

SCHEDULE 2

Regulation 5(1)(a) and (b) and Schedule 1

Questionnaires: description

PART 1

Household Questionnaire (online)

| <i>(1) Question</i> | <i>(2) Response Options</i> |
|--|--|
| Information about the household | |
| Do you usually live at (<i>census address</i>)? | <p>Selecting one of the following:</p> <p>—Yes, I usually live here</p> <p>—No, I don't usually live here</p> <p><i>If the response option "Yes, I usually live here" is selected, the questions below in column (1) marked (†) will not be asked. If the response option "No, I don't usually live here" is selected, the questions before those marked (†) will not be asked.</i></p> |
| What is your name? | <p>Entering response in the format:</p> <p><i>First name</i></p> <p><i>Middle name(s)</i></p> <p><i>Last name</i></p> |
| Do any of the following people also live at (<i>census address</i>) on Sunday 21 March 2021? | <p>Selecting all that apply:</p> <p>—Family members and partners (include babies born on or before 21 March 2021, children, students and schoolchildren who live away from home during term time)</p> <p>—Housemates, tenants or lodgers</p> <p>—People who usually live outside the UK who are staying in the UK for three months or more</p> <p>—People temporarily away (for example, working away, on holiday, in the armed forces, living in an establishment such as a care home for up to six months, abroad for up to a year)</p> <p>—People staying temporarily who usually live in the UK but do not have another UK address (for example, UK residents between addresses or currently without a home)</p> |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|--|--|
| | <p>Or</p> <p>—None of these apply, I am the only person who usually lives here</p> |
| Who else lives at <i>(census address)</i> ? | <p><i>Entering response in the format:</i></p> <p><i>First name</i></p> <p><i>Middle name(s)</i></p> <p><i>Last name</i></p> |
| Does anyone else live at <i>(census address)</i> ? | <p><i>Selecting one of the following:</i></p> <p>—Yes, I need to add a <i>(second, third, etc.)</i> person <i>(If selected, the question immediately above in column (1) is repeated.)</i></p> <p>—No, I do not need to add anyone</p> |
| <p>(†) Do any of the following people live at <i>(census address)</i> on Sunday 21 March 2021?</p> | <p><i>Selecting all that apply:</i></p> <p>—Family members and partners (include babies born on or before 21 March 2021, children, students and schoolchildren who live away from home during term time)</p> <p>—Housemates, tenants or lodgers</p> <p>—People who usually live outside the UK who are staying in the UK for three months or more</p> <p>—People temporarily away (for example, working away, on holiday, in the armed forces, living in an establishment such as a care home for up to six months, abroad for up to a year)</p> <p>—People staying temporarily who usually live in the UK but do not have another UK address (for example, UK residents between addresses or currently without a home)</p> <p>Or</p> <p>—None of these apply, no one usually lives here (for example, this is a second address or holiday home)</p> |
| (†) Who lives at <i>(census address)</i> ? | <p><i>Entering response in the format:</i></p> <p><i>First name</i></p> <p><i>Middle name(s)</i></p> |

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|--|---|
| | <i>Last name</i> |
| (†) Does anyone else live at <i>(census address)</i> ? | <p><i>Selecting one of the following:</i></p> <p>—Yes, I need to add a <i>(second, third, etc.)</i> person <i>(If selected, the question immediately above in column (1) is repeated, but asking: “Who else lives at (census address)?”)</i></p> <p>—No, I do not need to add anyone</p> |
| Apart from everyone already included, who else is staying overnight on Sunday 21 March 2021 at <i>(census address)</i> ? | <p><i>Selecting all that apply:</i></p> <p>—People who usually live somewhere else in the UK, for example, boyfriends, girlfriends, friends or relatives</p> <p>—People staying here because it is their second address, for example, for work. Their permanent or family home is elsewhere</p> <p>—People who usually live outside the UK who are staying in the UK for less than three months</p> <p>—People here on holiday</p> <p>Or</p> <p>—There are no visitors staying overnight here on Sunday 21 March 2021 <i>(If selected, omit the next question in column (1).)</i></p> |
| What is the name of the visitor <i>(second visitor, third visitor, etc.)</i> staying overnight on Sunday 21 March 2021 at <i>(census address)</i> ? | <p><i>Entering response in the format:</i></p> <p><i>First name</i></p> <p><i>Last name</i></p> |
| Information about household relationships | |
| <p><i>Describing the relationship between the respondent and each other resident in the household:</i></p> <p><i>(That other resident’s name) is your (invitation to select one of the response options opposite, which is then displayed to complete this statement).</i></p> | <p><i>Selecting one of the following:</i></p> <p>—Husband or wife</p> <p>—Legally registered civil partner</p> <p>—Partner</p> <p>—Son or daughter</p> <p>—Stepchild</p> <p>—Brother or sister (including half-brother or half-sister)</p> |

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| (1) Question | (2) Response Options |
|--|---|
| | <ul style="list-style-type: none"> —Stepbrother or stepsister —Mother or father —Stepmother or stepfather —Grandchild —Grandparent —Other relation —Unrelated (including foster child) |
| <p><i>Describing the relationship between each other resident in the household (where the respondent is a resident), or the relationship between the residents in the household (where the respondent is not a resident):</i></p> <p>Thinking about (resident-two’s name, etc.), (resident-three’s name, etc.) is their (invitation to select one of the response options opposite, which is then displayed to complete this statement).</p> | <p><i>Selecting one of the response options shown in relation to the question immediately above in column (1).</i></p> |
| Information about the household accommodation | |
| <p>What type of accommodation is (census address)?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Whole house or bungalow —Flat, maisonette or apartment —Caravan or other mobile or temporary structure |
| <p><i>If response is “Whole house or bungalow” then:</i></p> <p>Which of the following is your house or bungalow?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Detached —Semi-detached —Terraced (including end-terrace) |
| <p><i>If response is “Flat, maisonette or apartment” then:</i></p> <p>Where is your flat, maisonette or apartment?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —In a purpose-built block of flats or tenement —Part of a converted or shared house (including bedsits) —Part of another converted building (for example, former school, church or warehouse) |

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|--|---|
| | —In a commercial building (for example, in an office building, hotel, or over a shop) |
| Are all the rooms in this accommodation, including the kitchen, bathroom and toilet, behind a door that only this household can use? | <i>Selecting one of the following:</i> —Yes —No, one or more rooms are shared with another household |
| How many bedrooms are available for use only by this household? | <i>Entering the number of bedrooms</i> |
| What type of central heating does (<i>census address</i>) have? | <i>Selecting all that apply:</i> —No central heating —Mains gas —Tank or bottled gas —Electric (including storage heaters) —Oil —Wood (for example, logs, waste wood or pellets) —Solid fuel (for example, coal) —Renewable energy (for example, solar thermal or heat pumps) —District or communal heat network —Other |
| <i>If there are one or more usual residents at the census address, then:</i> Does your household own or rent (<i>census address</i>)? | <i>Selecting one of the following:</i> —Owns outright —Owns with a mortgage or loan —Part-owns and part-rents (shared ownership) —Rents (with or without housing benefit) —Lives here rent-free |
| <i>If response is either “Part-owns and part-rents (shared ownership)”, or “Rents (with or without housing benefit)” or “Lives here rent-free” then:</i> | <i>Selecting one of the following:</i> —Housing association, housing co-operative, charitable trust, registered social landlord |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|---|---|
| Who is your landlord? | <ul style="list-style-type: none"> —Council or local authority —Private landlord or letting agency —Employer of a household member —Relative or friend of a household member —Other |
| <p><i>If there are one or more usual residents at the census address, then:</i></p> <p>In total, how many cars or vans are owned, or available for use, by members of this household?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —None —1 —2 —3 —4 —5 or more (<i>in which case entering actual number of cars or vans</i>) |
| Information about individual residents | |
| Are you (<i>resident name</i>)? | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Yes, I am —No, I am answering on their behalf |
| What is your date of birth? | <p><i>Entering response in the format:</i></p> <p><i>Day-Month-Year</i></p> |
| You are (<i>age automatically calculated</i>) years old (<i>or 'months old' or 'days old' depending on age of resident</i>). Is this correct? | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Yes, I am (<i>automatically calculated age</i>) years (<i>months or days</i>) old —No, I need to correct my date of birth |
| What is your sex? | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Female —Male |
| On 21 March 2021, what is your legal marital or registered civil partnership status? | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Never married and never registered a civil partnership |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|---|---|
| | <ul style="list-style-type: none"> —Married —In a registered civil partnership —Separated, but still legally married —Separated, but still legally in a civil partnership —Divorced —Formerly in a civil partnership which is now legally dissolved —Widowed —Surviving partner from a registered civil partnership |
| <p><i>If response is “Married” or “Separated, but still legally married” then:</i></p> <p>Who is your legal marriage to?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Someone of the opposite sex —Someone of the same sex |
| <p><i>If response is “Divorced” or “Widowed” then:</i></p> <p>Who was your legal marriage to?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Someone of the opposite sex —Someone of the same sex |
| <p><i>If response is “In a registered civil partnership” or “Separated, but still legally in a civil partnership” then:</i></p> <p>Who is your registered civil partnership to?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Someone of the opposite sex —Someone of the same sex |
| <p><i>If response is “Formerly in a civil partnership which is now legally dissolved” or “Surviving partner from a registered civil partnership” then:</i></p> <p>Who was your registered civil partnership to?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Someone of the opposite sex —Someone of the same sex |
| <p>Do you stay at another address for more than 30 days a year?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —No —Yes, an address within the UK (<i>in which case stating address and postcode</i>) —Yes, an address outside the UK (<i>in which case stating current name of the country</i>) |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|---|--|
| <p>If response is “Yes, an address within the UK” or “Yes, an address outside the UK” then:</p> <p>What type of address is <i>(address within UK)</i>?</p> <p>Or</p> <p>What type of address is your address in <i>(name of country)</i>?</p> | <p>Selecting all that apply:</p> <ul style="list-style-type: none"> —Armed forces base address —Another address when working away from home —Student’s home address —Student’s term-time address —Another parent or guardian’s address —Partner’s address —Holiday home —Other |
| <p>If aged 18 years or under:</p> <p>Are you a schoolchild or student in full-time education?</p> <p>If aged 19 years or over:</p> <p>Are you a student in full-time education?</p> | <p>For either question, selecting one of the following:</p> <ul style="list-style-type: none"> —Yes —No |
| <p>If response is “Yes” then:</p> <p>During term time, where do you usually live?</p> | <p>Selecting one of the following:</p> <ul style="list-style-type: none"> —(Census address) —(any UK address or current name of country given in response to the earlier question in column (1): “Do you stay at another address for more than 30 days a year?”) (If selected, then only the questions below in column (1) marked (‡) are asked (if relevant), and the intervening questions are not asked.) —Another address (If selected, then only the questions below in column (1) marked (‡) are asked (if relevant), and the intervening questions are not asked. The exception is the question immediately below in column (1) which, if it arises, is also asked.) |
| <p>If response is “Another address” (and if “No” was given in response to the earlier question: “Do you stay at another address for more than 30 days a year?”) then:</p> <p>Is this address in the UK?</p> | <p>Selecting one of the following:</p> <ul style="list-style-type: none"> —Yes (in which case stating address and postcode) |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|--|--|
| <p>After this question, only the questions below marked (‡) are asked (if relevant), and the intervening questions are not asked.</p> | <p>—No (in which case stating the current name of the country)</p> |
| <p>What is your country of birth?</p> | <p>Selecting one of the following:</p> <ul style="list-style-type: none"> —Wales —England —Scotland —Northern Ireland —Republic of Ireland —Elsewhere (in which case stating the current name of the country) |
| <p>If response is “Republic of Ireland” or “Elsewhere” then:</p> <p>When did you most recently arrive to live in the United Kingdom?</p> | <p>Entering response in the format:</p> <p>Month-Year</p> |
| <p>If response is “March-2020” then:</p> <p>Did you arrive in the UK on or after 21 March 2020?</p> | <p>Selecting one of the following:</p> <ul style="list-style-type: none"> —Yes —No |
| <p>If response is “Yes”, or if response to the earlier question is “April-2020” or any later date, rather than “March-2020”, then:</p> <p>Including the time already spent here, how long do you intend to stay in the United Kingdom?</p> | <p>Selecting one of the following:</p> <ul style="list-style-type: none"> —Less than 12 months —12 months or more |
| <p>One year ago, what was your usual address?</p> | <p>Selecting one of the following:</p> <ul style="list-style-type: none"> —(where there is more than one respondent in a household, the second, third etc. respondents are given the additional response option of adopting the response option selected by the first respondent) —(Census address) —Student term-time or boarding school address in the UK (in which case stating address and postcode) —Another address in the UK (in which case stating address and postcode) |

