:	Personal/Telephone Interview		
Sample Size:	LFS rotation groups 1, 2, 5 and 6 (27,000 homeowners)		
Objectives:	The objective of the survey is to provide annual information on home improvement and maintenance expenditures of Canadian homeowners.		
Project Manager:	Robin Chaplin (951-4642)		
Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
			X

**1991 Housing repair and renovation survey**

1 FORM NO. 08

Confidential (when completed)

Collected under the authority of the
Statistics Act, Revised Statutes of
Canada, 1985, Chapter S19.

PLACE LABEL HERE	Docket No. 2 <input type="text"/>	Date 3 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Assignment No. 4 <input type="text"/>
	Dwelling Type 5 <input type="text"/>	Listing Address 6 <input type="text"/>	
	Language 7 <input type="text"/>	Telephone Number 8 <input type="text"/> - <input type="text"/> - <input type="text"/>	

9. COMPLETION STATUS

- | | |
|---|---|
| LFS non-interview 1 <input type="radio"/> | Partially completed 4 <input type="radio"/> |
| Interview ended in item 15 | |
| Did not own in 1991 2 <input type="radio"/> | Refused F08 5 <input type="radio"/> |
| Completed 3 <input type="radio"/> | Other non-response 6 <input type="radio"/> |
| | (Specify in notes) |

10. The 1991 Housing Repair and Renovation Survey collects information from homeowners about their expenditures for repairs, maintenance and renovations.

11. Who would be the best person to talk to about your household's housing expenses?

If the person is not available, set up an appointment.

First name Last name HRD page line no. (item 31, F03)

12. RECORD OF CALLS AND APPOINTMENTS

#	Date	Time	Comments	Call back for:
1				
2				
3				
4				

13. How many months was this dwelling owned and occupied by a member of this household in 1991?

Months

14. In 1991, did anyone in this household occupy any other dwellings that they owned? Exclude vacation homes.

Yes 1 <input type="radio"/> → No 2 <input type="radio"/> →	How many other dwellings? <input type="text"/>	How many months in 1991 in ...	Was this ...			
			a single family dwelling?	an apartment?	another type of dwelling?	
			Dwelling 1: <input type="text"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
			Dwelling 2: <input type="text"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>
		Dwelling 3: <input type="text"/>	7 <input type="radio"/>	8 <input type="radio"/>	9 <input type="radio"/>	

15. INTERVIEWER CHECK ITEM:

- If "00" in item 13 and "No" in item 14 ☐ Thank respondent and end.
Mark circle 2 in item 9.
Otherwise ☐ Go to 16

NOTES

Item No.	
99 <input type="text"/>	<input type="text"/>
99 <input type="text"/>	<input type="text"/>

16. When answering the following questions, keep in mind that they apply to the months in the dwelling(s) you have just reported. Please report an expenditure only once.

Part A.

Were there any expenditures in 1991 for the ADDITION of ...

What was the total cost of WORK CONTRACTED OUT? (Exclude the cost of any materials that you purchased separately.)

What was the cost of MATERIALS that you purchased separately?

17. A garage or car port?	Yes 1 <input type="radio"/> →	\$ <input type="text"/> .00	Don't know	\$ <input type="text"/> .00	Don't know
	No 2 <input type="radio"/>	3 <input type="text"/>	4 <input type="radio"/>	5 <input type="text"/>	6 <input type="radio"/>
18. Other structural extensions such as rooms, decks or garden sheds?	Yes 7 <input type="radio"/> →	\$ <input type="text"/> .00		\$ <input type="text"/> .00	
	No 8 <input type="radio"/>	1 <input type="text"/>	2 <input type="radio"/>	3 <input type="text"/>	4 <input type="radio"/>
19. An inground swimming pool? ..	Yes 5 <input type="radio"/> →	\$ <input type="text"/> .00		\$ <input type="text"/> .00	
	No 6 <input type="radio"/>	7 <input type="text"/>	8 <input type="radio"/>	1 <input type="text"/>	2 <input type="radio"/>
20. Fences, patios, driveways? ...	Yes 3 <input type="radio"/> →	\$ <input type="text"/> .00		\$ <input type="text"/> .00	
	No 4 <input type="radio"/>	5 <input type="text"/>	6 <input type="radio"/>	7 <input type="text"/>	8 <input type="radio"/>
21. Landscaping?	Yes 1 <input type="radio"/> →	\$ <input type="text"/> .00		\$ <input type="text"/> .00	
	No 2 <input type="radio"/>	3 <input type="text"/>	4 <input type="radio"/>	5 <input type="text"/>	6 <input type="radio"/>

Part B.

22. Were there any expenditures for RENOVATIONS or ALTERATIONS in 1991?

These include jobs such as remodelling rooms, adding or replacing doors and windows, renovating exterior walls, upgrading insulation and adding eavestroughing. Include any finishing in new homes, and the cost of any equipment and built-in appliances that were part of the renovation project.

Yes 1 ☐ No 2 ☐ → Go to 26

Were there any RENOVATIONS or ALTERATIONS that involved...

What was the total cost of WORK CONTRACTED OUT? (Exclude the cost of any materials that you purchased separately.)

What was the cost of MATERIALS that you purchased separately?

23. A combination of interior and exterior work?	Yes 1 <input type="radio"/> →	\$ <input type="text"/> .00	Don't know	\$ <input type="text"/> .00	Don't know
	No 2 <input type="radio"/>	3 <input type="text"/>	4 <input type="radio"/>	5 <input type="text"/>	6 <input type="radio"/>
<i>(Examples: a family room renovation that involved installing a fireplace and chimney; moving an interior wall and installing wall-to-wall)</i>					
24. Exterior work only?	Yes 7 <input type="radio"/> →	\$ <input type="text"/> .00	Don't know	\$ <input type="text"/> .00	Don't know
	No 8 <input type="radio"/>	1 <input type="text"/>	2 <input type="radio"/>	3 <input type="text"/>	4 <input type="radio"/>
<i>(Examples: remodelled porch and replaced front door; replaced living and dining room windows)</i>					
25. Interior work only?	Yes 5 <input type="radio"/> →	\$ <input type="text"/> .00	Don't know	\$ <input type="text"/> .00	Don't know
	No 6 <input type="radio"/>	7 <input type="text"/>	8 <input type="radio"/>	1 <input type="text"/>	2 <input type="radio"/>
<i>(Examples: installed seamless floor in kitchen; insulated basement walls and partitioned off laundry room; added a powder room)</i>					

NOTES

Item No.

99 <input type="text"/>	<input type="text"/>
99 <input type="text"/>	<input type="text"/>
99 <input type="text"/>	<input type="text"/>
99 <input type="text"/>	<input type="text"/>

INTERVIEWER: *REPLACEMENT* refers to the installation of equipment or fixtures that replaced an existing unit.
Example: replacing an electric water heater with a gas model.

NEW INSTALLATION refers to the installation of equipment or fixtures that did not previously exist on the property, or that were installed in addition to the equipment or fixtures on the property. Example: installing a shower stall in what had been a half-bathroom.

Part C.

Were there any expenditures in 1991 for the purchase or installation of ...

What was the total cost of **WORK CONTRACTED OUT?** (Exclude the cost of any materials that you purchased separately.)

What was the cost of **MATERIALS** that you purchased separately?

26. Plumbing fixtures?

Yes 1 ☐ No 2 ☐ → Go to 27

For a replacement? ... Yes 3 ☐ → \$.00 Don't know 6 ☐ \$.00 Don't know 8 ☐
No 4 ☐ 5 7

For a new installation? ... Yes 1 ☐ → \$.00 Don't know 4 ☐ \$.00 Don't know 6 ☐
No 2 ☐ 3 5

27. Heating or air conditioning equipment?

Yes 7 ☐ No 8 ☐ → Go to 28

For a replacement? ... Yes 1 ☐ → \$.00 Don't know 4 ☐ \$.00 Don't know 6 ☐
No 2 ☐ 3 5

For a new installation? ... Yes 7 ☐ → \$.00 Don't know 2 ☐ \$.00 Don't know 4 ☐
No 8 ☐ 1 3

28. Electrical fixtures or equipment? (Include wiring.)

Yes 5 ☐ No 6 ☐ → Go to 29

For a replacement? ... Yes 7 ☐ → \$.00 Don't know 2 ☐ \$.00 Don't know 4 ☐
No 8 ☐ 1 3

For a new installation? ... Yes 5 ☐ → \$.00 Don't know 8 ☐ \$.00 Don't know 2 ☐
No 6 ☐ 7 1

29. Built-in appliances such as ovens, dishwashers?

Yes 3 ☐ No 4 ☐ → Go to 30

For a replacement? ... Yes 5 ☐ → \$.00 Don't know 8 ☐ \$.00 Don't know 2 ☐
No 6 ☐ 7 1

For a new installation? ... Yes 3 ☐ → \$.00 Don't know 6 ☐ \$.00 Don't know 8 ☐
No 4 ☐ 5 7

30. Wall-to-wall carpeting?

Yes 1 ☐ No 2 ☐ → Go to 31

For a replacement? ... Yes 3 ☐ → \$.00 Don't know 6 ☐ \$.00 Don't know 8 ☐
No 4 ☐ 5 7

For a new installation? ... Yes 1 ☐ → \$.00 Don't know 4 ☐ \$.00 Don't know 6 ☐
No 2 ☐ 3 5

31. Other fixtures or built-in equipment?

Yes 7 ☐ No 8 ☐ → Go to 32

For a replacement? ... Yes 1 ☐ → \$.00 Don't know 4 ☐ \$.00 Don't know 6 ☐
No 2 ☐ 3 5

SPECIFY

For a new installation? ... Yes 7 ☐ → \$.00 Don't know 2 ☐ \$.00 Don't know 4 ☐
No 8 ☐ 1 3

SPECIFY

NOTES

Item No.

99	<input type="text"/>	<input type="text"/>
99	<input type="text"/>	<input type="text"/>
99	<input type="text"/>	<input type="text"/>
99	<input type="text"/>	<input type="text"/>

Part D.

The following questions are about REPAIRS and MAINTENANCE costs for the dwelling(s) in 1991.

Were there any expenditures for...

What was the total cost of WORK CONTRACTED OUT? (Exclude the cost of any materials that you purchased separately.)

What was the cost of MATERIALS that you purchased separately?

	Yes	No	Don't know	Don't know
32. Painting (interior or exterior)?	1 <input type="radio"/> → \$ _____ .00	2 <input type="radio"/> 3 _____ 4 <input type="radio"/>	5 _____ 6 <input type="radio"/>	
33. Wall papering?	7 <input type="radio"/> → \$ _____ .00	8 <input type="radio"/> 1 _____ 2 <input type="radio"/>	3 _____ 4 <input type="radio"/>	
34. Repairs to interior walls and ceilings, plastering, drywall, panelling, tiling?	5 <input type="radio"/> → \$ _____ .00	6 <input type="radio"/> 7 _____ 8 <input type="radio"/>	1 _____ 2 <input type="radio"/>	
35. Repairs to hard surface flooring and wall-to-wall carpeting? (Exclude wooden flooring.)	3 <input type="radio"/> → \$ _____ .00	4 <input type="radio"/> 5 _____ 6 <input type="radio"/>	7 _____ 8 <input type="radio"/>	
36. Complete re-roofing?	1 <input type="radio"/> → \$ _____ .00	2 <input type="radio"/> 3 _____ 4 <input type="radio"/>	5 _____ 6 <input type="radio"/>	
37. Eavestroughing and other roof repairs?	7 <input type="radio"/> → \$ _____ .00	8 <input type="radio"/> 1 _____ 2 <input type="radio"/>	3 _____ 4 <input type="radio"/>	
38. Repairs to exterior walls including soffits, fascia, foundations and chimneys? (Include chimney cleaning.)	5 <input type="radio"/> → \$ _____ .00	6 <input type="radio"/> 7 _____ 8 <input type="radio"/>	1 _____ 2 <input type="radio"/>	
39. Caulking and weather stripping, etc.? (Include replacement of insulation, vapour barriers, etc.)	3 <input type="radio"/> → \$ _____ .00	4 <input type="radio"/> 5 _____ 6 <input type="radio"/>	7 _____ 8 <input type="radio"/>	
40. Repairs to outdoor patios, fences and driveways?	1 <input type="radio"/> → \$ _____ .00	2 <input type="radio"/> 3 _____ 4 <input type="radio"/>	5 _____ 6 <input type="radio"/>	
41. Heating and air conditioning system? (Include service contracts.)	7 <input type="radio"/> → \$ _____ .00	8 <input type="radio"/> 1 _____ 2 <input type="radio"/>	3 _____ 4 <input type="radio"/>	
42. Plumbing?	5 <input type="radio"/> → \$ _____ .00	6 <input type="radio"/> 7 _____ 8 <input type="radio"/>	1 _____ 2 <input type="radio"/>	
43. Electrical?	3 <input type="radio"/> → \$ _____ .00	4 <input type="radio"/> 5 _____ 6 <input type="radio"/>	7 _____ 8 <input type="radio"/>	
44. Carpentry? (Include wooden flooring.)	1 <input type="radio"/> → \$ _____ .00	2 <input type="radio"/> 3 _____ 4 <input type="radio"/>	5 _____ 6 <input type="radio"/>	
45. Other repairs and maintenance? (Exclude housekeeping maintenance work such as rug cleaning, window washing, groundskeeping, snow removal, garbage removal, etc.)	7 <input type="radio"/> → \$ _____ .00	8 <input type="radio"/> 1 _____ 2 <input type="radio"/>	3 _____ 4 <input type="radio"/>	
SPECIFY "OTHER" _____				

INTERVIEWER: THANK RESPONDENT AND COMPLETE ITEM 9 ON FRONT COVER

NOTES

Item No.	
99	
99	
99	
99	

Survey of Consumer Finances



Survey Month: April 1992

Title: Survey of Consumer Finances

Sponsor: Statistics Canada

Survey Method: Personal/Telephone Interview

Sample Size: LFS rotation groups 1, 2, 3 and 6 (41,000 households across Canada)

Objectives: The survey is the only source providing up-to-date information on the distribution and sources of income, before and after tax, for families and individuals. Key measures produced include female-to-male earnings ratios and low income rates for major socio-economic groups such as the elderly, lone-parent families and children. Statistics on income distributions and on low income for these and other groups are essential for evaluating present programs and for planning future policies affecting the well-being of all Canadians.

Project Manager: Kevin Bishop (951-2211)

Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$1,100.00	

Five microdata tapes are produced annually, at a cost of \$1,000.00 each. They are:

- *Economic Families,*
- *Census Families,*
- *Individuals with Income,*
- *Household Income Facilities and Equipment,*
- *Key File (for linkage of preceding four files).*



Survey of Consumer Finances

1991 Income Questionnaire

To be completed by persons 15 years of age and over

Collected under the Authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.

This act prohibits the disclosure by Statistics Canada of any particulars which could reveal the identity of an individual.

R.O.	Docket No.	P.S.U.	Survey Date	Assignment No.	HRD page - line No.
1	2	3	4	5	6

During the twelve months ending December 31, 1991, did you receive any income from the following sources?

- Mark "X" in the appropriate circle and enter amount received
- For a "LOSS", write "LOSS" above the amount.
- Use the accompanying Guide to help complete this form.

2	0	1
---	---	---

25 L.C.

DOLLARS

CENTS

1	WAGES and SALARIES before deductions	No <input type="radio"/> Yes <input type="radio"/>	02	
2	MILITARY PAY and ALLOWANCES	No <input type="radio"/> Yes <input type="radio"/>	03	
3	Net income from NON-FARM SELF-EMPLOYMENT	No <input type="radio"/> Yes <input type="radio"/>	04	
4	Net income from FARM SELF-EMPLOYMENT , including farm program payments and rebates, Canadian Wheat Board payments, crop insurance, etc.	No <input type="radio"/> Yes <input type="radio"/>	05	
5	Net income from ROOMERS and BOARDERS	No <input type="radio"/> Yes <input type="radio"/>	06	
6	INTEREST on bonds, deposits and savings certificates, Canada Savings Bonds	No <input type="radio"/> Yes <input type="radio"/>	07	
7	DIVIDENDS , actual amount received (not taxable amount)	No <input type="radio"/> Yes <input type="radio"/>	08	
8	TAXABLE CAPITAL GAINS	No <input type="radio"/> Yes <input type="radio"/>	09	
9	OTHER INVESTMENT INCOME (net rental income, interest received from loans or mortgages, cash dividends from life insurance policies)	No <input type="radio"/> Yes <input type="radio"/>	10	
10	FAMILY ALLOWANCES , including Quebec Allowance for Newborn Children	No <input type="radio"/> Yes <input type="radio"/>	11	
11	OLD AGE SECURITY PENSION, GUARANTEED INCOME SUPPLEMENT, SPOUSE'S ALLOWANCE from federal government only. Report provincial supplements in question 14	No <input type="radio"/> Yes <input type="radio"/>	12	
12	CANADA or QUEBEC PENSION PLAN BENEFITS	No <input type="radio"/> Yes <input type="radio"/>	13	
13	UNEMPLOYMENT INSURANCE BENEFITS , total benefits before tax deductions	No <input type="radio"/> Yes <input type="radio"/>	14	
14	SOCIAL ASSISTANCE and PROVINCIAL INCOME SUPPLEMENTS	No <input type="radio"/> Yes <input type="radio"/>	15	
15	GOODS and SERVICES TAX CREDIT	No <input type="radio"/> Yes <input type="radio"/>	16	
16	CHILD TAX CREDIT	No <input type="radio"/> Yes <input type="radio"/>	17	
17	PROVINCIAL TAX CREDITS , including Quebec Real Estate Tax Refund	No <input type="radio"/> Yes <input type="radio"/>	18	
18	OTHER INCOME from GOVERNMENT SOURCES Please specify _____	No <input type="radio"/> Yes <input type="radio"/>	19	
19	RETIREMENT PENSIONS, SUPERANNUATION and ANNUITIES Please specify _____	No <input type="radio"/> Yes <input type="radio"/>	20	
20	OTHER MONEY INCOME Please specify _____	No <input type="radio"/> Yes <input type="radio"/>	21	
21	TOTAL INCOME , sum of entries in questions 1 to 20	No <input type="radio"/> Yes <input type="radio"/>	22	
22	INCOME TAX ON 1991 INCOME - line 435 of Revenue Canada T-1 (i.e., federal plus provincial). In Quebec, combine amounts from line 435 of Revenue Canada T-1 with line 450 of Revenu Québec long form or with line 444 of Revenu Québec short form	No <input type="radio"/> Yes <input type="radio"/>		

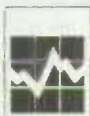
THANK YOU FOR YOUR COOPERATION

NOTES - OFFICE USE ONLY									
99	Item no.								
99									
99									
99									

Canadian Travel Survey



Survey Month:	April to December 1992		
Title:	Canadian 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 one LFS rotation group throughout Canada. In addition, the survey was conducted in one or two rotation groups in the provinces of Newfoundland, Nova Scotia, New Brunswick and Quebec.		
Objectives:	This survey provides 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 (e.g., transportation, accommodation facilities). The data will also be used to provide an 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:	Jack Beauregard (951-3328)		
Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$500.00	



1	0	9	2							3		9	2		
Form No.			Docket No.				Seq. No.			Survey Date			Reference Month		
4						5			6					7	
Assignment No.					HRD page-line No.			Eligible members			Lang.		Status		
8	Given Name														
9	Surname														

INTRODUCTION AT TIME OF LABOUR FORCE SURVEY

... has been randomly selected from your household as a respondent for the 1992 Travel Survey.

Is he/she available?

Yes ☐ ► Conduct interview

No ☐ ► Make an appointment ►

Date:	Time:
Call Back:	Call Back:
Address:	Telephone No.

INTRODUCTION AT TIME OF PERSONAL OR TELEPHONE INTERVIEW

You have been randomly selected from your household as a respondent for the 1992 Travel Survey. This survey will obtain information on travel and tourism, one of Canada's major industries.

I would like to ask some questions about any trips you may have taken which ended in ... (reference month). Please do not include any trips you took:

as a member of an operating crew of a bus, plane, truck, etc.;
commuting to work or school;
moving to a new residence.

A. Did you take any business trips of one night or more which ended last month?

Yes ☐ ► How many trips? No ☐

B. Did you take any other trips of one night or more which ended last month? Other trips include: taking a vacation, visiting friends or relatives, attending a wedding, fair or festival, etc.

Yes ☐ ► How many trips? No ☐

C. INTERVIEWER CHECK ITEM: For Ontario residents ... ☐ Go to E

Otherwise ... ☐ Go to D

D. Did you take any same day trips of at least 50 miles (80 km) or more, one way, for any reason, last month?

Yes ☐ ► How many trips? No ☐ Go to 10A

ONTARIO RESIDENTS ONLY.

E. Did you take any same day trips of at least 25 miles (40 km) or more, one way, for any reason, last month?

Yes ☐ ► How many trips? No ☐

10A. INTERVIEWER CHECK ITEM: If "Yes" in A, B, D or E ... ☐ Go to 10B

Otherwise ... ☐ Go to 29

10B. INTERVIEWER CHECK ITEM: Add entries in A, B, D and E above: Enter total number of trips taken

Then read the following statement to the respondent: "I would now like to ask you a few more details about the (repeat the number) trip(s) you took last month."

(TURN THE PAGE)

TRIP 1 BEGINNING WITH THE FIRST TRIP THAT ENDED LAST MONTH:

11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?

(Nearest) CITY/TOWN _____
 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)

(Nearest) CITY/TOWN _____ PROVINCE/STATE _____
 COUNTRY (if outside Canada) _____ FOR OFFICE USE ONLY

13. APPROXIMATELY HOW FAR FROM YOUR HOME IS _____ ? (REPEAT DESTINATION FROM QUESTION 12)

Miles _____ 1 ☐ Enter number _____
 Kilometres _____ 2 ☐

14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?

15 years and over 3 under 15 years 4

15. WAS THIS A WEEK-END TRIP?

Yes 1 ☐ No 2 ☐

16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?

Enter number If 000 go to 19

17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?

Newfoundland 01 <input type="radio"/>	<input type="text"/>	Saskatchewan 08 <input type="radio"/>	<input type="text"/>
P.E.I. 02 <input type="radio"/>	<input type="text"/>	Alberta 09 <input type="radio"/>	<input type="text"/>
Nova Scotia 03 <input type="radio"/>	<input type="text"/>	British Columbia 10 <input type="radio"/>	<input type="text"/>
New Brunswick 04 <input type="radio"/>	<input type="text"/>	N.W.T. 11 <input type="radio"/>	<input type="text"/>
Quebec 05 <input type="radio"/>	<input type="text"/>	Yukon 12 <input type="radio"/>	<input type="text"/>
Ontario 06 <input type="radio"/>	<input type="text"/>	United States 13 <input type="radio"/>	<input type="text"/>
Manitoba 07 <input type="radio"/>	<input type="text"/>	All other countries 14 <input type="radio"/>	<input type="text"/>

18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?

Hotel (including tourist homes) 1	<input type="text"/>
Motel 2	<input type="text"/>
Camping or trailer park 3	<input type="text"/>
Home of friends or relatives 4	<input type="text"/>
Private cottage or vacation home 5	<input type="text"/>
Commercial cottage or cabin 6	<input type="text"/>
Other (hostels, universities, etc.) 7	<input type="text"/>

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.)

Automobile 01 ☐ Rail 02 ☐ Other 03 ☐
 Bus 04 ☐ Boat 05 ☐
 Air 06 ☐ Did you fly on a Canadian carrier? Yes 07 ☐ No 08 ☐
 Did you rent a car? Yes 09 ☐ No 10 ☐

20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only)

Visiting friends/relatives 1 ☐ * Pleasure 2 ☐ Personal 3 ☐
 Business 4 ☐ A convention 5 ☐
 Was it to attend a convention? Yes 6 ☐ No 7 ☐

21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply)

Visiting friends or relatives 01 <input type="radio"/>	Visit a Provincial Park 12 <input type="radio"/>
Festivals or events 02 <input type="radio"/>	Visit a Regional/Municipal Park 13 <input type="radio"/>
Shopping 03 <input type="radio"/>	Attend sports events 14 <input type="radio"/>
Sightseeing 04 <input type="radio"/>	Participate in sports or outdoor activity (specify) 15 <input type="radio"/>
Attend cultural events e.g. plays, concerts 05 <input type="radio"/>	
Nightlife/entertainment 06 <input type="radio"/>	Swimming 16 <input type="radio"/>
Dining at high quality restaurants 07 <input type="radio"/>	Other water sports 17 <input type="radio"/>
Visit a theme park 08 <input type="radio"/>	Golfing 18 <input type="radio"/>
Visit zoo/museum/natural display 09 <input type="radio"/>	Hunting 19 <input type="radio"/>
Visit a National Park 10 <input type="radio"/>	Fishing 20 <input type="radio"/>
Visit an Historic site 11 <input type="radio"/>	Cross country skiing 21 <input type="radio"/>
	Downhill skiing 22 <input type="radio"/>
	Other 23 <input type="radio"/>
	None of the above 24 <input type="radio"/>

22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE" IS 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 National park or Historic site 99 ☐

***23A. INTERVIEWER CHECK ITEM:**

If item 12 (destination) is the province of "Quebec" 1 ☐ Go to 23B
 Otherwise 2 ☐ Go to 25

***23B. If "pleasure" is marked in item 20 3 ☐ Go to 24
 Otherwise 4 ☐ Go to 25**

24. What did you spend most of your time on during this trip? (check one only)

Visiting/touring a large city 1 <input type="radio"/>	Fishing 5 <input type="radio"/>
Visiting/touring other region(s) 2 <input type="radio"/>	Snowmobiling 6 <input type="radio"/>
Downhill skiing 3 <input type="radio"/>	Staying in a resort 7 <input type="radio"/>
Hunting 4 <input type="radio"/>	Adventure tours (rafting, trekking, etc.) 8 <input type="radio"/>
	Other 9 <input type="radio"/>

25. 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	\$ <input type="text"/>
Transportation to and from destination including expenditures for gas 2	\$ <input type="text"/>
Local transportation (i.e. taxis, bus, etc.) 3	\$ <input type="text"/>
Accommodation 4	\$ <input type="text"/>
Food and beverages 5	\$ <input type="text"/>
Recreation and entertainment 6	\$ <input type="text"/>
Other (souvenirs, etc.) 7	\$ <input type="text"/>
Total (if no breakdown given) 8	\$ <input type="text"/>

26. IF "BUSINESS" MARKED IN 20 ASK: WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:

An employer? 1 %
 Yourself? 2 %
 Other member(s) of your household? 3 %

27. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE LAST MONTH?

None 4 ☐ Go to 28 OR (Enter number)

28. INTERVIEWER CHECK ITEM:

Last trip 1 ☐ Go to 29
 Otherwise 2 ☐ Go to TRIP 2

TRIP 2 CONTINUING WITH THE NEXT TRIP
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?

(Nearest) CITY/TOWN _____

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)

(Nearest) CITY/TOWN _____ PROVINCE/STATE _____

COUNTRY (if outside Canada) _____ FOR OFFICE USE ONLY

13. APPROXIMATELY HOW FAR FROM YOUR HOME IS _____ ? (REPEAT DESTINATION FROM QUESTION 12)

Miles 1 ☐ Enter number

Kilometres 2 ☐ Enter number

14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?

15 years and over 3 under 15 years 4

15. WAS THIS A WEEK-END TRIP?

Yes 1 ☐ No 2 ☐

16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?

Enter number If 000 go to 19

17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?

Newfoundland 01 <input type="radio"/>	<input type="text"/>	Saskatchewan 08 <input type="radio"/>	<input type="text"/>
P.E.I. 02 <input type="radio"/>	<input type="text"/>	Alberta 09 <input type="radio"/>	<input type="text"/>
Nova Scotia 03 <input type="radio"/>	<input type="text"/>	British Columbia 10 <input type="radio"/>	<input type="text"/>
New Brunswick 04 <input type="radio"/>	<input type="text"/>	N.W.T. 11 <input type="radio"/>	<input type="text"/>
Quebec 05 <input type="radio"/>	<input type="text"/>	Yukon 12 <input type="radio"/>	<input type="text"/>
Ontario 06 <input type="radio"/>	<input type="text"/>	United States 13 <input type="radio"/>	<input type="text"/>
Manitoba 07 <input type="radio"/>	<input type="text"/>	All other countries 14 <input type="radio"/>	<input type="text"/>

18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?

Hotel (including tourist homes) 1	<input type="text"/>
Motel 2	<input type="text"/>
Camping or trailer park 3	<input type="text"/>
Home of friends or relatives 4	<input type="text"/>
Private cottage or vacation home 5	<input type="text"/>
Commercial cottage or cabin 6	<input type="text"/>
Other (hostels, universities, etc.) 7	<input type="text"/>

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.)

