






**Status:** This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

SCHEDULE 2

Regulations 2(2) and 5

Forms of Return for 2011 Census

			Household Questionnaire <sup>HO</sup>	
			<b>27 March 2011</b>	
Official Use	CD	ED	Line Number	
	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<p>If there is a <b>mistake</b> in the printed address, please write your correct address below</p> <p>House name / number</p> <p>Street / Town / City</p> <p>Postcode</p>			<p>House name / number</p> <p>Street / Town / City</p> <p>Postcode</p>	
			<p>House name / number</p> <p>Street / Town / City</p> <p>Postcode</p>	
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<p><b>Why the census matters</b></p> <p>The census is the official count of every person and household in Scotland. It is held every 10 years and helps to plan our future public services.</p> <p>Please fill in this questionnaire on, or around, Sunday 27 March. Please include everyone at this address. It shouldn't take long and you can fill it in online.</p> <p>As a householder, you have a legal duty to fill in this questionnaire. If you don't, or if you supply false information, you may be fined up to £1,000.</p> <p>Your personal information is protected by law and we will keep it confidential for 100 years.</p> <p>Thank you for helping to shape Scotland's future.</p> <p><i>Duncan Macniven</i></p> <p>Duncan Macniven <b>Registrar General for Scotland</b></p>			<p><b>Please fill in this questionnaire:</b></p> <p> <b>online at</b> <b>www.scotlandscensus.gov.uk</b></p> <p>Enter the Internet Questionnaire Access Code:</p> <p><input type="text"/> - <input type="text"/> - <input type="text"/></p> <p>You can fill in this questionnaire online in English or Gaelic.</p> <p style="text-align: center;"><b>Or</b></p> <p>Fill in this paper version and post it back using the pre-paid envelope provided.</p>	
<p><b>Need help?</b></p> <p> <b>www.scotlandscensus.gov.uk</b></p> <p> <b>Helpline 0300 123 1702</b></p> <p> <b>Textphone 18001 0300 123 1703</b></p>			<p><b>Declaration</b></p> <p>I have filled in this questionnaire fully and accurately, as far as I know.</p> <p>Signature(s)</p> <p>Date</p>	



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## Important guidance - before you start

### Who should fill in this questionnaire?

**The householder or joint householder is responsible for filling in this questionnaire for their household.**

The **householder or joint householder** is the person who lives, or is present, at this address who:

- owns or rents (or jointly owns or rents) the accommodation; and / or
- is responsible (or jointly responsible) for paying the household bills and expenses.

A **household** is:

- one person living alone; or
- a group of people (not necessarily related) living at the same address who share cooking facilities and share a living room or sitting room or dining area.

If there is more than one household at this address, please see the section below.

### Will you need extra questionnaires?

- If there are more than 5 people in this household, either fill in the questionnaire online for the whole household or fill in this questionnaire and ask us for a **Continuation Questionnaire**.
- If any member of this household aged 16 or over does not want to reveal their information to others in the household, you can ask us for an **Individual Questionnaire** with an envelope. Remember to include these people in the answers to household questions H1 to H13 on this questionnaire, but leave the individual questions 1 to 38 blank for them.
- If there is more than one household at this address, you need to ask for one or more extra **Household Questionnaires**.

You can ask for extra questionnaires online at [www.scotlandscensus.gov.uk](http://www.scotlandscensus.gov.uk) or by calling 0300 123 1702.

### How to fill in this questionnaire

This questionnaire will be scanned by a computer. To make sure we record your answers correctly, follow the instructions below.

Please:

- use black or blue ink
- tick your answers **within** the box like this:
- print your answers, in English, within 

S	M	I	T	H		
---	---	---	---	---	--	--

 Use capital letters - one per box the box like this:
- correct any mistakes like this:  or 

S	M		I	T	H	
---	---	--	---	---	---	--
- continue on to the next line (if possible) like 

1	3	0		L	A	D	Y	W	E	L	L		C	R	E	S
				C	E	N	T									

  
this, if a word will not fit on to one line:

**DO NOT** draw a line through questions or pages. The computer may mistake this for an answer.



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## Extra guidance for household questions H1 to H5 (on page 4)

### Children with parents who live apart

Children with parents who live apart must be included on the questionnaire at the address where they **spend the most time**, in household questions H1 to H3 and H13, and individual questions 1 to 38.

If they are staying at their other address on the night of 27 March 2011, they must also be included on the questionnaire at that other address in household questions H4 and H5, and the continuation of H5 on the back page.

If they spend their time equally between two addresses, they must only be included in household questions H1 to H3 and H13, and individual questions 1 to 38, at the address where they are staying on the night of 27 March 2011.

### Students and schoolchildren who live away from home during term-time

All students and schoolchildren who live away from home during term-time must be included on a questionnaire at **both** their home and term-time addresses.

- At their home address they must be included in household questions H1 to H3 and H13, and individual questions 1 to 6.
- At their term-time address they must be included in household questions H1 to H3 and H13, and individual questions 1 to 38.

### People from outside the UK

People from outside the UK whose total length of stay in the UK will be **6 months or more** must be included on the questionnaire at the address where they usually stay in the UK. They must be included in household questions H1 to H3 and H13, and individual questions 1 to 38.

If their total length of stay is **less than 6 months**, they must be included on the questionnaire at the address where they usually stay in the UK in household questions H4 and H5, and the continuation of H5 on the back page.

### Households away on 27 March 2011

If this address is unoccupied on the night of 27 March 2011 because the whole household is away, the questionnaire must be **filled in as soon as possible when they return**.

If nobody lives in the property, please complete household questions H6 to H9 only.

### People with more than one UK address

People with more than one address in the UK need to be included on a questionnaire at their permanent or family home address.

- At their **permanent or family home address** they must be included on the questionnaire in household questions H1 to H3 and H13, and individual questions 1 to 38.
- If they are staying at their **second address** on the night of 27 March 2011 they must also be included on the questionnaire at that second address, but only in household questions H4 and H5, and the continuation of H5 on the back page.
- If they **do not** have a permanent or family home address they must be included on the questionnaire at the address where they spend the most time, in household questions H1 to H3 and H13, and individual questions 1 to 38.

