STATUTORY INSTRUMENTS

# 2000 No. 1473

# CENSUS, ENGLAND AND WALES

The Census Regulations 2000

Made	5th June 2000
Laid before Parliament	6th June 2000
Coming into force	27th June 2000

The Chancellor of the Exchequer, in exercise of powers conferred by section 3(1) of the Census Act 1920(1) and now vested in him(2), and of all other powers enabling him in that behalf, hereby makes the following Regulations:

## **Citation and commencement**

1. These Regulations may be cited as the Census Regulations 2000 and shall come into force on 27th June 2000.

### Interpretation and extent

2.—(1) In these Regulations, unless the context otherwise requires—

"the Act" means the Census Act 1920;

"the census" means the census directed to be taken by the Census Order 2000(3) (hereinafter referred to as "the Census Order");

"census area manager" means an officer appointed under regulation 4(1)(a);

"census day" means 29th April 2001;

"census district" means a district so referred to in regulation 3;

"census district manager" means an officer appointed under regulation 4(1)(c);

"census enumerator" means an officer appointed as such under regulation 4(1)(e);

"census regional manager" means an officer appointed under regulation 4(1)(b);

 <sup>1920</sup> c. 41. Section 3(1) was amended by the Secretary of State for Social Services Order 1968 (S.I.1968/1699), by section 1 of, and Part XVI of Schedule 1 to, the Statute Law (Repeals) Act 1993 (c. 50) and by the Transfer of Functions (Registration and Statistics) Order 1996 (S.I. 1996/273).

<sup>(2)</sup> See articles 3(1) and 5(1) of, paragraph 3(b) of Schedule 1 to and paragraph 3(1) and (2) of Schedule 2 to the Transfer of Functions (Registration and Statistics) Order 1996. The powers to make Regulations under section 3(1) in relation to Scotland were transferred to the Scotlish Ministers by virtue of section 53 of the Scotland Act 1998 (c. 46).

<sup>(3)</sup> S.I. 2000/744.

"census team leader" means an officer appointed under regulation 4(1)(d);

"enumeration district" means a district so referred to in regulation 3;

"individual return envelope" means an envelope in which a completed form I1 or I2 as the case may be, may be sealed;

"officer" means a person appointed under regulation 4;

"prescribed person" means a person required by the Census Order to make a return;

"Registrar General" means the Registrar General for England and Wales; and

"reply-paid envelope" means an envelope which is pre-addressed and which does not require payment by the sender.

(2) In these Regulations, a reference to a form, where it is followed immediately by an identifying letter, is a reference to the form of return which is identified by that letter and which is set out in Schedule 2.

(3) Unless the context otherwise requires, in these Regulations a reference to a numbered regulation or Schedule is a reference to the regulation or Schedule in these Regulations bearing that number, and a reference in a regulation to a numbered paragraph is a reference to the paragraph of that regulation bearing that number.

(4) These Regulations shall not extend to Scotland.

## Census districts, enumeration districts and census areas

**3.**—(1) For the purpose of the census, the Registrar General shall divide England and Wales into census districts and shall divide each census district into enumeration districts.

(2) The Registrar General may designate any number of adjoining census districts as a census area.

## **Appointment of officers**

**4.**—(1) For the purpose of the census—

- (a) the Registrar General may appoint a census area manager for any census area designated under regulation 3(2);
- (b) the Registrar General may appoint a census regional manager to manage such number of census area managers as he may specify as being necessary for the purpose of the census;
- (c) the Registrar General or the census area manager may appoint a census district manager for each census district;
- (d) the Registrar General, the census area manager or the census district manager may appoint for a census district such number of census team leaders as the Registrar General may specify as being necessary for that census district; and
- (e) the Registrar General, the census area manager or the census district manager may appoint—
  - (i) one or more census enumerators for each enumeration district (each census enumerator being wholly or partly responsible for one or more enumeration districts); and
  - (ii) such other persons as may be necessary for taking the census.

(2) The officers appointed under this regulation shall perform the duties assigned to them under the Act and by these Regulations.

## Forms of return

**5.**—(1) The form of return to be made by a prescribed person mentioned in column (1) of Schedule 1, or by any person making a return on behalf of a prescribed person under article 5(6) or (7) of the Census Order, shall be the form which has the title specified in the corresponding entry in column (2) of that Schedule, and which is set out under that title in Schedule 2; and any such person shall comply with the instructions contained in that form.

(2) The Registrar General shall obtain translations of forms H2, I2 and CE1 into Welsh and the translated versions of these forms may be used as alternative forms of return for the purpose of the census in Wales.

(3) The duty to make a form of return will only be discharged when the completed form has been received by the census district manager or other officer.

#### Supply of forms and other documents for census enumerators

**6.**—(1) The Registrar General shall issue to every census district manager sufficient numbers of enumeration record books, forms of return, reply-paid envelopes, individual return envelopes and such other forms or documents as may be necessary for the purpose of the census.

(2) Every census district manager shall supply to every census enumerator appointed to act for an enumeration district within his census district an enumeration record book for the enumeration district for which he has been appointed, sufficient numbers of forms of return, reply-paid envelopes, individual return envelopes and such other forms or documents as may be necessary for the purpose of the census.

## Delivery of forms of return

7.—(1) The census emumerator shall deliver forms of return, reply-paid envelopes and individual return envelopes in advance of census day, as follows—

- (a) form H1 or H2 as the case may be, and a reply-paid envelope to the householder or joint householders, or the person or persons for the time being acting as householder or joint householders, of each household occupying a dwelling or part of a dwelling mentioned in Group I in Schedule 1 to the Census Order or, where there is no householder or acting householder and there are no joint householders or acting joint householders of that household, to a member of that household who is aged 16 years or over on census day or, where that household consists of one person, to that person; and
- (b) subject to paragraph (2), the number of forms CE1 and I1, or forms CE1 and I2 as the case may be, and the number of individual return envelopes which the census enumerator estimates is likely to be necessary for the purpose of the census, and a reply-paid envelope to the—
  - (i) manager, chief resident officer or other person for the time being in charge of any premises mentioned in Group II, III or IV in Schedule 1 to the Census Order;
  - (ii) director or governor or other person for the time being in charge of any premises mentioned in Group V in that Schedule; and
  - (iii) commanding officer or other person for the time being in charge of any premises mentioned in Group VI in that Schedule.

(2) A reply-paid envelope need not be delivered under paragraph (1)(b) where arrangements are made for the collection of the completed forms of return under regulation 11(5).

(3) The duty assigned to the census enumerator by paragraph (1)(a) to deliver a form of return and a reply-paid envelope and by paragraph (1)(b) to deliver a form of return, an individual return envelope and a reply-paid envelope shall be satisfied—

- (a) if he hands them to the appropriate person mentioned in paragraph (1) or to a responsible person claiming to act on behalf of that person;
- (b) where no appropriate or responsible person is available, if he leaves them at the dwelling or premises referred to in paragraph (1); or
- (c) where no appropriate or responsible person is available and it is not possible to leave them at the dwelling or premises referred to in paragraph (1), if he posts them to that dwelling or premises.
- (4) The Registrar General shall make arrangements for the delivery of-
  - (a) the number of forms CE1 and I1, or forms CE1 and I2 as the case may be, and the number of individual return envelopes which are necessary for the purpose of the census, to the commanding officer or other person for the time being in charge of any vessel mentioned in Group VI in Schedule 1 to the Census Order and to the captain, master or other person for the time being in charge of any vessel mentioned in Group VII in that Schedule;
  - (b) form CE1 to the person appointed under regulation 4(e) to enumerate persons mentioned in Group VIII in Schedule 1 to the Census Order; and
  - (c) form I1 or I2 as the case may be, and an individual return envelope where one is requested, to every person mentioned in Group VIII in Schedule 1 to the Census Order.

(5) The person to whom forms of return, individual return envelopes and a reply-paid envelope are delivered under paragraph (1)(b) or to whom forms of return and individual return envelopes are delivered under paragraph (4)(a) shall hand form 11 or 12 as the case may be, and an individual return envelope, to every prescribed person on the premises or vessel who appears to him to be capable of completing the form.

(6) Where the manager or other person in charge of any premises mentioned in Group II in Schedule 1 to the Census Order has arranged for a return with respect to a person incapable of making a return to be made by a relative or other person accompanying him, he shall hand form I1 or I2 as the case may be, and an individual return envelope to the relative or other person for that purpose.

## Individual returns in households

**8.**—(1) Any person who satisfies the conditions prescribed in article 5(5) of the Census Order and who elects to make an individual return ("the elector") or a person acting on his behalf may ask the census enumerator to provide him with a separate form I1 or I2 as the case may be, and an individual return envelope.

(2) The census enumerator shall issue to the elector, or to the person acting on his behalf, the appropriate form I1 or I2 as the case may be, and an individual return envelope.

#### Information to be provided by census enumerators

- 9. When the census enumerator or other officer delivers forms of return he shall enter—
  - (a) in the case of form H1 or H2 as the case may be, delivered in accordance with regulation 7(1)(a) the—
    - (i) name of the person to whom the form has been delivered;
    - (ii) address and postcode of the dwelling or the part of the dwelling;
    - (iii) census district number;
    - (iv) enumeration district number;
    - (v) form number; and
    - (vi) number of forms issued where appropriate;

- (b) in the case of form CE1 delivered in accordance with regulation 7(1)(b) or regulation 7(4)
   (a) or (b)—
  - (i) the name of the establishment;
  - (ii) the address and postcode of the establishment;
  - (iii) the census district number;
  - (iv) the enumeration district number;
  - (v) the form number; and
  - (vi) a tick in the appropriate box if the form refers to premises mentioned in Group VIII in Schedule 1 to the Census Order;
- (c) in the case of form I1 or I2 as the case may be, delivered in accordance with regulation 7(1)
  (b) or regulation 7(4)(a) or (c) the—
  - (i) census district number;
  - (ii) enumeration district number; and
  - (iii) form number; and
- (d) in the case of form I1 or I2 as the case may be, issued in accordance with regulation 8(2) the—
  - (i) name of the elector;
  - (ii) address and postcode of the dwelling or the part of the dwelling;
  - (iii) census district number;
  - (iv) enumeration district number; and
  - (v) form number.

## Information to be provided by persons in charge of premises or vessels

**10.**—(1) The manager, chief resident officer, director or governor or other person for the time being in charge of any premises mentioned in Group II, III, IV or V in Schedule 1 to the Census Order shall enter on every form of return made under article 5(6) of the Census Order by or with respect to any person in the premises, the name of the person by or with respect to whom the return is to be made and the address and postcode of the premises.

(2) The commanding officer or other person for the time being in charge of any premises or vessel mentioned in Group VI in Schedule 1 to the Census Order, and the captain, master or other person for the time being in charge of any vessel mentioned in Group VII in that Schedule, shall enter on every form of return made under article 5(6) of the Census Order by or with respect to any person in the premises or vessel, the name of the person by or with respect to whom the return is to be made and the address and postcode of the premises or vessel as the case may be.

## Return of completed forms of return

11.—(1) Every person who has elected to make an individual return under article 5(5) of the Census Order shall return the completed form I1 or I2 as the case may be; by placing it in the individual return envelope and handing that envelope on the day after census day or as soon thereafter as is reasonably practicable to the person to whom form H1 or H2 as the case may be, was delivered under regulation 7(1)(a).

(2) Every person to whom a form of return has been delivered under regulation 7(1)(a) shall return the completed form, together with any individual return envelopes that have been handed to him under paragraph (1) by posting it or them as the case may be, on the day after census day or as soon thereafter as is reasonably practicable in the reply-paid envelope supplied.

(3) Where forms I1 or I2 as the case may be, and individual return envelopes have been handed out in accordance with regulation 7(5) or (6), the person responsible for handing out the forms, or any person who has taken his place, shall collect the completed forms and any individual return envelopes on the day after census day or as soon thereafter as is reasonably practicable.

(4) Every person to whom forms of return, individual return envelopes and a reply-paid envelope have been delivered under regulation 7(1)(b) shall return the completed form CE1, together with any completed forms I1 or I2 as the case may be, and any individual return envelopes that have been collected by him under paragraph (3), by posting it or them as the case may be, on the day after census day or as soon thereafter as is reasonably practicable in the reply-paid envelope supplied.

(5) The census enumerator shall make arrangements for the collection of completed form CE1 together with any completed forms I1 or I2 as the case may be, and any individual return envelopes including those collected under paragraph (3) from every person to whom forms CE1 and I1, or forms CE1 and I2 as the case may be, and individual return envelopes, but not a reply-paid envelope, were delivered under regulation 7(1)(b).

(6) The Registrar General shall make arrangements for the collection of completed form CE1 together with any completed forms I1 or I2 as the case may be, and any individual return envelopes including those collected under paragraph (3) from every person to whom forms CE1 and I1, or forms CE1 and I2 as the case may be, and individual return envelopes were delivered under regulation 7(4) (a).

(7) The Registrar General shall make arrangements for the collection of completed form CE1 from the person to whom such form was delivered under regulation 7(4)(b) and for the collection of completed forms I1 or I2 as the case may be, made by persons in places mentioned in Group VIII in Schedule 1 to the Census Order.

(8) The Registrar General may make such other arrangements for the collection of the particulars prescribed by the Census Order to be stated in the returns, as he thinks fit.

#### **Follow-up action**

**12.**—(1) The census district manager or such other officer as may be necessary shall open any reply-paid envelopes and any individual return envelopes which have been returned or collected under regulation 11 and shall examine each form of return and satisfy himself that the entries thereon are properly and sufficiently made.

(2) If the census district manager or other officer is not satisfied that the entries on a form of return are properly and sufficiently made he shall pass the form of return to an appropriate officer who shall make all such enquiries of the persons concerned in completing the form, or the persons with respect to whom the return is made, as are reasonably necessary to obtain from them the particulars prescribed by the Census Order to be stated in the return.

(3) If by 8th May 2001 the census district manager has not received a form of return, the appropriate census enumerator or other officer shall make all such enquiries of the persons concerned in completing the form, or the persons with respect to whom the return is to be made, as are reasonably necessary to obtain from them the particulars prescribed by the Census Order to be stated in the return.

(4) Where the census enumerator or other officer has completed his enquiries under paragraph (3) he shall—

- (a) collect the completed form of return;
- (b) agree that the completed form of return may be returned by posting it in the reply-paid envelope provided; or
- (c) deliver a duplicate form of return and make such arrangements for the collection of the form of return as he thinks fit.

(5) Where the census enumerator or other officer has not received a completed form of return under paragraph (4)(b) he may deliver a duplicate form of return and make such arrangements for the collection of the form of return as he thinks fit.

#### Further duties of census enumerators, census team leaders and census district managers

13.—(1) As soon after census day as is reasonably practicable, the census enumerator shall complete the enumeration record book.

(2) When directed to do so by the census district manager, the census enumerator shall deliver to the census district manager or to a census team leader the enumeration record book, all forms of return which have been passed to or collected by him as the case may be, and any other written record of any nature in his possession which contains any personal census information.

(3) When directed to do so by the census district manager, the census team leader shall deliver to the census district manager all enumeration record books, forms of return and any other written record of any nature in his possession which contains any personal census information.

(4) When directed to do so by the Registrar General, the census district manager shall send to the Registrar General all completed enumeration record books relating to the enumeration districts within his census district, all forms of return however acquired, all other written records delivered to him by census enumerators or census team leaders, and any other written record of any nature in his possession which contains any personal census information.

(5) When directed to do so by the Registrar General, the census area manager shall send to the Registrar General any record (including any electronic record) in his possession which contains any personal census information.

### **Giving of information**

14.—(1) Every prescribed person shall give to the census enumerator such information as the census enumerator may reasonably require for the performance of his duties under these Regulations.

(2) Every person in respect of whom it is the duty of a prescribed person to make a return shall give to that prescribed person such personal census information as the prescribed person may reasonably require for that purpose, and shall give to the census enumerator, census team leader or census district manager such information as that officer may reasonably require for the performance of his duties under these Regulations.

- (3) A person to whom census information is given shall not without lawful authority—
  - (a) make use of that information; or
  - (b) publish it or communicate it to any other person,

otherwise than for the purposes of the Act.

### Safe custody of forms and documents

**15.** Any person having the custody, whether on his own behalf or on behalf of any other person, of any forms of return, enumeration record books or other documents (including electronic documents) containing confidential information relating to a census shall keep such forms, books and other documents in such manner as to prevent any unauthorised person having access to them.