Automobile 01 ☐ Rail 02 ☐ Other 03 ☐

Bus 04 ☐ Boat 05 ☐

Air 06 ☐ Did you fly on a Canadian carrier? Yes 07 ☐ No 08 ☐

Did you rent a car? Yes 09 ☐ No 10 ☐

20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only)

Visiting friends/relatives 1 ☐ * Pleasure 2 ☐ Personal 3 ☐

Business 4 ☐ A convention 5 ☐

Was it to attend a convention? Yes 6 ☐ No 7 ☐

21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply)

Visiting friends or relatives 01 <input type="radio"/>	Visit a Provincial Park 12 <input type="radio"/>
Festivals or events 02 <input type="radio"/>	Visit a Regional/Municipal Park 13 <input type="radio"/>
Shopping 03 <input type="radio"/>	Attend sports events 14 <input type="radio"/>
Sightseeing 04 <input type="radio"/>	Participate in sports or outdoor activity (specify) 15 <input type="radio"/>
Attend cultural events e.g. plays, concerts 05 <input type="radio"/>	
Nightlife/entertainment 06 <input type="radio"/>	Swimming 16 <input type="radio"/>
Dining at high quality restaurants 07 <input type="radio"/>	Other water sports 17 <input type="radio"/>
Visit a theme park 08 <input type="radio"/>	Golfing 18 <input type="radio"/>
Visit zoo/museum/natural display 09 <input type="radio"/>	Hunting 19 <input type="radio"/>
Visit a National Park 10 <input type="radio"/>	Fishing 20 <input type="radio"/>
Visit an Historic site 11 <input type="radio"/>	Cross country skiing 21 <input type="radio"/>
	Downhill skiing 22 <input type="radio"/>
	Other 23 <input type="radio"/>
	None of the above 24 <input type="radio"/>

22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE" IS 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 National park or Historic site 99 ☐

***23A. INTERVIEWER CHECK ITEM:**

If item 12 (destination) is the province of "Quebec" 1 ☐ Go to 23B

Otherwise 2 ☐ Go to 25

***23B. If "pleasure" is marked in item 20 3 ☐ Go to 24**
 Otherwise 4 ☐ Go to 25

24. What did you spend most of your time on during this trip? (check one only)

Visiting/touring a large city 1 <input type="radio"/>	Fishing 5 <input type="radio"/>
Visiting/touring other region(s) 2 <input type="radio"/>	Snowmobiling 6 <input type="radio"/>
Downhill skiing 3 <input type="radio"/>	Staying in a resort 7 <input type="radio"/>
Hunting 4 <input type="radio"/>	Adventure tours (rafting, trekking, etc.) 8 <input type="radio"/>
	Other 9 <input type="radio"/>

25. 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	\$ <input type="text"/>
Transportation to and from destination including expenditures for gas 2	\$ <input type="text"/>
Local transportation (i.e. taxis, bus, etc.) 3	\$ <input type="text"/>
Accommodation 4	\$ <input type="text"/>
Food and beverages 5	\$ <input type="text"/>
Recreation and entertainment 6	\$ <input type="text"/>
Other (souvenirs, etc.) 7	\$ <input type="text"/>
Total (if no breakdown given) 8	\$ <input type="text"/>

26. IF "BUSINESS" MARKED IN 20 ASK: WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:

An employer? 1 %

Yourself? 2 %

Other member(s) of your household? 3 %

27. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE LAST MONTH?

None 4 ☐ Go to 28 OR (Enter number)

28. INTERVIEWER CHECK ITEM:

Last trip 1 ☐ Go to 29

Otherwise 2 ☐ Go to TRIP 3

TRIP 3 CONTINUING WITH THE NEXT TRIP

11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?

(Nearest) CITY/TOWN _____
 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)

(Nearest) CITY/TOWN _____ PROVINCE/STATE _____
 COUNTRY (if outside Canada) _____ FOR OFFICE USE ONLY

13. APPROXIMATELY HOW FAR FROM YOUR HOME IS _____ ? (REPEAT DESTINATION FROM QUESTION 12)

Miles 1 ☐ Enter number
 Kilometres 2 ☐

14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?

15 years and over 3 under 15 years 4

15. WAS THIS A WEEK-END TRIP?

Yes 1 ☐ No 2 ☐

16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?

Enter number If 000 go to 19

17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?

Newfoundland 01 <input type="radio"/>	<input type="text"/>	Saskatchewan 08 <input type="radio"/>	<input type="text"/>
P.E.I. 02 <input type="radio"/>	<input type="text"/>	Alberta 09 <input type="radio"/>	<input type="text"/>
Nova Scotia 03 <input type="radio"/>	<input type="text"/>	British Columbia 10 <input type="radio"/>	<input type="text"/>
New Brunswick 04 <input type="radio"/>	<input type="text"/>	N.W.T. 11 <input type="radio"/>	<input type="text"/>
Quebec 05 <input type="radio"/>	<input type="text"/>	Yukon 12 <input type="radio"/>	<input type="text"/>
Ontario 06 <input type="radio"/>	<input type="text"/>	United States 13 <input type="radio"/>	<input type="text"/>
Manitoba 07 <input type="radio"/>	<input type="text"/>	All other countries 14 <input type="radio"/>	<input type="text"/>

18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?

Hotel (including tourist homes) 1	<input type="text"/>
Motel 2	<input type="text"/>
Camping or trailer park 3	<input type="text"/>
Home of friends or relatives 4	<input type="text"/>
Private cottage or vacation home 5	<input type="text"/>
Commercial cottage or cabin 6	<input type="text"/>
Other (hostels, universities, etc.) 7	<input type="text"/>

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.)

Automobile 01 ☐ Rail 02 ☐ Other 03 ☐
 Bus 04 ☐ Boat 05 ☐
 Air 06 ☐ Did you fly on a Canadian carrier? Yes 07 ☐ No 08 ☐
 Did you rent a car? Yes 09 ☐ No 10 ☐

20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only)

Visiting friends/relatives 1 ☐ * Pleasure 2 ☐ Personal 3 ☐
 Business 4 ☐ A convention 5 ☐
 Was it to attend a convention? Yes 6 ☐ No 7 ☐

21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply)

Visiting friends or relatives 01 <input type="radio"/>	Visit a Provincial Park 12 <input type="radio"/>
Festivals or events 02 <input type="radio"/>	Visit a Regional/Municipal Park 13 <input type="radio"/>
Shopping 03 <input type="radio"/>	Attend sports events 14 <input type="radio"/>
Sightseeing 04 <input type="radio"/>	Participate in sports or outdoor activity (specify) 15 <input type="radio"/>
Attend cultural events e.g. plays, concerts 05 <input type="radio"/>	
Nightlife/entertainment 06 <input type="radio"/>	Swimming 16 <input type="radio"/>
Dining at high quality restaurants 07 <input type="radio"/>	Other water sports 17 <input type="radio"/>
Visit a theme park 08 <input type="radio"/>	Golfing 18 <input type="radio"/>
Visit zoo/museum/natural display 09 <input type="radio"/>	Hunting 19 <input type="radio"/>
Visit a National Park 10 <input type="radio"/>	Fishing 20 <input type="radio"/>
Visit an Historic site 11 <input type="radio"/>	Cross country skiing 21 <input type="radio"/>
	Downhill skiing 22 <input type="radio"/>
	Other 23 <input type="radio"/>
	None of the above 24 <input type="radio"/>

22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE" IS 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 National park or Historic site 99 ☐

***23A. INTERVIEWER CHECK ITEM:**

If item 12 (destination) is the province of "Quebec" 1 ☐ Go to 23B
 Otherwise 2 ☐ Go to 25

***23B. If "pleasure" is marked in item 20 3 ☐ Go to 24
 Otherwise 4 ☐ Go to 25**

24. What did you spend most of your time on during this trip? (check one only)

Visiting/touring a large city 1 <input type="radio"/>	Fishing 5 <input type="radio"/>
Visiting/touring other region(s) 2 <input type="radio"/>	Snowmobiling 6 <input type="radio"/>
Downhill skiing 3 <input type="radio"/>	Staying in a resort 7 <input type="radio"/>
Hunting 4 <input type="radio"/>	Adventure tours (rafting, trekking, etc.) 8 <input type="radio"/>
	Other 9 <input type="radio"/>

25. 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 \$
 Transportation to and from destination including expenditures for gas 2 \$
 Local transportation (i.e. taxis, bus, etc.) 3 \$
 Accommodation 4 \$
 Food and beverages 5 \$
 Recreation and entertainment 6 \$
 Other (souvenirs, etc.) 7 \$
 Total (if no breakdown given) 8 \$

26. IF "BUSINESS" MARKED IN 20 ASK: WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:

An employer? 1 %
 Yourself? 2 %
 Other member(s) of your household? 3 %

27. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE LAST MONTH?

None 4 ☐ Go to 28 OR (Enter number)

28. INTERVIEWER CHECK ITEM:

Last trip 1 ☐ Go to 29
 Otherwise 2 ☐ Go to TRIP 4

TRIP 4 CONTINUING WITH THE NEXT TRIP																																											
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP? <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (Nearest) CITY/TOWN _____ PROVINCE _____ </div> <div style="width: 35%; text-align: center;"> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> FOR OFFICE USE ONLY </div> </div>																																											
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) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (Nearest) CITY/TOWN _____ COUNTRY (if outside Canada) _____ </div> <div style="width: 35%; text-align: center;"> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> PROVINCE/STATE FOR OFFICE USE ONLY </div> </div>																																											
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS _____? <i>(REPEAT DESTINATION FROM QUESTION 12)</i> <div style="display: flex; align-items: center; margin-top: 10px;"> <div style="margin-right: 10px;"> Miles 1 <input type="radio"/> Kilometres 2 <input type="radio"/> </div> <div style="margin-right: 10px;"> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> </div> <div> Enter number </div> </div>																																											
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP? <div style="display: flex; align-items: center; margin-top: 10px;"> <div style="margin-right: 10px;"> 15 years and over 3 <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> </div> <div style="margin-right: 10px;"> under 15 years 4 <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> </div> </div>																																											
15. WAS THIS A WEEK-END TRIP? <div style="display: flex; align-items: center; margin-top: 10px;"> <div style="margin-right: 20px;"> Yes 1 <input type="radio"/> </div> <div> No 2 <input type="radio"/> </div> </div>																																											
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP? <div style="display: flex; align-items: center; margin-top: 10px;"> <div style="margin-right: 10px;"> Enter number <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> </div> <div> If 000 go to 19 </div> </div>																																											
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13. APPROXIMATELY HOW FAR FROM YOUR HOME IS _____? (REPEAT DESTINATION FROM QUESTION 12) <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> Miles 1 <input type="radio"/> Kilometres 2 <input type="radio"/> </div> <div style="border-left: 1px solid black; padding-left: 10px; margin-left: 10px;"> Enter number <table border="1" style="display: inline-table; width: 40px; height: 20px; vertical-align: middle;"> <tr><td> </td><td> </td><td> </td></tr> </table> </div> </div>																																																	
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP? <div style="display: flex; justify-content: space-around; align-items: center;"> 15 years and over 3 <table border="1" style="display: inline-table; width: 20px; height: 20px;"> <tr><td> </td><td> </td></tr> </table> under 15 years 4 <table border="1" style="display: inline-table; width: 20px; height: 20px;"> <tr><td> </td><td> </td></tr> </table> </div>																																																	
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16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP? Enter number <table border="1" style="display: inline-table; width: 40px; height: 20px;"> <tr><td> </td><td> </td><td> </td></tr> </table> If 000 go to 19																																																	
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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.) <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> <p>Automobile 01 <input type="radio"/> Rail 02 <input type="radio"/> Other 03 <input type="radio"/></p> <p>Bus 04 <input type="radio"/> Boat 05 <input type="radio"/></p> <p>Air 06 <input type="radio"/></p> </div> <div style="width: 35%; border-left: 1px solid black; padding-left: 10px;"> <p>Did you fly on a Canadian carrier? Yes 07 <input type="radio"/> No 08 <input type="radio"/></p> <p>Did you rent a car? Yes 09 <input type="radio"/> No 10 <input type="radio"/></p> </div> </div>																																																	
20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only) <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> <p>Visiting friends/relatives 1 <input type="radio"/> * Pleasure 2 <input type="radio"/> Personal 3 <input type="radio"/></p> <p>Business 4 <input type="radio"/> A convention 5 <input type="radio"/></p> </div> <div style="width: 35%; border-left: 1px solid black; padding-left: 10px;"> <p>Was it to attend a convention? Yes 6 <input type="radio"/> No 7 <input type="radio"/></p> </div> </div>																																																	
21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply) <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Visiting friends or relatives 01 <input type="radio"/></p> <p>Festivals or events 02 <input type="radio"/></p> <p>Shopping 03 <input type="radio"/></p> <p>Sightseeing 04 <input type="radio"/></p> <p>Attend cultural events e.g. plays, concerts 05 <input type="radio"/></p> <p>Nightlife/entertainment 06 <input type="radio"/></p> <p>Dining at high quality restaurants 07 <input type="radio"/></p> <p>Visit a theme park 08 <input type="radio"/></p> <p>Visit zoo/museum/natural display 09 <input type="radio"/></p> <p>Visit a National Park 10 <input type="radio"/></p> <p>Visit an Historic site 11 <input type="radio"/></p> </div> <div style="width: 50%;"> <p>Visit a Provincial Park 12 <input type="radio"/></p> <p>Visit a Regional/Municipal Park 13 <input type="radio"/></p> <p>Attend sports events 14 <input type="radio"/></p> <p>Participate in sports or outdoor activity (specify) 15 <input type="radio"/></p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>Swimming 16 <input type="radio"/></p> <p>Other water sports 17 <input type="radio"/></p> <p>Golfing 18 <input type="radio"/></p> <p>Hunting 19 <input type="radio"/></p> <p>Fishing 20 <input type="radio"/></p> <p>Cross country skiing 21 <input type="radio"/></p> <p>Downhill skiing 22 <input type="radio"/></p> <p>Other 23 <input type="radio"/></p> <p>None of the above 24 <input type="radio"/></p> </div> </div> </div>																																																	
22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE" IS MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED? enter code(s) <table border="1" style="display: inline-table; width: 60px; height: 20px;"> <tr><td> </td><td> </td><td> </td></tr> </table> Did not visit a National park or Historic site 99 <input type="radio"/>																																																	
*23A. INTERVIEWER CHECK ITEM: If item 12 (destination) is the province of "Quebec" 1 <input type="radio"/> Go to 23B Otherwise 2 <input type="radio"/> Go to 25																																																	
*23B. If "pleasure" is marked in item 20 3 <input type="radio"/> Go to 24 Otherwise 4 <input type="radio"/> Go to 25																																																	
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TRIP **7** CONTINUING WITH THE NEXT TRIP

11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?

(Nearest) CITY/TOWN _____
 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)

(Nearest) CITY/TOWN _____
 PROVINCE/STATE _____
 COUNTRY (if outside Canada) _____ FOR OFFICE USE ONLY

13. APPROXIMATELY HOW FAR FROM YOUR HOME IS _____? (REPEAT DESTINATION FROM QUESTION 12)

Miles ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17 ☐ 18 ☐ 19 ☐ 20 ☐ 21 ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27 ☐ 28 ☐ 29 ☐ 30 ☐ 31 ☐ 32 ☐ 33 ☐ 34 ☐ 35 ☐ 36 ☐ 37 ☐ 38 ☐ 39 ☐ 40 ☐ 41 ☐ 42 ☐ 43 ☐ 44 ☐ 45 ☐ 46 ☐ 47 ☐ 48 ☐ 49 ☐ 50 ☐ 51 ☐ 52 ☐ 53 ☐ 54 ☐ 55 ☐ 56 ☐ 57 ☐ 58 ☐ 59 ☐ 60 ☐ 61 ☐ 62 ☐ 63 ☐ 64 ☐ 65 ☐ 66 ☐ 67 ☐ 68 ☐ 69 ☐ 70 ☐ 71 ☐ 72 ☐ 73 ☐ 74 ☐ 75 ☐ 76 ☐ 77 ☐ 78 ☐ 79 ☐ 80 ☐ 81 ☐ 82 ☐ 83 ☐ 84 ☐ 85 ☐ 86 ☐ 87 ☐ 88 ☐ 89 ☐ 90 ☐ 91 ☐ 92 ☐ 93 ☐ 94 ☐ 95 ☐ 96 ☐ 97 ☐ 98 ☐ 99 ☐ 100 ☐ 101 ☐ 102 ☐ 103 ☐ 104 ☐ 105 ☐ 106 ☐ 107 ☐ 108 ☐ 109 ☐ 110 ☐ 111 ☐ 112 ☐ 113 ☐ 114 ☐ 115 ☐ 116 ☐ 117 ☐ 118 ☐ 119 ☐ 120 ☐ 121 ☐ 122 ☐ 123 ☐ 124 ☐ 125 ☐ 126 ☐ 127 ☐ 128 ☐ 129 ☐ 130 ☐ 131 ☐ 132 ☐ 133 ☐ 134 ☐ 135 ☐ 136 ☐ 137 ☐ 138 ☐ 139 ☐ 140 ☐ 141 ☐ 142 ☐ 143 ☐ 144 ☐ 145 ☐ 146 ☐ 147 ☐ 148 ☐ 149 ☐ 150 ☐ 151 ☐ 152 ☐ 153 ☐ 154 ☐ 155 ☐ 156 ☐ 157 ☐ 158 ☐ 159 ☐ 160 ☐ 161 ☐ 162 ☐ 163 ☐ 164 ☐ 165 ☐ 166 ☐ 167 ☐ 168 ☐ 169 ☐ 170 ☐ 171 ☐ 172 ☐ 173 ☐ 174 ☐ 175 ☐ 176 ☐ 177 ☐ 178 ☐ 179 ☐ 180 ☐ 181 ☐ 182 ☐ 183 ☐ 184 ☐ 185 ☐ 186 ☐ 187 ☐ 188 ☐ 189 ☐ 190 ☐ 191 ☐ 192 ☐ 193 ☐ 194 ☐ 195 ☐ 196 ☐ 197 ☐ 198 ☐ 199 ☐ 200 ☐ 201 ☐ 202 ☐ 203 ☐ 204 ☐ 205 ☐ 206 ☐ 207 ☐ 208 ☐ 209 ☐ 210 ☐ 211 ☐ 212 ☐ 213 ☐ 214 ☐ 215 ☐ 216 ☐ 217 ☐ 218 ☐ 219 ☐ 220 ☐ 221 ☐ 222 ☐ 223 ☐ 224 ☐ 225 ☐ 226 ☐ 227 ☐ 228 ☐ 229 ☐ 230 ☐ 231 ☐ 232 ☐ 233 ☐ 234 ☐ 235 ☐ 236 ☐ 237 ☐ 238 ☐ 239 ☐ 240 ☐ 241 ☐ 242 ☐ 243 ☐ 244 ☐ 245 ☐ 246 ☐ 247 ☐ 248 ☐ 249 ☐ 250 ☐ 251 ☐ 252 ☐ 253 ☐ 254 ☐ 255 ☐ 256 ☐ 257 ☐ 258 ☐ 259 ☐ 260 ☐ 261 ☐ 262 ☐ 263 ☐ 264 ☐ 265 ☐ 266 ☐ 267 ☐ 268 ☐ 269 ☐ 270 ☐ 271 ☐ 272 ☐ 273 ☐ 274 ☐ 275 ☐ 276 ☐ 277 ☐ 278 ☐ 279 ☐ 280 ☐ 281 ☐ 282 ☐ 283 ☐ 284 ☐ 285 ☐ 286 ☐ 287 ☐ 288 ☐ 289 ☐ 290 ☐ 291 ☐ 292 ☐ 293 ☐ 294 ☐ 295 ☐ 296 ☐ 297 ☐ 298 ☐ 299 ☐ 300 ☐ 301 ☐ 302 ☐ 303 ☐ 304 ☐ 305 ☐ 306 ☐ 307 ☐ 308 ☐ 309 ☐ 310 ☐ 311 ☐ 312 ☐ 313 ☐ 314 ☐ 315 ☐ 316 ☐ 317 ☐ 318 ☐ 319 ☐ 320 ☐ 321 ☐ 322 ☐ 323 ☐ 324 ☐ 325 ☐ 326 ☐ 327 ☐ 328 ☐ 329 ☐ 330 ☐ 331 ☐ 332 ☐ 333 ☐ 334 ☐ 335 ☐ 336 ☐ 337 ☐ 338 ☐ 339 ☐ 340 ☐ 341 ☐ 342 ☐ 343 ☐ 344 ☐ 345 ☐ 346 ☐ 347 ☐ 348 ☐ 349 ☐ 350 ☐ 351 ☐ 352 ☐ 353 ☐ 354 ☐ 355 ☐ 356 ☐ 357 ☐ 358 ☐ 359 ☐ 360 ☐ 361 ☐ 362 ☐ 363 ☐ 364 ☐ 365 ☐ 366 ☐ 367 ☐ 368 ☐ 369 ☐ 370 ☐ 371 ☐ 372 ☐ 373 ☐ 374 ☐ 375 ☐ 376 ☐ 377 ☐ 378 ☐ 379 ☐ 380 ☐ 381 ☐ 382 ☐ 383 ☐ 384 ☐ 385 ☐ 386 ☐ 387 ☐ 388 ☐ 389 ☐ 390 ☐ 391 ☐ 392 ☐ 393 ☐ 394 ☐ 395 ☐ 396 ☐ 397 ☐ 398 ☐ 399 ☐ 400 ☐ 401 ☐ 402 ☐ 403 ☐ 404 ☐ 405 ☐ 406 ☐ 407 ☐ 408 ☐ 409 ☐ 410 ☐ 411 ☐ 412 ☐ 413 ☐ 414 ☐ 415 ☐ 416 ☐ 417 ☐ 418 ☐ 419 ☐ 420 ☐ 421 ☐ 422 ☐ 423 ☐ 424 ☐ 425 ☐ 426 ☐ 427 ☐ 428 ☐ 429 ☐ 430 ☐ 431 ☐ 432 ☐ 433 ☐ 434 ☐ 435 ☐ 436 ☐ 437 ☐ 438 ☐ 439 ☐ 440 ☐ 441 ☐ 442 ☐ 443 ☐ 444 ☐ 445 ☐ 446 ☐ 447 ☐ 448 ☐ 449 ☐ 450 ☐ 451 ☐ 452 ☐ 453 ☐ 454 ☐ 455 ☐ 456 ☐ 457 ☐ 458 ☐ 459 ☐ 460 ☐ 461 ☐ 462 ☐ 463 ☐ 464 ☐ 465 ☐ 466 ☐ 467 ☐ 468 ☐ 469 ☐ 470 ☐ 471 ☐ 472 ☐ 473 ☐ 474 ☐ 475 ☐ 476 ☐ 477 ☐ 478 ☐ 479 ☐ 480 ☐ 481 ☐ 482 ☐ 483 ☐ 484 ☐ 485 ☐ 486 ☐ 487 ☐ 488 ☐ 489 ☐ 490 ☐ 491 ☐ 492 ☐ 493 ☐ 494 ☐ 495 ☐ 496 ☐ 497 ☐ 498 ☐ 499 ☐ 500 ☐ 501 ☐ 502 ☐ 503 ☐ 504 ☐ 505 ☐ 506 ☐ 507 ☐ 508 ☐ 509 ☐ 510 ☐ 511 ☐ 512 ☐ 513 ☐ 514 ☐ 515 ☐ 516 ☐ 517 ☐ 518 ☐ 519 ☐ 520 ☐ 521 ☐ 522 ☐ 523 ☐ 524 ☐ 525 ☐ 526 ☐ 527 ☐ 528 ☐ 529 ☐ 530 ☐ 531 ☐ 532 ☐ 533 ☐ 534 ☐ 535 ☐ 536 ☐ 537 ☐ 538 ☐ 539 ☐ 540 ☐ 541 ☐ 542 ☐ 543 ☐ 544 ☐ 545 ☐ 546 ☐ 547 ☐ 548 ☐ 549 ☐ 550 ☐ 551 ☐ 552 ☐ 553 ☐ 554 ☐ 555 ☐ 556 ☐ 557 ☐ 558 ☐ 559 ☐ 560 ☐ 561 ☐ 562 ☐ 563 ☐ 564 ☐ 565 ☐ 566 ☐ 567 ☐ 568 ☐ 569 ☐ 570 ☐ 571 ☐ 572 ☐ 573 ☐ 574 ☐ 575 ☐ 576 ☐ 577 ☐ 578 ☐ 579 ☐ 580 ☐ 581 ☐ 582 ☐ 583 ☐ 584 ☐ 585 ☐ 586 ☐ 587 ☐ 588 ☐ 589 ☐ 590 ☐ 591 ☐ 592 ☐ 593 ☐ 594 ☐ 595 ☐ 596 ☐ 597 ☐ 598 ☐ 599 ☐ 600 ☐ 601 ☐ 602 ☐ 603 ☐ 604 ☐ 605 ☐ 606 ☐ 607 ☐ 608 ☐ 609 ☐ 610 ☐ 611 ☐ 612 ☐ 613 ☐ 614 ☐ 615 ☐ 616 ☐ 617 ☐ 618 ☐ 619 ☐ 620 ☐ 621 ☐ 622 ☐ 623 ☐ 624 ☐ 625 ☐ 626 ☐ 627 ☐ 628 ☐ 629 ☐ 630 ☐ 631 ☐ 632 ☐ 633 ☐ 634 ☐ 635 ☐ 636 ☐ 637 ☐ 638 ☐ 639 ☐ 640 ☐ 641 ☐ 642 ☐ 643 ☐ 644 ☐ 645 ☐ 646 ☐ 647 ☐ 648 ☐ 649 ☐ 650 ☐ 651 ☐ 652 ☐ 653 ☐ 654 ☐ 655 ☐ 656 ☐ 657 ☐ 658 ☐ 659 ☐ 660 ☐ 661 ☐ 662 ☐ 663 ☐ 664 ☐ 665 ☐ 666 ☐ 667 ☐ 668 ☐ 669 ☐ 670 ☐ 671 ☐ 672 ☐ 673 ☐ 674 ☐ 675 ☐ 676 ☐ 677 ☐ 678 ☐ 679 ☐ 680 ☐ 681 ☐ 682 ☐ 683 ☐ 684 ☐ 685 ☐ 686 ☐ 687 ☐ 688 ☐ 689 ☐ 690 ☐ 691 ☐ 692 ☐ 693 ☐ 694 ☐ 695 ☐ 696 ☐ 697 ☐ 698 ☐ 699 ☐ 700 ☐ 701 ☐ 702 ☐ 703 ☐ 704 ☐ 705 ☐ 706 ☐ 707 ☐ 708 ☐ 709 ☐ 710 ☐ 711 ☐ 712 ☐ 713 ☐ 714 ☐ 715 ☐ 716 ☐ 717 ☐ 718 ☐ 719 ☐ 720 ☐ 721 ☐ 722 ☐ 723 ☐ 724 ☐ 725 ☐ 726 ☐ 727 ☐ 728 ☐ 729 ☐ 730 ☐ 731 ☐ 732 ☐ 733 ☐ 734 ☐ 735 ☐ 736 ☐ 737 ☐ 738 ☐ 739 ☐ 740 ☐ 741 ☐ 742 ☐ 743 ☐ 744 ☐ 745 ☐ 746 ☐ 747 ☐ 748 ☐ 749 ☐ 750 ☐ 751 ☐ 752 ☐ 753 ☐ 754 ☐ 755 ☐ 756 ☐ 757 ☐ 758 ☐ 759 ☐ 760 ☐ 761 ☐ 762 ☐ 763 ☐ 764 ☐ 765 ☐ 766 ☐ 767 ☐ 768 ☐ 769 ☐ 770 ☐ 771 ☐ 772 ☐ 773 ☐ 774 ☐ 775 ☐ 776 ☐ 777 ☐ 778 ☐ 779 ☐ 780 ☐ 781 ☐ 782 ☐ 783 ☐ 784 ☐ 785 ☐ 786 ☐ 787 ☐ 788 ☐ 789 ☐ 790 ☐ 791 ☐ 792 ☐ 793 ☐ 794 ☐ 795 ☐ 796 ☐ 797 ☐ 798 ☐ 799 ☐ 800 ☐ 801 ☐ 802 ☐ 803 ☐ 804 ☐ 805 ☐ 806 ☐ 807 ☐ 808 ☐ 809 ☐ 810 ☐ 811 ☐ 812 ☐ 813 ☐ 814 ☐ 815 ☐ 816 ☐ 817 ☐ 818 ☐ 819 ☐ 820 ☐ 821 ☐ 822 ☐ 823 ☐ 824 ☐ 825 ☐ 826 ☐ 827 ☐ 828 ☐ 829 ☐ 830 ☐ 831 ☐ 832 ☐ 833 ☐ 834 ☐ 835 ☐ 836 ☐ 837 ☐ 838 ☐ 839 ☐ 840 ☐ 841 ☐ 842 ☐ 843 ☐ 844 ☐ 845 ☐ 846 ☐ 847 ☐ 848 ☐ 849 ☐ 850 ☐ 851 ☐ 852 ☐ 853 ☐ 854 ☐ 855 ☐ 856 ☐ 857 ☐ 858 ☐ 859 ☐ 860 ☐ 861 ☐ 862 ☐ 863 ☐ 864 ☐ 865 ☐ 866 ☐ 867 ☐ 868 ☐ 869 ☐ 870 ☐ 871 ☐ 872 ☐ 873 ☐ 874 ☐ 875 ☐ 876 ☐ 877 ☐ 878 ☐ 879 ☐ 880 ☐ 881 ☐ 882 ☐ 883 ☐ 884 ☐ 885 ☐ 886 ☐ 887 ☐ 888 ☐ 889 ☐ 890 ☐ 891 ☐ 892 ☐ 893 ☐ 894 ☐ 895 ☐ 896 ☐ 897 ☐ 898 ☐ 899 ☐ 900 ☐ 901 ☐ 902 ☐ 903 ☐ 904 ☐ 905 ☐ 906 ☐ 907 ☐ 908 ☐ 909 ☐ 910 ☐ 911 ☐ 912 ☐ 913 ☐ 914 ☐ 915 ☐ 916 ☐ 917 ☐ 918 ☐ 919 ☐ 920 ☐ 921 ☐ 922 ☐ 923 ☐ 924 ☐ 925 ☐ 926 ☐ 927 ☐ 928 ☐ 929 ☐ 930 ☐ 931 ☐ 932 ☐ 933 ☐ 934 ☐ 935 ☐ 936 ☐ 937 ☐ 938 ☐ 939 ☐ 940 ☐ 941 ☐ 942 ☐ 943 ☐ 944 ☐ 945 ☐ 946 ☐ 947 ☐ 948 ☐ 949 ☐ 950 ☐ 951 ☐ 952 ☐ 953 ☐ 954 ☐ 955 ☐ 956 ☐ 957 ☐ 958 ☐ 959 ☐ 960 ☐ 961 ☐ 962 ☐ 963 ☐ 964 ☐ 965 ☐ 966 ☐ 967 ☐ 968 ☐ 969 ☐ 970 ☐ 971 ☐ 972 ☐ 973 ☐ 974 ☐ 975 ☐ 976 ☐ 977 ☐ 978 ☐ 979 ☐ 980 ☐ 981 ☐ 982 ☐ 983 ☐ 984 ☐ 985 ☐ 986 ☐ 987 ☐ 988 ☐ 989 ☐ 990 ☐ 991 ☐ 992 ☐ 993 ☐ 994 ☐ 995 ☐ 996 ☐ 997 ☐ 998 ☐ 999 ☐ 1000 ☐ 1001 ☐ 1002 ☐ 1003 ☐ 1004 ☐ 1005 ☐ 1006 ☐ 1007 ☐ 1008 ☐ 1009 ☐ 1010 ☐ 1011 ☐ 1012 ☐ 1013 ☐ 1014 ☐ 1015 ☐ 1016 ☐ 1017 ☐ 1018 ☐ 1019 ☐ 1020 ☐ 1021 ☐ 1022 ☐ 1023 ☐ 1024 ☐ 1025 ☐ 1026 ☐ 1027 ☐ 1028 ☐ 1029 ☐ 1030 ☐ 1031 ☐ 1032 ☐ 1033 ☐ 1034 ☐ 1035 ☐ 1036 ☐ 1037 ☐ 1038 ☐ 1039 ☐ 1040 ☐ 1041 ☐ 1042 ☐ 1043 ☐ 1044 ☐ 1045 ☐ 1046 ☐ 1047 ☐ 1048 ☐ 1049 ☐ 1050 ☐ 1051 ☐ 1052 ☐ 1053 ☐ 1054 ☐ 1055 ☐ 1056 ☐ 1057 ☐ 1058 ☐ 1059 ☐ 1060 ☐ 1061 ☐ 1062 ☐ 1063 ☐ 1064 ☐ 1065 ☐ 1066 ☐ 1067 ☐ 1068 ☐ 1069 ☐ 1070 ☐ 1071 ☐ 1072 ☐ 1073 ☐ 1074 ☐ 1075 ☐ 1076 ☐ 1077 ☐ 1078 ☐ 1079 ☐ 1080 ☐ 1081 ☐ 1082 ☐ 1083 ☐ 1084 ☐ 1085 ☐ 1086 ☐ 1087 ☐ 1088 ☐ 1089 ☐ 1090 ☐ 1091 ☐ 1092 ☐ 1093 ☐ 1094 ☐ 1095 ☐ 1096 ☐ 1097 ☐ 1098 ☐ 1099 ☐ 1100 ☐ 1101 ☐ 1102 ☐ 1103 ☐ 1104 ☐ 1105 ☐ 1106 ☐ 1107 ☐ 1108 ☐ 1109 ☐ 1110 ☐ 1111 ☐ 1112 ☐ 1113 ☐ 1114 ☐ 1115 ☐ 1116 ☐ 1117 ☐ 1118 ☐ 1119 ☐ 1120 ☐ 1121 ☐ 1122 ☐ 1123 ☐ 1124 ☐ 1125 ☐ 1126 ☐ 1127 ☐ 1128 ☐ 1129 ☐ 1130 ☐ 1131 ☐ 1132 ☐ 1133 ☐ 1134 ☐ 1135 ☐ 1136 ☐ 1137 ☐ 1138 ☐ 1139 ☐ 1140 ☐ 1141 ☐ 1142 ☐ 1143 ☐ 1144 ☐ 1145 ☐ 1146 ☐ 1147 ☐ 1148 ☐ 1149 ☐ 1150 ☐ 1151 ☐ 1152 ☐ 1153 ☐ 1154 ☐ 1155 ☐ 1156 ☐ 1157 ☐ 1158 ☐ 1159 ☐ 1160 ☐ 1161 ☐ 1162 ☐ 1163 ☐ 1164 ☐ 1165 ☐ 1166 ☐ 1167 ☐ 1168 ☐ 1169 ☐ 1170 ☐ 1171 ☐ 1172 ☐ 1173 ☐ 1174 ☐ 1175 ☐ 1176 ☐ 1177 ☐ 1178 ☐ 1179 ☐ 1180 ☐ 1181 ☐ 1182 ☐ 1183 ☐ 1184 ☐ 1185 ☐ 1186 ☐ 1187 ☐ 1188 ☐ 1189 ☐

