#### 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—

<sup>(1) 1920</sup> 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).

<sup>(2)</sup> 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

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

<sup>(4)</sup> 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?	<ul> <li>✓ Housemates/flatmates or lodgers.</li> <li>✓ People staying temporarily who usually live in the UK but do not have another UK address.</li> <li>✓ People who usually live outside the UK who are staying in the UK for 6 months or more.</li> <li>The respondent is required to select one option only.</li> <li>The respondent can add the first and last names of any other individuals who usually live at the address here.</li> <li>The respondent is not required to add anyone who is temporarily away if they are listed under this question.</li> <li>The respondent is required to include:</li> <li>✓ People who work away from home within the UK, or are members of the Armed Forces, if this is their permanent or family home.</li> <li>✓ People temporarily away from home on the night of 21 March 2021.</li> <li>The respondent is required to select one option only.</li> </ul>	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?	<ul> <li>✓ People staying here because it is their second address, for example, for work or a holiday home. Their permanent or family home is elsewhere.</li> <li>✓ People who usually live somewhere else in the UK, for example, boy/girlfriends, friends, relatives.</li> <li>✓ People who usually live outside the UK who are staying in the UK for less than 6 months.</li> </ul>	□ 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		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	The respondent is required to		Owns with a mortgage or loan
household own or 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,			2
by members of this household?	The respondent is required to		3
	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 use the format DD MM YYYY		
A]'s date of birth?	in the boxes provided.		
What is [visitor A]'s sex?	The respondent is required to select one option only.		Female
71j 5 50A.	select one option only.		Male
What is [visitor A]'s usual UK	The respondent is required to select one option only.		An address in the UK
address?	If [visitor A] has an address in	П	Outside the UK
	the UK, the respondent should		
	provide the address.		
	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?			In a registered civil partnership
suus.			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	_		Gay or Lesbian
sexual orientation?	If the respondent chooses to respond to		Bisexual
required to s	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.	
One year ago, what was your usual address?	If the respondent had 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.	[Address]  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.	No 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
<ul> <li>long term physical / mental ill-health / disability; or</li> <li>problems related to old age?</li> </ul>		

you understand, speak, read and write English?  The respondent is required to select or option for each.		<ul> <li>Very well</li> <li>Well</li> <li>Not well</li> <li>Not at all</li> </ul>		
		I speak English—		
		<ul> <li>Very well</li> <li>Well</li> <li>Not well</li> <li>Not at all</li> </ul>		
		I read English—		
		Very well		
		• Well		
		<ul><li>Not well</li><li>Not at all</li></ul>		
		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, re	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	The respondent is		Deafness or partial hearing loss
of the following, which have	required to select all options that apply.	_	Plindness or partial sight loss
lasted, or are	options that appry.		Blindness or partial sight loss
months? selection contents	If the respondent selects "Other condition" they may enter their condition in the box provided.		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
		$ \Box$	Other condition
			or
			No condition
Are your day-to-	The respondent is		Yes, limited a lot
day activities	required to include		Yes, limited a little
limited because of a health	problems related to old age.		No
problem or	old age.	ш	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 provided.	
What religion, religious	This question is voluntary.	None
denomination or body do you	If the respondent chooses to respond to	Church of Scotland
belong to?	this question they are	Roman Catholic
	required to select one option only.	Other Christian
	opmon omy.	Muslim
	If the respondent selects "Other	Hindu
	Christian" they may	Buddhist
	enter their other Christian religion,	Sikh
	religious denomination or body in the box provided.	Jewish
		Pagan
	If the respondent selects "Muslim"	Another religion or body
	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	Scottish
is your national	required to select all	
identity?	options that apply.	English
	If the respondent selects "Other" they are required to enter	Northern Irish
		Welsh
their national identity in the box provided.	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)
1	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 research dent	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 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	The respondent is required to select one option only.	Arab, Scottish Arab or British Arab  Other (for example, "Sikh", "Jewish")
group or 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 (secondary or	The respondent is required to select all options that apply.	O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE, or equivalent
high school) qualifications do you have?		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 all	No or
Registered	options that apply.	Yes, trade or equivalent
Apprenticeship?		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 apply.	GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent
Higher Education or professional qualifications do		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 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	The respondent is	Working as an employee
days, were you doing any of the following?	required to include casual or temporary work, even if only for one hour.	Self-employed or freelance
ronowing:		Temporarily away from work ill, on holiday or temporarily laid off
	The manual dent is	On maternity or paternity leave
	The respondent is 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 required to select one	Yes
weeks, were you actively looking for any kind of paid work?	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	
	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".	
	School Teacher .	
	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	
1		
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.	Yes		
	The respondent is required to select one option only.			