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| (1) Question | (2) Response Options |
|---|--|
| | —Another address outside the UK (<i>in which case stating the current name of the country</i>) |
| How would you describe your national identity? | <p><i>Selecting all that apply:</i></p> <ul style="list-style-type: none"> —Welsh —English —Scottish —Northern Irish —British —Other (<i>in which case describing the national identity</i>) |
| What is your ethnic group? | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —White —Mixed or Multiple ethnic groups —Asian, Asian Welsh or Asian British —Black, Black Welsh, Black British, Caribbean or African —Other ethnic group |
| <p><i>If response is “White” then:</i></p> <p>Which one best describes your White ethnic group or background?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Welsh, English, Scottish, Northern Irish or British —Irish —Gypsy or Irish Traveller —Roma —Any other White background (<i>in which case entering the other White background</i>) |
| <p><i>If response is “Mixed or Multiple ethnic groups” then:</i></p> <p>Which one best describes your Mixed or Multiple ethnic group or background?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —White and Black Caribbean —White and Black African —White and Asian |

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|---|--|
| | <p>—Any other Mixed or Multiple background <i>(in which case entering the other Mixed or Multiple background)</i></p> |
| <p><i>If response is “Asian , Asian Welsh or Asian British” then:</i></p> <p>Which one best describes your Asian, Asian Welsh or Asian British ethnic group or background?</p> | <p><i>Selecting one of the following:</i></p> <p>—Indian</p> <p>—Pakistani</p> <p>—Bangladeshi</p> <p>—Chinese</p> <p>—Any other Asian background <i>(in which case entering the other Asian background)</i></p> |
| <p><i>If response is “Black, Black Welsh, Black British, Caribbean or African” then:</i></p> <p>Which one best describes your Black, Black Welsh, Black British, Caribbean or African ethnic group or background?</p> | <p><i>Selecting one of the following:</i></p> <p>—Caribbean</p> <p>—African <i>(in which case entering African background)</i></p> <p>—Any other Black, Black British or Caribbean background <i>(in which case entering the other Black, Black British or Caribbean background)</i></p> |
| <p><i>If response is “Other ethnic group” then:</i></p> <p>Which one best describes your other ethnic group or background?</p> | <p><i>Selecting one of the following:</i></p> <p>—Arab</p> <p>—Any other ethnic group <i>(in which case entering the other ethnic group)</i></p> |
| <p>What is your religion?</p> <p>This question is voluntary</p> | <p><i>Selecting one of the following:</i></p> <p>—No religion</p> <p>—Christian (all denominations)</p> <p>—Buddhist</p> <p>—Hindu</p> <p>—Jewish</p> <p>—Muslim</p> <p>—Sikh</p> <p>—Any other religion <i>(in which case entering the religion)</i></p> |

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|--|--|
| Can you understand, speak, read or write Welsh? | <p><i>Selecting all that apply:</i></p> <ul style="list-style-type: none"> —Understand spoken Welsh —Speak Welsh —Read Welsh —Write Welsh <p>Or</p> <ul style="list-style-type: none"> —None of these apply |
| What is your main language? | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —English or Welsh —Other, including British Sign Language (<i>in which case entering the other language</i>) |
| <p><i>If response is “Other, including British Sign Language” then:</i></p> <p>How well can you speak English?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Very well —Well —Not well —Not at all |
| What passports do you hold? | <p><i>Selecting all that apply:</i></p> <ul style="list-style-type: none"> —United Kingdom —Ireland —Other (<i>in which case entering the passports held</i>) <p>Or</p> <ul style="list-style-type: none"> —None |
| How is your health in general? | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Very good —Good —Fair —Bad |

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|--|---|
| | —Very bad |
| Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more? | <i>Selecting one of the following:</i> —Yes —No |
| <i>If response is “Yes” then:</i> Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities? | <i>Selecting one of the following:</i> —Yes, a lot —Yes, a little —Not at all |
| Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age? | <i>Selecting one of the following:</i> —No —Yes, 9 hours a week or less —Yes, 10 to 19 hours a week —Yes, 20 to 34 hours a week —Yes, 35 to 49 hours a week —Yes, 50 or more hours a week |
| All the questions below in column (1) are for respondents aged 16 years and over only, except the questions marked (‡) which, if relevant, may be asked of any respondent | |
| Which of the following best describes your sexual orientation? This question is voluntary | <i>Selecting one of the following:</i> —Straight or Heterosexual —Gay or Lesbian —Bisexual —Other sexual orientation (<i>in which case entering sexual orientation</i>) |
| Is the gender you identify with the same as your sex registered at birth? This question is voluntary | <i>Selecting one of the following:</i> —Yes —No (<i>in which case entering gender identity</i>) |
| Information about qualifications | |
| Have you completed an apprenticeship? | <i>Selecting one of the following:</i> —Yes (for example, trade, higher, foundation or modern) |

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|---|--|
| | —No |
| Have you achieved a qualification at degree level or above? | <p><i>Selecting one of the following:</i></p> <p>—Yes (for example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing)</p> <p>—No</p> |
| Have you achieved an NVQ or equivalent qualification? | <p><i>Selecting all that apply:</i></p> <p>—NVQ level 3 or equivalent (for example, BTEC National, OND or ONC, City and Guilds Advanced Craft)</p> <p>—NVQ level 2 or equivalent (for example, BTEC General, City and Guilds Craft)</p> <p>—NVQ level 1 or equivalent</p> <p>Or</p> <p>—None of these apply</p> |
| Have you achieved an AS, A level or equivalent qualification? | <p><i>Selecting all that apply:</i></p> <p>—2 or more A levels (include 4 or more AS levels)</p> <p>—1 A level (include 2 to 3 AS levels)</p> <p>—1 AS level</p> <p>—Advanced Welsh Baccalaureate</p> <p>Or</p> <p>—None of these apply</p> |
| Have you achieved a GCSE or equivalent qualification? | <p><i>Selecting all that apply:</i></p> <p>—5 or more GCSEs grade A* to C or 9 to 4 (include 5 or more O level passes or CSEs grades 1)</p> <p>—Any other GCSEs (include any other O levels or CSEs at any grades)</p> <p>—Basic Skills course (Skills for life, literacy, numeracy and language)</p> <p>—Intermediate or National Welsh Baccalaureate</p> |