TRIP **8** CONTINUING WITH THE NEXT TRIP

11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?

(Nearest) CITY/TOWN

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)

(Nearest) CITY/TOWN

PROVINCE/STATE

COUNTRY (if outside Canada)

FOR OFFICE USE ONLY

13. APPROXIMATELY HOW FAR FROM YOUR HOME IS _____ ?
(REPEAT DESTINATION FROM QUESTION 12)

Miles

1

Kilometres

2

Enter number

14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?

15 years and over 3 under 15 years 4

15. WAS THIS A WEEK-END TRIP?

Yes 1

No 2

16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP?

Enter number If 000 go to 19

17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?

Newfoundland	01		Saskatchewan	08	
P.E.I.	02		Alberta	09	
Nova Scotia	03		British Columbia	10	
New Brunswick	04		N.W.T.	11	
Quebec	05		Yukon	12	
Ontario	06		United States	13	
Manitoba	07		All other countries	14	

18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?

Hotel (including tourist homes)	1	
Motel	2	
Camping or trailer park	3	
Home of friends or relatives	4	
Private cottage or vacation home	5	
Commercial cottage or cabin	6	
Other (hostels, universities, etc.)	7	

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.)

Automobile	01	Rail	02	Other	03
Bus	04	Boat	05		

Did you fly on a Canadian carrier? Yes 07 No 08

Did you rent a car? Yes 09 No 10

20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only)

Visiting friends/relatives	1	* Pleasure	2	Personal	3
Business	4	A convention	5		

Was it to attend a convention? Yes 6 No 7

21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply)

Visiting friends or relatives	01	Visit a Provincial Park	12
Festivals or events	02	Visit a Regional/Municipal Park	13
Shopping	03	Attend sports events	14
Sightseeing	04	Participate in sports or outdoor activity (specify)	15
Attend cultural events e.g. plays, concerts	05		
Nightlife/entertainment	06	Swimming	16
Dining at high quality restaurants	07	Other water sports	17
Visit a theme park	08	Golfing	18
Visit zoo/museum/natural display	09	Hunting	19
Visit a National Park	10	Fishing	20
Visit an Historic site	11	Cross country skiing	21
		Downhill skiing	22
		Other	23
		None of the above	24

22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE" IS 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 National park or Historic site	99
--	--	--	----

*23A. INTERVIEWER CHECK ITEM:

If item 12 (destination) is the province of "Quebec" 1 Go to 23B

Otherwise 2 Go to 25

*23B. If "pleasure" is marked in item 20 3 Go to 24

Otherwise 4 Go to 25

24. What did you spend most of your time on during this trip? (check one only)

Visiting/touring a large city	1	Fishing	5
Visiting/touring other region(s)	2	Snowmobiling	6
Downhill skiing	3	Staying in a resort	7
Hunting	4	Adventure tours (rafting, trekking, etc.)	8
		Other	9

25. 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	\$		00
Transportation to and from destination including expenditures for gas	2	\$		00
Local transportation (i.e. taxis, bus, etc.)	3	\$		00
Accommodation	4	\$		00
Food and beverages	5	\$		00
Recreation and entertainment	6	\$		00
Other (souvenirs, etc.)	7	\$		00
Total (if no breakdown given)	8	\$		00

26. IF "BUSINESS" MARKED IN 20 ASK: WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:

An employer?	1	%
Yourselves?	2	%
Other member(s) of your household?	3	%

27. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE LAST MONTH?

None 4 Go to 28 OR (Enter number)

28. INTERVIEWER CHECK ITEM:

Last trip 1 Go to 29

29. INTERVIEWER CHECK ITEM:

Is this the first Travel Survey interview?

Yes ¹ ☐ Go to 30No ² ☐ End**30. DURING THE NINE MONTH PERIOD FROM JANUARY 1, 1992 TO SEPTEMBER 30, 1992 DID YOU TAKE ANY NON-BUSINESS TRIP(S) OF ONE NIGHT OR MORE TO A DESTINATION ...**

	Yes	No
... within the province?	1 <input type="radio"/>	2 <input type="radio"/>
... to some other province(s)?	3 <input type="radio"/>	4 <input type="radio"/>
... to the United States?	5 <input type="radio"/>	6 <input type="radio"/>
... to a foreign country other than United States?	7 <input type="radio"/>	8 <input type="radio"/>

31. FOR THE YEAR 1991, IN WHICH OF THE FOLLOWING RANGES WAS YOUR TOTAL HOUSEHOLD INCOME BEFORE TAXES AND DEDUCTIONS? INCLUDE INCOME FROM WAGES, SALARIES, TIPS, COMMISSIONS, PENSIONS, INTEREST, RENTS, ETC.

Less than \$10,000	1 <input type="radio"/>	\$30,000 to \$39,999	4 <input type="radio"/>	\$60,000 to \$69,999	7 <input type="radio"/>	
\$10,000 to \$19,999	2 <input type="radio"/>	\$40,000 to \$49,999	5 <input type="radio"/>	\$70,000 to 79,999	8 <input type="radio"/>	
\$20,000 to \$29,999	3 <input type="radio"/>	\$50,000 to \$59,999	6 <input type="radio"/>	\$80,000 and over	9 <input type="radio"/>	
					Not Stated	0 <input type="radio"/>

32. HOW MANY PEOPLE CONTRIBUTED TO THIS HOUSEHOLD INCOME?

One	1 <input type="radio"/>	Three	3 <input type="radio"/>
Two	2 <input type="radio"/>	Four or more	4 <input type="radio"/>

33. ARE YOU A MEMBER OF A FREQUENT FLYER PROGRAM?Yes ¹ ☐ No ² ☐**NOTES:**

1992 Household Facilities and Equipment Survey



Survey Month: May 1992

Title: 1992 Household Facilities and Equipment Survey

Sponsor: Statistics Canada

Survey Method: Telephone/Personal Interview

Sample Size: LFS rotation groups 1, 2, 3 and 6 (41,000 households across Canada)

Objectives: The HFE provides an annual profile of dwelling characteristics and the facilities and equipment they contain. These data are used by private industry to analyze market trends in order to anticipate future demand and by governments for policy development and analysis of current programs.

Household data are linked with income data from SCF and labour market and rent data from the LFS on a microdata file to produce distributions of housing characteristics and consumer goods by household income groups.

Project Manager: Penny Barclay (951-4634)

Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$1,100.00	

1992 Household Facilities and Equipment Survey

Form No. HF 06

Confidential when completed

Statistics Act, R.S.C. 1985, C. S19

Version française disponible

R.O.		Docket No.		Survey date		Assignment No.		Response Code						
1		2		3		4		5						
10. DATE STRUCTURE ORIGINALLY BUILT Before 1941 1 <input type="radio"/> 1941-1950 2 <input type="radio"/> 1951-1960 3 <input type="radio"/> 1961-1970 4 <input type="radio"/> 1971-1980 5 <input type="radio"/> 1981-1985 6 <input type="radio"/> 1986-1992 7 <input type="radio"/>					18. WHICH COMBINATION OF FUELS IS USED? Electricity and oil 1 <input type="radio"/> Electricity and gas 2 <input type="radio"/> Electricity and wood 3 <input type="radio"/> Wood and oil 4 <input type="radio"/> Other (Specify in NOTES) 5 <input type="radio"/>					27. TOILET FACILITIES One flush toilet 1 <input type="radio"/> Two flush toilets 2 <input type="radio"/> Three or more flush toilets 3 <input type="radio"/> Chemical or other type 4 <input type="radio"/> Toilet facilities shared with another household 5 <input type="radio"/> No installed toilet 6 <input type="radio"/>				
USE QUESTION CARD FOR 11 11. IS THIS DWELLING IN NEED OF ANY REPAIRS? (Do NOT include desirable remodelling, additions, conversions or energy improvements). Yes, MAJOR REPAIRS 1 <input type="radio"/> Yes, MINOR REPAIRS 2 <input type="radio"/> No, only REGULAR MAINTENANCE 3 <input type="radio"/>					19. DO YOU HAVE A HEAT PUMP? Yes 1 <input type="radio"/> No 2 <input type="radio"/> ► Go to 21					28. FUEL FOR PRINCIPAL COOKING EQUIPMENT Oil or other liquid fuel 1 <input type="radio"/> Piped gas (natural gas) 2 <input type="radio"/> Bottled gas (propane) 3 <input type="radio"/> Electricity 4 <input type="radio"/> Wood 5 <input type="radio"/> Other (Specify in NOTES) 6 <input type="radio"/> None 7 <input type="radio"/>				
12. TOTAL NUMBER OF ROOMS (including bedrooms) 					20. TYPE OF HEAT PUMP Air source 1 <input type="radio"/> Ground source 2 <input type="radio"/> Don't know 3 <input type="radio"/>					29. MICROWAVE OVEN Yes 1 <input type="radio"/> No 2 <input type="radio"/>				
13. NUMBER OF BEDROOMS (If none enter 0) 					21. SUPPLEMENTARY HEATING EQUIPMENT (excluding fireplace) Heating stove 1 <input type="radio"/> Cookstove or range 2 <input type="radio"/> Portable heater 3 <input type="radio"/> Other (Specify in NOTES) 4 <input type="radio"/> None 5 <input type="radio"/> ► Go to 23					30. GAS BARBECUE Yes 1 <input type="radio"/> No 2 <input type="radio"/>				
14. PRINCIPAL HEATING EQUIPMENT Steam or hot water furnace 1 <input type="radio"/> Forced hot air furnace 2 <input type="radio"/> Other hot air furnace 3 <input type="radio"/> Heating stove (incl. wood stove) 4 <input type="radio"/> Electric heating 5 <input type="radio"/> Cookstove 6 <input type="radio"/> Other (Specify in NOTES) 7 <input type="radio"/>					22. FUEL FOR SUPPLEMENTARY HEATING EQUIPMENT Oil or other liquid fuel 1 <input type="radio"/> Piped gas (natural gas) 2 <input type="radio"/> Bottled gas (propane) 3 <input type="radio"/> Electricity 4 <input type="radio"/> Wood 5 <input type="radio"/> Other (Specify in NOTES) 6 <input type="radio"/>					31. NUMBER OF REFRIGERATORS (If none enter 0) 				
15. AGE OF PRINCIPAL HEATING EQUIPMENT 5 years or less 1 <input type="radio"/> 6 to 10 years 2 <input type="radio"/> 11 to 15 years 3 <input type="radio"/> 16 to 20 years 4 <input type="radio"/> Over 20 years 5 <input type="radio"/>					23. AIR CONDITIONING Window type 1 <input type="radio"/> Central unit 2 <input type="radio"/> None 3 <input type="radio"/>					32. FREEZER SEPARATE FROM REFRIGERATOR Yes 1 <input type="radio"/> No 2 <input type="radio"/>				
16. PRINCIPAL FUEL FOR THIS HEATING EQUIPMENT Oil or other liquid fuel 1 <input type="radio"/> Piped gas (natural gas) 2 <input type="radio"/> Bottled gas (propane) 3 <input type="radio"/> Electricity 4 <input type="radio"/> Wood 5 <input type="radio"/> Other (Specify in NOTES) 6 <input type="radio"/>					24. TYPE OF WATER SUPPLY Hot and cold running water 1 <input type="radio"/> Cold running water only 2 <input type="radio"/> ► Go to 26 No running water 3 <input type="radio"/>					33. AUTOMATIC DISHWASHER Built-in 1 <input type="radio"/> Portable 2 <input type="radio"/> None 3 <input type="radio"/>				
17. IS THIS PRINCIPAL HEATING EQUIPMENT A DUAL FUEL SYSTEM? (excluding heat pump) Yes 1 <input type="radio"/> No 2 <input type="radio"/> ► Go to 19					25. PRINCIPAL FUEL FOR PIPED HOT WATER SUPPLY Oil or other liquid fuel 1 <input type="radio"/> Piped gas (natural gas) 2 <input type="radio"/> Bottled gas (propane) 3 <input type="radio"/> Electricity 4 <input type="radio"/> Wood 5 <input type="radio"/> Other (Specify in NOTES) 6 <input type="radio"/>					34. WASHING MACHINE Automatic washer 1 <input type="radio"/> Electric wringer-washer 2 <input type="radio"/> Other electric washer 3 <input type="radio"/> None 4 <input type="radio"/>				
18. IS THIS PRINCIPAL HEATING EQUIPMENT A DUAL FUEL SYSTEM? (excluding heat pump) Yes 1 <input type="radio"/> No 2 <input type="radio"/> ► Go to 19					26. INSTALLED BATHTUB OR SHOWER In one bathroom 1 <input type="radio"/> In two or more bathrooms 2 <input type="radio"/> Bath facilities shared with another household 3 <input type="radio"/> No installed bathtub or shower 4 <input type="radio"/>					35. CLOTHES DRYER Electric 1 <input type="radio"/> Gas 2 <input type="radio"/> None 3 <input type="radio"/>				
19. IS THIS PRINCIPAL HEATING EQUIPMENT A DUAL FUEL SYSTEM? (excluding heat pump) Yes 1 <input type="radio"/> No 2 <input type="radio"/> ► Go to 19					27. TOTAL NUMBER OF: (If none enter 0) 36. RADIOS 					37. COLOUR TV SETS 				
20. IS THIS PRINCIPAL HEATING EQUIPMENT A DUAL FUEL SYSTEM? (excluding heat pump) Yes 1 <input type="radio"/> No 2 <input type="radio"/> ► Go to 19					28. BLACK AND WHITE TV SETS 					38. VIDEO CASSETTE RECORDERS (VCR's) 				
21. IS THIS PRINCIPAL HEATING EQUIPMENT A DUAL FUEL SYSTEM? (excluding heat pump) Yes 1 <input type="radio"/> No 2 <input type="radio"/> ► Go to 19					29. GO TO 40					39. GO TO 40				

NOTES — See over for additional NOTES

[illegible]

NOTES

Item no

99

Item no.

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Survey of 1990 Graduates



Survey Month: June and July 1992

Title: Survey of 1990 Graduates

Sponsor: Employment and Immigration Canada

Survey Method: Telephone Interview

Sample Size: 53,698 graduates in 1990 from university, college and trade-vocational postsecondary education programs (excluding apprenticeship). Response was obtained from approximately 37,100 living in Canada in June-July 1992.

Objectives:

1. To determine the labour market experiences of graduates in a reference week approximately two years after completion of studies graduated from in 1990.
2. To determine differences in experiences by field of study, by level of qualification and by province of education, and the match between fields of study and occupations.
3. To determine the province the graduate was living in at time of interview compared with the province of his/her institution, for analyses of interprovincial mobility.
4. To determine the opinions of graduates towards aspects of his/her education relative to work experiences since graduation.

Project Manager: Phil Stevens (951-9481)

Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$1,000.00*	

* Note: The microdata file will not be available until December 1993.



SURVEY OF 1990 GRADUATES - INFORMATION SHEET

REGINA

Respondent #: 4209999

Line A: BACHELOR'S
(field of study from institution)

(standardised f.o.s.)

Line B: LIBSCENG
(from institution):

(standardised): SCHOOL LIBRARIANSHIP

Line C:

Line D: SASKATCHEWAN

Line E:

Name:	Violet	Archer
Permanent Address:	Box 000 Eston	
	SOL 1A0	
Permanent Telephone Number:	3069876543	
Local Address:	Box 000 Eston	
	SOL 1A0	
Local Telephone Number:	3069876543	

Institution: UNIVERSITY OF SASKATCHEWAN

Id Number: 680000

Sex: FEMALE

Date of Birth: 28-Aug-1944

Visa Student: NO

**Survey of
1990 Graduates**

Confidential when completed.

Collected under the authority of the Statistics
Act, Revised Statutes of Canada, 1985,
Chapter S19.

Respondent No. 						
Interviewer number <div style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></div>		Interviewer's name _____			Senior Interviewer's name _____	
RECORD OF CALLS AND TRACING						
	Date	Start time	Finish time	Comments - Results	Telephone number	Initial
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						

Call coverage by time of day and day of week						
	Mon.	Tue.	Wed.	Thur.	Fri.	Sat.
08:00h-12:00h						
12:01h-16:00h						
16:01h-19:00h						
19:01h-21:30h						

Total number of calls	1		
Length of interview	2		
	minutes		

FINAL STATUS OF QUESTIONNAIRE

Contacted and completed interview 01 <input type="radio"/>	Can't be reached by phone 08 <input type="radio"/>
Contacted and partial interview 02 <input type="radio"/>	Unable to trace 09 <input type="radio"/>
Contacted but refused 03 <input type="radio"/>	Interview ended in item A3 or A10 10 <input type="radio"/>
Already contacted (duplicate) 04 <input type="radio"/>	No longer living in Canada 11 <input type="radio"/>
Absent for duration of survey 05 <input type="radio"/>	Deceased 12 <input type="radio"/>
Unlisted number 06 <input type="radio"/>	Other 13 <input type="radio"/>
No answer 07 <input type="radio"/>	

A. POSTSECONDARY STUDIES

Introduction

Hello, I'm ... (your name)... of Statistics Canada. We're doing a survey on the employment experiences of graduates. The results will be used to guide students in their choice of field of study, and institutions in the courses they provide. While your participation is voluntary, your answers are important and will be kept confidential under the Statistics Act.

A1. Did you obtain a degree, certificate or diploma for a ... (read line A)... program in 1990?

- Yes 1 ☐ ► go to A5
- No 2 ☐

A2. Did you complete the requirements for a ... (read line A)... program in 1990? [By "complete the requirements" I mean write the last exam or submit the last paper, report or project or defend your thesis]

- Yes 3 ☐ ► go to A5
- No 4 ☐

A3. Did you obtain, or complete the requirements for, any degree, diploma or certificate in 1990?

- Yes 5 ☐
- No 6 ☐ ► end interview

A4. What degree, diploma or certificate did you obtain or complete the requirements for in 1990? (Do not read list; check one only; if more than one, check the highest-level degree etc.)

- Trade-vocational certificate or diploma 1 ☐
- Community College, CEGEP, Technical Institute, School of Nursing certificate or diploma 2 ☐
- University certificate or diploma below bachelor level 3 ☐
- Bachelor's degree (e.g. B.A., B.Sc., B.A.Sc., 4-year B. Ed.) 4 ☐
- Certificate or diploma above bachelor level 5 ☐
- First professional degree in medicine (M. D.), dentistry (D. D. S., D. M. D.), veterinary medicine (D. V. M.), law (L. B.), optometry (O. D.) or divinity (M. Div.), or 1-year B. Ed. after a Bachelor's degree 6 ☐
- Master's degree (e.g., M.A., M.Sc., M.Ed.) 7 ☐
- Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.) 8 ☐
- Other: (specify) 9 ☐

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INTERVIEWER: Correct line A of the Information Sheet if required, then continue.

A5. INTERVIEWER CHECK-ITEM:

If entry in line B of Information Sheet,

- check 1 ☐ ► go to A6
- otherwise, 2 ☐ ► go to A7

A6. Was your MAJOR field of study or specialization for this program in ... (read line B)?

- Yes 3 ☐ ► go to A8a
- No 4 ☐

[illegible][illegible]

1	9		
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Year

end
interview

Less than three months	01	<input type="radio"/>
Three to five months	02	<input type="radio"/>
6 months - one year	03	<input type="radio"/>
13 months - two years	04	<input type="radio"/>
Three years	05	<input type="radio"/>
Four years	06	<input type="radio"/>
Five years	07	<input type="radio"/>
More than five years	08	<input type="radio"/>
No "normal" length, it varies	09	<input type="radio"/>
Don't know	10	<input type="radio"/>

full-time only? 1 ☐ ► go to A13a

part-time only? 2 ☐

or a combination of full-time and part-time? 3 ☐

Three sets of empty primary-ruled lines for handwriting practice. Each set consists of a solid top line, a dashed midline, and a solid bottom line, with vertical tick marks indicating the positions of the lines.

1990 40

A15. INTERVIEWER CHECK-ITEM:

If line C reads TRADE-VOCATIONAL.

check 5 ☐ go to A16

otherwise, 6 ☐ go to A18

A16. Who paid the fees for your program? Was it Employment and Immigration Canada, the Provincial government, you, or somebody else? (check all mentioned)

Employment and Immigration, Canada Manpower 1 ☐

Provincial government 2 ☐

Respondent 3 ☐

Somebody else 4 ☐

Don't know 5 ☐

No fees 6 ☐

Other (specify) 7 ☐

A17a. Were you registered in an apprenticeship program at the same time you were taking the trade-vocational program?

Yes ☐

A17b. In what month and year did you register in the apprenticeship program?

4

Month

1 9

Year

go to B1

No ☐ go to B1

A18. Did you take 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]

Yes 1 ☐

No 2 ☐

B. ACTIVITIES BEFORE COMPLETING POSTSECONDARY STUDIES

B1. Before you enrolled in the ... (read line A) ... program, what was the highest level of education you had completed? (Do not read list; mark one only)

Elementary 01 ☐

Some secondary 02 ☐

Completed secondary or technical high school 03 ☐

Some trade-vocational 04 ☐

Trade-vocational diploma or certificate 05 ☐

Some college or some CEGEP 06 ☐

Completed college or completed CEGEP or nursing school diploma or certificate 07 ☐

Some university (incl. university transfer in Alta. and B.C.) 08 ☐

Diploma or certificate below bachelor level 09 ☐

Bachelor degree (e.g. B.A., B. Sc. B.A.Sc., 4-year B. Ed.) 10 ☐

Diploma or certificate above bachelor level 11 ☐

First professional degree in medicine (M. D.), dentistry (D. D. S., D. M. D.), veterinary medicine (D. V. M.), law (L. B.), optometry (O. D.) or divinity (M. Div.), or 1-year B. Ed. after a Bachelor's degree 12 ☐

Master's degree (e.g., M.A., M.Sc., M.Ed.) 13 ☐

Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.) 14 ☐

Other (specify) 15 ☐

B2. What was your major field of study or specialization? (If two of equal importance, enter both)

B3. During the twelve months before you enrolled in the ...*(read line A)*... program, what was your major activity? For example, going to school, working, looking for work, household responsibilities. (Check one only)

Going to school ☐ 1

Working ☐ 2

Looking for work ☐ 3

Household responsibilities ☐ 4

Other (*specify*) ☐ 5

B4. During the 12 months before you enrolled in the program, were you without work and looking for work for a period of four months or more?

Yes ☐ 6

No ☐ 7

Don't know ☐ 8

B5. During these 12 months, was your principal residence in ...*(read line D)*...?

Yes ☐ 1 ► go to B8

No ☐ 2

B6. In what province was it?

Nfld. ☐ 01 Man. ☐ 07

PEI ☐ 02 Sask. ☐ 08

N. S. ☐ 03 Alta. ☐ 09

N. B. ☐ 04 B. C. ☐ 10

Québec ☐ 05 Yukon or NWT ☐ 11

Ontario ☐ 06 Outside Canada ☐ 12

B7. Did you move from that province/country specifically to enroll in the program or for some other reason?

Enroll ☐ 1

Other reason ☐ 2

Did not move ☐ 3

B8. Now some questions about the entire time before you completed the ...*(read line A)*... program. Before you completed, did you ever work full-time, that is, usually 30 or more hours a week?

Yes ☐ 4

No ☐ 5 ► go to C1

B9. 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.

6 Months

► If less than 6 months, go to C1

OR:

7 Years

B10. Were any of these jobs for six consecutive months or more for the same employer?

Yes ☐ 8

No ☐ 9 ► go to C1

B11. Thinking of the last one of these jobs that lasted six months or more before graduation, for whom did you work? (*Give name of business, government department or agency, or person*) [I mean the last job you had for six months or more full-time before you completed the program]

B12. What kind of business, industry or service was this? (*Give full description, e.g. elementary school, municipal government, retail shoe store*)

B13. What kind of work did you do? (*Give full description, e.g., elementary school teacher, manager of a biological research department, shoe salesperson*)

B14. In this work, what were your most important activities or duties? (Give full description, e.g., teaching geography, managing a research lab., selling shoes)

B21. In what month and year did you start working for your employer and doing the kind of work you did last week?

6			1	9		
Month			Year			

B22. Was that your only job last week?

Yes ¹ ☐ ► go to C19
 No ² ☐

B15. Did you work at that job last week?