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 usually travel to	The respondent is required to answer	Driving a car or van
your main job?	for their usual travel	Passenger in a car or van
	to the place where 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 school)? required to answer for their usual travel to the place where they spend the most	Passenger in a car or van	
	Taxi or private hire	
	time.	Motorcycle, scooter or moped
	The respondent is required to select the	On foot
	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  What is the nature of this	The respondent is required to enter the number of usual residents and the number of visitors in the boxes provided.  The respondent is required to select one	Medical and care (including care homes, children's homes or hospitals)
establishment?	option only.	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	Respon	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	
What is your date of birth?	The respondent is required to use the format DD MM YYYY in the boxes provided.		staff or the owner?	
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 trans, or have a trans history?	This question is voluntary.		No	
	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?		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 required to select one		Scotland
country of birth?	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
<ul> <li>long term physical / mental ill-health / disability; or problems related to old age?</li> </ul>	option only.		

How well can you understand, speak, read and write English?	The respondent is required to select one option for each.	<ul> <li>Very well</li> <li>Well</li> <li>Not well</li> <li>Not at all</li> <li>I speak English—</li> <li>Very well</li> <li>Well</li> <li>Not well</li> <li>Not at all</li> <li>I read English—</li> <li>Very well</li> <li>Not at all</li> <li>I read English—</li> <li>Very well</li> <li>Well</li> <li>Not well</li> <li>Not well</li> <li>Not at all</li> </ul>
		<ul> <li>Very well</li> <li>Well</li> <li>Not well</li> <li>Not at all</li> </ul>
Can you understand, speak, read and write Scottish Gaelic?	The respondent is required to select all options that apply.	<ul> <li>Understand spoken Scottish Gaelic</li> <li>Speak Scottish Gaelic</li> <li>Read Scottish Gaelic</li> <li>Write Scottish Gaelic</li> <li>or</li> <li>No skills in Scottish Gaelic</li> </ul>
Can you understand, speak, read and write Scots?	The respondent is required to select all options that apply.	<ul> <li>☐ Understand spoken Scots</li> <li>☐ Speak Scots</li> <li>☐ Read Scots</li> <li>☐ Write Scots</li> <li>☐ No skills in Scots</li> </ul>
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	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	required to select	ш	Pakistani, Scottish Pakistani of British Pakistani
Asian, Scottish Asian or British Asian ethnic group or besterround?	one option only.		Indian, Scottish Indian or British Indian
	If the respondent selects "Other" they are required to		Bangladeshi, Scottish
			Bangladeshi or British Bangladeshi
	enter their other Asian ethnic group		Chinese, Scottish Chinese or British Chinese
	in the box provided.		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	The respondent is required to select		Arab, Scottish Arab or British Arab
other ethnic	one option only.		Other (for example, "Sikh", "Jewish")
group or 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 mer shows shown	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 doing any of the following?  The requal to the following the following the form the requal to the following t	The respondent is required to include casual or temporary work, even if only for one hour.	Working as an employee
		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".	

Status: This is the original version (as it was originally made).

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.  The respondent is required to select	No
	one option only.	 
In your main job, how many hours	The respondent is required to answer	0 to 15
a week do (did)	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	
Which do you	one option only.	Working
spend more time doing?	The respondent is required to select 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

Status: This is the original version (as it was originally made).

What address do you travel to for your main job?  What address do you travel to for your course of study (including school)?	If the respondent 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.	Work mainly at, or from, [address]  No fixed place  Work on an offshore installation  Another address  Work outside the UK  Distance learning, home schooled or equivalent  Another address  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.	
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 som cases, you may receive a criminal record and fine.  The questions about trans status or history, sexual orientation, and religion are voluntary. You	e You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.
do not have to answer these questions if you do	Declaration
not want to.  Our pledge to you	The information provided in this questionnaire is
Your census return will be kept secure and will be	full and accurate, as far as I know.
kept confidential for 100 years.	Signature(s)
£2.	
Paul Lowe, Registrar General for Scotland Thank you for helping to shape Scotland's future	Date

# Important guidance — before you start

### 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				
	Ц	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, <b>if this is their permanent or family home</b>				
		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?				
	Ц					
	H3	Starting with the householder(s), list the names of the people counted in question H2, including children and babies.				
		First name(s) Last name				
		son 1				
		son 2				
		son 3				
		son 5				
	•	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)				
Ì	H4					
	٠	family home is elsewhere?  Do not include anyone counted in question H2				
	<u>+</u>	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	Counting only the people you included in question H4, how many people are staying at this 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				
	٠	If there are only people staying at this address on the night of 21 March 2021 whose permanent				
HOV1.0		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				

Household questions -	- relationships		$\neg$	
<ul> <li>If there are more than five pec</li> <li>If you live alone → go to H7</li> </ul>	nis household related to each oth ople, contact us to request a Continual d there are no visitors staying overnig	tion Questionnaire(s)		
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)  DO NOT write in this section  Write your household members' details in the section BELOW	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: Husband or wife Registered civil partner Partner Son or daughter Step-child Brother or sister	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
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 (including foster child)	1000000000000	HOVID
Page 4				

