SCOTTISH STATUTORY INSTRUMENTS

2020 No. 143

CENSUS

The Census (Scotland) Regulations 2020

Made - - - - 5th May 2020 Laid before the Scottish Parliament - - - 7th May 2020 Coming into force - - 16th June 2020

The Scottish Ministers make the following Regulations in exercise of the powers conferred by section 3(1) of the Census Act 1920(1) and all other powers enabling them to do so.

Citation, commencement and extent

- **1.**—(1) These Regulations may be cited as the Census (Scotland) Regulations 2020 and come into force on 16 June 2020.
 - (2) They extend to Scotland only.

Interpretation

2.—(1) In these Regulations—

"the Census Order" means the Census (Scotland) Order 2020(2),

"the Registrar General" means the Registrar General of Births, Deaths and Marriages for Scotland.

Methods of making a return

- **3.**—(1) A return mentioned in article 5(1) or (2) of the Census Order is to be made by submitting—
 - (a) an A1 submission,
 - (b) an A2 submission, or
 - (c) an A3 submission.
 - (2) A return mentioned in article 5(9) or (11) of the Census Order is to be made by submitting—

^{(1) 1920} c.41. Section 3(1) is relevantly amended by the Statute Law (Repeals) Act 1993 (c.50), schedule 1, Part 16, paragraph 1 and the Statistics and Registration Service Act 2007 (c.18), schedule 1, paragraph 3(2) and (3).

⁽²⁾ S.S.I. 2020/76.

- (a) an A1 submission or an A3 submission, each as modified by paragraph (3), or
- (b) an A2 submission as modified by paragraph (4).
- (3) In the case of an A1 submission or an A3 submission those modifications are that—
 - (a) in column (1) of the thirteenth row of the table set out in schedule 1 (electronic questionnaire household questions) the words "only this household can use" are to be read as "is only for use with this accommodation",
 - (b) in column (1) of the fourteenth row of the table set out in schedule 1 the words "only by this household" are to be read as "in this accommodation".
- (4) In the case of an A2 submission those modifications are that—
 - (a) in the section titled "Declaration" on the first page of the questionnaire the word "Signature(s)" is to be read as "Sign and print full name",
 - (b) the questionnaire is to be read as if questions H1, H2, H6, H11 to H15, and "individual questions person 1" to "individual questions person 5" were omitted,
 - (c) in question H8 of the questionnaire the words "only this household can use" are to be read as "is only for use with this accommodation",
 - (d) in question H9 of the questionnaire the words "only by this household" are to be read as "in this accommodation".
- (5) In paragraph (4) "the questionnaire" means the questionnaire set out in schedule 5 (paper household questionnaire).
 - (6) A return mentioned in article 5(5)(b) of the Census Order is to be made by submitting—
 - (a) a B1 submission,
 - (b) a B2 submission, or
 - (c) a B3 submission.
 - (7) A return mentioned in article 5(6) of the Census Order is to be made by submitting—
 - (a) a C1 submission,
 - (b) a C2 submission, or
 - (c) a C3 submission.
 - (8) A return mentioned in article 5(7) or (8) of the Census Order is to be made by submitting—
 - (a) a D1 submission,
 - (b) a D2 submission, or
 - (c) a D3 submission.
- (9) But sub-paragraphs (a) and (c) of paragraph (8) do not apply in relation to a person in Group V (within the meaning of the Census Order).
- (10) A person submitting an A1 submission, an A3 submission, a B1 submission, a B3 submission, a C1 submission, a C3 submission, a D1 submission, or a D3 submission in accordance with this regulation must comply with the instructions in column (2) of the table set out in (as the case may be) schedule 1, 2, 3, or 4.
- (11) A person submitting an A2 submission, a B2 submission, a C2 submission, or a D2 submission in accordance with this regulation must comply with the instructions contained in the questionnaire set out in (as the case may be) schedule 5, 6, 7, or 8.
- (12) A submission is submitted in accordance with this regulation, and the requirement to make a return under the Census Order is discharged, when the submission—
 - (a) states the particulars required by article 6 of the Census Order,

- (b) records the declaration of the person making the return as to the accuracy of the return, and
- (c) is received by the Registrar General.
- (13) A submission under any of paragraphs (1), (2), and (6) to (8) must be submitted to the Registrar General by 2 May 2021 or as soon thereafter as is reasonably practicable.
- (14) For the purpose of making it easier for a person submitting an A1 submission, an A3 submission, a B1 submission, a B3 submission, a C1 submission, a C3 submission, a D1 submission, or a D3 submission to understand the questions, instructions, and response options contained in the table set out in (as the case may be) schedule 1, 2, 3, or 4, the Registrar General may do either or both of the following—
 - (a) modify any of the questions, instructions, and response options set out in schedule 1, 2, 3, or 4,
 - (b) translate the questions, instructions and response options set out in schedule 1, 2, 3, or 4.
- (15) The Registrar General may modify a questionnaire set out in (as the case may be) schedule 5, 6, 7, or 8 for the purpose of making it easier for a person submitting an A2 submission, a B2 submission, a C2 submission, or a D2 submission to understand or use that questionnaire.
 - (16) In this regulation—
 - "A1 submission", means a submission made using an electronic system provided by the Registrar General responding to the relevant questions, instructions, and response options set out in schedule 1 and schedule 2 (electronic questionnaire household individual questions),
 - "A2 submission" means a submission made using the questionnaire set out in schedule 5 and, if relevant, a continuation questionnaire, and returned to the Registrar General using a prepaid, pre-addressed envelope provided by the Registrar General,
 - "A3 submission" means a submission made by telephone by providing responses to a telephone operator to the relevant questions, instructions, and response options set out in schedule 1 and schedule 2.
 - "B1 submission", means a submission made using an electronic system provided by the Registrar General, responding to the relevant questions, instructions, and response options set out in schedule 2.
 - "B2 submission" means a submission made using the questionnaire set out in schedule 6 (paper household individual questionnaire) and returned to the Registrar General using a pre-paid, pre-addressed envelope provided by the Registrar General,
 - "B3 submission" means a submission made by telephone by providing responses to a telephone operator to the relevant questions, instructions, and response options set out in schedule 2,
 - "C1 submission" means a submission made using an electronic system provided by the Registrar General, responding to the questions, instructions, and response options set out in schedule 3 (electronic questionnaire communal establishment),
 - "C2 submission" means a submission made using the questionnaire set out in schedule 7 (paper communal establishment questionnaire),
 - "C3 submission" means a submission made by telephone by providing responses to a telephone operator to the questions, instructions, and response options set out in the table in schedule 3,
 - "continuation questionnaire" means a booklet provided by the Registrar General to enable a return mentioned in article 5(2) of the Census Order to be made with respect to more than five persons in Group I (within the meaning of the Census Order),
 - "D1 submission", means a submission made using an electronic system provided by the Registrar General, responding to the relevant questions, instructions, and response options set out in schedule 4 (electronic questionnaire communal establishment individual questions),

"D2 submission" means a submission made using the questionnaire set out in schedule 8 (paper communal establishment individual questionnaire),

"D3 submission" means a submission made by telephone by providing responses to a telephone operator to the relevant questions, instructions, and response options set out in the table in schedule 4,

"relevant questions, instructions and response options" in relation to a numbered schedule means the questions in column (1) of the table in that schedule to which a person making a return is required to respond so as to state the particulars required by article 6 of the Census Order, together with the corresponding instructions in column (2) and response options in column (3) of that table,

"telephone operator" means a person employed for the purposes of the census directed to be taken by the Census Order to, among other things, record, in an electronic system provided by the Registrar General, the responses of a person making an A3 submission, a B3 submission, a C3 submission or a D3 submission.

Duties on persons in charge of communal establishments

- **4.**—(1) This regulation applies where a person ("P") is required to make a return under article 5(6) of the Census Order and has received access codes or paper questionnaires from the Registrar General in respect of returns to be made under article 5(7) of the Census Order.
- (2) P must issue an access code or paper questionnaire to every person within the premises required to make a return by article 5(7) of the Census Order.
 - (3) Paragraph (2) does not apply in respect of any person who appears to P to be—
 - (a) aged under 16 years, or
 - (b) for any other reason, incapable of making a return.
- (4) Where P has issued paper questionnaires under paragraph (2), P must collect the completed questionnaires and deliver them to the Registrar General by 2 May 2021 or as soon thereafter as is reasonably practicable.
 - (5) In this regulation—

"access code" means a code provided by the Registrar General for use by a person required to make a return under article 5(7) of the Census Order, other than a person within Group V (within the meaning of the Census Order), to access the electronic system provided by the Registrar General containing the questions, instructions, and response options set out in schedule 4.

"completed questionnaire" means a paper questionnaire which states the particulars required to be specified by article 6(1) and (5) of the Census Order in respect of the person making the return.

"paper questionnaire" means the questionnaire set out in schedule 8.

Giving of information

- **5.**—(1) Where a person ("A") is required by article 5(2), (6), (7), (8), (9), or (11) of the Census Order to make a return in respect of another person ("B"), B must give to A such information as A may reasonably require to make that return.
- (2) But A may not require B to give information with respect to B's age or sex for the purposes of A stating the particulars specified in paragraph 2 of schedule 3 of the Census Order in a return mentioned in article 5(6) of the Census Order.

Misuse of information

- **6.** A person to whom information is given pursuant to the Census Order or these Regulations must not, other than for the purposes of the Census Act 1920, the Census Order, or these Regulations—
 - (a) use that information,
 - (b) publish it, or
 - (c) communicate it to any other person.

Revocation

- 7. The following instruments are revoked—
 - (a) the Census (Scotland) Regulations 2010(3), and
 - (b) the Census (Scotland) Amendment Regulations 2010(4).

St Andrew's House, Edinburgh 5th May 2020

KATE FORBES A member of the Scottish Government

⁽³⁾ S.S.I. 2010/211 as amended by S.S.I. 2010/215.

⁽⁴⁾ S.S.I. 2010/215.

SCHEDULE 1

Regulation 3(16)

Electronic Questionnaire - Household Questions

(1)	(2)	(3)
Question	Instruction for respondent	Response options
What is your name?	The respondent is required to state their first and last names in the boxes provided.	
Do you usually live at [address]?	The respondent is required to select one option only.	Yes, this is my permanent or family home
		No, I don't usually live here
Does anyone	The respondent is required to	Yes
usually live at [address]?	include: ✓ Family members including partners, children and babies born on or before 21 March 2021. ✓ Students and/or schoolchildren who live away from home during term-time. ✓ Housemates/flatmates or lodgers. ✓ 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. The respondent is required to select one option only.	No, no-one counts this address as their permanent or family home
Does anyone else	The respondent is required to	Yes, I need to add someone else
usually live at	include:	
[address]?	✓ Family members including partners, children and babies born on or before 21 March 2021. ✓ Students and/or schoolchildren who live away from home during	No, there is no-one else living here
	term-time.	

Who do you need to add to [address]? Does anyone else usually live at [address] who is temporarily away?	 ✓ Housemates/flatmates or lodgers. ✓ 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. The respondent is required to select one option only. The respondent can add the first and last names of any other individuals who usually live at the address here. The respondent is not required to add anyone who is temporarily away if they are listed under this question. The respondent is required to include: ✓ 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 temporarily away from home on the night of 21 March 2021. The respondent is required to select one option only. 	Yes, I need to add someone else No, there is no-one else living here
Who do you need to add to [address] who is temporarily away?	The respondent can add the first and last names of anyone who usually lives at the address but who are temporarily away here.	

Is there anyone	The respondent is required to	☐ Yes, I need to add someone else
staying at	include:	
[address] on the night of 21 March 2021 whose permanent or family home is elsewhere?	 ✓ 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. 	□ No, there is no-one else staying here on the night of 21 March 2021
	People here on holiday. The respondent is required to	
	select one option only.	
Who is staying on	The respondent can add the	
the night of 21 March 2021 at	first and last names of anyone whose permanent or family	
[address] whose	home is elsewhere but who is	
permanent or	staying at the address on the	
family home is elsewhere?	night of 21 March 2021 here.	
What are [person	The respondent is required to	Person A is—
A's] relationships	select an option for each	the husband or wife of,
to the following	relationship.	the registered civil partner of,
people?		• the partner of,
		• the son or daughter of,
		a step-child of,
		• brother or sister to,
		step-brother or step-sister to,
		• mother or father of,
		step-mother or step-father of,
		• the grandparent of
		• the grandparent of,
		another relation to (including in- laws),
		• unrelated to (including foster child)
		Person B

What type of accommodation is	The respondent is required to select one option only.	A wh	nole house or bungalow that is:
this?	select one option only.		detached
			semi-detached
			terraced (including end-terrace)
		A fla	t, 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 mo	obile or temporary structure:
			a caravan or other mobile or temporary structure
Are all the rooms in this	The respondent is required to select one option only.		Yes
accommodation behind a door that	second of the same.		No
only this household can use?			
How many	The respondent is required to		
bedrooms are available for use	include all rooms built or converted for use as bedrooms.		
only by this household?			
What type of	Central heating is a central		No central heating
central heating does this	system that generates heat for multiple rooms.		or Mains Gas
accommodation have?			Other gas (including liquid
nave:		╵	petroleum gas and biogas)
If central heating is available, the respondent should select	the respondent should select		Electric (including storage heating)
	the option whether they use it or not.		Oil
	The respondent is required to select all options that apply.		Solid fuel (excluding wood)

		Wood or biomass (logs, pellets, chippings)
		Other renewable energy source (including electric and air heat
		pump systems) District or communal heat system
		Other
Does your household own or	The respondent is required to select one option only.	Owns with a mortgage or loan
rent this	select one option only.	Owns outright
accommodation?		Owns with shared equity (for example, LIFT, Help-to-Buy)
		Rents (with or without housing benefit)
		Part owns and part rents (shared
		ownership) Lives here rent free
Who is your	The respondent is required to	Council (Local Authority) or
landlord?	select one option only.	Housing Association / Registered Social Landlord
		Private landlord or letting agency
		Other
In total, how many	The respondent is required to	None
cars or vans are owned, or are	include any company car(s) or van(s) available for private use.	1
available for use,	r	2
by members of this household?	The respondent is required to	3
uns nouschola:	select one option only.	4 or more
	If the respondent selects "4 or	
	more" they may enter the number in the box provided.	
What is [visitor	The respondent is required to	
A]'s date of birth?	use the format DD MM YYYY in the boxes provided.	
What is [visitor	The respondent is required to	Female
A]'s sex?	select one option only.	Male
What is [visitor	The respondent is required to	An address in the UK
A]'s usual UK address?	select one option only.	
	If [visitor A] has an address in the UK, the respondent should provide the address.	Outside the UK
	If [visitor A] lives outside the	
	UK, the respondent should provide the country in which	
	[visitor A] usually lives	

SCHEDULE 2

Regulation 3(16)

Electronic Questionnaire – Household Individual Questions

(1)	(2)	(3)	
Question	Instruction for respondent		
What is your date of birth?	The respondent is required to use the format DD MM YYYY in the boxes provided.		
What is your sex?	The respondent is required to select one option only.		Female Male
	A voluntary question about trans status or history will follow if the respondent is aged 16 or over.		
Do you consider yourself to be	This question is voluntary.		No
trans, or have a trans history?	Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth.		Yes, please describe your trans status (for example, non-binary, trans man, trans woman)
	If the respondent chooses to respond to this question they are required to select one option only.		
	If the respondent selects "yes" to this question they may type how they describe their trans status in the box provided, for example, non-binary, trans man, trans woman.		

On 21 March 2021, what is	The respondent is required to select one		Never married and never registered in a civil partnership
your legal marital or registered civil	option only.		Married
partnership status?			•
suus.			Separated, but still legally married
			Divorced
			Widowed
			Surviving partner from a civil partnership
Are you a schoolchild or	The respondent is required to select one		Yes
student in full- time education?	option only.		No
During term- time, do you live	The respondent is required to select one		Yes
at [address]?	option only.		No, during term-time I live at another address
Which of the following best	This question is voluntary.		Straight or Heterosexual
describes your	_		Gay or Lesbian
sexual orientation?	If the respondent chooses to respond to		Bisexual
thi:	this question they are required to select one option only.	Other sexual orientation	Other sexual orientation
	If the respondent selects "Other sexual orientation" they may type how they describe their sexual orientation in the box provided.		