Yes ¹ ☐ ► go to B18
 No ² ☐

B16. Did you have that job last week but did not work at it for any reason [such as vacation or leave or ill health]?

Yes ³ ☐
 No ⁴ ☐ ► go to B24

B17. Was this because of a temporary layoff?

Yes ⁵ ☐
 No ⁶ ☐

B18. Were you doing the same kind of work at that job as you did before you completed the ... (read line A) ... program?

Yes ⁷ ☐ ► go to B21
 No ⁸ ☐

B19. What kind of work did you usually do at the job last week? (Give full description, e.g., elementary school teacher, manager of a biological research department, shoe salesperson)

B20. In this work, what were your most important activities or duties? (Give full description, e.g., teaching geography, managing a research lab., selling shoes)

B23. Was that your main job last week? [that is, the job at which you usually worked most hours a week]?

Yes ³ ☐ ► go to C19
 No ⁴ ☐ ► go to C12a and ask about the main job last week

B24. In what month and year did you last work at that job?

2			1	9		
Month			Year			

C. LAST WEEK.

C1. The next few questions refer to last week. Last week, did you work at a job or business?

Yes ⁵ ☐
 No ⁶ ☐ ► go to C3

C2. Did you have more than one job or business last week?

Yes ⁷ ☐ ► go to C12a and ask about the main job
 No ⁸ ☐ ► go to C12a

C3. Last week, did you have a job or business at which you did not work?

Yes ¹ ☐
 No ² ☐ ► go to C6

C4. Were you absent from work last week because of a temporary layoff?

Yes ³ ☐
 No ⁴ ☐

C5. Did you have more than one job or business last week?

Yes ⁵ ☐ ► go to C12a and ask about the main job
 No ⁶ ☐ ► go to C12a

C6. In what month and year did you start working at the first job you had after you completed your program? (enter date or check "never had job after completing program")

4		
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Month

1	9		
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Year

OR: Never had job after completing program ... ☐ go to C9a

C7. Was this a job at which you usually worked 30 or more hours a week?

Yes ☐

No ☐

C8. Was this a permanent or a temporary position?

Permanent ☐

Temporary ☐

C9a. Last week, did you have a job to start at a definite date in the future?

Yes ☐ →

C9b. At that job, do you expect to work 30 or more hours a week?

Yes ... ☐ go to

No ... ☐ D1a

No ☐

C10a. Last week, were you looking for a job?

Yes ☐ →

C10b. Were you looking for a job at which you would work 30 or more hours a week?

Yes ... ☐ go to

No ... ☐ D1a

No ☐

C11. What was the main reason you did not look for a job last week? (Do not read list; check one only)

Going to school ☐

Personal or family responsibilities ☐

Own illness or disability ☐ go to D1a

No longer interested in finding a job ☐

Other reason (Specify) ☐

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C12a. INTERVIEWER: For questions C12a. through C56, if the respondent had more than one job last week, ask about the main job, i.e., the one usually worked at for the most number of hours.

Have you worked at the (main) job you had last week for six consecutive months or more? By this we mean doing the same kind of work for the same employer.

Yes ☐ →

C12b. During this period, was this usually 30 or more hours a week?

Yes ... ☐

No ... ☐

No ☐

C13. For whom did you work last week? (Give name of business, government department or agency, or person)

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C14. What kind of business, industry or service is this? (Give full description, e.g. elementary school, municipal government, retail shoe store)

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C15. What kind of work did you do? (Give full description, e.g., elementary school teacher, manager of a biological research department, shoe salesperson)

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<p>C25a. Did the employer specify that it must be in a specific field or fields of study?</p> <p>Yes <input type="radio"/> 1 ▶</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p>C25b. Was that your field of study?</p> <p>Yes ... <input type="radio"/> 3 } go to</p> <p>No ... <input type="radio"/> 4 } C27</p> </div> <p>No <input type="radio"/> 2</p>	<p>C31. 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)...</p> <p>very satisfied? <input type="radio"/> 10</p> <p>satisfied? <input type="radio"/> 11</p> <p>dissatisfied? <input type="radio"/> 12</p> <p>very dissatisfied? <input type="radio"/> 13</p> <p>(Do not read)</p> <p>Don't know, no opinion <input type="radio"/> 14</p>
<p>C26. Was your job last week one for which your ... (read line A) ... program was designed?</p> <p>Yes <input type="radio"/> 5</p> <p>No <input type="radio"/> 6</p> <p>Don't know <input type="radio"/> 7</p>	<p>C32. 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)</p> <div style="text-align: center; margin: 10px 0;"> <div style="border: 1px solid black; display: inline-block; width: 30px; height: 30px; margin-right: 5px;"></div> <div style="border: 1px solid black; display: inline-block; width: 30px; height: 30px; margin-right: 5px;"></div> ▶ </div> <p style="text-align: center;">If 30 or more, go to C35</p> <p style="text-align: center;">Number of hours</p>
<p>C27. Did you have any related work experience when you got the job you had last week?</p> <p>Yes <input type="radio"/> 8</p> <p>No <input type="radio"/> 9 ▶ go to C29</p>	<p>C33. What is the main reason you usually worked less than 30 hours a week? (Do not read list; check one only)</p> <p>Could only find work at less than 30 hours a week/part-time work <input type="radio"/> 1</p> <p>Going to school <input type="radio"/> 2</p> <p>Personal or family responsibilities <input type="radio"/> 3</p> <p>Did not want to work 30 or more hours a week/full-time work <input type="radio"/> 4 ▶ go to C35</p> <p>Other reason (specify) <input type="radio"/> 5</p> <div style="margin-top: 10px;"> <div style="border-bottom: 1px solid black; width: 250px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; width: 250px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; width: 250px;"></div> </div>
<p>C28. Did your employer specify that this experience was essential for your job?</p> <p>Yes <input type="radio"/> 1</p> <p>No <input type="radio"/> 2</p> <p>Don't know <input type="radio"/> 3</p>	<p>C34. Last week, were you looking for a job at which you would usually work 30 or more hours per week?</p> <p>Yes <input type="radio"/> 6</p> <p>No <input type="radio"/> 7</p>
<p>C29. In this job, to what extent did you use any of the skills and knowledge acquired from the ... (read line A) ... program? Would you say ... (read list)</p> <p>to a great extent? <input type="radio"/> 01</p> <p>to some extent? <input type="radio"/> 02</p> <p>very little? <input type="radio"/> 03</p> <p>or, not at all? <input type="radio"/> 04</p>	<p>C35. Have you had any breaks of three months or more since you first began that job, for example, for layoffs or leave of absence or illness or for any other reason?</p> <p>Yes <input type="radio"/> 8 ▶ go to C46</p> <p>No <input type="radio"/> 9</p>
<p>C30. Considering all aspects of the job you had last week, how satisfied were you with the job? Would you say that you were ... (read first four categories)...</p> <p>very satisfied? <input type="radio"/> 05</p> <p>satisfied? <input type="radio"/> 06</p> <p>dissatisfied? <input type="radio"/> 07</p> <p>very dissatisfied? <input type="radio"/> 08</p> <p>(Do not read)</p> <p>Don't know, no opinion <input type="radio"/> 09</p>	

check ¹○ ► go to C39

otherwise ²○ ► go to C37

Yes ³☐ ► go to C39

No ⁴☐

Yes 50 ► go to G1

No 50 ► go to C40

Month:

7		
---	--	--

 Year:

1	9		
---	---	--	--

 ► go to G1

8		
---	--	--

Month

1	9		
---	---	--	--

Year

Yes 1 ☐ ► go to C45

No 2 ☐

6		
---	--	--

Month

1	9		
---	---	--	--

Year

Yes 3 ☐

No 4 ☐

Permanent 5 ☐

Temporary 6 ☐

otherwise? 90 ► go to F1

A horizontal number line with 11 tick marks, labeled from 0 to 10. The line is drawn with a solid horizontal line and vertical tick marks at each integer position. The numbers 0, 1, 2, 3, 4, 5, 6, 7, 8, 9, and 10 are written below the corresponding tick marks.

Not yet begun
again ³ go to C51

Not yet begun
again 60 ► go to C51

Month:

7		
---	--	--

 Year:

1	9		
---	---	--	--

 ▶ go to G1

C50. In what month and year did you most recently begin working for that employer again?

8		
---	--	--

Month

1	9		
---	---	--	--

Year

C51. In what month and year did you first begin working for the employer you had last week?

9		
---	--	--

Month

1	9		
---	---	--	--

Year

C52. Was the job you had last week your first job after you completed the requirements for your ... (read line A) ... program?

Yes ¹○ ► go to C56

No ²○

C53. In what month and year did you start working at the first job you had after you completed your program?

7		
---	--	--

Month

1	9		
---	---	--	--

Year

C54. Was this a job at which you usually worked 30 or more hours a week?

Yes ³○

No ⁴○

C55. Was this a permanent or a temporary position?

Permanent ⁵○

Temporary ⁶○

C56. INTERVIEWER CHECK-ITEM:

Is date in C50 ...

blank? ¹○ ► go to D1a

after 10 91? ²○ ► go to D1a

from 02 91 to 10 91? ³○ ► go to E1a

otherwise? ⁴○ ► go to F1

D. LAST WEEK OF OCTOBER 1991

D1a. Now, some questions about the last week of October 1991. During that week, were you enrolled in any credit courses at an educational or training institution?

Yes ⁵○ ►

D1b. Was it full-time or part-time?

Full-time ⁸○

Part-time ⁹○

No ⁶○

Don't know ⁷○

D2. During that week, did you do any work at a job or business?

Yes ¹○ ► go to D5

No ²○

D3. That week, did you have a job or business at which you did not work?

Yes ³○

No ⁴○ ► go to D7a

D4. Were you absent from work because of a temporary layoff?

Yes ⁵○

No ⁶○

D5. Was the job you had during that week a full-time job, that is, usually 30 or more hours a week?

Yes ⁷○ ► go to E1a

No ⁸○

D6. Did you have a full-time job to start at a definite date in the future?

Yes ¹○ ► go to E1a

No ²○ ► go to D9

D7a. During the last week of October 1991, did you have a job to start at a definite date in the future?

Yes ³○ ►

D7b. Was that job full-time, that is, 30 or more hours a week?

Yes ⁵○ ► go to E1a

No ⁶○ ► go to D9

No ⁴○

D8. Were you looking for a job during the last week of October 1991?

Yes ⁷○

No ⁸○ ► go to E1a

D9. Were you looking for a full-time job?

Yes ¹○

No ²○

E. LAST WEEK OF JANUARY 1991	
<p>E1a. Now, some questions about the last week of January 1991, that is, about a year and a half ago. During that week, were you enrolled in any credit courses at an educational or training institution?</p> <p>Yes <input type="radio"/> 3 ▶</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0; width: fit-content;"> <p>E1b. Was it full-time or part-time?</p> <p>Full-time <input type="radio"/> 6</p> <p>Part-time <input type="radio"/> 7</p> </div> <p>No <input type="radio"/> 4</p> <p>Don't know <input type="radio"/> 5</p>	<p>E8. Were you looking for a job during the last week of January 1991?</p> <p>Yes <input type="radio"/> 5</p> <p>No <input type="radio"/> 6 ▶ go to F1</p>
<p>E2. During that week, did you do any work at a job or business?</p> <p>Yes <input type="radio"/> 8 ▶ go to E5</p> <p>No <input type="radio"/> 9</p>	<p>E9. Were you looking for a full-time job?</p> <p>Yes <input type="radio"/> 7</p> <p>No <input type="radio"/> 8</p>
F. PERIOD SINCE COMPLETING POSTSECONDARY STUDIES	
<p>E3. That week, did you have a job or business at which you did not work?</p> <p>Yes <input type="radio"/> 1</p> <p>No <input type="radio"/> 2 ▶ go to E7a</p>	<p>F1. Now some questions about the entire period since you completed the ... (read line A) ... program. During that period, were you ever without a job and looking for one?</p> <p>Yes <input type="radio"/> 1</p> <p>No <input type="radio"/> 2 ▶ go to F5</p>
<p>E4. Were you absent from work because of a temporary layoff?</p> <p>Yes <input type="radio"/> 3</p> <p>No <input type="radio"/> 4</p> <p>Don't remember <input type="radio"/> 5</p>	<p>F2. During that period, for how many months in total were you without a job and looking for one?</p> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 10px auto; position: relative;"> <div style="position: absolute; top: -10px; left: 50%; transform: translateX(-50%);">▶</div> </div> <p style="text-align: center; font-size: small;">If less than one month, enter "00" and go to F5</p> <p>No. of months</p>
<p>E5. Was the job you had during that week a full-time job, that is, usually 30 or more hours a week?</p> <p>Yes <input type="radio"/> 6 ▶ go to F1</p> <p>No <input type="radio"/> 7</p>	<p>F3. At any time during the ... (read answer in F2) ... period you were looking for a job, were you a full-time student?</p> <p>Yes <input type="radio"/> 3</p> <p>No <input type="radio"/> 4 ▶ go to F5</p>
<p>E6. Did you have a full-time job to start at a definite date in the future?</p> <p>Yes <input type="radio"/> 8 ▶ go to F1</p> <p>No <input type="radio"/> 9 ▶ go to E9</p>	<p>F4. How much of this ... (read answer in F2) ... period were you a full-time student?</p> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 10px auto; position: relative;"> <div style="position: absolute; top: -10px; left: 50%; transform: translateX(-50%);">▶</div> </div> <p style="text-align: center; font-size: small;">No. of months</p> <p style="text-align: center; font-size: x-small;">(INTERVIEWER: F4 must <u>not</u> be more than F2)</p>
<p>E7a. During the last week of January 1991, did you have a job to start at a definite date in the future?</p> <p>Yes <input type="radio"/> 1 ▶</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0; width: fit-content;"> <p>E7b. Was that job full-time, that is, 30 or more hours a week?</p> <p>Yes <input type="radio"/> 3 ▶ go to F1</p> <p>No <input type="radio"/> 4 ▶ go to E9</p> </div> <p>No <input type="radio"/> 2</p>	<p>F5. Some people don't have a job and don't look for work because of going to school, illness, or family responsibilities. Since you completed the ... (read line A) ... program, were you ever without a job and NOT looking for one for any reason?</p> <p>Yes <input type="radio"/> 5</p> <p>No <input type="radio"/> 6 ▶ go to G1</p>
	<p>F6. During that period, for how many months in total were you without a job and NOT looking for one?</p> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 10px auto; position: relative;"> <div style="position: absolute; top: -10px; left: 50%; transform: translateX(-50%);">▶</div> </div> <p style="text-align: center; font-size: small;">If less than one month, enter "00" and go to G1</p> <p>No. of months</p>

<p>F7. 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?</p> <p>Yes 7 <input type="radio"/></p> <p>No 8 <input type="radio"/> ► go to G1</p>	<p>G5. When you decided to enroll, how important was it for you to improve your chances of a good income?</p> <p>very important 13 <input type="radio"/></p> <p>somewhat important 14 <input type="radio"/></p> <p>not very important 15 <input type="radio"/></p> <p>not at all important 16 <input type="radio"/></p>
<p>F8. For how many months were you waiting? [That is, for how many months were you waiting to start a new job or return to an old job during the period you were <u>not</u> looking for a job?]</p> <div style="border: 1px solid black; width: 60px; height: 20px; margin: 10px auto;"></div> <p>No. of months</p> <p>(INTERVIEWER: F8 must <u>not</u> be more than F6)</p>	<p>G6. While you were enrolled, how satisfied were you with facilities at the institution, such as libraries, labs or computers? Would you say you were very satisfied, somewhat satisfied, somewhat dissatisfied or very dissatisfied?</p> <p>very satisfied 17 <input type="radio"/></p> <p>somewhat satisfied 18 <input type="radio"/></p> <p>somewhat dissatisfied 19 <input type="radio"/></p> <p>very dissatisfied 20 <input type="radio"/></p>
<p>G. GENERAL TRAINING AND EDUCATION QUESTIONS</p>	
<p>G1. INTERVIEWER CHECK-ITEM:</p> <p>If line C reads <i>TRADE-VOCATIONAL</i>.</p> <p>check 1 <input type="radio"/> ► go to G19</p> <p>Otherwise 2 <input type="radio"/> ► go to G2</p>	<p>G7. How satisfied were you with class sizes? [Would you say you were very satisfied, somewhat satisfied, somewhat dissatisfied or very dissatisfied?]</p> <p>very satisfied 21 <input type="radio"/></p> <p>somewhat satisfied 22 <input type="radio"/></p> <p>somewhat dissatisfied 23 <input type="radio"/></p> <p>very dissatisfied 24 <input type="radio"/></p>
<p>G2. Now I'd like to ask you about your reasons for enrolling in the ... (read line A) ... program. How important was it for you to acquire the skills needed for a particular job? Would you say it was very important, somewhat important, not very important, or not at all important?</p> <p>very important 01 <input type="radio"/></p> <p>somewhat important 02 <input type="radio"/></p> <p>not very important 03 <input type="radio"/></p> <p>not at all important 04 <input type="radio"/></p>	<p>G8. How satisfied were you with how available faculty members were to students?</p> <p>very satisfied 25 <input type="radio"/></p> <p>somewhat satisfied 26 <input type="radio"/></p> <p>somewhat dissatisfied 27 <input type="radio"/></p> <p>very dissatisfied 28 <input type="radio"/></p>
<p>G3. When you enrolled how important was it for you to acquire an in-depth knowledge of a field of study? [Would you say it was very important, somewhat important, not very important, or not at all important?]</p> <p>very important 05 <input type="radio"/></p> <p>somewhat important 06 <input type="radio"/></p> <p>not very important 07 <input type="radio"/></p> <p>not at all important 08 <input type="radio"/></p>	<p>G9. How satisfied were you with the quality of teaching?</p> <p>very satisfied 29 <input type="radio"/></p> <p>somewhat satisfied 30 <input type="radio"/></p> <p>somewhat dissatisfied 31 <input type="radio"/></p> <p>very dissatisfied 32 <input type="radio"/></p>
<p>G4. When you decided to enroll, how important was it for you to improve yourself generally?</p> <p>very important 09 <input type="radio"/></p> <p>somewhat important 10 <input type="radio"/></p> <p>not very important 11 <input type="radio"/></p> <p>not at all important 12 <input type="radio"/></p>	<p>G10. Now, given your experience since graduation, to what extent do you feel your program provided you with the skills needed for a particular job? Would you say to a great extent, to some extent, not very much or not at all?</p> <p>to a great extent 33 <input type="radio"/></p> <p>to some extent 34 <input type="radio"/></p> <p>not very much 35 <input type="radio"/></p> <p>not at all 36 <input type="radio"/></p>

G23. What level of program would you have taken - university, college or trade-vocational?

University '0

College 20

Trade-vocational 30

Don't know 40

Other (specify) \$ \bigcirc\$

go to G25

G24. What level of degree or diploma would you have taken? (Do not read list; mark one only)

Bachelor's degree, general or honours or university diploma or certificate below bachelor level 10

Master's degree or university diploma
or certificate above bachelor level 20

Doctorate (e.g., Ph.D., D.Sc., D.Ed.) 30

Don't know 40

Other (specify) \$0

G25. 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)

very important? 1○

somewhat important? 2○

not very important? 30

not at all important? 40

(Do not read)

Don't know, no opinion 50

G26. Since you completed the ...*(read line A)*... program in 1990, have you ever registered to become an apprentice?

Yes 6 ☐

No 70 ► go to G29

G27. Was this a formal registration with a provincial apprenticeship authority?

Yes ☐

No 9 ☐ go to G29

G28. What trade was this?

G29. Since you completed the ...*(read line A)*... program in 1990, have you completed any other university, college or trade-vocational degree, diploma or certificate programs? Do not include apprenticeship programs.

Yes 10

No 20 ► go to G31

G30c. In what month and year did you complete the requirements?

- 10 ▶

Month Year

- 20 ▶

A horizontal number line with 11 tick marks, labeled from 0 to 10. The tick marks are evenly spaced and labeled with their corresponding numerical values.

Month Year

- 3
-

Two empty number lines are provided for recording data. Each line has 11 tick marks, creating 10 equal intervals. The top line starts at 0 and ends at 10. The bottom line also starts at 0 and ends at 10.

3 1 9
Month Year

-

A blank coordinate grid with x and y axes labeled from 0 to 10. The grid consists of 11 vertical lines and 11 horizontal lines, creating a 10x10 array of squares. The x-axis is labeled 'x' at the top right, and the y-axis is labeled 'y' at the bottom left. The origin (0,0) is at the bottom-left corner.

4 1 9 Month Year

- 50 ▶

Month Year

- 60 ▶

6 1 9
 Month Year

- 70 ▶

7		
Month		

1	9	
Year		

-

8		
---	--	--

Month

1	9		
---	---	--	--

Year

- 90

9		
---	--	--

1	9		
---	---	--	--

Month
Year

No 4 ☐ go to G33

G32b. What is the major field of study or specialization?

-

- _____
- _____
- _____

-
- Three sets of empty musical staves, each consisting of a five-line staff with a single sharp (F#) on the first line, indicating the key of D major. The staves are arranged vertically and are currently empty for practice.

-

-

-

- _____
- _____
- _____

-

-

- _____
- _____
- _____

- _____
- _____
- _____

G33. INTERVIEWER CHECK-ITEM:

If line C reads TRADE-VOCATIONAL,

check ¹○ ► go to H1Otherwise ²○ ► go to G34**G34. Did you ever borrow money to finance ANY of your education through the student loan program?**Yes ³○No ⁴○ ► go to G39**G35. How much did you borrow in total through the student loan program? (Record to nearest \$100)**

5					0	0	\$
---	--	--	--	--	---	---	----

G36. How much money from the student loan program did you owe when you graduated in 1990? (Record to nearest \$100 or check "zero" or "don't know")

6					0	0	\$
---	--	--	--	--	---	---	----

zero ⁷○don't know ⁸○**G37. How much from the student loan program do you owe now? (Record to nearest \$100 or check "zero" or "don't know")**

1					0	0	\$
---	--	--	--	--	---	---	----

zero ²○ ► go to G39don't know ³○**G38. Have you had any difficulties in repaying the money you owe?**Yes ⁴○No ⁵○**G39. Did you ever borrow money to finance ANY of your education from other sources such as relatives or directly from a bank?**Yes ⁶○No ⁷○ ► go to H1**G40. How much did you borrow in total from these other sources? (Record to nearest \$100)**

8					0	0	\$
---	--	--	--	--	---	---	----

G41. How much did you owe these other sources when you graduated in 1990? (Record to nearest \$100 or check "zero" or "don't know")

1					0	0	\$
---	--	--	--	--	---	---	----

zero ²○don't know ³○**G42. How much do you now owe to these other sources? (Record to nearest \$100 or check "zero" or "don't know")**

4					0	0	\$
---	--	--	--	--	---	---	----

zero ⁵○ ► go to H1don't know ⁶○**G43. Have you had any difficulties in repaying the money you owe?**Yes ⁷○No ⁸○**H. GENERAL QUESTIONS****H1. And now, some general questions. In what month and year were you born?**

3		
---	--	--

Month

1	9		
---	---	--	--

Year

H2a. What language did you first speak in childhood? (Check one or more)**H2b. Do you still understand it?**

Yes No

English ¹○²xx ³xxFrench ⁴○⁵○ ⁶○Other language ⁷○⁸○ ⁹○**H3. What language do you speak most often at home? (Check one or more)**English ¹○French ²○Other language ³○**H4. What other languages do you speak well enough to conduct a fairly long conversation on different topics? (check one or more)**English ⁴xxFrench ⁵○Other languages ⁶○No others ⁷○

If line E reads "BILINGUAL/BILINGUE"

Otherwise ⁹  go to H7

Another language 40

separated or divorced? 80

Yes ☐ No ☐ **H8b. Please tell me their ages.** (Record age in years as of last birthday)

No 20

Father	Mother
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
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88	88
89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

Other (Specify) 33 ☐ 34 ☐

Father

Mother ▶

Don't know 80 ► go to H17

H15. Which of the following Employment and Immigration Canada training programs did you take part in? (Read list)

Yes No

Preparation for vocational training [Academic upgrading]? ... ☐ ☐

Vocational or skills training? ... ☐ ☐

Language training? ... ☐ ☐

Other preparatory training [for example, Preparation for employment, Occupational orientation]? (Specify) ... ☐ ☐



(do not read)
Don't know which program ... ☐

H16. Who referred you to this program? Was it ... (Read list; check one or more. If more than one program, ask about the one that lasted longest)

An employer? ... ☐

A Canada Employment Centre? ... ☐

Or, some other group or organisation? (Specify) ... ☐



(do not read)
Don't know who ... ☐

H17. We may wish to contact you again for a follow-up to this survey. I'd like to confirm that your name and address are ... (read from Information Sheet and check "no change" or make corrections below)

Name

No change ☐ OR:

Family Name

First or given name

Address:

No change ☐ OR:

Street number and name, P.O. Box number

apt. number

City, town village

Province

Postal Code

No change ☐ OR:

Postal Code

Home Telephone Number

No change ☐ OR:

Area
code

Number

H18. INTERVIEWER CHECK-ITEM:

If blank in C19,

check ¹○▶ go to H20

Otherwise ²○▶ go to H19

H19. What is your telephone number at work?

Area code Number

Area
code

Number

no telephone at work ³○

H20. Would you please give me the name, address and telephone number of someone we could contact if you move, such as a friend, relative or neighbour. We will contact this person only if you have moved in order to obtain your new address and telephone number.**Name**

Family name

First or given name

Address and telephone number the same
as in H17 ⁴○ OR:

Address:

Street number and name, apt. number, P.O. Box
number

City, town, village

Province

Postal Code

Home telephone number

Area code Number

OR:

Business telephone number

Area code Number

H21. INTERVIEWER: Read the following statement about joint collection and data-sharing exactly as worded.

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 provided to these departments will not contain names or other identifying data and will be kept confidential and used only for statistical purposes.

Do you agree to share your answers?

Yes ⁷○

No ⁸○

END OF INTERVIEW: Thank you for your participation in this survey.

(INTERVIEWER: Please check items H22 - H24 and ensure that items H17 and H20 are completed correctly. Enter the final status of the interview on the second page)

H22. Province or territory where respondent was located when interviewed

Nfld.	⁰¹ ○	Man.	⁰² ○
P.E.I.	⁰³ ○	Sask.	⁰⁴ ○
N.S.	⁰⁵ ○	Alta.	⁰⁶ ○
N.B.	⁰⁷ ○	B.C.	⁰⁸ ○
Québec	⁰⁹ ○	Yukon	¹⁰ ○
Ontario	¹¹ ○	NWT	¹² ○

H23. Language of interview

English ¹○

French ²○

H24. Sex of respondent. (Your guess)

Male ³○

Female ⁴○

COMMENTS

COMMENTS

Self Sufficiency Project



Survey Month: November 1992 to December 1997 (monthly)

Title: Self Sufficiency Project

Sponsor: Employment and Immigration Canada

Survey Method: Personal/Telephone Interview

Sample Size: 7,200 respondents

Objectives: The Self Sufficiency Project is a research demonstration project designed to determine the effectiveness of an earnings supplement for single parent income assistance recipients who take jobs and agree to leave Income Assistance.

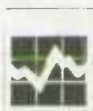
The supplement will be offered for a limited three-year period to each eligible individual who finds a full-time job and it will be generous enough to make work financially preferable to continued income assistance receipt. The project will operate in New Brunswick and British Columbia.

The project will use a random assignment design to divide participants into a supplement group and a non-supplement group. The research aspect of the project will evaluate the supplement's effect on outcome such as employment, earnings and income assistance expenditure. The project will also evaluate the supplements costs and benefits.

Statistics Canada's role in this project is to conduct the interviews for the baseline, and three follow-up surveys and create the necessary files to undertake the analysis. The analysis files will contain survey and administrative record information.

Project Manager: Richard Veevers (951-4617)

Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$300.00 (CD)	



Self sufficiency project - Baseline questionnaire

Confidential when completed.
Collected under the authority of the
Statistics Act / Révisé Statutes of
Canada, 1985, Chapter S19.
Copie française disponible.



	Interviewer No
4	<input type="text"/>
	CORRECT ONLY IF REQUIRED
	Given Name
5	<input type="text"/>
	Surname
6	<input type="text"/>
	Civic Address
7	<input type="text"/>
	<input type="text"/>
	Postal Code
8	<input type="text"/>
	Postal Address
9	<input type="text"/>
	<input type="text"/>
	Postal Code
10	<input type="text"/>
	Telephone Number
11	<input type="text"/> - <input type="text"/>

Record of calls and appointments						Notes
1. Monday	:	:	:	:	:	
2. Tuesday	:	:	:	:	:	
3. Wednesday	:	:	:	:	:	
4. Thursday	:	:	:	:	:	
5. Friday	:	:	:	:	:	
6. Saturday	:	:	:	:	:	

12 DATE OF INTERVIEW	13 START TIME	14 FINISH TIME	15 LENGTH OF INTERVIEW	16 FINAL STATUS	17 PERMISSION GRANTED
<input type="text"/> <input type="text"/> 19 <input type="text"/> <input type="text"/>	<input type="text"/> : <input type="text"/>	<input type="text"/> : <input type="text"/>	<input type="text"/> : <input type="text"/>	<input type="checkbox"/>	1 <input type="radio"/> Yes 2 <input type="radio"/> No
Day Month Year					

18. WOULD YOU PREFER TO BE INTERVIEWED IN ENGLISH OR IN FRENCH?

- 3 ☐ English
4 ☐ French
5 ☐ Either

PART A. DEMOGRAPHIC INFORMATION FOR HOUSEHOLD MEMBERS

A1. WHAT ARE THE NAMES OF ALL PERSONS NOW LIVING OR STAYING HERE WHO HAVE NO USUAL PLACE OF RESIDENCE ELSEWHERE?