	Household questions — relationships					
	Name of Person 3 First name(s)		Name of Person 4 First name(s)	Name of Person 5 First name(s)		
	ALISON		STEVEN	JAMES		
	Last name	4.	Last name	Last name		
	SMITH		SMITH	SMITH		
	Relationship of Person to Persons:	3 1 2	Relationship of Person 4 to Persons: 1 2	Relationship of Person 5 to Persons: 1 2 3 4		
	Husband or wife		Husband or wife	Mother or father 🔲 🗹 🔲		
	Registered civil partner		Registered civil	Step-mother or		
	Partner		Partner	Grandchild		
	Son or daughter		Son or daughter 🗸 🗸	Grandparent		
	Step-child		Step-child	Other relation 🗸 🗆 🗆 🗆		
	Brother or sister		Brother or sister	(inclūding in-laws)		
				(including foster child)		
	Name of Person 3 First name(s)		Name of Person 4 First name(s)	Name of Person 5 First name(s)		
	First flatfie(s)		Trist fiditic(s)	Trist haine(s)		
	Last name					
		1000	Last name	Last name		
			Last name	Last name		
	Relationship of Person to Persons:	3 1 2	Relationship of Person 4 to Persons: 1 2 3	Relationship of Person 5		
	Relationship of Person	3 1 2	Relationship of Person 4	Relationship of Person 5		
	Relationship of Person to Persons:	3 1 2	Relationship of Person 4 to Persons: 1 2	Relationship of Person 5 to Persons: 1 2 3 4		
	Relationship of Person to Persons: Husband or wife Registered civil	3 1 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Relationship of Person 4 to Persons: 1 2 3 Husband or wife Registered civil	Relationship of Person 5 to Persons: 1 2 3 4  Husband or wife		
	Relationship of Person to Persons: Husband or wife Registered civil partner	3 1 2 00	Relationship of Person 4 to Persons: 1 2 3 Husband or wife	Relationship of Person 5 to Persons: 1 2 3 4  Husband or wife		
	Relationship of Person to Persons: Husband or wife Registered civil partner Partner	3 1 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Relationship of Person 4 to Persons: 1 2 3 Husband or wife	Relationship of Person 5 to Persons: 1 2 3 4  Husband or wife		
	Relationship of Person to Persons: Husband or wife Registered civil partner Partner Son or daughter	3 1 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Relationship of Person 4 to Persons: 1 2 3 Husband or wife	Relationship of Person 5 to Persons: 1 2 3 4  Husband or wife		
	Relationship of Person to Persons: Husband or wife Registered civil partner Partner Son or daughter Step-child	3 1 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Relationship of Person 4 to Persons: 1 2 3 Husband or wife	Relationship of Person 5 to Persons: 1 2 3 4  Husband or wife              Registered civil            partner          Son or daughter          Step-child		
	Relationship of Person to Persons: Husband or wife Registered civil partner Partner Son or daughter Step-child Brother or sister Step-brother or	3 1 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Relationship of Person 4 to Persons: 1 2 3 Husband or wife	Relationship of Person 5 to Persons: 1 2 3 4  Husband or wife		
	Relationship of Person to Persons: Husband or wife Registered civil partner Partner Son or daughter Step-child Brother or sister Step-brother or step-sister	3 1 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Relationship of Person 4 to Persons: 1 2 3 4	Relationship of Person 5 to Persons: 1 2 3 4  Husband or wife               Registered civil             Partner           Son or daughter           Brother or sister           Step-brother or step-sister		
	Relationship of Person to Persons: 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	3 1 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Relationship of Person 4 to Persons: 1 2 3	Relationship of Person 5 to Persons: 1 2 3 4  Husband or wife           Registered civil         Partner       Son or daughter         Step-child       Brother or sister       Mother or father         Step-mother or		
	Relationship of Person to Persons: 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	3 1 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Relationship of Person 4 to Persons: 1 2 :  Husband or wife	Relationship of Person 5 to Persons: 1 2 3 4  Husband or wife              Registered civil            Partner          Son or daughter          Step-child          Brother or sister          Step-brother or step-sister        Mother or father          Step-mother or step-father		
HOV1.0	Relationship of Person to Persons: 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	3 1 2 000 000 000 000 000 000 000 000 000	Relationship of Person 4 to Persons: 1 2  Husband or wife	Relationship of Person 5 to Persons: 1 2 3 4  Husband or wife		

Household questions — accommo	dation
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:  a caravan or other mobile or temporary	☐ Owns with a mortgage or loan → go to H14
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)  • go 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
<ul> <li>Central heating is a central system that generates heat for multiple rooms</li> <li>If the central heating is available please tick the</li> </ul>	Other
box, whether you use it or not  Tick all that apply	H14 In total, how many cars or vans are 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 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	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? (Person 1 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
□ No	Elsewhere, please write in the current name of
Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	the country:
5 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	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	☐ The address on the front of the questionnaire ☐ Student term-time / boarding school address in the UK, please write in below:
legally dissolved  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 ☐ 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	
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
No	Deafness or partial hearing loss
Yes, 1 to 19 hours a week 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  No
Page 8	

Individual questions — Person 1	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
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 Pritish
	☐ 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:
None	
Church of Scotland	B Mixed or multiple ethnic groups
	Any mixed or multiple ethnic groups, please
Roman Catholic	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:
	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
☐ 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):
1 Marian	
L	Page 9