### People temporarily away from home

If someone is temporarily away on the night of 27 March 2011 **and this is their permanent or family home**, include them in household questions H1 to H3 and H13 and individual questions 1 to 38. This includes people who are:

- staying, or expecting to stay, in a residential establishment such as a hospital, care home or hostel, for **less than 6 months**
- living away from home while working, on holiday or travelling (unless outside the UK for 12 months or more)
- members of the Armed Forces
- staying at their second address
- visiting friends or relatives; or
- in prison on remand (for any length of time), or **sentenced to less than 6 months** in prison

**Do not** include anyone who is:

- staying, or expecting to stay, in a residential establishment **for 6 months or more**; or
- in prison, convicted and **sentenced to 6 months or more**, or who is waiting to be sentenced

These people will be included at their establishment.



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**Household questions - people**

**H1** Who usually lives here?

If you need more advice about who to include, see the extra guidance on page 3 or contact us.

◆ Tick all that apply.

- Me, this is my permanent or family home
- Family members including partners, children and babies born on or before 27 March 2011
- Students and / or schoolchildren who live away from home during term-time
- Housemates / flatmates or lodgers
- People who work away from home within the UK, or are members of the Armed Forces, **if this is their permanent or family home**
- People staying temporarily who usually live in the UK but do not have another UK address
- People who usually live outside the UK who are staying in the UK for **6 months or more**
- People temporarily away from home on the night of 27 March 2011

**H2** Counting everyone you included in question **H1**, how many people usually live here?

**H3** Starting with the householder(s), list the names of the people counted in question **H2**, including children and babies.

	First name	Last name
Person 1	<input type="text"/>	<input type="text"/>
Person 2	<input type="text"/>	<input type="text"/>
Person 3	<input type="text"/>	<input type="text"/>
Person 4	<input type="text"/>	<input type="text"/>
Person 5	<input type="text"/>	<input type="text"/>

If there are more than 5 people in this household, either fill in the questionnaire online for the whole household or contact the Helpline on 0300 123 1702 to ask for a Continuation Questionnaire.

**H4** Is there anyone staying at this address on the night of 27 March 2011 whose permanent or family home is elsewhere?

◆ Do not include anyone counted in question **H2**.

◆ Tick all that apply.

- People staying here because it is their second address, for example, for work or a holiday home. Their permanent or family home is elsewhere.
- People who usually live somewhere else in the UK, for example, boy / girlfriends, friends, relatives
- People who usually live outside the UK who are staying in the UK for less than 6 months
- People here on holiday
- No-one else is staying at this address on the night of 27 March 2011 → **Go to H6**

**H5** Counting **only** the people you included in question **H4**, how many people are staying at this address on the night of 27 March 2011 whose permanent or family home is elsewhere?

→ Details for these people must be recorded on the back page.

If there are **only** people staying at this address on the night of 27 March 2011 whose permanent or family home is elsewhere, please make sure you answer questions **H6** to **H9** on page 5 and questions **V1** to **V4** on the back page.



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**Household questions - accommodation**

**H6** What type of accommodation is this?

A whole house or bungalow that is:

- detached
- semi-detached
- terraced (including end-terrace)

A flat, maisonette, or apartment that is:

- in a tenement or purpose-built block of flats (including '4-in-a-block')
- part of a converted or shared house (including bed-sits)
- in a commercial building (for example, in an office building, hotel or over a shop)

A mobile or temporary structure:

- a caravan or other mobile or temporary structure

**H7** Is this household's accommodation self-contained?

- ◆ This means that all the rooms, including the kitchen, bathroom and toilet, are behind a door that only this household can use.
- Yes, all the rooms are behind a door that only this household can use
- No

**H8** How many rooms are available for use only by this household?

- ◆ **Do NOT count:**
  - bathrooms
  - toilets
  - halls or landings
  - rooms that can only be used for storage such as cupboards.
- ◆ **Count** all other rooms, for example:
  - kitchens
  - living rooms
  - utility rooms
  - bedrooms
  - studies
  - conservatories.
- ◆ If two rooms have been converted into one, count them as one room.

Number of rooms

**H9** What type of central heating does this accommodation have?

- ◆ If the central heating is available, please tick the box whether or not you use it.
- ◆ Central heating is a central system that generates heat for multiple rooms.
- No central heating
- Gas
- Electric (including storage heaters)
- Oil
- Solid fuel
- Other central heating, please write in

**H10** Does your household own or rent this accommodation?

- ◆ Tick one box only.
- Owns outright → **Go to H12**
- Owns with a mortgage or loan → **Go to H12**
- Part owns and part rents (shared ownership)
- Rents (with or without housing benefit)
- Lives here rent free

**H11** Who is your landlord?

- Council (Local Authority)
- Housing Association / Registered Social Landlord
- Private landlord or letting agency
- Employer of a household member
- Relative or friend of a household member
- Other

**H12** In total, how many cars or vans are owned, or are available for use, by members of this household?

- ◆ Include any company car(s) or van(s) available for private use.
- None
- 1
- 2
- 3
- 4 or more, please write in number





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### Household questions - relationships

**H13** How are the members of this household related to each other?

- ◆ Tick a box to show the relationship of each person listed in question **H3** (on page 4) to each of the other members of this household. Remember to include household members who are filling in an Individual Questionnaire.
- ◆ Use the same order you used in question **H3** - you may find it helpful to write the name(s) of the household member(s) in the space provided. Remember to include children and babies.
- ◆ If there are more than 5 people in this household, contact the Helpline on 0300 123 1702 to ask for a Continuation Questionnaire.

**This example shows how to provide relationship information for Robert Smith, who is Person 1, his wife (Mary) and their three children (Alison, Steven and James).**

EXAMPLE

Name of Person 1 <div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;">ROBERT SMITH</div>	Name of Person 2 <div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;">MARY SMITH</div>	Name of Person 3 <div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;">ALISON SMITH</div>
NAME OF PERSON 1 PLEASE USE THE SAME ORDER AS QUESTION <b>H3</b>	Relationship of Person 2 to Person: <div style="border: 1px solid black; padding: 2px; text-align: center; margin-bottom: 5px;">1</div> Husband or wife <input checked="" type="checkbox"/> Same-sex civil partner <input type="checkbox"/> Partner <input type="checkbox"/> Son or daughter <input type="checkbox"/> Step-child <input type="checkbox"/> Brother or sister <input type="checkbox"/>	Relationship of Person 3 to Persons: <div style="border: 1px solid black; padding: 2px; text-align: center; margin-bottom: 5px;">1 2</div> Husband or wife <input type="checkbox"/> <input type="checkbox"/> Same-sex civil partner <input type="checkbox"/> <input type="checkbox"/> Partner <input type="checkbox"/> <input type="checkbox"/> Son or daughter <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Step-child <input type="checkbox"/> <input type="checkbox"/> Brother or sister <input type="checkbox"/> <input type="checkbox"/>