Enter names in A5

A2. ARE THERE ANY PERSONS AWAY FROM THIS HOUSEHOLD ATTENDING SCHOOL, VISITING, TRAVELLING OR IN HOSPITAL WHO USUALLY LIVE HERE?

1 ☐ Yes ▶ Enter names in A5 and **GO TO A3**

2 ☐ No

A3. DOES ANYONE ELSE LIVE AT THIS DWELLING SUCH AS OTHER RELATIVES, ROOMERS, BOARDERS OR EMPLOYEES?

3 ☐ Yes ▶ Enter names in A5. COMPLETE A6 through A10 for all members and **GO TO B1**

4 ☐ No ▶ COMPLETE A6 through A10 for all members and **GO TO B1**

A4 L N	A5 Names of household members	A6 Date of birth	A7 Sex M F	A8 * MS	A9 * Fam. ID	A10 * R. to LN01
01		Day Month Year				
02		Day Month Year				
03		Day Month Year				
04		Day Month Year				
05		Day Month Year				
06		Day Month Year				
07		Day Month Year				
08		Day Month Year				
09		Day Month Year				
10		Day Month Year				
11		Day Month Year				
12		Day Month Year				
13		Day Month Year				
14		Day Month Year				
15		Day Month Year				
16		Day Month Year				

* see code sheet

PART B. MARITAL AND FAMILY HISTORY**B1. INTERVIEWER CHECK ITEM:**

- If single (never married)
male (A7 & A8) 1 ☐ ► **GO TO B13**
- If single (never married)
female (A7 & A8) 2 ☐ ► **GO TO B11**

The next few questions are about your marriages and common law partnerships. Your answers will help us understand how family relationships are changing.

B2. INTERVIEWER CHECK ITEM:

- Married in A8 1 ☐ ► **GO TO B6**
- Common law in A8 2 ☐ ► **GO TO B3**
- Separated in A8 3 ☐ ► **GO TO B5**
- Divorced in A8 4 ☐ ► **GO TO B5**
- Widowed in A8 5 ☐ ► **GO TO B6**

B3. WHEN DID YOU AND YOUR PARTNER BEGIN TO LIVE TOGETHER?

month	year
-------	------

B4. HAVE YOU EVER BEEN MARRIED?

- 1 ☐ Yes ► **GO TO B8**
- 2 ☐ No ► **GO TO B10**

B5. WHEN DID YOU AND YOUR SPOUSE SEPARATE?

month	year
-------	------

B6. WHAT WAS THE DATE OF YOUR MARRIAGE?

month	year
-------	------

B7. WAS THIS YOUR FIRST MARRIAGE?

- 3 ☐ Yes ► **GO TO B10**
- 4 ☐ No

B8. HOW MANY TIMES HAVE YOU BEEN MARRIED? (Including your current or most recent marriage.)

--	--

B9. WHAT WAS THE DATE OF YOUR FIRST MARRIAGE?

month	year
-------	------

B10. INTERVIEWER CHECK ITEM:

- If FEMALE in A7 1 ☐ ► **GO TO B11**
- OTHERWISE 2 ☐ ► **GO TO B13**

B11. The next two questions are about your children.**HOW MANY CHILDREN WERE EVER BORN TO YOU?**

--	--

 IF 00 ► **GO TO B13**
B12. IN WHAT YEAR DID YOU GIVE BIRTH TO YOUR OLDEST CHILD?

19		
year		

B13. The following questions are about your parents and family while you were growing up. If adopted include your adoptive parents.**WHAT BEST DESCRIBES THE LEVEL OF EDUCATION COMPLETED BY YOUR MOTHER?**

- 1 ☐ Elementary school
- 2 ☐ Some secondary school
- 3 ☐ Secondary school
- 4 ☐ Community college/Nursing school
- 5 ☐ Trade or vocational school/Military training
- 6 ☐ University
- 7 ☐ Don't know

B14. WHAT BEST DESCRIBES THE LEVEL OF EDUCATION COMPLETED BY YOUR FATHER?

- 1 ☐ Elementary school
- 2 ☐ Some secondary school
- 3 ☐ Secondary school
- 4 ☐ Community college/Nursing school
- 5 ☐ Trade or vocational school/Military training
- 6 ☐ University
- 7 ☐ Don't know

B15. UP UNTIL YOU WERE 16 YEARS OLD, WERE YOU LIVING WITH BOTH YOUR MOTHER AND FATHER?

- 1 ☐ Yes
- 2 ☐ No

B16. UP UNTIL YOU WERE 16 YEARS OLD, DID ANYONE IN YOUR HOUSEHOLD EVER RECEIVE SOCIAL ASSISTANCE OR WELFARE AID?

- 3 ☐ Yes
- 4 ☐ No
- 5 ☐ Don't know

PART C. EMPLOYMENT HISTORY

The next questions are about any paid jobs you have had, including paid baby sitting or house keeping jobs or any other jobs.

C1. HAVE YOU EVER WORKED AT A PAID JOB OR BUSINESS?

- 1 ☐ Yes ► **GO TO C3**
- 2 ☐ No

C2. A LOT OF PEOPLE HAVE IRREGULAR JOBS OR DO EXTRA WORK TO MAKE ENDS MEET. HAVE YOU DONE ANY WORK LIKE THAT FOR PAY?

- 3 ☐ Yes
- 4 ☐ No ► **GO TO C54**

C3. SINCE YOU WERE 16 YEARS OLD, HOW MANY YEARS HAVE YOU WORKED AT A PAID JOB OR BUSINESS?

		years	OR			months
--	--	-------	----	--	--	--------

C4. SINCE JANUARY 1, 1992, FOR HOW MANY EMPLOYERS HAVE YOU WORKED INCLUDING SELF-EMPLOYMENT?

--	--

 if 00 ► **GO TO C54**

List the names of all employers and businesses including self-employment since January 1, 1992 in Item C5, and record the class of worker in C6 for all employers, then complete items C7 to C16 FOR EMPLOYER 1 ONLY and C17 to C52 for all employers including employer 1.

C5. STARTING WITH YOUR CURRENT OR MOST RECENT EMPLOYER WHAT ARE THE NAMES OF THE EMPLOYERS YOU HAVE WORKED FOR FROM NOW BACK TO JAN 1, 1992?	EMPLOYER 1	EMPLOYER 2
	_____	_____
	_____	_____
C6. CLASS OF WORKER	<input type="checkbox"/>	<input type="checkbox"/>

C7. WHAT KIND OF BUSINESS, INDUSTRY OR SERVICE WAS THIS?	_____																		
C8. WHAT KIND OF WORK WERE YOU DOING?	_____																		
C9. WHAT WERE YOUR MOST IMPORTANT ACTIVITIES OR DUTIES?	_____																		
C10. ABOUT HOW MANY PERSONS WERE EMPLOYED AT THE LOCATION WHERE YOU WORKED?	1 <input type="radio"/> 19 or less 2 <input type="radio"/> 20 to 99 3 <input type="radio"/> 100 to 499 4 <input type="radio"/> 500 or over																		
C11. DID THIS EMPLOYER OPERATE AT MORE THAN ONE LOCATION IN CANADA?	5 <input type="radio"/> Yes 6 <input type="radio"/> No ► GO TO C13 7 <input type="radio"/> Don't know ► GO TO C13																		
C12. IN TOTAL ABOUT HOW MANY PERSONS WERE EMPLOYED AT ALL LOCATIONS IN CANADA?	1 <input type="radio"/> 19 or less 2 <input type="radio"/> 20 to 99 3 <input type="radio"/> 100 to 499 4 <input type="radio"/> 500 or over 5 <input type="radio"/> Don't know																		
C13. INTERVIEWER CHECK ITEM: If class of worker (C6) = 1 (paid worker) ... OTHERWISE	6 <input type="radio"/> ► GO TO C14 7 <input type="radio"/> ► GO TO C17																		
C14. IN THIS JOB WERE YOU A MEMBER OF A UNION OR OTHER GROUP WHICH BARGAINED COLLECTIVELY WITH THE EMPLOYER?	8 <input type="radio"/> Yes ► GO TO C16 9 <input type="radio"/> No																		
C15. ALTHOUGH YOU WERE NOT A MEMBER OF A UNION, WERE YOUR WAGES COVERED BY A COLLECTIVE AGREEMENT NEGOTIATED BY A UNION OR OTHER GROUP?	1 <input type="radio"/> Yes 2 <input type="radio"/> No																		
C16. DOES/DID THIS EMPLOYER PROVIDE ANY OF THE FOLLOWING:	<table border="0"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>Pension plan coverage</td> <td>01 <input type="radio"/></td> <td>02 <input type="radio"/></td> </tr> <tr> <td>Dental plan coverage</td> <td>03 <input type="radio"/></td> <td>04 <input type="radio"/></td> </tr> <tr> <td>Health plan coverage</td> <td>05 <input type="radio"/></td> <td>06 <input type="radio"/></td> </tr> <tr> <td>Drug plan coverage</td> <td>07 <input type="radio"/></td> <td>08 <input type="radio"/></td> </tr> <tr> <td>Day care</td> <td>09 <input type="radio"/></td> <td>10 <input type="radio"/></td> </tr> </tbody> </table>		Yes	No	Pension plan coverage	01 <input type="radio"/>	02 <input type="radio"/>	Dental plan coverage	03 <input type="radio"/>	04 <input type="radio"/>	Health plan coverage	05 <input type="radio"/>	06 <input type="radio"/>	Drug plan coverage	07 <input type="radio"/>	08 <input type="radio"/>	Day care	09 <input type="radio"/>	10 <input type="radio"/>
	Yes	No																	
Pension plan coverage	01 <input type="radio"/>	02 <input type="radio"/>																	
Dental plan coverage	03 <input type="radio"/>	04 <input type="radio"/>																	
Health plan coverage	05 <input type="radio"/>	06 <input type="radio"/>																	
Drug plan coverage	07 <input type="radio"/>	08 <input type="radio"/>																	
Day care	09 <input type="radio"/>	10 <input type="radio"/>																	

EMPLOYER 3

EMPLOYER 4

EMPLOYER 5

List the names of all employers and businesses including self-employment since January 1, 1992 in Item C5, and record the class of worker in C6 for all employers, then complete items C7 to C16 FOR EMPLOYER 1 ONLY and C17 to C52 for all employers including employer 1.

C5. STARTING WITH YOUR CURRENT OR MOST RECENT EMPLOYER WHAT ARE THE NAMES OF THE EMPLOYERS YOU HAVE WORKED FOR FROM NOW BACK TO JAN 1, 1992?	EMPLOYER 1	EMPLOYER 2
C6. CLASS OF WORKER	<input type="checkbox"/>	<input type="checkbox"/>
C17. WHEN DID YOU FIRST START WORKING FOR THIS EMPLOYER?	<input type="text"/> <input type="text"/> month year	<input type="text"/> <input type="text"/> month year
C18. ARE YOU PRESENTLY WORKING FOR THIS EMPLOYER?	1 <input type="radio"/> Yes ▶ GO TO C20 2 <input type="radio"/> No	1 <input type="radio"/> Yes ▶ GO TO C20 2 <input type="radio"/> No
C19. WHEN DID YOU LAST WORK FOR THIS EMPLOYER?	<input type="text"/> <input type="text"/> month year	<input type="text"/> <input type="text"/> month year
C20. <u>INTERVIEWER CHECK ITEM:</u> If date in C17 is before Jan 1 '92 OTHERWISE	1 <input type="radio"/> ▶ GO TO C21 2 <input type="radio"/> ▶ GO TO C27	1 <input type="radio"/> ▶ GO TO C21 2 <input type="radio"/> ▶ GO TO C27
C21. WERE YOU WORKING AT THIS JOB OR BUSINESS IN THE FIRST WEEK OF JAN '92?	3 <input type="radio"/> Yes ▶ GO TO C24 4 <input type="radio"/> No	3 <input type="radio"/> Yes ▶ GO TO C24 4 <input type="radio"/> No
C22. SINCE THE BEGINNING OF JAN '92, WHEN DID YOU START WORKING AT THIS JOB?	<input type="text"/> 1992 month	<input type="text"/> 1992 month
C23. DID YOU WORK AT THIS JOB CONTINUOUSLY SINCE (date in C22) AND (date in C19 or present) WITHOUT ANY BREAKS OF TWO WEEKS OR MORE?	5 <input type="radio"/> Yes ▶ GO TO C49 6 <input type="radio"/> No ▶ GO TO C25	5 <input type="radio"/> Yes ▶ GO TO C49 6 <input type="radio"/> No ▶ GO TO C25
C24. DID YOU WORK AT THIS JOB CONTINUOUSLY FROM JAN 1, '92 TO (date in C19 or present) WITHOUT ANY BREAKS OF TWO WEEKS OR MORE?	7 <input type="radio"/> Yes ▶ GO TO C49 8 <input type="radio"/> No	7 <input type="radio"/> Yes ▶ GO TO C49 8 <input type="radio"/> No
C25. SINCE JAN 1, '92 WHEN DID YOU FIRST STOP WORKING AT THIS JOB?	<input type="text"/> <input type="text"/> month year	<input type="text"/> <input type="text"/> month year
C26. BETWEEN JAN 1, '92 AND (date in C25)...HOW MANY WEEKS PER MONTH DID YOU USUALLY WORK AT THAT JOB OR BUSINESS?	<input type="text"/> weeks ▶ GO TO C30	<input type="text"/> weeks ▶ GO TO C30
C27. DID YOU WORK AT THIS JOB CONTINUOUSLY SINCE (date in C17)...AND (date in C19 or present) WITHOUT ANY BREAKS OF TWO WEEKS OR MORE?	5 <input type="radio"/> Yes ▶ GO TO C49 6 <input type="radio"/> No	5 <input type="radio"/> Yes ▶ GO TO C49 6 <input type="radio"/> No
C28. SINCE (date in C17) WHEN DID YOU FIRST STOP WORKING AT THIS JOB?	<input type="text"/> <input type="text"/> month year	<input type="text"/> <input type="text"/> month year
C29. BETWEEN (date in C17) AND (date in C28)...HOW MANY WEEKS PER MONTH DID YOU USUALLY WORK AT THAT JOB OR BUSINESS?	<input type="text"/> weeks	<input type="text"/> weeks
C30. IN THOSE WEEKS, HOW MANY PAID HOURS PER WEEK DID YOU USUALLY WORK?	<input type="text"/> <input type="text"/> hours	<input type="text"/> <input type="text"/> hours

EMPLOYER 3

☐

EMPLOYER 4

☐

EMPLOYER 5

☐

<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div>1 <input type="radio"/> Yes ▶ GO TO C20</div> <div>2 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div>1 <input type="radio"/> ▶ GO TO C21</div> <div>2 <input type="radio"/> ▶ GO TO C27</div>
<div>3 <input type="radio"/> Yes ▶ GO TO C24</div> <div>4 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div>1992</div> <div>month</div> </div>
<div>5 <input type="radio"/> Yes ▶ GO TO C49</div> <div>6 <input type="radio"/> No ▶ GO TO C25</div>
<div>7 <input type="radio"/> Yes ▶ GO TO C49</div> <div>8 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div><input type="text"/> weeks ▶ GO TO C30</div>
<div>5 <input type="radio"/> Yes ▶ GO TO C49</div> <div>6 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div><input type="text"/> weeks</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>hours</div> </div>

<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div>1 <input type="radio"/> Yes ▶ GO TO C20</div> <div>2 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div>1 <input type="radio"/> ▶ GO TO C21</div> <div>2 <input type="radio"/> ▶ GO TO C27</div>
<div>3 <input type="radio"/> Yes ▶ GO TO C24</div> <div>4 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div>1992</div> <div>month</div> </div>
<div>5 <input type="radio"/> Yes ▶ GO TO C49</div> <div>6 <input type="radio"/> No ▶ GO TO C25</div>
<div>7 <input type="radio"/> Yes ▶ GO TO C49</div> <div>8 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div><input type="text"/> weeks ▶ GO TO C30</div>
<div>5 <input type="radio"/> Yes ▶ GO TO C49</div> <div>6 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div><input type="text"/> weeks</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>hours</div> </div>

<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div>1 <input type="radio"/> Yes ▶ GO TO C20</div> <div>2 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div>1 <input type="radio"/> ▶ GO TO C21</div> <div>2 <input type="radio"/> ▶ GO TO C27</div>
<div>3 <input type="radio"/> Yes ▶ GO TO C24</div> <div>4 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div>1992</div> <div>month</div> </div>
<div>5 <input type="radio"/> Yes ▶ GO TO C49</div> <div>6 <input type="radio"/> No ▶ GO TO C25</div>
<div>7 <input type="radio"/> Yes ▶ GO TO C49</div> <div>8 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div><input type="text"/> weeks ▶ GO TO C30</div>
<div>5 <input type="radio"/> Yes ▶ GO TO C49</div> <div>6 <input type="radio"/> No</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>month</div> <div>year</div> </div>
<div><input type="text"/> weeks</div>
<div> <div><input type="text"/></div> <div><input type="text"/></div> <div>hours</div> </div>

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C5. STARTING WITH YOUR CURRENT OR MOST RECENT EMPLOYER WHAT ARE THE NAMES OF THE EMPLOYERS YOU HAVE WORKED FOR FROM NOW BACK TO JAN 1, 1992?	EMPLOYER 1	EMPLOYER 2
	_____	_____
	_____	_____
C6. CLASS OF WORKER	<input type="checkbox"/>	<input type="checkbox"/>

C31. WHAT WAS YOUR HOURLY WAGE RATE, INCLUDING TIPS, BEFORE TAXES AND OTHER DEDUCTIONS?	\$ <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
OR		
C32. WHAT WAS YOUR USUAL WAGE OR SALARY, INCLUDING TIPS, BEFORE TAXES AND OTHER DEDUCTIONS?	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
	1 <input type="radio"/> per week 2 <input type="radio"/> per month 3 <input type="radio"/> per year 4 <input type="radio"/> other (specify) _____	1 <input type="radio"/> per week 2 <input type="radio"/> per month 3 <input type="radio"/> per year 4 <input type="radio"/> other (specify) _____
C33. WHEN DID YOU RETURN TO THIS JOB?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> month year OR 5 <input type="radio"/> Has not returned GO TO NEXT EMPLOYER; IF NONE GO TO C53	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> month year OR 5 <input type="radio"/> Has not returned GO TO NEXT EMPLOYER; IF NONE GO TO C53
C34. DID YOU HAVE A SECOND BREAK OF TWO WEEKS OR MORE SINCE YOU RETURNED TO THIS JOB?	6 <input type="radio"/> Yes 7 <input type="radio"/> No ► GO TO C49	6 <input type="radio"/> Yes 7 <input type="radio"/> No ► GO TO C49
C35. SINCE (date in C33)...WHEN DID YOU NEXT STOP WORKING AT THIS JOB?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> month year	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> month year
C36. BETWEEN (date in C33 and date in C35)...HOW MANY WEEKS PER MONTH DID YOU USUALLY WORK AT THAT JOB OR BUSINESS?	<input type="text"/> weeks	<input type="text"/> weeks
C37. IN THOSE WEEKS, HOW MANY PAID HOURS PER WEEK DID YOU USUALLY WORK?	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> hours	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> hours
C38. WHAT WAS YOUR HOURLY WAGE RATE, INCLUDING TIPS, BEFORE TAXES AND OTHER DEDUCTIONS?	\$ <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
OR		
C39. WHAT WAS YOUR USUAL WAGE OR SALARY, INCLUDING TIPS, BEFORE TAXES AND OTHER DEDUCTIONS?	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
	1 <input type="radio"/> per week 2 <input type="radio"/> per month 3 <input type="radio"/> per year 4 <input type="radio"/> other (specify) _____	1 <input type="radio"/> per week 2 <input type="radio"/> per month 3 <input type="radio"/> per year 4 <input type="radio"/> other (specify) _____
C40. WHEN DID YOU RETURN TO THIS JOB?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> month year OR 5 <input type="radio"/> Has not returned GO TO NEXT EMPLOYER; IF NONE GO TO C53	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> month year OR 5 <input type="radio"/> Has not returned GO TO NEXT EMPLOYER; IF NONE GO TO C53

List the names of all employers and businesses including self-employment since January 1, 1992 in item C5, and record the class of worker in C6 for all employers, then complete items C7 to C16 FOR EMPLOYER 1 ONLY and C17 to C52 for all employers including employer 1.

C5. STARTING WITH YOUR CURRENT OR MOST RECENT EMPLOYER WHAT ARE THE NAMES OF THE EMPLOYERS YOU HAVE WORKED FOR FROM NOW BACK TO JAN 1,1992?	EMPLOYER 1	EMPLOYER 2
C6. CLASS OF WORKER	<input type="checkbox"/>	<input type="checkbox"/>

C41. DID YOU HAVE A THIRD BREAK OF TWO WEEKS OR MORE SINCE YOU RETURNED TO THIS JOB?	6 <input type="radio"/> Yes 7 <input type="radio"/> No ► GO TO C49	6 <input type="radio"/> Yes 7 <input type="radio"/> No ► GO TO C49
C42. SINCE (date in C40)... WHEN DID YOU NEXT STOP WORKING AT THIS JOB?	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> </div> <div style="display: flex; justify-content: space-around; font-size: small;"> month year </div>	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> </div> <div style="display: flex; justify-content: space-around; font-size: small;"> month year </div>
C43. BETWEEN (date in C40 and date in C42)... HOW MANY WEEKS PER MONTH DID YOU USUALLY WORK AT THAT JOB OR BUSINESS?	<div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> weeks	<div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> weeks
C44. IN THOSE WEEKS, HOW MANY PAID HOURS PER WEEK DID YOU USUALLY WORK?	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">hours</div> </div>	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">hours</div> </div>
C45. WHAT WAS YOUR HOURLY WAGE RATE, INCLUDING TIPS, BEFORE TAXES AND OTHER DEDUCTIONS? <div style="border: 1px solid black; width: 30px; height: 15px; margin-top: 5px;"></div>	<div style="display: flex; align-items: center;"> <div style="margin-right: 5px;">\$</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">.</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> </div>	<div style="display: flex; align-items: center;"> <div style="margin-right: 5px;">\$</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">.</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> </div>
C46. WHAT WAS YOUR USUAL WAGE OR SALARY, INCLUDING TIPS, BEFORE TAXES AND OTHER DEDUCTIONS? <div style="border: 1px solid black; width: 30px; height: 15px; margin-top: 5px;"></div>	<div style="display: flex; align-items: center;"> <div style="margin-right: 5px;">\$</div> <div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">.</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> </div> <div style="margin-top: 5px;"> 1 <input type="radio"/> per week 2 <input type="radio"/> per month 3 <input type="radio"/> per year 4 <input type="radio"/> other (specify) </div> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>	<div style="display: flex; align-items: center;"> <div style="margin-right: 5px;">\$</div> <div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">.</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> </div> <div style="margin-top: 5px;"> 1 <input type="radio"/> per week 2 <input type="radio"/> per month 3 <input type="radio"/> per year 4 <input type="radio"/> other (specify) </div> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>
C47. WHEN DID YOU RETURN TO THIS JOB?	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> </div> <div style="display: flex; justify-content: space-around; font-size: small;"> month year </div> <div style="text-align: center; margin-top: 5px;"> <div style="border: 1px solid black; width: 30px; height: 15px; display: flex; align-items: center; justify-content: center;">OR</div> </div> <div style="margin-top: 5px;"> 5 <input type="radio"/> Has not returned GO TO NEXT EMPLOYER; IF NONE GO TO C53 </div>	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> </div> <div style="display: flex; justify-content: space-around; font-size: small;"> month year </div> <div style="text-align: center; margin-top: 5px;"> <div style="border: 1px solid black; width: 30px; height: 15px; display: flex; align-items: center; justify-content: center;">OR</div> </div> <div style="margin-top: 5px;"> 5 <input type="radio"/> Has not returned GO TO NEXT EMPLOYER; IF NONE GO TO C53 </div>
C48. DID YOU HAVE A FOURTH BREAK OF TWO WEEKS OR MORE SINCE YOU RETURNED TO THIS JOB?	6 <input type="radio"/> Yes ► GO TO NEXT EMPLOYER; IF NONE GO TO C53 7 <input type="radio"/> No	6 <input type="radio"/> Yes ► GO TO NEXT EMPLOYER; IF NONE GO TO C53 7 <input type="radio"/> No
C49. HOW MANY WEEKS PER MONTH DID YOU USUALLY WORK AT THAT JOB OR BUSINESS?	<div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> weeks	<div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> weeks
C50. IN THOSE WEEKS, HOW MANY PAID HOURS PER WEEK DID YOU USUALLY WORK?	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">hours</div> </div>	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">hours</div> </div>
C51. WHAT WAS YOUR HOURLY WAGE RATE, INCLUDING TIPS, BEFORE TAXES AND OTHER DEDUCTIONS? <div style="border: 1px solid black; width: 30px; height: 15px; margin-top: 5px;"></div>	<div style="display: flex; align-items: center;"> <div style="margin-right: 5px;">\$</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">.</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> </div>	<div style="display: flex; align-items: center;"> <div style="margin-right: 5px;">\$</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">.</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> </div>
C52. WHAT WAS YOUR USUAL WAGE OR SALARY, INCLUDING TIPS, BEFORE TAXES AND OTHER DEDUCTIONS? <div style="border: 1px solid black; width: 30px; height: 15px; margin-top: 5px;"></div>	<div style="display: flex; align-items: center;"> <div style="margin-right: 5px;">\$</div> <div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">.</div> </div>	

[illegible]

EMPLOYER 4

☐

[illegible]

6 ☐ Yes

7 ☐ No ► **GO TO C49**

month year

weeks

. hours

\$.

\$.

1 ☐ per week

2 ☐ per month

3 ☐ per year

4 ☐ other (specify)

month year

OR

5 ☐ Has not returned
**GO TO NEXT EMPLOYER;
IF NONE GO TO C53**

6 ☐ Yes ► **GO TO NEXT
EMPLOYER;**

7 ☐ No **IF NONE GO TO C53**

weeks

. hours

\$.

\$.

1 ☐ per week

2 ☐ per month

3 ☐ per year

4 ☐ other (specify)

**GO TO NEXT EMPLOYER;
IF NONE GO TO C53**

6 ☐ Yes

7 ☐ No ► **GO TO C49**

month year

weeks

. hours

\$.

\$.

1 ☐ per week

2 ☐ per month

3 ☐ per year

4 ☐ other (specify)

month year

OR

5 ☐ Has not returned
**GO TO NEXT EMPLOYER;
IF NONE GO TO C53**

6 ☐ Yes ► **GO TO NEXT
EMPLOYER;
IF NONE GO TO C53**

7 ☐ No **IF NONE GO TO C53**

weeks

. hours

\$.

\$.

1 ☐ per week

2 ☐ per month

3 ☐ per year

4 ☐ other (specify)

**GO TO NEXT EMPLOYER;
IF NONE GO TO C53**

6 ☐ Yes

7 ☐ No ► GO TO C49

month year

weeks

. hours

\$.

\$.

1 ☐ per week
2 ☐ per month
3 ☐ per year
4 ☐ other (specify)

month year

OR

5 ☐ Has not returned
GO TO C53

6 ☐ Yes ► GO TO C53

7 ☐ No

weeks

. hours

\$.

\$.

1 ☐ per week
2 ☐ per month
3 ☐ per year
4 ☐ other (specify)

List the names of all employers and businesses including self-employment since January 1, 1992 in Item C5, and record the class of worker in C6 for all employers, then complete items C7 to C16 **FOR EMPLOYER 1 ONLY** and C17 to C52 for all employers including employer 1.

C5. STARTING WITH YOUR CURRENT OR MOST RECENT EMPLOYER WHAT ARE THE NAMES OF THE EMPLOYERS YOU HAVE WORKED FOR FROM NOW BACK TO JAN 1, 1992?	EMPLOYER 1	EMPLOYER 2
	_____	_____
	_____	_____
C6. CLASS OF WORKER	<input type="checkbox"/>	<input type="checkbox"/>

C53. INTERVIEWER CHECK ITEM:

- If either no or blank in each C18 1 ☐ ► **GO TO C54**
 Otherwise 2 ☐ ► **GO TO PART D**

C54. HAVE YOU LOOKED FOR WORK IN THE LAST FOUR WEEKS?

- 1 ☐ Yes
 2 ☐ No ► **GO TO C57**

C55. WHAT HAVE YOU DONE TO LOOK FOR WORK IN THE LAST FOUR WEEKS? (Mark all that apply)

- 1 ☐ Nothing ► **Go to C57**
 CHECKED WITH:
 2 ☐ Public Employment Agency
 3 ☐ Private Employment Agency
 4 ☐ Union
 5 ☐ Employers Directly
 6 ☐ Friends or Relatives
 7 ☐ Placed or Answered Ads
 8 ☐ Looked at Job Ads
 9 ☐ Other, (specify)

C56. IN THE LAST FOUR WEEKS, WERE YOU LOOKING FOR A FULL TIME OR A PART TIME JOB?

- 4 ☐ Full Time
 5 ☐ Part Time
 6 ☐ Either / Both

C57. WAS THERE ANY REASON YOU COULD NOT TAKE A JOB IN THE LAST FOUR WEEKS?