Individual questions — Person 1	$\neg$
24 If you are aged 16 or over   go to 25  If you are aged 15 or under   go to 41	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)  Apprenticeship (Modern or equivalent)	None of the above  28 Which of the following describes what you were doing in the last seven days?  ◆ Tick all that apply
Apprenticeship (Graduate or equivalent)      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  30 If a job became available now, could you
Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)	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
<ul> <li>No</li> <li>Yes, previously served in Regular Armed Forces</li> </ul>	34 In your main job, what is (was) your employment status?  Employee
Yes, previously served in <b>Reserve</b> 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	¬
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):	
5 On 21 March 2021, what is your legal marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered 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  11 One year ago, what was your usual address?  ◆ If you had no usual address one year ago, state
Separated, but still legally married Separated, but still legally in a civil partnership	the address where you were staying  Same as Person 1  The address on the front of the questionnaire
Divorced Formerly in a civil partnership which is now legally dissolved Widowed	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 12	

Individual questions — Person 2	コ
12 Do you look after, or give any help or support to family members, friends, neighbours or others because of either:  • long-term physical / mental ill-health / disability; or	17 How is your health in general?  Very good Good Fair Bad Very bad
<ul> <li>problems related to old age?</li> <li>Do not count anything you do as part of your paid employment</li> </ul>	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
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 (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     Yes, limited a lot
Other, please write in (including BSL and TACTILE BSL):	Yes, limited a little
\[ \frac{1}{2} \]	□ No
L	Page 13

Individual questions — Person 2	
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 Pritish
	Other British
	☐ Irish☐ Polish☐ Polish☐ Irish☐ Iris
	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	B Mixed or multiple ethnic groups
Church of Scotland	Any mixed or multiple ethnic groups, please
Roman Catholic	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:
	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
☐ Welsh	CARIBBEAN, BLACK SCOTTISH):
☐ British	
Other, please write in:	F Other ethnic group
Culei, please write in.	Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH, JEWISH):
	HOMIS
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	<ul> <li>Include casual or temporary work, even if only for one hour</li> </ul>
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

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:	Individual questions — Person 2	コ
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  you to 44  Distance learning, home schooled or equivalent you roganisation, business or freelance work? For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY SCHOOL, TEACHER  The address below, please write in:    Work mainly at, or from, home  you to 44   Distance learning, home schooled or equivalent you to 44   No fixed place  you to 43   The address below, please write in:    Work   Study   Stud	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
For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER  Do not state your grade or pay band	private individual	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, RÉTAIL ASSISTANT, OFFICE 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, 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 Bicycle Bus, minibus or coach Train Underground, subway or tram Other  Other  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 there are no government 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 the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your journey by distance  Tick the box for the longest part of your specific part of your journey by distance  Tick t		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 2.  If there are no more questions for Person 2.  Otherwise go to questions for Person 3.	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  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  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 2.  ♦ If there are no more people in your household please leave the following pages blank.  Otherwise go to questions for Person 3.

Individual questions — Person 3	□
1 What is your name? (Person 3 in H3 on page 3) First name(s) Last name	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  ◆ Tick one box only	Scotland → go to 11 □ England → go to 11 □ Northern Ireland → go to 11 □ Wales → go to 11 □ Republic of Ireland
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:
5 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  ☐ Same as Person 1
Separated, but still legally in a civil partnership  Divorced	The address on the front of the questionnaire
Formerly in a civil partnership which is now legally dissolved	Student term-time / boarding school address in the UK, please write in below:
☐ Widowed ☐ Surviving partner from a civil partnership	Another address in the UK, please write in:
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 17

Individual questions — Person 3	
12 Do you look after, or give any help or support to family members, friends, neighbours or others because of either:  • long-term physical / mental ill-health /	17 How is your health in general?  Very good Good Fair Bad Very bad
<ul> <li>disability; or</li> <li>problems related to old age?</li> <li>Do not count anything you do as part of your paid employment</li> </ul>	18 Do you have any of the following, which have lasted, or are expected to last, at least 12 months?
☐ No ☐ Yes, 1 to 19 hours a week ☐ Yes, 20 to 34 hours a week	◆ Tick all that apply     □ Deafness or partial hearing loss     □ Blindness or partial sight loss
Yes, 35 to 49 hours a week  Yes, 50 or more hours a week  13 How well can you understand, speak, read and write English?  Tick one box in each column	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)
Very well	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
Not at all	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
Scottish Gaelic	condition, not listed above, that you may have for life, which may be managed with treatment or medication)  Other condition, please write in:
or  No skills in either language	
15 Can you use British Sign Language (BSL)?  Yes No	□ No condition  19 Are your day-to-day activities limited
16 What is your main language?  ◆ Tick one box only  Finalish	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
☐ English ☐ Other, please write in (including BSL and TACTILE BSL):	☐ Yes, limited a lot ☐ Yes, limited a little ☐ No
Page 18	