What is your country of birth?	The respondent is required to select one option only. If the respondent selects "Elsewhere" they are required to provide the name of their country of birth in the box provided.	Scotland England Northern Ireland Wales Republic of Ireland Elsewhere
If you were not born in the United Kingdom, when did you most recently arrive to live here?	The respondent is not required to count short visits away from the UK. The respondent is required to use the format MM YYYY in the boxes provided. If the respondent had	[Address]
what was your usual address?	no usual address one year ago, they are required to enter the address where they were staying on 21 March 2020 in the box provided. The respondent is required to select one option only.	Student term-time / boarding school address in the UK Another address in the UK Outside the UK
Do you look after, or give any help or support to family members, friends, neighbours or others because of either:	The respondent is not required to count anything they do as part of their paid employment. The respondent is required to select one option only.	Yes, 1 to 19 hours a week Yes, 20 to 34 hours a week Yes, 35 to 49 hours a week Yes, 50 or more hours a week
 long term physical / mental ill- health / disability; or problems related to old age? 		

you understand, speak, read and write English?	required to select one option for each.	 Very well Well Not well Not at all
		I speak English—
		 Very well Well Not well Not at all
		I read English—
		Very well
		• Well
		Not wellNot at all
		1 Not at an
		I write English—
		Very well
		• Well
		Not well
Can you	The respondent is	Not at all Understand spoken Scottish Gaelic
understand,	required to select all	Speak Scottish Gaelic
speak, read and write Scottish	options that apply.	Read Scottish Gaelic
Gaelic?		Write Scottish Gaelic
		or
		No skills in Scottish Gaelic
Can you understand,	The respondent is required to select all	Understand spoken Scots
speak, read and	options that apply.	Speak Scots
write Scots?		Read Scots
		Write Scots
		or No skills in Scots
Can you use	The respondent is	Yes
British Sign Language (BSL)?	required to select one option only.	☐ No
What is your	The respondent is	English
main language?	required to select one option only.	Other (including BSL and Tactile BSL)
How is your	The respondent is	☐ Very good
health in general?	required to select one option only.	Good
	-F	☐ Fair
		Bad
		☐ Very bad

Do you have any of the following,	The respondent is required to select all	Deafness or partial hearing loss
which have lasted, or are	options that apply.	Blindness or partial sight loss
expected to last, at least 12 months?	If the respondent selects "Other condition" they may	Full or partial loss of voice or difficulty speaking: a condition that requires you to use equipment to speak
1	enter their condition in the box provided.	Learning disability: a condition that you have had since childhood that affects the way you learn, understand information and communicate
		Learning difficulty: a specific learning condition that affects the way you learn and process information
		Developmental disorder: a condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language
		Physical disability: a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying
		Mental health condition: a condition that affects your emotional, physical and mental wellbeing
		Long-term illness, disease or condition: a condition, not listed above, that you may have for life, which may be managed with treatment or medication
		Other condition
		or
		No condition
Are your day-to-	The respondent is	Yes, limited a lot
day activities limited because	required to include problems related to	Yes, limited a little
of a health problem or	old age.	No
disability which has lasted, or is expected to last, at least 12 months?	The respondent is required to select one option only.	

What passports	The respondent is		United Kingdom
do you hold?	required to select all options that apply.		Ireland
	If the respondent selects "Other" they		Other
	are required to enter		None
	their first passport and, if applicable,		
	their second passport in the boxes		
What raligion	provided. This question is		None
What religion, religious	voluntary.		None
denomination or body do you	If the respondent		Church of Scotland
belong to?	chooses to respond to this question they are		Roman Catholic
	required to select one option only.		Other Christian
	,		Muslim
	If the respondent selects "Other		Hindu
	Christian" they may		Buddhist
	enter their other Christian religion,		Sikh
	religious denomination or body		Jewish
	in the box provided.		Pagan
	If the respondent		Another religion or body
	selects "Muslim" they may enter their		
	Muslim		
	denomination or school in the box		
	provided.		
	If the respondent selects "Another		
	religion or body"		
	they may enter their religion, religious		
	denomination or body in the box provided.		
What do you feel	The respondent is	\Box	Scottish
is your national identity?	required to select all options that apply.		English
	If the respondent selects "Other" they are required to enter their national identity in the box provided.		Northern Irish
			Welsh
			British

		Other
ethnic group?	The respondent is required to select one option only.	White (including Gypsy, Traveller, Roma, Showman / Showwoman)
	The next question asks the respondent about their ethnic	Mixed or multiple ethnic groups (including any mixed or multiple ethnic groups)
group in more detail.	Asian, Scottish Asian or British Asian (including any Asian ethnic group)	
		African, Scottish African or British African (including any African ethnic group)
		Caribbean or Black (including Scottish Caribbean, Black Scottish)
		Other ethnic group (any other ethnic group, including Arab, Sikh, Jewish)
	The respondent is	Scottish
	required to select one option only.	Other British
group or	option only.	Irish
	If the respondent	Polish
	selects "Other" they	Gypsy / Traveller
	are required to enter their other white	Roma
	ethnic group in the	Showman / Showwoman
	box provided.	Other white ethnic group
mixed or multiple	The respondent is required to provide their ethnic groups.	
	The respondent is	Pakistani, Scottish Pakistani or British
	required to select one option only.	Pakistani
Asian or British	option only.	Indian, Scottish Indian or British Indian
Asian ethnic	If the record out	Bangladeshi, Scottish
	If the respondent selects "Other" they	Bangladeshi or British Bangladeshi
	are required to enter	Chinese, Scottish Chinese or British Chinese
	their other Asian ethnic group in the	Other
	box provided.	
What is your	The respondent is	
	required to enter their	
	African ethnic group or background (for	
group or	example, "Nigerian",	
	"Somali") in the box provided.	

What is your	The respondent is		
Caribbean or	required to enter their		
Black ethnic	Caribbean or Black		
group or	ethnic group or		
background?	background (for		
	example, "Scottish		
	Caribbean", "Black		
	Scottish") in the box		
XXII. Laborate Laborat	provided.		And Contide And on Delete And
Which one best	The respondent is	Ш	Arab, Scottish Arab or British Arab
describes your	required to select one	П	Other (for example, "Sikh", "Jewish")
other ethnic	option only.	⊔	oner (for example, oner , sewish)
group or	If the respondent		
background?	selects "Other" they		
	are required to enter		
	their other ethnic		
	group (for example,		
	"Sikh", "Jewish") in		
	the box provided.		
Which of these	The respondent is		O Grade, Standard Grade, National 3, 4 or 5,
school	required to select all		Intermediate 1 or 2, GCSE, CSE, or
(secondary or	options that apply.		equivalent
high school)			Higher Advenged Higher SCE Higher
qualifications do		Ш	Higher, Advanced Higher, SCE Higher
you have?			Grade, CSYS, A Level, AS Level or equivalent
			-
		📙	Other school qualifications not already
			mentioned (including foreign qualifications)
			or
		П	No school qualifications
Have you	The respondent is		No
completed a	required to select all	╽╙	or
Registered	options that apply.	П	Yes, trade or equivalent
Apprenticeship?			Yes, Foundation or equivalent
			Yes, Modern or equivalent
		╽Ш	res, Modern of equivalent
			Yes, Graduate or equivalent
Which of these	The respondent is		GSVQ Foundation or Intermediate, SVQ
Further	required to select all		level 1 or 2, SCOTVEC Module, City and
Education,	options that apply.		Guilds Craft or equivalent
Higher Education		П	GSVQ Advanced, SVQ level 3, ONC, OND,
or professional			SCOTVEC National Diploma, City and
qualifications do			Guilds Advanced Craft or equivalent
you have?			HNC, HND, SVQ level 4 or equivalent

		Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications) Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent
		Professional qualifications (for example, teaching, nursing, accountancy)
		Other Higher Education qualifications not already mentioned (including foreign qualifications) or
		No Further Education, Higher Education, or professional qualifications
Have you previously served	If the respondent is a current serving	No or
in the UK Armed Forces?	member they should only select 'No'.	Yes, previously served in Regular Armed Forces
	The respondent is required to select all options that apply.	Yes, previously served in Reserve Armed Forces
In the last seven days, were you	The respondent is required to include	Working as an employee
doing any of the	casual or temporary	Self-employed or freelance
following?	work, even if only for one hour.	Temporarily away from work ill, on holiday or temporarily laid off
	The respondent is	On maternity or paternity leave
required to select all options that apply.	Doing any other kind of paid work or	
	None of the above	
Which of the following	The respondent is required to select all	Retired (whether receiving a pension or not)
describes what options that apply.	Studying	
you were doing in the last seven		Looking after home or family
days?		Long-term sick or disabled
		Other
In the last four	The respondent is	Yes
weeks, were you actively looking for any kind of paid work?	required to select one option only.	No
If a job became available now,	The respondent is required to select one	Yes
could you start it within two weeks?	option only.	No

In the last seven days, were you waiting to start a job already accepted?	The respondent is required to select one option only.		Yes No
Have you ever done any paid work?	The respondent is required to select one option only.		Yes, in the last 12 months Yes, but not in the last 12 months No, have never worked
In your main job, what is (was) your employment status?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours. The respondent is required to select one option only.		Self-employed or freelance without employees Self-employed with employees
What is (was) the name of the organisation or business you work (worked) for?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours. If the respondent is (was) self-employed in their own business, they are required to provide the business name.	or	No organisation or work (worked) for a private individual

What is (was)	The respondent is	
your full job	required to answer	
title?	this question for their	
Tano.	main job, or, if not	
	working, their last	
	main job. The	
	respondent's main	
	job is the job in	
	which they usually	
	work (worked) the	
	most hours.	
	most nours.	
	For example, "Retail	
	Assistant", "Office	
	Cleaner", "District	
	Nurse", "Primary	
	School Teacher".	
	School reacher.	
	The respondent is not	
	required to state their	
	grade or pay band	
Briefly describe	The respondent is	
what you do (did)	required to answer	
in your main job.	this question for their	
	main job, or, if not	
	working, their last	
	main job. The	
	respondent's main	
	job is the job in	
	which they usually	
	work (worked) the	
	most hours.	
What is (was) the	The respondent is	
main activity of	required to answer	
your	this question for their	
organisation,	main job, or, if not	
business or	working, their last	
freelance work?	main job. The	
	respondent's main	
	job is the job in	
	which they usually	
	work (worked) the	
	most hours.	

	For example, "Armed Forces", "Women's Clothing Retailer", "Hospital", "Primary Education", "Fish Wholesaler" If the respondent is (was) a civil servant, they are required to write "Government" and give the name of their department. For example, "Marine Scotland". If the respondent is (was) a local			
	government officer, they are required to write "Local Government" and give the name of their department. For example, "Social Services", "Transport Department".			
Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours. The respondent is required to select one option only.	Yes		

In your main job, how many hours a week do (did) you usually work?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours. The respondent is required to include paid and unpaid overtime The respondent is required to select one option only.	0 to 15 16 to 30 31 to 48 49 or more
Which do you spend more time doing?	The respondent is required to select one option only.	Working Studying
Which do you spend more time doing?	The respondent is required to select one option only.	Working Studying Neither, I don't work or study
What address do you travel to for your main job?	If the respondent reports to a depot, they are required to provide the depot address The respondent is required to select one option only.	Work mainly at, or from, [address] No fixed place Work on an offshore installation Another address Work outside the UK

What address do you travel to for	The respondent is required to select	Distance learning, home schooled or equivalent
your course of study (including	one option only.	Another address
school)?		Work outside the UK
How do you	The respondent is	Driving a car or van
usually travel to your main job?	required to answer for their usual travel to the place where	Passenger in a car or van
	they spend the most	Taxi or private hire
	time.	Motorcycle, scooter or moped
	The respondent is	On foot
	required to select the option for the	Bicycle
	longest part of their journey by distance.	Bus, minibus or coach
	The respondent is	Train
	required to select one option only.	Underground, subway, or tram
		Other
How do you usually travel to	The respondent is required to answer	Driving a car or van
your course of study (including to the place where	Passenger in a car or van	
	to the place where they spend the most time.	Taxi or private hire
		Motorcycle, scooter or moped
	The respondent is	On foot
	required to select the option for the	Bicycle
	longest part of their journey by distance.	Bus, minibus or coach
	The respondent is required to select	Train
	one option only.	Underground, subway, or tram
		Other

SCHEDULE 3

Regulation 3(16)

Electronic Questionnaire – Communal Establishment

(1)	(2)	(3)
Question	Instruction for respondent	Response options
Identify all usual residents and visitors to your establishment	The respondent is required to enter the number of usual residents and the number of visitors in the boxes provided.	
What is the nature of this establishment?	The respondent is required to select one option only.	Medical and care (including care homes, children's homes or hospitals) Education (including halls of residence / student accommodation or schools) Armed Forces (Defence establishment, including ships) Detention (including prisons) Travel (including hotels, B&B's, youth hostels or other travel establishments) Hostel or shelter (including shelters for the homeless) Other (including religious establishments or staff / worker accommodation)
What is the nature of this medical or care establishment?	The respondent is required to select one option only.	General hospital Mental health hospital (including inpatient units) Other hospital Care home without nursing Care home with nursing Children's home Other medical and care establishment
What is the nature of this education establishment?	The respondent is required to select one option only.	School Halls of residence / student accommodation Other educational establishment
What is the nature of this detention establishment?	The respondent is required to select one option only.	Prison or young offenders' institution Immigration removal centre
What is the nature of this travel establishment?	The respondent is required to select one option only.	Hotel, guest house, B&B, youth hostel Leisure / holiday establishment Other travel establishment

What is the nature of this hostel or shelter establishment?	The respondent is required to select one option only.	Hostel or shelter for the homeless Other hostel or shelter establishment
What is the nature of this other establishment?	The respondent is required to select one option only.	Religious establishment Staff / worker accommodation only Other establishment
How many residents usually reside at this establishment in each of the age ranges below?	The respondent is required to enter the number of females and the number of males in each age range in the boxes provided. If there are no residents, the respondent is required to enter 0 (zero) in the boxes provided.	0 to 15 years old 16 to 24 years old 25 to 34 years old 35 to 49 years old 50 to 64 years old 65 years old and over
Who is responsible for the management of this establishment?	The respondent is required to select one option only.	NHS Local authority Government department or agency Registered social landlord or housing association Charity or voluntary organisation Private owner or company Higher or further education institution Other

SCHEDULE 4 Re Electronic Questionnaire - Communal Establishment - Individual Questions

Regulation 3(16)

(1)	(2)	(3)	
Question	Instruction for respondent	Respo	nse options
Do you (or the person you are filling this in for) stay here because you are:	The respondent is required to select one option only.		A resident (for example, patient, student, member of Armed Forces)? A member of staff or the owner? A family member, or partner, of a member of staff or the owner?
What is your date of birth?	The respondent is required to use the format DD MM YYYY in the boxes provided.		
What is your sex?	The respondent is required to select one option only. A voluntary question about trans status or history will follow if the respondent is aged 16 or over.		Female Male
Do you consider yourself to be trans, or have a	This question is voluntary. Trans is a term used		No Yes, please describe your trans status (for
trans history?	to describe people whose gender is not the same as the sex they were registered at birth.	Ш	example, non-binary, trans man, trans woman)
	If the respondent chooses to respond to this question they are required to select one option only.		
	If the respondent selects "yes" to this question they may type how they describe their trans status in the box provided, for example, non-binary, trans man, trans woman.		

On 21 March 2021, what is	The respondent is required to select one	Never married and never registered in a civil partnership
your legal marital or registered civil	option only.	Married
partnership status?		In a registered civil partnership
		Separated, but still legally married
		Separated, but still legally in a civil partnership
		Divorced
		Formerly in a civil partnership which is now legally dissolved
		Widowed
		Surviving partner from a civil partnership
Are you a schoolchild or	The respondent is required to select one	Yes
student in full- time education?	option only.	No
During term- time, do you live	The respondent is required to select one	Yes
at [address]?	option only.	No, during term-time I live at another address
Which of the following best	This question is voluntary.	Straight or Heterosexual
describes your sexual	If the respondent	Gay or Lesbian
orientation?	chooses to respond to this question they are	Bisexual
	required to select one option only.	Other sexual orientation
	If the respondent selects "Other sexual orientation" they may type how they describe their sexual orientation in the box provided.	

What is your	The respondent is		Scotland
country of birth?	required to select one option only.		England
			Northern Ireland
			Wales
			Republic of Ireland
			Elsewhere
If you were not born in the United Kingdom, when did you most recently	The respondent is not required to count short visits away from the UK.		
arrive to live here?	The respondent is required to use the format MM YYYY in the boxes provided.		
One year ago,	If the respondent had		[Address]
what was your usual address?	no usual address one year ago, they are		Student term-time / boarding school address in the UK
	required to enter the address where they	П	Another address in the UK
	were staying on 21 March 2020 in the box provided.		Outside the UK
	The respondent is required to select one option only.		
Do you look	The respondent is not		No
after, or give any help or support to	required to count anything they do as		Yes, 1 to 19 hours a week
family members,	part of their paid		Yes, 20 to 34 hours a week
friends, neighbours or	employment.		Yes, 35 to 49 hours a week
others because of either:	The respondent is required to select one		Yes, 50 or more hours a week
 long term physical / mental ill-health / disability; or problems related to old age? 	option only.		