- 1 ☐ No ► **GO TO C58**
 2 ☐ Yes, ASK : **WAS IT BECAUSE OF:**
 1 ☐ Own illness or disability
 2 ☐ Lack of adequate child care
 3 ☐ Personal or family responsibility
 4 ☐ Going to school
 5 ☐ No transportation available
 6 ☐ Too much competition
 7 ☐ Not enough education
 8 ☐ Not enough experience/lack of skills
 9 ☐ Other, (specify)

C58. WHAT IS THE LOWEST WAGE OR SALARY (BEFORE DEDUCTIONS) YOU WOULD ACCEPT IF YOU WORKED AT A FULL-TIME JOB NOW?

- \$ _____ . _____
 1 ☐ per hour
 2 ☐ per day
 3 ☐ per week
 4 ☐ per month
 5 ☐ per year

C59. HOW MUCH DO YOU THINK YOU COULD EARN (BEFORE DEDUCTIONS) IF YOU WORKED AT A FULL-TIME JOB NOW?

- \$ _____ . _____
 1 ☐ per hour
 2 ☐ per day
 3 ☐ per week
 4 ☐ per month
 5 ☐ per year

PART D. EDUCATION AND TRAINING INFORMATION

The next few questions will be about your training or lifeskills support services received in the past year.

D1. IN THE PAST YEAR DID YOU TAKE PART IN ANY PROGRAM PROVIDING HELP OR TRAINING IN JOB READINESS, SUCH AS HOW TO LOOK FOR A JOB, CONTACT POSSIBLE EMPLOYERS, FILL OUT A JOB APPLICATION OR HOW TO BEHAVE AT AN INTERVIEW?

- 1 ☐ Yes ► **GO TO D4**
 2 ☐ No

D3. WHY DID YOU NOT GET ANY HELP TO DO THESE ACTIVITIES?

- 5 ☐ No help was available
 6 ☐ Not eligible
 7 ☐ Did not know help existed
 8 ☐ Put on a waiting list
 9 ☐ Other...specify

D2. IN THE PAST YEAR DID YOU WANT HELP TO DO ANY OF THESE ACTIVITIES?

- 3 ☐ Yes
 4 ☐ No ► **GO TO D4**

D4. IN THE PAST YEAR DID YOU TAKE PART IN ANY PROGRAM PROVIDING HELP OR SUPPORT IN DEVELOPING OR IMPROVING YOUR LIFESKILLS SUCH AS MONEY MANAGEMENT OR PARENTING SKILLS?

- 1 ☐ Yes ► **GO TO D6**
 2 ☐ No

EMPLOYER 3

<input type="checkbox"/>

EMPLOYER 4

<input type="checkbox"/>

EMPLOYER 5

<input type="checkbox"/>

<p>D5. IN THE PAST YEAR DID YOU WANT HELP TO IMPROVE YOUR LIFESKILLS?</p> <p>3 <input type="radio"/> Yes</p> <p>4 <input type="radio"/> No</p>	<p>D13. HAVE YOU EVER BEEN ENROLLED IN ANY OTHER KIND OF SCHOOL, COMMUNITY COLLEGE, TECHNICAL INSTITUTE, TRADE OR VOCATIONAL SCHOOL? (Include both full-time and part-time enrollment).</p> <p>7 <input type="radio"/> Yes</p> <p>8 <input type="radio"/> No ► GO TO D17</p>
<p>D6. IN THE PAST YEAR DID YOU TAKE PART IN ANY PROGRAM PROVIDING COUNSELLING FOR PERSONAL PROBLEMS INCLUDING FAMILY PROBLEMS, EMOTIONAL DIFFICULTIES OR DRUG OR ALCOHOL ABUSE?</p> <p>5 <input type="radio"/> Yes ► GO TO D8</p> <p>6 <input type="radio"/> No</p>	<p>D14. HOW MANY YEARS OF SCHOOLING DID YOU COMPLETE ?</p> <p><input type="text"/> <input type="text"/> years OR <input type="text"/> <input type="text"/> months</p>
<p>D7. IN THE PAST YEAR DID YOU WANT ANY COUNSELLING FOR PERSONAL PROBLEMS?</p> <p>7 <input type="radio"/> Yes</p> <p>8 <input type="radio"/> No</p>	<p>D15. HAVE YOU RECEIVED ANY CERTIFICATES OR DIPLOMAS AS A RESULT OF THIS EDUCATION?</p> <p>1 <input type="radio"/> Yes</p> <p>2 <input type="radio"/> No ► GO TO D17</p>
<p>D8. The next few questions will be about your education.</p> <p>WHAT IS THE HIGHEST GRADE THAT YOU HAVE COMPLETED?</p> <p><input type="text"/> <input type="text"/></p>	<p>D16. WERE YOU TAKING THIS EDUCATION OR TRAINING TOWARDS...</p> <p>3 <input type="radio"/> An elementary or high school diploma?</p> <p>4 <input type="radio"/> An apprenticeship diploma?</p> <p>5 <input type="radio"/> A trade-vocational diploma/certificate?</p> <p>6 <input type="radio"/> A college diploma/certificate?</p> <p>7 <input type="radio"/> A university degree/diploma/certificate?</p> <p>8 <input type="radio"/> Other</p>
<p>D9. DID YOU OBTAIN A HIGH SCHOOL GRADUATION DIPLOMA OR EQUIVALENT?</p> <p>1 <input type="radio"/> Yes</p> <p>2 <input type="radio"/> No</p>	<p>D17. Now I am going to ask you about your current enrollment in a school, college, vocational school, technical institute or university?</p> <p>ARE YOU PRESENTLY ENROLLED IN ANY KIND OF HIGH SCHOOL, COMMUNITY COLLEGE, TECHNICAL INSTITUTE, TRADE OR VOCATIONAL SCHOOL OR UNIVERSITY?</p> <p>1 <input type="radio"/> Yes</p> <p>2 <input type="radio"/> No ► GO TO PART E</p>
<p>D10. HAVE YOU EVER BEEN ENROLLED IN A UNIVERSITY?</p> <p>3 <input type="radio"/> Yes</p> <p>4 <input type="radio"/> No ► GO TO D13</p>	
<p>D11. HOW MANY YEARS OF UNIVERSITY HAVE YOU COMPLETED?</p> <p><input type="text"/> <input type="text"/> years</p>	
<p>D12. WHAT DEGREES, CERTIFICATES OR DIPLOMAS HAVE YOU RECEIVED FROM A UNIVERSITY? (Mark all that apply)</p> <p>1 <input type="radio"/> University certificate or diploma below bachelor</p> <p>2 <input type="radio"/> Bachelor</p> <p>3 <input type="radio"/> University certificate or diploma above bachelor</p> <p>4 <input type="radio"/> Master's degree(s)(e.g. M.A., M.Sc., M.Ed.)</p> <p>5 <input type="radio"/> Doctorate</p> <p>6 <input type="radio"/> None</p>	<p>D18. ARE YOU TAKING THIS EDUCATION OR TRAINING TOWARDS...</p> <p>3 <input type="radio"/> An elementary or high school diploma?</p> <p>4 <input type="radio"/> An apprenticeship diploma?</p> <p>5 <input type="radio"/> A trade-vocational diploma/certificate?</p> <p>6 <input type="radio"/> A college diploma/certificate?</p> <p>7 <input type="radio"/> A university degree/diploma/certificate?</p> <p>8 <input type="radio"/> Other</p>

List the names of all employers and businesses including self-employment since January 1, 1992 in Item C5, and record the class of worker in C6 for all employers, then complete items C7 to C16 FOR EMPLOYER 1 ONLY and C17 to C52 for all employers including employer 1.

C5. STARTING WITH YOUR CURRENT OR MOST RECENT EMPLOYER WHAT ARE THE NAMES OF THE EMPLOYERS YOU HAVE WORKED FOR FROM NOW BACK TO JAN 1, 1992?	EMPLOYER 1	EMPLOYER 2
	_____	_____
	_____	_____
C6. CLASS OF WORKER	<input type="checkbox"/>	<input type="checkbox"/>

PART E. CHILD CARE REQUIREMENTS

The following questions are about your children's care arrangements.

E1. INTERVIEWER CHECK ITEM:

If "YES" in any C18 ☐ 1 **▶ GO TO E2**

OTHERWISE ☐ 2 **▶ GO TO E7**

E2. LAST WEEK, WHILE YOU WERE WORKING AT A JOB OR BUSINESS, DID ANY OF YOUR CHILDREN SPEND ANY TIME BEING CARED FOR BY: (Mark all that apply)

READ LIST:

01 ☐ A before or after school program

02 ☐ A daycare centre

03 ☐ A relative in home

04 ☐ A non-relative in home

05 ☐ A relative out of home

06 ☐ A non-relative out of home

07 ☐ An older brother or sister

08 ☐ Child in own care

09 ☐ Other, (specify)

10 ☐ No care required for any children **▶ GO TO PART F**

E3. HOW MUCH DID YOU PAY MONTHLY FOR YOUR CHILDREN'S CARE IN ALL OF THE ABOVE PROGRAMS?

\$ _____ . _____

E4. WAS THE AMOUNT YOU PAID SUBSIDIZED BY THE GOVERNMENT?

4 ☐ Yes

5 ☐ No

6 ☐ Don't know

E5. SUPPOSE YOU HAD TO PAY MORE FOR THIS CARE ARRANGEMENT. WHAT IS THE MAXIMUM INCREASE YOU COULD AFFORD BEFORE YOU WOULD START LOOKING FOR ANOTHER CARE ARRANGEMENT?

\$ _____ . _____

E6. WHAT IS THE MAXIMUM INCREASE YOU COULD AFFORD BEFORE YOU WOULD QUIT YOUR JOB?

\$ _____ . _____ **GO TO PART F**

E7. IF YOU WERE TO WORK AT A JOB OR BUSINESS, WOULD YOU REQUIRE CARE FOR ONE OR MORE OF YOUR CHILDREN?

7 ☐ Yes

8 ☐ No **▶ GO TO PART F**

E8. IS THERE ANOTHER PERSON IN THIS HOUSEHOLD WHO CAN PROVIDE ADEQUATE CARE FOR YOUR CHILDREN?

1 ☐ Yes

2 ☐ No

E9. IS THERE SOMEONE ELSE WHO DOES NOT LIVE IN THIS HOUSEHOLD WHO CAN PROVIDE ADEQUATE CARE FOR YOUR CHILDREN?

3 ☐ Yes

4 ☐ No

E10. WHAT OTHER TYPES OF CARE ARE AVAILABLE TO YOU?

5 ☐ None

6 ☐ Before or after school program

7 ☐ Daycare

8 ☐ Don't know

9 ☐ Other (specify)

E11. HOW MUCH WOULD YOU HAVE TO PAY A MONTH FOR CHILD CARE IF YOU WERE TO WORK AT A JOB OR BUSINESS?

\$ _____ . _____

1 ☐ Don't know

EMPLOYER 3											
											<input type="checkbox"/>

EMPLOYER 4											
											<input type="checkbox"/>

EMPLOYER 5											
											<input type="checkbox"/>

PART F. FAMILY, WORK AND WELFARE

I am now going to read some statements. Would you tell me if you agree strongly, agree, disagree or disagree strongly with each of them.

	Agree strongly	Agree	Disagree	Disagree strongly	
F1. CHILDREN WHO GO TO DAY CARE OR PRE-SCHOOL LEARN MORE THAN CHILDREN WHO STAY HOME WITH THEIR MOTHERS.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	
F2. RIGHT NOW, BEING ON WELFARE PROVIDES FOR MY FAMILY BETTER THAN I COULD BY WORKING.	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	
F3. RIGHT NOW I'D PREFER NOT TO WORK SO I CAN TAKE CARE OF MY FAMILY FULL-TIME.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	
F4. I LIKE GOING TO WORK.	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	
F5. I HAVE LITTLE CONTROL OVER THE THINGS THAT HAPPEN TO ME.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	
F6. IF I GOT A JOB, I COULD FIND SOMEONE I TRUST TO TAKE CARE OF MY CHILDREN.	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	No care required for children 09 <input type="radio"/>
F7. I OFTEN FEEL ANGRY THAT PEOPLE LIKE ME NEVER GET A FAIR CHANCE TO SUCCEED.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	
F8. MY FAMILY IS HAVING SO MANY PROBLEMS THAT I CANNOT WORK AT A PART TIME OR FULL TIME JOB RIGHT NOW.	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	
F9. I AM ASHAMED TO ADMIT TO PEOPLE THAT I AM ON WELFARE.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	
F10. ONE YEAR FROM NOW, I EXPECT TO BE MARRIED.	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	
F11. IT'S UNFAIR TO MAKE PEOPLE ON WELFARE GET A JOB IF THEY DON'T WANT TO.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	
F12. SOMETIMES I FEEL THAT I'M BEING PUSHED AROUND IN LIFE.	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	
F13. RIGHT NOW, I'D REALLY LIKE TO BE GOING TO SCHOOL TO IMPROVE MY READING AND MATH SKILLS.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	
F14. WHEN I HAVE AN EMERGENCY AND NEED CASH, FRIENDS AND FAMILY WILL LOAN IT TO ME.	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	
F15. IT'S WRONG TO STAY ON WELFARE IF YOU CAN GET A JOB, EVEN A JOB YOU DON'T LIKE.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	
F16. I OFTEN HAVE TIME ON MY HANDS.	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	
F17. WHEN I HAVE TROUBLES OR NEED HELP, I HAVE SOMEONE I CAN REALLY TALK TO.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	
F18. A YEAR FROM NOW, I EXPECT TO BE WORKING.	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	
F19. I DO NOT WANT A JOB BECAUSE I WOULD MISS MY CHILDREN TOO MUCH.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	
F20. THERE IS LITTLE THAT I CAN DO TO CHANGE MANY OF THE IMPORTANT THINGS IN MY LIFE.	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	
F21. YOU REALLY CAN'T BLAME PEOPLE WHO WORK ON THE SIDE AND DON'T TELL THE WELFARE DEPARTMENT.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	
F22. INTERVIEWER CHECK ITEM:					
If MALE 1 <input type="radio"/> ► GO TO F24					
OTHERWISE 2 <input type="radio"/> ► GO TO F23					
F23. I WOULD LIKE TO HAVE A BABY NEXT YEAR.	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	

List the names of all employers and businesses including self-employment since January 1, 1992 in Item C5, and record the class of worker in C6 for all employers, then complete items C7 to C16 **FOR EMPLOYER 1 ONLY** and C17 to C52 for all employers including employer 1.

C5. STARTING WITH YOUR CURRENT OR MOST RECENT EMPLOYER WHAT ARE THE NAMES OF THE EMPLOYERS YOU HAVE WORKED FOR FROM NOW BACK TO JAN 1, 1992?	EMPLOYER 1	EMPLOYER 2
	<div>_____</div> <div>_____</div> <div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>
C6. CLASS OF WORKER	<input type="checkbox"/>	<input type="checkbox"/>

<p>F24. In your opinion: HOW MANY OF YOUR CLOSE FRIENDS ARE ON WELFARE?</p> <p>5 <input type="radio"/> None</p> <p>6 <input type="radio"/> Few</p> <p>7 <input type="radio"/> Some</p> <p>8 <input type="radio"/> Many</p> <p>9 <input type="radio"/> Most</p>	<p>F27. IF FINDING A FULL-TIME JOB AND GETTING OFF WELFARE, MEANT THAT YOU WOULD LOSE ALL YOUR CLOSEST FRIENDS. HOW LIKELY IS IT THAT YOU WOULD LEAVE WELFARE ANYWAY?</p> <p>1 <input type="radio"/> Would do it anyway</p> <p>2 <input type="radio"/> Likely to leave</p> <p>3 <input type="radio"/> Unlikely to leave</p> <p>4 <input type="radio"/> Would not leave welfare</p>																									
<p>F25. IF YOU FOUND A FULL-TIME JOB AND GOT OFF WELFARE, HOW WOULD YOUR FRIENDS REACT? WOULD THEY BE...</p> <p>1 <input type="radio"/> Very supportive</p> <p>2 <input type="radio"/> Supportive</p> <p>3 <input type="radio"/> Indifferent</p> <p>4 <input type="radio"/> Critical</p> <p>5 <input type="radio"/> Very critical</p>	<p>F28. AT PRESENT, WHICH OF THESE BEST DESCRIBES YOUR GREATEST NEED?</p> <p>5 <input type="radio"/> Immediate full time employment</p> <p>6 <input type="radio"/> Immediate part time employment</p> <p>7 <input type="radio"/> Education or training</p> <p>8 <input type="radio"/> Something else</p> <p>9 <input type="radio"/> Don't know</p>																									
<p>F26. IF YOU FOUND A FULL-TIME JOB AND GOT OFF WELFARE, WOULD YOU LOSE ALL, MOST, SOME, OR NONE OF YOUR CLOSEST FRIENDS?</p> <p>6 <input type="radio"/> All</p> <p>7 <input type="radio"/> Most</p> <p>8 <input type="radio"/> Some</p> <p>9 <input type="radio"/> None</p>	<p>DURING THE LAST WEEK, HOW MANY DAYS DID YOU FEEL...</p> <table border="1"> <thead> <tr> <th></th> <th>less than one day</th> <th>1-2 days</th> <th>3-4 days</th> <th>5-7 days</th> </tr> </thead> <tbody> <tr> <td>F29. SAD?</td> <td>01 <input type="radio"/></td> <td>02 <input type="radio"/></td> <td>03 <input type="radio"/></td> <td>04 <input type="radio"/></td> </tr> <tr> <td>F30. DEPRESSED?</td> <td>05 <input type="radio"/></td> <td>06 <input type="radio"/></td> <td>07 <input type="radio"/></td> <td>08 <input type="radio"/></td> </tr> <tr> <td>F31. THAT YOU COULD NOT SHAKE OFF THE BLUES, EVEN WITH THE HELP OF FAMILY AND FRIENDS?</td> <td>09 <input type="radio"/></td> <td>10 <input type="radio"/></td> <td>11 <input type="radio"/></td> <td>12 <input type="radio"/></td> </tr> <tr> <td>F32. LONELY?</td> <td>13 <input type="radio"/></td> <td>14 <input type="radio"/></td> <td>15 <input type="radio"/></td> <td>16 <input type="radio"/></td> </tr> </tbody> </table>		less than one day	1-2 days	3-4 days	5-7 days	F29. SAD?	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	F30. DEPRESSED?	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	F31. THAT YOU COULD NOT SHAKE OFF THE BLUES, EVEN WITH THE HELP OF FAMILY AND FRIENDS?	09 <input type="radio"/>	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>	F32. LONELY?	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>	16 <input type="radio"/>
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PART G. YOUR HOME

<p>G1. WHAT TYPE OF DWELLING IS THIS?</p> <p><input type="checkbox"/></p>	<p>G6. DOES THIS DWELLING REQUIRE MAJOR REPAIRS FOR REASONS SUCH AS SAGGING FLOORS, BULGING WALLS OR DAMAGED ELECTRICAL WIRING OR MINOR REPAIRS FOR REASONS SUCH AS BROKEN WINDOWS, LEAKING SINK OR SMALL CRACKS IN INTERIOR WALLS? (Mark all that apply)</p> <p>1 <input type="radio"/> Major repairs</p> <p>2 <input type="radio"/> Minor repairs</p>
<p>G2. DO YOU OWN OR RENT THIS DWELLING?</p> <p>1 <input type="radio"/> Own</p> <p>2 <input type="radio"/> Rent</p> <p>3 <input type="radio"/> Co-op housing</p> <p>4 <input type="radio"/> Other ▶ GO TO G5</p>	
<p>G3. WHAT IS YOUR MONTHLY RENT OR MORTGAGE?</p> <p>\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/></p>	<p>G7. ON WHAT DATE DID YOU MOVE INTO THIS DWELLING?</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>month year</p>
<p>G4. IS YOUR RENT OR MORTGAGE SUBSIDIZED BY THE GOVERNMENT AS PART OF A LOW INCOME HOUSING PROJECT, SOCIAL HOUSING OR CO-OPERATIVE HOUSING PROJECT?</p> <p>5 <input type="radio"/> Yes</p> <p>6 <input type="radio"/> No</p> <p>7 <input type="radio"/> Don't know</p>	<p>G8. INTERVIEWER CHECK ITEM:</p> <p>If G7 is more than 5 years ago? 3 <input type="radio"/> ▶ GO TO PART H</p> <p>OTHERWISE 4 <input type="radio"/> ▶ GO TO G9</p>
<p>G5. IS THIS DWELLING IN NEED OF ANY REPAIRS? (Do not include desirable remodelling, additions or regular maintenance.)</p> <p>8 <input type="radio"/> Yes</p> <p>9 <input type="radio"/> No ▶ GO TO G7</p>	<p>G9. HOW MANY TIMES HAVE YOU MOVED IN THE LAST 5 YEARS?</p> <p>1 <input type="radio"/> once</p> <p>2 <input type="radio"/> twice</p> <p>3 <input type="radio"/> three times</p> <p>4 <input type="radio"/> four times</p> <p>5 <input type="radio"/> five or more times</p>

EMPLOYER 3	EMPLOYER 4	EMPLOYER 5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART H. INFORMATION ON DISABILITIES AND ETHNICITY

The next two questions relate to health and the impact that chronic health problems have on your daily activities.

<p>H1. DO YOU HAVE A LONG TERM PHYSICAL CONDITION OR HEALTH PROBLEM THAT LIMITS YOU IN THE KIND OR AMOUNT OF ACTIVITY YOU CAN DO?</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> <th style="text-align: center;">N/A</th> </tr> </thead> <tbody> <tr> <td>a) At home?</td> <td style="text-align: center;">01 <input type="radio"/></td> <td style="text-align: center;">02 <input type="radio"/></td> <td></td> </tr> <tr> <td>b) At school?</td> <td style="text-align: center;">03 <input type="radio"/></td> <td style="text-align: center;">04 <input type="radio"/></td> <td style="text-align: center;">05 <input type="radio"/></td> </tr> <tr> <td>c) At work?</td> <td style="text-align: center;">06 <input type="radio"/></td> <td style="text-align: center;">07 <input type="radio"/></td> <td style="text-align: center;">08 <input type="radio"/></td> </tr> <tr> <td>c) In other activities such as, travel, sports, or leisure? ..</td> <td style="text-align: center;">09 <input type="radio"/></td> <td style="text-align: center;">10 <input type="radio"/></td> <td></td> </tr> </tbody> </table>		Yes	No	N/A	a) At home?	01 <input type="radio"/>	02 <input type="radio"/>		b) At school?	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>	c) At work?	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	c) In other activities such as, travel, sports, or leisure? ..	09 <input type="radio"/>	10 <input type="radio"/>		<p>H2. ARE YOU LIMITED IN THE KIND OR AMOUNT OF ACTIVITY YOU CAN DO BECAUSE OF A LONG TERM EMOTIONAL, PSYCHOLOGICAL, NERVOUS OR MENTAL HEALTH CONDITION OR PROBLEM?</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> <th style="text-align: center;">N/A</th> </tr> </thead> <tbody> <tr> <td>a) At home?</td> <td style="text-align: center;">01 <input type="radio"/></td> <td style="text-align: center;">02 <input type="radio"/></td> <td></td> </tr> <tr> <td>b) At school?</td> <td style="text-align: center;">03 <input type="radio"/></td> <td style="text-align: center;">04 <input type="radio"/></td> <td style="text-align: center;">05 <input type="radio"/></td> </tr> <tr> <td>c) At work?</td> <td style="text-align: center;">06 <input type="radio"/></td> <td style="text-align: center;">07 <input type="radio"/></td> <td style="text-align: center;">08 <input type="radio"/></td> </tr> <tr> <td>c) In other activities such as, travel, sports, or leisure? ..</td> <td style="text-align: center;">09 <input type="radio"/></td> <td style="text-align: center;">10 <input type="radio"/></td> <td></td> </tr> </tbody> </table>		Yes	No	N/A	a) At home?	01 <input type="radio"/>	02 <input type="radio"/>		b) At school?	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>	c) At work?	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>	c) In other activities such as, travel, sports, or leisure? ..	09 <input type="radio"/>	10 <input type="radio"/>	
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H3. CANADIANS COME FROM MANY ETHNIC, CULTURAL AND RACIAL BACKGROUNDS. FROM WHICH OF THE FOLLOWING BACKGROUNDS DID YOUR PARENTS OR GRAND-PARENTS COME?
(Mark all responses reported)

- | | |
|--|---|
| <p>01 <input type="radio"/> Chinese</p> <p>02 <input type="radio"/> Japanese</p> <p>03 <input type="radio"/> Korean</p> <p>04 <input type="radio"/> Filipino</p> <p>05 <input type="radio"/> East Indian (from India, Pakistan, Bangladesh, East Africa, etc.)</p> <p>06 <input type="radio"/> Black (from Africa, Caribbean, Haiti, U.S.A., Canada, etc.)</p> <p>07 <input type="radio"/> North American Indian</p> <p>08 <input type="radio"/> Metis</p> <p>09 <input type="radio"/> Inuit (Eskimo)</p> <p>10 <input type="radio"/> Arab (from Egypt, Jordan, Lebanon, Iraq, etc.)</p> | <p>11 <input type="radio"/> West Asian (from Syria, Turkey, Afghanistan, Armenia, Iran, etc.)</p> <p>12 <input type="radio"/> South East Asian (from Burma, Laos, Cambodia/Kampuchea, Thailand, Vietnam, etc.)</p> <p>13 <input type="radio"/> North-African (from Egypt, Morocco, Algeria, Tunisia, etc.)</p> <p>14 <input type="radio"/> Latin American (from Mexico, Central America, or South America)</p> <p>15 <input type="radio"/> British (from England, Scotland, Ireland, etc.)</p> <p>16 <input type="radio"/> French</p> <p>17 <input type="radio"/> Any other European groups</p> <p>18 <input type="radio"/> Canadian</p> <p>19 <input type="radio"/> Other (specify)</p> <div style="border: 1px solid black; height: 15px; width: 100%; margin-top: 5px;"></div> |
|--|---|

H4. IN WHAT COUNTRY WERE YOU BORN?

- 1 ☐ Canada ► GO TO H6
- 2 ☐ United Kingdom
- 3 ☐ Italy
- 4 ☐ U.S.A.
- 5 ☐ Other (specify)
-

H5. IN WHAT YEAR DID YOU IMMIGRATE TO CANADA?

19

year

- 6 ☐ Never immigrated (Canadian citizen by birth)

H6. WHAT LANGUAGE OR LANGUAGES DO YOU SPEAK WELL ENOUGH TO CONDUCT A CONVERSATION?

- 1 ☐ English
- 2 ☐ French
- 3 ☐ Other (specify)
-

PART I. INCOME QUESTIONS

11. IN THE LAST MONTH, DID YOU RECEIVE ANY OF THE FOLLOWING KINDS OF FINANCIAL COMPENSATION?

	No	Yes	Amount
Social Assistance or Welfare	01 <input type="radio"/>	02 <input type="radio"/>	\$ <input type="text"/>
Unemployment Insurance	03 <input type="radio"/>	04 <input type="radio"/>	\$ <input type="text"/>
Family Allowance	05 <input type="radio"/>	06 <input type="radio"/>	\$ <input type="text"/>
Day care subsidy	07 <input type="radio"/>	08 <input type="radio"/>	\$ <input type="text"/>
Alimony/child support	09 <input type="radio"/>	10 <input type="radio"/>	\$ <input type="text"/>
Worker's compensation	11 <input type="radio"/>	12 <input type="radio"/>	\$ <input type="text"/>
Disability	13 <input type="radio"/>	14 <input type="radio"/>	\$ <input type="text"/>
Any other financial compensation	15 <input type="radio"/>	16 <input type="radio"/>	\$ <input type="text"/>

12. DID ANYBODY ELSE LIVING IN YOUR HOUSEHOLD NOW, HAVE ANY INCOME IN THE LAST MONTH?

- 1 ☐ Yes
2 ☐ No → GO TO PART J

13. IN THE LAST MONTH, WHAT WAS THEIR TOTAL INCOME?

\$ 3 ☐ Don't know

PART J. CONTACT PERSONS

We will be contacting you three times over the next five years. In eighteen months from now, we will recontact you for the first time to obtain additional information.

In case your family moves before we recontact your household, we would like the name and address of two friends, relatives or neighbours whom we could contact to obtain your family's new address or telephone number. I want to emphasize that we will contact these persons only if you have moved and only to obtain your new address and telephone number.

J1. Given Name

Surname

Relationship

Address: Street

City

Province

Postal Code

Telephone Number -

J2. Given Name

Surname

Relationship

Address: Street

City

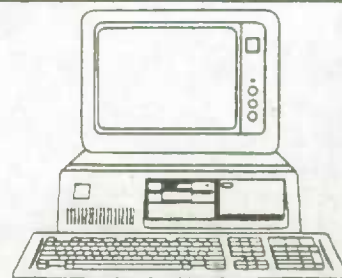
Province

Postal Code

Telephone Number -

1 ☐ NO CONTACT NAME AVAILABLE

Survey of Technological Change



Survey Month: November 1992

Title: Survey of Technological Change

Sponsor: McGill University

Survey Method: Telephone Interview

Sample Size: 3,000 respondents

Objectives: The Survey of Technological Change is part of a collaborative research effort involving researchers in Canada and Sweden who are investigating workers attitudes towards changes in technology in specific industries and occupational groups.