Individual questions — Person 3	
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
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
Otilei, piease write in.	Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH, JEWISH):
HOVI	
L	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)	<ul> <li>Self-employed or freelance → go to 33</li> <li>Temporarily away from work ill, on holiday or temporarily laid off → go to 33</li> <li>On maternity or paternity leave → go to 33</li> <li>Doing any other kind of paid work → go to 33</li> <li>None of the above</li> </ul>
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
<ul> <li>No</li> <li>Yes, previously served in Regular Armed Forces</li> </ul>	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	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
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?	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
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	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 4	7
1 What is your name? (Person 4 in H3 on page 3) First name(s) Last name  2 What is your date of birth?	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
Day Month Year  3 What is your sex?	☐ Bisexual ☐ Other sexual orientation, please write in:
☐ 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  No  Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	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:
5 On 21 March 2021, what is your legal marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married	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  11 One year ago, what was your usual
In a registered civil partnership Separated, but still legally married	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	Same as Person 1  The address on the front of the questionnaire  Student term-time / boarding school address in
legally dissolved  Widowed  Surviving partner from a civil partnership	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	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 22	

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	
<ul> <li>problems related to old age?</li> <li>Do not count anything you do as part of your</li> </ul>	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	$\neg$
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
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	
☐ 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	
Other, please write in:	F Other ethnic group Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH,
	JEWISH):
	Ž
Page 24	

Individual questions — Person 4	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, Intermediate 1 or 2, GCSE, CSE or equivalent  Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent	<ul> <li>Self-employed or freelance → go to 33</li> <li>Temporarily away from work ill, on holiday or temporarily laid off → go to 33</li> <li>On maternity or paternity leave → go to 33</li> </ul>
Apprenticeship (trade or equivalent)  Apprenticeship (Foundation or equivalent)	☐ Doing any other kind of paid work → go to 33 ☐ 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?  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
26 Have you previously served in the UK Armed Forces?  ♦ Current serving members should only tick 'No'	33 Answer the remaining questions for your main job or, if not working, your last main job.  To 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	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)	8 Which of the following best describes your sexual orientation?
	First name(s)	<ul> <li>This question is voluntary</li> <li>Answer only if you are aged 16 or over</li> </ul>
		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:
		Outer 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
	<ul> <li>Answer only if you are aged 16 or over</li> <li>Trans is a term used to describe people whose</li> </ul>	☐ 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
	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,
	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?  Never married and never registered in a civil	Month Year
	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	Same as Person 1
	Divorced	The address on the front of the questionnaire  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:	
0	at the address on the front of this questionnaire?	Outside the UK, please write in country:
HOV1.0	☐ at another address? → go to 44	
		Page 27

Individual questions — Person 5	
12 Do you look after, or give any help or support to family members, friends, neighbours or others because of either:	17 How is your health in general?  Very good Good Fair Bad Very bad
long-term physical / mental ill-health / disability; or     problems related to old age?	
Do not count anything you do as part of your paid employment	18 Do you have any of the following, which have lasted, or are expected to last, at least 12 months?
☐ No ☐ Yes, 1 to 19 hours a week	◆ Tick all that apply     □ 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)	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
16 What is your main language?  ♦ Tick one box only	19 Are your day-to-day activities limited 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 TACTILE BSL):	Yes, limited a lot
	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 В	
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)	<ul> <li>Self-employed or freelance → go to 33</li> <li>Temporarily away from work ill, on holiday or temporarily laid off → go to 33</li> <li>On maternity or paternity leave → go to 33</li> <li>Doing any other kind of paid work → go to 33</li> </ul>
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 <b>Regular</b> Armed Forces ☐ Yes, previously served in <b>Researce</b> Armed Forces	34 In your main job, what is (was) your employment status?  □ Employee □ Self-employed or freelance without employees
Yes, previously served in <b>Reserve</b> 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	<ul> <li>Work mainly at, or from, home → go to 44</li> <li>Distance learning, home schooled or equivalent → go to 44</li> <li>No fixed place → go to 43</li> <li>Work on an offshore installation → go to 43</li> <li>The address below, please write in:</li> </ul>
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 No  10 In your main job, how many hours a week do (did) you usually work?  10 Include paid and unpaid overtime 10 to 15 16 to 30 31 to 48 49 or more	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     If you included anyone in question H5, record their details on the back page
0 to 15 16 to 30 31 to 48 49 or more	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	
Lest same		
Last name		
V2 What is this person's date of birth?	Description of the second of t	
Day Month Year	Postcode	
V3 What is this person's sex?	Outside the UK, please write in country:	
☐ Female ☐ Male	Subside the Ork, please white 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
	You should provide information that is correct as of Sunday, 21 March 2021.	how we can help and support you to complete the census questionnaire.
	As you have requested to complete an individual census questionnaire, you have a	You can also visit <b>www.census.gov.scot</b> 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,	Copy your person number, as given in question H3 on a Household Questionnaire, or in question C2 on a Continuation Questionnaire, here:
	sexual orientation, and religion are voluntary. You 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
	Your census return will be kept secure and will be kept confidential for 100 years.	full and accurate, as far as I know.
		Signature
	Ja.	
0.5	Paul Lowe, Registrar General for Scotland	Date
흪	Thank you for helping to shape Scotland's future	[

<b>Important</b>	guidance —	before	you start
------------------	------------	--------	-----------

#### 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
- correct any mistakes like this: 

   or SM

   ITH
- 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.