Name of Person 1 <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Name of Person 2 <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Name of Person 3 <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
NAME OF PERSON 1 PLEASE USE THE SAME ORDER AS QUESTION <b>H3</b>	Relationship of Person 2 to Person: <div style="border: 1px solid black; padding: 2px; text-align: center; margin-bottom: 5px;">1</div> Husband or wife <input type="checkbox"/> Same-sex civil partner <input type="checkbox"/> Partner <input type="checkbox"/> Son or daughter <input type="checkbox"/> Step-child <input type="checkbox"/> Brother or sister <input type="checkbox"/> Step-brother or step-sister <input type="checkbox"/> Mother or father <input type="checkbox"/> Step-mother or step-father <input type="checkbox"/> Grandchild <input type="checkbox"/> Grandparent <input type="checkbox"/> Other relation <input type="checkbox"/> Unrelated (including foster child) <input type="checkbox"/>	Relationship of Person 3 to Persons: <div style="border: 1px solid black; padding: 2px; text-align: center; margin-bottom: 5px;">1 2</div> Husband or wife <input type="checkbox"/> <input type="checkbox"/> Same-sex civil partner <input type="checkbox"/> <input type="checkbox"/> Partner <input type="checkbox"/> <input type="checkbox"/> Son or daughter <input type="checkbox"/> <input type="checkbox"/> Step-child <input type="checkbox"/> <input type="checkbox"/> Brother or sister <input type="checkbox"/> <input type="checkbox"/> Step-brother or step-sister <input type="checkbox"/> <input type="checkbox"/> Mother or father <input type="checkbox"/> <input type="checkbox"/> Step-mother or step-father <input type="checkbox"/> <input type="checkbox"/> Grandchild <input type="checkbox"/> <input type="checkbox"/> Grandparent <input type="checkbox"/> <input type="checkbox"/> Other relation <input type="checkbox"/> <input type="checkbox"/> Unrelated (including foster child) <input type="checkbox"/> <input type="checkbox"/>



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<p>Name of Person 4</p> <p><b>STEVEN SMITH</b></p> <p>Relationship of Person 4 to Persons:</p> <table border="1"> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>Husband or wife</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Same-sex civil partner</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Partner</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Son or daughter</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Step-child</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Brother or sister</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> </table>		1	2	3	Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Same-sex civil partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Son or daughter	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Name of Person 5</p> <p><b>JAMES SMITH</b></p> <p>Relationship of Person 5 to Persons:</p> <table border="1"> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>Husband or wife</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Same-sex civil partner</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Partner</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Son or daughter</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Step-child</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Brother or sister</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> </table>		1	2	3	4	Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Same-sex civil partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Son or daughter	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>																																																															
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**Person 1 - Individual questions continued**

**12** How do you usually travel to your main place of work or study (including school)?

- ◆ Tick one box only.
- ◆ Tick the box for the longest part, by distance, of your usual journey to work or study.
- Driving a car or van
- Passenger in a car or van
- On foot
- Bus, minibus or coach
- Train
- Underground, subway, metro, light rail or tram
- Taxi
- Bicycle
- Motorcycle, scooter or moped
- Other

**13** What religion, religious denomination or body do you belong to?

- ◆ This question is voluntary.
- None
- Church of Scotland
- Roman Catholic
- Other Christian, please write in below
- Muslim
- Buddhist
- Sikh
- Jewish
- Hindu
- Another religion or body, please write in

**14** What do you feel is your national identity?

- ◆ Tick **ALL** that apply.
- Scottish
- English
- Welsh
- Northern Irish
- British
- Other, please write in

**15** What is your ethnic group?

◆ Choose **ONE** section from A to F, then tick **ONE** box which **best describes** your ethnic group or background.

**A White**

- Scottish
- Other British
- Irish
- Gypsy / Traveller
- Polish
- Other white ethnic group, please write in

**B Mixed or multiple ethnic groups**

- Any mixed or multiple ethnic groups, please write in

**C Asian, Asian Scottish or Asian British**

- Pakistani, Pakistani Scottish or Pakistani British
- Indian, Indian Scottish or Indian British
- Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Chinese, Chinese Scottish or Chinese British
- Other, please write in

**D African**

- African, African Scottish or African British
- Other, please write in

**E Caribbean or Black**

- Caribbean, Caribbean Scottish or Caribbean British
- Black, Black Scottish or Black British
- Other, please write in

**F Other ethnic group**

- Arab, Arab Scottish or Arab British
- Other, please write in









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**Person 2 - Individual questions continued**

**12** How do you usually travel to your main place of work or study (including school)?

- ◆ Tick one box only.
- ◆ Tick the box for the longest part, by distance, of your usual journey to work or study.
- Driving a car or van
- Passenger in a car or van
- On foot
- Bus, minibus or coach
- Train
- Underground, subway, metro, light rail or tram
- Taxi
- Bicycle
- Motorcycle, scooter or moped
- Other

**13** What religion, religious denomination or body do you belong to?

- ◆ This question is voluntary.
- None
- Church of Scotland
- Roman Catholic
- Other Christian, please write in below
- Muslim
- Buddhist
- Sikh
- Jewish
- Hindu
- Another religion or body, please write in

**14** What do you feel is your national identity?

- ◆ Tick **ALL** that apply.
- Scottish
- English
- Welsh
- Northern Irish
- British
- Other, please write in

**15** What is your ethnic group?

◆ Choose **ONE** section from A to F, then tick **ONE** box which **best describes** your ethnic group or background.

**A White**

- Scottish
- Other British
- Irish
- Gypsy / Traveller
- Polish
- Other white ethnic group, please write in

**B Mixed or multiple ethnic groups**

- Any mixed or multiple ethnic groups, please write in

**C Asian, Asian Scottish or Asian British**

- Pakistani, Pakistani Scottish or Pakistani British
- Indian, Indian Scottish or Indian British
- Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Chinese, Chinese Scottish or Chinese British
- Other, please write in

**D African**

- African, African Scottish or African British
- Other, please write in

**E Caribbean or Black**

- Caribbean, Caribbean Scottish or Caribbean British
- Black, Black Scottish or Black British
- Other, please write in

**F Other ethnic group**

- Arab, Arab Scottish or Arab British
- Other, please write in







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**Person 2 - Individual questions continued**

**25** Were you actively looking for any kind of paid work during the last 4 weeks?  
 Yes     No

**26** If a job had been available last week, could you have started it within 2 weeks?  
 Yes     No

**27** Last week, were you waiting to start a job already obtained?  
 Yes     No

**28** Last week were you:  
 ♦ Tick all that apply.  
 retired (whether receiving a pension or not)?  
 a student?  
 looking after home or family?  
 long-term sick or disabled?  
 other

**29** Have you ever worked?  
 Yes, please write in the year you last worked  
    → **Go to 30**  
 No, have never worked → **Go to 38**

**30** Answer the remaining questions for your main job or, if not working, your last main job.  
 ♦ Your main job is the job in which you usually work (worked) the most hours.