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|---|--|
| | <p>—Foundation Welsh Baccalaureate</p> <p>Or</p> <p>—None of these apply</p> |
| <p><i>If response is “No” or “None of these apply” to all the qualification questions above, then:</i></p> <p>Have you achieved any other qualifications?</p> | <p><i>Selecting all that apply:</i></p> <p>—Yes, in Wales or England</p> <p>—Yes, anywhere outside of Wales and England</p> <p>Or</p> <p>—No qualifications</p> |
| Information about past and present employment | |
| <p>Have you previously served in the UK Armed Forces?</p> | <p><i>Selecting all that apply:</i></p> <p>—Yes, previously served in Regular Armed Forces</p> <p>—Yes, previously served in Reserve Armed Forces</p> <p>Or</p> <p>—No</p> |
| <p>In the last seven days, were you doing any of the following?</p> | <p><i>Selecting all that apply:</i></p> <p>—Working as an employee</p> <p>—Self-employed or freelance</p> <p>—Temporarily away from work ill, on holiday or temporarily laid off</p> <p>—On maternity or paternity leave</p> <p>—Doing any other kind of paid work</p> <p>Or</p> <p>—None of these apply</p> <p><i>If the response option “None of these apply” is selected, the questions marked (#) below in column (1) will be asked (as appropriate) and the intervening questions will not be asked. If any other response option(s) is selected, the intervening questions will be asked and the questions marked (#) will not be asked.</i></p> |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|--|---|
| In your main job, what is your employment status? | <i>Selecting one of the following:</i> —Employee —Self-employed or freelance without employees —Self-employed with employees |
| What is the name of the organisation or business you work for? | <i>Selecting one of the following:</i> —Entering organisation or business name Or —No organisation or work for a private individual |
| What is your full job title? | <i>Entering full job title</i> |
| Briefly describe what you do in your main job. | <i>Entering job description</i> |
| What is the main activity of your organisation, business or freelance work? | <i>Entering main activity</i> |
| Do you supervise or oversee the work of other employees on a day-to-day basis? | <i>Selecting one of the following:</i> —Yes —No |
| In your main job, how many hours a week do you usually work? | <i>Selecting one of the following:</i> —0 to 15 hours —16 to 30 hours —31 to 48 hours —49 hours or more |
| How do you usually travel to work? | <i>Selecting one of the following:</i> —Work mainly at or from home —Underground, metro, light rail or tram —Train —Bus, minibus or coach —Taxi —Motorcycle, scooter or moped |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|---|--|
| | <ul style="list-style-type: none"> —Driving a car or van —Passenger in a car or van —Bicycle —On foot —Other |
| Where do you mainly work? | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —At a workplace —Report to a depot —At or from home —An offshore installation —No fixed place |
| <p><i>If response is “At a workplace” or “Report to a depot” then:</i></p> <p>Do you mainly work in the UK?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Yes (in which case stating address and postcode for workplace or depot) —No (in which case stating the country) |
| <p>(#) Which of the following describes what you were doing in the last seven days?</p> | <p><i>Selecting all that apply:</i></p> <ul style="list-style-type: none"> —Retired (whether receiving a pension or not) —Studying —Looking after home or family —Long-term sick or disabled —Other |
| <p>(#) In the last four weeks, were you actively looking for any kind of paid work?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Yes —No |
| <p>(#) <i>If response is “Yes” then:</i></p> <p>Are you available to start work in the next two weeks?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Yes —No |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|---|--|
| <p>(#) <i>If response is “No”, not actively looking for paid work, or “No”, not available to start work in the next two weeks, then:</i></p> <p>In the last seven days, were you waiting to start a job already accepted?</p> | <p><i>Selecting one of the following:</i></p> <p>—Yes</p> <p>—No</p> |
| <p>(#) Have you ever done any paid work?</p> | <p><i>Selecting one of the following:</i></p> <p>—Yes, in the last 12 months</p> <p>—Yes, but not in the last 12 months</p> <p>—No, have never worked <i>(If selected, omit the remaining questions in column (1) marked (#).)</i></p> |
| <p>(#) In your main job, what was your employment status?</p> | <p><i>Selecting one of the following:</i></p> <p>—Employee</p> <p>—Self-employed or freelance without employees</p> <p>—Self-employed with employees</p> |
| <p>(#) What was the name of the organisation or business you worked for?</p> | <p><i>Selecting one of the following:</i></p> <p>—<i>Entering organisation or business name</i></p> <p>Or</p> <p>—No organisation or worked for a private individual</p> |
| <p>(#) What was your full job title?</p> | <p><i>Entering job title</i></p> |
| <p>(#) Briefly describe what you did in your main job.</p> | <p><i>Entering job description</i></p> |
| <p>(#) What was the main activity of your organisation, business or freelance work?</p> | <p><i>Entering main activity</i></p> |
| <p>(#) Did you supervise or oversee the work of other employees on a day-to-day basis?</p> | <p><i>Selecting one of the following:</i></p> <p>—Yes</p> <p>—No</p> |
| <p>Information about visitors</p> | |
| <p>(‡) What is <i>(visitor name)</i>’s date of birth?</p> | <p><i>Entering response in the format:</i></p> <p><i>Day-Month-Year</i></p> |
| <p>(‡) What is <i>(visitor name)</i>’s sex?</p> | <p><i>Selecting one of the following:</i></p> |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|---|--|
| | —Female —Male |
| (‡) What is (visitor name)'s usual address? | <p>Selecting one of the following:</p> <p>—(where there is more than one visitor in a household, the second, third etc. visitors are given the additional response option of adopting the response option selected by the first visitor)</p> <p>—An address in the UK (in which case stating address and postcode)</p> <p>—An address outside the UK (in which case stating name of country)</p> |

PART 2

Individual Questionnaire (online)

| <i>(1) Question</i> | <i>(2) Response Options</i> |
|---|--|
| What type of accommodation is (census address)? | <p>Selecting one of the following:</p> <p>—A communal establishment (for example, student hall of residence, boarding school, armed forces base, hospital, care home, prison) (If this response option is selected, the question below in column (1) marked (#) is asked.)</p> <p>—A private or family household</p> |
| Are you answering these questions for yourself or for someone else? | <p>Selecting one of the following:</p> <p>—For myself</p> <p>—For someone else</p> |
| <p>If response is “For myself” then:</p> <p>What is your name?</p> | <p>Entering response in the format:</p> <p>First name</p> <p>Middle name(s)</p> <p>Last name</p> |
| <p>If response is “For someone else” then:</p> <p>What is their name?</p> | <p>Entering response in the format:</p> <p>First name</p> |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|--|---|
| | <p><i>Middle name(s)</i></p> <p><i>Last name</i></p> |
| <p>(#) What is your position in this establishment?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Resident (for example, student, member of armed forces, patient, detainee) —Staff or owner —Family member or partner of staff or owner —Staying temporarily (no usual UK address) |
| <p><i>The subsequent questions in this questionnaire are identical to the questions in the Household Questionnaire (online) set out in the table in Part 1 of this Schedule, from and including the question “What is your date of birth?” up to but excluding the questions marked (‡).</i></p> | <p><i>The subsequent response options in this questionnaire are identical to the response options in the Household Questionnaire (online) set out in the table in Part 1 of this Schedule, from and including the response option to the question “What is your date of birth?” up to but excluding the response options to the questions marked (‡).</i></p> <p><i>The routing instruction following the second response option to the question “During term time, where do you usually live?”, and the routing instruction following the question “Is this address in the UK?” (both of which route respondents to the questions marked (‡)) in the table in Part 1 of this Schedule do not apply in this table. Instead, in each case, the routing instruction is: “If selected/After this question (as appropriate), no further questions are asked.”</i></p> |

PART 3

Communal Establishment Questionnaire (online)

| <i>(1) Question</i> | <i>(2) Response Options</i> |
|---|---|
| <p>What is the nature of this establishment?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Medical or care —Education —Armed forces —Detention |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|---|--|
| | <ul style="list-style-type: none"> —Travel or temporary accommodation —Religious establishment —Staff or worker accommodation only —Other establishment |
| <p><i>If response is “Medical or care” then:</i></p> <p>What type of medical or care establishment is (census address)?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Care home without nursing —Care home with nursing —Children’s home (including secure units) —General hospital —Mental health hospital or unit (including secure units) —Other hospital —Other medical or care establishment |
| <p><i>If response is “Education” then:</i></p> <p>What type of education establishment is (census address)?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —School —University (for example, hall of residence) —Other education establishment |
| <p><i>If response is “Detention” then:</i></p> <p>What type of detention establishment is (census address)?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Prison service establishment (including young offender institutions) —Approved premises (probation or bail hostel) —Detention centre —Other detention establishment |
| <p><i>If response is “Travel or temporary accommodation” then:</i></p> <p>What type of travel or temporary accommodation establishment is (census address)?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Hotel, guest house, B&B, youth hostel (including inns and pubs) —Holiday accommodation (for example, holiday park) —Hostel or temporary shelter for homeless people |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|---|--|
| | —Other travel or temporary accommodation |
| Who is responsible for the management of this establishment? | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —NHS —Local authority —Government department or agency —Registered social landlord or housing association —Charity or voluntary organisation —Private owner or company —Higher or further education institution —Other |
| Do any of the following currently live in this establishment? | <p><i>Selecting all that apply:</i></p> <ul style="list-style-type: none"> —Anyone who has already spent, or is expected to spend, six months or more in this establishment, even if they are away on 21 March 2021 —UK residents who are staying in this establishment on 21 March 2021 and have no other usual UK address —People who usually live outside the UK who have stayed, or intend to stay, in the UK for three months or more who do not have another UK address —Students or schoolchildren who stay in this establishment during term time —Yourself, your family, staff, and any others who live in this establishment <p>Or</p> <ul style="list-style-type: none"> —None of these apply |
| How many people are currently living in this establishment? | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —<i>Entering number of residents</i> —No one is living in this establishment (<i>This additional response option only appears if</i> |

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| <i>(1) Question</i> | <i>(2) Response Options</i> |
|--|--|
| | <i>the response option selected to the previous question in column (1) was “None of these apply”.)</i> |
| <p>Are any of the following visitors staying overnight in this establishment on 21 March 2021?</p> | <p><i>Selecting all that apply:</i></p> <ul style="list-style-type: none"> —Anyone with another usual address in the UK who has spent, or expects to spend, less than six months in this establishment —Anyone from outside the UK who intends to stay in the UK for less than three months <p>Or</p> <ul style="list-style-type: none"> —None of these apply |
| <p>How many visitors are staying overnight in this establishment on 21 March 2021?</p> | <p><i>Selecting one of the following:</i></p> <ul style="list-style-type: none"> —Entering number of visitors —No visitors are staying overnight (<i>This additional response option only appears if the response option selected to the previous question in column (1) was “None of these apply”.)</i> |

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PART 4

Household Questionnaire (paper)



census
2021

Household Questionnaire
Wales

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| <p>FREEPOST Census 2021</p> | <p>Complete online www.census.gov.uk Your household access code is: <input type="text"/></p> <p>OR fill in this paper questionnaire.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>We need your help to run the census, which gathers vital information to help plan services such as transport, education and healthcare.</p> <p>All households should complete the census on 21 March 2021 or as soon as possible after.</p> <p>If you prefer, you can complete the questionnaire online:</p> <ol style="list-style-type: none">1. Go to www.census.gov.uk2. Enter the household access code on the front of this questionnaire.3. Answer the questions and select submit. <p>Thank you for taking part.</p>  <p>Professor Sir Ian Diamond National Statistician</p> | <p>If your address is incorrect or missing, write in your correct address below:</p> <table border="1"><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table> <p>Postcode</p> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
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| <p>You must take part in the census by law. If you do not, or if you supply false information, you could be fined. Some questions are clearly labelled as being voluntary – it is not an offence if you do not answer these.</p> | <p>Declaration</p> <p>This questionnaire has been completed to the best of my knowledge and belief.</p> <table border="1"><tr><td>Signature <input type="text"/></td><td>Date <input type="text"/></td></tr></table> | Signature <input type="text"/> | Date <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature <input type="text"/> | Date <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>Your information is protected by law.</p> <p>Find out more in the leaflet that comes with this questionnaire.</p> | <p>If you have lost your envelope, please return your completed questionnaire to: FREEPOST Census 2021</p> <p>Where you can get help: www.census.gov.uk/help Contact Centre 0800 169 2021 NGT (18001) 0800 169 2021 Language helpline 0800 587 2021</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |



102001

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Before you start

The householder is responsible for ensuring that this questionnaire is completed and returned.