## Revocations

16. The Census Regulations 1990(4) and the Census (Amendment) Regulations 1991(5) are hereby revoked.

Signed by authority of the Chancellor of the Exchequer

5th June 2000

*Melanie Johnson* Economic Secretary HM Treasury

## SCHEDULE 1

Regulation 5

scrib	ed persons	(2) Title of form
(a)		The form entitled "H1 England Household
(b)	(b) The householder or joint householders, or the person or persons for the time being acting as householder or joint householders, of every household in Wales, or where there is no householder or acting householder and there are no joint householders or acting joint householders of that household, the members of that household who are aged 16 years or over, or where the household consists of one person, that person.	The form entitled "H2 Wales Household Form".
(c)	(c) Any person in England mentioned in column (2) in Group II, III, IV, V, VI, VII or VIII in Schedule 1 to the Census Order.	The form entitled "I1 England Individual Form".
(d)	(d) Any person in Wales mentioned in column (2) in Group II, III, IV, V, VI, VII or VIII in Schedule 1 to the Census Order.	The form entitled "I2 Wales Individual Form
(e)	(e) Any person in England making an individual return in accordance with regulation 8.	The form entitled "I1 England Individual Form".
(f)	(f) Any person in Wales making an individual return in accordance with regulation 8.	The form entitled "I2 Wales Individual Form
(g)	(g) The manager, chief resident officer, director or governor or other person for the time being in charge of any premises mentioned in Group II, III, IV or V in Schedule 1 to	The form entitled "CE1 England and Wales Communal Establishment Form".

(1)	(2)
Prescribed persons	Title of form
the Census Order; the commanding	
officer or other person for the time	
being in charge of any premises or	
vessel mentioned in Group VI in that	
Schedule; and the captain, master or	
other person for the time being in	
charge of any vessel mentioned in	
Group VII in that Schedule.	

## SCHEDULE 2

Regulation 5

## Forms of Return for 2001 Census

29 April Count	census2001
Census Helpline 0845 301 2001 Text Phone for th	England Household Form
Mame         Address         Ad	CD     CD
Len Cook REGISTRAR GENERAL FOR ENGLAND AND WALES Declaration	
	ok that you have not missed any pages or questions.
This form is completed to the best of my knowled	
Signature/s	Date

-											
Table	1 Household M	Members									
+ List al	I members of your hou	usehold who usually live at this addres	s, including yourself.								
• Star	rt with the Household	er or Joint Householders.									
	ude anyone who is ter ally lives at this addres	mporarily away from home on the nigi ss.	ht of 29 April 2001 who								
	ude schoolchildren and versity term.	d students if they live at this address d	luring the school, college or								
		en and students who are away from ho r whom only basic information is requi									
+ Incl	ude any baby born be	fore 30 April 2001, even if still in hospi	ital.								
• Indi	<ul> <li>Include people with more than one address if they live at this address for the majority of time.</li> </ul>										
+ Indi	ude anyone who is sta	ying with you who has no other usual	address.								
	nember to include a sp ed forces, and usually	oouse or partner who works away from lives at this address.	n home, or is a member of the								
<ul> <li>If any please</li> </ul>	contact the Census He	hold aged 16 or over requires a separate Ipline and ✓ the relevant box in the col	e form for privacy reasons, lumn marked 'Individual Form'								
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Person 1											
Person 2											
Person 3											
Person 4											
Person 5											
If you have	more than 5 people in you	ur household, you will need an extra form.									
Person 6											
Person 7											
Person 8											
Person 9											
Person 10											
Table 2	2 Visitors										
the ni + If ther	ght of 29 April 2001,	form you may use Table 2 to list any who usually live elsewhere. his address, please complete questions to be answered.									
First name	e and sumaree	Address									
		and the second se									

H	low to complete the	rer	maining questions	
Pi ID	emember to use black or blue ink. at a tick in the appropriate box, te this 2. If you mark the wrong or, fill in the box and put a tick in te right one, like this 2		Where you are required to write is an answer please use CAPITAL LETTERS and leave one space between each word. Start a new line if a word will not fit.	7 What is your country of birth?
H	lousehold Accommod	lat	ion	
	What type of accommodation does your household occupy? A whole house or bungalow that is: Detached Semi-detached Terraced (including end-terrace) A flat, maiscrette, or apartment that is: In a purpose-built block of flats or tenement Part of a converted or shared house (includes bed-sits) In a commercial building for example, in an office building, or hotel, or over a shop) Mobile or temporary structure: A cateven or other mobile or temporary structure	H4 H5	Do you have a bath/shower and toilet for use only by your household? Yes No What is the lowest floor level of your household's living accommodation? Besement or semi-basement Ground floor (street level) First floor (floor above street level) Second floor First floor (floor above street level) Second floor First floor of the street level First floor of the street level First floor or higher Does your accommodation have central heating? If you have general heating Not have general heating Second floor First floor solid freet central heating in gift storage heaters worm air heating underfloor heating yes, in some or all rooms	His       Does your household own or rent the accommodation?         ●       ✓ one box only.         □       Owns outlight.         □       Owns outlight.         □       Owns with a mortgage or loan         □       Owns with a mortgage or loan         □       Cours with a mortgage or loan         □       Cours with a mortgage or loan         □       Cours with a mortgage or loan         □       Fays part rent and part mortgage ishared ownership)         □       Fays part rent and part mortgage ishared ownership)         □       Farits         □       Co to         □       Rents         □       Co to         □       Notes here rent free         □       Co to         □       Lives here rent free         □       Co to         □       Courcl (Local Authort)         □       Housing Association         Housing Co operative Charitable Trast Registered Social Landlord         □       Private landlord or letting agence         □       Private landlord or letting agence
	No No		No.	Employer of a household member     Relative or friend of a
13	How many rooms do you have for use only by your household? Do not count both rooms, toilets, halls or landings, or rooms that	<u>Н7</u>	How many cars or vans are owned, or available for use, by one or more members of your household? Include any company car or van if	household member Cther
	can only be used for storage such as cupboards. <u>Do count</u> all other rooms, for example kitchern, living rooms, bedrooms, utility rooms and studies.		available for private use.  None  One  Two	
	If two rooms have been converted into one, count them as one room. Number of rooms		Three     four or more, please     write is number	

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JOHN	MARY		ALISON				
OMLIN	Relationship of Person 2 to Person = 1		Relationship of Person 3 to Person	2			
ENTER NAME	Husband or wife			-			
OF PERSON 1	Partner			n			
ABOVE	Son or daughter		Son or daughter				
	Step-child		Step-child				
	Brother or sister		Brother or sister				
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Provide information here Questions on the followi me of Person 1 Mark Serve ENTER NAME OF PERSON 1	for household members who re ng peges should be left blank fo Name of Person 2 Frit name Summe Relationship of Person 2 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister	of the ot quire an r these p	ther members of your house Individual Form for privacy r cople. Name of Person 3 First tane Summe Relationship of Person 3 to Person + Husband or wite Partner Son or daughter Step-child Brother or sister	1 2 0 0 0 0 0 0			
Provide information here Questions on the followi me of Person 1 Mark Serve ENTER NAME OF PERSON 1	for household members who re ng pages should be left blank fo Name of Person 2 Prst name Durname Belationship of Person 2 to Person + Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father	of the ot quire an r these p	ther members of your house Individual Form for privacy r cople. Name of Person 3 First tane Surtaine Relationship of Person 3 to Person + Husbend or wite Partner Son or daughter Step-child Brother or sister Mother or father	1 2 0 0 0 0 0 0			
Provide information here Questions on the followi me of Person 1 Mark Serve ENTER NAME OF PERSON 1	for household members who re ng pages should be left blank fo Name of Person 2 Fist rane Summe Relationship of Person 2 to Person → Husband or wife Partner Son or daughter Stop-child Brother or sister Mother or father Stop-mother or stop-fathe	of the ot quire an r these p	ther members of your house Individual Form for privacy r cople. Name of Person 3 Frit tane Summe Relationship of Person 3 to Person + Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-lather				
Provide information here Questions on the followi me of Person 1 Mark Serve ENTER NAME OF PERSON 1	for household members who re ng pages should be left blank fo Name of Person 2 Prst name Surners Relationship of Person 2 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-fathe Grandchild	of the ot quire an r these p	ther members of your house Individual Form for privacy r eople. Name of Person 3 First tane Summe Relationship of Person 3 to Person + Husband or wite Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-lather Grandchild				

Name of Person 4		Name of Person 5	
STEVEN		JAMES	
SMITH Relationship of		SMITH Relationship of	
and the second	1 2 3	Person 5 to Person + 1	2 3 4
Husband or wife [		Husband or wife	
		Partner 🔲	
	200	Son ar daughter 🛛 🗹	
and the second se		Step-child	
Brother or sister		Brother or sister	
Name of Person 4		Name of Person 5	
Name of Person 4		Name of Person 5	
Sex name	. 123	Tint name	1234
Processe Senance Relationship of	123	Protinence Summe Relationship of	1 2 3 4
Relationship of Person 4 to Person 🔿	123 000	First name Summe Relationship of Person 5 to Penson →	1234
Processes Senarie Relationship of Person 4 to Person → Husband or wife	1 2 3 0 0 0 0 0 0	Protinence Science Relationship of Person 5 to Person → Husband or wife	
Protinane Senare Relationship of Person 4 to Person → Husband or wife Partner		Protinence Screams Relationship of Person 5 to Penion → Husband or wife Partner	
Presmane Summe Relationship of Person 4 to Person → Husband or wife Partner Son or daughter		Pirti name Sumane Relationship of Person S to Person → Husband or wife Partner Son or daughter	
Procreane Semane Relationship of Person 4 to Person → Husband or wile Partner Son or daughter Step-child		Protinence Summe Relationship of Person 5 to Person → Husband or wife Partner Son or daughter Step-child	
Protinent Sentre Relationship of Person 4 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father		Print norme Scinaarie Relationshilp of Person 5 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father	
Protinane Summe Relationship of Person 4 to Person → Husband or wife Partner Son or daughter Stop-child Brother or sister		Protinence Summe Relationship of Person 5 to Penson → Husband or wife Partner Son or daughter Step-child Brother or sister	
Frestmane Semane Relationship of Person 4 to Person → Husband or wile Partnar Son or daughter Step-child Brother or sister Mother or father Step-mother or step-fath		Prei norre Somere Relationship of Person 5 to Penion → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-lather Grandchild	
First name Summe Relationship of Person 4 to Person → Husband or wife Partner Son or daughter Stop-child Brother or sister Mother or sister Mother or father Step-mother or step-fath Grandshild		Protinence Summe Relationship of Person 5 to Penson → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-lather	
Procreane Semane Relationship of Person 4 to Person → Husband or wife Partner Son or daughter Step-child Brother or dather Mother or father Step-mother or step-fath Grandparent		First norm Summe Relationship of Person S to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or sister Step-mother or step-lather Step-mother or step-lather Grandchild Grandparent	

1	What is your name? (Person 1 in T	able	1)									5		is question is not applicable England.
														► Go to 10 below
2	What is your sex?	8 W	n.	atis					IN STREET	-2				- 00 to 19 billow
		+ C	100	one Of	NEX	neth	an f	TO D	At	n II.				
				the ap ricults						ndik	cafe			
3	What is your date of birth?	A		White										
	Day Month Year	C	]	Britis	h	[		143	ħ					
		E	]	Arrys				bei	kgro	und				
4	What is your marital status (on 29 April 2001)?			plant	10-14	nite	in.	Ľ						
	Single Inever married)		T		T	T		T						
	Married (first marriage)			Mise				-			-			
	☐ Ke-mirried		1	White		d al-	arde i		hhar					
	Separated (but still legally married)			White										
	Dispred	L	1					-III	Call.					
	☐ Widowed	L	-	White										
	Are you a schoolchild or student	L		Any of an				bas	kgro	und	•			
2	In full-time education?				Т		Γ	-	П					
	🗌 Yes 🖿 Go to 🧃		-		-									
	No 📂 Go to 7				L,	1	L		Ц					
	Do you live at the address	C		Asia	n or	Asi	an i	irit	ish					
	shown on the front of this form	C		India	n	0		Pa	distan	si .				
	during the school, college or university term?	E		Bang	lade	shi						1	0v	er the last twelve months
	Only answer this question If you have answered 'Yes' to Question 5.	C	3	Any o plant				340	kgroi	und				uld you say your health has the whole been:
	Yes, I live at this address during the school/college/university term													Good?
	► Go to 7				T	1	1							Fairly good?
	No, live elsewhere during the					-	-							Not good?
	school/college/university term	0		Black										
	🕪 Ga ta 35			Carib			_					1		you look after, or give any p or support to family
7	What is your country of birth?	L		Arry c plant		e illa crite		99.0	igroi.	ind,			me	mbers, friends, neighbours
	England Wales													others because of: ong-term physical or menta
	Scotland												1	Il-health or disability, or problems related to old age?
	Northern Island	L					-	-						not count anything you do as
	Republic of Ireland	3		Chin		or o	the	r e	thnic	e gn	oup		per	t of your paid employment.
	Elsewhere, please write in the	-		Chine								*		time spent is a typical week.
	persent nome of the country	L	1	Arrys	2 The	r, på	0.000		nitie J	1				Yes, 1 - 19 hours a week
			-		-			-			-			Yes, 20 - 49 hours a week Yes, 50+ hours a week

P,	erson 1 - continued	
-	Do you have any long-term illness, health problem or disability which limits your daily activities or the work you can do? Include problems which are due to old age. YesNo	18 Were you actively looking for any kind of paid work during the last 4 weeks?
13	What was your usual address one year ago?	19 If a job had been available last
+	If you were a child at bearding school or a student one year ago, give the address at which you were living during the school/collogs/university term. For a child born after 25 April 2000, √ Too usual address one year ago'.	week, could you have started it within 2 weeks?
	The address shown on the front of the form	Visi No
	No usual address one year ago	20 Last week, were you waiting to start a job already obtained?
	Elsewhere, please write in below	Wini No
		21 Last week, were you any of the following?           + √ eil the boxes that spply.           Bried
	Partoade	Student     Looking after home/family
		Permanently sick/disabled
		None of the above
14	If you are aged 16 to 74 📂 Go to 15	
	If you are aged 15 and under, or 75 and over 🖿 💿 to 35 Which of these qualifications do you have?	22 Have you ever worked?
•		Asst worked Go to 23 No, have never worked Go to 25 23 Answer the remaining questions for the main job you were doing last week, or if not working last week, your last main job. 9 Your stain job is the job in which you usually work the most hours.
15	Do you have any of the following professional qualifications?	24 Do (did) you work as an employee or are (were) you
	$\sqrt{s}$ all the bower that apply:	self-employed?
	No Professional Qualifications Qualified Dentist	Employee
	Qualified Teacher Status (for schools)     Qualified Muse, Midwile, Health Visitor	Self-employed with employees
	Qualified Medical Doctor Differ Professional Qualifications	Self-employed/freelance without omployees
	Last week, were you doing any work: • as an employee, or on a Government sponsored training scheme, • as self-employed/freelance, or in your own/family business? vf "Yes" if away from work il, on matemity leave, on holiday or temporarily loid of	25 How many people work (worked) for your employer at the place where you work (worked)?
+	"Yes' for any paid work, including casual or temporary work, even if only for one haus.	+ If you are (were) self-employed,
	✓ "Yes" il you worked, paid or unpoid, in your own/family business.	<ul> <li>to show how many people you employ (employed).</li> </ul>
	□ Yes ⊨ Go to 23	1 - 9 10 - 24

Page 7

2.6	What is (was) the full title of your main job?	2.2	How do you usually travel to
+	For example, PRIMARY SCHOOL TEACHER, STATE REGISTERED NURSE, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT. Civil Servants, Local Government Officers - give job title not grade or pay band.	+	How do you usually travel to work? √ one-box only √ one-box for the longest part, by ofitizing, of your usual journey to work Work mainly at or from home
			Underground, metto, light rail, toom
27	Describe what you do (did) in your main job.		Train
			Bus, minibus or coach
			Motor cycle, scooter or moped
			Driving a car or van
	Bo (did) you supervise any other employees? A supervisor or foreman is responsible for overseeing the work of other		Passenger in a car or van
	employees on a day-to-day basis.		Taxi
	□ 1%s □ No		Bicycle
29	What is (was) the business of your employer at the place where you work (worked)?		On foot
	For essemple, MAKING SHOES, REPAIRING CARS, SECONDARY EDUCATION, FOOD WHOLESALE, CLOTHING RETAIL, DOCTOR'S SURGERY.		0ther
	If you are (were) self-employed/freelance or have (had) your own business, what is (was) the nature of your business?	34	How many hours a week do yo usually work in your main job?
•	Civil Servants, Local Government Officers - please specify your Department.	+	Answer to nearest whole hour
		+	Give average for last four weeks. Number of hours
			worked a week
	If you were working last week III- Go to 31	35	THERE ARE NO MORE QUESTIONS FOR PERSON 1.
	What is the full name of the organisation you work for in your main job?		Go to questions for Person 2.
_	If you have your own business, write in the name.		If there are no more people in
		Ŧ	your household you do not need to answer any more
			questions. Please leave the following pages blank.
	Self-employed/heelance Vilork for a private individual	+	Remember to sign the Declaration on page 1.
	What is the address of the place where you work in your main job? If you report to a depot, write in the depot address.		
	Pottado		
	Mainly work at or from home     Offshore installation		
	No fixed place		