**31** In your main job, are (were) you:  
 an employee?  
 self-employed or freelance without employees?  
 self-employed with employees?

**32** What is (was) your full and specific job title?  
 ♦ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER.  
 ♦ Do not state your grade or pay band.

**33** Briefly describe what you do (did) in your main job.

**34** Do (did) you supervise any employees?  
 ♦ Supervision involves overseeing the work of other employees on a day-to-day basis.  
 Yes     No

**35** How many hours (to the nearest full hour) a week do (did) you usually work in your main job?  
 ♦ Include paid and unpaid overtime.  
         
 Number of hours worked in a typical week

**36** At your workplace, what is (was) the main activity of your employer or business?  
 ♦ For example, ARMED FORCES, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING, DOCTOR'S SURGERY.  
 ♦ If you are (were) a civil servant, please write GOVERNMENT.  
 ♦ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department within the local authority.

**37** In your main job, what is (was) the name of the organisation you work (worked) for?  
 ♦ If you are (were) self-employed in your own organisation, please write in the business name.  
  
  
  
 No organisation, for example, self-employed, freelance, or work (worked) for a private individual.

**38** There are no more questions for Person 2.  
 ♦ If there are no more people in your household, please leave the following pages blank. Otherwise go to questions for Person 3.  
 ♦ If you included anyone at question **H5**, remember to record their details on the back page.  
 ♦ Remember to sign the declaration on page 1.





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**Person 3 - Individual questions continued**

**12** How do you usually travel to your main place of work or study (including school)?

- ◆ Tick one box only.
- ◆ Tick the box for the longest part, by distance, of your usual journey to work or study.
- Driving a car or van
- Passenger in a car or van
- On foot
- Bus, minibus or coach
- Train
- Underground, subway, metro, light rail or tram
- Taxi
- Bicycle
- Motorcycle, scooter or moped
- Other

**13** What religion, religious denomination or body do you belong to?

- ◆ This question is voluntary.
- None
- Church of Scotland
- Roman Catholic
- Other Christian, please write in below
- Muslim
- Buddhist
- Sikh
- Jewish
- Hindu
- Another religion or body, please write in

**14** What do you feel is your national identity?

- ◆ Tick **ALL** that apply.
- Scottish
- English
- Welsh
- Northern Irish
- British
- Other, please write in

**15** What is your ethnic group?

◆ Choose **ONE** section from A to F, then tick **ONE** box which **best describes** your ethnic group or background.

**A White**

- Scottish
- Other British
- Irish
- Gypsy / Traveller
- Polish
- Other white ethnic group, please write in

**B Mixed or multiple ethnic groups**

- Any mixed or multiple ethnic groups, please write in

**C Asian, Asian Scottish or Asian British**

- Pakistani, Pakistani Scottish or Pakistani British
- Indian, Indian Scottish or Indian British
- Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Chinese, Chinese Scottish or Chinese British
- Other, please write in

**D African**

- African, African Scottish or African British
- Other, please write in

**E Caribbean or Black**

- Caribbean, Caribbean Scottish or Caribbean British
- Black, Black Scottish or Black British
- Other, please write in

**F Other ethnic group**

- Arab, Arab Scottish or Arab British
- Other, please write in











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**Person 4 - Individual questions continued**

**12** How do you usually travel to your main place of work or study (including school)?

- ◆ Tick one box only.
- ◆ Tick the box for the longest part, by distance, of your usual journey to work or study.
- Driving a car or van
- Passenger in a car or van
- On foot
- Bus, minibus or coach
- Train
- Underground, subway, metro, light rail or tram
- Taxi
- Bicycle
- Motorcycle, scooter or moped
- Other

**13** What religion, religious denomination or body do you belong to?

- ◆ This question is voluntary.
- None
- Church of Scotland
- Roman Catholic
- Other Christian, please write in below
- Muslim
- Buddhist
- Sikh
- Jewish
- Hindu
- Another religion or body, please write in

**14** What do you feel is your national identity?

- ◆ Tick **ALL** that apply.
- Scottish
- English
- Welsh
- Northern Irish
- British
- Other, please write in

**15** What is your ethnic group?

◆ Choose **ONE** section from A to F, then tick **ONE** box which **best describes** your ethnic group or background.

**A White**

- Scottish
- Other British
- Irish
- Gypsy / Traveller
- Polish
- Other white ethnic group, please write in

**B Mixed or multiple ethnic groups**

- Any mixed or multiple ethnic groups, please write in

**C Asian, Asian Scottish or Asian British**

- Pakistani, Pakistani Scottish or Pakistani British
- Indian, Indian Scottish or Indian British
- Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Chinese, Chinese Scottish or Chinese British
- Other, please write in

**D African**

- African, African Scottish or African British
- Other, please write in

**E Caribbean or Black**

- Caribbean, Caribbean Scottish or Caribbean British
- Black, Black Scottish or Black British
- Other, please write in

**F Other ethnic group**

- Arab, Arab Scottish or Arab British
- Other, please write in



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**Person 4 - Individual questions continued**

**16** Which of these can you do?  
 ♦ Tick all that apply.

	English	Scottish Gaelic	Scots
Understand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speak	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Read	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Write	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

or  
 None of these

**17** How well can you speak English?  
 Very well    Well    Not well    Not at all

**18** Do you use a language other than English at home?  
 ♦ Tick all that apply.

No, English only  
 Yes, British Sign Language  
 Yes, other - please write in

**19** How is your health in general?  
 Very good    Good    Fair    Bad    Very bad

**20** Do you have any of the following conditions which have lasted, or are expected to last, at least 12 months?  
 ♦ Tick all that apply.