Ind	lividual questions	コ
	Vhat 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
Lastr	name	Straight / Heterosexual
		Gay or Lesbian
	Vhat is your date of birth?	☐ Bisexual
Day	Month Year	Other sexual orientation, please write in:
		Cutor sexual cristiation, piedes white in.
	What is your sex?	
	emale Male	9 What is your country of birth?
	o you consider yourself to be trans, or ave a trans history?	☐ Scotland → go to 11
• T	his question is voluntary	☐ England → go to 11
	unswer only if you are aged 16 or over frans is a term used to describe people whose	Northern Ireland → go to 11
ge	ender is not the same as the sex they were egistered at birth	Wales → go to 11
	ick <b>one</b> box only	Republic of Ireland
□ N	lo	Elsewhere, please write in the current name of the country:
	es, please describe your trans status (for	
e	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
	on 21 March 2021, what is your legal	here?
	narital or registered civil partnership tatus?	Do not count short visits away from the UK     Month Year
□ N	lever married and never registered in a civil artnership	
	Married	11 One year ago, what was your usual address?
□ Jr	n a registered civil partnership	<ul> <li>If you had no usual address one year ago, state</li> </ul>
	Separated, but still legally married	the address where you were staying
	Separated, but still legally in a civil partnership	
	Divorced	The address on the front of the questionnaire
	ormerly in a civil partnership which is now egally dissolved	Student term-time / boarding school address in the UK, please write in below:
	Vidowed	Another address in the UK, please write in:
	Surviving partner from a civil partnership	
fu	re you a schoolchild or student in all-time education?	
	es e	Postcode
	lo ⇒ go to 8	
7 D	uring term-time, do you live:	
a a	t the address on the front of this questionnaire?	Outside the UK, please write in country:
HIVT.0	t another address? → go to 44	
L		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: 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
□ No	Deafness or partial hearing loss
Yes, 1 to 19 hours a week 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 (spoken) Speak Read Write 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
16 What is your main language?  ♦ Tick one box only	19 Are your day-to-day activities limited 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 4	∐ No j