1	What is your name? (Person 2 in 1 First rooms and summary	fable 1)					5		is question is not applicable England.
					1.1				🖛 Go to 10 below
2	What is your sex?	8 Wh	at is you	ur ethi	nic grou	Squ			
	Male Female	1	the appro- the appro- tricultural	priate	best to				
3	What is your date of birth?	A	White						
	Day Month Year		Iritish		Insh				
			Any other			ound,			
4	What is your marital status (on 29 April 2001)?		Theats o		11				
	Single (never married)			TT		TT			
	Married (first maniage)						1		
	Re-matried		Mixed						
	Separated (but still legally married)		White an						
			Write as	id Blad	c African				
	Divorced		White an	id Asiai	1				
	Wildowed	П	Any othe	er Mixer	i backgr	ound,			
5	Are you a schoolchild or student in full-time education?		piease u	vrite in					
	🗌 Yes 📂 Go to 👩								
	No 🖛 Go to 🕇								
		¢	Asian o	r Asian	British				
6	Do you live at the address shown on the front of this form during the school, college or		Indian		Pakista	mi			
	university term?	Ц	Banglach	eshi			1		er the last twelve months
•	Only answer this question if you have answered 'Yes' to Question 5.		Any other primate in			und,			uld you say your health has the whole been:
	Yes, I live at this address during the school/collecter/university term								Good?
	Go to 7			TT	T				Fairly good?
	No. I live elsewhere during the	D	Black or	Black	British				Not good?
	school/college/university term		Caribbas		Africa				
	De Coto 35		Anyoth				1		you look after, or give any p or support to family
7	What is your country of birth?		pinner n			und,		me	mbers, friends, neighbours
	England Wales							+	others because of: ong-term physical or menta
	Scotland			TT		TT	1		II-health or disability, or problems related to old age?
	Northern Ireland								not count anything you do as
	Republic of Ineland		Chinese	or ath	er ethn	ic grou	up +	par	t of your paid employment. time spent in a typical week.
	Elsewhere, piezze worke in the present name of the country		Any oth	it, plea	or wr/br	in .			No
								Ц	Nis, 1 - 19 hours a week
									Yes, 20 - 49 hours a week
									Yes, 50+ hours a week

12	Do you have any long-term illness, health problem or disability which	18 Were you actively looking for any
	limits your daily activities or the work you can do? Include problems which are due to old age.	kind of paid work during the las 4 weeks?
	□ ¥s □ №	□ ¥5 □ ₩
12	What was your usual address one year ago?	19 If a job had been available las
•	If you were a child at locarding school or a student one year ago, give the address at which you were living during the school/college/university term.	week, could you have started within 2 weeks?
0	For a child born after 29 April 2008, √ Wo usual address one year ago'. □ The address shown on the front of the form	Visi No
	No usual address one war ago Same as Person 1	20 Last week, were you waiting start a job already obtained?
	Ekewhere, place write in dalaw	□ ¥6 □ No
		21 Last week, were you any of th
		following?
		4 √ all the boxes that apply. Refired
		Student
	Postcode	Looking after homo/family
		Permanently sick/disabled
14	If you are aged 16 to 74 📂 Go to 15	None of the above
	If you are aged 15 and under, or 75 and over 📂 Go to 35	22 Have you ever worked?
410	Which of these gualifications do you have?	Yes, please write in the year you
	✓ all the qualifications that apply or if not specified, the nearest equivalent.	last worked
	1+ O lavels/CSEs/GCSEs (any grades)     N/Q Level 1, Foundation GM/Q	Co to 23
	S+ O levels, S+ CSEs (grade 1),     S+ GCSEs (grades A-C), School Certificate     Interreclate GNVQ	No. have never worked
	1+ A levelsWS levels     NVQ Level 3, Advanced GN/Q	23 Answer the remaining question
	2+ A. levels, 4+ AS levels, NVQ Levels 4-5, HNC, HND Higher School Certificate	for the main job you were doin last week, or if not working last
	First Degree (eg BA, BSc) Other Qualifications (eg City and Guilds, BSA/OCR, BTE/C6dexceb	<ul> <li>week, your last main job.</li> <li>Your main job is the job in which</li> </ul>
	Higher Degree (eg MA, PhD, PGCE, post-studuate certificates/tiploman) No Qualifications	you usually work the most hours
		24 Do (did) you work as an
	Do you have any of the following professional qualifications? I all the bases that apply.	employee or are (were) you self-employed?
	No Professional Qualifications Oualified Dentist	Employee
	Qualified Teacher Status (for schook) 🔲 Qualified Nurse, Midwile, Health Visitor	Self-employed with employees
	Qualified Medical Doctor     Other Professional Qualifications	Self-employed/feelance without employees
17	Last week, were you doing any work:	
	<ul> <li>as an employee, or on a Government sponsored training scheme,</li> <li>as self-employed/freelance, or in your own/family business?</li> <li>"Yes' if away from work it, on natemity large, on holiday or temperarily laid off.</li> </ul>	25 How many people work (worked) for your employer a the place where you work (worked)
*	v tes a away non-work is on materiary ideas, on holiday or temporary and on. J"Yes' for any paid work, including casual or temporary work, even if only	(worked)? + If you are (were) self-employed.
	for one hour.	of to show how many people
*	✓ "Yes' if you worked, peid or unpaid, in your own/family business. ○ Yes Im- Go to 23	you employ (employed).
	No - Geto 18	25 - 499 S00 or more

25	What is (was) the full title of your main job?	33 How do you usually travel to
6 M (	For exercise, PRIMARY SCHOOL TEACHER, STATE REGISTERED NURSE.	as How do you usually travel to work?
	CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT.	<ul> <li>J one how only.</li> </ul>
	Ovil Servants, Local Government Officers - give ich title not grade or pay band.	<ul> <li>If the bas for the isonest part, by</li> </ul>
	construction of the second s	distance, of your usual journey to werk
	김 왕왕 아이 김 의 아이들은 것이 아이들이 아이들이 가지?	Work mainly at or from home
		Underground, metro, light rail, tram
27	Describe what you do (did) in your main job.	Train
		Bus, minibus or ceach
		Motor cycle, scooter or moped
		Driving a car or san
8	Do (did) you supervise any other employees?	Passenger in a car or san
•	A supervisor or foreman is responsible for overseeing the work of other	
	employees on a day-to-day basis.	T <sub>0</sub> xi
		Bicycle
23	What is (was) the business of your employer at the place where you work (worked)?	On foot
•	For example, MACING SHOES, REPAIRING CARS, SECONDARY EDUCATION, FOOD WHOLESALE, CLOTHING RETAIL, DOCTOR'S SURGERY,	Other
9	If you are twere) self-employed/freelance or have thad) your own business, what is (was) the nature of your business?	34 How many hours a week do you usually work in your main job?
	Ovil Servants, Local Government Officers - please specify your Department.	Answer to rearest whole hous
	옷 김 별 옷 옷 만 걸 을 한 걸 을 한 것 을 을 할 날 을 것 같 .	<ul> <li>Give average for last four weeks.</li> </ul>
		Number of hours worked a week
		35 THERE ARE NO MORE
30	If you were working last week == 60 to 31	QUESTIONS FOR PERSON 2.
	If you were not working last week 🛛 📂 Go to 35	
-	What is the full name of the organisation you work for in your main job? If you have your own business, write in the name.	+ Go to questions for Person 3.
	e you have your own buleness, write in the name.	+ If there are no more people in
	생 것 것 잘 잘 못 잘 잘 잘 잘 잘 잘 잘 잘 잘 잘 잘 잘 잘 잘 잘	your household you do not
		need to answer any more
		questions. Please leave the
		following pages blank.
	Self-employed/freelance Work for a private individual	+ Remember to sign the
32	What is the address of the place where you work in your main job?	Declaration on page 1.
•	If you report to a deput, write in the depot address.	
	Passodo	
	Mainly work at or from home     Offshore installation	
	D Ma fand alars	
	No foed place	

1 What is your name? (Person 3 in Hist name and survanee	Table 1)		9	This question is not applicable in England.
				📂 Go to 10 below
2 What is your sex?	personal second	sat is your ethnic group?		
Male Fernale	1	cose ONE section from A to E, then the appropriate box to indicate in cultural background.		
3 What is your date of birth?	A	White		
Day Month Year		British 🔲 Mah		
		Any other White background, single write in		
4 What is your marital status (on 29 April 2001)?				
Single Inever married				
Married (First marriage)	8	Mixed		
Re-married		White and Black Caribbean		
Separated (but still legally married)		White and Black African		
Divorced		White and Asian		
Widowed				
5 Are you a schoolchild or student	Ц	Any other Mined background, please write in		
in full-time education?				
Yes 📂 Go to 🗃	-			
No 📂 Go to 7				
6 Do you live at the address	c	Asian or Asian British		
shown on the front of this form		Indian Rakistani		
during the school, college or university term?		Bangladeshi	10	Over the last twelve months
Only answer this question if you have answered "Yes' to Question 5.		Any other Asian background, pleuse verifie in		would you say your health has on the whole been:
Yes, I live at this address during				Good?
the school/college/university term				Fairly good?
Goto 7	_			Not good?
No. I live elsewhere during the school/college/university term	D	Black or Black British		
🍋 6o to 35		Caribbean 🔲 African	11	Do you look after, or give any
7 What is your country of birth?		Any other Black background, plasse verifier in		help or support to family members, friends, neighbours
England Weles				or others because of: • long-term physical or menta
Scotland				III-health or disability, or
Northern Ireland				<ul> <li>problems related to old age?</li> </ul>
Republic of Ireland	E	Chinese or other ethnic group		Do not count anything you do as part of your paid employment.
		Chinese	+	✓ time spent in a typical week.
<ul> <li>Eltenhete, please write in the present name of the country</li> </ul>		Any other, place write in		No No
				Yes, 1 - 19 hours a week
				Yes, 20 - 49 hours a week
				Yes, 50+ hours a week

Person 3 - continued		
Do you have any long-term illness, heal- limits your daily activities or the work     Include problems which are day to sid age     No	you can do?	18 Were you actively looking for any kind of paid work during the last 4 weeks?
<ol> <li>What was your usual address one year</li> <li>If you were a child at boarding school or a address at which you were living during th</li> <li>For a child born after 29 April 2000. J You</li> </ol>	student one year ago, give the e school/college/university term.	19 If a job had been available last week, could you have started within 2 weeks?
The address shown on the front of the for		Yas No
No usual address one war ago	Same as Person 1	20 Last week, were you waiting to start a job already obtained?
Elsewhere, please write in below		
		21 Last week, were you any of th
		following? +  \$\sqrt{ell the boxes that equily. }
		Refied
		Student
	Pesteade	Looking after home-family
		Permanently sick/disabled
4 If you are aged 16 to 74	- Co to 15	None of the above
If you are aged 15 and under, or 75 an		22 Have you ever worked?
5 Which of these qualifications do you h		Yes, please write in the year you
★ √ all the qualifications that apply as if not		last worked
1+ O levels/CSEs/GCSEs (any grades)	NVQ Level 1. Foundation GNVQ	De Goto 21
S+ O levels, S+ CSEs Ignade 10, S+ GCSEs (grades A-C), School Certificate	NWQ Level 2, Intermediate GNVQ	No, have never worked
1+ A levels/AS levels	NWQ Level 3, Advanced GNVQ	23 Answer the remaining question
2+ A invels, 4+ A5 levels, Higher School Certificate	NWG Levels 4-5, HNC, HND	for the main job you were doin last week, or if not working last
First Degree (eg BA, BSc)	<ul> <li>Other Qualifications leg City and Guilds, RSA/OCR, BTEC/Edencel)</li> </ul>	<ul> <li>week, your last main job.</li> <li>Your main job is the job in which</li> </ul>
Higher Degree (eg MA, PhD, PGCE, post-oraduate certificates/diolomas)	No Qualifications	you usually work the most hours.
6 Do you have any of the following prof		24 Do (did) you work as an employee or are (were) you
■ ✓ all the boxes that apply:		self-employed?
No Professional Qualifications	Qualified Devilist	Employee
	Qualified Nurse, Midwife, Health Visitor	
Qualified Medical Doctor	Other Professional Qualifications	Self-employed/freelance without employees
17 Last week, were you doing any work:		25 How many people work
<ul> <li>as an employee, or on a Governmer</li> <li>as self-employed/freelance, or in yo</li> </ul>	ur own/family business?	(worked) for your employer at the place where you work
<ul> <li>Yes' if away from work ill, on maternity lear</li> </ul>		(worked)?
<ul> <li>I work, including casual for one hour.</li> </ul>		<ul> <li>If you are (were) relf-employed,</li> <li>✓ to show how many people</li> </ul>
<ul> <li>Yes' if you worked, paid or unpoid, in your state of the second se</li></ul>	our own/Tamily business.	you employ temployed).
Yes ⊨ 60 to 23		1 - 9 10 - 24
No In- Go to 11		25 - 499 Stop or more

2.2	What is (was) the full title of your main job?	-	Manual discourse in the second in
-		33	How do you usually travel to work?
	For example, PRIMARY SCHOOL TEACHER, STATE REGISTERED NURSE, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT		
		+	√ ane bas anly.
	Civil Servants, Local Government Officers - give job title not grade or pay band.	+	In the box for the longest part, by distance, of your usual journey to work
	빙지 엄마들리 전 말 다 김 의 옷을 물을 물을 알 걸 달 다 물		
			Work mainly at or from home
			Underground, metro, light rail, tram
27	Describe what you do (did) in your main job.		Tvin
			Bus, minibus or coach
			Motor cycle, scooter or moped
			Driving a car or van
28	Do (did) you supervise any other employees?		Passenger in a car or van
	A supervisor or foreman is responsible for overseeing the work of other employees on a day-to-day basis.		
			_
29	What is (was) the business of your employer at the place where you		Elcycle
	what is (worked)?		Dn foot
	For example, MAKING SHOES, REPAILING CARS, SECONDARY EDUCATION, FOOD WHOLESALE, CLOTHING RETAIL, DOCTOR'S SURGERY		Other
÷	If you are (were) self-employed/levelance or have (had) your own business, what is (wes) the nature of your business?	34	the second second by the second
	what is (was) the nature of your business? Civil Servanta, Local Government Officers - please specify your Department.		usually work in your main job?
	Civit service, code dovernment, criticent - preside specify your department.	+	Answer to rearest whole hour.
	김 전 전 김 김 김 전 김 김 김 김 김 김 김 김 의 김 의 김 의		Give average for last four weaks.
			Number of hours
			worked a week
201	If you were working last week IN- Go to IN	35	THERE ARE NO MORE
oone .	If you were not working last week IP- Go to 35		QUESTIONS FOR PERSON 3.
31	What is the full name of the organisation you work for in your main job?	+	Go to questions for Person 4.
+	If you have your own business, write in the name.		14
		4	If there are no more people in your household you do not
			need to answer any more
			questions. Please leave the following pages blank,
	Self-employed/fivelance Work for a private individual	+	Remember to sign the Declaration on page 1.
	What is the address of the place where you work in your main job?		
	If you report to a depot, write in the depot address.		
	Potezda		
	Mainly work at or from home Offshore installation		
		1.0	
	No fixed place		