Deafness or partial hearing loss  
 Blindness or partial sight loss  
 Learning disability (for example, Down's Syndrome)  
 Learning difficulty (for example, dyslexia)  
 Developmental disorder (for example, Autistic Spectrum Disorder or Asperger's Syndrome)  
 Physical disability  
 Mental health condition  
 Long-term illness, disease or condition  
 Other condition, please write in

or  
 No condition

**21** Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?  
 ♦ Include problems related to old age.

Yes, limited a lot  
 Yes, limited a little  
 No

**22** If you are aged 16 or over → **Go to 23**  
 If you are aged 15 or under → **Go to 38**

**23** Which of these qualifications do you have?  
 ♦ Tick all that apply.

O Grade, Standard Grade, Access 3 Cluster, Intermediate 1 or 2, GCSE, CSE, Senior Certificate or equivalent  
 SCE Higher Grade, Higher, Advanced Higher, CSYS, A Level, AS Level, Advanced Senior Certificate or equivalent  
 GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent  
 GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent  
 HNC, HND, SVQ level 4 or equivalent  
 Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  
 Professional qualifications (for example, teaching, nursing, accountancy)  
 Other school qualifications not already mentioned (including foreign qualifications)  
 Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)  
 Other Higher Education qualifications not already mentioned (including foreign qualifications)  
 No qualifications

**24** Last week were you:  
 ♦ Tick all that apply.  
 ♦ Include any paid work, including casual or temporary work, even if only for one hour.

working as an employee? → **Go to 30**  
 on a Government sponsored training scheme? → **Go to 30**  
 self-employed or freelance? → **Go to 30**  
 working paid or unpaid for your own or your family's business? → **Go to 30**  
 away from work ill, on maternity leave, on holiday or temporarily laid off? → **Go to 30**  
 doing any other kind of paid work? → **Go to 30**  
 none of the above



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**Person 4 - Individual questions continued**

**25** Were you actively looking for any kind of paid work during the last 4 weeks?  
 Yes     No

**26** If a job had been available last week, could you have started it within 2 weeks?  
 Yes     No

**27** Last week, were you waiting to start a job already obtained?  
 Yes     No

**28** Last week were you:  
 ♦ Tick all that apply.  
 retired (whether receiving a pension or not)?  
 a student?  
 looking after home or family?  
 long-term sick or disabled?  
 other

**29** Have you ever worked?  
 Yes, please write in the year you last worked  
     → **Go to 30**  
 No, have never worked → **Go to 38**

**30** Answer the remaining questions for your main job or, if not working, your last main job.  
 ♦ Your main job is the job in which you usually work (worked) the most hours.

**31** In your main job, are (were) you:  
 an employee?  
 self-employed or freelance without employees?  
 self-employed with employees?

**32** What is (was) your full and specific job title?  
 ♦ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER.  
 ♦ Do not state your grade or pay band.

**33** Briefly describe what you do (did) in your main job.

**34** Do (did) you supervise any employees?  
 ♦ Supervision involves overseeing the work of other employees on a day-to-day basis.  
 Yes     No

**35** How many hours (to the nearest full hour) a week do (did) you usually work in your main job?  
 ♦ Include paid and unpaid overtime.  
        
 Number of hours worked in a typical week

**36** At your workplace, what is (was) the main activity of your employer or business?  
 ♦ For example, ARMED FORCES, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING, DOCTOR'S SURGERY.  
 ♦ If you are (were) a civil servant, please write GOVERNMENT.  
 ♦ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department within the local authority.

**37** In your main job, what is (was) the name of the organisation you work (worked) for?  
 ♦ If you are (were) self-employed in your own organisation, please write in the business name.  
  
  
  
 No organisation, for example, self-employed, freelance, or work (worked) for a private individual.

**38** There are no more questions for Person 4.  
 ♦ If there are no more people in your household, please leave the following pages blank. Otherwise go to questions for Person 5.  
 ♦ If you included anyone at question **H5**, remember to record their details on the back page.  
 ♦ Remember to sign the declaration on page 1.





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**Person 5 - Individual questions**

**1** What is your name? (Person 5 at H3 on page 4)  
 First name  
  
 Last name

**2** What is your sex?  
 Male  Female

**3** What is your date of birth?  
 Day   Month   Year

**4** On the 27 March 2011, what is your legal marital or same-sex civil partnership status?  
 Never married and never registered a same-sex civil partnership  
 Married  
 Separated, but still legally married  
 Divorced  
 Widowed  
 In a registered same-sex civil partnership  
 Separated, but still legally in a same-sex civil partnership  
 Formerly in a same-sex civil partnership which is now legally dissolved  
 Surviving partner from a same-sex civil partnership

**5** Are you a schoolchild or student in full-time education?  
 Yes  
 No → Go to **7**

**6** During term-time, do you live:  
 at the address on the front of this questionnaire?  
 at another address? → Go to **38**

**7** What is your country of birth?  
 Scotland → Go to **9**  
 England → Go to **9**  
 Wales → Go to **9**  
 Northern Ireland → Go to **9**  
 Republic of Ireland  
 Elsewhere, please write in the current name of the country

**8** If you were not born in the United Kingdom, when did you most recently arrive to live here?  
 ♦ Do not count short visits away from the UK.  
 Month   Year    
 Postcode

**9** Do you look after, or give any help or support to family members, friends, neighbours or others because of either:  
 • long-term physical / mental ill-health / disability; or  
 • problems related to old age?  
 ♦ Do not count anything you do as part of your paid employment.  
 No  
 Yes, 1 - 19 hours a week  
 Yes, 20 - 34 hours a week  
 Yes, 35 - 49 hours a week  
 Yes, 50 or more hours a week

**10** One year ago, what was your usual address?  
 ♦ If you had no usual address one year ago, state the address where you were staying.  
 Same as Person 1  
 The address on the front of this questionnaire  
 Student term-time / boarding school address in the UK, please write in below  
 Another address in the UK, please write in  
  
  
  
  
  
 Postcode   
 Outside the UK, please write in country

**11** What address do you travel to for your main job or course of study (including school)?  
 ♦ Answer for the place where you spend the most time.  
 ♦ If you report to a depot, please write in the depot address.  
 Not currently working or studying → Go to **13**  
 Work or study mainly at, or from, home → Go to **13**  
 No fixed place  
 Work on an offshore installation - please use the address panel below to write in where you travel offshore from, for example "ABERDEEN HARBOUR"  
 The address below, please write in  
  
  
  
  
  
 Postcode



**Status:** This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

**Person 5 - Individual questions continued**

**12** How do you usually travel to your main place of work or study (including school)?

- ◆ Tick one box only.
- ◆ Tick the box for the longest part, by distance, of your usual journey to work or study.
- Driving a car or van
- Passenger in a car or van
- On foot
- Bus, minibus or coach
- Train
- Underground, subway, metro, light rail or tram
- Taxi
- Bicycle
- Motorcycle, scooter or moped
- Other

**13** What religion, religious denomination or body do you belong to?

- ◆ This question is voluntary.
- None
- Church of Scotland
- Roman Catholic
- Other Christian, please write in below
- Muslim
- Buddhist
- Sikh
- Jewish
- Hindu
- Another religion or body, please write in

**14** What do you feel is your national identity?

- ◆ Tick **ALL** that apply.
- Scottish
- English
- Welsh
- Northern Irish
- British
- Other, please write in

**15** What is your ethnic group?

◆ Choose **ONE** section from A to F, then tick **ONE** box which **best describes** your ethnic group or background.