How well can you understand, speak, read and write English?	The respondent is required to select one option for each.	 Very well Well Not well Not at all I speak English— Very well Well Not well Not at all I read English— Very well Not at all I read English— Very well Well Not well Not well Not at all I write English—
		 Very well Well Not well Not at all
Can you understand, speak, read and write Scottish Gaelic?	The respondent is required to select all options that apply.	 Understand spoken Scottish Gaelic Speak Scottish Gaelic Read Scottish Gaelic Write Scottish Gaelic or No skills in Scottish Gaelic
Can you understand, speak, read and write Scots?	The respondent is required to select all options that apply.	 ☐ Understand spoken Scots ☐ Speak Scots ☐ Read Scots ☐ Write Scots ☐ No skills in Scots
Can you use British Sign Language (BSL)?	The respondent is required to select one option only.	Yes No
What is your main language?	The respondent is required to select one option only.	English Other (including BSL and Tactile BSL)

How is your	The respondent is	Very good
	required to select one option only.	Good
		Fair
		Bad
		Very bad
Do you have any	The respondent is required to select all options that apply.	Deafness or partial hearing loss
of the following, which have		Blindness or partial sight loss
lasted, or are expected to last, at least 12 months?	If the respondent selects "Other condition" they may enter their condition.	Full or partial loss of voice or difficulty speaking: a condition that requires you to use equipment to speak
		Learning disability: a condition that you have had since childhood that affects the way you learn, understand information and
		communicate Learning difficulty: a specific learning condition that affects the way you learn and process information
		Developmental disorder: a condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language
		Physical disability: a condition that substantially limits one or more basic physical activities such as walking, climbing
		stairs, lifting or carrying Mental health condition: a condition that affects your emotional, physical and mental
		wellbeing Long-term illness, disease or condition: a condition, not listed above, that you may have for life, which may be managed with treatment or medication
		Other condition or
		No condition
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?	The respondent is required to include problems related to old age. The respondent is required to select one option only.	Yes, limited a lot
		Yes, limited a little
		No

do you hold? required to sel	The respondent is required to select all options that	United Kingdom
		Ireland
	арріу.	Other
	If the respondent selects "Other" they are required to enter their first passport and, if applicable, their second passport in the boxes provided.	None
What religion, religious	This question is voluntary.	None
denomination or body do you		Church of Scotland
belong to?	If the respondent chooses to respond	Roman Catholic
	to this question they are required to	Other Christian
	select one option	
	only. If the respondent	Muslim
	selects "Other Christian" they	Hindu
	may enter their other Christian religion, religious denomination or body in the box provided.	Buddhist
		Sikh
		Jewish
		Pagan
	If the respondent selects "Muslim" they may enter their Muslim denomination or school in the box provided.	Another religion or body
	If the respondent selects "Another religion or body" they may enter their religion, religious denomination or body in the box provided.	

What do you feel is your national identity?	The respondent is required to select all options that apply.	Scottish
	If the respondent	English
	selects "Other" they are required to enter their national identity in the box provided.	Northern Irish
		Welsh
		British
		Other
What is your ethnic group?	The respondent is required to select one option only.	White (including Gypsy, Traveller, Roma, Showman / Showwoman)
	The next question asks the respondent about their ethnic group in more detail.	Mixed or multiple ethnic groups (including any mixed or multiple ethnic groups)
		Asian, Scottish Asian or British Asian (including any Asian ethnic group)
		African, Scottish African or British African (including any African ethnic group)
		Caribbean or Black (including Scottish Caribbean, Black Scottish)
		Other ethnic group (any other ethnic group, including Arab, Sikh, Jewish)
Which one best describes your	The respondent is required to select	Scottish
white ethnic	one option only.	Other British
group or background?	If the respondent selects "Other" they are required to enter their other white ethnic group in the box provided.	Irish
		Polish
		Gypsy / Traveller
		Roma
		Showman / Showwoman
		Other white ethnic group
What are your mixed or multiple ethnic groups?	The respondent is required to provide their ethnic groups.	

describes your	The respondent is required to select	$ \sqcup $	Pakistani, Scottish Pakistani or British Pakistani
Asian, Scottish Asian or British Asian ethnic group or background?	one option only. If the respondent selects "Other" they are required to enter their other Asian ethnic group in the box provided.	П	Indian, Scottish Indian or British Indian
			Bangladeshi, Scottish
			Bangladeshi or British Bangladeshi
			Chinese, Scottish Chinese or British Chinese
			Other
What is your African, Scottish African or British African ethnic group or background?	The respondent is required to enter their African ethnic group or background (for example, "Nigerian", "Somali") in the box provided.		
What is your Caribbean or Black ethnic group or background?	The respondent is required to enter their Caribbean or Black ethnic group or background (for example, "Scottish Caribbean", "Black Scottish") in the box provided.		
Which one best describes your other ethnic group or	The respondent is required to select one option only.		Arab, Scottish Arab or British Arab Other (for example, "Sikh", "Jewish")
background?	If the respondent selects "Other" they are required to enter their other ethnic group (for example, "Sikh", "Jewish") in the box provided.		
Which of these school	The respondent is required to select		O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE, or equivalent
(secondary or high school) qualifications do you have?	all options that apply.		Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent
			Other school qualifications not already mentioned (including foreign qualifications) or
			No school qualifications

Have you completed a	The respondent is required to select	No or
Registered	all options that	Yes, trade or equivalent
Apprenticeship?	apply.	Yes, Foundation or equivalent
		Yes, Modern or equivalent
		Yes, Graduate or equivalent
Which of these Further Education,	The respondent is required to select all options that	GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent
Higher Education or professional qualifications do	apply.	GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent
you have?		HNC, HND, SVQ level 4 or equivalent
		Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)
		Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent
		Professional qualifications (for example, teaching, nursing, accountancy)
		Other Higher Education qualifications not already mentioned (including foreign qualifications) or
		No Further Education, Higher Education, or professional qualifications
Have you previously served	If the respondent is a current serving	No or
in the UK Armed members forces?	member they should only select 'No'.	Yes, previously served in Regular Armed Forces
	The respondent is required to select all options that apply.	Yes, previously served in Reserve Armed Forces
In the last seven days, were you	The respondent is required to include	Working as an employee
doing any of the following? cas wo for The requall	casual or temporary work, even if only for one hour.	Self-employed or freelance
		Temporarily away from work ill, on holiday or temporarily laid off
	The respondent is required to select all options that apply.	On maternity or paternity leave
		Doing any other kind of paid work or
		None of the above

Which of the following describes what you were doing in the last seven days? In the last four weeks, were you actively looking for any kind of paid work?	The respondent is required to select all options that apply. The respondent is required to select one option only.	Studying Looking after home or family Long-term sick or disabled Other Yes No
If a job became available now, could you start it within two weeks?	The respondent is required to select one option only.	Yes No
In the last seven days, were you waiting to start a job already accepted?	The respondent is required to select one option only.	Yes No
Have you ever done any paid work?	The respondent is required to select one option only.	Yes, in the last 12 months Yes, but not in the last 12 months No, have never worked
In your main job, what is (was) your employment status?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours. The respondent is required to select one option only.	Employee Self-employed or freelance without employees Self-employed with employees

What is (was) the name of the organisation or business you work (worked) for?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.	or	No organisation or work (worked) for a private individual
	If the respondent is (was) self- employed in their own business, they are required to provide the business name.		
What is (was) your full job title?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours		
	For example, "Retail Assistant", "Office Cleaner", "District Nurse", "Primary School Teacher".		
	The respondent is not required to state their grade or pay band.		

Briefly describe what you do (did) in your main job.	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.	
What is (was) the main activity of your organisation, business or freelance work?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.	
	For example, "Armed Forces", "Women's Clothing Retailer", "Hospital", "Primary Education", "Fish Wholesaler".	
	If the respondent is (was) a civil servant, they are required to write "Government" and provide the name of their department. For example, "Marine Scotland".	
	If the respondent is (was) a local government officer, they are required to write "Local Government" and provide the name of their department. For example, "Social Services",	
	"Transport Department".	20

Do (did) you	The respondent is	Yes
supervise or oversee the work of other employees on a day-to-day basis?	required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.	No
	The respondent is required to select one option only.	
In your main job,	The respondent is	0 to 15
how many hours a week do (did)	required to answer this question for	16 to 30
you usually work?	their main job, or, if not working,	31 to 48
WOIK.	their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.	49 or more
	The respondent is required to include paid and unpaid overtime.	
	The respondent is required to select one option only.	
Which do you	The respondent is required to select	Working
spend more time doing?	one option only.	Studying
Which do you	The respondent is	Working
spend more time doing?	required to select one option only.	Studying Neither,
		I don't work or study

What address do you travel to for your main job? What address do you travel to for your course of	reports to a depot, they are required to give the depot address. The respondent is required to select one option only. The respondent is required to select one option only.	No fixed place Work on an offshore installation Another address Work outside the UK Distance learning, home schooled or equivalent Another address
study (including school)?		Work outside the UK
How do you usually travel to your main job?	The respondent is required to answer for their usual travel to the place where they spend the most time. The respondent is required to select the option for the longest part of their journey by distance. The respondent is required to select one option only.	Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train Underground, subway, or tram Other
How do you usually travel to your course of study (including school)?	The respondent is required to answer for their usual travel to the place where they spend the most time. The respondent is required to select the option for the longest part of their journey by distance. The respondent is required to select one option only.	Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train Underground, subway, or tram Other

SCHEDULE 5

Regulation 3(16)

Paper Household Questionnaire



Household Questionnaire (HO)

21 March 2021

		If there is a mistake in the printed address, please write your correct address below: Postcode
	Scotland's Census 2021	Completing online
	Scotland's Census is the official count of every person and household in the country.	You can complete this questionnaire online. Visit www.census.gov.scot and use the code below.
	The census is held every ten years and the answers you give to the questions will help shape Scotland's future public services.	Your Internet Access Code:
	What we would like you to do	
	Please complete this questionnaire on paper or online at www.census.gov.scot	
	You should provide information that is correct as of Sunday, 21 March 2021.	
		Company of the Compan
	A census questionnaire must be completed for every household in Scotland. As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine. The questions about trans status or history,	Help and support The leaflet included has more information about how we can help and support you to complete the census questionnaire. You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.
	every household in Scotland. As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine. The questions about trans status or history, sexual orientation, and religion are voluntary. You	The leaflet included has more information about how we can help and support you to complete the census questionnaire. You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.
	every household in Scotland. As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine. The questions about trans status or history,	The leaflet included has more information about how we can help and support you to complete the census questionnaire. You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.
	every household in Scotland. As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine. The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do	The leaflet included has more information about how we can help and support you to complete the census questionnaire. You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.
	every household in Scotland. As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine. The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to. Our pledge to you Your census return will be kept secure and will be	The leaflet included has more information about how we can help and support you to complete the census questionnaire. You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308. Declaration The information provided in this questionnaire is
	every household in Scotland. As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine. The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to. Our pledge to you	The leaflet included has more information about how we can help and support you to complete the census questionnaire. You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308. Declaration The information provided in this questionnaire is
041.0	every household in Scotland. As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine. The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to. Our pledge to you Your census return will be kept secure and will be	The leaflet included has more information about how we can help and support you to complete the census questionnaire. You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308. Declaration The information provided in this questionnaire is full and accurate, as far as I know.

Important	guid	ance	bef	ore	you	start
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Who should fill in this questionnaire

It is the responsibility of the householder to complete the census questionnaire and post it back in the pre-paid envelope.

The householder or joint householder is the person, resident or present at the address, who:

- owns / rents (or jointly owns / 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 extra questionnaires section below.

Extra questionnaires

Individual Questionnaire – any member of your household who is aged 16 or over can ask for an Individual Questionnaire online at www.census.gov.scot or by calling our helpline FREEPHONE 0800 030 8308. They can use this if they do not want to reveal their information to others in the household. Remember to include these people in household questions H1 to H6 on this questionnaire. Individual questions 1 to 44 for these people should be left blank.

Household Questionnaire – if there is more than one household at this address, each household will need to complete a separate questionnaire either online or on paper. If you need one or more extra Household Questionnaires, you can order these by calling our helpline FREEPHONE 0800 030 8308.

Continuation Questionnaire – if there are more than five people in the household, please fill in this questionnaire and a Continuation Questionnaire(s). If you need to order one or more Continuation Questionnaires, you can order these by calling our helpline FREEPHONE 0800 030 8308.

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 a black ink ballpoint pen
- tick your answers within the box like this:
- print your answers, in English, within the boxes like this: SMITH
- · use capital letters one per box
- · if a word will not fit on one line, continue on to the next line like this, if possible:

1	3	0	L	Α	D	У	W	Ε	L	L	С	R	Ε	s	С
Е	Ν	Т													

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

	Н	ousehold questions — people									
	H1 + +	Who usually lives here? If you need more advice about who to include, see the extra guidance leaflet 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 21 March 2021									
		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 21 March 2021									
	H2	Counting everyone you included in question H1, how many people usually live here?									
	Н3	Starting with the householder(s), list the names of the people counted in question H2,									
		including children and babies. First name(s) Last name									
	Per	son 1									
	Per	son 2									
	Per	son 3									
	Per	son 4									
	Pers	son 5									
	٠	If there are more than five people in this household, either fill in the questionnaire online for the whole household or call our helpline FREEPHONE 0800 030 8308 to ask for a Continuation Questionnaire(s)									
	H4	Is there anyone staying at this address on the night of 21 March 2021 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 21 March 2021 → go to H6									
	H5										
		address on the night of 21 March 2021 whose permanent or family home is elsewhere? ➡ Details for these people must be recorded on the back page									
HOv1.0		If there are only people staying at this address on the night of 21 March 2021 whose permanent or family home is elsewhere, please make sure you answer questions H7 to H10 on page 6 and questions V1 to V4 on the back page									
		Page 3									

Household questions — relationships					
H6 How are the members of this household related to each other? If there are more than five people, contact us to request a Continuation Questionnaire(s) If you live alone go to H7 If no-one usually lives here and there are no visitors staying ovemight here on 21 March 2021 go to H7					
Example: This shows how to provide relationship information for Mary Smith, who is Person 1, her husband (Robert), their two children (Alison and Steven), and Robert's father (James)	Name of Person 1 First name(s) MARY Last name SMITH	Name of Person 2 First name(s) ROBERT Last name SMITH Relationship of Person 2 to Person:	4		
DO NOT write in this section Write your household members' details in the section BELOW		Husband or wife Registered civil partner Partner Son or daughter Step-child Brother or sister	· N		
Using the same order you used in question H3 (on page 3), write the name of everyone who usually lives here at the top of each column Remember to include children, babies and people who have requested an Individual Questionnaire Tick a box to show the relationship of each person to each of the other members of this household Select the 'Brother or sister' option for half-brothers and half-sisters.	Name of Person 1 First name(s) Last name Write in name of Person 1 here as in question H3	Relationship of Person 2 to Person: Husband or wife Registered civil partner Partner Son or daughter Step-child Brother or sister Step-brother or step-sister Mother or father Step-mother or step-father Grandchild Grandparent Other relation (including in-laws) Unrelated	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	HO/1.0	
Page 4		(including foster child)		-	

	Household questions — relationships					
	Name of Person 3		Name of Person 4		Name of Person 5	
	First name(s)		First name(s)		First name(s)	
	ALISON		STEVEN		JAMES	
	Last name	4,	Last name	4,	Last name	
	SMITH	\perp	SMITH	M	SMITH	
	Relationship of Person to Persons:	1 2	Relationship of Perso to Persons:	1 2 3	Relationship of Person 5 to Persons: 1 2 3 4	
	Husband or wife		Husband or wife		Mother or father 🔲 🗹 🗌	
	Registered civil partner		Registered civil partner		Step-mother or	
	Partner		Partner		Grandchild	
	Son or daughter	\square	Son or daughter		Grandparent	
	Step-child		Step-child		Other relation 🗸 🗌 🗎 📗	
	Brother or sister		Brother or sister		(including in-laws)	
	•••••				Unrelated	
	Name of Person 3		Name of Person 4		Name of Person 5	
	First name(s)		First name(s)		First name(s)	
	Last name		Last name		Last name	
	Relationship of Person 3	3	Relationship of Person	on 4	Relationship of Person 5	
	to Persons:	1 2	to Persons:	1 2 3	to Persons: 1 2 3 4	
	Husband or wife		Husband or wife		Husband or wife	
	Registered civil partner		Registered civil partner		Registered civil	
	Partner		Partner		Partner	
	Son or daughter		Son or daughter		Son or daughter	
	Step-child		Step-child		Step-child	
	Brother or sister		Brother or sister		Brother or sister	
	Step-brother or step-sister		Step-brother or step-sister		Step-brother or	
	Mother or father		Mother or father		Mother or father	
	Step-mother or step-father		Step-mother or step-father		Step-mother or	
	Grandchild		Grandchild		Grandchild	
	Grandparent		Grandparent		Grandparent	
0	Other relation (including in-laws)		Other relation (including in-laws)		Other relation	
HOv1.0	Unrelated (including foster child)		Unrelated (including foster child)		Unrelated (including foster child)	