1	What is your name? (Person 4 in First name and carname	Tabi	le 1)					9	This question is not applicable in England.
									📂 Go to 10 below
Z	What is your sex?	8	Wh	at is your o	rthnic	group?			
	Male Irenale	+	1	oso ONE soci hie appropro r-cultural ba	ane be	or to ind			
3	What is your date of birth?		A	White					
	Day Month Year			British		rish			
				Any other V	white th	ackgroun	d,		
4	What is your marital status (on 29 April 2001)?			please wald	e in				
	Single (never married)		-						
	Married (Tirst merriage)								
	Remarried		8	Mixed					
	Separated four still legally manied		0	White and 0					
				White and b	Slack A	frican			
	Divorced			White and /	tsian				
	Widowed			Any other M		eckgroun	d.		
5	Are you a schoolchild or student in full-time education?			please write	0.09		D	E	
	🗌 Yas 🖿 Goto 6						m		
	No 📂 Goto 7		9				L.		
6	Do you live at the address		c	Asian or As					
	shown on the front of this form		Ш.	Indian	-	lakistani			
	during the school, college or university term?			Bangladeshi				10	Over the last twelve months
÷	Only answer this question if you have answered 'Yes' to Question 5.			Any other A please world		ickgroune	6, 		would you say your health has on the whole been:
	Yes, I live at this address during the school/college/university term		Ц				Ц		Good?
	Go to 7								Not good?
	No, I lise elsewhere during the school/colle paruniversity term		D	Black or Bla	ack Br	itish			C
	schooscole gevenwers ly term			Caribbean		drican		11	Do you look after, or give any
				Any other B	lack be	idiground	l,		help or support to family
7	What is your country of birth?			plouse world	e io				members, friends, neighbours or others because of:
	England Wales								<ul> <li>long-term physical or mental ill-health or disability, or</li> </ul>
	Scotland						T		<ul> <li>problems related to old age?</li> </ul>
	Northern Ireland		E	Chinese or	other	ethnic e	roun	+	Do not count anything you do as
	Republic of Ireland			Chinese					part of your paid employment. √ time spent in a typical week.
	bawhere, please write in the present same of the country			Any other, p	dease	write in			No No
									Yes, 1- 19 hours a week
									Yes, 20 - 49 hours a week
									Yes, 50+ hours a week

Page 15

12	Do you have any long-term illness, health problem or disability which	18. Were you actively looking for any
	limits your daily activities or the work you can do?	kind of paid work during the last
÷	Include problems which are due to old age.	4 weeks?
	Ves No	Yes No
	What was your usual address one year ago?	19 If a job had been available last week, could you have started
•	If you were a child at boarding school or a student one year ago, give the address at which you were living during the school/college/university term.	within 2 weeks?
•	For a delid born after 29 April 2000, 🗸 'No usual address one year ago'.	Yes No
	The address shown on the front of the form No usual address one year ago Same as Person 1	20 Last week, were you waiting t start a job already obtained?
	No usual address one year ago     Same as Person 1     Bsewhere, please write in below	Yei No
	Coewicite, places write at Datow	21 Last week, were you any of th
		following?
		♦ √ all the boxes that apply. ■ Reised
		Student
	Pottode	Looking after home-family
		Permanently sick/disabled
14	If you are aged 16 to 74 📂 Go to 15	None of the above
	If you are aged 15 and under, or 75 and over 📂 Go to 35	22 Have you ever worked?
12	Which of these qualifications do you have?	Wes, polyage works in the year year
+	$\checkmark$ all the qualifications that apply as if not specified, the nearest equivalent.	last worked
	1+ O levels/CSEs/GCSEs (any grades) NVQ Level 1, Foundation GMVQ	
	□ 5+ 0 levels, 5+ CSEs lgrade 10, □ M/O Level 2,	Im Go to 23 ■ No, hive never worked
	5+ GCSEs (grades A-C), School Certificate Intermediate GWVQ	📂 Go to 15
	1+ A levels/AS levels     MVQ Level 3, Advanced GMVQ	21 Answer the remaining question
	2+ A levels, 4+ AS levels, M/Q Levels 4-5, HNC, HND Higher School Certificate	for the main job you were doin last week, or if not working las
	Fint Degree (eg BA, BSc) Other Qualifications leg City and	week, your last main job.
	Guilds, RSA/OCR, BTECREdexce) Guilds, RSA/OCR, BTECREdexce)	<ul> <li>Your main job is the job is which you usually work the most hours.</li> </ul>
	post-graduate certificates/diplomas) No Qualifications	24 Do (did) you work as an
16		employee or are (were) you self-employed?
•	all the boxes that apply:     No Professional Qualifications     Gealified Dentist	Employee
	Qualified Teacher Status (for schools) Qualified Nume, Midwile, Health Visitor	Self-employed with employees
	Qualified Medical Doctor     Other Professional Qualifications	Self-employed/freelance without
17	Last week, were you doing any work:	employees
	<ul> <li>as an employee, or on a Government sponsored training scheme,</li> </ul>	25 How many people work
	<ul> <li>as self-employed/freelance, or in your own/family business?</li> <li>"Yes' if away from work ill, on maternity leave, on holiday or personarily lead off.</li> </ul>	(worked) for your employer at the place where you work (worked)?
	J"Yest' for any paid work, including casual or temporary work, even if only	H you are (were) self-employed,
۰.	for one hour. Yes' if you worked, paid or unpaid, in your own/family business.	<ul> <li>to show how many people you employ (employed).</li> </ul>
•	🗌 Yes 🖿 Go to 23	1 -9 10 - 24

26 What is (was) the full title of your main job?	33 How do you usually travel to
For example, PRIMARY SCHOOL TEACHER, STATE REGISTERED MURSE.	work?
CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT.	♦ √ one bar only:
Civil Servants, Local Government Officers - give job tide not grade or pay band	+ I the box for the longest part, by
	distance, of your usual journey to work
	Work mainly at or from home
	Underground, metro, light rol, tram
27 Describe what you do (did) in your main job.	Train
	Bus, minibus or coach
	Motor cycle, scooter or moped
	Driving a car or van
18 Do (did) you supervise any other employees?	Passenger in a car or van
<ul> <li>A supervisor or foreman is responsible for overseeing the work of other employees on a day-to-day basis.</li> </ul>	Taxi
Yes No	Dicycle
29 What is (was) the business of your employer at the place where you work (worked)?	On foot
For example, MAKING SHOES, REPAIRING CARS, SECONDARY EDUCATION,     FOOD WHOLESALE, CLOTHING RETAIL, DOCTOR'S SURGERY.	Cther
If you are (were) self-employed/fire/lance or have (hed) your own business     what is (were) he nature of your business?	34 How many hours a week do yo usually work in your main job?
Civil Servants, Local Government Officers - please specify your Department	
	Artswer to nearest whole hour.
	Give average for last four weeks.     Number of hours
	worked a week
80 If you were working last week. III Go to 21	35 THERE ARE NO MORE QUESTIONS FOR PERSON 4.
If you were not working last week 🛛 📂 Go to 🛐	
H What is the full name of the organisation you work for in your main jobi	Go to questions for Person 5.
<ul> <li>If you have your own business, write in the name.</li> </ul>	+ If there are no more people in
	your household you do not
	need to answer any more questions. Please leave the
	following pages blank.
Self-employed/freelance UVork for a private individual	+ Remember to sign the
2 What is the address of the place where you work in your main job?	Declaration on page 1.
If you report to a depot, write in the depot address.	
Portcolla	
Mainly work at or from home D Offshore installation	
No fixed place	the state of the second s

1	What is your name? (Person 5 in Ta	(ble 1)			1000		his question is not applicable
	First name and sumame				_	in	England.
							🍋 Go to 10 below
2			ut is your eth				
	Male Female	1	iose ONE section the appropriate	bes to indi-			
3	What is your date of birth?	A	ir cultural back White	ground.			
	Day Month Year		British	liish			
			Any other Whit	te background	1.		
4	What is your marital status		please write is	1	_		
	(on 29 April 2001)?						
	Single (never married)	1					
	Married (first mantage)		Mixed				
	Re-married		White and Blac	k Caribbean			
	Separated (but still legally married)	Ē	White and Blac	k African			
	Divorced		White and Asia				
	Widowed		Any other Mixe				
5	Are you a schoolchild or student		please write k				
	in full-time education?						
	🗌 Yes 🖿 Go to 🖪			TTT	1		
	🗌 No 📂 Ge to 7	c	Asian or Asian	. Belike			
6		n.	Indian	Pakistani			
	shown on the front of this form during the school, college or	-	Banpladeshi				
	university term?		Any other Asian	o hadenes ed			ver the last twelve months ould you say your health has
1	Only answer this question if you have answered 'Yes' to Question 5.		please write h				n the whole been:
	Yes, I live at this address during the school/college/university term						Good?
	So to 7			TIT			] Fairly good?
	No. Live elsewhere during the	_					] Not good?
	school/college/university term	D	Black or Black Caribbean	1 African			
	► 60 to 35		Any other Black				o you look after, or give any alp or support to family
7	What is your country of birth?	U	please write k			m	embers, friends, neighbours
	England Wales						r others because of: long-term physical or menta
	Scotland	-					Ill-health or disability, or problems related to old age?
	Northern Ireland	_					o not count anything you do as
	Republic of Ireland		Chinese or ot	her ethnic gr	oup	p.	ert of your paid employment. time spent in a typical week.
	Brewhere, please write in the		Any other, play	ine workle in		E	] No
	present name of the country	-	-1			Г	Yes, 1 - 19 hours a week
						Г	Yes, 20 - 49 hours a week
						-	1 Yes, 50+ hours a week

P	erson 5 - continued	
	Do you have any long-term illness, health problem or disability which limits your daily activities or the work you can do? Indede problems which are due to old age.	Were you actively looking for any kind of paid work during the last 4 weeks?     Yes No
12	What was your usual address one year ago?	19 If a job had been available last
0 0	If you were a child at boarding school or a student one year ago, give the address at which you were living during the school/college/university term.     For a child born after 29 April 2000, √ Tho usual address one year ago'.     The address shown on the front of the form     No usual address one year ago     Same as Person 1     Ehewhere, please vector in below:	Week, could you have started it     within 2 weeks?     Yes No     Start a job already obtained?     Yes No
		Z1 Last week, were you any of the following?
	Postrode	Permanently sido/disabled
		None of the above
14	H you are aged 16 to 74 📂 Go to 15	I none of the above
	If you are aged 15 and under, or 75 and over 🖿 🙃 to 35	22 Have you ever worked?
*	<ul> <li>✓ all the qualifications that apply oc if not specified, the nearest equivalent.</li> <li>1+ O levels/CSEs/GCSEs (any grades)</li> <li>S+ O levels, S+ CSEs (grade 1), S+ GCSEs (grades A-C), School Certificate</li> <li>NVQ Level 2, Intermediate GNVQ</li> <li>1+ A levels/AS levels, Higher School Certificate</li> <li>NVQ Level 3, Advanced GNVQ</li> <li>2+ A levels, 4+ AS levels, Higher School Certificate</li> <li>NVQ Level 4-5, HNC, HND</li> <li>First Degree (eg BA, BSc)</li> <li>Other Qualifications (eg City and Guilds, RSA/OCR, BTEC/Edexce)</li> <li>Higher Degree (eg MA, PhD, PGCE, post-quaduate certificates/tiptomax)</li> <li>No Qualifications</li> </ul>	Lost worked     Lost worked     Lost worked     Lost and the remaining questions     for the main job you were doing     last week, or if not working last     week, your last main job.     Your main job is the job in which     you usually work the mast hours.
	Do you have any of the following professional gualifications?	24 Do (did) you work as an employee or are (were) you
10.00	✓ all the boxes that apply.	self-employed?
	No Professional Qualifications     Qualified Centist	Employee
	Qualified Teacher Status (for schools) 🔲 Qualified Nurse, Midwile, Health Visitor	Self-employed with employees
	Qualified Medical Doctor Other Professional Qualifications	Self-employee/freelance without employees
4	Last week, were you doing any work: • as an employee, or on a Government sponsored training scheme, • as self-employed/freelance, or in your own/family business? / 'Yes' if away from work it, on matemity leave, on holiday or tempararily laid off.	denormouth.
*	<ul> <li>✓ 'Yes' for any paid work, including casual or temporary work, even if only- for one hour.</li> <li>✓ 'Yes' if you worked, paid or unpaid, in your own/family business.</li> <li>Yes Im Go to 23</li> </ul>	<ul> <li>If you are (were) self-employed.</li> <li>✓ to show how many people you employ (employed).</li> <li>□ 1-9 □ 10-24</li> </ul>
		1 1 2 1 10 29

	erson 5 - continued		
-	What is (was) the full title of your main job?	33	constraint from support to the set of
+	For example, PRIMARY SCHOOL TEACHER, STATE REGISTERED NURSE, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT.		work?
	Civil Servants, Local Government Officers - give job title not grade or pay band.	*	A see all see b
		-	distance, of your usual journey to work
			Work mainly at or from home
			Underground, metro, light rail, tram
-	Describe what you do (did) in your main job.		Tain
25	Describe what you do (dia) in your main job.		Uss. minibus or coach
			-
			Motor cycle, scooter or moped
2.02	Sec 24.0		Driving a car or san
28	Do (did) you supervise any other employees? A supervisor or foreman is responsible for overseeing the work of other		Passenger in a car or van
	employees on a day-to-day basis.		Taxi
	Yes Mo		Dicycle
29	What is (was) the business of your employer at the place where you		Con foot
	work (worked)?		C Other
	For example, MAKING SHOES, REPAIRING CARS, SECONDARY EDUCATION, FOOD WHOLESALE, CLOTHING RETAIL, DOCTOR'S SURGERY.		
٠	If you are (were) self-employed/freelance or have (hed) your own business, what is (wes) the nature of your business?	34	
	Civil Servents, Local Government Officers - please specify your Department.		usually work in your main job? Access to rearest whole hous
			Give average for last four weeks.
		1	Number of hours
			worked a week
-		35	THERE ARE NO MORE
10	If you were working last week III Go to III	1	QUESTIONS FOR PERSON 5.
			If there are no more people in
	What is the full name of the organisation you work for in your main job? If you have your own business, write in the name.	1	your household you do not
*	n you have your own business, while in the name.		need to answer any more
			questions.
		+	If there are more than 5 people in your household, you will
			need to contact the Census
	Self-employed/freelance Work for a private individual		Helpline (0645 301 2001) for an extra form.
37	What is the address of the place where you work in your main job?		Remember to sign the
	If you report to a depot, write in the depot address.		Declaration on page 1.
			2
			ational
	Portuole	4	STATISTICS
			And the second s
			and the second s
	Mainly work at or from home Offshore installation		
	Mainly work at or from home     Offshore installation     No fixed place		

H2	ale		
29 April	*		
count	mein		
AT L'EMARDAMENTA ILLA	Census2001		
(CSH229)	Jel ISUSZ001		
- CITABOLICA	Wales Household Form		
Census Helpline 0845 301 2001 Text Phone for th	he Deaf 0845 303 2001 Website www.statistics.gov.uk		
Name			
Address	CD		
	m		
	Form Number		
Postcocle	* Form 1 of		
	"Multi-fam households on		
To the Householder, Joint Householders or	What you have to do		
members of the household aged 16 or over The Census is a count every ten years of all people and	Your household should complete this form in black a		
households in the country. Census information is used by central and local covernment, health authorities and many	blue ink. A household is:		
other organisations to allocate resources and plan services	<ul> <li>one person living alone, or</li> </ul>		
for everyone. The Office for National Statistics conducts the Census in England and Wales.	<ul> <li>a group of people (not necessarily related) living a the same address with common housekeeping -</li> </ul>		
Completing your form	sharing either a living room or sitting room, of at least one meal a day.		
Completion of the Ceraus form is compulsory under the Ceraus Act 1920. If you refuse to complete it, or give false information, you may be lable to a fine. The requirement	<ul> <li>This form covers five people. If there are more than fiv people in your household you will need an extra form</li> </ul>		
for you to return a completed form will not be satisfied	· Decide whether you wish to use the English or th		
until such a form has been received. If you need help please contact the Census Helpline.	Welsh language version of the form. You must use th same form for all members of your household.		
Confidentiality The information you provide is protected by law and treated	Identify household members in Table 1 on page 2.		
in strict confidence. The information is only used for statistical purposes, and amone using or disclosing Census	will help you to complete the form if you use Table to identify visitors.		
information improperly will be liable to prosecution. Census forms will be held securely. Under the current terms of the	<ul> <li>Answer the questions about your accommodation (page 3).</li> </ul>		
Public Records Act 1958, the data will be treated as confidential for a period of 100 years.	Complete the relationship question (pages 4 and 5).		
Thank you for counting yourself in.	Answer the remaining questions for every member of your household.		
Ten ligh mational	<ul> <li>Sion the Declaration and post the form beck in th</li> </ul>		
J. Sidibiles	envelope supplied.		
Len Cook. REGISTRAR GENERAL FOR ENGLAND AND WALES	For help or extra forms, call the Census Helpline o 0845 301 2001 (local rate number).		
Declaration			
+ To be signed after completing this form. Please die	ok that you have not missed any pages or questions.		
This form is completed to the best of my knowled			
Signature/s	Date		