**A White**

- Scottish
- Other British
- Irish
- Gypsy / Traveller
- Polish
- Other white ethnic group, please write in

**B Mixed or multiple ethnic groups**

- Any mixed or multiple ethnic groups, please write in

**C Asian, Asian Scottish or Asian British**

- Pakistani, Pakistani Scottish or Pakistani British
- Indian, Indian Scottish or Indian British
- Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Chinese, Chinese Scottish or Chinese British
- Other, please write in

**D African**

- African, African Scottish or African British
- Other, please write in

**E Caribbean or Black**

- Caribbean, Caribbean Scottish or Caribbean British
- Black, Black Scottish or Black British
- Other, please write in

**F Other ethnic group**

- Arab, Arab Scottish or Arab British
- Other, please write in





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**Person 5 - Individual questions continued**

**25** Were you actively looking for any kind of paid work during the last 4 weeks?  
 Yes  No

**26** If a job had been available last week, could you have started it within 2 weeks?  
 Yes  No

**27** Last week, were you waiting to start a job already obtained?  
 Yes  No

**28** Last week were you:  
◆ Tick all that apply.  
 retired (whether receiving a pension or not)?  
 a student?  
 looking after home or family?  
 long-term sick or disabled?  
 other

**29** Have you ever worked?  
 Yes, please write in the year you last worked  
      → Go to **30**  
 No, have never worked → Go to **38**

**30** Answer the remaining questions for your main job or, if not working, your last main job.  
◆ Your main job is the job in which you usually work (worked) the most hours.

**31** In your main job, are (were) you:  
 an employee?  
 self-employed or freelance without employees?  
 self-employed with employees?

**32** What is (was) your full and specific job title?  
◆ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER.  
◆ Do not state your grade or pay band.

**33** Briefly describe what you do (did) in your main job.

**34** Do (did) you supervise any employees?  
◆ Supervision involves overseeing the work of other employees on a day-to-day basis.  
 Yes  No

**35** How many hours (to the nearest full hour) a week do (did) you usually work in your main job?  
◆ Include paid and unpaid overtime.  
  Number of hours worked in a typical week

**36** At your workplace, what is (was) the main activity of your employer or business?  
◆ For example, ARMED FORCES, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING, DOCTOR'S SURGERY.  
◆ If you are (were) a civil servant, please write GOVERNMENT.  
◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department within the local authority.

**37** In your main job, what is (was) the name of the organisation you work (worked) for?  
◆ If you are (were) self-employed in your own organisation, please write in the business name.  
  
  
  
 No organisation, for example, self-employed, freelance, or work (worked) for a private individual.

**38** There are no more questions for Person 5.  
◆ If there are more people in your household, contact the Helpline on 0300 123 1702 to ask for a Continuation Questionnaire.  
◆ If you included anyone at question **H5**, remember to record their details on the back page.  
◆ Remember to sign the declaration on page 1.








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Communal Establishment Questionnaire <sup>CE</sup>



# 27 March 2011

Official Use

CD      ED      Line Number

If there is a **mistake** in the printed address, please write the correct address below

Establishment name / number

Street / Town / City

Postcode

### Why the census matters

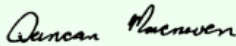
The census is the official count of every person and household in Scotland. It is held every 10 years and helps to plan our future public services.

Please fill in this questionnaire on, or around, Sunday 27 March. It shouldn't take long.

You have a legal duty to fill in this questionnaire. If you don't, or if you supply false information, you may be fined up to £1,000.

All personal information is protected by law and we will keep it confidential for 100 years.

Thank you for helping to shape Scotland's future.



Duncan Macniven  
**Registrar General for Scotland**

### What you have to do




- Answer the establishment questions on page 2.
- Use the definitions in the Guidance Notes to distinguish between 'usual residents' and 'visitors' in this establishment.
- Record the number of 'visitors' in the box below.
- Issue and collect Individual Questionnaires for all 'usual residents' and record the number issued and collected in the boxes below.
- Sign the declaration below and give all the completed questionnaires (including this one) to the enumerator when they return.

Number of questionnaires issued

Number of questionnaires collected

Number of 'visitors'

### Need help?

-  [www.scotlandscensus.gov.uk](http://www.scotlandscensus.gov.uk)
-  **Helpline 0300 123 1702**
-  **Textphone 18001 0300 123 1703**

### Declaration

I have filled in this questionnaire fully and accurately, as far as I know.

Signature

Date



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**Establishment questions**

This questionnaire will be scanned by a computer. To make sure we record your answers correctly, please:

- use black or blue ink
- tick your answers within the box like this:  Correct any mistakes like this:

**1 What is the nature of this establishment?**

◆ Tick one box only.

**Medical and care**

- General hospital
- Psychiatric hospital / psychiatric home
- Other hospital
- Care home without nursing
- Care home with nursing
- Sheltered housing
- Children’s home (including secure units)
- Other medical and care establishment

**Education**

- School
- Halls of residence / student accommodation
- Other educational establishment

**Armed Forces**

- Armed Forces base (including ships)
- Other Armed Forces establishment

**Detention**

- Prison or Young Offenders’ Institution
- Immigration Removal Centre
- Other detention establishment

**Travel**

- Hotel, guest house, B&B, youth hostel
- Leisure / holiday establishment
- Other travel establishment

**Hostel or shelter**

- Hostel or shelter for the homeless
- Other hostel or shelter establishment

**Other**

- Religious establishment
- Staff / worker accommodation only
- Other establishment

**2 Which groups does this establishment cater for?**

◆ Tick all that apply.

- Physical disability
- Learning disability
- Psychiatric illness
- Terminal illness
- Chronic illness care
- Acute illness care
- Respite, convalescent or post-operative care
- Substance misuse
- Older people
- School children
- University / college students
- Armed Forces personnel
- Prisoners / offenders
- Asylum seekers
- Paying guests
- Homeless people
- Nurses / doctors
- Seasonal / temporary workers
- Staff
- Other

**3 Who is responsible for the management of this establishment?**

◆ Tick one box only.