The complete study was comprised of several components. A survey was conducted simultaneously in Sweden and Canada. Researchers conducted interviews with employers and union officials regarding worker attitudes towards technological change and job mobility. The study was conducted in the pulp and paper, steel and telecommunications industries.

The questionnaire collected information about employees' attitudes towards changes that have occurred in the workplace. Respondents were asked to indicate the extent of changes to technology that have taken place over the past three years in their job and in their workplace and the extent to which they have participated in these changes.

The researchers looked at the question of whether and by how much are peoples' attitudes towards change affected by the type of labour market policy that is implemented in the country. The two countries have a very similar economic structure but very different labour market policy and labour legislation and the study will attempt to determine if these differences affect workers' attitudes towards change.

Project Manager: Richard Veevers (951-4617)

Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$300.00	



Survey of technological change

Confidential when completed.
Collected under the authority of
Statistics Act, Revised Statutes
of Canada, 1985, Chapter S19.
Copie française disponible.

1. R.O. 2. Docket 3. P.L.

2. Telephone Number

5. Name

6. Language (Eng. = 1, Fr. = 2)



Record of calls									
07.	08. Date		09. Start		10. Finish		11.	12.	13.
	Day	Month	Hour	Min.	Hour	Min.	Result	Interviewer's name	Comments / Tracing
01									
02									
03									
04									
05									
06									
07									
08									
09									
10									
11									
12									
13									
14									
15									

14. Call coverage by time of day and day of week						
Time period	Mon.	Tues.	Wed.	Thur.	Fri.	Sat.
09:00 - 12:00						
12:01 - 16:00						
16:01 - 19:00						
19:01 - 21:00						

15. Interviewer number

16. Final status

17. Were you working at a job or business last week?

Yes ☐ 1 ☐ ▶ Go to Item 20

No ☐ 2 ☐ ▶ Go to Item 18

18. Last week did you have a job at which you did not work?

Yes ☐ 3 ☐ ▶ Go to Item 20

No ☐ 4 ☐ ▶ Go to Item 19

19. Were you permanently laid off last week?

Yes ☐ 5 ☐ } End

No ☐ 6 ☐ }

Confirm

Label

7 ☐ or

8 ☐ or

9 ☐ or

Go to question 1



<p>1. How many people are employed by your employer at your workplace?</p> <p>01 <input type="radio"/> 1 - 19</p> <p>02 <input type="radio"/> 20 - 49</p> <p>03 <input type="radio"/> 50 - 99</p> <p>04 <input type="radio"/> 100 - 199</p> <p>05 <input type="radio"/> 200 - 499</p> <p>06 <input type="radio"/> 500 - 999</p> <p>07 <input type="radio"/> 1000 - 1999</p> <p>08 <input type="radio"/> 2000 - 4999</p> <p>09 <input type="radio"/> 5000 +</p> <p>97 <input type="radio"/> don't know</p> <p>98 <input type="radio"/> refused</p>	<p>7. During the last three years, have you yourself ever lost or been laid off, from your principal job, even temporarily?</p> <p>1 <input type="radio"/> yes</p> <p>2 <input type="radio"/> no</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>
<p>2. During the last three years, has the number of people working at your workplace increased a lot, increased somewhat, stayed about the same, decreased somewhat or decreased a lot?</p> <p>1 <input type="radio"/> increased a lot</p> <p>2 <input type="radio"/> increased somewhat</p> <p>3 <input type="radio"/> stayed about the same</p> <p>4 <input type="radio"/> decreased somewhat</p> <p>5 <input type="radio"/> decreased a lot</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>	<p>8. On a scale from 1 to 5, with 1 being "very unlikely" and 5 being "very likely", what likelihood is there that you will lose the job you now hold at some point in the next two years?</p> <p>1 <input type="radio"/> very unlikely</p> <p>2 <input type="radio"/> rather unlikely</p> <p>3 <input type="radio"/> neither unlikely nor likely</p> <p>4 <input type="radio"/> rather likely</p> <p>5 <input type="radio"/> very likely</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>
<p>3. During the last three years, have there been any substantial changes in the machinery and equipment you use in your own job?</p> <p>1 <input type="radio"/> yes</p> <p>2 <input type="radio"/> no</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>	<p>9. On a scale from 1 to 5, with 1 being "very unlikely" and 5 being "very likely", what likelihood is there that you personally will become unemployed at some point in the next two years?</p> <p>1 <input type="radio"/> very unlikely</p> <p>2 <input type="radio"/> rather unlikely</p> <p>3 <input type="radio"/> neither unlikely nor likely</p> <p>4 <input type="radio"/> rather likely</p> <p>5 <input type="radio"/> very likely</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>
<p>4. Apart from your own job, during the last three years, have there been any substantial changes at your workplace in the machinery and equipment used?</p> <p>1 <input type="radio"/> yes</p> <p>2 <input type="radio"/> no</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>	<p>10. Are you very worried, rather worried or not worried at all about becoming unemployed at some point in the next two years?</p> <p>1 <input type="radio"/> very worried</p> <p>2 <input type="radio"/> rather worried</p> <p>3 <input type="radio"/> not worried at all</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>
<p>5. Apart from changes in machinery and equipment, during the last three years, have there been any substantial changes in the work tasks assigned to the job that you now do?</p> <p>1 <input type="radio"/> yes</p> <p>2 <input type="radio"/> no</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>	<p>11. On a scale from 1 to 5, with 1 being "very easy" and 5 being "very difficult", if you lost your current job, how easy or difficult would it be for you to find another job equivalent to the one you now have?</p> <p>1 <input type="radio"/> very easy</p> <p>2 <input type="radio"/> rather easy</p> <p>3 <input type="radio"/> neither easy nor difficult</p> <p>4 <input type="radio"/> rather difficult</p> <p>5 <input type="radio"/> very difficult</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>
<p>6. When the management in your workplace plans to carry out major changes, such as new equipment, layoffs, staff reductions, or reorganizations, do the employees have much, little or no say over such changes?</p> <p>1 <input type="radio"/> much say</p> <p>2 <input type="radio"/> little say</p> <p>3 <input type="radio"/> no say</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>	<p>12. If your workplace was threatened with closure, would you accept a pay cut if it were the only way to save your job? If yes, please indicate how big a percentage of your present wage.</p> <p>1 <input type="radio"/> no, I would not accept any pay cut</p> <p>2 <input type="radio"/> yes, 1-10 per cent</p> <p>3 <input type="radio"/> yes, 11-25 per cent</p> <p>4 <input type="radio"/> yes, more than 25 per cent</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>

13. What would you choose if you had to, being unemployed for a year awaiting a job in your present place of residence or moving to another town where you could get an equivalent job immediately?

- 1 ☐ wait for a job in my present place of residence
2 ☐ move to another town
7 ☐ don't know
8 ☐ refused

14. Please rank the following in order of who should take greatest responsibility for combatting unemployment: governments, employers, labour unions, or the individuals themselves?

RANK

	1	2	3	4
governments	01 <input type="checkbox"/>	02 <input type="checkbox"/>	03 <input type="checkbox"/>	04 <input type="checkbox"/>
employers	05 <input type="checkbox"/>	06 <input type="checkbox"/>	07 <input type="checkbox"/>	08 <input type="checkbox"/>
labour unions	09 <input type="checkbox"/>	10 <input type="checkbox"/>	11 <input type="checkbox"/>	12 <input type="checkbox"/>
individuals themselves	13 <input type="checkbox"/>	14 <input type="checkbox"/>	15 <input type="checkbox"/>	16 <input type="checkbox"/>

- 97 ☐ don't know
98 ☐ refused

15. Over the next five years, which policies are likely to create the most jobs in Canada: policies that encourage international competition or policies that attempt to protect home markets?

- 1 ☐ policies that encourage international competition
2 ☐ policies that protect home markets
7 ☐ don't know
8 ☐ refused

16. In your principal job are you a member of a union or other group that bargains collectively with your employer?

- 1 ☐ yes ▶ Go to question 18
2 ☐ no ▶ Go to question 17
7 ☐ don't know
8 ☐ refused } Go to question 18

17. Although you are not a member of a union, are your wages covered by a collective agreement negotiated by a union or other group?

- 1 ☐ yes
2 ☐ no
7 ☐ don't know
8 ☐ refused

18. In general, what do you think trade union leaders at the national level are primarily concerned with: looking after members' interests, getting along with politicians and employers, or looking after the country's long term economic interests?

- 1 ☐ looking after members' interests
2 ☐ getting along with politicians and employers
3 ☐ looking after the country's long term economic interests
7 ☐ don't know
8 ☐ refused

19. In general, what do you think trade union leaders at the local level are primarily concerned with: looking after members' interests, getting along with politicians and employers or looking after the country's long term economic interests?

- 1 ☐ looking after members' interests
2 ☐ getting along with politicians and employers
3 ☐ looking after the country's long term economic interests
7 ☐ don't know
8 ☐ refused

20. In general, would you say relations between employees and management in your workplace are very good, rather good, neither good nor bad, rather bad or very bad?

- 1 ☐ very good
2 ☐ rather good
3 ☐ neither good nor bad
4 ☐ rather bad
5 ☐ very bad
7 ☐ don't know
8 ☐ refused

21. In thinking about what governments should do about unemployment, do you think that most of the effort should go to providing income support (such as unemployment insurance), to job placement, training or retraining in job skills, or to job creation programs?

- 1 ☐ providing income support
2 ☐ providing job placement
3 ☐ providing training or retraining in job skills
4 ☐ providing job creation
5 ☐ none of the above
7 ☐ don't know
8 ☐ refused

22. Do you think unemployment can be brought down most by unemployed people trying harder to find jobs, by the government and employers trying harder to create jobs, or do you think there is not much anyone can do about unemployment?

- 1 ☐ unemployed people trying harder
2 ☐ governments and employers trying harder
3 ☐ nothing much can be done
4 ☐ none of the above
7 ☐ don't know
8 ☐ refused

23. Government employment centres are designed to help people find job opportunities. In your opinion, are these centres meeting these objectives very well, well, adequately, poorly or very poorly in Canada?

- 1 ☐ very well
2 ☐ well
3 ☐ adequately
4 ☐ poorly
5 ☐ very poorly
7 ☐ don't know
8 ☐ refused

<p>24. When employers say that they have to down-size their workforce, do you think this is almost always due to economic problems, or do you think that the purpose is often to make their employees more cooperative?</p> <p>1 <input type="radio"/> due to economic problems</p> <p>2 <input type="radio"/> to make their employees more cooperative</p> <p>3 <input type="radio"/> neither one nor the other</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>	<p>28. In order to maintain Canada's standard of living, people should be willing to switch employers from time to time. Do you . . .</p> <p>1 <input type="radio"/> agree totally?</p> <p>2 <input type="radio"/> agree somewhat?</p> <p>3 <input type="radio"/> neither agree nor disagree?</p> <p>4 <input type="radio"/> disagree somewhat?</p> <p>5 <input type="radio"/> disagree totally?</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>
<p>I will now read some statements to you. Tell me whether you . . .</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p>agree totally</p> <p>agree somewhat</p> <p>neither agree nor disagree</p> <p>disagree somewhat</p> <p>disagree totally</p> </div> <p>. . . with each of them.</p>	<p>29. What is your best estimate of your total earnings from your principal job over the last 12 months? Was it . . .</p> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <p>Less than \$20,000? ⁰¹ <input type="radio"/></p> <p>\$20,000 and more? ⁰² <input type="radio"/></p> <p>No income ⁰³ <input type="radio"/></p> <p>Don't know ⁰⁴ <input type="radio"/></p> <p>Refused ⁰⁵ <input type="radio"/></p> </div> <div style="margin-right: 10px;"> <p>Less than \$10,000? ⁰⁶ <input type="radio"/></p> <p>\$10,000 and more? ⁰⁷ <input type="radio"/></p> <p>\$40,000 and more? ⁰⁹ <input type="radio"/></p> </div> <div> <p>Less than \$5,000? ¹⁰ <input type="radio"/></p> <p>\$5,000 and more? ¹¹ <input type="radio"/></p> <p>Less than \$15,000? ¹² <input type="radio"/></p> <p>\$15,000 and more? ¹³ <input type="radio"/></p> <p>Less than \$30,000? ¹⁴ <input type="radio"/></p> <p>\$30,000 and more? ¹⁵ <input type="radio"/></p> <p>Less than \$60,000? ¹⁶ <input type="radio"/></p> <p>\$60,000 to \$79,999? ¹⁷ <input type="radio"/></p> <p>\$80,000 and more? ¹⁸ <input type="radio"/></p> </div> </div>
<p>25. In general, employees are justified in resisting technical changes because such changes often mean job losses in the long run. Do you . . .</p> <p>1 <input type="radio"/> agree totally?</p> <p>2 <input type="radio"/> agree somewhat?</p> <p>3 <input type="radio"/> neither agree nor disagree?</p> <p>4 <input type="radio"/> disagree somewhat?</p> <p>5 <input type="radio"/> disagree totally?</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>	<p>30. What is your best estimate of the total income of all household members, including yourself, from all sources, over the last 12 months? Was it . . .</p> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <p>Less than \$20,000? ⁰¹ <input type="radio"/></p> <p>\$20,000 and more? ⁰² <input type="radio"/></p> <p>No income ⁰³ <input type="radio"/></p> <p>Don't know ⁰⁴ <input type="radio"/></p> <p>Refused ⁰⁵ <input type="radio"/></p> </div> <div style="margin-right: 10px;"> <p>Less than \$10,000? ⁰⁶ <input type="radio"/></p> <p>\$10,000 and more? ⁰⁷ <input type="radio"/></p> <p>\$40,000 and more? ⁰⁹ <input type="radio"/></p> </div> <div> <p>Less than \$5,000? ¹⁰ <input type="radio"/></p> <p>\$5,000 and more? ¹¹ <input type="radio"/></p> <p>Less than \$15,000? ¹² <input type="radio"/></p> <p>\$15,000 and more? ¹³ <input type="radio"/></p> <p>Less than \$30,000? ¹⁴ <input type="radio"/></p> <p>\$30,000 and more? ¹⁵ <input type="radio"/></p> <p>Less than \$60,000? ¹⁶ <input type="radio"/></p> <p>\$60,000 to \$79,999? ¹⁷ <input type="radio"/></p> <p>\$80,000 and more? ¹⁸ <input type="radio"/></p> </div> </div>
<p>26. People who can't find a job in their own field should be willing to get retraining or additional education that will help them to find a job in another field. Do you . . .</p> <p>1 <input type="radio"/> agree totally?</p> <p>2 <input type="radio"/> agree somewhat?</p> <p>3 <input type="radio"/> neither agree nor disagree?</p> <p>4 <input type="radio"/> disagree somewhat?</p> <p>5 <input type="radio"/> disagree totally?</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>	<p>31. The government should try to save jobs by temporarily subsidizing companies that are having economic difficulties. Do you . . .</p> <p>1 <input type="radio"/> agree totally?</p> <p>2 <input type="radio"/> agree somewhat?</p> <p>3 <input type="radio"/> neither agree nor disagree?</p> <p>4 <input type="radio"/> disagree somewhat?</p> <p>5 <input type="radio"/> disagree totally?</p> <p>7 <input type="radio"/> don't know</p> <p>8 <input type="radio"/> refused</p>

THANK YOU FOR YOUR CO-OPERATION

Survey of Persons Not in the Labour Force



Survey Month:	November 1992		
Title:	Survey of Persons Not in the Labour Force		
Sponsor:	Statistics Canada		
Survey Method:	Telephone Interview		
Sample Size:	All persons between the ages of 15 and 69 in LFS rotation groups 1, 4 and 6 who were classified as not currently active in the labour force (i.e. neither employed nor unemployed). This represents approximately 12,000 respondents.		
Objectives:	This survey provides information on the activities of persons not presently active in the labour force. Information is provided on their past and future (planned) attachment to the labour force, current non-labour market activities and financial resources. Information about the school plans of youths who are neither working nor attending school and the circumstances surrounding retirement for those who retired earlier than planned are also included.		
Project Manager:	Jack Beauregard (951-3328)		
Microdata:	<u>Yes</u>	<u>Price</u>	<u>No</u>
	X	\$500.00	

 Statistics Canada	Statistique Canada	SURVEY OF PERSONS NOT IN THE LABOUR FORCE	CONFIDENTIAL when completed FRANÇAIS AU VERSO
Docket No. 2 	Survey date 3 	Assignment No. 4 	1 FORM NO 06
HRD page - line No. 5 	Given name 6 	Mo. Yr. 	Surname 7

INTERVIEWER:

- | | |
|--|--|
| 10. Refer to F05
• If "Full-time" in item 81 <input type="radio"/> End
• If "No" in item 56 <input type="radio"/> Go to 11 ▶
• If "Nothing" in item 57 <input type="radio"/> Go to 11 ▶
• Otherwise <input type="radio"/> End | 11. Refer to F03 and F05
• If "Age" is less than 25 and "No" in item 80 (not attending school) <input type="radio"/> Go to 12
• If "Age" is greater than 49 <input type="radio"/> Go to 17
• Otherwise <input type="radio"/> Go to 23 |
|--|--|

PLANS FOR FUTURE EDUCATION

- 12. When did ... last attend school?**
 Month Year
- 13. Does ... plan to return to school?**
 Yes ☐ **1** No ☐ **2** Go to 23
- 14. When does ... plan to return to school?**
 Month Year OR No definite date ☐ **3**
- 15. Would this be full-time or part-time?**
 Full-time ☐ **4** Part-time ☐ **5**
- 16. What kind of school does ... plan to attend?**
- | | |
|--|--------------------------------|
| primary or secondary school | <input type="radio"/> 1 |
| community college, junior college or CEGEP | <input type="radio"/> 2 |
| university | <input type="radio"/> 3 |
| technical institute or trade school | <input type="radio"/> 4 |
| commercial or business school | <input type="radio"/> 5 |
| other | <input type="radio"/> 6 |
- Go to 23**

CIRCUMSTANCES CONCERNING RETIREMENT

- 17. Is ... currently retired?**
 Yes ☐ **1** No ☐ **2** Go to 23
- 18. When did ... retire?**
 Month Year
- 19. Did ... retire earlier than planned?**
 Yes ☐ **3** No ☐ **4** Go to 23
- 20. What was the main reason ... retired early? (check one)**
- | | |
|--|--------------------------------|
| own illness or disability | <input type="radio"/> 1 |
| care for relative or friend | <input type="radio"/> 2 |
| early retirement plan or incentive offered by employer | <input type="radio"/> 3 |
| economic reasons (e.g. company closed/downsized, laid off) | <input type="radio"/> 4 |
| wanted to stop working | <input type="radio"/> 5 |
| other | <input type="radio"/> 6 |
- 21. When ... retired did he/she receive a cash-out or an early retirement package in addition to the regular retirement benefits?**
 Yes ☐ **7** No ☐ **8** Go to 23
- 22. Did ... receive:**
- | | | |
|---------------------------|--------------------------------|--------------------------------|
| | Yes | No |
| a lump sum payment | <input type="radio"/> 1 | <input type="radio"/> 2 |
| payments spread over time | <input type="radio"/> 3 | <input type="radio"/> 4 |
| other benefits | <input type="radio"/> 5 | <input type="radio"/> 6 |
- Go to 23**

WORKPLANS AND CURRENT ACTIVITIES

- 23. Does ... plan to look for work or start a business in the future?**
 Yes ☐ **1** No ☐ **2** Go to 25
- 24. When does ... plan to start looking for work or start a business?**
- | | |
|--------------------------------|--------------------------------|
| within the next month | <input type="radio"/> 3 |
| in two to six months | <input type="radio"/> 4 |
| in seven to twelve months | <input type="radio"/> 5 |
| in more than one year from now | <input type="radio"/> 6 |
| don't know | <input type="radio"/> 7 |
- 25. What is the main reason ... is not presently looking for work?**
- | | | |
|---|--------------------------------|-------------------|
| retired | <input type="radio"/> 1 | } Go to 27 |
| own illness or disability | <input type="radio"/> 2 | |
| child care responsibilities - own children | <input type="radio"/> 3 | |
| other personal or family responsibilities | <input type="radio"/> 4 | |
| going to school | <input type="radio"/> 5 | |
| not interested in finding work | <input type="radio"/> 6 | |
| believes no work available (in area, or suited to skills) | <input type="radio"/> 7 | |
| other | <input type="radio"/> 8 | |
| waiting for recall or waiting to start a job? | <input type="radio"/> 9 | } Go to 26 |
- 26. Is this a seasonal job?** Yes ☐ **1** No ☐ **2**
- 27. Did ... participate in any of the following activities last week?**
- | | | |
|--|---------------------------------|---------------------------------|
| | Yes | No |
| going to school | <input type="radio"/> 01 | <input type="radio"/> 02 |
| caring for your own children | <input type="radio"/> 03 | <input type="radio"/> 04 |
| caring for a parent | <input type="radio"/> 05 | <input type="radio"/> 06 |
| caring for another family member or friend | <input type="radio"/> 07 | <input type="radio"/> 08 |
| doing volunteer or community work | <input type="radio"/> 09 | <input type="radio"/> 10 |
| participating in leisure activity | <input type="radio"/> 11 | <input type="radio"/> 12 |
| managing a home or being a homemaker | <input type="radio"/> 13 | <input type="radio"/> 14 |
- 28. What was ...'s main activity last week?**
- | | |
|--|--------------------------------|
| going to school | <input type="radio"/> 1 |
| caring for own children | <input type="radio"/> 2 |
| caring for parent | <input type="radio"/> 3 |
| caring for other family member or friend | <input type="radio"/> 4 |
| doing volunteer or community work | <input type="radio"/> 5 |
| participating in leisure activity | <input type="radio"/> 6 |
| managing a home or being a homemaker | <input type="radio"/> 7 |
| other (Specify) | <input type="radio"/> 8 |
-
-
- 29. Does ... currently receive financial support from the following sources?**
- | | | |
|---|---------------------------------|---------------------------------|
| | Yes | No |
| CPP/QPP or old age security (OAS) | <input type="radio"/> 01 | <input type="radio"/> 02 |
| pension or RRSP | <input type="radio"/> 03 | <input type="radio"/> 04 |
| social assistance | <input type="radio"/> 05 | <input type="radio"/> 06 |
| unemployment insurance or worker's compensation | <input type="radio"/> 07 | <input type="radio"/> 08 |
| savings or investment income | <input type="radio"/> 09 | <input type="radio"/> 10 |
| family members | <input type="radio"/> 11 | <input type="radio"/> 12 |
| other (e.g. alimony, inheritance, estate) | <input type="radio"/> 13 | <input type="radio"/> 14 |
- The next question concerns your total family income.**
- 30. Which of the following categories best describes your total family income from all sources before taxes and deductions for this year? (Include income from wages, salaries, tips, commissions, pensions, interest, rents, etc.)**
- | | | | |
|---------------------|--------------------------------|---------------------|--------------------------------|
| less than \$10,000 | <input type="radio"/> 1 | \$30,000 - \$39,999 | <input type="radio"/> 5 |
| \$10,000 - \$14,999 | <input type="radio"/> 2 | \$40,000 - \$59,999 | <input type="radio"/> 6 |
| \$15,000 - \$19,999 | <input type="radio"/> 3 | \$60,000 and over | <input type="radio"/> 7 |
| \$20,000 - \$29,999 | <input type="radio"/> 4 | | |

FEASIBILITY STUDIES

An Assessment of the Silviculture Labour Force in Canada

The feasibility report was prepared under contract with the Policy Branch of Forestry Canada. The first objective of the proposed study was to provide estimates of the silviculture labour force in Canada and, secondly, to assemble a wide range of information on this population, in particular, information related to work history and mobility within the industry or on the movement between industry. Due to the costs as well as the complex sampling approach required, the sponsor has decided to explore other avenues to obtain estimates of the silviculture labour force in Canada.

Contact: G. Montigny (951-9731)

Federal Jurisdiction Labour Market Data

This study, conducted for Labour Canada, examines the feasibility of collecting wage and non-wage compensation data and other labour-related information from employers under federal jurisdiction and of establishing a data base of information which would allow the comparison of federal and non-federal jurisdiction employers in Canada.

To ascertain the feasibility of collecting detailed information on compensation and human resource practices, a data availability survey was conducted. A sample of firms covering different industries, employment sizes and jurisdictions were interviewed.

The report from this study analyzes the results of the data availability survey and puts forth proposals for further study in this area.

Contact: J. Beauregard (951-3328)

Guide to Conducting an Employee Opinion Survey in the Federal Public Service

The Human Resource Development Branch of the Treasury Board of Canada Secretariat, anticipating the need for information and guidance for better mechanism in communicating with employees, commissioned Statistics Canada (Special Surveys Group) to produce a *Guide to Conducting an Employee Opinion Survey in the Federal Public Service*. The product of this undertaking is this comprehensive document covering the steps involved in the survey process, from initiating an employee survey to acting on its results.

The objective of this document is to assist those who are charged with the task of conducting an employee survey. Whether the survey is conducted through internal or external resources, the handbook can act as a benchmark for establishing deliverables and managing the project.

This guide covers some of the issues in the planning, design, implementation and analysis of an employee opinion survey. It informs those interested in conducting a survey of the basic steps involved and the various options which should be considered at each step. In addition, some of the pitfalls to be wary of at the various survey stages are included. The guide is specifically geared to those in federal government departments intending to conduct an employee survey and hence the examples provided are government specific. The guidelines provided however, are equally applicable in private sector applications. Attempts have been made to keep the language at a non-technical level and no previous knowledge of survey taking has been presumed. A copy of the report may be obtained, free of charge, from the Analysis and Research Division, Human Resources Development Branch, Treasury Board Secretariat, 300 Laurier Ave. West, Ottawa, Ontario, K1A 0R5 (FAX (613)957-0425; TDD (613)957-8657).

Contact: J. Bustros (951-6802)

Household Energy Use Survey

The feasibility study was prepared under contract with the Department of Energy, Mines and Resources. The requirements and options for undertaking a national survey of household energy use and consumption were explored. The survey is going to provide information on the technical characteristics of energy-using appliances, the thermal envelope of the house, as well as patterns of behaviour of the residents involving the use and conservation of energy. The target population for the survey is composed of all the housing

units in Canada occupied as primary residences, both owned and rented. A pre-test was conducted in November 1992 and the survey will be conducted in February 1993, as a supplement to the Labour Force Survey.

Contact: Y. Bélanger (951-9477) or E. Majewski (951-4584)

International Adult Literacy Survey

In 1989, Statistics Canada conducted a ground-breaking national assessment of adult literacy skills, the Survey of Literacy Skills Used in Daily Activities (LSUDA). This feasibility study set out the rationale for, and attributes of, a follow-up to LSUDA. One of the key enhancements treated in the study was the need for comparable data from a sample of our major trading partners. Interested readers should request the document *An International Assessment of Adult Literacy - A Proposal*. A pilot test will be conducted in October 1993, with a follow-up survey planned for May 1994, as a supplement to the Labour Force Survey.

Contact: T.S. Murray (951-9476)

Job Exposure Matrix and Survey on Absenteeism Due to Injuries and Illness

The feasibility study was prepared under contract with the Ontario Workers' Compensation Institute (OWCI). The purpose of the study was to examine several issues concerning the conduct of a national household survey which would collect information on injuries and illnesses leading to absences from work, as well as profiling Canadian occupations using a set of questions to characterize five areas: work control; work-related social support; psychosocial job demands; physical job demands; and job hazards. All options presented in the report were presented as supplements to the Canadian Labour Force Survey. The objectives, the data requirements and the data collection methodologies which would be appropriate if Statistics Canada were to conduct the actual survey, as well as the cost associated with the collection were also presented.

Contact: A. Haining (951-4592)

National Driving Survey

This feasibility study was prepared under contract to the Road Safety and Motor Vehicle Regulation Directorate of Transport Canada. The purpose of the study was to examine the conceptual and operational issues concerning the conduct of a national survey that would provide estimates of vehicle/kilometres driven in Canada.

Upon completion of the review, two diverse survey strategies were presented. One proposal was to use a household survey approach where respondents would complete a diary outlining their driving activities for a one-week period; the second proposal was to collect information using automatic roadside counting stations located on a random sample of roadways.

The two approaches would result in different sets of data being collected, with the household-based approach providing greater detail, while the automatic counter approach provides the opportunity to collect continuous data.

Testing was recommended prior to conducting a survey.

Contact: S. Arrowsmith (951-0566)

National Longitudinal Survey of Children

This planning report was sponsored by the Social Program Information Division of Health and Welfare Canada. The purpose of the National Longitudinal Survey of Children is to measure characteristics of Canadian children, as well as the risk and protective factors in their lives, and to monitor the impact of the characteristics, factors and experiences on the children's development into adulthood. The survey is currently under development and the first collection is planned for 1994.

Contact: G. Montigny (951-9731)

National Museum Audience Survey

A feasibility study was prepared under contract to the Heritage Policy Branch of the Department of Communications. The purpose of the study was to examine the conceptual and operational issues concerning the conduct of a national household survey that would collect information about how Canadians use museums including frequency of visitation; the Canadian public's image of museums; and how Canadians feel museums can be improved. This information would be used to create a national statistical data base for future policy and program evaluations and to assist in the marketing and promotion of museums to the Canadian public. A pre-test is scheduled for November 1993, as a supplement to the Labour Force Survey.