Table	1 Household N	lembers	
+ List al	I members of your hou	sehold who usually live at this addre	ss, including yourself.
+ Star	rt with the Householde	r or Joint Householders.	
	ude anyone who is tem ally lives at this addres	porarily away from home on the nig s.	ht of 29 April 2001 who
	ude schoolchildren and versity term.	students if they live at this address	during the school, college or
		and students who are away from h whom only basic information is requ	
• Indi	ude any baby born bef	ore 30 April 2001, even if still in hosp	iital.
• Indi	ude people with more t	han one address if they live at this ad	Idress for the majority of time.
• Indi	ude anyone who is stay	ing with you who has no other usua	al address.
	nember to include a spo red forces, and usually i	use or partner who works away fro ives at this address.	m home, or is a member of the
+ If any please	member of your house contact the Census Hel	old aged 16 or over requires a separat aline and 🖌 the relevant box in the co	e form for privacy reasons, Jumn marked 'Individual Form'.
Person No.	First name and surname		Individual Form
Person 1			
Person 2			
Person 3			П
Person 4			
Person 5			П
li you have	more than 5 people in you	household, you will need an extra form.	
Person 6			
Person 7			
Person B			Π
Person 9			
Person 10			
Table 2	2 Visitors		
Table 2	Visitors		
the ni If then	ght of 29 April 2001, v	rm you may use Table 2 to list any who usually live elsewhere. is address, please complete questions be answered.	
First name	and sumarie	Address	

Page 2

10	emember to use black or blue ink.		Where you are required to	7 What is your country of birth?			
Put a tick in the appropriate box, like this 2. If you mark the wrong box, 60 in the box and put a tick in			write in an answer please use				
			CAPITAL LETTERS and leave	Distribute primate and the country			
			one space between each word. Start a new line if a	SOUTH			
the right one, like this			word will not fit.	AFRICA			
H	ousehold Accommo	dat	ion				
1	What type of accommodation	H4	Do you have a bath/shower	HE Does your household own or			
	does your household occupy?		and toilet for use only by your household?	rent the accommodation?			
	A whole house or bungalow that is		your household?	+ 🗸 ane bax anly.			
	Detached		NS NS	Owns outright			
	Semi-detached		Mo No	De Go to H10			
		HS	What is the lowest floor level	Owns with a mortgage or loar			
	Tenaced (including end-tenace)		of your household's living accommodation?	Go to Hig			
	A flat, maisonette, or apartment that is:		Internet or semi-basement				
	In a purpose-built block of flats			Pays part rent and part			
	ortenenent		Ground floor (street level)	mortgage (shared ownership)			
	Part of a converted or shared house (includes bed-sits)		First foor (floor above street level)	De Co to HID			
	In a commercial building (for		Second floor	Eents			
	<ul> <li>example, in an office building, or hotel, or over a shop)</li> </ul>		Third or fourth floor	Go to H9			
			Fifth floor or higher				
	Mobile or temporary structure:	_		Uves here rent free			
	A carawan or other mobile or temporary structure	HG	Does your accommodation have central heating?	Go to H9			
			If you have central heating				
2	Is your household's accommodation self-contained?		available, V 'Yes' whether or not you use it.	H9 Who is your landlord?			
	This means that all the rooms.		Central heating includes:	Council & ocal Authority			
	including the kitchen, bathroom		· gas, oil or solid fuel central	Housing Association			
	and toilet are behind a door that - only your household can use.		<ul> <li>night storage heaters</li> </ul>	Housing Co-operative			
			· warm air heating	Charitable Trust Repistered Social Landlord			
	Yes, all the rooms are behind a door that only our household		<ul> <li>underfloor heating</li> </ul>				
	Cân 152		Yes, in some or all rooms	Private landlord or letting agen			
	No No		No No	Employer of a household memb			
		-		Relative or friend of a			
2	How many rooms do you have	H7	How many cars or vans are owned, or available for use.	household member			
đ	for use only by your household?		by one or more members of	Cther			
	Do not count bothrooms, toilets,		your household?				
	halls or landings, or rooms that	+	Include any company car or van if available for private use.	HI0 Please turn the page.			
	can only be used for storage such as capboards.		None				
	Do count all other rooms, for		□ One				
	coample kitchens, living rooms, bedrooms, utility rooms and studies.						
	If two rooms have been converted						
	into one, count them as one room.		Three				
	Number of rooms		Four or more, please				
			BUCEP DI LEURORY				

In this example Steven's ( brother.	Person 4) relationship to Person	1 is son,	to Person 2 is son and to Pe	rson 3 is
Name of Person 1	Name of Person 2		Name of Person 3	
JOHN	MARY		ALISON	
SMITH	SMITH		SMITH	
	Relationship of Person 2 to Person = 1		Relationship of Person 3 to Person + 1	2
ENTER NAME	Husband or wife 🛛 📝		Husband or wife	
OF PERSON 1	Partner 🔲		Partner	
ABOVE	San er daugitter		Sen or daughter	
	Step-child		Step-child	
	Brather or sister		Orother or sister	
Provide information here Questions on the following	tionship of each person to each for household members who re- ng pages should be left blank for Manua of Auston 1	juire an	Individual Form for privacy eople.	
Provide information here	for household members who re-	juire an	Individual Form for privacy	
Provide information here Questions on the followin ame of Person 1	for household members who re- ng pages should be left blank for Name of Person 2	juire an	Individual Form for privacy eople. Name of Person 3	
Provide information here Questions on the followin ame of Person 1	for household members who rea ig pages should be left blank for Name of Person 2	juire an	Individual Form for privacy eople. Name of Person 3	
Provide information here Questions on the followin ame of Person 1	for household members who re- ng pages should be left blank for Name of Person 2 Fint name Canone Relationship of	uire an these p	Individual Form for privacy eople. Name of Person 3 Fini none Gatorie Relationship of	reasons.
Provide information here Questions on the followin ame of Person 1 Intrane	for household members who rea ng pages should be left blank for Name of Person 2 Fot new Carrene Relationship of Person 2 to Person →	uire an these p	Individual Form for privacy explet Name of Person 3 Finit core Containe Relationship of Person 3 to Person 🌩	reasons.
Provide information here Questions on the followin ame of Person 1 Intrane	for household members who reing pages should be left blank for Name of Person 2 Fint name Canone Relationship of Person 2 to Person + Husband or wife	uire an these p	Individual Form for privacy explex Name of Person 3 First case Schooler Relationship of Person 3 to Person + Husband or wile	reasons.
Provide information here Questions on the followin ame of Person 1 nt name sname ENTER NAME OF PERSON 1	for household members who re- ng pages should be left blank for Name of Person 2 Fint name Carrene Relationship of Person 2 to Person → Husband or wife Partner	uire an these p	Individual Form for privacy explex Name of Person 3 Fini none Containe Relationship of Person 3 to Person Husband or wife Partner	reasons.
Provide information here Questions on the followin ame of Person 1 nt name sname ENTER NAME OF PERSON 1	for household members who rea ng pages should be left blank for Name of Person 2 That name Carrone Relationship of Person 2 to Person → Husband or wife Partner Son or daughter	uire an these p	Individual Form for privacy exple: Name of Person 3 Criticore Curture Relationship of Person 3 to Person → Husband or wife Partner Son or daughter	reasons.
Provide information here Questions on the followin ame of Person 1 nt name sname ENTER NAME OF PERSON 1	for household members who reing pages should be left blank for Name of Person 2 First name Canone Relationship of Person 2 to Person → Husband or wife Partner Son or daughter Step-child	uire an these p	Individual Form for privacy explex Name of Person 3 First case Containe Sectorie Relationship of Person 3 to Person → Husband or wife Partner Son or daughter Step-child	reasons.
Provide information here Questions on the followin ame of Person 1 nt name sname ENTER NAME OF PERSON 1	for household members who re- ng pages should be left blank for Name of Person 2 Fint name Canone Relationship of Person 2 to Person → Husband or wife Pariner Son or daughter Step-child Brother or sister	uire an these p	Individual Form for privacy explex Name of Person 3 Fini nove Containe Containe Relationship of Person 3 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister	1 2 0 0 0 0 0 0 0 0
Provide information here Questions on the followin ame of Person 1 nt name sname ENTER NAME OF PERSON 1	for household members who res ing pages should be left blank for Name of Person 2 Thit name Garane Relationship of Person 2 to Person + Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father	uire an these p	Individual Form for privacy exple: Name of Person 3 First core Contorne Relationship of Person 3 to Person + Husband or wile Partner Son or daughter Step-child Brother or sister Mother or father	1 2 0 0 0 0 0 0 0 0
Provide information here Questions on the followin ame of Person 1 nt name sname ENTER NAME OF PERSON 1	for household members who reing pages should be left blank for Name of Person 2 First name Carnere Relationship of Person 2 to Person → Husband or wille Partner Son or daughter Step-child Brother or sister Mother or father	uire an these p	Individual Form for privacy explex Name of Person 3 First case Containe Containe Containe Containe Containe Containe Containe Containe Relationship of Person 3 to Person → Husband or wile Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-father	1 2 0 0 0 0 0 0 0 0
Provide information here Questions on the followin ame of Person 1 nt name sname ENTER NAME OF PERSON 1	for household members who re- ing pages should be left blank for Name of Person 2 Fint name Carrone Relationship of Person 2 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-father Grandchild	uire an these p	Individual Form for privacy explex Name of Person 3 First corre Contorne Relationship of Person 3 to Person → Husband or wile Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-father Grandchild Grandparent	1 2 0 0 0 0 0 0 0 0
Provide information here Questions on the followin ame of Person 1 nt nerve strate ENTER NAME OF PERSON 1	for household members who reing pages should be left blank for Name of Person 2 First name Canone Relationship of Person 2 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-father Grandchild Grandparent	uire an these p	Individual Form for privacy explex. Name of Person 3 Fini nore Consere Consere Consere Relationship of Person 3 to Person → Husband or wile Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-father Grandchild	1 2 0 0 0 0 0 0 0 0

Name of Person 4		Name of Person 5	
STEVEN		JAMES	
Relationship of		Relationship of	
Person 4 to Person + 1	2 3	Person 5 to Person 🔹 1	2 3 4
and the second se		Husband or wife	
		Pietner	
	20	Son or daughter	
		Step-child	
Brother or sister		Brother or sister	
Name of Person 4		Name of Person 5	
First came		Picci nene	
First mene Sumerne		First mente Sumame	
First came	1 2 3	Picci nene	1 2 3 4
Post-name Samana Relationship of	123	Pissi nene Somarre Relationship of	1234
Potnese Samme Relationship of Person 4 to Person →	123	First neme Somerne Relationship of Person 5 to Person +	1 2 3 4
Postname Samme Relationship of Person 4 to Person → Husband or wife	123	Pisst nene Somerre Relationship of Person 5 to Person → Husband or wife	1 2 3 4
Protinane Samme Relationship of Person 4 to Person IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		Pict nene Somme Relationship of Person 5 to Person → Husbend or wife Partner	
First name Summe Relationship of Person 4 to Person → Husband or wife Partner Son or daughter		First name Somerne Relationship of Person 5 to Person → Husband or wife Partner Son or daughter	
Protivane Summe Relationship of Person 4 to Person → Husband or wife Partner Son or daughter Step-child		Pirst name Somerne Relationship of Person 5 to Person → Husband or wife Partner Son or daughter Step-child	
Protinane Summe Relationship of Person 4 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father		Pirct merre Somerne Relationship of Person S to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father	
Protinane Serrame Relationship of Person 4 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-father		First mene Somerne Relationship of Person 5 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-lathe	
Protinane Summe Relationship of Person 4 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-father Grandchild		First mene Somerne Relationshilp of Person 5 to Person → Husband or wife Partner Son or daughter Step-child Brother or slater Mother or father Step-mother or step-lathe Grandchild	
Frotinane Summe Relationship of Person 4 to Person → Husband or wife Partner Son or daughter Step-child Brother or dather Mother or father Step-mother or step-father Grandperent		First name Schame Relationship of Person 5 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-lathe Grandchild Grandparent	
Protinane Summe Relationship of Person 4 to Person → Husband or wife Partner Son or daughter Step-child Brother or sister Mother or father Step-mother or step-father Grandchild		First mene Somerne Relationshilp of Person 5 to Person → Husband or wife Partner Son or daughter Step-child Brother or slater Mother or father Step-mother or step-lathe Grandchild	

1	What is your name? (Person 1 in Table 1)					Can you understand, speak.
	First name and sumaris					read, or write Weish?
						Understand spoken Welsh
2	What is your sex?					
	Male Persale	<ul> <li>Choose ONE section from A to E, then</li> <li>The appropriate box to indicate</li> </ul>				Speak Welsh
				re appropriate bax to indicate r cultural background.		Read Welsh
	What is your date of birth?		A	White		Write Welsh
	Day Manth Year			British 🔲 Lifsh		None of the above
				Any other White background,		
	What is your marital status (on 29 April 2001)?			please write in		
	Married (first maniage)					
			8	Mixed		
	Re-married			White and Black Caribbean		
	Separated (but still legally married)			White and Black African		
	Divorced			White and Asian		
	Widowed		Anv:	Any other Mixed background,		
5	Are you a schoolchild or student in full-time education?			please write /n		
	🗌 Yes 🖿 Go to 🚺					
	No - Go to 7					
	-		¢	Asian or Asian British		
6	Do you live at the address shown on the front of this form			Indian 🔲 Pakistani		
	during the school, college or university term?	E	Bangladeshi			Over the last twelve months
•	Only answer this question if you have answered 'Yes' to Question 5.		Any other Asian background, planar write in	T.	would you say your health has on the whole been:	
	Yes, I live at this address during					Good?
	the school/college/university term					Fairly good?
	⊫ Goto 7	•				Not good?
	No, I live elsewhere during the school/college/university term		0	Black or Black British		
	In− 66 to 35			Caribbean 🗌 African		Do you look after, or give any
				Any other Black background, please write in		help or support to family members, friends, neighbours
1	What is your country of birth?			plate while h		or others because of:
						<ul> <li>long-term physical or ment ill-health or disability, or</li> <li>problems related to old age?</li> </ul>
	Scotland					
	Northern Iniland		E	Chinese or other ethnic group	p	Do not count anything you do as part of your paid employment.
	Republic of Ireland			Chirwse		✓ time spant in a typical week.
	Elsewhere, please series in the present name of the country			Any other, please write in		No No
	burdeness of the operation					Yes, 1 - 19 hours a week
						Yes, 20 - 49 hours a week
						Yes, 50+ hours a week

-	erson 1 - continued	
	Do you have any long-term illness, health problem or disability which limits your daily activities or the work you can do?	18 Were you actively looking for any kind of paid work during the last 4 weeks?
	Include problems which are due to old age.	
		Yes No
13	What was your usual address one year ago? If you were a child at bearding school or a student one year ago, give the address at which you were living during the school/college/university term.	19 If a job had been available last week, could you have started i within 2 weeks?
	For a child born after 25 April 2000, 🖌 'No popul address one year ago'.	
	The address shown on the front of the form	
	No usual address one year ago	20 Last week, were you waiting t start a job already obtained?
	Elsewhere, please write in below	Yes No
		21 Last week, were you any of the following?
		<ul> <li>         ↓ all the boxes that apply.         ■ Retired     </li> </ul>
		Student
	Portsoule	Looking after home#anily
		Permanently sido/disabled     Note of the above
14	If you are aged 16 to 74 📂 Go to 15	None of the above
	If you are aged 15 and under, or 75 and over 📂 🕮 📅 🐴	22 Have you ever worked?
15	Which of these qualifications do you have? I all the qualifications that apply or if not specified, the nearest equivalent.	Yes, please softe in the year you last worked
	1+ O levels/CSEs/GCSEs (any grades)     NVQ Level 1, Foundation GNVQ	► Go 10 23
	S+ O levels, S+ CSEs (grade 1),     S+ GCSEs (grades A-C), School Certificate     NVQ Level 2,     Intermediate GNVQ	No, have never worked
	1+ A levels045 levels     NVQ Level 3, Advanced GNVQ	
	2+ A levels, 4+ AS levels,     HND Levels 4-5, HNC, HND     Higher School Certificate	23 Answer the remaining question for the main job you were doing last week, or if not working last
	First Degree (og BA, 85c)  Other Qualifications (og City and Guilds, 85MDKR, BTEC/Elexaet)	week, your last main job. Your main job is the job in which
	Higher Degree (eg MA, PhD, PGCE, post-graduate certificates/tiplemax) No Qualifications	you usually work the most hours.
-	Do you have any of the following professional qualifications?	24 Do (did) you work as an employee or are (were) you self-employed?
*	all the bases that apply.     No Professional Qualified Dentist     Outlified Dentist	Imployee
	Outrilled Teacher Stotus Hor schools     Outrilled Name, Midwille, Health Visitor	Self-employed with employees
	Qualified Medical Doctor Other Professional Qualifications	Self-employed/freelance without
17	Last week, were you doing any work:	employees
	<ul> <li>as an employee, or on a Government sponsored training scheme.</li> <li>as self-employed/freelance, or in your own/family business?</li> </ul>	25 How many people work (worked) for your employer at the place where you work
	"Yes" if away from work II, on maternity leave, on holiday or temporarily laid off.	
	$\mathcal{J}^{\prime}$ "Yes' for any paid work, including casual or temporary work, even if only for one hour.	<ul> <li>If you are (were) self-employed.</li> <li>J to show how many people</li> </ul>
ф ф	"Yes" If you worked, poid or unpaid, in your own/family business.	you employ (employed).
¢	✓ 'Yes' if you worked, pold or unpold, in your own/family business.           ™s         ₩c         Go to         23	1 · 9 10 · 24