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

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

A **household** is:

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

What should I complete on this questionnaire?

- Household questions on pages 3–6** about this household and its accommodation.
- Individual questions on pages 7–31** for every person who usually lives in this household. Every person who has been, or intends to be, in the UK for 3 months or more should be included in these questions at their usual UK address.
- Visitor questions on the back page (page 32)** for all other people staying overnight in this household on 21 March 2021.
It is important to include visitors staying overnight in this household to make sure no one is missed. Visitors who usually live elsewhere in the UK must also be included on a census questionnaire at their usual address.

You will find further information about who to include in this questionnaire in the accompanying leaflet.

Will I need extra questionnaires?

- If there are more than 5 people in this household, or more than 3 visitors staying overnight, you can choose either to complete the entire questionnaire online, or fill in this questionnaire and contact us to request one or more Continuation Questionnaires.
- If any member of this household does not want to disclose their information to others in the household, you can request an Individual Questionnaire. Remember to include these people in household questions (H1 to H14) on this questionnaire, but leave blank their individual questions (1 to 51).
- If there is more than one household at this address, contact us to request one or more additional Household Questionnaires.

You can request extra questionnaires online at www.census.gov.uk or by calling 0800 169 2021.

How should I complete my questionnaire correctly?

You should:

- use black or blue ink to answer
- tick your answers within the box, like this:
- print in capital letters within the boxes, one letter per box, like this:

| | | | | | | | |
|---|---|---|---|---|--|--|--|
| D | A | F | Y | D | | | |
|---|---|---|---|---|--|--|--|
- correct any mistakes by filling in the box, like this:

| | | | | | | | |
|---|---|---|---|---|---|--|--|
| J | O | ■ | N | E | S | | |
|---|---|---|---|---|---|--|--|

 or this:

| | | | | | | | |
|---|---|---|---|---|--|--|--|
| J | O | N | E | S | | | |
|---|---|---|---|---|--|--|--|
- continue onto the next line (if possible) when a word will not fit, like this:

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| P | A | D | D | I | N | G | T | O |
| N | | S | T | R | E | E | T | |
- follow the → **GO TO** instructions and leave any questions or pages you do not need to answer completely blank; any marks or lines can be mistaken for answers



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Household questions

H1 Who usually lives here?

Tick all that apply. For more advice about who to include, see the accompanying leaflet

- Me, this is my permanent or family home
- Family members including partners, children, and babies born on or before 21 March 2021
- Students and/or schoolchildren who live away from home during term time
- Housemates, tenants or lodgers
- People who usually live outside the UK who are staying in the UK for 3 months or more
- People who work away from home within the UK, or are members of the armed forces, if this is their permanent or family home
- People who are temporarily outside the UK for less than 12 months
- People staying temporarily who usually live in the UK but do not have another UK address, for example, relatives, friends
- Other people who usually live here, including anyone temporarily away from home
- OR** no one usually lives here, for example, this is a second address or holiday home → **GO TO H4**

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

H3 Starting with yourself, list the names of all the people counted in question H2 including children, babies and lodgers.

If a member of this household has requested an Individual Questionnaire, tick the box beside their name and leave blank the Individual questions 1 to 51 for that person

Individual
Questionnaire
requested?

| | First name | Last name | |
|---------------------|----------------------|----------------------|--------------------------|
| Yourself (Person 1) | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> |
| Person 2 | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> |
| Person 3 | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> |
| Person 4 | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> |
| Person 5 | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> |

If there are more than 5 people, complete the entire questionnaire online or contact us to get a Continuation Questionnaire.

H4 Apart from everyone counted in question H2, who else is staying overnight here on 21 March 2021? These people are counted as visitors. Remember to include children and babies.

Tick all that apply

- People who usually live somewhere else in the UK, for example, boy/girlfriends, friends, relatives
- People staying here because it is their second address, for example, for work. Their permanent or family home is elsewhere
- People who usually live outside the UK who are staying in the UK for less than 3 months
- People here on holiday
- OR** there are no visitors staying overnight here on 21 March 2021 → **GO TO H6**

H5 Counting only the people included in question H4, how many visitors are staying overnight here on 21 March 2021?

- Remember to answer the Visitor questions on the back page (page 32) for these people
- If there is no one usually living here (there are only visitors staying here) → **GO TO H7**



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Household questions – continued

H6 How are members of this household related to each other? If members are not related, tick the "Unrelated" box.

Using the same order you used in question H3 (page 3), write the name of everyone who usually lives here at the top of each column. Remember to include children, babies and people who have requested an Individual Questionnaire

Tick a box to show the relationship of each person to each of the other members of this household

If no one usually lives here and there are no visitors staying overnight here on 21 March 2021 → **GO TO H7**

Example:

This shows how a household with 2 parents and 3 children are related to each other

DO NOT write in this section →

Provide details of members of the household in the section BELOW ↓

| Name of Person 1 | Name of Person 2 |
|---|--|
| First name <input type="text" value="MAIR"/> | First name <input type="text" value="ROBERT"/> |
| Last name <input type="text" value="JONES"/> | Last name <input type="text" value="JONES"/> |
| | How is Person 2 related to Person: 1 |
| | Husband or wife <input checked="" type="checkbox"/> |
| | Legally registered civil partner <input type="checkbox"/> |
| | Partner <input type="checkbox"/> |
| | Son or daughter <input type="checkbox"/> |
| | Stepchild <input type="checkbox"/> |
| | Brother or sister (including half-brother or half-sister) <input type="checkbox"/> |

| Name of Person 1 | Name of Person 2 | Name of Person 3 |
|--|--|--|
| First name <input type="text"/> | First name <input type="text"/> | First name <input type="text"/> |
| Last name <input type="text"/> | Last name <input type="text"/> | Last name <input type="text"/> |
| <p>ENTER NAME OF PERSON 1 HERE AS IN QUESTION H3</p> <p>IF YOU LIVE ALONE GO TO H7</p> | How is Person 2 related to Person: 1 | How is Person 3 related to Person: 1 2 |
| | Husband or wife <input type="checkbox"/> | Husband or wife <input type="checkbox"/> |
| | Legally registered civil partner <input type="checkbox"/> | Legally registered civil partner <input type="checkbox"/> |
| | Partner <input type="checkbox"/> | Partner <input type="checkbox"/> |
| | Son or daughter <input type="checkbox"/> | Son or daughter <input type="checkbox"/> |
| | Stepchild <input type="checkbox"/> | Stepchild <input type="checkbox"/> |
| | Brother or sister (including half-brother or half-sister) <input type="checkbox"/> | Brother or sister (including half-brother or half-sister) <input type="checkbox"/> |
| | Stepbrother or stepsister <input type="checkbox"/> | Stepbrother or stepsister <input type="checkbox"/> |
| | Mother or father <input type="checkbox"/> | Mother or father <input type="checkbox"/> |
| | Stepmother or stepfather <input type="checkbox"/> | Stepmother or stepfather <input type="checkbox"/> |
| Grandchild <input type="checkbox"/> | Grandchild <input type="checkbox"/> | |
| Grandparent <input type="checkbox"/> | Grandparent <input type="checkbox"/> | |
| Relation – other <input type="checkbox"/> | Relation – other <input type="checkbox"/> | |
| Unrelated (including foster child) <input type="checkbox"/> | Unrelated (including foster child) <input type="checkbox"/> | |



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Person 5 (Wil) is the son of Person 1 (Mair) and Person 2 (Robert), and the brother of Person 3 (Martha) and Person 4 (Dylan).

| Name of Person 3 | Name of Person 4 | Name of Person 5 |
|---|---|---|
| First name <input type="text" value="MARTHA"/> | First name <input type="text" value="DYLAN"/> | First name <input type="text" value="WIL"/> |
| Last name <input type="text" value="JONES"/> | Last name <input type="text" value="JONES"/> | Last name <input type="text" value="JONES"/> |
| How is Person 3 related to Person: 1 2 | How is Person 4 related to Person: 1 2 3 | How is Person 5 related to Person: 1 2 3 4 |
| Husband or wife <input type="checkbox"/> <input type="checkbox"/> | Husband or wife <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Husband or wife <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Legally registered civil partner <input type="checkbox"/> <input type="checkbox"/> | Legally registered civil partner <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Legally registered civil partner <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Partner <input type="checkbox"/> <input type="checkbox"/> | Partner <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Partner <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Son or daughter <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> | Son or daughter <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> | Son or daughter <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Stepchild <input type="checkbox"/> <input type="checkbox"/> | Stepchild <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Stepchild <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Brother or sister (including half-brother or half-sister) <input type="checkbox"/> <input type="checkbox"/> | Brother or sister (including half-brother or half-sister) <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> | Brother or sister (including half-brother or half-sister) <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> |

| Name of Person 4 | Name of Person 5 |
|--|---|
| First name <input type="text"/> | First name <input type="text"/> |
| Last name <input type="text"/> | Last name <input type="text"/> |
| How is Person 4 related to Person: 1 2 3 | How is Person 5 related to Person: 1 2 3 4 |
| Husband or wife <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Husband or wife <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Legally registered civil partner <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Legally registered civil partner <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Partner <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Partner <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Son or daughter <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Son or daughter <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Stepchild <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Stepchild <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Brother or sister (including half-brother or half-sister) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Brother or sister (including half-brother or half-sister) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Stepbrother or stepsister <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Stepbrother or stepsister <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Mother or father <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Mother or father <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Stepmother or stepfather <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Stepmother or stepfather <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Grandchild <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Grandchild <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Grandparent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Grandparent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Relation – other <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Relation – other <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Unrelated (including foster child) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Unrelated (including foster child) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

↻ If there are more than 5 people, contact us to request a Continuation Questionnaire



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Household questions – continued

H7 What type of accommodation is this?