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

24 if you are aged 16 or over → go to 25   if you are aged 15 or under → go to 41	Individual questions	$\neg$
Tick all that apply		of the following?  ♦ Include casual or temporary work, even if only
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 (frade or equivalent)   Apprenticeship (foundation or equivalent)   Apprenticeship (Graduate or equivalent)   Apprenticeship (Graduate or equivalent)   GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent   GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent   Other school qualifications not already mentioned (including foreign qualifications)   Other post-school but pre-Higher Education groeign qualifications of already mentioned (including foreign qualifications, accountancy)   Other Higher Education qualifications (for example, teaching, nursing, accountancy)   No qualifications   No qualifications   No qualifications   Serve Armed Forces   Yes, previously served in Regular Armed Forces   Yes, previously served in Regular Armed Forces   Self-employed with employees   Self-emplo		♦ Tick all that apply
Apprenticeship (Modern or equivalent)	Intermediate 1 or 2, GCSE, CSE or equivalent  Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent	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
Apprenticeship (Graduate or equivalent)  GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent  GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent  HNC, HND, SVQ level 4 or equivalent  Other school qualifications not already mentioned (including foreign qualifications)  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)  No qualifications  26 Have you previously served in the UK Armed Forces?  Current serving members should only tick 'No'  No  Yes, previously served in Regular Armed Forces  Yes, previously served in Reserve Armed Forces  Self-employed with employees		28 Which of the following describes what you
or 2, SCOTVEC Module, City and Guilds Craft or equivalent  GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent  HNC, HND, SVQ level 4 or equivalent  Other school qualifications not already mentioned (including foreign qualifications)  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)  No qualifications  Armed Forces?  Current serving members should only tick 'No'  No  Yes, previously served in Regular Armed Forces  Yes, previously served in Reserve Armed Forces  Self-employed with employees		↑ Tick all that apply     Retired (whether receiving a pension or not)
SCOTYEC National Diploma, City and Guilds Advanced Craft or equivalent    HNC, HND, SVQ level 4 or equivalent   Other school qualifications not already mentioned (including foreign qualifications)   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)   No qualifications   No qualifications   No qualifications   No previously served in the UK Armed Forces   Yes, previously served in Regular Armed Forces   Yes, previously served in Reserve Armed Forces   Self-employed with employees   Se	or 2, SCOTVEC Module, City and Guilds Craft or equivalent	Looking after home or family
HNC, HND, SVQ level 4 or equivalent   Coking for any kind of paid work?   Yes   No	SCOTVEC National Diploma, City and Guilds	Other
mentioned (including foreign qualifications)  ☐ 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)  ☐ No qualifications  26 Have you previously served in the UK Armed Forces?  ☐ Current serving members should only tick 'No'  ☐ No  ☐ Yes, previously served in Regular Armed Forces  ☐ Yes, previously served in Reserve Armed Forces  ☐ Self-employed with employees  ☐ Self-employed with employees		looking for any kind of paid work?
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)   No qualifications   No qualifications   No qualifications   No qualifications   No qualifications   Yes   No     Yes, in the last 12 months   Yes, but not in the last 12 months   No, have never worked → go to 41     33 Answer the remaining questions for your main job or, if not working, your last main job.   Your main job is the job in which you usually work (worked) the most hours   No		30 If a job became available now, could you
PhD, SVQ level 5 or equivalent   Professional qualifications (for example, teaching, nursing, accountancy)   Other Higher Education qualifications not already mentioned (including foreign qualifications)   No qualifications   Yes, but not in the last 12 months   Yes, but not in the last 12 months   No, have never worked ⇒ go to 41   33 Answer the remaining questions for your main job or, if not working, your last main job.   Your main job is the job in which you usually work (worked) the most hours   Yes, previously served in Regular Armed Forces   Yes, previously served in Reserve Armed Forces   Self-employed or freelance without employees   Self-employed with employees	qualifications not already mentioned (including	
Professional qualifications (for example, teaching, nursing, accountancy)  ☐ Other Higher Education qualifications not already mentioned (including foreign qualifications)  ☐ No qualifications  ☐ No qualifications  ☐ Have you previously served in the UK Armed Forces?  ☐ Current serving members should only tick 'No'  ☐ No  ☐ Yes, previously served in Regular Armed Forces  ☐ Yes, previously served in Reserve Armed Forces  ☐ Self-employed with employees  ☐ Self-employed with employees		start a job already accepted?
already mentioned (including foreign qualifications)  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 job.  Your main job is the job in which you usually work (worked) the most hours  4 In your main job, what is (was) your employment status?    Employee   Self-employed or freelance without employees   Self-employed with employees		
No qualifications   33 Answer the remaining questions for your main job or, if not working, your last main job.	already mentioned (including foreign	Yes, but not in the last 12 months
Armed Forces?  ◆ Current serving members should only tick 'No'  No  Yes, previously served in Regular Armed Forces  Yes, previously served in Reserve Armed Forces  Self-employed with employees  Self-employed with employees	☐ No qualifications	33 Answer the remaining questions for your
□ No       employment status?         □ Yes, previously served in Regular Armed Forces       Employee         □ Self-employed or freelance without employees       Self-employed with employees         □ Self-employed with employees	Armed Forces?	main job or, if not working, your last main job.  To your main job is the job in which you usually work (worked) the most hours
Yes, previously served in Regular Armed Forces Self-employed or freelance without employees Self-employed with employees	□ No	employment status?
		Self-employed or freelance without employees
	Page 6	Self-employed with employees

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	<ul> <li>□ Distance learning, home schooled or equivalent</li> <li>→ go to 44</li> <li>□ No fixed place → go to 43</li> <li>□ Work on an offshore installation → go to 43</li> </ul>
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
S	Scotland's Census 2021	Completing online
TI ai	cotland's Census is the official count of every erson in the country.  he census is held every ten years and the nswers you give to the questions will help shape cotland's future public services.	You can complete this questionnaire online. Visit www.census.gov.scot and use the code below.  Your Internet Access Code:
P or Ye	/hat we would like you to do lease complete this questionnaire on paper or nline at www.census.gov.scot ou should provide information that is correct as f Sunday, 21 March 2021.	Help and support  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 can also visit www.census.gov.scot for more help.
a Ye all to 16 th	s the manager or person in charge, you have legal duty to complete this questionnaire. ou also have a legal responsibility to make rrangements for an individual questionnaire of be completed for any resident who is under 6 years of age or is incapable of doing so memselves.  The provided if you refuse to complete the questionnaire, provide a false answer to question, or if you sign a false document. In some cases, you may receive a criminal recording fine.	What you have to do Identify all usual residents and visitors to your establishment  Number of usual residents: Number of visitors:  Refer to the Guidance Note for Managers for full instructions.
Y	Our pledge to you our census return will be kept secure and will be ept confidential for 100 years.	Declaration The information provided in this questionnaire is full and accurate, as far as I know.  Signature
	aul Lowe, Registrar General for Scotland hank you for helping to shape Scotland's future	Date

Establishment questions		□							
How to fill in this questionnaire									
This questionnaire will be scanned by a computer. please follow the instructions below:	To m	nake sure we record your answers correctly,							
use a black ink ballpoint pen									
tick your answers within the box like this: ✓ correct any mistakes like this:									
DO NOT draw a line through questions or pages. The 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	S to 24 years old							
Care home with nursing	25	5 to 34 years old							
Children's home	35	to 49 years old							
Other medical and care establishment	50	to 64 years old							
Education	65	5 years old and over							
School	4	How many male residents usually reside							
Halls of residence / student accommodation	ľ	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	6 to 24 years old							
Detention	25	5 to 34 years old							
Prison or young offenders' institution	35	to 49 years old							
☐ Immigration removal centre	50	to 64 years old							
		5 years old and over							
Travel	<u>_</u>	y years old and over							
Hotel, guest house, B&B, youth hostel Leisure / holiday establishment	5	Who is responsible for the management of this establishment?							
Other travel establishment	•	Tick <b>one</b> box only							
Other traver establishment		] NHS							
Hostel or shelter		] Local Authority							
Hostel or shelter for the homeless		Government department or agency							
Other hostel or shelter 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							
Other establishment		Other	CEV1.0						
			Station.						