_	erson 1 - continued		
* *	What is (was) the full title of your main job? For example, PRIMARY SCHOOL TEACHER, STATE REGISTERED NURSE, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENCHTS ASSISTANT. CIVIL Servants, Local Government Officers - give jab title not grade or pay band.	<ul> <li>How do you usually travel t work?</li> <li>✓ one-box only:</li> <li>✓ the box for the longest part, by distinct, of your usual journey to w</li> <li>Work mainly at or from hores</li> <li>Underground, metro, light col. ty.</li> </ul>	
-	Describe what you do (did) in your main job.	Underground, metro, light cal, tram	
28 +		Bus, minibus or coach      Motor cycle, scooter or moped      Oriving a car or san      Possenger in a car or son      Taxi      Bicycle      On foot      Other      How many hours a week do yo     usually work in your main job?      Answer to represe whole hous      Give average for last four weeks.     Number of hous     worked a week	
30	If you were working last week IN Go to 31 If you were not working last week IN Go to 35	35 THERE ARE NO MORE QUESTIONS FOR PERSON 1.	
3 <sup>1</sup> °	What is the full name of the organisation you work for in your main job? If you have your own business, write in the name.  Self-employed/feelance Work for a private individual What is the address of the place where you work in your main job? If you report to a depot, write in the depot address.  Periode	<ul> <li>Go to questions for Person 2.</li> <li>If there are no more people in your household you do not need to answer any more questions. Please leave the following pages blank.</li> <li>Remember to sign the Declaration on page 1.</li> </ul>	

1	What is your name? (Person 2 in Ta http://orec.anl.sumane	ble 1)	<ul> <li>9 Can you understand, speak, read, or write Welsh?</li> <li>♦ √ oil the boxes that apply.</li> </ul>
2	What is your sex?		Understand spoken Welsh Speak Welsh Read Welsh Write Welsh
4	Doy Month Year           Worth         Year           What is your marital status	British     Irish     Any other White background,     prisese write in	None of the above
	(on 29 April 2001)? Single (never married) Married (first maniage)	a Mixed	
	Re-manied     Separated dout still legally manied     Divorced	White and Black Caribbean White and Black African White and Asian	
5	in full-time education?	Any other Mised background.	
6		C Asian or Asian British	
	shown on the front of this form during the school, college or university term? Only answer this question if you have answered "Yes" to Duration 3.	Rangladeshi     Any other Asian background,     dense write in	10 Over the last twelve months would you say your health has on the whole been:
	Yes, I live at this address during the school/college/university term		Good?  fuilty good?  Not good?
	No, I five ebsewhere during the school/college/university term	Black or Black British     Caribbean African     Any other Black background,	11 Do you look after, or give any help or support to family
	What is your country of birth?  England Woles  Scotland	plane write in	members, friends, neighbours or others because of: • long-term physical or menta ill-health or disability, or • problems related to old age?
	Northern Ireland Bepublic of Ireland Exewhere, place write in the	Chinese or other ethnic group Chinese Any other, please write in	<ul> <li>Do not count anything you do as part of your paid employment.</li> <li>✓ time spent in a typical week.</li> <li>□ No</li> </ul>
	present name of the country		Ves, 1 - 19 hours a week

Person 2 - continued	
Do you have any long-term illness, health problem or disability which limits your daily activities or the work you can do?     Include problems which are due to old age.     'Ws No	18 Were you actively looking for any kind of paid work during the last 4 weeks?
<ul> <li>What was your usual address one year ago?</li> <li>If you were a child at boarding school or a student one year ago, give the address at which you were living during the school/college/university term.</li> <li>For a child born after 29 April 2000. √ The usual address one year ago'.</li> <li>The address shown on the front of the form</li> </ul>	19       If a job had been available last week, could you have started it within 2 weeks?         Yes       No         20       Last week, were you waiting to
No usual address one year ago     Same as Person 1     Stewhere, please write in below	start a job already obtained? Ves No Last week, were you any of the following?
Personde	
14 If you are aged 16 to 74 IF Go to 15 If you are aged 15 and under, or 75 and over IF Go to 35	None of the above
IS       Which of these qualifications do you have?	<ul> <li>22 Have you ever worked?</li> <li>Yes, please write in the year you duit worked?</li> <li>Yes, please write in the year you duit worked?</li> <li>For the 23</li> <li>No, have reser worked</li> <li>For the main job you were doing last week, or if not working last week, your last main job.</li> <li>Your main job is the job in which you usually work the mest hours.</li> <li>24 Do (did) you work as an</li> </ul>
Bit         Do you have any of the following professional qualifications?           +          all the bases that apply.           No Professional Qualifications         Qualified Dentist.           Qualified Teacher Status (for schools)         Qualified Nucle, Midwile, Health Vistor           Qualified Medical Doctor         Other Professional Qualifications	Self-employed/freelance without
<ul> <li>17 Last week, were you doing any work: <ul> <li>as an employee, or on a Government sponsored training scheme,</li> <li>as self-employed/freelance, or in your own/family business?</li> </ul> </li> <li>✓ "res" if away from work ill, on maternity leave, on holday or temporarily leid off <ul> <li>✓ "res" for any paid work, including casual or temporary work, even if only for one hour.</li> </ul> </li> <li>✓ "Yes" if you worked, paid or unpaid, in your own/family business. <ul> <li>Yes implication to 23</li> <li>No implies Go to 16</li> </ul> </li> </ul>	employees  25 How many people work (worked) for your employer at the place where you work (worked)?  + If you are [were) self-employed, _/ to show how many people you employ (employed).  1 - 9 10 - 24 25 - 409 500 or more

Page 10

26	What is (was) the full title of your main job?	33	How do you usually travel to	
•	For example, PRIMARY SCHOOL TEACHER, STATE REGISTERED NURSE, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEPITS ASSISTANT. Chill Servants, Local Government Officers - give job title not grade or pay band.	+	work? √ one box only: √ the box for the longest part, by distance, of your usual journey to work Work mainly at or from horse	
			Underground, metro, light oil, sam	
27	Describe what you do (did) in your main job.		Train Bus, minibus or coach Motor cycle, scoater or moped	
	Do (did) you supervise any other employees?		Driving a car or van	
	A supervisor or foremen is responsible for overseeing the work of other employees on a day-to-day basis. Ves No		Lazi Bicycle	
	What is (was) the business of your employer at the place where you work (worked)? For exemple, MAKING SHOES, REPAIRING CARS, SECONDARY EDUCATION,		On foot	
	PDOD WHOLESALE, CLOTHING RETAIL, DOCTOR'S SURGERY, If you are (were) self-employed/freelance or bave (had) your own business, what is (was) the nature of your business?	34	How many hours a week do you usually work in your main lob?	
•	Civil Serventa, Local Government Officers - please specify your Department.	+	Artswer to nearest whole hour. Give average for last four weeks. Number of hours worked a week	
30	If you were working last week == 60 to 31 If you were not working last week == 60 to 35	35	THERE ARE NO MORE QUESTIONS FOR PERSON 2.	
	What is the full name of the organisation you work for in your main job? If you have your own business, write in the name.		Go to questions for Person 3. If there are no more people in your household you do not need to answer any more questions. Please leave the following pages blank.	
	Self-employed/freelance Work for a private individual What is the address of the place where you work in your main job? If you report to a depot, write in the depot address.	+	Remember to sign the Declaration on page 1.	
	Pottiolo			
	Mainly work at or from home Offshore installation			

1	What is your name? (Person 3 in Table 1)								Can you understand, speak,
	First same and sumants	-		TTT	1				read, or write Welsh?
									Understand spoken Welsh
2	What is your sex?	8	Wh	at is your e	thnic g	roup?			
	Male female	÷		ose ONE secti					Speak Welsh
				the appropria in cultural bas			cabe		Read Welsh
3	What is your date of birth?		Α.	White					Write Welsh
	Day Hoeth Year			British	in the	h			None of the above
				Any other W	hite bac	kgroun	d,		
4	What is your marital status (on 29 April 2001)?			pinase scribe	/n				
	Single (never married)				T T	I I	TH.		
	Married (Tirst marriage)					L.L.,			
	Re-married		8	Mixed					
	Separated (but still legally married)			White and BI					
	-			White and Bi	ack Afr	can			
	Divorced			White and A	lian				
	Widowed			Any other M		kgroun	d_		
5	Are you a schoolchild or student in full-time education?			please scrite	in				
	🗌 Yes 🖿 Goto 💰				1 1				
	No 📂 Go to 7		4						
6	Do you live at the address		C	Asian or Asi	an Brit	ish			
9	shown on the front of this form			Indian	- Pa	listani			
	during the school, college or university term?			Bangladeshi				10	Over the last twelve months
•				Any other As plastic verife		kground	1.	1.54	would you say your health has on the whole been:
	Yes, Llive at this address during								Good?
	the school/college/university term						-		Fairly good?
	De Go to 7								Not good?
	No, I live elsewhere during the school/college/university term		D	Black or Bla	ck Briti	sh			
	Co to 33			Caribbean	- Al	isan		11	Do you look after, or give any
				Any other 84		ground	d,		help or support to family
7	What is your country of birth?		-	please series	in				members, friends, neighbours or others because of:
	Ingland Wales								<ul> <li>long-term physical or mental ill-health or disability, or</li> </ul>
	Scotland		-						<ul> <li>problems related to old age?</li> </ul>
	Northern Iteland		E	Chinese or i	ther e	their m	OUD	٠	Do not count anything you do as
	Republic of Ireland			Chinese				٠	part of your paid employment. √ time spent in a typical week.
	Etemhere, please write in the present name of the country			Any other, p	lease w	niter in			No No
						TT			Yes, 1 - 19 hours a week
			-						Yes, 20 - 49 hours a week
									Yes, 50+ hours a week

Person 3 - continued	
Do you have any long-term illness, health problem or disability which limits your daily activities or the work you can do?     Include problems which are due to old age.     Yes     No	18 Were you actively looking for any kind of paid work during the last 4 weeks?
<ul> <li>What was your usual address one year ago?</li> <li>If you were a child at boarding school or a student one year ago, give the address at which you were living during the school/college/university term.</li> <li>For a child bern after 29 April 2000, √ 'No usual address one year ago'.</li> <li>The address shown on the front of the form</li> </ul>	Yes No 20 Last week, were you weiting to
No usual address one year ago Same as Person 1 Ibewhere, please write in below:	start a job already obtained?
	21 Last week, were you any of the following?     ◆    ✓ all the boxes that apply.     □ Retired     □ Student     Looking after horse/family
	Permanently sidu/disabled
14 H you are aged 16 to 74 🛛 Go to 15	None of the above
If you are aged 15 and under, or 75 and over 📂 Go to 35	22 Have you ever worked?
✓ all the goal/fractions that apply or if not specified, the nearest equivalent.     1+ O levels/CSEs/GCSEs (any grades)     NVQ Level 1, Foundation GNVQ     S+ Olevels, S+ CSEs (grade 1),     S+ GCSEs (grades A-C), School Centificate     NVQ Level 2,     Intermediate GNVQ	Bot worked Go to 23 No, have never worked Go to 25
1+ A levels/AS levels     NVQ Level 3, Advanced GNVQ     2+ A levels, 4+ AS levels,     Higher School Certificate	23 Answer the remaining questions for the main job you were doing last week, or if not working last
First Degree (eg 8A, 85c)     Other Qualifications (eg City and Guilds, 85A/OCR, 87EC/Edexcel)     Higher Degree (eg 8A, PhD, PGCE,	week, your last main job.
post-graduate certificates/tiplomas) 🔲 No Qualifications	24 Do (did) you work as an
<ul> <li>Be you have any of the following professional qualifications?</li> <li>✓ all the bases that apply.</li> </ul>	employee or are (were) you self-employed?
No Professional Qualifications     Qualified Dentist	Employee
Qualified Teacher Status (for school) Qualified Name, Midwile, Health Visito	F Self-employed with employees
Qualified Medical Doctor Other Professional Qualifications	Self-employed/freelance without employees
<ul> <li>Last week, were you doing any work:         <ul> <li>as an employee, or on a Government sponsored training scheme,</li> <li>as self-employed/freelance, or in your own/family business?</li> </ul> </li> <li>If your it away from work it, or maturity have, on holdary or temporarily leid of</li> </ul>	the place where you work
<ul> <li>✓ "Yes" for any paid work, including casual or temporary work, even if only for one hour.</li> <li>✓ "Yes" if you worked, paid or unpaid, in your ownifamily business.</li> <li>No == Go to 23</li> <li>No == Go to 10</li> </ul>	√ to show how many people you employ temployed0. 1 - 9 10 - 24

261	erson 3 - continued	
	What is (was) the full title of your male job? For example, PRIMARY SCHOOL TEACHER, STATE REGISTERED NURSE,	13 How do you usually travel to work?
•	CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT, Ovil Servants, Local Government Officers - give job title not grade or pay band.	<ul> <li>✓ one box only:</li> <li>✓ the box for the langest part, by distance, of your usual journey to work</li> </ul>
		Work mainly at or from home
		Underground, metro, light call, tram
17	Describe what you do (did) in your main job.	Train
		Bus, minibus or coach
		Motor cycle, scooter or moped
B	Do (did) you supervise any other employees?	Driving a car or san
	A supervisor or foreman is responsible for overseeing the work of other employees on a day-te-day hasis.	Passenger in a car or san
	Wes No	Bicycle
19	What is (was) the business of your employer at the place where you	On foot
	work (worked)? For example, MAKING SHOES, REPAIRING CARS, SECONDARY EDUCATION,	C Other
	FOOD WHICLESALE, CLOTHING RETAIL, DOCTOR'S SURGERY. If you are (were) self-employed/freelance or have (had) your own business, what is (wes) the nature of your business?	34 How many hours a week do yo usually work in your main job?
	Civil Servants, Local Government Officers - please specify your Department.	Answer to nearest whole hous
		Give average for last four weeks.     Number of hours     worked a week
10	If you were working last week IP Go to 21 If you were not working last week IP Go to 35	35 THERE ARE NO MORE QUESTIONS FOR PERSON 3.
1	What is the full name of the organisation you work for in your main job? If you have your own business, write in the same.	Go to questions for Person 4
		<ul> <li>If there are no more people in your household you do not need to answer any more questions. Please leave the following pages blank.</li> </ul>
	Self-employed/freelance Work for a private individual	Remember to sign the Declaration on page 1.
	What is the address of the place where you work in your main job?	
-		

Page 14

Person 4		
1 What is your name? (Person 4 in First name and surface	Table 1)	<ul> <li>Gan you understand, speak, read, or write Welsh?</li> <li>              √ all the boxes that apply.      </li> </ul>
What is your sex?     Male Female     Male Female     What is your date of birth?     Day Month Year     M	What is your ethnic group?     Choose ONE section from A to E, then     J the appropriate box to indicate     your cultural background.     A White     British I Irish     Any other White background,     plase swrite in     White and Black Caribbeas     White and Black African     White and Asian     Any other Mixed background,     plase swrite in     Any other Mixed background,     plase swrite in     Any other Mixed background,     plase swrite in     Any other Mixed background,     plase swrite in	<ul> <li>Understand spoken Webh</li> <li>Speak Weich</li> <li>Read Weich</li> <li>Write Weich</li> <li>None of the above</li> </ul>
Bo you live at the address shown on the front of this form during the school, college or university term?     Orily answer this question if you have answered "Yes" to Question 5.     Yes, I live at this address during the school/college/university term	Indian Pakistani     Kangladeshi     Any other Asian background,     ploase senite in	10 Over the last twelve months would you say your health has on the whole been:
Go to     Z      No, I live elsewhere during the school/college/university term     Imm Go to     35      What is your country of birth?     England     Wales     Scotland	Black or Black British     Caribibean African     Any other Black background.     please swrite in	Fairly good?     Not good?     Not good?      Not good?
Northern Ireland  Republic of Iroland  Between, please write in the present name of the country	E Chinese or other ethnic group Chinese Any other, ploase write in	Bo not count anything you do as part of your paid employment.     ✓ time spent in a typical week.     No     Yes, 1 - 19 hours a week     Yes, 20 - 49 hours a week     Yes, 50+ hours a week