Household questions — accommodation						
H7 What type of accommodation is this? A whole house or bungalow that is: detached	H11 If there is no-one usually living here but there are people staying at this address whose permanent or family home is elsewhere					
semi-detached terraced (including end-terrace)	→ details for these people must be recorded on the back page					
A flat, maisonette, or apartment that is: in a tenement or purpose-built block of flats (including '4-in-a-block')	If no-one usually lives here and no-one is staying at this address on the night of 21 March 2021, there are no more questions to answer					
part of a converted or shared house (including bed-sits)	remember to sign the declaration on the front page					
in a commercial building (for example, in an office building, hotel or over a shop)	H12 Does your household own or rent this accommodation? Tick one box only					
A mobile or temporary structure:	Owns with a mortgage or loan → go to H14					
a caravan or other mobile or temporary structure	Owns outright go to H14					
H8 Are all the rooms in this accommodation behind a door that only this household can use?	Owns with shared equity (for example, LIFT, Help-to-Buy) go to H14					
Yes	Rents (with or without housing benefit)					
□ No	Part owns and part rents (shared ownership) o to H14					
H9 How many bedrooms are available for use only by this household? Include all rooms built or converted for use as	Lives here rent free					
bedrooms	H13 Who is your landlord?					
Number of bedrooms	Council (Local Authority) or Housing Association / Registered Social Landlord					
H10 What type of central heating does this accommodation have?	Private landlord or letting agency					
 Central heating is a central system that generates heat for multiple rooms 	☐ Other					
 If the central heating is available please tick the box, whether you use it or not 	H14 In total, how many cars or vans are					
Tick all that apply No control booting.	owned, or are available for use, by members of this household?					
☐ No central heating ☐ Mains gas	Include any company car(s) or van(s) available for private use					
Other gas (including liquid petroleum gas and biogas)	None					
Electric (including storage heating)						
Oil Solid fiel (oveluding wood)						
Solid fuel (excluding wood) Wood or biomass (logs, pellets, chippings)	3					
Other renewable energy source (including electric and air heat pump systems)	4 or more, please write in number					
District or communal heat system Other	H15 There are no more household questions. ⇒ go to questions for Person 1 on page 7					
Page 6						

Individual questions — Person 1	٦
1 What is your name? (Person 1 in H3 on page 3) First name(s)	8 Which of the following best describes your sexual orientation? This question is voluntary Answer only if you are aged 16 or over Tick one box only
2 What is your date of birth? Day Month Year	☐ Straight / Heterosexual ☐ Gay or Lesbian ☐ Bisexual ☐ Other sexual orientation, please write in:
3 What is your sex?	
Female Male	9 What is your country of birth?
4 Do you consider yourself to be trans, or have a trans history? ◆ This question is voluntary ◆ Answer only if you are aged 16 or over ◆ Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth	Scotland → go to 11 England → go to 11 Northern Ireland → go to 11 Wales → go to 11 Republic of Ireland
◆ Tick one box only No Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	Elsewhere, please write in the current name of the country:
On 21 March 2021, what is your legal marital or registered civil partnership status? Never married and never registered in a civil	10 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
partnership Married In a registered civil partnership Separated, but still legally married	11 One year ago, what was your usual address? If you had no usual address one year ago, state the address where you were staying
Separated, but still legally in a civil partnership Divorced Formerly in a civil partnership which is now legally dissolved Widowed	☐ The address on the front of the questionnaire ☐ Student term-time / boarding school address in the UK, please write in below: ☐ Another address in the UK, please write in:
Surviving partner from a civil partnership	
6 Are you a schoolchild or student in full-time education? ☐ Yes ☐ No → go to 8	Postcode
7 During term-time, do you live: ☐ at the address on the front of this questionnaire? ☐ at another address? → go to 44	Outside the UK, please write in country:
	Page 7

Individual questions — Person 1	\neg
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either: • long-term physical / mental ill-health /	Very good Good Fair Bad Very bad
disability; or problems related to old age?	
Do not count anything you do as part of your paid employment	18 Do you have any of the following, which have lasted, or are expected to last, at least
	12 months? Tick all that apply
☐ Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	☐ Blindness or partial sight loss
Yes, 35 to 49 hours a week	Full or partial loss of voice or difficulty speaking
Yes, 50 or more hours a week	(a condition that requires you to use equipment to speak)
13 How well can you understand, speak, read and write English? Tick one box in each column	Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)
Understand Speak Read Write (spoken)	Learning difficulty (a specific learning condition that affects the way you learn and process information)
Very well	Developmental disorder (a condition that you
Well	have had since childhood which affects motor, cognitive, social and emotional skills, and
Not well	speech and language)
Not at all	Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
14 Can you understand, speak, read and write Scottish Gaelic or Scots? ◆ Tick all that apply	Mental health condition (a condition that affects your emotional, physical and mental wellbeing)
Understand Speak Read Write	Long-term illness, disease or condition (a
(spoken)	condition, not listed above, that you may have for life, which may be managed with treatment
Scottish Gaelic	or medication)
Scots	Other condition, please write in:
or	
No skills in either language	
15 Can you use British Sign Language (BSL)?	No condition
☐ Yes ☐ No	19 Are your day-to-day activities limited
16 What is your main language? ◆ Tick one box only	because of a health problem or disability which has lasted, or is expected to last, at
☐ English	least 12 months? ♦ Include problems related to old age
Other, please write in (including BSL and	Yes, limited a lot
TACTILE BSL):	Yes, limited a little
	□ No
Page 8	

Individual questions — Person 1	コ
20 What passports do you hold? Tick all that apply	23 What is your ethnic group? ◆ Choose ONE section from A to F, then tick ONE box which best describes your ethnic group or
United Kingdom	background A White
☐ Ireland	Scottish
Other, please write in:	Other British
	☐ Irish
	Polish
	Gypsy / Traveller
None	Roma
21 What religion, religious denomination or	Showman / Showwoman
body do you belong to?	Other white ethnic group, please write in:
This question is voluntary	Other write ethilo group, please write in.
None	
Church of Scotland	B Mixed or multiple ethnic groups
☐ Roman Catholic	Any mixed or multiple ethnic groups, please write in:
Other Christian, please write in below:	
☐ Muslim, write in denomination or school below:	
Hindu	C Asian, Scottish Asian or British Asian
☐ Buddhist	Pakistani, Scottish Pakistani or British Pakistani
Sikh	☐ Indian, Scottish Indian or British Indian
☐ Jewish	Bangladeshi, Scottish Bangladeshi or British Bangladeshi
☐ Pagan	Chinese, Scottish Chinese or British Chinese
Another religion or body, please write in:	Other, please write in:
22 What do you feel is your national identity?	D African, Scottish African or British African
22 What do you feel is your national identity? Tick all that apply	Please write in (for example, NIGERIAN, SOMALI):
Scottish	
☐ English	E Caribbean or Black
☐ Northern Irish	Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):
Welsh	CANDELAN, BEACK GOOT HOLD.
☐ British	F Other ethnic group
Other, please write in:	Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH,
2	JEWISH):
HOWIN	

Individual questions — Person 1	┐
24 If you are aged 16 or over ⇒ go to 25 If you are aged 15 or under ⇒ go to 41	27 In the last seven days, were you doing any of the following? ◆ Include casual or temporary work, even if only for one hour
25 Which of these qualifications do you have? Tick all that apply	♦ Tick all that apply Working as an employee → go to 33
O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent Apprenticeship (trade or equivalent)	 Self-employed or freelance → go to 33 Temporarily away from work ill, on holiday or temporarily laid off → go to 33 On maternity or paternity leave → go to 33 Doing any other kind of paid work → go to 33
Apprenticeship (Foundation or equivalent)	None of the above
□ Apprenticeship (Modern or equivalent) □ Apprenticeship (Graduate or equivalent) □ GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent	28 Which of the following describes what you were doing in the last seven days? ◆ Tick all that apply ☐ Retired (whether receiving a pension or not) ☐ Studying ☐ Looking after home or family
GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Long-term sick or disabled Other
☐ HNC, HND, SVQ level 4 or equivalent	29 In the last four weeks, were you actively looking for any kind of paid work?
Other school qualifications not already mentioned (including foreign qualifications)	Yes No
Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)	30 If a job became available now, could you start it within two weeks? Yes No
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	31 In the last seven days, were you waiting to start a job already accepted?
Professional qualifications (for example, teaching, nursing, accountancy)	Yes No 32 Have you ever done any paid work?
Other Higher Education qualifications not already mentioned (including foreign qualifications)	Yes, in the last 12 months Yes, but not in the last 12 months No, have never worked
☐ No qualifications	33 Answer the remaining questions for your
26 Have you previously served in the UK Armed Forces? Current serving members should only tick 'No'	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
 No Yes, previously served in Regular Armed Forces 	34 In your main job, what is (was) your employment status? □ Employee
Yes, previously served in Reserve Armed Forces	Self-employed or freelance without employees Self-employed with employees
Page 10	

Individual questions — Person 1	
35 What is (was) the name of the organisation or business you work (worked) for? ◆ If you are (were) self-employed in your own business, please write in your business name:	41 If you currently work or study (or both) → go to 42 If you do not currently work or study, including if you are retired → go to 44
or No organisation or work (worked) for a private individual	42 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 Work mainly at, or from, home ◆ go to 44
36 What is (was) your full job title? ◆ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER ◆ Do not state your grade or pay band	Distance learning, home schooled or equivalent → go to 44 No fixed place → go to 43 Work on an offshore installation → go to 43 The address below, please write in:
37 Briefly describe what you do (did) in your main job.	Postcode The address entered above is my place of Work Study
38 What is (was) the main activity of your	(10.11)
organisation, business or freelance work? For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT 39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	43 How do you usually travel to your main job or course of study (including school)? ♦ Answer for your usual travel to the place where you spend the most time • Tick the box for the longest part of your journey by distance • Tick one box only □ Driving a car or van □ Passenger in a car or van □ Taxi or private hire □ Motorcycle, scooter or moped □ On foot □ Bicycle □ Bus, minibus or coach □ Train □ Underground, subway or tram □ Other
organisation, business or freelance work? For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT 39 Do (did) you supervise or oversee the work	or course of study (including school)? Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train

Individual questions — Person 2	\neg
1 What is your name? (Person 2 in H3 on page 3) First name(s) Last name 2 What is your date of birth? Day Month Year	8 Which of the following best describes your sexual orientation? ↑ This question is voluntary ↑ Answer only if you are aged 16 or over ↑ Tick one box only □ Straight / Heterosexual □ Gay or Lesbian □ Bisexual □ Other sexual orientation, please write in:
3 What is your sex?	
Female Male	9 What is your country of birth?
4 Do you consider yourself to be trans, or have a trans history? ◆ This question is voluntary ◆ Answer only if you are aged 16 or over ◆ Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth ◆ Tick one box only	Scotland → go to 11 England → go to 11 Northern Ireland → go to 11 Wales → go to 11 Republic of Ireland Elsewhere, please write in the current name of the country:
Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	
On 21 March 2021, what is your legal marital or registered civil partnership status? Never married and never registered in a civil partnership	10 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
Married In a registered civil partnership Separated, but still legally married Separated, but still legally in a civil partnership Divorced Formerly in a civil partnership which is now legally dissolved Widowed Surviving partner from a civil partnership	11 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 the questionnaire Student term-time / boarding school address in the UK, please write in below: Another address in the UK, please write in:
6 Are you a schoolchild or student in full-time education? ☐ Yes ☐ No → go to 8 7 During term-time, do you live: ☐ at the address on the front of this questionnaire?	Postcode Outside the UK, please write in country:
☐ at another address? → go to 44 Page 12	

Individual questions — Person 2	□
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either: • long-term physical / mental ill-health /	Very good Good Fair Bad Very bad
disability; or	
problems related to old age? Do not count anything you do as part of your	18 Do you have any of the following, which have lasted, or are expected to last, at least
paid employment	12 months?
□ No	♦ Tick all that apply
Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	Blindness or partial sight loss
Yes, 35 to 49 hours a week	Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment
Yes, 50 or more hours a week	to speak)
13 How well can you understand, speak, read and write English?	Learning disability (a condition that you have had since childhood that affects the way you
◆ Tick one box in each column	learn, understand information and communicate)
Understand Speak Read Write (spoken)	Learning difficulty (a specific learning condition that affects the way you learn and process
Very well	information)
	Developmental disorder (a condition that you have had since childhood which affects motor,
	cognitive, social and emotional skills, and speech and language)
Not well	
Not at all	Physical disability (a condition that substantially limits one or more basic physical activities such
14 Can you understand, speak, read and write	as walking, climbing stairs, lifting or carrying)
Scottish Gaelic or Scots? Tick all that apply	Mental health condition (a condition that affects your emotional, physical and mental wellbeing)
Understand Speak Read Write	Long-term illness, disease or condition (a
(spoken)	condition, not listed above, that you may have for life, which may be managed with treatment
	or medication)
Scots	Other condition, please write in:
or	
No skills in either language	
15 Can you use British Sign Language (BSL)?	☐ No condition
Yes No	19 Are your day-to-day activities limited
16 What is your main language? ◆ Tick one box only	because of a health problem or disability which has lasted, or is expected to last, at
☐ English	least 12 months? ♦ Include problems related to old age
Other, please write in (including BSL and	Yes, limited a lot
TACTILE BSL):	Yes, limited a little
<u>₹</u>	□ No
L	Page 13

Individual questions — Person 2		\neg
20 What passports do you hold? Tick all that apply	2:	3 What is your ethnic group? Choose ONE section from A to F, then tick ONE box which best describes your ethnic group or
☐ United Kingdom		background
☐ Ireland	Α	White
Other, please write in:		Scottish Other British
		☐ Irish
	75.00 5.00 5.00 5.00	Polish
None		Gypsy / Traveller
		Roma
21 What religion, religious denomination or body do you belong to?		Showman / Showwoman
This question is voluntary		Other white ethnic group, please write in:
☐ None	70.00 70.00	
☐ Church of Scotland	В	Mixed or multiple ethnic groups
Roman Catholic		Any mixed or multiple ethnic groups, please write in:
Other Christian, please write in below:		
☐ Muslim, write in denomination or school below:		
Hindu	С	Asian, Scottish Asian or British Asian
☐ Buddhist		Pakistani, Scottish Pakistani or British Pakistani
Sikh		☐ Indian, Scottish Indian or British Indian
☐ Jewish		Bangladeshi, Scottish Bangladeshi or British Bangladeshi
☐ Pagan		Chinese, Scottish Chinese or British Chinese
Another religion or body, please write in:		Other, please write in:
22 What do you feel is your national identity?	D	African, Scottish African or British African
♦ Tick all that apply		Please write in (for example, NIGERIAN, SOMALI):
Scottish		
☐ English	E	Caribbean or Black
☐ Northern Irish		Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):
Welsh		C. Madder H, Series Coop Horry.
☐ British	_	Other atheir group
Other, please write in:		Other ethnic group Arab, Scottish Arab or British Arab
		Other, please write in (for example, SIKH,
		JEWISH):
		ξ.
Page 14		

Individual questions — Person 2	コ
24 If you are aged 16 or over ⇒ go to 25	27 In the last seven days, were you doing any of the following?
If you are aged 15 or under → go to 41	 Include casual or temporary work, even if only for one hour
25 Which of these qualifications do you have? ♦ Tick all that apply	◆ Tick all that apply Working as an employee ⇒ go to 33
O Grade, Standard Grade, National 3, 4 or 5,	☐ Self-employed or freelance → go to 33
Intermediate 1 or 2, GCSE, CSE or equivalent Higher, Advanced Higher, SCE Higher Grade,	Temporarily away from work ill, on holiday or temporarily laid off → go to 33
CSYS, A Level, AS Level or equivalent	☐ On maternity or paternity leave → go to 33
Apprenticeship (trade or equivalent)	☐ Doing any other kind of paid work ⇒ go to 33
Apprenticeship (Foundation or equivalent)	None of the above
Apprenticeship (Modern or equivalent)	28 Which of the following describes what you were doing in the last seven days? ♦ Tick all that apply
Apprenticeship (Graduate or equivalent)	Retired (whether receiving a pension or not)
GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft	☐ Studying
or equivalent	Looking after home or family
GSVQ Advanced, SVQ level 3, ONC, OND,	Long-term sick or disabled
SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Other
☐ HNC, HND, SVQ level 4 or equivalent	29 In the last four weeks, were you actively looking for any kind of paid work?
Other school qualifications not already mentioned (including foreign qualifications)	Yes No
Other post-school but pre-Higher Education	30 If a job became available now, could you start it within two weeks?
qualifications not already mentioned (including foreign qualifications)	Yes No
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	31 In the last seven days, were you waiting to start a job already accepted?
Professional qualifications (for example,	Yes No
teaching, nursing, accountancy)	32 Have you ever done any paid work?
Other Higher Education qualifications not already mentioned (including foreign	Yes, in the last 12 months
qualifications)	Yes, but not in the last 12 months
☐ No qualifications	No, have never worked → go to 41
(20)	33 Answer the remaining questions for your main job or, if not working, your last main
26 Have you previously served in the UK Armed Forces?	job. ♦ Your main job is the job in which you usually
Current serving members should only tick 'No'	work (worked) the most hours
□ No	34 In your main job, what is (was) your employment status?
Yes, previously served in Regular Armed Forces	Employee
Yes, previously served in Reserve Armed Forces	Self-employed or freelance without employees
165, previously served in Reserve Anned Porces	Self-employed with employees
	Page 15