## SCHEDULE 8

Regulation 3(16)

## Paper Communal Establishment Individual Questionnaire



Individual Questionnaire (CI)

## 21 March 2021

	If there is a <b>mistake</b> 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.	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:
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	Start here R1 Do you (or the person you are filling this in
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.	for) stay here because you are:  a resident (for example, patient, student, member of Armed Forces)?  a member of staff or the owner?
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.	a family member, or partner, of a member of staff or the owner?  Declaration
Our pledge to you  Your census return will be kept secure and will be kept confidential for 100 years.	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:
Paul Lowe, Registrar General for Scotland Thank you for helping to shape Scotland's future	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 <b>black</b> 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:    or    SM    ITH	
if a word will not fit on one line, continue on to the next line like this, if possible:	
130 LADYWELL CRESC	
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?  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  ◆ Tick one box only	Scotland → go to 11 England → go to 11 Northern Ireland → go to 11 Wales → go to 11 Republic of Ireland
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:
5 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	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	☐ The address on the front of the questionnaire ☐ Student term-time / boarding school address in the UK, please write in below:
Widowed	Another address in the UK, please write in:
Surviving partner from a civil partnership	<del>╟╶┼┼┼┼┼┼┼┼┼┼┼┼┼</del> ┤╏
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?	Outside the UK, please write in country:
at the 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:   Office, please write in (for example, SCOTTISH   LACK SCOTTISH);   Description   Arab, Scottish Arab or British Arab   Office, please write in (for example, SIKH, JEWSH);   Office, please write in (for	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:   State   Showman / Showman   Show	United Kingdom	box which <b>best describes</b> 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
<ul> <li>↑ This question is voluntary</li> <li>None</li> <li>Church of Scotland</li> <li>Roman Catholic</li> <li>Other Christian, please write in below:</li> <li>Hindu</li> <li>Buddhist</li> <li>Sikh</li> <li>Jewish</li> <li>Pagan</li> <li>Another religion or body, please write in:</li> <li>Thick all that apply</li> <li>Scottish</li> <li>Scottish</li> <li>Pick all that apply</li> <li>Scottish</li> <li>British</li> <li>Other, please write in:</li> <li>F Other ethnic group, please write in:</li> <li>Mixed or multiple ethnic groups, please write in:</li> <li>Any mixed or multiple ethnic groups, please write in:</li> <li>Any mixed or multiple ethnic groups, please write in:</li> <li>Any mixed or multiple ethnic groups, please write in:</li> <li>Any mixed or multiple ethnic groups, please write in:</li> <li>Any mixed or multiple ethnic groups, please write in:</li> <li>Any mixed or multiple ethnic groups, please write in:</li> <li>Any mixed or multiple ethnic groups, please write in:</li> <li>Dain and scottish Asian or British Asian</li> <li>Pakistani, Scottish Pakistani or British Chinese or British Chinese or British African</li> <li>Please write in:</li> <li>Please write in:</li> <li>Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):</li> <li>Any mixed or multiple ethnic group, please write in:</li> <li>Dain and scottish Asian or British Asian</li> <li>Please write in:</li> <li>Dain and scottish Asian or British Asian</li> <li>Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):</li> <li>Tother ethnic group, please write in:</li> <li>Other, please write in (for example, SIKH, JEWISH):</li> </ul>		
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):      C Asian, Scottish Asian or British Asian     D African, Scottish Chinese or British African     Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):	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):   English   E Caribbean or Black   Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):   Other, please write in:   Other, please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):   Other, please write in:   Other, please write in (for example, SIKH, JEWISH):   Other, please write in (for ex	☐ 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: Arab, Scottish Arab or British Arab 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	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, 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)	<ul> <li>Self-employed or freelance → go to 33</li> <li>Temporarily away from work ill, on holiday or temporarily laid off → go to 33</li> <li>On maternity or paternity leave → go to 33</li> <li>Doing any other kind of paid work → go to 33</li> </ul>
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)      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, have never worked      go to 41
☐ 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	34 In your main job, what is (was) your employment status?
Yes, previously served in Regular Armed Forces	☐ Employee ☐ Self-employed or freelance without employees
Yes, previously served in Reserve Armed Forces	Self-employed with 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	<ul> <li>Work on an offshore installation ⇒ go to 43</li> <li>The address below, please write in:</li> </ul>
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.