-			
	Do you have any long-term illness, heal limits your daily activities or the work	you can do?	18 Were you actively looking for any kind of paid work during the last
*	Include problems which are due to old age		4 weeks?
	Yes No		Wes No
	What was your usual address one yea If you were a child at boarding school or a address at which you were living during th	student one year ego, give the	19 If a job had been available last week, could you have started within 2 weeks?
÷	For a child born after 29 April 2000, 🗸 146	usual address one year ago'.	No No
	The address shown on the front of the for	m	20 Last week, were you waiting t
	No usual address one year ago	Same as Person 1	start a job already obtained?
	Elsewhere, please write in below		No No
			21 Last week, were you any of the
			following? ♦ √ all the bases that apply:
			Retired
			Student
			Looking after home-family
		Postade	Permanently sick/disabled
14	If you are aged 16 to 74	🍽 60 to 15	None of the above
	If you are aged 15 and under, or 75 an	dover 📂 Go to 35	22 Have you ever worked?
	Which of these qualifications do you h of all the qualifications that apply oc if not 1+0 levels/CSEs/GCSEs (any grades)		Yes, please write in the year you last worked
	<ul> <li>5+ O levels, 5+ CSEs (prode 1),</li> <li>5+ GCSEs (prodes A-C), School Certificate</li> </ul>	NVQ Level 2, Intermediate GNVQ	No, have never worked ■ Go to 35
	1+ A levels/MS levels	NVQ Level 3, Advanced GNVQ	23 Answer the remaining question
	2+ A lovels, 4+ A5 levels, Higher School Certificate	MVQ Levels 4-5, HNC, HND	for the main job you were doin last week, or if not working law
	First Degree (eg BA, BSc)	<ul> <li>Other Qualifications (eg City and Guilds, RSA/OCR, BTEC/Edexce)</li> </ul>	week, your last main job. • Your main job is the job in which
	<ul> <li>Higher Degree (eg MA, PhD, PGCE, post-graduate certificates/diplomas)</li> </ul>	No Cualifications	you usually work the most hours.
			24 Do (did) you work as an
	Do you have any of the following prof and the bases that apply.	essional qualifications?	employee or are (were) you self-employed?
	No Professional Qualifications	Qualified Dentist	Imployee
	Qualified Teacher Status (for schools)	Qualified Nurse, Midwille, Health Visitor	Self-employed with employees
	Qualified Medical Doctor	Other Professional Qualifications	Self-employed/freelance without employees
	Last week, were you doing any work: • as an employee, or on a Governme: • as self-employed/freelance, or in you /* 'tim' if away from work II, on maternity law	eur own/family business?	25 How many people work (worked) for your employer at the place where you work (worked)?
۰.	"Yes" for any paid work, including casual	or temporary work, even if only	4 If you are (were) cell-employed.
	for one hour. √ "Yes" if you worked, paid or unpaid, in y	sur own/family business	to show how many people you employ (employed).
	□ Yes ⊨ Go to 23		1.9 10-24
	No = Go to 18		25 - 499 500 or more
			TT-445 Donormore

Page 16

26	What is (was) the full title of your main job?	33 How do you usually travel to
	For example, PRIMARY SCHOOL TEACHER, STATE RESISTERED MURSE	work?
	CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT.	♦ J one box only.
6	Gvil Servants, Local Government Officers - give job tide not grade or pay basel.	+ / the bax for the longest part, by
		distance, of your usual journey to work
		Work mainly at or from home
		Underground, metro, light rol, tram
27	Describe what you do (did) in your main job.	Tosin
		Dua, minibus or coach
		Motor cycle, scooter or moped
		Driving a car or van
83	Do (did) you supervise any other employees? A supervisor or forement is responsible for overseeing the work of other	Passenger in a car or van
	A supervisor or rorentan is responsible for overseeing the work of other employees on a day-to-day basis.	The
	Yes No	Dicycle
29	What is (was) the business of your employer at the place where you work (worked)?	On foot
•	For example, MAKING SHOES, REPAIRING CARS, SECONDARY EDUCATION, POOD WHOLESALE, CLOTHING RETAIL DOCTOR'S SURGERY	Cther
+	If you are (were) self-employed/freelance or have (had) your own business, what is (was) the nature of your business?	34 How many hours a week do you usually work in your main job?
	Civil Servants, Local Government Officers - please specify your Department.	Actswer to nearest whole hour.
		<ul> <li>Give average for last four weeks.</li> </ul>
		Number of hours worked a week
		35 THERE ARE NO MORE
30	If you were working last week == Go to 31 If you were not working last week == Go to 35	QUESTIONS FOR PERSON 4.
11	What is the full name of the organisation you work for in your main job?	+ Go to questions for Person 5.
	If you have your own business, write in the name.	
		+ If there are no more people in
		your household you do not need to answer any more
		questions. Please leave the
		following pages blank.
	Self-employed/freelance 🔲 Work for a private individual	+ Remember to sign the
12	What is the address of the place where you work in your main job?	Declaration on page 1.
0	If you report to a deport, write in the depot address.	
	9 7 7 7 7 7 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
	Pericade	
	Mainly work at or from home Offshore installation	

1 What is your name? (Person 5 in Ta First same and summerse	9 Can you understand, speak, read, or write Weish?	
	What is your ethnic group?     Choose ONE section from A to E, then     I the appropriate box to indicate	
What is your date of birth?	your outsand background.  A White Battish I hish Any other White background, planse write in	Write Welsh
Single Inever married  Married (fint: marriage)  Re-married  Separated (but still legally married)  Disorcad  Widowed	Mixed     White and Black Caribbean     White and Black African     White and Asian	
Are you a schoolchild or student in full-time education? Yes == Go to 6 No == Go to 7	C Aslan or Aslan British	
Do you live at the address shown on the front of this form during the school, college or university term? Only answer this question if you	Indian Pakistani Bangladeshi Any other Asian background, sizear sector in	10 Over the last twelve months would you say your health has on the whole been:
Nave answered "Kes' to Question 5.  Yes, I five at this address during the school/college/university term  Go to 7  No. Live elsewhere during the		Good?
school/college/university term	Caribbean Alrican	11 Do you look after, or give any help or support to family members, friends, neighbours
What is your country of birth?  England Weles  Scotland	jokase write in	or others because of: <ul> <li>long-term physical or menta</li> <li>ill-health or disability, or</li> <li>problems related to old age?</li> </ul>
Northern Iteland     Republic of Ireland     Elsewhere, please write in the	E Chinese or other ethnic group     Crinese     Any other, placese write in	<ul> <li>Bo not count anything you do as part of your paid employment.</li> <li>✓ time spont in a typical week.</li> </ul>
present name of the country		Yes, 1 - 19 hours a week     Yes, 20 - 49 hours a week

Person 5 - continued	
12         Do you have any long-term illness, health problem or disability which limits your daily activities or the work you can do?           *         Include problems which are due to old age.           *         No	Were you actively looking for any kind of paid work during the last 4 weeks?     Yes No
13 What was your usual address one year ago?	
If you were a child at boarding school or a student one year ago, give the address at which you were living during the school/college/university term.	19 If a job had been available last week, could you have started it within 2 weeks?
For a child born after 29 April 2000,      No usual address one year ago'.     The address shown on the form	Yes No
No usual address one year ago Sante as Person 1	20 Last week, were you waiting to start a job already obtained?
Esewhere, please write in below	Yes No
	Z1 Last week, were you any of the following?
	Student
Protocole	Looking after home/family
	Fermanently sick/disabled
14 If you are aged 16 to 74 📂 Go to 15	None of the above
If you are aged 15 and under, or 75 and over 🖿 🐻 to 35	22 Have you ever worked?
	ber worked     Co to 23     No, have never worked     Co to 35 23 24 25 25 26 26 26 26 27 28 29 29 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20
16 Do you have any of the following professional qualifications?	employee or are (were) you self-employed?
	Enployee
Qualified Teacher Status (for schook) Qualified Nurse, Midwife, Health Vistor	Self-employed with employees
Qualified Medical Doctor     Other Professional Qualifications	Self-employed/ficelance without
<ul> <li>Izst week, were you doing any work:         <ul> <li>as an employee, or on a Government sponsored training scheme,</li> <li>as self-employed/freelance, or in your own/family business?</li> <li>√"res" if away from work it, on maternity leave, on holiday or temporarily loid off</li> <li>√"res" for any paid work, including casual or temporary work, even if only for one hour.</li> <li>√"res" if you worked, paid or unpaid, in your own/family business.</li> <li>Yn Imm Go to 23</li> </ul> </li> </ul>	<ul> <li>If you are (were) soff-employed,</li> <li>✓ to show how many people you employ (employed).</li> </ul>
	1.9 10.24
No 🖛 Go to 18	25 - 499 500 or more

200	What is (was) the full title of your main job?	33	How do you usually travel to
	For example, PRIMARY SCHOOL TEACHER, STATE REGISTERED NURSE, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT, Civil Servards, Local Government Officers - give job the not grade or pay band.		work? √ one bax only. √ the box for the longest part, by distance of your usual journay to work. □ Work mainly at or from home
			Underground, metro, light rail, tram
27	Describe what you do (did) in your main job.		1 Tain
			Bus, minibus or coach     Motor cycle, scooter or moned
			Driving a car or van
	Do (did) you supervise any other employees? A supervisor or foremen is responsible for overseeing the work of other		Passenger in a car or van
	employees on a day-to-day basis.		Tani
29	What is (was) the business of your employer at the place where you work (worked)?		Cn fact
+	For example, MAKING SHOES, REPAIRING CARS, SECONDARY EDUCATION, PDOD WHOLESALE, CLOTHING RETAIL, DOCTOR'S SURGERY,		Cther
	If you are (were) self-employed/inselance or have (hed) your own business, what is (was) the nature of your business?	34	How many hours a week do you usually work in your main job?
•	Gvil Servanta, Local Government Officers - please specify your Department.	*	Answer to nearest whole hour. Give average for last four weeks. Number of hours
			worked a week
30	If you were working last week == Go to 31 If you were not working last week == Go to 35	23	QUESTIONS FOR PERSON 5.
_	What is the full name of the organisation you work for in your main job? If you have your own business, write in the name.	+	If there are no more people in your household you do not need to answer any more questions.
		+	If there are more than 5 people in your household, you will
	Self-employed/freelance Work for a private individual		need to contact the Census Helpline (0845 301 2001) for an extra form.
	What is the address of the place where you work in your main job? If you report to a deput, write in the deput address.	+	Remember to sign the Declaration on page 1.
	Protecodo	4	STATISTICS
	Mainly work at or from home     Offshore installation     No fixed place		The second

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29 April	mein
W CONSIDERATION OF A	
	Census2001
の取出課題	England Individual Form
Census Helpline 0845 301 2001 Text Phone for t	he Deaf 0845 303 2001 Website www.statistics.gov.uk
	CD CD
Address	ID
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Portocke	Number
The Census is a count every ten years of all people and households in the country. Census information is used by central and local government, health authorities and many offer organisations to allocate resources and plan services or everyone. The Office for National Statistics conducts the Census in England and Wales. Completing your form Completion of the Census form is compulsory under the ensus Act 1920. If you refuse to complete it, or give false information, you may be liable to a fine. The requirement or you to return a completed form will not be satisfied information, you may be liable to a fine. The requirement or you to return a complete form will not be satisfied information you provide is protected by law and is rested in strict confidence. The information is only used or statistical purposes, and anyone using or disclosing ensus information improperly will be liable to prosecution. Census form a period of 100 years. Thank you for counting yourself in.	<ul> <li>What you have to do if you are in a Communal Establishment</li> <li>Answer the question R1 below.</li> <li>Complete the question on pages 2 to 4 of this form</li> <li>Sign the Declaration and leturn the completed form to the manager or person-in-charge.</li> <li>R1 What is your position in this establishment?</li> <li>Staff or owner</li> <li>Relative of staff or owner</li> <li>Other (for example, resident, patient, student)</li> <li>What you have to do if you are in a Household</li> <li>Answer the question R2 below.</li> <li>Complete the questions on pages 2 to 4 of this form in the envelope provided for individual returns. Give the envelope provided for individual returns. Give the Household form.</li> <li>R2 What is your Person Number?</li> <li>Refer to Table 1 of your Household form. Please write in your Person Number.</li> <li>If you need help in completing your form, call the Cansus Helpline on 0645 301 2001(local rate number).</li> </ul>
How to fill in your form	
<ul> <li>Please use black or blue ink.</li> <li>Put a tick in the appropriate box like this  H you mark the</li> <li>Some questions require you to write in your answers. Please u Start a new line if a word will not fit.</li> </ul>	
Declaration	
<ul> <li>To be signed after completing this form. Please due</li> </ul>	di that you have not missed any pages or questions.
This form is completed to the best of my knowle	dge and belief.
Signature	Date

1	What is your name? Next name and succares						9 This question is not applicable in England.
							► Go to 10 below
2	What is your sex?	8 W	at is you	ir ethni	c group	2	
	Male Female		the sparo				
			e cultural			1102100	
3		A	White				
	Day Month Year		British	U	Irish		
			Any other		hackgroun	nd,	
4	What is your marital status (on 29 April 2001)?					Π	
	Single (never married)			T			
	Manied (first maniage)	в	Mixed				
	Le-married		White an	el Black C	aribbean		
	Separated (but still legally married)		White an	d Black J	virican		
	Divorced		White an	d Asian			
	Widowed		Any othe	r Mixed	backorpus	nd.	
5	Are you a schoolchild or student in full-time education?		please w				
	Ves 📂 Go to 🖌						
	No 📂 Go to 7	_					
4	Do you live at the address	c	Asian or				
	shown on the front of this form during the school, college or		Indian Banglada	-	Pakistani		
	university term?		Any othe				10 Over the last twelve months would you say your health has
9	Only answer this question if you have answered "Yes" to Question 5.		plaine w		auguun		on the whole been:
	Yes, I live at this address during						Good?
	the school/college/university term	-					Fairly good?
	Go to 7 No, Illie elsewhere during the	-				1	Not good?
	school/college/university term	0	Black or Caribbea		African		
	🕪 60 to 🛐						11 Do you look after, or give any help or support to family
7	What is your country of birth?		Any other piezese w		acciproun	a,	members, friends, neighbours
	England Wales						or others because of: + long-term physical or menta
	Scotland						ill-health or disability, or + problems related to old age?
	Northern Iteland	-	(him and				Do not court anything you do as
	Republic of Ireland	E	Chinese	or othe	r ethnic g	horb	<ul> <li>part of your paid employment.</li> <li>              √ time spent in a typical week.      </li> </ul>
	Linearese, please write in the present name of the country		Any othe	r, piecse	write in		Mo No
							19 Yes, 1 - 19 hours a week
							1 Yes, 20 - 49 hours a week
							Yes, 50+ hours a week