Individual questions — Person 2	コ
35 What is (was) the name of the organisation or business you work (worked) for? ◆ If you are (were) self-employed in your own business, please write in your business name:	41 If you currently work or study (or both) → go to 42 If you do not currently work or study, including if you are retired → go to 44
or ☐ No organisation or work (worked) for a private individual 36 What is (was) your full job title? ◆ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY	42 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 Work mainly at, or from, home → go to 44 □ Distance learning, home schooled or equivalent → go to 44
SCHOOL TEACHER Do not state your grade or pay band	No fixed place → go to 43 Work on an offshore installation → go to 43 The address below, please write in:
37 Briefly describe what you do (did) in your main job.	Postcode The address entered above is my place of Work Study
38 What is (was) the main activity of your organisation, business or freelance work? ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND ● If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT 39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	43 How do you usually travel to your main job or course of study (including school)? ◆ Answer for your usual travel to the place where you spend the most time ◆ Tick the box for the longest part of your journey by distance ◆ Tick one box only □ Driving a car or van □ Passenger in a car or van □ Taxi or private hire □ Motorcycle, scooter or moped □ On foot □ Bicycle □ Bus, minibus or coach □ Train □ Underground, subway or tram □ Other
Yes	44 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 in question H5, record their details on the back page Remember to sign the declaration on page 1

	Individual questions — Person 3	コ
	1 What is your name? (Person 3 in H3 on page 3)	8 Which of the following best describes your sexual orientation?
	First name(s)	This question is voluntary Answer only if you are good 16 or over
		 Answer only if you are aged 16 or over Tick one box only
	Last name	Straight / Heterosexual
		Gay or Lesbian
	2 What is your date of birth?	☐ Bisexual
	Day Month Year	Other sexual orientation, please write in:
		Otter sexual orientation, please write in.
	3 What is your sex?	
	Female Male	9 What is your country of birth?
	4 Do you consider yourself to be trans, or	☐ Scotland → go to 11
	have a trans history? This question is voluntary	☐ England → go to 11
	 Answer only if you are aged 16 or over Trans is a term used to describe people whose 	Northern Ireland → go to 11
	gender is not the same as the sex they were	☐ Wales → go to 11
	registered at birth Tick one box only	Republic of Ireland
	□ No	Elsewhere, please write in the current name of the country:
	Yes, please describe your trans status (for	ule country.
	example, non-binary, trans man, trans woman):	
		10 If you were not born in the United Kingdom, when did you most recently arrive to live
	5 On 21 March 2021, what is your legal	here?
	marital or registered civil partnership status?	Do not count short visits away from the UK Month Year
	Never married and never registered in a civil	
	partnership	
	☐ Married	11 One year ago, what was your usual address?
	In a registered civil partnership	 If you had no usual address one year ago, state the address where you were staying
	Separated, but still legally married	Same as Person 1
	Separated, but still legally in a civil partnership	The address on the front of the questionnaire
	Divorced	Student term-time / boarding school address in
	Formerly in a civil partnership which is now legally dissolved	the UK, please write in below:
	Widowed	Another address in the UK, please write in:
	Surviving partner from a civil partnership	
	6 Are you a schoolchild or student in full-time education?	
	Yes	Postcode
	No ⇒ go to 8	
	7 During term-time, do you live:	Outside the LIV places write in sounts
HOV1.0	at the address on the front of this questionnaire?	Outside the UK, please write in country:
Ð	☐ at another address? → go to 44	
		Page 17

Individual questions — Person 3	
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either: Iong-term physical / mental ill-health / disability; or problems related to old age?	Very good Good Fair Bad Very bad
Do not count anything you do as part of your paid employment	18 Do you have any of the following, which have lasted, or are expected to last, at least 12 months?
□ No	♦ Tick all that apply
Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	Blindness or partial sight loss
Yes, 35 to 49 hours a week Yes, 50 or more hours a week	Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak)
13 How well can you understand, speak, read and write English? Tick one box in each column	Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)
Understand Speak Read Write (spoken)	Learning difficulty (a specific learning condition that affects the way you learn and process information)
Very well	Developmental disorder (a condition that you
Well	have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language)
Not at all	Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
14 Can you understand, speak, read and write Scottish Gaelic or Scots? ◆ Tick all that apply	Mental health condition (a condition that affects your emotional, physical and mental wellbeing)
Understand Speak Read Write (spoken) Scottish Gaelic	Long-term illness, disease or condition (a condition, not listed above, that you may have for life, which may be managed with treatment or medication)
Scots \square \square \square	Other condition, please write in:
or	
No skills in either language	
15 Can you use British Sign Language (BSL)?	☐ No condition
Yes No	19 Are your day-to-day activities limited
16 What is your main language? Tick one box only	because of a health problem or disability which has lasted, or is expected to last, at least 12 months?
☐ English	♦ Include problems related to old age
Other, please write in (including BSL and TACTILE BSL):	Yes, limited a lot
IN THE BOLD.	Yes, limited a little No
Dago 19	
Page 18	_

Individual questions — Person 3	
20 What passports do you hold? ♦ Tick all that apply United Kingdom	23 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
☐ Ireland	☐ Scottish
Other, please write in:	Other British
	☐ Irish
	☐ Polish
□ News	Gypsy / Traveller
None	Roma
21 What religion, religious denomination or	Showman / Showwoman
body do you belong to? This question is voluntary	Other white ethnic group, please write in:
This question is voluntary	
None	
☐ Church of Scotland	B Mixed or multiple ethnic groups
Roman Catholic	Any mixed or multiple ethnic groups, please write in:
Other Christian, please write in below:	
Muslim, write in denomination or school below:	
Hindu	C Asian, Scottish Asian or British Asian
Buddhist	Pakistani, Scottish Pakistani or British Pakistani
Sikh	☐ Indian, Scottish Indian or British Indian
☐ Jewish	Bangladeshi, Scottish Bangladeshi or British Bangladeshi
☐ Pagan	Chinese, Scottish Chinese or British Chinese
Another religion or body, please write in:	Other, please write in:
22 What do you feel is your national identity?	D African, Scottish African or British African
Tick all that apply	Please write in (for example, NIGERIAN, SOMALI):
☐ Scottish	
☐ English	E Caribbean or Black
☐ Northern Irish	☐ Please write in (for example, SCOTTISH
Welsh	CARIBBEAN, BLACK SCOTTISH):
British	F Other ethnic group
Other, please write in:	Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH, JEWISH):
O TO	JETHOLI,
	Page 19

Individual questions — Person 3	\neg
24 If you are aged 16 or over ⇒ go to 25 If you are aged 15 or under ⇒ go to 41	27 In the last seven days, were you doing any of the following? ♦ Include casual or temporary work, even if only
25 Which of these qualifications do you have? Tick all that apply	for one hour ◆ Tick all that apply Working as an employee go to 33
O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent Apprenticeship (trade or equivalent)	 Self-employed or freelance → go to 33 Temporarily away from work ill, on holiday or temporarily laid off → go to 33 On maternity or paternity leave → go to 33 Doing any other kind of paid work → go to 33 None of the above
Apprenticeship (Foundation or equivalent) Apprenticeship (Modern or equivalent) Apprenticeship (Graduate or equivalent)	28 Which of the following describes what you were doing in the last seven days? Tick all that apply
GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent	Retired (whether receiving a pension or not) Studying Looking after home or family Long-term sick or disabled
GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Other 29 In the last four weeks, were you actively
HNC, HND, SVQ level 4 or equivalent Other school qualifications not already mentioned (including foreign qualifications)	looking for any kind of paid work? Yes No
Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)	30 If a job became available now, could you start it within two weeks? Yes No
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	31 In the last seven days, were you waiting to start a job already accepted?
Professional qualifications (for example, teaching, nursing, accountancy)	Yes No 32 Have you ever done any paid work?
Other Higher Education qualifications not already mentioned (including foreign qualifications)	Yes, in the last 12 months Yes, but not in the last 12 months
□ No qualifications	No, have never worked → go to 41 33 Answer the remaining questions for your main job or, if not working, your last main
26 Have you previously served in the UK Armed Forces? Current serving members should only tick 'No'	job. ◆ Your main job is the job in which you usually work (worked) the most hours
 No Yes, previously served in Regular Armed Forces 	34 In your main job, what is (was) your employment status? Employee Self-employed or freelance without employees
Yes, previously served in Reserve Armed Forces	
Page 20	

Individual questions — Person 3	
35 What is (was) the name of the organisation or business you work (worked) for? ♦ If you are (were) self-employed in your own business, please write in your business name:	41 If you currently work or study (or both) → go to 42 If you do not currently work or study, including if you are retired → go to 44
or ☐ No organisation or work (worked) for a private individual	42 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 Work mainly at, or from, home • go to 44
36 What is (was) your full job title? ◆ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER ◆ Do not state your grade or pay band	Distance learning, home schooled or equivalent → go to 44 No fixed place → go to 43 Work on an offshore installation → go to 43 The address below, please write in:
37 Briefly describe what you do (did) in your main job.	Postcode The address entered above is my place of Work Study
38 What is (was) the main activity of your organisation, business or freelance work? ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND	43 How do you usually travel to your main job or course of study (including school)? ♦ Answer for your usual travel to the place where you spend the most time • Tick the box for the longest part of your journey by distance • Tick one box only □ Driving a car or van
If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT 39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train Underground, subway or tram Other
please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT 39 Do (did) you supervise or oversee the work	Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train Underground, subway or tram

Which of the following best describes your sexual orientation?	Individual questions — Person 4	コ
Female	1 What is your name? (Person 4 in H3 on page 3) First name(s) Last name 2 What is your date of birth?	sexual orientation? ↑ This question is voluntary ↑ Answer only if you are aged 16 or over ↑ Tick one box only ☐ Straight / Heterosexual ☐ Gay or Lesbian ☐ Bisexual
4 Do you consider yourself to be trans, or have a trans history? ↑ This question is voluntary ↑ Answer only if you are aged 16 or over ↑ Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth ↑ Tick one box only No No Yes, please describe your trans status (for example, non-binary, trans man, trans woman): □ Yes, please describe your trans status (for example, non-binary, trans man, trans woman): □ Northern Ireland → go to 11 Republic of Ireland □ Elsewhere, please write in the current name of the country: □ 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 when did you most recently arrive to live here? ↑ Do not count short visits away from the UK when did you most recently arrive to live here? ↑ Do not count short visits away from the UK when did you most recently arrive to live here? ↑ Do not count short visits away from the UK when did you most recently arrive to live here? ↑ Do not count short visits away from the UK when did you most recently arrive to live here? ↑ Do not count short visits away from the UK when did you most recently arrive to live here? ↑ Do not count short visits away from the UK mere? ↑ Do not count short visits away from the UK mere? ↑ If One year ago, what was your usual address on eyear ago, state the address where you were staying □ Same as Person 1 □ The address on the front of the questionnaire □ Student term-time / boarding school address in the UK, please write in below. □ Another address in the UK, please write in country: □ Another address on the front of this questionnaire? □ At the address on the front of this questionnaire? □ At the address on the front of this questionnaire? □ At the address on the front of this questionnaire? □ Cutside the UK, please write in country: □ Outside the UK, please write in country:	3 What is your sex?	
have a trans history? ↑ This question is voluntary ↑ Answer only if you are aged 16 or over ↑ Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth ↑ Tick one box only □ No □ Yes, please describe your trans status (for example, non-binary, trans man, trans woman): □ Son 21 March 2021, what is your legal martial or registered civil partnership status? □ Never married and never registered in a civil partnership □ livartnership □ livartnership □ livartnership □ pivorced □ Formerly in a civil partnership which is now legally dissolved □ Widowed □ Surviving partner from a civil partnership □ Surviving partner from a civil partnership □ Surviving partner from a civil partnership □ Are you a schoolchild or student in full-time education? □ Yes □ No → go to 8 ↑ During term-time, do you live: □ at the address or the front of this questionnaire? □ at another address? → go to 44	Female Male	9 What is your country of birth?
Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	have a trans history? ↑ This question is voluntary ↑ Answer only if you are aged 16 or over ↑ Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth ↑ Tick one box only	□ England → go to 11 □ Northern Ireland → go to 11 □ Wales → go to 11 □ Republic of Ireland □ Elsewhere, please write in the current name of
Separated, but still legally in a civil partnership Divorced Formerly in a civil partnership which is now legally dissolved Widowed Surviving partner from a civil partnership Widowed Surviving partner from a civil partnership Yes No No po to Sun did you most recently arrive to live here? Do not count short visits away from the UK Month Year Do not count short visits away from the UK Do not count short visits away from the UK Do not count short visits avay from the UK Month Year Do not count short visits avay from the UK Do not count short visits avay f		ule country.
In a registered civil partnership	marital or registered civil partnership status? Never married and never registered in a civil partnership	when did you most recently arrive to live here? Do not count short visits away from the UK Month Year 11 One year ago, what was your usual
Divorced □ Formerly in a civil partnership which is now legally dissolved □ Widowed □ Surviving partner from a civil partnership 6 Are you a schoolchild or student in full-time education? □ Yes □ No → go to 8 7 During term-time, do you live: □ at the address on the front of this questionnaire? □ at another address? → go to 44	Separated, but still legally married	If you had no usual address one year ago, state the address where you were staying
Formerly in a civil partnership which is now legally dissolved Widowed Another address in the UK, please write in below: Another address in the UK, please write in below: Another address in the UK, please write in: Another address in the UK, please write in: Postcode Postcode Outside the UK, please write in: Outside the UK, please write in: Outside the UK, please write in: Postcode Outside the UK, please write in country: at another address? → go to 44		
Yes No → go to 8 7 During term-time, do you live: at the address on the front of this questionnaire? at another address? → go to 44	Formerly in a civil partnership which is now legally dissolved Widowed	Student term-time / boarding school address in the UK, please write in below:
Yes No → go to 8 7 During term-time, do you live: at the address on the front of this questionnaire? at another address? → go to 44	6 Are you a schoolchild or student in	
	Yes No → go to 8 7 During term-time, do you live: at the address on the front of this questionnaire?	☐ Outside the UK, please write in country:
	□ at another address? → go to 44 Page 22	9

Individual questions — Person 4	コ
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either: • long-term physical / mental ill-health /	Very good Good Fair Bad Very bad
disability; or	
 problems related to old age? Do not count anything you do as part of your 	18 Do you have any of the following, which
paid employment	have lasted, or are expected to last, at least 12 months?
□ No	♦ Tick all that apply
Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	Blindness or partial sight loss
Yes, 35 to 49 hours a week	Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment
Yes, 50 or more hours a week	to speak)
13 How well can you understand, speak, read	Learning disability (a condition that you have
and write English? ♦ Tick one box in each column	had since childhood that affects the way you learn, understand information and communicate)
Understand Speak Read Write	Learning difficulty (a specific learning condition
(spoken)	that affects the way you learn and process information)
Very well	Developmental disorder (a condition that you
Well	have had since childhood which affects motor, cognitive, social and emotional skills, and
Not well	speech and language)
Not at all	Physical disability (a condition that substantially limits one or more basic physical activities such
14 Can you understand, speak, read and write	as walking, climbing stairs, lifting or carrying)
Scottish Gaelic or Scots? Tick all that apply	Mental health condition (a condition that affects your emotional, physical and mental wellbeing)
Understand Speak Read Write	Long-term illness, disease or condition (a
(spoken)	condition, not listed above, that you may have for life, which may be managed with treatment
Scottish Gaelic	or medication)
Scots	Other condition, please write in:
or	
☐ No skills in either language	
15 Can you use British Sign Language (BSL)?	☐ No condition
Yes No	
16 What is your main language?	19 Are your day-to-day activities limited because of a health problem or disability
Tick one box only	which has lasted, or is expected to last, at least 12 months?
☐ English	♦ Include problems related to old age
Other, please write in (including BSL and TACTILE BSL):	Yes, limited a lot
TACTILE BOL).	Yes, limited a little
•	∐ No
	Page 23