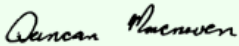



- NHS
- Local Authority
- Government department / agency
- Housing Association / Registered Social Landlord
- Charity / voluntary organisation
- Private owner(s) / company
- Other

**Enumerator use only**

- Persons sleeping rough



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			Individual Questionnaire <sup>CI</sup>	
			<b>27 March 2011</b>	
Official Use	CD	ED	Line Number	
	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<div style="border: 1px solid black; height: 100px; width: 100%;"></div>			If there is a <b>mistake</b> in the printed address, please write the correct address below	
			Establishment name / number	
			Street / Town / City	
			Postcode	
<b>Why the census matters</b>			<b>Please fill in this questionnaire</b> on, or around, 27 March 2011.	
<p>The census is the official count of every person and household in Scotland. It is held every 10 years and helps to plan our future public services.</p> <p>Please fill in this questionnaire on, or around, Sunday 27 March. It shouldn't take long.</p> <p>You have a legal duty to fill in this questionnaire. If you don't, or if you supply false information, you may be fined up to £1,000.</p> <p>Your personal information is protected by law and we will keep it confidential for 100 years.</p> <p>Thank you for helping to shape Scotland's future.</p>			<div style="border: 2px solid green; padding: 5px; display: inline-block;"><b>Start here</b></div>	
 Duncan Macniven <b>Registrar General for Scotland</b>			If you are filling in this questionnaire for <b>someone else</b> , please make sure that you record answers for them at:	
<b>Need help?</b>			<ul style="list-style-type: none"><li>• question <b>R1</b> below and</li><li>• questions <b>1</b> to <b>38</b> on pages 3 to 6</li></ul>	
<ul style="list-style-type: none"><li> <a href="http://www.scotlandscensus.gov.uk">www.scotlandscensus.gov.uk</a></li><li> <b>Helpline 0300 123 1702</b></li><li> <b>Textphone 18001 0300 123 1703</b></li></ul>			<b>R1 Do you stay here because you are:</b>	
			<ul style="list-style-type: none"><li><input type="checkbox"/> a resident (for example, patient, student, member of Armed Forces, inmate)?</li><li><input type="checkbox"/> a member of staff or the owner?</li><li><input type="checkbox"/> a family member / partner of a member of staff or the owner?</li></ul>	
			<b>Declaration</b>	
			I have filled in this questionnaire fully and accurately, as far as I know.	
			Signature <input type="text"/>	
			Date <input type="text"/>	



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## Important guidance - before you start

### What you have to do

- ◆ Fill in question **R1** on page 1 of this questionnaire.
- ◆ Fill in questions **1** to **38** on pages 3 to 6 of this questionnaire.
- ◆ Sign the declaration on page 1 and then put your questionnaire in the envelope provided.
- ◆ Seal the envelope and give it to the establishment manager or person in charge of collecting the questionnaires.

**Remember:** if you are filling in this questionnaire for **someone else**, please make sure that you record answers for them at question **R1** and questions **1** to **38**.

### How to fill in this questionnaire

This questionnaire will be scanned by a computer. To make sure we record your answers correctly, follow the instructions below.

Please:

- use black or blue ink
- tick your answers **within** the box like this:
- print your answers, in English, within the box like this: 

S	M	I	T	H		
---	---	---	---	---	--	--

 Use capital letters - one per box
- correct any mistakes like this: 

■
---

 or 

S	M	■	I	T	H	
---	---	---	---	---	---	--
- continue on to the next line (if possible) like this, if a word will not fit on to one line: 

1	3	0		L	A	D	Y	W	E	L	L		C	R	E	S
C	E	N	T													

**DO NOT** draw a line through questions or pages. The computer may mistake this for an answer.







**Status:** This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

**Individual questions continued**

**12** How do you usually travel to your main place of work or study (including school)?

- ◆ Tick one box only.
- ◆ Tick the box for the longest part, by distance, of your usual journey to work or study.
- Driving a car or van
- Passenger in a car or van
- On foot
- Bus, minibus or coach
- Train
- Underground, subway, metro, light rail or tram
- Taxi
- Bicycle
- Motorcycle, scooter or moped
- Other

**13** What religion, religious denomination or body do you belong to?

- ◆ This question is voluntary.
- None
- Church of Scotland
- Roman Catholic
- Other Christian, please write in below
- Muslim
- Buddhist
- Sikh
- Jewish
- Hindu
- Another religion or body, please write in

**14** What do you feel is your national identity?

- ◆ Tick **ALL** that apply.
- Scottish
- English
- Welsh
- Northern Irish
- British
- Other, please write in

**15** What is your ethnic group?

- ◆ Choose **ONE** section from A to F, then tick **ONE** box which **best describes** your ethnic group or background.

**A White**

- Scottish
- Other British
- Irish
- Gypsy / Traveller
- Polish
- Other white ethnic group, please write in

**B Mixed or multiple ethnic groups**

- Any mixed or multiple ethnic groups, please write in

**C Asian, Asian Scottish or Asian British**

- Pakistani, Pakistani Scottish or Pakistani British
- Indian, Indian Scottish or Indian British
- Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Chinese, Chinese Scottish or Chinese British
- Other, please write in

**D African**

- African, African Scottish or African British
- Other, please write in

**E Caribbean or Black**

- Caribbean, Caribbean Scottish or Caribbean British
- Black, Black Scottish or Black British
- Other, please write in

**F Other ethnic group**

- Arab, Arab Scottish or Arab British
- Other, please write in





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**Individual questions continued**

**25** Were you actively looking for any kind of paid work during the last 4 weeks?  
 Yes     No

**26** If a job had been available last week, could you have started it within 2 weeks?  
 Yes     No

**27** Last week, were you waiting to start a job already obtained?  
 Yes     No

**28** Last week were you:  
 ♦ Tick all that apply.  
 retired (whether receiving a pension or not)?  
 a student?  
 looking after home or family?  
 long-term sick or disabled?  
 other

**29** Have you ever worked?  
 Yes, please write in the year you last worked  
 No, have never worked

**30** Answer the remaining questions for your main job or, if not working, your last main job.  
 ♦ Your main job is the job in which you usually work (worked) the most hours.

**31** In your main job, are (were) you:  
 an employee?  
 self-employed or freelance without employees?  
 self-employed with employees?