A whole house or bungalow that is:

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

A flat, maisonette or apartment that is:

- in a purpose-built block of flats or tenement
- part of a converted or shared house (including bedsits)
- part of another converted building (for example, former school, church or warehouse)
- in a commercial building (for example, in an office building, hotel, or over a shop)


A mobile or temporary structure:

- a caravan or other mobile or temporary structure

H8 Are all the rooms in this accommodation, including the kitchen, bathroom and toilet, behind a door that only this household can use?



- Yes
- No, one or more rooms are shared with another household

H9 How many bedrooms are available for use only by this household?

 Include all rooms built or converted for use as bedrooms


Number of bedrooms


H10 What type of central heating does this accommodation have?

 Tick all that apply, whether or not you use it
 Central heating is a central system that generates heat for multiple rooms

- No central heating
- Mains gas
- Tank or bottled gas
- Electric (including storage heaters)
- Oil
- Wood (for example, logs, waste wood or pellets)
- Solid fuel (for example, coal)
- Renewable energy (for example, solar thermal or heat pumps)
- District or communal heat network
- Other



H11 If one or more people usually live here GO TO H12

OR if there is no one usually living here (only visitors staying here)
 GO TO page 32

OR if no one usually lives here and there are no visitors staying overnight on 21 March 2021
 GO TO the Declaration on the front page

H12 Does your household own or rent this accommodation?

 Tick one box only

- Owns outright  GO TO H14
- Owns with a mortgage or loan  GO TO H14
- Part-owns and part-rents (shared ownership)
- Rents (with or without housing benefit)
- Lives here rent-free

H13 Who is your landlord?

 Tick one box only

- Housing association, housing co-operative, charitable trust, registered social landlord
- Council or local authority
- Private landlord or letting agency
- Employer of a household member
- Relative or friend of a household member
- Other

H14 In total, how many cars or vans are owned, or available for use, by members of this household?

 Include any company cars or vans available for private use

- None
- 1
- 2
- 3
- 4
- 5 or more, write in number



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Individual questions – Person 1 start here

| | |
|---|--|
| <p>P Thinking about the people listed in question H3, are you Person 1?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No – enter the details for Person 1 in this section</p> <p>1 What is your name? (Person 1 in question H3)</p> <p>First name <input type="text"/></p> <p>Middle name(s) <input type="text"/></p> <p>Last name <input type="text"/></p> <p>2 What is your date of birth?</p> <p>Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>3 What is your sex?</p> <p><input type="checkbox"/> A question about gender identity will follow if you are aged 16 or over</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p> <p>4 On 21 March 2021, what is your legal marital or registered civil partnership status?</p> <p><input type="checkbox"/> Never married and never registered a civil partnership → GO TO 6</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> In a registered civil partnership</p> <p><input type="checkbox"/> Separated, but still legally married</p> <p><input type="checkbox"/> Separated, but still legally in a civil partnership</p> <p><input type="checkbox"/> Divorced</p> <p><input type="checkbox"/> Formerly in a civil partnership which is now legally dissolved</p> <p><input type="checkbox"/> Widowed</p> <p><input type="checkbox"/> Surviving partner from a registered civil partnership</p> <p>5 Who is (was) your legal marriage or registered civil partnership to?</p> <p><input type="checkbox"/> Someone of the opposite sex</p> <p><input type="checkbox"/> Someone of the same sex</p> | <p>6 Do you stay at another address for more than 30 days a year?</p> <p><input checked="" type="checkbox"/> These days could be in a row or separate</p> <p><input type="checkbox"/> No → GO TO 8</p> <p><input type="checkbox"/> Yes, write in other UK address below</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Postcode <input type="text"/></p> <p><input type="checkbox"/> OR yes, outside the UK, write in country</p> <p><input type="text"/></p> <p>7 What is that address?</p> <p><input type="checkbox"/> Armed forces base address</p> <p><input type="checkbox"/> Another address when working away from home</p> <p><input type="checkbox"/> Student's home address</p> <p><input type="checkbox"/> Student's term-time address</p> <p><input type="checkbox"/> Another parent or guardian's address</p> <p><input type="checkbox"/> Partner's address</p> <p><input type="checkbox"/> Holiday home</p> <p><input type="checkbox"/> Other</p> <p>8 Are you a schoolchild or student in full-time education?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No → GO TO 10</p> <p>9 During term time, where do you usually live?</p> <p><input type="checkbox"/> At the address on the front of this questionnaire</p> <p><input type="checkbox"/> At the address in question 6 → GO TO 51</p> <p><input type="checkbox"/> At another address → GO TO 51</p> <p>10 What is your country of birth?</p> <p><input type="checkbox"/> Wales → GO TO 13</p> <p><input type="checkbox"/> England → GO TO 13</p> <p><input type="checkbox"/> Scotland → GO TO 13</p> <p><input type="checkbox"/> Northern Ireland → GO TO 13</p> <p><input type="checkbox"/> Republic of Ireland</p> <p><input type="checkbox"/> Elsewhere, write in current name of the country</p> <p><input type="text"/></p> |
|---|--|



Individual questions – Person 1 continued

11 If you were not born in the United Kingdom, when did you most recently arrive to live here?

Do not count short visits away from the UK

Month Year

If you arrived before 21 March 2020 → **GO TO 13**

If you arrived on or after 21 March 2020 → **GO TO 12**

12 Including the time you have already spent here, how long do you intend to stay in the United Kingdom?

- Less than 12 months
- 12 months or more

13 One year ago, what was your usual address?

If you had no usual address one year ago, state the address where you were staying

- The address on the front of this questionnaire
- Student term-time or boarding school address in the UK, write in term-time address below
- Another address in the UK, write in below

 Postcode

OR outside the UK, write in country

14 How would you describe your national identity?

Tick all that apply

- Welsh
- English
- Scottish
- Northern Irish
- British
- Other, write in

15 What is your ethnic group?

Choose **one** section from A to E, then tick **one** box to best describe your ethnic group or background

A White

- Welsh, English, Scottish, Northern Irish or British
- Irish
- Gypsy or Irish Traveller
- Roma
- Any other White background, write in

B Mixed or Multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed or Multiple background, write in

C Asian, Asian Welsh or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background, write in

D Black, Black Welsh, Black British, Caribbean or African

- Caribbean
- African background, write in below
- Any other Black, Black British or Caribbean background, write in

E Other ethnic group

- Arab
- Any other ethnic group, write in



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Individual questions – Person 1 continued

16 What is your religion?

↻ This question is **voluntary**

- No religion
- Christian (all denominations)
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion, write in

17 Can you understand, speak, read or write Welsh?

↻ Tick all that apply

- Understand spoken Welsh
- Speak Welsh
- Read Welsh
- Write Welsh
- OR** none of the above

18 What is your main language?

- English or Welsh → **GO TO 20**
- Other, write in (including British Sign Language)

19 How well can you speak English?

- | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Very well | Well | Not well | Not at all |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

20 What passports do you hold?

↻ Tick all that apply

- United Kingdom
- Ireland
- Other, write in

OR none

21 How is your health in general?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Very good | Good | Fair | Bad | Very bad |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

22 Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?

- Yes
- No → **GO TO 24**

23 Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?

- Yes, a lot
- Yes, a little
- Not at all

24 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?

↻ Exclude anything you do as part of your paid employment

- No
- Yes, 9 hours a week or less
- Yes, 10 to 19 hours a week
- Yes, 20 to 34 hours a week
- Yes, 35 to 49 hours a week
- Yes, 50 or more hours a week

25 If you are aged 16 or over → **GO TO 26**
If you are aged 15 or under → **GO TO 51**

26 Which of the following best describes your sexual orientation?

↻ This question is **voluntary**

- Straight/Heterosexual
- Gay or Lesbian
- Bisexual
- Other sexual orientation, write in

27 Is the gender you identify with the same as your sex registered at birth?

↻ This question is **voluntary**

- Yes
- No, write in gender identity



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Individual questions – Person 1 continued

28 The next set of questions is about your qualifications.
 ☞ Record any qualifications you have ever achieved in Wales, England or worldwide, including equivalents, even if you are not using them now

29 Have you completed an apprenticeship?
 ☞ For example, trade, higher, foundation, modern

Yes No

30 Have you achieved a qualification at degree level or above?
 ☞ For example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing

Yes No

31 Have you achieved any other qualifications?

☞ Tick all that apply

GCSEs or equivalent

- 5 or more GCSEs (A*-C, 9-4), O levels (passes), CSEs (grade 1) or Intermediate Welsh Baccalaureate
- Any other GCSEs, O levels or CSEs (any grades), Basic Skills course or Foundation Welsh Baccalaureate

AS, A level or equivalent

- 2 or more A levels, 4 or more AS levels or Advanced Welsh Baccalaureate
- 1 A level, 2-3 AS levels
- 1 AS level

NVQ or equivalent

- NVQ level 3, BTEC National, OND or ONC, City and Guilds Advanced Craft
- NVQ level 2, BTEC General, City and Guilds Craft
- NVQ level 1

OR other or no qualifications

- Any other qualifications, equivalent unknown
- No qualifications

32 Have you **previously** served in the UK Armed Forces?

☞ Current serving members should only tick "no"

- Yes, previously served in **Regular** Armed Forces
- Yes, previously served in **Reserve** Armed Forces
- OR** no

33 In the last seven days, were you doing any of the following?

☞ Tick all that apply

☞ Include casual or temporary work, even if only for one hour

- Working as an employee → **GO TO 39**
- Self-employed or freelance → **GO TO 39**
- Temporarily away from work ill, on holiday or temporarily laid off → **GO TO 39**
- On maternity or paternity leave → **GO TO 39**
- Doing any other kind of paid work → **GO TO 39**
- OR** none of the above

34 Which of the following describes what you were doing in the last seven days?

☞ Tick all that apply

- Retired (whether receiving a pension or not)
- Studying
- Looking after home or family
- Long-term sick or disabled
- Other

35 In the last four weeks, were you actively looking for any kind of paid work?

- Yes
- No

36 If a job became available now, could you start it within two weeks?

- Yes
- No

37 In the last seven days, were you waiting to start a job already accepted?

- Yes
- No

38 Have you ever done any paid work?

- Yes, in the last 12 months
- Yes, but not in the last 12 months
- No, have never worked → **GO TO 51**

39 Answer the remaining questions for your main job or, if not working, your last main job.

☞ Your main job is the job in which you usually work (worked) the most hours



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Individual questions – Person 1 continued

40 In your main job, what is (was) your employment status?

- Employee
- Self-employed or freelance without employees
- Self-employed with employees

41 What is (was) the name of the organisation or business you work (worked) for?

☞ If you are (were) self-employed in your own business, write in your business name

OR no organisation or work (worked) for a private individual

42 What is (was) your full job title?

☞ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER

☞ Do not state your grade or pay band

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

44 What is (was) the main activity of your organisation, business or freelance work?

☞ For example, CLOTHING RETAIL, GENERAL HOSPITAL, PRIMARY EDUCATION, FOOD WHOLESALE

☞ If you are (were) a civil servant, write CIVIL SERVICE

☞ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority

45 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?