12	Do you have any long-term illness, health problem or disability which limits your daily activities or the work you can do?	18 Were you actively looking for any kind of paid work during the last	
	Include problems which are due to old age.	4 weeks?	
	Yes No	Visi No	
13	If you were a child at boarding school or a student one year ago, give the	19 If a job had been available last week, could you have started i within 2 weeks?	
	address at which you were living during the school/college/university term. For a child born ofter 29 April 2000, 🗸 'No usual address one year age'.	Within 2 weeksr	
	The address shown on the front of the form	20 Last week, were you waiting t	
	No usual address one year ago	start a job already obtained?	
	Ebewhere, please write in below	Yes No	
		21 Last week, were you any of th following?	
		<ul> <li>If the bases that apply.</li> <li>☐ Brised</li> </ul>	
		Student	
	Poemode	Looking after homertamity	
		Permanently sicklisisbled	
14	If you are aged 16 to 74 📂 Go to 13	None of the above	
	If you are aged 15 and under, or 75 and over 📂 Go to 25	22 Have you ever worked?	
	1+ O levels/CSEs/GCSEs (any grades)     NvO Level 1, Foundation GNVQ     S+ O levels, S+ CSEs (grade 1).     S+ GCSEs (grades A-C), School Certificate     NvO Level 2,     Intermediate GNVQ	Go to 23 No, have never worked Co to 35	
	1+ A levels/AS levels     NVQ Level 3, Advanced CNVQ     2+ A levels, 4+ AS levels,     Higher School Certificate	23 Answer the remaining question for the main job you were doin last week, or if not working lay	
	First Degree (eg BA, BSc)     Other Qualifications (eg City and     Guids, RSAOCR, BTEC6dexcel	week, your last main job. • Your main job is the job in which	
	Higher Degree leg MA, PhD, PGCE,     port-graduate certificates/diplomax     No Qualifications	you usually work the most hours.	
16		24 Do (did) you work as an employee or are (were) you self-employed?	
	No Professional Qualifications Qualified Dentist	Employee	
	Qualified Teacher Status (for schools) Qualified Nurse, Midwile, Health Visitor	Self-employed with employees	
	Qualified Medical Doctor     Other Professional Qualifications	Self-employed/freelance without employees	
17	Last week, were you doing any work:	25 How many people work	
	<ul> <li>as an employee, or on a Government sponsored training scheme,</li> <li>as self-employed/freelance, or in your own/family business?</li> <li>"Yes" if away from work it, on maternity leave, on holiday or temporarily laid off.</li> </ul>	(worked) for your employer at the place where you work	
۴.	"Tes" for any paid work, including casual or temporary work, even if only for one hour.	<ul> <li>If you are (were) self-employed.</li> <li>✓ to show how many people</li> </ul>	
•		you employ (employed).	
0 0 0	Yes' il you worked, paid or unpaid, in your own/family business.           Yes         Go to         23	1-9 10-24	

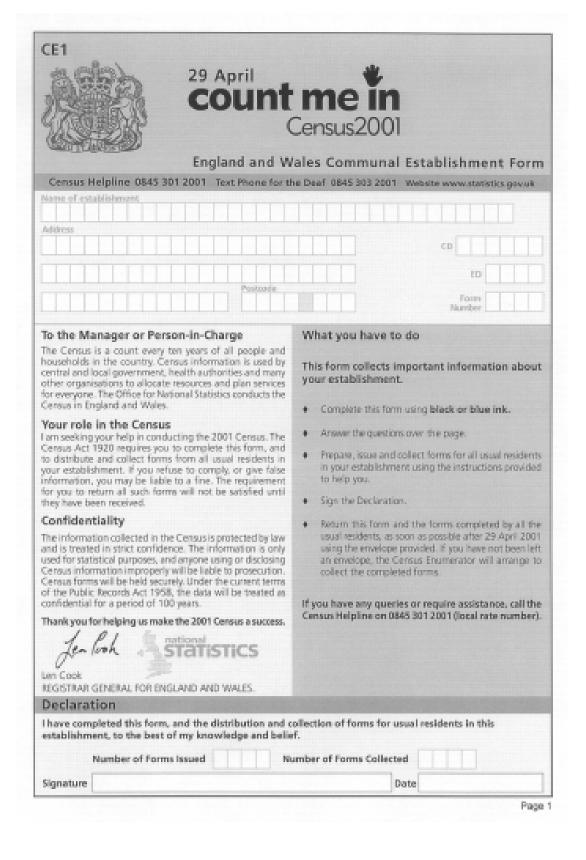
26	What is (was) the full title of your main job?		How do you usually travel to
	For example, PRIMARY SCHOOL TEACHER, STATE REGISTERED NURSE,		work?
	CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT.		🗸 ane bax anly
*	Civil Servants, Local Government Officers - give job title not grade or pay band.		If the box for the longest part, by detailed, of your usual journey to work
			Work mainly at or from home
			Underground, metro, light rol, tram
27	Describe what you do (did) in your main job.		
	병 이 이 이 이 이 이 이 이 이 이 이 이 이 이 이 이 이 이 이		Bus, minibus or coach
			Motor cycle, scooter or moped
		1	Driving a car or van
28	Do (did) you supervise any other employees?		Passenger in a car or van
+	A supervisor or foremen is responsible for overseeing the work of other employees on a day to day basis:		- 1.ai
			Bicpcle
25	What is (was) the business of your employer at the place where you work (worked)?		On foot
+	For example, MAKING SHOES, REPAIRING CARS, SECONDARY EDUCATION,	1	Dther
	FOOD WHOLESALE, CLOTHING RETAIL, DOCTOR'S SURGERY. If you are (were) self-employed/freelance or have (had) your own business.	24	Hereit manage hereiter in territe die erste
	what is (was) the nature of your business?	24	How many hours a week do you usually work in your main job?
+	Gvil Servants, Local Government Officers - please specify your Department.	+ .	Answer to nearest whole hour.
			Give average for last four weeks.
			Number of hours worked a week
30	If you were working last week 🛛 🖛 Ge to 31		THERE ARE NO MORE OUESTIONS
	If you were not working last week 🛛 📂 Go to 35		QUESTIONS.
31	What is the full name of the organisation you work for in your main job?		Please sign the Declaration on
_	If you have your own business, write in the name.		page 1.
	별걸걸림으려도 귀절점을 해도했을 것 같은 물질 것 않.		
	Self-employed/freelance Work for a private individual	1	ational
		1.4	<b>STATISTICS</b>
	What is the address of the place where you work in your main job?		Constant of Consta
*	H you report to a depot, write in the depot address.		(and and a second secon
	Pessede		
	Mainly work at or from home Offshore installation		
	No fixed place		

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	Wales Individual Form
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	Form Mumber
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<ul> <li>What is the Census?</li> <li>The Census is a count every ten years of all people and households in the country. Census information is used by central and local government, health authorities and many other organisations to allocate resources and plan services for everyone. The Office for National Statistics conducts the Census in England and Walks.</li> <li>Completing your form</li> <li>Completion of the Census form is compulsory under the Census Act 1920. If you refuse to complete it, or give false information, you may be lable to a fine. The requirement for you to return a completed form will not be satisfied until such a form has been received. If you need any help please contact the Census Helpline.</li> <li>Confidentiality</li> <li>The information you provide is protected by law and is treated in strict confidence. The information is only used for statistical purposes, and anyone using or disclosing Census forms will be held securely. Under the current terms of the Public Records Act 1958, the data will be treated as confidential for a period of 100 years.</li> <li>Thank you for counting yourself in.</li> </ul>	<ul> <li>What you have to do if you are in a Communal Establishment</li> <li>Answer the question R1 below.</li> <li>Complete the questions on pages 2 to 4 of this form.</li> <li>Sign the Declaration and siturn the completed form to the manager or person-in-charge.</li> <li>R1 What is your position in this establishment? <ul> <li>Staff or owner</li> <li>Relative of staff or owner</li> <li>Other (for example, resident, patient, student)</li> </ul> </li> <li>What you have to do if you are in a Household</li> <li>Answer the question R2 below.</li> <li>Complete the questions on pages 2 to 4 of this form.</li> <li>Sign the Declaration and place the completed form in the envelope provided for individual returns. Give the Household Form.</li> <li>R2 What is your Person Number?</li> <li>Refer to Table 1 of your Household Form.</li> </ul>
Len Cook REGISTRAR GENERAL FOR ENGLAND AND WALES	Hease write in your Person Number. If you need help in completing your form, call the Census Helpline on 0845 301 2001 (local rate number).
<ul> <li>How to fill in your form</li> <li>Please use block or blue ink.</li> <li>Put a tick in the appropriate box like this  If you mark the</li> <li>Some questions require you to write in your answers. Please of Start a new line if a word will not fit.</li> </ul>	wrong box, fill in the box and and and the correct one. Se CAPITAL LETTURS and leave one space between each word.
Declaration	
P To be signed after completing this form. Please cher	
This form is completed to the best of my knowle	dge and belief.
Signature	Date

1 What is your name? First name and sumare		<ul> <li>9 Can you understand, speak, read, or write Weish?</li> <li> <ul> <li> <ul></ul></li></ul></li></ul>
2       What is your sex?	What is your ethnic group?     Checes ONE section from A to E, then     // the appropriate box to indicate     your caltural background.     A White     Bittsh    Irish     Ary other White background,     please vector in     White and Black Caribbean     White and Black Atricas     White and Black Atricas     White and Asian     Ary other Mixed background,     please vector in	
No → Go to 7      Do you live at the address shown on the front of this form, during the school, college or university term?      Only answer this question if you have answered 'Yes' to Question 5.      Yes, I live at this address during the school/college/university term     F Go to 7      No, I we disewhere during the	C Asian or Asian British Indian Pakistani Bangladeshi Any other Asian background, please webb is D Black or Black British	10       Over the last twelve months would you say your health has on the whole been:         Good?       Good?         Fairly good?       Not good?
schoolRoolegeUniversity term  Conto 35  What is your country of birth?  Cingland Viales  Scotland  Northern Ireland  Republic of Ireland  Between, pieces wate in the present name of the country	Catibbean Any other Black background, please words its  Chinese Any other, please words is  Any other, please words is	<ul> <li>Do you look after, or give any help or support to family members, friends, neighbours or others because of:         <ul> <li>long-term physical or menta ill-health or disability, or</li> <li>problems related to old age?</li> </ul> </li> <li>Do not count anything you do as part of your pold employment.</li> <li>✓ time spent in a typical week.</li> <li>No</li> <li>Yes, 1 - 19 hours a week</li> <li>Yes, 20 - 49 hours a week</li> </ul>

2 Do you have any long-term illness, health problem or disability which limits your daily activities or the work you can do? Indude problems which are due to old age.	18 Were you actively looking for any kind of paid work during the last 4 vereio?
Yes No	
What was your usual address one year ago? If you were a child at boarding school or a student one year ago, give the address at which you were living during the school/college/university term	19 If a job had been available last week, could you have started i within 2 weeks?
For a child born after 29 April 2000, √ 'No usual address one year ago'. The address shown on the front of the form	Yes No
	20 Last week, were you waiting to start a job already obtained?
No usual address one year ago	Yes No
Ebewhere, please write in below	
	21 Last week, were you any of the following? + √ all the boxes that apply.
	Refired
	Student
Notrole	Looking after homestamily
	Permanently sick/disabled
4 If you are aged 16 to 74 📂 do to 15	Mone of the above
If you are aged 15 and under, or 75 and over the tasta 33	22 Have you ever worked?
5 Which of these qualifications do you have? If all the coefficiences that each os if not specified, the nearest equivalent	1 %s, please write in the year you
1+ O levels/CSIs/GCSIs (any grades) NVQ Level 1, Foundation GNVQ	
S+ D levels, S+ CSEs (grade 1), S+ GCSEs (grades A-C), School Certificate WirtQ Level 2, Mammediate GNVQ	Go to 23     No, have never worked     Go to 35
1+ A levels/AS levels     NvQ Level 3, Advanced GNvQ	
2+ A levels, 4+ AS levels,     Higher School Certificate     NVQ Levels 4-5, HNC, HND	for the main job you were doing last week, or if not working last
First Degree leg BA, BSc)     Other Qualifications (eg City and Guilds, RSA/OCR, BTEC/Edesce	+ Your main job is the job in which
Higher Degree (eg MA, PhD, PGCE, post-eraduate certificates/diplomasl No Qualifications	you usually work the most hours.
	24 Do (did) you work as an
Do you have any of the following professional qualifications?	employee or are (were) you self-employed?
No Professional Qualifications Qualified Dentist	Employee
Qualified Teacher Status (for schools) Qualified Nurse, Midwile, Health Visio	g Self-employed with employees
Qualified Medical Doctor Other Professional Qualifications	Self-employed/freelance without employees
Z Last week, were you doing any work:	
<ul> <li>as an employee, or on a Government sponsored training scheme,</li> <li>as self-employed/freelance, or in your own/family business?</li> </ul>	the place where you work
"Yes' for any paid work, including casual or temporary work, even if only for one hous.	farmer and a
√ "Yes" if you worked, paid or unpaid, in your own/family business.	you employ (employed).
☐ Yes ► Go to 23	1-9 10-24
No 📂 Goto 🖬	25 - 499 500 or more

	What is (was) the full title of your main job? For example, PRIMARY SCHOOL TEACHER, STATE REGISTERED NURSE.	33 How do you usually travel to work?
	CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSESTANT, Civil Sensanta, Local Government Officers - give jab title not grade or pay band.	f are-box only     f' are-box for the longest part, by     of the box for the longest part, by
		Work meinly at or from home
		Underground, metro, lightrail, trans
27	Describe what you do (did) in your main job.	Train
		Bus, minibus or coach
		Motor cycle, scooter or moped
7.07		Driving a car or san
-	Do (did) you supervise any other employees? A supervisor or foreman is responsible for overseeing the work of other	Passenger in a car or van
	employees on a day-to-day basis.	Taxi
	Ves No	licycle
	What is (was) the business of your employer at the place where you work (worked)?	On foot
	For example, MARING SHOES, REPAIRING CARS, SECONDARY EDUCATION, FOOD WHOLESALE, CLOTHING RETAIL, DOCTOR'S SURGERY,	Other
•	If you are (were) self-employed/freelance or have (had) your-own business, what is (wes) the nature of your business?	34 How many hours a week do you
	Civil Servanta, Local Government Officers - please specify your Department.	usually work in your main job? Answer to nearest whole hour.
		Give average for last four weeks.
		Number of hours worked a week
30	If you were working last week 🛛 🖛 Go to 31	35 THERE ARE NO MORE
	If you were not working last week 🛛 📂 💿 to 🔢	QUESTIONS.
	What is the full name of the organisation you work for in your main job? If you have your own business, write in the name.	Please sign the Declaration on page 1.
		inational
	Self-employed/freelance Work for a private individual	STATISTICS
	What is the address of the place where you work in your main job? If you report to a depot, write in the depot address.	· 尹
	in you repair to a deport, write in the deport address.	
	Partoxia	
	Mainly work at or from home     Offshore installation     No fixed place	



<ul> <li>Remember to use black or blue ink.</li> <li>Put a tick in the appropriate box like this [2]. If you mark to</li> </ul>	the wrong box, fill in the box 📕 and 🗹 the correct one.
Type of Establishment	
Type of Establishment         What is the nature of this establishment?         ✓ one box only         Medical and Care Establishments         General Hospital         Psychiatric HospitalWerre         Other Hospital         Nursing Home         Residential Care Home         Nursing Home         Residential Care Home         Other Medical and Care Home         □ Other Medical and Care Home         □ Other Medical and Care Home         □ Other Establishments         □ Defence Establishments         □ Defence Establishment (including ships)         □ Probational Hospital         □ betence Establishment (including ships)         □ Hospital Hospital         □ betence Establishment (including ships)         □ Hospital Hospital         □ betence Establishment (including ships)         □ Hospital Batatilishment (including thils of flexidence)         □ Hospital Batatilishment (including thils of flexidence)         □ Hospital Boat or Barge         □ Other         □ Go to 4         Stehs establishment registered?         ✓ one box only         □ Hospital Local Authority         □ Yes, with a Hospital Authority and a Local Authority         □ Yes, with both a Hespith Autho	<ul> <li>Who is responsible for the management of this establishment?</li> <li>I call Authority</li> <li>NHS</li> <li>Local Authority</li> <li>Housing Association</li> <li>Charity/foluntary Organisation</li> <li>Sole Proprietoc/Partnership/Private Company</li> <li>Other</li> <li>Which of the following client groups does this astablishment cater for?</li> <li>I at least one hor in both Section A and 8 below</li> <li>A duits</li> <li>Children</li> <li>Physical Disability</li> <li>Learning Disability</li> <li>Nertial Health Problems</li> <li>Convelsement or Post-Operative Care</li> <li>Drug/Wookol Problems</li> <li>Reminal IntestRespite Care</li> <li>Chronic Illness Care</li> <li>Acute Illness Care</li> <li>Acute Illness Care</li> <li>Acute Illness Care</li> <li>Acute Illness Personnel</li> <li>Homeless</li> <li>Other</li> </ul>
	Enumerator use only
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## **EXPLANATORY NOTE**

(This note is not part of the Regulations)

These Regulations provide for the detailed arrangements necessary for the conduct of the census directed to be taken by the Census Order 2000.

Regulations 3 and 4 provide for the division of England and Wales into census districts and enumeration districts, and for the appointment of officers to carry out the duties assigned to them for taking the census.

Regulation 5 provides that the forms of return to be completed in accordance with the Census Order 2000 are those which apply as set out in Schedule 1 and which are set out in full in Schedule 2.

Regulations 6 to 11 provide detailed arrangements for the delivery, completion and return of the forms of return.

Regulations 12 and 13 provide for any follow-up action to be taken and for the further duties of census enumerators, census team leaders and census district managers.

Regulations 14 and 15 make provision relating to the giving of information, the use and publication or communication of information obtained for the purpose of the census, and the safe custody of forms and documents.