**32** What is (was) your full and specific job title?  
 ♦ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER.  
 ♦ Do not state your grade or pay band.

**33** Briefly describe what you do (did) in your main job.

**34** Do (did) you supervise any employees?  
 ♦ Supervision involves overseeing the work of other employees on a day-to-day basis.  
 Yes     No

**35** How many hours (to the nearest full hour) a week do (did) you usually work in your main job?  
 ♦ Include paid and unpaid overtime.  
 Number of hours worked in a typical week


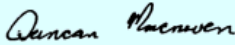



**36** At your workplace, what is (was) the main activity of your employer or business?  
 ♦ For example, ARMED FORCES, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING, DOCTOR'S SURGERY.  
 ♦ If you are (were) a civil servant, please write GOVERNMENT.  
 ♦ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department within the local authority.

**37** In your main job, what is (was) the name of the organisation you work (worked) for?  
 ♦ If you are (were) self-employed in your own organisation, please write in the business name.  
 No organisation, for example, self-employed, freelance, or work (worked) for a private individual.

**38** There are no more questions.  
 ♦ Sign the declaration on page 1 and then put your questionnaire in the envelope provided.  
 ♦ Seal the envelope and give it to the establishment manager or person in charge of collecting the questionnaires.



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				Individual Questionnaire <sup>HI</sup>	
				<b>27 March 2011</b>	
Official Use	CD	ED	Line Number	<b>This section to be filled in by the Census Enumerator</b>	
	<input type="text"/>	<input type="text"/>	<input type="text"/>		
House name / number	<input type="text"/>				
Street / Town / City	<input type="text"/>				
	<input type="text"/>				
	Postcode				
	<input type="text"/>	<input type="text"/>	<input type="text"/>		
<b>Why the census matters</b>				<b>Please fill in this questionnaire</b>	
<p>The census is the official count of every person and household in Scotland. It is held every 10 years and helps to plan our future public services.</p> <p>Please fill in this questionnaire on, or around, Sunday 27 March. It shouldn't take long.</p> <p>You have a legal duty to fill in this questionnaire. If you don't, or if you supply false information, you may be fined up to £1,000.</p> <p>Your personal information is protected by law and we will keep it confidential for 100 years.</p> <p>Thank you for helping to shape Scotland's future.</p>				<p>on, or around, 27 March 2011.</p> <p>Post it back using the pre-paid envelope provided.</p> <div style="text-align: center; border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"><b>Start here</b></div> <p>Please make sure you are listed as a household member either on:</p> <ul style="list-style-type: none"><li>• a Household Questionnaire - at question <b>H3</b> on page 4</li></ul> <p>or</p> <ul style="list-style-type: none"><li>• a Continuation Questionnaire - at question <b>C1</b> on page 1</li></ul>	
 Duncan Macniven <b>Registrar General for Scotland</b>				<b>Q1</b> Copy your person number, as given in <b>H3</b> or <b>C1</b> , here: <input type="text"/> Person number	
<b>Need help?</b>				<b>Declaration</b>	
<p> <b>www.scotlandscensus.gov.uk</b></p> <p> <b>Helpline 0300 123 1702</b></p> <p> <b>Textphone 18001 0300 123 1703</b></p>				<p>I have filled in this questionnaire fully and accurately, as far as I know.</p> <p>Signature <input type="text"/></p> <p>Date <input type="text"/></p>	



**Status:** This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

## Important guidance - before you start

### What you have to do

- ◆ Please check that the household address recorded on page 1 of this questionnaire is correct. If it is not correct, please contact the Helpline on 0300 123 1702.
- ◆ Make sure you are listed as a household member at either:
  - question **H3** on page 4 of a Household Questionnaire; or
  - question **C1** on page 1 of a Continuation Questionnaire.
- ◆ Copy your person number, from **H3** or **C1**, to **Q1** on page 1 of this questionnaire.
- ◆ Fill in questions **1** to **38** on pages 3 to 6 of this questionnaire.
- ◆ Sign the declaration on page 1 of this questionnaire and post it back using the pre-paid envelope provided.

### How to fill in this questionnaire

This questionnaire will be scanned by a computer. To make sure we record your answers correctly, follow the instructions below.

Please:

- use black or blue ink
- tick your answers **within** the box like this:
- print your answers, in English, within 

S	M	I	T	H		
---	---	---	---	---	--	--

 Use capital letters - one per box the box like this:
- correct any mistakes like this:  or 

S	M		I	T	H	
---	---	--	---	---	---	--
- continue on to the next line (if possible) like 

1	3	0		L	A	D	Y	W	E	L	L		C	R	E	S
				C	E	N	T									

  
this, if a word will not fit on to one line:

**DO NOT** draw a line through questions or pages. The computer may mistake this for an answer.







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**Individual questions continued**

**12** How do you usually travel to your main place of work or study (including school)?

- ◆ Tick one box only.
- ◆ Tick the box for the longest part, by distance, of your usual journey to work or study.
- Driving a car or van
- Passenger in a car or van
- On foot
- Bus, minibus or coach
- Train
- Underground, subway, metro, light rail or tram
- Taxi
- Bicycle
- Motorcycle, scooter or moped
- Other

**13** What religion, religious denomination or body do you belong to?

- ◆ This question is voluntary.
- None
- Church of Scotland
- Roman Catholic
- Other Christian, please write in below
- Muslim
- Buddhist
- Sikh
- Jewish
- Hindu
- Another religion or body, please write in

**14** What do you feel is your national identity?

- ◆ Tick **ALL** that apply.
- Scottish
- English
- Welsh
- Northern Irish
- British
- Other, please write in

**15** What is your ethnic group?

- ◆ Choose **ONE** section from A to F, then tick **ONE** box which **best describes** your ethnic group or background.

**A White**

- Scottish
- Other British
- Irish
- Gypsy / Traveller
- Polish
- Other white ethnic group, please write in

**B Mixed or multiple ethnic groups**

- Any mixed or multiple ethnic groups, please write in

**C Asian, Asian Scottish or Asian British**

- Pakistani, Pakistani Scottish or Pakistani British
- Indian, Indian Scottish or Indian British
- Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Chinese, Chinese Scottish or Chinese British
- Other, please write in

**D African**

- African, African Scottish or African British
- Other, please write in

**E Caribbean or Black**

- Caribbean, Caribbean Scottish or Caribbean British
- Black, Black Scottish or Black British
- Other, please write in

**F Other ethnic group**

- Arab, Arab Scottish or Arab British
- Other, please write in