- Yes
- No

46 If you had a job last week → **GO TO 47**

If you were temporarily away from work last week → **GO TO 47**

If you did not have a job last week → **GO TO 51**

47 In your main job, how many hours a week do you usually work?

☞ Include paid and unpaid overtime

0 to 15 16 to 30 31 to 48 49 or more

-
-
-
-

48 How do you usually travel to work?

☞ Tick one box only for the longest part, by distance, of your usual journey to work

- Work mainly at or from home
- Underground, metro, light rail, tram
- Train
- Bus, minibus or coach
- Taxi
- Motorcycle, scooter or moped
- Driving a car or van
- Passenger in a car or van
- Bicycle
- On foot
- Other

49 Where do you mainly work?

- At a workplace or report to a depot
- At or from home → **GO TO 51**
- An offshore installation → **GO TO 51**
- No fixed place → **GO TO 51**

50 What is the address of your workplace or depot?

Postcode

51 There are no more questions for **Person 1**.

→ **GO TO** questions for **Person 2**

OR if there are no more people in this household

→ **GO TO** the **Visitor questions** on the back page

OR if there are no visitors staying here overnight

→ **GO TO** the **Declaration** on the front page



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Individual questions – Person 2 start here

| | |
|---|--|
| <p>P Thinking about the people listed in question H3, are you Person 2?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No – enter the details for Person 2 in this section</p> <p>1 What is your name? (Person 2 in question H3)</p> <p>First name <input type="text"/></p> <p>Middle name(s) <input type="text"/></p> <p>Last name <input type="text"/></p> <p>2 What is your date of birth?</p> <p>Day Month Year <input type="text"/> <input type="text"/> <input type="text"/></p> <p>3 What is your sex?</p> <p><input type="checkbox"/> A question about gender identity will follow if you are aged 16 or over</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p> <p>4 On 21 March 2021, what is your legal marital or registered civil partnership status?</p> <p><input type="checkbox"/> Never married and never registered a civil partnership → GO TO 6</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> In a registered civil partnership</p> <p><input type="checkbox"/> Separated, but still legally married</p> <p><input type="checkbox"/> Separated, but still legally in a civil partnership</p> <p><input type="checkbox"/> Divorced</p> <p><input type="checkbox"/> Formerly in a civil partnership which is now legally dissolved</p> <p><input type="checkbox"/> Widowed</p> <p><input type="checkbox"/> Surviving partner from a registered civil partnership</p> <p>5 Who is (was) your legal marriage or registered civil partnership to?</p> <p><input type="checkbox"/> Someone of the opposite sex</p> <p><input type="checkbox"/> Someone of the same sex</p> | <p>6 Do you stay at another address for more than 30 days a year?</p> <p><input type="checkbox"/> These days could be in a row or separate</p> <p><input type="checkbox"/> No → GO TO 8</p> <p><input type="checkbox"/> Yes, write in other UK address below</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Postcode <input type="text"/></p> <p><input type="checkbox"/> OR yes, outside the UK, write in country</p> <p><input type="text"/></p> <p>7 What is that address?</p> <p><input type="checkbox"/> Armed forces base address</p> <p><input type="checkbox"/> Another address when working away from home</p> <p><input type="checkbox"/> Student's home address</p> <p><input type="checkbox"/> Student's term-time address</p> <p><input type="checkbox"/> Another parent or guardian's address</p> <p><input type="checkbox"/> Partner's address</p> <p><input type="checkbox"/> Holiday home</p> <p><input type="checkbox"/> Other</p> <p>8 Are you a schoolchild or student in full-time education?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No → GO TO 10</p> <p>9 During term time, where do you usually live?</p> <p><input type="checkbox"/> At the address on the front of this questionnaire</p> <p><input type="checkbox"/> At the address in question 6 → GO TO 51</p> <p><input type="checkbox"/> At another address → GO TO 51</p> <p>10 What is your country of birth?</p> <p><input type="checkbox"/> Wales → GO TO 13</p> <p><input type="checkbox"/> England → GO TO 13</p> <p><input type="checkbox"/> Scotland → GO TO 13</p> <p><input type="checkbox"/> Northern Ireland → GO TO 13</p> <p><input type="checkbox"/> Republic of Ireland</p> <p><input type="checkbox"/> Elsewhere, write in current name of the country</p> <p><input type="text"/></p> |
|---|--|



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Individual questions – Person 2 continued

11 If you were not born in the United Kingdom, when did you most recently arrive to live here?

Do not count short visits away from the UK

Month Year

If you arrived before 21 March 2020 → GO TO 13

If you arrived on or after 21 March 2020 → GO TO 12

12 Including the time you have already spent here, how long do you intend to stay in the United Kingdom?

- Less than 12 months
- 12 months or more

13 One year ago, what was your usual address?

If you had no usual address one year ago, state the address where you were staying

- Same as Person 1
- The address on the front of this questionnaire
- Student term-time or boarding school address in the UK, write in term-time address below
- Another address in the UK, write in below

Postcode

OR outside the UK, write in country

14 How would you describe your national identity?

Tick all that apply

- Welsh
- English
- Scottish
- Northern Irish
- British
- Other, write in

15 What is your ethnic group?

Choose one section from A to E, then tick one box to best describe your ethnic group or background

A White

- Welsh, English, Scottish, Northern Irish or British
- Irish
- Gypsy or Irish Traveller
- Roma
- Any other White background, write in

B Mixed or Multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed or Multiple background, write in

C Asian, Asian Welsh or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background, write in

D Black, Black Welsh, Black British, Caribbean or African

- Caribbean
- African background, write in below
- Any other Black, Black British or Caribbean background, write in

E Other ethnic group

- Arab
- Any other ethnic group, write in



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Individual questions – Person 2 continued

16 What is your religion?

🔄 This question is **voluntary**

- No religion
- Christian (all denominations)
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion, write in

17 Can you understand, speak, read or write Welsh?

🔄 Tick all that apply

- Understand spoken Welsh
- Speak Welsh
- Read Welsh
- Write Welsh
- OR** none of the above

18 What is your main language?

- English or Welsh → **GO TO 20**
- Other, write in (including British Sign Language)

19 How well can you speak English?

- | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Very well | Well | Not well | Not at all |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

20 What passports do you hold?

🔄 Tick all that apply

- United Kingdom
- Ireland
- Other, write in

- OR** none

21 How is your health in general?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Very good | Good | Fair | Bad | Very bad |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

22 Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?

- Yes
- No → **GO TO 24**

23 Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?

- Yes, a lot
- Yes, a little
- Not at all

24 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?

🔄 Exclude anything you do as part of your paid employment

- No
- Yes, 9 hours a week or less
- Yes, 10 to 19 hours a week
- Yes, 20 to 34 hours a week
- Yes, 35 to 49 hours a week
- Yes, 50 or more hours a week

25 If you are aged 16 or over → **GO TO 26**
If you are aged 15 or under → **GO TO 51**

26 Which of the following best describes your sexual orientation?

🔄 This question is **voluntary**

- Straight/Heterosexual
- Gay or Lesbian
- Bisexual
- Other sexual orientation, write in

27 Is the gender you identify with the same as your sex registered at birth?

🔄 This question is **voluntary**

- Yes
- No, write in gender identity



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Individual questions – Person 2 continued

28 The next set of questions is about your qualifications.

- Record any qualifications you have ever achieved in Wales, England or worldwide, including equivalents, even if you are not using them now

29 Have you completed an apprenticeship?

- For example, trade, higher, foundation, modern

Yes No

30 Have you achieved a qualification at degree level or above?

- For example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing

Yes No

31 Have you achieved any other qualifications?

- Tick all that apply

GCSEs or equivalent

- 5 or more GCSEs (A*-C, 9-4), O levels (passes), CSEs (grade 1) or Intermediate Welsh Baccalaureate
- Any other GCSEs, O levels or CSEs (any grades), Basic Skills course or Foundation Welsh Baccalaureate

AS, A level or equivalent

- 2 or more A levels, 4 or more AS levels or Advanced Welsh Baccalaureate
- 1 A level, 2-3 AS levels
- 1 AS level

NVQ or equivalent

- NVQ level 3, BTEC National, OND or ONC, City and Guilds Advanced Craft
- NVQ level 2, BTEC General, City and Guilds Craft
- NVQ level 1

OR other or no qualifications

- Any other qualifications, equivalent unknown
- No qualifications

32 Have you **previously** served in the UK Armed Forces?

- Current serving members should only tick "no"

- Yes, previously served in **Regular** Armed Forces
- Yes, previously served in **Reserve** Armed Forces
- OR** no

33 In the last seven days, were you doing any of the following?

- Tick all that apply

- Include casual or temporary work, even if only for one hour

- Working as an employee → **GO TO 39**
- Self-employed or freelance → **GO TO 39**
- Temporarily away from work ill, on holiday or temporarily laid off → **GO TO 39**
- On maternity or paternity leave → **GO TO 39**
- Doing any other kind of paid work → **GO TO 39**
- OR** none of the above