Individual questions — Person 4	□
20 What passports do you hold? Tick all that apply	23 What is your ethnic group? ◆ Choose ONE section from A to F, then tick ONE box which best describes your ethnic group or
United Kingdom	background
☐ Ireland	A White Scottish
Other, please write in:	Other British
	☐ Irish
	Polish
None	Gypsy / Traveller
_ Note	Roma
21 What religion, religious denomination or	☐ Showman / Showwoman
body do you belong to? This question is voluntary	Other white ethnic group, please write in:
None	
Church of Scotland	B Mixed or multiple ethnic groups
Roman Catholic	Any mixed or multiple ethnic groups, please
	write in:
Other Christian, please write in below:	
Muslim, write in denomination or school below:	
Hindu	C Asian, Scottish Asian or British Asian
☐ Buddhist	Pakistani, Scottish Pakistani or British Pakistani
Sikh	☐ Indian, Scottish Indian or British Indian
☐ Jewish	Bangladeshi, Scottish Bangladeshi or British Bangladeshi
☐ Pagan	Chinese, Scottish Chinese or British Chinese
Another religion or body, please write in:	Other, please write in:
22 What do you feel is your national identity?	D African, Scottish African or British African
22 What do you feel is your national identity? ◆ Tick all that apply	Please write in (for example, NIGERIAN, SOMALI):
Scottish	
☐ English	E Caribbean or Black
☐ Northem Irish	☐ Please write in (for example, SCOTTISH
Welsh	CARIBBEAN, BLACK SCOTTISH):
☐ British	
	F Other ethnic group
Other, please write in:	Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH, JEWISH):
	HOM S
Page 24	

Individual questions — Person 4	٦
24 If you are aged 16 or over ⇒ go to 25 If you are aged 15 or under ⇒ go to 41	27 In the last seven days, were you doing any of the following? ◆ Include casual or temporary work, even if only for one hour
25 Which of these qualifications do you have? ♦ Tick all that apply	◆ Tick all that apply ☐ Working as an employee → go to 33
O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent Apprenticeship (trade or equivalent) Apprenticeship (Foundation or equivalent)	 Self-employed or freelance → go to 33 Temporarily away from work ill, on holiday or temporarily laid off → go to 33 On maternity or paternity leave → go to 33 Doing any other kind of paid work → go to 33 None of the above
Apprenticeship (Modern or equivalent) Apprenticeship (Graduate or equivalent) GSVQ Foundation or Intermediate, SVQ level 1	28 Which of the following describes what you were doing in the last seven days? ♦ Tick all that apply ☐ Retired (whether receiving a pension or not) ☐ Studying
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	Looking after home or family Long-term sick or disabled Other
 ☐ HNC, HND, SVQ level 4 or equivalent ☐ Other school qualifications not already mentioned (including foreign qualifications) 	29 In the last four weeks, were you actively looking for any kind of paid work? Yes No
Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)	30 If a job became available now, could you start it within two weeks? ☐ Yes ☐ No
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	31 In the last seven days, were you waiting to start a job already accepted?
Professional qualifications (for example, teaching, nursing, accountancy)	Yes No 32 Have you ever done any paid work?
Other Higher Education qualifications not already mentioned (including foreign qualifications)	Yes, in the last 12 months Yes, but not in the last 12 months
☐ No qualifications	No, have never worked → go to 41 33 Answer the remaining questions for your
26 Have you previously served in the UK Armed Forces? Current serving members should only tick 'No'	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
No Yes, previously served in Regular Armed Forces Yes, previously served in Reserve Armed Forces	34 In your main job, what is (was) your employment status? Employee Self-employed or freelance without employees Self-employed with employees
	Page 25

35 What is (was) the name of the organisation or business you work (worked) for?	Individual questions — Person 4	コ
main job or course of study (including school)? Answer for the place where you spend the most time of your didress. Primary School or a private individual For example, RETAILASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER Do not state your grade or pay band	35 What is (was) the name of the organisation or business you work (worked) for? ◆ If you are (were) self-employed in your own	→ go to 42 If you do not currently work or study, including
CLEARER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER Do not state your grade or pay band Work on an offshore installation go to 43 Work on an offshore installation go to 43 The address below, please write in:	private individual 36 What is (was) your full job title?	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 Work mainly at, or from, home ◆ go to 44
main job. Postcode	CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER	→ go to 44 No fixed place → go to 43 Work on an offshore installation → go to 43
organisation, business or freelance work? For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, SCOTLAND If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT On foot Bicycle Bus, minibus or coach Train Underground, subway or tram Other 44 There are no more questions for Person 4. If 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.		The address entered above is my place of
40 In your main job, how many hours a week do (did) you usually work? ♦ Include paid and unpaid overtime 44 There are no more questions for Person 4. If there are no more questions for Person 4. If there are no more questions for Person 5. Otherwise go to questions for Person 5.	organisation, business or freelance work? For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT 39 Do (did) you supervise or oversee the work	or course of study (including school)? Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train Underground, subway or tram
	Yes No 10 In your main job, how many hours a week do (did) you usually work? ↑ Include paid and unpaid overtime	44 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 in question H5, record their details on the back page.

	Individual questions — Person 5	コ
	1 What is your name? (Person 5 in H3 on page 3) First name(s) Last name 2 What is your date of birth? Day Month Year	8 Which of the following best describes your sexual orientation? ◆ This question is voluntary ◆ Answer only if you are aged 16 or over ◆ Tick one box only □ Straight / Heterosexual □ Gay or Lesbian □ Bisexual □ Other sexual orientation, please write in:
	3 What is your sex?	
	Female Male	9 What is your country of birth?
	Do you consider yourself to be trans, or have a trans history? This question is voluntary Answer only if you are aged 16 or over Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth Tick one box only	Scotland → go to 11 England → go to 11 Northern Ireland → go to 11 Wales → go to 11 Republic of Ireland Elsewhere, please write in the current name of the country:
	Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	
	On 21 March 2021, what is your legal marital or registered civil partnership status? Never married and never registered in a civil partnership	10 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
	Married In a registered civil partnership	11 One year ago, what was your usual address? If you had no usual address one year ago, state the address where you were staying
	Separated, but still legally married Separated, but still legally in a civil partnership Divorced Formerly in a civil partnership which is now legally dissolved Widowed Surviving partner from a civil partnership	Same as Person 1 The address on the front of the questionnaire Student term-time / boarding school address in the UK, please write in below: Another address in the UK, please write in:
	6 Are you a schoolchild or student in full-time education?	Postcode
	No ⇒ go to 8	
HOv1.0	7 During term-time, do you live: ☐ at the address on the front of this questionnaire? ☐ at another address? → go to 44	Outside the UK, please write in country:
		Page 27

Individual questions — Person 5	
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either: Iong-term physical / mental ill-health / disability; or problems related to old age?	Very good Good Fair Bad Very bad
Do not count anything you do as part of your paid employment	18 Do you have any of the following, which have lasted, or are expected to last, at least 12 months? Tick all that apply
☐ Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	☐ Blindness or partial sight loss
Yes, 35 to 49 hours a week Yes, 50 or more hours a week	Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak)
13 How well can you understand, speak, read and write English? Tick one box in each column	Leaming disability (a condition that you have had since childhood that affects the way you leam, understand information and communicate)
Understand Speak Read Write (spoken)	Learning difficulty (a specific learning condition that affects the way you learn and process information)
Very well	Developmental disorder (a condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language)
Not at all	Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
14 Can you understand, speak, read and write Scottish Gaelic or Scots? ◆ Tick all that apply	Mental health condition (a condition that affects your emotional, physical and mental wellbeing)
Understand Speak Read Write (spoken) Scottish Gaelic	Long-term illness, disease or condition (a condition, not listed above, that you may have for life, which may be managed with treatment or medication)
Scots	Other condition, please write in:
or	
No skills in either language	
15 Can you use British Sign Language (BSL)?	☐ No condition
Yes No 16 What is your main language?	19 Are your day-to-day activities limited because of a health problem or disability
Tick one box only	which has lasted, or is expected to last, at least 12 months?
☐ English	♦ Include problems related to old age Yes, limited a lot
Other, please write in (including BSL and TACTILE BSL):	Yes. limited a little
	□ No
Page 28	

Individual questions — Person	5
20 What passports do you hold? Tick all that apply	23 What is your ethnic group? Choose ONE section from A to F, then tick ONE box which best describes your ethnic group or
☐ United Kingdom	background
☐ Ireland	A White Scottish
Other, please write in:	Other British
	☐ Irish
	☐ Polish
□ Ness	Gypsy / Traveller
None	Roma
21 What religion, religious denomination of	Showman / Showwoman
body do you belong to? This question is voluntary	Other white ethnic group, please write in:
None	
☐ Church of Scotland	B Mixed or multiple ethnic groups
Roman Catholic	Any mixed or multiple ethnic groups, please write in:
Other Christian, please write in below:	
☐ Muslim, write in denomination or school bel	ow:
☐ Hindu	C Asian, Scottish Asian or British Asian
☐ Buddhist	Pakistani, Scottish Pakistani or British
Sikh	Indian, Scottish Indian or British Indian
☐ Jewish	Bangladeshi, Scottish Bangladeshi or British Bangladeshi
☐ Pagan	Chinese, Scottish Chinese or British Chinese
Another religion or body, please write in:	Other, please write in:
22 What do you feel is your national ident	D African, Scottish African or British African
Tick all that apply	Please write in (for example, NIGERIAN, SOMALI):
☐ Scottish	
☐ English	E Caribbean or Black
☐ Northern Irish	Please write in (for example, SCOTTISH
Welsh	CARIBBEAN, BLACK SCOTTISH):
British	
Other, please write in:	F Other ethnic group Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH,
	JEWISH):
Ном Р	
L	Page 29

Individual questions — Person 5	
24 If you are aged 16 or over ⇒ go to 25 If you are aged 15 or under ⇒ go to 41	27 In the last seven days, were you doing any of the following? ♦ Include casual or temporary work, even if only
25 Which of these qualifications do you have? ♦ Tick all that apply	for one hour ◆ Tick all that apply Working as an employee → go to 33
O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent Apprenticeship (trade or equivalent)	 Self-employed or freelance → go to 33 Temporarily away from work ill, on holiday or temporarily laid off → go to 33 On maternity or paternity leave → go to 33 Doing any other kind of paid work → go to 33
Apprenticeship (Foundation or equivalent)	☐ None of the above
Apprenticeship (Modern or equivalent) Apprenticeship (Graduate or equivalent)	28 Which of the following describes what you were doing in the last seven days? ◆ Tick all that apply
GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent	Retired (whether receiving a pension or not) Studying Looking after home or family
GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Long-term sick or disabled Other
☐ HNC, HND, SVQ level 4 or equivalent	29 In the last four weeks, were you actively looking for any kind of paid work?
Other school qualifications not already mentioned (including foreign qualifications)	Yes No
Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)	30 If a job became available now, could you start it within two weeks? No
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	31 In the last seven days, were you waiting to start a job already accepted?
Professional qualifications (for example, teaching, nursing, accountancy)	Yes No 32 Have you ever done any paid work?
Other Higher Education qualifications not already mentioned (including foreign qualifications)	Yes, in the last 12 months Yes, but not in the last 12 months
☐ No qualifications	No, have never worked → go to 41 33 Answer the remaining questions for your
26 Have you previously served in the UK Armed Forces? Current serving members should only tick 'No'	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
☐ No ☐ Yes, previously served in Regular Armed Forces ☐ Yes, previously served in Researce Armed Forces	34 In your main job, what is (was) your employment status? □ Employee □ Self-employed or freelance without employees
Yes, previously served in Reserve Armed Forces	Self-employed or freelance without employees Self-employed with employees
Page 30	

Individual questions — Person 5	
35 What is (was) the name of the organisation or business you work (worked) for? ◆ If you are (were) self-employed in your own business, please write in your business name:	41 If you currently work or study (or both) → go to 42 If you do not currently work or study, including if you are retired → go to 44
or ☐ No organisation or work (worked) for a private individual	42 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
36 What is (was) your full job title? ◆ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER ◆ Do not state your grade or pay band	 Work mainly at, or from, home ⇒ go to 44 Distance learning, home schooled or equivalent ⇒ go to 44 No fixed place ⇒ go to 43 Work on an offshore installation ⇒ go to 43 The address below, please write in:
37 Briefly describe what you do (did) in your main job.	Postcode The address entered above is my place of Work Study
38 What is (was) the main activity of your organisation, business or freelance work? ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND ◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT 39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	43 How do you usually travel to your main job or course of study (including school)? ◆ Answer for your usual travel to the place where you spend the most time ◆ Tick the box for the longest part of your journey by distance ◆ Tick one box only □ Driving a car or van □ Passenger in a car or van □ Taxi or private hire □ Motorcycle, scooter or moped □ On foot □ Bicycle □ Bus, minibus or coach □ Train □ Underground, subway or tram □ Other
 Yes	44 There are no more questions for Person 5. ♦ If there are more people in your household, call our helpline FREEPHONE 0800 030 8308 to ask for a Continuation Questionnaire
0 to 15 16 to 30 31 to 48 49 or more	 If you included anyone in question H5, record their details on the back page Remember to sign the declaration on page 1 Page 31

Household questions — people (H5 continued)	
Do not record details of household members here. Record details only for anyone counted in question H5 on page 3 (people whose permanent or family home is elsewhere). ◆ For more than three people, write their answers on a separate piece of paper and include it with this questionnaire. Remember to include children and babies ◆ Please make sure you have filled in the rest of the questionnaire and signed the declaration on page 1	
Person A	
V1 What is this person's name?	V4 What is this person's usual UK address?
First name(s) Last name	
V2 What is this person's date of birth?	
Day Month Year	Postcode
V3 What is this person's sex?	Outside the UK, please write in country:
Female Male	
Person B	
V1 What is this person's name?	V4 What is this person's usual UK address?
First name(s)	Same as Person A
Last name	
V2 What is this person's date of birth?	
Day Month Year	Postcode
V3 What is this person's sex?	Outside the UK, please write in country:
Female Male	
Person C	
V1 What is this person's name?	V4 What is this person's usual UK address?
First name(s)	Same as Person A
Last name	
Last name	
V2 What is this person's date of birth?	
Day Month Year	Postcode
V3 What is this person's sex?	Outside the UK, please write in country:
Female Male	Oddside the Or, please write in country.

SCHEDULE 6

Regulation 3(16)

Paper Household Individual Questionnaire



Individual Questionnaire (HI)

21 March 2021

		If there is a mistake in the printed address, please write your correct address below: Postcode
	Scotland's Census 2021	Completing online
	Scotland's Census is the official count of every person and household in the country.	You can complete this questionnaire online. Visit www.census.gov.scot and use the code below.
	The census is held every ten years and the answers you give to the questions will help shape Scotland's future public services.	Your Internet Access Code:
	What we would like you to do	Help and support
	Please complete this questionnaire on paper or online at www.census.gov.scot	The leaflet included has more information about how we can help and support you to complete the
	You should provide information that is correct as of Sunday, 21 March 2021.	census questionnaire.
	As you have requested to complete an individual census questionnaire, you have a	You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.
	legal responsibility to complete it. You may be prosecuted if you refuse to complete the	Start here
	questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and	Please make sure you are listed as a household member on the Household Questionnaire.
	fine. The questions about trans status or history, sexual orientation, and religion are voluntary. You	Copy your person number, as given in question H3 on a Household Questionnaire, or in question C2 on a Continuation Questionnaire, here:
	do not have to answer these questions if you do not want to.	Person number
	Please make sure you are listed as a household	Please refer to page 2 for full instructions.
	member on the Household Questionnaire.	Declaration
	Our pledge to you	The information provided in this questionnaire is full and accurate, as far as I know.
	Your census return will be kept secure and will be kept confidential for 100 years.	Signature
		Olgridatio
	£2.	
1.0	Paul Lowe, Registrar General for Scotland	Date
É	Thank you for helping to shape Scotland's future	[

Important	guidance -	before y	you start
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What you have to do

- · please check that the household address recorded on page 1 of this questionnaire is correct
- make sure you are included as a household member on the Household Questionnaire for the address on this questionnaire

If your Household Questionnaire was completed:

- ♦ ONLINE, make sure you are included as a household member in the online questionnaire, you will not need to write in a person number on page 1 of this questionnaire
- ON PAPER, make sure you are included as a household member in either:
 - question H3 on page 3 of a Household Questionnaire; or
 - question C2 on page 1 of a Continuation Questionnaire (this is used only if there are more than five people living in your household)
 - → Copy your person number, from H3 or C2 on to page 1 of this questionnaire
- fill in questions 1 to 44 on pages 3 to 7 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 a black ink ballpoint pen
- tick your answers within the box like this:
- print your answers, in English, within the boxes like this: SMITH
- · use capital letters one per box
- if a word will not fit on one line, continue on to the next line like this, if possible:

1	3	0	L	Α	D	У	W	Е	L	L	С	R	Ε	S	С
F	N	Т				П									

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

Individual questions	コ
1 What is your name?	8 Which of the following best describes your sexual orientation?
First name(s)	This question is voluntary
	 Answer only if you are aged 16 or over Tick one box only
Last name	Straight / Heterosexual
	Gay or Lesbian
2 What is your date of birth? Day Month Year	Bisexual
	Other sexual orientation, please write in:
3 What is your sex?	
Female Male	9 What is your country of birth?
4 Do you consider yourself to be trans, or	Scotland ⇒ go to 11
have a trans history?	☐ England → go to 11
 This question is voluntary Answer only if you are aged 16 or over 	Northern Ireland → go to 11
 Trans is a term used to describe people whose gender is not the same as the sex they were 	☐ Wales → go to 11
registered at birth Tick one box only	Republic of Ireland
□ No	Elsewhere, please write in the current name of
Yes, please describe your trans status (for	the country:
example, non-binary, trans man, trans woman):	
	10 If you were not born in the United Kingdom, when did you most recently arrive to live
5 On 21 March 2021, what is your legal	here? Do not count short visits away from the UK
marital or registered civil partnership status?	Month Year
Never married and never registered in a civil partnership	
☐ Married	11 One year ago, what was your usual address?
In a registered civil partnership	If you had no usual address one year ago, state the address where you were staying
Separated, but still legally married	the address where you were staying
Separated, but still legally in a civil partnership	☐ The address on the front of the questionnaire
Formerly in a civil partnership which is now	Student term-time / boarding school address in
legally dissolved	the UK, please write in below: Another address in the UK, please write in:
Widowed	Another address in the Ort, please write in.
Surviving partner from a civil partnership	
6 Are you a schoolchild or student in full-time education?	
☐ Yes	Postcode
☐ No ⇒ go to 8	Posicode
7 During term-time, do you live:	
at the address on the front of this questionnaire?	Outside the UK, please write in country:
at another address? → go to 44	
L	Page 3

12 Do you look after, or give any help or support to family members, friends, neighbours or others because of either:	Individual questions	
No Do you have any of the following, which have lasted, or are expected to last, at least 12 months? Tick all that apply Developmental disorder (a condition that you have and since childhood which affects motor, cognitive, social and emotional skills, and speech and language) No Developmental disorder (a condition that substantially limits one or more basic physical and emotoral skills, and speech and language) No Developmental disorder (a condition that substantially limits one or more basic physical activities such as walking, climbing skills in either language No condition Other, please write in (including BSL and TACTILE BSL): No No condition No condition	12 Do you look after, or give any help or	17 How is your health in general?
Do you have any of the following, which have lasted, or are expected to last, at least 12 months?	neighbours or others because of either: • long-term physical / mental ill-health / disability; or	Very good Good Fair Bad Very bad
Yes, 1 to 19 hours a week	Do not count anything you do as part of your	have lasted, or are expected to last, at least 12 months?
Yes, 20 to 34 hours a week See	□ No	
Yes, 35 to 49 hours a week Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak) 13 How well can you understand, speak, read and write English? Tick one box in each column		
Yes, 50 or more hours a week		
and write English? ◆ Tick one box in each column Understand Speak Read Write (spoken) Very well		(a condition that requires you to use equipment
that affects the way you learn and process information) Very well	and write English?	had since childhood that affects the way you
Well		that affects the way you learn and process
Not well		have had since childhood which affects motor,
14 Can you understand, speak, read and write Scottish Gaelic or Scots? Tick all that apply	Not well	
Scottish Gaelic or Scots? ↑ Tick all that apply Understand Speak Read Write (spoken) Scottish Gaelic	Not at all	limits one or more basic physical activities such
Scottish Gaelic	Scottish Gaelic or Scots?	
or □ No skills in either language 15 Can you use British Sign Language (BSL)? □ Yes □ No 16 What is your main language? ◆ Tick one box only □ English □ Other, please write in (including BSL and TACTILE BSL): □ No condition 19 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	(spoken)	condition, not listed above, that you may have for life, which may be managed with treatment
No skills in either language 15 Can you use British Sign Language (BSL)? Yes No No condition	Scots \square \square \square	Other condition, please write in:
15 Can you use British Sign Language (BSL)? ☐ Yes ☐ No 16 What is your main language? It ick one box only ☐ English ☐ Other, please write in (including BSL and TACTILE BSL): ☐ No condition 19 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		
Yes	☐ No skills in either language	
16 What is your main language? ↑ Tick one box only □ English □ Other, please write in (including BSL and TACTILE BSL): □ No	15 Can you use British Sign Language (BSL)?	☐ No condition
16 What is your main language? ↑ Tick one box only 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	Yes No	19 Are your day-to-day activities limited
Other, please write in (including BSL and TACTILE BSL): Yes, limited a lot Yes, limited a little No		because of a health problem or disability which has lasted, or is expected to last, at least 12 months?
TACTILE BSL): Yes, limited a little No	☐ English	
□ No		
	Page 4	ا ا

Individual questions	コ
20 What passports do you hold? ◆ Tick all that apply	23 What is your ethnic group? ♦ Choose ONE section from A to F, then tick ONE box which best describes your ethnic group or
☐ United Kingdom	background
☐ Ireland	A White
Other, please write in:	Scottish
	Other British
	☐ Irish☐ Polish
	Gypsy / Traveller
None	Roma
21 What religion, religious denomination or	Showman / Showwoman
body do you belong to? This question is voluntary	Other white ethnic group, please write in:
☐ None	
Church of Scotland	B Mixed or multiple ethnic groups
Roman Catholic	Any mixed or multiple ethnic groups, please write in:
Other Christian, please write in below:	
Muslim, write in denomination or school below:	
Hindu	C Asian, Scottish Asian or British Asian
Buddhist	Pakistani, Scottish Pakistani or British
Sikh	Pakistani Indian, Scottish Indian or British Indian
☐ Jewish	☐ Bangladeshi, Scottish Bangladeshi or British
Pagan	Bangladeshi Chinese, Scottish Chinese or British Chinese
	Other, please write in:
Another religion or body, please write in:	Curici, picaso wino in:
22 What do you feel is your national identity?	D African, Scottish African or British African Please write in (for example, NIGERIAN,
♦ Tick all that apply	SOMALI):
Scottish	
☐ English	E Caribbean or Black
☐ Northern Irish	Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):
☐ Welsh	SANIBERI, BENINGSOFHISH).
British	F Ohara Maria arrays
Other, please write in:	F Other ethnic group Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH,
9	JEWISH):
HM1.0	
L	Page 5

Individual questions	\neg
24 If you are aged 16 or over go to 25 If you are aged 15 or under go to 41	27 In the last seven days, were you doing any of the following? ◆ Include casual or temporary work, even if only
25 Which of these qualifications do you have? ♦ Tick all that apply	for one hour ◆ Tick all that apply Working as an employee go to 33
O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent Apprenticeship (trade or equivalent) Apprenticeship (Foundation or equivalent)	 Self-employed or freelance → go to 33 Temporarily away from work ill, on holiday or temporarily laid off → go to 33 On maternity or patemity leave → go to 33 Doing any other kind of paid work → go to 33 None of the above
Apprenticeship (Modern or equivalent) Apprenticeship (Graduate or equivalent)	28 Which of the following describes what you were doing in the last seven days? ♦ Tick all that apply ☐ Retired (whether receiving a pension or not)
GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent	Studying Looking after home or family Long-term sick or disabled
GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Other 29 In the last four weeks, were you actively
HNC, HND, SVQ level 4 or equivalent Other school qualifications not already mentioned (including foreign qualifications)	looking for any kind of paid work?
Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)	30 If a job became available now, could you start it within two weeks? No
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	31 In the last seven days, were you waiting to start a job already accepted?
Professional qualifications (for example, teaching, nursing, accountancy)	Yes No 32 Have you ever done any paid work?
Other Higher Education qualifications not already mentioned (including foreign qualifications)	Yes, in the last 12 months Yes, but not in the last 12 months
☐ No qualifications	No, have never worked → go to 41 33 Answer the remaining questions for your
26 Have you previously served in the UK Armed Forces? Current serving members should only tick 'No'	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
 No Yes, previously served in Regular Armed Forces Yes, previously served in Reserve Armed Forces 	34 In your main job, what is (was) your employment status? Employee Self-employed or freelance without employees Self-employed with employees
Page 6	

35 What is (was) the name of the organisation or business you work (worked) for? ↑ If you are (were) self-employed in your own business, please write in your business name. □ □ No organisation or work (worked) for a private individual or provided in your pro	Individual questions	
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. Work mainly at, or from, home go to 44 Distance learning, home schooled or equivalent go to 44. No fixed place go to 43. The address below, please write in:	or business you work (worked) for? If you are (were) self-employed in your own	→ go to 42 If you do not currently work or study, including
36 What is (was) your full job title? For example, RETAILLASSISTANT OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER Do not state your grade or pay band 37 Briefly describe what you do (did) in your main job. 38 What is (was) the main activity of your organisation, business or freelance work? For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, Social SERVICES, TRANSPORT DEPARTMENT 39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis? Yes		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
main job. Postcode	◆ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER	 □ Distance learning, home schooled or equivalent → go to 44 □ No fixed place → go to 43 □ Work on an offshore installation → go to 43
organisation, business or freelance work? For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT On foot Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train Underground, subway or tram Other Other 44 There are no more individual questions. Remember to sign the declaration on page 1 Post the questionnaire back using the pre-paid		The address entered above is my place of
Bicycle Bus, minibus or coach Train Underground, subway or tram Other Other	organisation, business or freelance work? ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND ◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT	or course of study (including school)? Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped
44 There are no more individual questions. 40 In your main job, how many hours a week do (did) you usually work? Include paid and unpaid overtime Post the questionnaire back using the pre-paid	of other employees on a day-to-day basis?	Bicycle Bus, minibus or coach Train Underground, subway or tram
0 to 15 16 to 30 31 to 48 49 or more envelope provided	40 In your main job, how many hours a week do (did) you usually work? Include paid and unpaid overtime	Remember to sign the declaration on page 1
Page 7	0 to 15 16 to 30 31 to 48 49 or more	

SCHEDULE 7

Regulation 3(16)

Paper Communal Establishment Questionnaire



Communal Establishment Questionnaire (CE)

21 March 2021

	If there is a mistake in the printed address, please write your correct address below: Postcode
Scotland's Census 2021	Completing online
Scotland's Census is the official count of ever person in the country.	You can complete this questionnaire online. Visit www.census.gov.scot and use the code below.
The census is held every ten years and the answers you give to the questions will help sh Scotland's future public services.	Your Internet Access Code:
What we would like you to do	Help and support
Please complete this questionnaire on paper online at www.census.gov.scot	Or Refer to the Guidance Note for Managers for information on what you need to do and how to get help if you need it.
You should provide information that is correct of Sunday, 21 March 2021.	
As the manager or person in charge, you have a legal duty to complete this questionnaire. You also have a legal responsibility to make arrangements for an individual questionnaire to be completed for any resident who is under 16 years of age or is incapable of doing so themselves. You may be prosecuted if you refuse to comp the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal recorded the second of the second	What you have to do Identify all usual residents and visitors to your establishment Number of usual residents: Number of visitors:
Our pledge to you Your census return will be kept secure and wikept confidential for 100 years.	Declaration The information provided in this questionnaire is full and accurate, as far as I know. Signature
Paul Lowe, Registrar General for Scotland Thank you for helping to shape Scotland's fut	Date

Establishment questions					
How to fill in this questionnaire					
This questionnaire will be scanned by a computer. please follow the instructions below:	To make sure we record your answers correctly,				
use a black ink ballpoint pen					
tick your answers within the box like this:					
DO NOT draw a line through questions or pages. T	he computer may mistake this for an answer.				
1 What is the nature of this establishment? ♦ Tick one box only	2 For questions 3 and 4 if there are no residents, write in number zero like this:				
Medical and care	3 How many female residents usually reside				
General hospital	at this establishment in each of the age ranges below?				
Mental health hospital (including inpatient units)	0 to 15 years old				
Other hospital					
Care home without nursing	16 to 24 years old				
Care home with nursing	25 to 34 years old				
Children's home	35 to 49 years old				
Other medical and care establishment	50 to 64 years old				
Education	65 years old and over				
☐ School	So your old dild over				
Halls of residence / student accommodation	4 How many male residents usually reside at this establishment in each of the age				
Other educational establishment	ranges below?				
Armed Forces	0 to 15 years old				
Defence establishment (including ships)	16 to 24 years old				
Detention	25 to 34 years old				
Prison or young offenders' institution	35 to 49 years old				
Immigration removal centre	50 to 64 years old				
Travel	65 years old and over				
Hotel, guest house, B&B, youth hostel	5 Who is responsible for the management of				
Leisure / holiday establishment	this establishment?				
Other travel establishment	♦ Tick one box only				
	□ NHS				
Hostel or shelter Hostel or shelter for the homeless	☐ Local Authority				
Other hostel or shelter establishment	Government department or agency				
Other hoster of sheller establishment	Registered social landlord or housing association				
Other	Charity or voluntary organisation				
Religious establishment	Private owner or company				
Staff / worker accommodation only	☐ Higher or further education institution	0			
Other establishment	Other	CEV1.			
Page 2		/m-equings			

SCHEDULE 8

Regulation 3(16)

Paper Communal Establishment Individual Questionnaire



Individual Questionnaire (CI)

21 March 2021

	If there is a mistake in the printed address, please write your correct address below: Postcode
Scotland's Census 2021	Completing online
Scotland's Census is the official count of every person in the country. The census is held every ten years and the answers you give to the questions will help shape Scotland's future public services.	You can complete this questionnaire online. Visit www.census.gov.scot and use the code below. Your Internet Access Code:
The census will count everyone in Scotland on 21 March 2021, whether they usually live here or not. What we would like you to do Please complete this questionnaire on paper or online at www.census.gov.scot	Help and support The leaflet included has more information about how we can help and support you to complete the census questionnaire. You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.
You should provide information that is correct as of Sunday, 21 March 2021. You have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine. The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do	Start here R1 Do you (or the person you are filling this in for) stay here because you are: a resident (for example, patient, student, member of Armed Forces)? a member of staff or the owner? a family member, or partner, of a member of staff or the owner?
Our pledge to you Your census return will be kept secure and will be kept confidential for 100 years. Paul Lowe, Registrar General for Scotland Thank you for helping to shape Scotland's future	Declaration I am aged 16 years or over and the information in this questionnaire is full and accurate, as far as I know. The information in this questionnaire is about: me a person aged under 16 years or otherwise incapable of completing the questionnaire Signature Date

Important guidance — before you start]
What you have to do	
answer question R1 on page 1 of this questionnaire	
answer questions 1 to 44 on pages 3 to 7 of this questionnaire	
if you need help to complete your questionnaire, you can ask a family member, carer or the person in charge of your establishment to help you fill it in	
sign the declaration on page 1 and 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, it is their information you need to write in.	
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 a black ink ballpoint pen	
tick your answers within the box like this:	
print your answers, in English, within the boxes like this: SMITH	
use capital letters – one per box	
correct any mistakes like this:	
if a word will not fit on one line, continue on to the next line like this, if possible:	
130 LADYWELL CRESC	
ENT	
DO NOT draw a line through questions or pages. The computer may mistake this for an answer.	CIVI.0
Page 2	

	Individual questions	コーニー コーニー コーニー コーニー コーニー コーニー コーニー コーニー
	1 What is your name?	8 Which of the following best describes your
	First name(s)	sexual orientation? ♦ This question is voluntary
		Answer only if you are aged 16 or over Tick one box only
	Last name	
		Straight / Heterosexual
(2 What is your date of birth?	Gay or Lesbian
	Day Month Year	☐ Bisexual
		Other sexual orientation, please write in:
(3 What is your sex?	
	☐ Female ☐ Male	9 What is your country of birth?
	4 Do you consider yourself to be trans, or	Scotland ⇒ go to 11
	have a trans history?	
	 This question is voluntary Answer only if you are aged 16 or over 	☐ England → go to 11
	 Trans is a term used to describe people whose 	Northern Ireland → go to 11
	gender is not the same as the sex they were registered at birth	Wales → go to 11
	♦ Tick one box only	Republic of Ireland
	□ No	Elsewhere, please write in the current name of the country:
	Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	
		10 If you were not born in the United Kingdom,
	5 On 21 March 2021, what is your legal	when did you most recently arrive to live here?
	marital or registered civil partnership	♦ Do not count short visits away from the UK
	status?	Month Year
	Never married and never registered in a civil partnership	
	Married	11 One year ago, what was your usual address?
	In a registered civil partnership	 If you had no usual address one year ago, state
	Separated, but still legally married	the address where you were staying
	Separated, but still legally in a civil partnership	The address on the front of the questionnaire
	Divorced	Student term-time / boarding school address in
	Formerly in a civil partnership which is now legally dissolved	the UK, please write in below:
	☐ Widowed	Another address in the UK, please write in:
	Surviving partner from a civil partnership	
(6 Are you a schoolchild or student in	
	full-time education?	
	Yes	Postcode
	No go to 8	
1	7 During term-time, do you live:	
0	at the address on the front of this questionnaire?	Outside the UK, please write in country:
CIV1.0	☐ at another address? → go to 44	
		Page 3