Contact: S. Arrowsmith (951-0566)

Rental Repair and Renovation Expenditure Survey

A feasibility study was prepared under contract to the Canada Mortgage and Housing Corporation. The purpose of the study was to examine the conceptual and operational issues concerning the conduct of a national survey that would collect information about repair and renovation expenditures for residential rental units. A survey is scheduled for March/April 1993, using the Labour Force Survey to identify landlords.

Contact: S. Arrowsmith (951-0566)

Survey of Literacy Skills of Franco-Ontarians

The feasibility study was prepared under contract with the Literacy Branch of the Ontario Ministry of Education. The goal of the proposed study is the development of a literacy profile of persons with French as mother tongue living in Ontario. Funding to undertake the survey has yet to be found.

Contact: G. Montigny (951-9731)

Survey of Literacy Skills of Selected Immigrants in Ontario

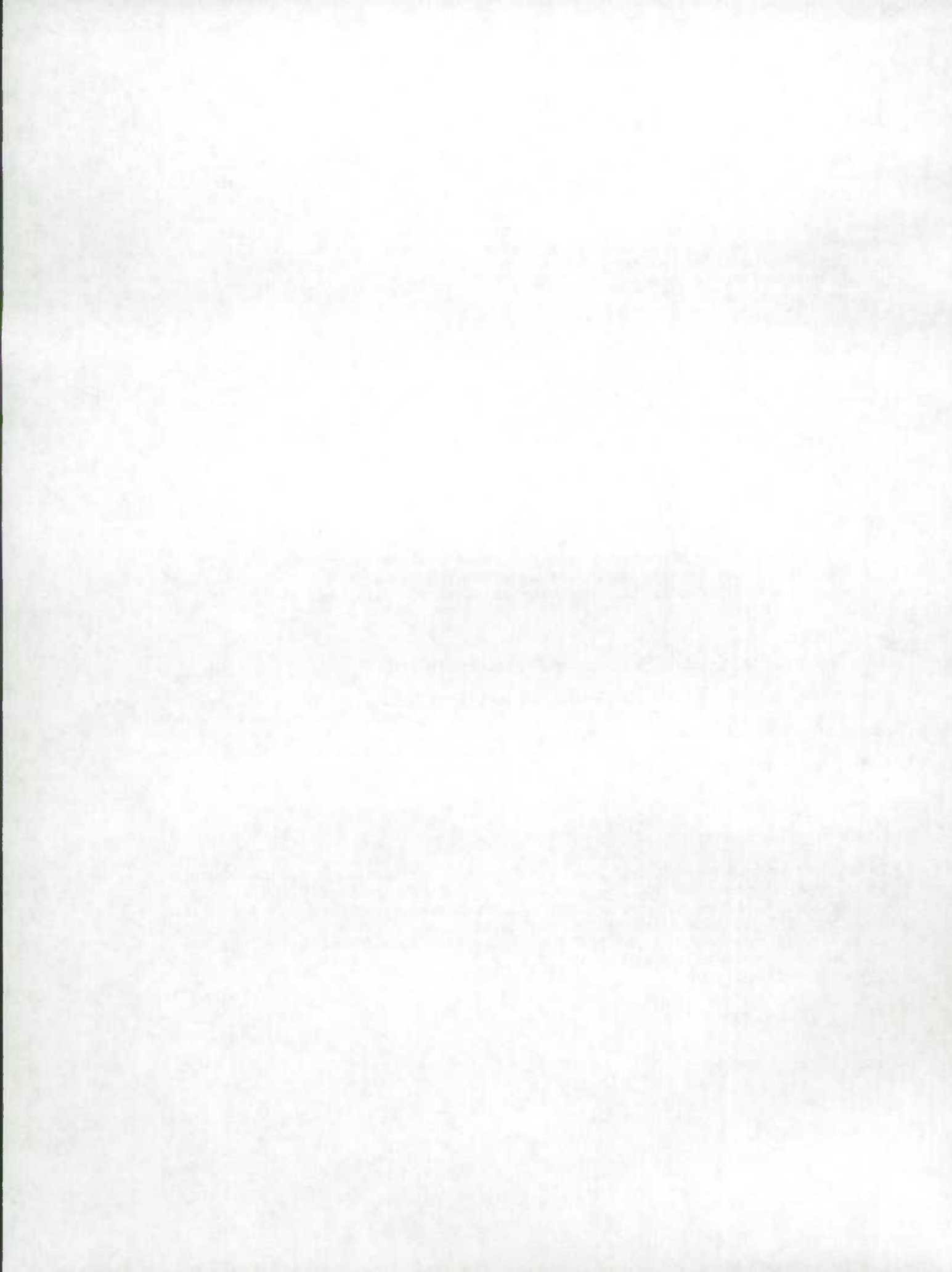
The feasibility study was prepared under contract with the Literacy Branch of the Ontario Ministry of Education. The main objective of the proposed survey is the development of a literacy profile of selected immigrants residing in Ontario. Specifically, the Ontario Literacy Branch is interested in the literacy skills of immigrants whose first language is neither English nor French and immigrants from the Caribbean nations. The proposed study has been delayed due to lack of funds.

Contact: G. Montigny (951-9731)

Youth Smoking Survey

The feasibility study was prepared under contract with Health and Welfare Canada. The main objective was to provide information and estimates of adolescent smoking behaviour in Canada. This information is necessary for the development and evaluation of programs to prevent or reduce smoking in the adolescent population. A pilot test is to be conducted February through March 1993. There are two components: (1) a school component for children aged 10 to 15 years in primary and secondary schools and (2) a Labour Force Survey component for youths aged 16 to 19 years.

Contact: B. Magnus (951-4577)



APPENDIX A

SPECIAL SURVEYS GROUP

LIST OF SURVEYS

1976-1992

Year	Month	Survey Title	Cost of Microdata File
1992			
	November	Survey of Persons Not in the Labour Force	\$500
	November	Survey of Technological Change	\$300
	Nov.-Dec. 97	Self Sufficiency Project	\$300(CD)
	June-July	Survey of 1990 Graduates	\$1,000
	May	1992 Household Facilities and Equipment Survey	\$1,100
	Apr.-Dec.	Canadian Travel Survey	\$500
	April	Survey of Consumer Finances	\$1,100
	March	1991 Housing Repair and Renovation Survey	N/A
	March	Survey of Job Opportunities	\$500
	February	Absence from Work 1992	\$500
	February	Survey on the Importance of Wildlife to Canadians During 1991	\$500
	January	Adult Education and Training Survey	\$1,000
	Monthly	Food Expenditure Survey in 1992	\$1,100
1991			
	November	Survey of Work Arrangements	\$500
	August	Survey on Ageing and Independence	\$500
	April-October	Federation of Saskatchewan Indian Nations	N/A
	May	1991 Household Facilities and Equipment Survey	\$1,000
	May	Household Environment Survey	N/A
	April	Survey of Consumer Finances	\$1,000
	March	Survey of Job Opportunities	\$500
	March	1990 Shelter Cost Survey	N/A
	March	1990 Housing Repair and Renovation Survey	N/A
	March	Follow-up of 1986 Graduates Survey	\$1,000
	February	Current Population Profile	\$500
	February	Absence From Work Survey 1991	\$500
	January	Canadian Travel Survey	\$500
	Jan.-Feb.	Labour Market Activity Survey	\$1,000
1990			
	Oct.-Feb. '91	Ontario Mental Health Survey	N/A
	Jan.-Nov.	Ontario Health Survey	Ont. Min. of Health
	November	Adult Education and Training Survey	\$600
	September	Households and the Environment Survey	\$1,000
	June	Health Promotion Survey	\$1,000
	May	Household Facilities and Equipment Survey	\$1,000
	April	Survey of Consumer Finances	\$1,000
	April/July/ October	Canadian Travel Survey	\$300
	March	National Apprenticeship Survey	\$1,000
	March	Housing Repair and Renovation Survey	N/A
	March	Smoking Habits Survey	\$1,000
	February	Absence From Work Survey	\$300
	January	Labour Market Activity Survey	\$1,000
	Monthly	Food Expenditure Survey	N/A

Year	Month	Survey Title	Cost of Microdata File
1989	November	National Apprenticeship Survey	\$1,000
	October	Survey of Literacy Skills Used in Daily Activities	\$1,000
	October	Alberta Apprentice/Journeymen and Work Reduction Survey	\$500
	June	Barriers to Advancement in the Public Service	N/A
	May	Households Facilities and Equipment Survey	See SCF
	April	Survey of Consumer Finances	\$800
	April	Survey of Pacific Costs and Earnings	N/A
	March	Survey of Job Opportunities	\$300
	March	National Alcohol and Drug Survey	\$1,000
	March	Housing Repair and Renovation Survey	N/A
	February	Survey of Pacific Fishermen	N/A
	February	Survey of Atlantic Fishermen	N/A
	February	Absence From Work Survey	\$300
	January	Canadian Travel Survey	\$300
	January	Labour Market Activity Survey	\$1,000
1988	November	Survey on Telephone Services	\$300
	November	Health and Employment Survey	N/A
	October	Survey of Apprentices and Journeymen in Alberta	\$500
	September	National Child Care Survey	\$1,000
	May	The Household Facilities and Equipment Survey	See SCF
	May	1988 Veterans Survey	See SCF
	April/July/	Canadian Travel Survey	\$300
	October		
	April	Survey of 1986 Graduates	N/A
	April	Survey of Consumer Finances	\$800
	March	Survey of Job Opportunities	\$300
	March	Survey on Drinking and Driving	\$500
	March	Shelter Cost Survey	See SCF
	February	Absence From Work Survey	\$300
	February	Survey of The Importance of Wildlife to Canadians	\$500
	January	Labour Market Activity Survey	\$1,000
1987	Monthly	Fuel Consumption Survey	N/A
	November	Canada Pension Plan Survivors Beneficiaries Survey	N/A
	November	Canada Pension Plan Disability Beneficiaries Survey	N/A
	November	Health and Activities Survey	N/A
	November	Current Population Profile	\$500
	October	Survey of Volunteer Activity	\$500
	October	Survey of Apprentices and Journeymen in Alberta	\$500
	September	Survey of Full-time Employees Concerning Part-time Employment	N/A
	September	Part-time Employment Evaluation	N/A
	April	Ontario Child Health Follow-up Survey	N/A
	March	Follow-up of 1982 Graduates	\$500

Year	Month	Survey Title	Cost of Microdata File
1987 - Concluded			
	March	Survey of Job Opportunities	\$300
	February	Absence From Work Survey	\$300
	January	Labour Market Activity Survey	\$1,000
	January	Canadian Travel Survey	\$300
1986			
	Monthly	Fuel Consumption Survey	N/A
	December	Survey of Smoking Habits	\$500
	November	Survey of Self Employed	\$500
	October	Yukon Travel Survey	N/A
	October	Health Promotion Survey (Montreal)	\$500
	October	Survey of Apprentices and Journeymen in Alberta	\$500
	September	Ontario Tourism and Motivation Study	\$500
	May	Survey of Pacific Cost and Earnings	N/A
	April/May	Census Awareness Survey	N/A
	April	Survey of Pacific Fishermen	N/A
	April/July/	Canadian Travel Survey	\$300
	October		
	March	Survey of Job Opportunities	\$300
	February	Absence From Work Survey	\$300
	February	Adult Training Survey	\$500
	January	Survey of Displaced Workers	\$500
1985			
	Monthly	Fuel Consumption Survey	N/A
	December	Survey of Annual Work Patterns (1985)	\$300
	October	Survey of Apprentices and Journeymen in Alberta	\$500
	September	General Social Survey (Phase 1) (Health and Social Support)	N/A
	September	Survey of Disentitled Family Allowance Recipients	N/A
	July	Airport Official Languages	N/A
	June	Health Promotion Survey	\$500
	June	Survey of Work Reduction	\$500
	March	Survey of Job Opportunities	\$300
	March	Survey of Educational Attainment	\$500
	February	Survey of Maternity Leave	\$500
	February	Absence From Work Survey	\$300
	February	Survey of Atlantic Fishermen	N/A
	January	Canadian Travel Survey	\$300
	January	Survey of Annual Work Patterns (1984)	\$300
1984			
	Monthly	Fuel Consumption Survey	N/A
	December	Survey of Union Membership	\$1,000
	November	Travel to Work Survey	\$300
	September	Survey of Job Opportunities	\$300
	August	Vehicle Maintenance Survey	N/A
	August	Canadian Transport Commission Survey	N/A

Year	Month	Survey Title	Cost of Microdata File
1984 - Concluded			
	June	National Graduates Survey	N/A
	June	The Canadian Health and Disability Survey	N/A
	May	Transportation Survey for Special Care Facilities	N/A
	April/July/	Canadian Travel Survey	\$300
	October		
	March	Survey of Job Opportunities	\$300
	March	Postsecondary Student Survey	N/A
	February	Vehicle Maintenance Survey	N/A
	February	Family History Survey	\$1,000
	February	Absence From Work Survey	\$300
	January	Adult Education Survey	\$500
1983			
	Monthly	Fuel Consumption Survey	N/A
	December	Survey of Smoking Habits	\$300
	December	Survey of Annual Work Patterns	\$300
	November	Travel to Work Survey	\$300
	October	Canadian Health and Disability Survey	N/A
	September	Tourism Attitude and Motivation	\$500
	August	Special Needs in Public Transportation Survey	N/A
	March	Survey of Job Opportunities	\$300
	February	Absence From Work Survey	\$300
	January	Canadian Travel Survey	\$300
	Jan./March	The Ontario Child Health Survey	N/A
1982			
	Monthly	Fuel Consumption Survey	N/A
	December	Survey of Annual Work Patterns	\$300
	November	Travel to Work Survey	\$300
	September	Education Survey	N/A
	August	Current Population Profile	\$500
	April/July/	Canadian Travel Survey	\$300
	October		
	March	Survey of Job Opportunities	\$300
	March	Survey of Skills and Training	N/A
	February	Survey on The Value of Wildlife to Canadians	\$300
	February	Absence From Work Survey	\$300
	January	Survey of 1981 Work History	\$500
	January	Crime Survey (7 City)	\$1,000

Year	Month	Survey Title	Cost of Microdata File
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Prices for the following surveys will be dependent on the cost of reproduction.

1981

Monthly	Passenger Car Fuel Consumption Survey
December	Smoking Habits Survey
November	Travel to Work Survey
January/April/ October	Canadian Travel Survey
April	Job Separation Survey
March	Survey of Job Opportunities
February	Survey of Child Care
February	Absence From Work Survey
January	Annual Work Patterns Survey

1980

Monthly	Passenger Car Fuel Consumption Survey
December	Current Population Profile
November	Travel to Work Survey
June	Survey of Student Finances
April/July/ October	Canadian Travel Survey
March	Survey of Job Opportunities
February	Survey of Volunteer Workers
February	Absence From Work Survey
January	Annual Work Patterns Survey

1979

Monthly from July	Passenger Car Fuel Consumption Survey
December	Smoking Habits Survey
November	Travel to Work Survey
January/April/ July/October	Canadian Travel Survey
April	Labour Market Comparison Study
March	Survey of Job Opportunities
February	Absence From Work Survey
January	Annual Work Patterns Survey
January	Greater Vancouver Crime Survey

1978

November	Travel to Work Survey
October	Canadian Travel Survey
September	Attitudes About Surveys
June	Survey of 1976 Graduates of Post-Secondary Programs
June	Hamilton-Wentworth Victimization Survey
March	Survey of Job Opportunities
February	Absence From Work Survey
February	Survey of Leisure Time Activities Reading Habits
January	Annual Work Patterns Survey

Year	Month	Survey Title	Cost of Microdata File
1977			
	December	Smoking Habits Survey	
	November	Travel to Work Survey	
	October	Methods Test	
	October	Weeks Worked Since September 1976	
	June	Travel Survey	
	May-Sept.	Student Identification	
	March	Survey of Job Opportunities	
	February	Absence From Work Survey	
	January	Annual Work Patterns Survey	
1976			
	November	Travel To Work Survey	
	October	Physical Recreation and Sport	
	August	Guns/Ownership Survey	
	June	Census Micro Match	
	May	Household Facilities and Equipment Survey	
	April	Survey of Consumer Finances	
	February	Absence From Work/Annual Work Patterns	
	January	Income Screen Survey	

APPENDIX B

LABOUR FORCE SURVEY

QUESTIONNAIRES AND

CODE SHEETS



Docket No. 2 Survey date 3 Assignment No. 4
HRD page - line No. Given name Mo Yr Surname 1 FORM NO 05
5 6 7

10 LAST WEEK, DID ... WORK AT A JOB OR BUSINESS? (Regardless of the number of hours)
Yes ☐ No ☐ 2 Go to 30
PERMANENTLY unable to work ☐ Go to 50

11 DID ... HAVE MORE THAN ONE JOB OR BUSINESS LAST WEEK?
Yes ☐ No ☐ 2 Go to 13

12 WAS THIS A RESULT OF CHANGING EMPLOYERS LAST WEEK?
Yes ☐ No ☐ 2

13 HOW MANY HOURS PER WEEK DOES ... USUALLY WORK AT HIS/HER:
(Main JOB) if total 30 or more go to 15
Other jobs?

14 WHAT IS THE REASON ... USUALLY WORKS LESS THAN 30 HOURS PER WEEK?
Enter Code

15 LAST WEEK, HOW MANY HOURS OF OVERTIME OR EXTRA HOURS DID ... WORK?
include part and unpaid time at a job if none enter 00

16 LAST WEEK, HOW MANY HOURS WAS ... AWAY FROM WORK FOR ANY REASON? (Holiday, vacation, illness, labour dispute, etc.)
(From all jobs) if none enter 00 and go to 18

17 WHAT WAS THE MAIN REASON FOR BEING AWAY FROM WORK?
Enter code

18 HOW MANY HOURS DID ... ACTUALLY WORK LAST WEEK AT HIS/HER:
(Main JOB)
Other jobs?

19 IN THE PAST 4 WEEKS, HAS ... LOOKED FOR ANOTHER JOB?
Yes ☐ No ☐ 2 Go to 72

30 LAST WEEK, DID ... HAVE A JOB OR BUSINESS, AT WHICH HE/SHE DID NOT WORK?
Yes ☐ Go to 33 No ☐ 2

31 LAST WEEK, DID ... HAVE A JOB TO START AT A DEFINITE DATE IN THE FUTURE?
Yes ☐ No ☐ 2 Go to 50

32 COUNTING FROM THE END OF LAST WEEK, IN HOW MANY WEEKS WILL ... START TO WORK AT HIS/HER NEW JOB?
 Go to 50

33 WHY WAS ... ABSENT FROM WORK LAST WEEK?
Enter code and if code 6 go to 32

34 DID ... HAVE MORE THAN ONE JOB OR BUSINESS LAST WEEK?
Yes ☐ No ☐ 2

35 HOW MANY HOURS PER WEEK DOES ... USUALLY WORK AT HIS/HER:
(Main JOB) if total 30 or more go to 37
Other jobs?

36 WHAT IS THE REASON ... USUALLY WORKS LESS THAN 30 HOURS PER WEEK?
Enter code

37 UP TO THE END OF LAST WEEK, HOW MANY WEEKS HAS ... BEEN CONTINUOUSLY ABSENT FROM WORK?

38 IS ... GETTING ANY WAGES OR SALARY FROM HIS/HER EMPLOYER FOR ANY TIME OFF LAST WEEK?
Yes ☐ No ☐ 2

39 INTERVIEWER CHECK ITEM:
* if code 5 (layoff) in 33 ☐ go to 56
* Otherwise ☐ go to 40

40 IN THE PAST 4 WEEKS, HAS ... LOOKED FOR ANOTHER JOB?
Yes ☐ No ☐ 2 Go to 72

50 HAS ... EVER WORKED AT A JOB OR BUSINESS?
Yes ☐ No ☐ 2 Go to 55

51 WHEN DID ... LAST WORK AT A JOB OR BUSINESS?
No ☐ 1 Mo Yr if month unknown, enter - in month

52 INTERVIEWER CHECK ITEM:
(1) if 51 is before ☐ 1 go to 55
(2) if 51 is equal to or later than ☐ 2 go to 53

53 DID ... USUALLY WORK 30 OR MORE HOURS PER WEEK?
Full-time (30 or more hours per week) ☐ Part-time (less than 30 hours per week) ☐ 2

54 WHAT WAS THE MAIN REASON WHY ... LEFT THAT JOB?
Enter code

55 INTERVIEWER CHECK ITEM:
* if "perm. unable to work" in 10 ☐ 1 go to 80
* Otherwise ☐ 2 go to 56

56 IN THE PAST 6 MONTHS, HAS ... LOOKED FOR WORK?
Yes ☐ No ☐ 2 Go to 64

57 * IN THE PAST 4 WEEKS, WHAT HAS ... DONE TO FIND WORK? (Mark all methods reported)
Nothing ☐ 1 Go to 62

* WHEN DID ... LAST (Repeat method)
Method used No. of weeks ago (incl. svy. week)
Checked with
PUBLIC employment AGENCY ☐ 2
PRIVATE employment AGENCY ☐ 3
UNION ☐ 4
EMPLOYERS directly ☐ 5
FRIENDS or relatives ☐ 6
Placed or answered ADS ☐ 7
LOOKED at job ADS ☐ 8
OTHER. Specify in NOTES ☐ 9

58 UP TO THE END OF LAST WEEK, HOW MANY WEEKS HAS ... BEEN LOOKING FOR WORK? (Not counting weeks worked)

59 WHAT WAS ...'S MAIN ACTIVITY BEFORE HE/SHE STARTED TO LOOK FOR WORK?
Enter Code

60 IS ... LOOKING FOR A JOB TO LAST MORE THAN 6 MONTHS?
Yes ☐ (More than 6 months) No ☐ 2 (6 months or less)

61 IS ... LOOKING FOR A FULL-TIME OR PART-TIME JOB?
Full-time (30 or more hours per week) ☐ 1
Part-time (less than 30 hours per week) ☐ 2
Go to 63

62 WHAT WAS THE MAIN REASON WHY ... DID NOT LOOK FOR WORK LAST WEEK?
Enter code

63 WAS THERE ANY REASON WHY ... COULD NOT TAKE A JOB LAST WEEK?
Enter code

64 INTERVIEWER CHECK ITEM:
* if "No" (never worked) in 50 ☐ 2 go to 80
* if upper circle in 52 is marked ☐ 3 go to 80
* Otherwise ☐ 4 go to 72

EDUCATIONAL ACTIVITIES (if age 65 or over, go to 90)

80 LAST WEEK, WAS ... ATTENDING A SCHOOL, COLLEGE OR UNIVERSITY?
Yes ☐ No ☐ 2 Go to 90

81 WAS ... ENROLLED AS A FULL-TIME OR PART-TIME STUDENT?
Full time ☐ 1 Part time ☐ 2

82 WHAT KIND OF SCHOOL WAS THIS?
Enter code

90 HRD page-line No. of person providing the above information

Last interview This interview

72 FOR WHOM DID ... WORK? (Name of business, government dept. or agency, or person)
No ☐ 1 change ☐ or

73 WHEN DID ... START WORKING FOR THIS EMPLOYER?
No ☐ 1 change ☐ or Mo Yr if month unknown enter - in month

74 WHAT KIND OF BUSINESS, INDUSTRY OR SERVICE WAS THIS? (Give full description: e.g., federal government, canning industry, forestry services.)
No ☐ 1 change ☐ or

75A WHAT KIND OF WORK WAS ... DOING? (Give full description: e.g., office clerk, factory worker, forestry technician.)
No ☐ 1 change ☐ or

75B IN THIS WORK, WHAT WERE ...'S MOST IMPORTANT ACTIVITIES OR DUTIES? (Give full description: e.g., filing documents, drying vegetables, forest examiner.)
No ☐ 1 change ☐ or

76 Class of worker:
Main job ☐ 1 No change ☐ or Enter Code

77 Other job ☐ 1 No change ☐ or Enter Code go to 80

NOTES
Item no.

78

79

80

81

82

83

84

03

1 Docket no. 2 Survey date 3 Assignment no. 4 Designated interviewer no. 5 Your interviewer no.

6 P.S.U. Group Cluster 7 Listing 8 Type of dwelling Enter code

9 Record time of every call on this household.

1	Mon								
2	Tues.								
3	Wed								
4	Thur								
5	Fri								
6	Sat								

10 Listing address

11 INTERVIEWER CHECK ITEM:
• Is this the first interview at this dwelling or a new household since last interview?
Yes ☐ Go to 12 No ☐ Go to 20

12 IS (read listing address in item 10) YOUR CORRECT MAILING ADDRESS?
Yes ☐ Go to 13 No ☐ Enter correct mailing address on Form 23 and go to 13

FIRST INTERVIEW WITH THIS HOUSEHOLD

13 WOULD YOU PREFER TO BE INTERVIEWED IN ENGLISH OR IN FRENCH?
English ☐ French ☐ Either ☐ Neither ☐

14 INTERVIEWER CHECK ITEM:
Language of interview:
English ☐ French ☐ Other ☐ Go to 15

15 WHAT ARE THE NAMES OF ALL PERSONS WHO LIVE OR STAY HERE WHO HAVE NO USUAL PLACE OF RESIDENCE ELSEWHERE?
Enter names in 32.

16 ARE THERE ANY PERSONS AWAY FROM THIS HOUSEHOLD ATTENDING SCHOOL, VISITING, TRAVELLING OR IN HOSPITAL WHO USUALLY LIVE HERE?
Yes ☐ Enter names in 32 and go to 22 No ☐ Go to 22

22 DOES ANYONE ELSE LIVE AT THIS DWELLING SUCH AS OTHER RELATIVES, ROOMERS, BOARDERS OR EMPLOYEES?
Yes ☐ Enter names in 32, COMPLETE 33 through 40 and go to 42 No ☐ For a first interview, COMPLETE 33 through 40 and go to 42 For a subsequent interview, go to 42

SUBSEQUENT INTERVIEW

20 • If Personal interview ☐ Go to 21
• Otherwise ask:
ARE YOU STILL LIVING IN THE SAME DWELLING AS LAST MONTH?
• where possible, state listing address
Yes ☐ Go to 21 No ☐ Personal visit required

21 DO THE FOLLOWING PERSONS STILL LIVE OR STAY AT THIS DWELLING?
• Read all names in 32.
• Enter appropriate code in 40.

[illegible]

42 IS THIS DWELLING OWNED BY A MEMBER OF THIS HOUSEHOLD?

Yes ¹ ☐ Go directly to
FORMS 05 & 06

No ² ☐ Complete FORM 04

COMPLETE AT END OF INTERVIEW

43 FOR ALL HOUSEHOLDS

Telephone no. — → Permission to interview
by phone:

Granted ³ ☐ } Go to 44

Denied ⁴ ☐ }

No telephone ¹ ☐ or Telephone no. ² ☐ refused

Go to 44

44 Determine and record the best time to call on this household.

45 RESPONSE CODE <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> Month </div> <div style="border: 1px solid black; padding: 5px;"> Code </div> <p><i>IF CODE "B" EXPLAIN IN NOTES</i></p>	46 Was this interview conducted by telephone? Yes <input type="radio"/> No <input type="radio"/>	47 Forms Control <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Form</td> <td style="width: 10%;">04</td> <td style="width: 10%;">05</td> <td style="width: 10%;">06</td> </tr> <tr> <td>Printed</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Completed</td> <td></td> <td></td> <td></td> </tr> </table>	Form	04	05	06	Printed				Completed				48 NOTES See over for additional NOTES <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 10%;">In</th> <th style="width: 10%;">Retain</th> <th style="width: 10%;">Item no.</th> <th style="width: 70%;"></th> </tr> <tr> <td>1</td> <td><input type="radio"/></td> <td></td> <td></td> </tr> <tr> <td>2</td> <td><input type="radio"/></td> <td></td> <td></td> </tr> <tr> <td>3</td> <td><input type="radio"/></td> <td></td> <td></td> </tr> <tr> <td>4</td> <td><input type="radio"/></td> <td></td> <td></td> </tr> </table>	In	Retain	Item no.		1	<input type="radio"/>			2	<input type="radio"/>			3	<input type="radio"/>			4	<input type="radio"/>		
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4	<input type="radio"/>																																		



Code Sheet

Labour Force Survey Questionnaire (Form 05)

Exemplaire français
disponible sur
demande ☐

14
36

- 1 Own illness or disability
- 2 Personal or family responsibilities
- 3 Going to school
- 4 Could only find part-time work
- 5 Did not want full-time work
- 6 Full-time work under 30 hours per week
- 0 Other – Specify in NOTES

17

- 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

33

- 1 Own illness or disability
- 2 Personal or family responsibilities (Include maternity leave)
- 3 Weather
- 4 Labour dispute (strike or lockout)
- 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

54

- 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
- 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

59

- 1 Working
- 2 Keeping house
- 3 Going to school
- 0 Other – **DO NOT** specify in NOTES

62

- 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)
- 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

63

Yes, because of:

- 1 Own illness or disability
- 2 Personal or family responsibilities
- 3 Going to school
- 4 Already has a job
- 0 Other – Specify in NOTES
- 5 No (Was available for work)

76

"IN...S JOB, WAS HE/SHE A PAID WORKER, SELF-EMPLOYED OR AN UNPAID FAMILY WORKER?"

"IN...S OTHER JOB, WAS HE/SHE A PAID WORKER, SELF-EMPLOYED OR AN UNPAID FAMILY WORKER?"

Worked for Others

77

- 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

82

- 1 Primary or secondary school
- 2 Community college, junior college, or CEGEP
- 3 University
- 0 Other – Specify in NOTES