34 Which of the following describes what you were doing in the last seven days?

- Tick all that apply

- Retired (whether receiving a pension or not)
- Studying
- Looking after home or family
- Long-term sick or disabled
- Other

35 In the last four weeks, were you actively looking for any kind of paid work?

- Yes
- No

36 If a job became available now, could you start it within two weeks?

- Yes
- No

37 In the last seven days, were you waiting to start a job already accepted?

- Yes
- No

38 Have you ever done any paid work?

- Yes, in the last 12 months
- Yes, but not in the last 12 months
- No, have never worked → **GO TO 51**

39 Answer the remaining questions for your main job or, if not working, your last main job.

- Your main job is the job in which you usually work (worked) the most hours



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Individual questions – Person 2 continued

| | |
|--|---|
| <p>40 In your main job, what is (was) your employment status?</p> <p><input type="checkbox"/> Employee</p> <p><input type="checkbox"/> Self-employed or freelance without employees</p> <p><input type="checkbox"/> Self-employed with employees</p> | <p>46 If you had a job last week → GO TO 47</p> <p>If you were temporarily away from work last week → GO TO 47</p> <p>If you did not have a job last week → GO TO 51</p> |
| <p>41 What is (was) the name of the organisation or business you work (worked) for?</p> <p>☞ If you are (were) self-employed in your own business, write in your business name</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> OR no organisation or work (worked) for a private individual</p> | <p>47 In your main job, how many hours a week do you usually work?</p> <p>☞ Include paid and unpaid overtime</p> <p>0 to 15 16 to 30 31 to 48 49 or more</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> |
| <p>42 What is (was) your full job title?</p> <p>☞ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER</p> <p>☞ Do not state your grade or pay band</p> <p>_____</p> <p>_____</p> | <p>48 How do you usually travel to work?</p> <p>☞ Tick one box only for the longest part, by distance, of your usual journey to work</p> <p><input type="checkbox"/> Work mainly at or from home</p> <p><input type="checkbox"/> Underground, metro, light rail, tram</p> <p><input type="checkbox"/> Train</p> <p><input type="checkbox"/> Bus, minibus or coach</p> <p><input type="checkbox"/> Taxi</p> <p><input type="checkbox"/> Motorcycle, scooter or moped</p> <p><input type="checkbox"/> Driving a car or van</p> <p><input type="checkbox"/> Passenger in a car or van</p> <p><input type="checkbox"/> Bicycle</p> <p><input type="checkbox"/> On foot</p> <p><input type="checkbox"/> Other</p> |
| <p>43 Briefly describe what you do (did) in your main job.</p> <p>_____</p> <p>_____</p> | <p>49 Where do you mainly work?</p> <p><input type="checkbox"/> At a workplace or report to a depot</p> <p><input type="checkbox"/> At or from home → GO TO 51</p> <p><input type="checkbox"/> An offshore installation → GO TO 51</p> <p><input type="checkbox"/> No fixed place → GO TO 51</p> |
| <p>44 What is (was) the main activity of your organisation, business or freelance work?</p> <p>☞ For example, CLOTHING RETAIL, GENERAL HOSPITAL, PRIMARY EDUCATION, FOOD WHOLESALE</p> <p>☞ If you are (were) a civil servant, write CIVIL SERVICE</p> <p>☞ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority</p> <p>_____</p> <p>_____</p> <p>_____</p> | <p>50 What is the address of your workplace or depot?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Postcode</p> <p>_____</p> |
| <p>45 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>51 There are no more questions for Person 2.</p> <p>→ GO TO questions for Person 3</p> <p>OR if there are no more people in this household</p> <p>→ GO TO the Visitor questions on the back page</p> <p>OR if there are no visitors staying here overnight</p> <p>→ GO TO the Declaration on the front page</p> |



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Individual questions – Person 3 start here

P Thinking about the people listed in question H3, are you Person 3?

Yes

No – enter the details for Person 3 in this section

1 What is your name? (Person 3 in question H3)

First name

Middle name(s)

Last name

2 What is your date of birth?

Day Month Year

3 What is your sex?

⌚ A question about gender identity will follow if you are aged 16 or over

Female

Male

4 On 21 March 2021, what is your legal marital or registered civil partnership status?

Never married and never registered a civil partnership → **GO TO 6**

Married

In a registered civil partnership

Separated, but still legally married

Separated, but still legally in a civil partnership

Divorced

Formerly in a civil partnership which is now legally dissolved

Widowed

Surviving partner from a registered civil partnership

5 Who is (was) your legal marriage or registered civil partnership to?

Someone of the opposite sex

Someone of the same sex

6 Do you stay at another address for more than 30 days a year?

⌚ These days could be in a row or separate

No → **GO TO 8**

Yes, write in other UK address below

Postcode

OR yes, outside the UK, write in country

7 What is that address?

Armed forces base address

Another address when working away from home

Student's home address

Student's term-time address

Another parent or guardian's address

Partner's address

Holiday home

Other

8 Are you a schoolchild or student in full-time education?

Yes No → **GO TO 10**

9 During term time, where do you usually live?

At the address on the front of this questionnaire

At the address in question 6 → **GO TO 51**

At another address → **GO TO 51**

10 What is your country of birth?

Wales → **GO TO 13**

England → **GO TO 13**

Scotland → **GO TO 13**

Northern Ireland → **GO TO 13**

Republic of Ireland

Elsewhere, write in current name of the country



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Individual questions – Person 3 continued

11 If you were not born in the United Kingdom, when did you most recently arrive to live here?
 Do not count short visits away from the UK

Month Year

If you arrived before 21 March 2020 → **GO TO 13**

If you arrived on or after 21 March 2020 → **GO TO 12**

12 Including the time you have already spent here, how long do you intend to stay in the United Kingdom?

- Less than 12 months
- 12 months or more

13 One year ago, what was your usual address?

If you had no usual address one year ago, state the address where you were staying

- Same as Person 1
- The address on the front of this questionnaire
- Student term-time or boarding school address in the UK, write in term-time address below
- Another address in the UK, write in below

Postcode

OR outside the UK, write in country

14 How would you describe your national identity?

Tick all that apply

- Welsh
- English
- Scottish
- Northern Irish
- British
- Other, write in

15 What is your ethnic group?

Choose **one** section from A to E, then tick **one** box to best describe your ethnic group or background

A White

- Welsh, English, Scottish, Northern Irish or British
- Irish
- Gypsy or Irish Traveller
- Roma
- Any other White background, write in

B Mixed or Multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed or Multiple background, write in

C Asian, Asian Welsh or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background, write in

D Black, Black Welsh, Black British, Caribbean or African

- Caribbean
- African background, write in below
- Any other Black, Black British or Caribbean background, write in

E Other ethnic group

- Arab
- Any other ethnic group, write in



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Individual questions – Person 3 continued

16 What is your religion?

↻ This question is **voluntary**

- No religion
- Christian (all denominations)
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion, write in

17 Can you understand, speak, read or write Welsh?

↻ Tick all that apply

- Understand spoken Welsh
- Speak Welsh
- Read Welsh
- Write Welsh
- OR** none of the above

18 What is your main language?

- English or Welsh → **GO TO 20**
- Other, write in (including British Sign Language)

19 How well can you speak English?

- | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Very well | Well | Not well | Not at all |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

20 What passports do you hold?

↻ Tick all that apply

- United Kingdom
- Ireland
- Other, write in

OR none

21 How is your health in general?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Very good | Good | Fair | Bad | Very bad |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

22 Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?

- Yes
- No → **GO TO 24**

23 Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?

- Yes, a lot
- Yes, a little
- Not at all

24 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?

↻ Exclude anything you do as part of your paid employment

- No
- Yes, 9 hours a week or less
- Yes, 10 to 19 hours a week
- Yes, 20 to 34 hours a week
- Yes, 35 to 49 hours a week
- Yes, 50 or more hours a week

25 If you are aged 16 or over → **GO TO 26**
If you are aged 15 or under → **GO TO 51**

26 Which of the following best describes your sexual orientation?

↻ This question is **voluntary**

- Straight/Heterosexual
- Gay or Lesbian
- Bisexual
- Other sexual orientation, write in

27 Is the gender you identify with the same as your sex registered at birth?

↻ This question is **voluntary**

- Yes
- No, write in gender identity



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Individual questions – Person 3 continued

28 The next set of questions is about your qualifications.
 ☞ Record any qualifications you have ever achieved in Wales, England or worldwide, including equivalents, even if you are not using them now

29 Have you completed an apprenticeship?
 ☞ For example, trade, higher, foundation, modern

Yes No

30 Have you achieved a qualification at degree level or above?
 ☞ For example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing

Yes No

31 Have you achieved any other qualifications?

☞ Tick all that apply

GCSEs or equivalent

- 5 or more GCSEs (A*-C, 9-4), O levels (passes), CSEs (grade 1) or Intermediate Welsh Baccalaureate
- Any other GCSEs, O levels or CSEs (any grades), Basic Skills course or Foundation Welsh Baccalaureate

AS, A level or equivalent

- 2 or more A levels, 4 or more AS levels or Advanced Welsh Baccalaureate
- 1 A level, 2-3 AS levels
- 1 AS level

NVQ or equivalent

- NVQ level 3, BTEC National, OND or ONC, City and Guilds Advanced Craft
- NVQ level 2, BTEC General, City and Guilds Craft
- NVQ level 1

OR other or no qualifications

- Any other qualifications, equivalent unknown
- No qualifications

32 Have you **previously** served in the UK Armed Forces?

☞ Current serving members should only tick "no"

- Yes, previously served in **Regular** Armed Forces
- Yes, previously served in **Reserve** Armed Forces
- OR** no

33 In the last seven days, were you doing any of the following?

☞ Tick all that apply

☞ Include casual or temporary work, even if only for one hour

- Working as an employee → **GO TO 39**
- Self-employed or freelance → **GO TO 39**
- Temporarily away from work ill, on holiday or temporarily laid off → **GO TO 39**
- On maternity or paternity leave → **GO TO 39**
- Doing any other kind of paid work → **GO TO 39**
- OR** none of the above

34 Which of the following describes what you were doing in the last seven days?

☞ Tick all that apply

- Retired (whether receiving a pension or not)
- Studying
- Looking after home or family
- Long-term sick or disabled
- Other

35 In the last four weeks, were you actively looking for any kind of paid work?

- Yes
- No

36 If a job became available now, could you start it within two weeks?

- Yes
- No

37 In the last seven days, were you waiting to start a job already accepted?

- Yes
- No

38 Have you ever done any paid work?

- Yes, in the last 12 months
- Yes, but not in the last 12 months
- No, have never worked → **GO TO 51**

39 Answer the remaining questions for your main job or, if not working, your last main job.

☞ Your main job is the job in which you usually work (worked) the most hours



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Individual questions – Person 3 continued

40 In your main job, what is (was) your employment status?

- Employee
- Self-employed or freelance without employees
- Self-employed with employees

41 What is (was) the name of the organisation or business you work (worked) for?

➤ If you are (were) self-employed in your own business, write in your business name

OR no organisation or work (worked) for a private individual

42 What is (was) your full job title?

➤ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER

➤ Do not state your grade or pay band

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

44 What is (was) the main activity of your organisation, business or freelance work?

➤ For example, CLOTHING RETAIL, GENERAL HOSPITAL, PRIMARY EDUCATION, FOOD WHOLESALE

➤ If you are (were) a civil servant, write CIVIL SERVICE

➤ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority

45 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?