Individual questions	
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either: • long-term physical / mental ill-health / disability; or	Very good Good Fair Bad Very bad
problems related to old age? Do not count anything you do as part of your paid employment	18 Do you have any of the following, which have lasted, or are expected to last, at least 12 months?
□ No	Tick all that apply
Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	☐ Blindness or partial sight loss
Yes, 35 to 49 hours a week Yes, 50 or more hours a week	Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak)
13 How well can you understand, speak, read and write English? Tick one box in each column	Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)
Understand Speak Read Write (spoken)	Learning difficulty (a specific learning condition that affects the way you learn and process information)
Very well	Developmental disorder (a condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language)
Not at all	Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
14 Can you understand, speak, read and write Scottish Gaelic or Scots? ◆ Tick all that apply	Mental health condition (a condition that affects your emotional, physical and mental wellbeing)
Understand Speak Read Write (spoken) Scottish Gaelic	Long-term illness, disease or condition (a condition, not listed above, that you may have for life, which may be managed with treatment or medication)
Scots	Other condition, please write in:
or	
No skills in either language	
15 Can you use British Sign Language (BSL)?	☐ No condition
Yes No	19 Are your day-to-day activities limited
16 What is your main language? ♦ Tick one box only	because of a health problem or disability which has lasted, or is expected to last, at least 12 months?
☐ English	♦ Include problems related to old age
Other, please write in (including BSL and TACTILE BSL):	Yes, limited a lot
	Yes, limited a little
Page 4	

23 What is your ethnic group?	Individual questions	
United Kingdom Ireland Other, please write in: Other, please write in: Other, please write in: Irish Polish Gypsy / Traveller Roma Showman / Showwoman Other white ethnic group, please write in: Other Christian, please write in below: Muslim, write in denomination or school below: Hindu Buddhist Sikh Jewish Pagan Another religion or body, please write in: Dafrican, Scottish Asian or British Asian Pakistani Indian, Scottish Indian or British Indian Bangladeshi, Scottish Chinese or British Chinese Other, please write in: Other, please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH); Caribbean or British Arab Other, please write in (for example, SIKH, JEWSH); Other, please write in (for example, SIKH, JE	20 What passports do you hold? Tick all that apply	23 What is your ethnic group? ♦ Choose ONE section from A to F, then tick ONE
Scottish Other please write in: Scottish Other British Irish Polish Gypsy / Traveller Roma Showman / Showman Showman Showman / Showman Showman / Showman Showman / Showman Other white ethnic group, please write in: Start Showman / Showman Show	United Kingdom	box which best describes your ethnic group or
Other, please write in: Other British		A White
None		☐ Scottish
Polish Gypsy / Traveller Roma Showman / Showman Other white ethnic group, please write in: Other Christian, please write in below: Muslim, write in denomination or school below: Hindu Buddhist Bikh Jewish Pagan Another religion or body, please write in: Pagan Another religion or body, please write in: D African, Scottish African or British Chinese Other, please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish African or British African Please write in: D African, Scottish British D African, Scottish Brit	U Other, please write in:	Other British
None Gypsy / Traveller Roma Showman / Showwoman Showman / Showman / Showman Showman / Showman		☐ Irish
Roma Roma Roma Showman / Showwoman Showman / Showwoman Showman / Showwoman Other white ethnic group, please write in: Other multiple e		Polish
Showman / Showman Showman Showman Showman Showman Showman / Showman Showman Showman / Showman Showman Showman / Showman Showman Showman / Showman Showman / Showman / Showman / Showman / Showman / Showman / Showman Showman / Showman Showman / Sho	None	Gypsy / Traveller
body do you belong to? ↑ This question is voluntary □ None □ Church of Scotland □ Roman Catholic □ Other Christian, please write in below: □ Muslim, write in denomination or school below: □ Hindu □ Buddhist □ Sikh □ Jewish □ Pagan □ Another religion or body, please write in: □ Other, please write in your national identity? ↑ Tick all that apply □ Scottish □ Roman Catholic □ Other, please write in: □ D African, Scottish Asian or British Asian □ Pakistani, Scottish Pakistani or British Pakistani □ Indian, Scottish Indian or British Indian □ Bangladeshi, Scottish Bangladeshi or British Bangladeshi □ Chinese, Scottish Chinese or British Chinese □ Other, please write in: □ D African, Scottish African or British African □ Please write in (for example, NIGERIAN, SOMALI): □ D African, Scottish African or British African □ Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): □ Other, please write in: □ Other, please write in (for example, SIKH, JEWISH):		Roma
 ↑ This question is voluntary None Church of Scotland Roman Catholic Other Christian, please write in below: Hindu Buddhist Sikh Jewish Pagan Another religion or body, please write in: Thick all that apply Scottish Scottish Pick all that apply Scottish British Other, please write in: F Other ethnic group, please write in: Mixed or multiple ethnic groups, please write in: Any mixed or multiple ethnic groups, please write in: Any mixed or multiple ethnic groups, please write in: Any mixed or multiple ethnic groups, please write in: Any mixed or multiple ethnic groups, please write in: Any mixed or multiple ethnic groups, please write in: Any mixed or multiple ethnic groups, please write in: Any mixed or multiple ethnic groups, please write in: Dain and scottish Asian or British Asian Pakistani, Scottish Pakistani or British Chinese or British Chinese or British African Please write in: Please write in: Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): Any mixed or multiple ethnic group, please write in: Dain and scottish Asian or British Asian Please write in: Dain and scottish Asian or British Asian Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): Tother ethnic group, please write in: Other, please write in (for example, SIKH, JEWISH): 		
Church of Scotland Roman Catholic Other Christian, please write in below: Muslim, write in denomination or school below: Hindu Buddhist Sikh Jewish Pagan Another religion or body, please write in: D African, Scottish African or British Indian D African, Scottish African or British African C Asian, Scottish Indian or British Indian D African, Scottish Chinese or British Chinese Other, please write in: D African, Scottish African or British African Please write in (for example, NIGERIAN, SOMALI): E Caribbean or Black Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): F Other ethnic group Arab, Scottish Arab or British Arab Other, please write in (for example, SIKH, JEWISH):		Other white ethnic group, please write in:
Roman Catholic Chief Christian, please write in below: Muslim, write in denomination or school below: Hindu Buddhist Pakistani, Scottish Pakistani or British Asian Pakistani Sikh Indian, Scottish Pakistani or British Indian Bangladeshi, Scottish Bangladeshi or British Bangladeshi, Scottish Bangladeshi or British Bangladeshi, Chinese, Scottish Chinese or British Chinese Other, please write in: D African, Scottish African or British African Please write in (for example, NIGERIAN, SOMALI): E Caribbean or Black Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): F Other ethnic group Arab, Scottish Arab or British Arab Other, please write in (for example, SIKH, JEWISH): SIKH, JEWISH SIK	None	
Roman Catholic Other Christian, please write in below: Muslim, write in denomination or school below: Hindu Buddhist Sikh Pakistani Sikh Indian, Scottish Asian or British Asian Pakistani, Scottish Pakistani or British Pakistani Indian, Scottish Indian or British Indian Bangladeshi, Scottish Bangladeshi or British Bangladeshi Chinese, Scottish Chinese or British Chinese Other, please write in: D African, Scottish African or British African Please write in (for example, NIGERIAN, SOMALI): E Caribbean or Black Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): F Other ethnic group Arab, Scottish Arab or British Arab Other, please write in (for example, SIKH, JEWISH): SIKH, JEWISH: SIKH, JEWISH:	Church of Scotland	B Mixed or multiple ethnic groups
Muslim, write in denomination or school below: Hindu		
Hindu Buddhist Sikh Jewish Pagan Another religion or body, please write in: C Asian, Scottish Asian or British Asian Pakistani, Scottish Pakistani or British Indian Bangladeshi, Scottish Bangladeshi or British Bangladeshi or British Bangladeshi Chinese, Scottish Chinese or British Chinese Other, please write in: D African, Scottish African or British African Please write in (for example, NIGERIAN, SOMALI): D African, Scottish African or British African Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): Welsh Other, please write in: Other, please write in (for example, SIKH, JEWISH):	Other Christian, please write in below:	
Buddhist ☐ Pakistani, Scottish Pakistani or British ☐ Sikh ☐ Indian, Scottish Indian or British Indian ☐ Pagan ☐ Bangladeshi, Scottish Bangladeshi or British Bangladeshi ☐ Chinese, Scottish Chinese or British Chinese ☐ Other, please write in: ☐ D African, Scottish African or British African ☐ Please write in (for example, NIGERIAN, SOMALI): ☐ Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): ☐ Welsh ☐ Other, please write in: ☐ Other, please write in (for example, SCOTTISH): ☐ Other, please write in (for example, SIKH, JEWISH):	☐ Muslim, write in denomination or school below:	
Sikh Indian, Scottish Indian or British Indian Pakistani Indian, Scottish Bangladeshi or British Bangladeshi Chinese, Scottish Chinese or British Chinese Other, please write in: Other, please write in (for example, NIGERIAN, SOMALI): E Caribbean or Black Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): Other, please write in: Other, please write in (for example, SCOTTISH): Please write in (for example, SCOTTISH): Other, please write in (for example, SIKH, JEWSH): Other, please write in (for example, SIKH, JEWS	Hindu	C Asian, Scottish Asian or British Asian
□ Sikh □ Indian, Scottish Indian or British Indian □ Jewish □ Bangladeshi, Scottish Bangladeshi or British Bangladeshi □ Chinese, Scottish Chinese or British Chinese □ Other, please write in: □ Other, please write in: □ D African, Scottish African or British African □ Please write in (for example, NIGERIAN, SOMALI): □ Scottish □ Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): □ Other, please write in: □ Other, please write in (for example, SIKH, JEWSH):	☐ Buddhist	
Pagan Chinese, Scottish Chinese or British Chinese Other, please write in: Other, please write in: Other, please write in: Other, please write in: Other, please write in (for example, NIGERIAN, SOMALI): Please write in (for example, NIGERIAN, SOMALI): Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): CARIBBEAN, BLACK SCOTTISH): Please write in (for example, SCOTTISH): Other, please write in: Other, please write in (for example, SIKH, JEWISH): Other, please write in (for example, SIKH	☐ Sikh	
□ Pagan □ Chinese, Scottish Chinese or British Chinese □ Another religion or body, please write in: □ Other, please write in: □ What do you feel is your national identity? ♦ Tick all that apply □ Scottish □ Please write in (for example, NIGERIAN, SOMALI): □ Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): □ Welsh □ Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): □ Other, please write in: □ Other, please write in (for example, SIKH, JEWISH):	☐ Jewish	
22 What do you feel is your national identity?	☐ Pagan	
22 What do you feel is your national identity? ↑ Tick all that apply Scottish English Northern Irish Welsh Other, please write in: The other please write in (for example, NIGERIAN, SOMALI): FOther ethnic group Arab, Scottish Arab or British Arab Other, please write in (for example, SIKH, JEWISH):	Another religion or body, please write in:	Other, please write in:
Please write in (for example, NIGERIAN, SOMALI): Scottish		
Please write in (for example, NIGERIAN, SOMALI): Scottish		D African, Scottish African or British African
□ Scottish □ English □ Northern Irish □ Welsh □ British □ Other, please write in: □ Other, please write in: □ Other, please write in (for example, SCOTTISH): □ Caribbean or Black □ Please write in (for example, SCOTTISH): □ Please write in (for example, SCOTTISH): □ Other, please write in (for example, SIKH, JEWISH):		Please write in (for example, NIGERIAN,
Northern Irish Welsh British Other, please write in: Other, please write in: Other, please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): The please write in (for example, SCOTTISH): The please write in (for example, SIKH, JEWISH):	Scottish	
Northern Irish Welsh British Other, please write in: Other, please write in: Other, please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH): The please write in (for example, SCOTTISH): The please write in (for example, SIKH, JEWISH):	☐ English	F. Caribbean or Black
CARIBBEAN, BLACK SCOTTISH): Welsh British Other, please write in: Other, please write in (for example, SIKH, JEWISH):		
British Other, please write in: Other, please write in: Other, please write in (for example, SIKH, JEWISH):		CARIBBEAN, BLACK SCOTTISH):
Other, please write in: Other, please write in:		
Other, please write in (for example, SIKH, JEWISH):		F Other ethnic group
JEWISH):	Other, please write in:	Arab, Scottish Arab or British Arab
	9	32110111
Page 5		Dans 51

Individual questions	
24 If you are aged 16 or over ⇒ go to 25 If you are aged 15 or under ⇒ go to 41	27 In the last seven days, were you doing any of the following? ♦ Include casual or temporary work, even if only for one hour
25 Which of these qualifications do you have? ♦ Tick all that apply	
O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent Higher, Advanced Higher, SCE Higher Grade,	□ Self-employed or freelance → go to 33 □ Temporarily away from work ill, on holiday or temporarily laid off → go to 33
CSYS, A Level, AS Level or equivalent Apprenticeship (trade or equivalent)	☐ On maternity or paternity leave → go to 33 ☐ Doing any other kind of paid work → go to 33
Apprenticeship (roundation or equivalent)	None of the above
Apprenticeship (Modern or equivalent)	28 Which of the following describes what you were doing in the last seven days?
Apprenticeship (Graduate or equivalent)	↑ Tick all that apply Retired (whether receiving a pension or not)
GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent	Studying Looking after home or family
GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Long-term sick or disabled Other
HNC, HND, SVQ level 4 or equivalent	29 In the last four weeks, were you actively looking for any kind of paid work?
Other school qualifications not already mentioned (including foreign qualifications)	Yes No
Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)	30 If a job became available now, could you start it within two weeks?
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	31 In the last seven days, were you waiting to start a job already accepted?
Professional qualifications (for example, teaching, nursing, accountancy)	Yes No 32 Have you ever done any paid work?
Other Higher Education qualifications not already mentioned (including foreign qualifications)	Yes, in the last 12 months Yes, but not in the last 12 months
☐ No qualifications	No, have never worked → go to 41 33 Answer the remaining questions for your
26 Have you previously served in the UK Armed Forces? Current serving members should only tick 'No'	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
□ No □ Yes, proviously served in Pegular Armed Forces	34 In your main job, what is (was) your employment status? □ Employee
Yes, previously served in Regular Armed Forces Yes, previously served in Reserve Armed Forces	Self-employed or freelance without employees
Page 6	

Individual questions	
35 What is (was) the name of the organisation or business you work (worked) for? ◆ If you are (were) self-employed in your own business, please write in your business name:	41 If you currently work or study (or both) → go to 42 If you do not currently work or study, including if you are retired → go to 44
or ☐ No organisation or work (worked) for a private individual 36 What is (was) your full job title? ◆ For example, RETAILASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER	42 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 Work mainly at, or from, home ⇒ go to 44 Distance learning, home schooled or equivalent ⇒ go to 44 No fixed place ⇒ go to 43
Do not state your grade or pay band	 Work on an offshore installation ⇒ go to 43 The address below, please write in:
37 Briefly describe what you do (did) in your main job.	Postcode The address entered above is my place of Work Study
38 What is (was) the main activity of your organisation, business or freelance work? ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND ◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT	43 How do you usually travel to your main job or course of study (including school)? ◆ Answer for your usual travel to the place where you spend the most time ◆ Tick the box for the longest part of your journey by distance ◆ Tick one box only □ Driving a car or van □ Passenger in a car or van □ Taxi or private hire □ Motorcycle, scooter or moped
39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	On foot Bicycle Bus, minibus or coach Train Underground, subway or tram Other
Yes No 40 In your main job, how many hours a week do (did) you usually work? ♦ Include paid and unpaid overtime 0 to 15 16 to 30 31 to 48 49 or more	44 There are no more individual questions. ♦ Remember to sign the declaration on page 1 ♦ Post the questionnaire back using the pre-paid envelope provided
0 to 15 16 to 30 31 to 48 49 or more	Page 7

EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations are made under the Census Act 1920. They are made for the purpose of enabling the Census (Scotland) Order 2020 ("the Order") to be carried into effect.

Regulation 3 sets out how a person required to make a return under the Order can make that return and when their obligation is discharged. It introduces schedules 1 to 4 which set out the questions, instructions and response options that a person making a return will be required to respond to if making a return online or by telephone, and schedules 5 to 8 which contain the questionnaires that a person making a return on paper will be required to use. The questions, instructions and response options in schedules 1 to 4 may be modified or translated for the purpose of making it easier for a person making a return to understand those questions, instructions and response options. The Registrar General may also modify the questionnaires in schedules 5 to 8 may for the purpose of making those questionnaires easier for a person making a return to understand or use.

Regulation 4 places duties on persons in charge of communal establishments to pass on access codes for online returns or paper questionnaires to those in their establishment required to make a return. (These access codes and questionnaires will have been provided by the Registrar General.) It also places a duty on those persons to collect completed paper questionnaires and deliver them to the Registrar General.

Regulation 5 imposes a duty to provide information reasonably required by the person obliged to make a census return to enable them to do so.

Regulation 6 provides that information given for census purposes must not be used, published or communicated other than for the purpose of the Census Act 1920, the Order or these Regulations.

Regulation 7 revokes the Census (Scotland) Regulations 2010 and the Census (Scotland) Amendment Regulations 2010.