- Yes
- No

46 If you had a job last week → GO TO 47

If you were temporarily away from work last week → GO TO 47

If you did not have a job last week → GO TO 51

47 In your main job, how many hours a week do you usually work?

➤ Include paid and unpaid overtime

0 to 15 16 to 30 31 to 48 49 or more

-
-
-
-

48 How do you usually travel to work?

➤ Tick one box only for the longest part, by distance, of your usual journey to work

- Work mainly at or from home
- Underground, metro, light rail, tram
- Train
- Bus, minibus or coach
- Taxi
- Motorcycle, scooter or moped
- Driving a car or van
- Passenger in a car or van
- Bicycle
- On foot
- Other

49 Where do you mainly work?

- At a workplace or report to a depot
- At or from home → GO TO 51
- An offshore installation → GO TO 51
- No fixed place → GO TO 51

50 What is the address of your workplace or depot?

Postcode

51 There are no more questions for Person 3.

→ GO TO questions for Person 4

OR if there are no more people in this household

→ GO TO the Visitor questions on the back page

OR if there are no visitors staying here overnight

→ GO TO the Declaration on the front page



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Individual questions – Person 4 start here

| | |
|---|--|
| <p>P Thinking about the people listed in question H3, are you Person 4?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No – enter the details for Person 4 in this section</p> <p>1 What is your name? (Person 4 in question H3)</p> <p>First name <input type="text"/></p> <p>Middle name(s) <input type="text"/></p> <p>Last name <input type="text"/></p> <p>2 What is your date of birth?</p> <p>Day Month Year <input type="text"/> <input type="text"/> <input type="text"/></p> <p>3 What is your sex?</p> <p><input type="checkbox"/> A question about gender identity will follow if you are aged 16 or over</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p> <p>4 On 21 March 2021, what is your legal marital or registered civil partnership status?</p> <p><input type="checkbox"/> Never married and never registered a civil partnership → GO TO 6</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> In a registered civil partnership</p> <p><input type="checkbox"/> Separated, but still legally married</p> <p><input type="checkbox"/> Separated, but still legally in a civil partnership</p> <p><input type="checkbox"/> Divorced</p> <p><input type="checkbox"/> Formerly in a civil partnership which is now legally dissolved</p> <p><input type="checkbox"/> Widowed</p> <p><input type="checkbox"/> Surviving partner from a registered civil partnership</p> <p>5 Who is (was) your legal marriage or registered civil partnership to?</p> <p><input type="checkbox"/> Someone of the opposite sex</p> <p><input type="checkbox"/> Someone of the same sex</p> | <p>6 Do you stay at another address for more than 30 days a year?</p> <p><input type="checkbox"/> These days could be in a row or separate</p> <p><input type="checkbox"/> No → GO TO 8</p> <p><input type="checkbox"/> Yes, write in other UK address below</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Postcode <input type="text"/></p> <p><input type="checkbox"/> OR yes, outside the UK, write in country</p> <p><input type="text"/></p> <p>7 What is that address?</p> <p><input type="checkbox"/> Armed forces base address</p> <p><input type="checkbox"/> Another address when working away from home</p> <p><input type="checkbox"/> Student's home address</p> <p><input type="checkbox"/> Student's term-time address</p> <p><input type="checkbox"/> Another parent or guardian's address</p> <p><input type="checkbox"/> Partner's address</p> <p><input type="checkbox"/> Holiday home</p> <p><input type="checkbox"/> Other</p> <p>8 Are you a schoolchild or student in full-time education?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No → GO TO 10</p> <p>9 During term time, where do you usually live?</p> <p><input type="checkbox"/> At the address on the front of this questionnaire</p> <p><input type="checkbox"/> At the address in question 6 → GO TO 51</p> <p><input type="checkbox"/> At another address → GO TO 51</p> <p>10 What is your country of birth?</p> <p><input type="checkbox"/> Wales → GO TO 13</p> <p><input type="checkbox"/> England → GO TO 13</p> <p><input type="checkbox"/> Scotland → GO TO 13</p> <p><input type="checkbox"/> Northern Ireland → GO TO 13</p> <p><input type="checkbox"/> Republic of Ireland</p> <p><input type="checkbox"/> Elsewhere, write in current name of the country</p> <p><input type="text"/></p> |
|---|--|



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Individual questions – Person 4 continued

11 If you were not born in the United Kingdom, when did you most recently arrive to live here?

Do not count short visits away from the UK

Month Year

If you arrived before 21 March 2020 → **GO TO 13**

If you arrived on or after 21 March 2020 → **GO TO 12**

12 Including the time you have already spent here, how long do you intend to stay in the United Kingdom?

- Less than 12 months
- 12 months or more

13 One year ago, what was your usual address?

If you had no usual address one year ago, state the address where you were staying

- Same as Person 1
- The address on the front of this questionnaire
- Student term-time or boarding school address in the UK, write in term-time address below
- Another address in the UK, write in below

 Postcode

- OR** outside the UK, write in country

14 How would you describe your national identity?

Tick all that apply

- Welsh
- English
- Scottish
- Northern Irish
- British
- Other, write in

15 What is your ethnic group?

Choose **one** section from A to E, then tick **one** box to best describe your ethnic group or background

A White

- Welsh, English, Scottish, Northern Irish or British
- Irish
- Gypsy or Irish Traveller
- Roma
- Any other White background, write in

B Mixed or Multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed or Multiple background, write in

C Asian, Asian Welsh or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background, write in

D Black, Black Welsh, Black British, Caribbean or African

- Caribbean
- African background, write in below
- Any other Black, Black British or Caribbean background, write in

E Other ethnic group

- Arab
- Any other ethnic group, write in



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Individual questions – Person 4 continued

16 What is your religion?

🔄 This question is **voluntary**

- No religion
- Christian (all denominations)
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion, write in

17 Can you understand, speak, read or write Welsh?

🔄 Tick all that apply

- Understand spoken Welsh
- Speak Welsh
- Read Welsh
- Write Welsh
- OR** none of the above

18 What is your main language?

- English or Welsh → **GO TO 20**
- Other, write in (including British Sign Language)

19 How well can you speak English?

- | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Very well | Well | Not well | Not at all |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

20 What passports do you hold?

🔄 Tick all that apply

- United Kingdom
- Ireland
- Other, write in

- OR** none

21 How is your health in general?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Very good | Good | Fair | Bad | Very bad |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

22 Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?

- Yes
- No → **GO TO 24**

23 Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?

- Yes, a lot
- Yes, a little
- Not at all

24 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?

🔄 Exclude anything you do as part of your paid employment

- No
- Yes, 9 hours a week or less
- Yes, 10 to 19 hours a week
- Yes, 20 to 34 hours a week
- Yes, 35 to 49 hours a week
- Yes, 50 or more hours a week

25 If you are aged 16 or over → **GO TO 26**
If you are aged 15 or under → **GO TO 51**

26 Which of the following best describes your sexual orientation?

🔄 This question is **voluntary**

- Straight/Heterosexual
- Gay or Lesbian
- Bisexual
- Other sexual orientation, write in

27 Is the gender you identify with the same as your sex registered at birth?

🔄 This question is **voluntary**

- Yes
- No, write in gender identity



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Individual questions – Person 4 continued

28 The next set of questions is about your qualifications.

- Record any qualifications you have ever achieved in Wales, England or worldwide, including equivalents, even if you are not using them now

29 Have you completed an apprenticeship?

- For example, trade, higher, foundation, modern

Yes No

30 Have you achieved a qualification at degree level or above?

- For example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing

Yes No

31 Have you achieved any other qualifications?

- Tick all that apply

GCSEs or equivalent

- 5 or more GCSEs (A*-C, 9-4), O levels (passes), CSEs (grade 1) or Intermediate Welsh Baccalaureate
- Any other GCSEs, O levels or CSEs (any grades), Basic Skills course or Foundation Welsh Baccalaureate

AS, A level or equivalent

- 2 or more A levels, 4 or more AS levels or Advanced Welsh Baccalaureate
- 1 A level, 2-3 AS levels
- 1 AS level

NVQ or equivalent

- NVQ level 3, BTEC National, OND or ONC, City and Guilds Advanced Craft
- NVQ level 2, BTEC General, City and Guilds Craft
- NVQ level 1

OR other or no qualifications

- Any other qualifications, equivalent unknown
- No qualifications

32 Have you **previously** served in the UK Armed Forces?

- Current serving members should only tick "no"

- Yes, previously served in **Regular** Armed Forces
- Yes, previously served in **Reserve** Armed Forces
- OR** no

33 In the last seven days, were you doing any of the following?

- Tick all that apply

- Include casual or temporary work, even if only for one hour

- Working as an employee → **GO TO 39**
- Self-employed or freelance → **GO TO 39**
- Temporarily away from work ill, on holiday or temporarily laid off → **GO TO 39**
- On maternity or paternity leave → **GO TO 39**
- Doing any other kind of paid work → **GO TO 39**
- OR** none of the above

34 Which of the following describes what you were doing in the last seven days?

- Tick all that apply

- Retired (whether receiving a pension or not)
- Studying
- Looking after home or family
- Long-term sick or disabled
- Other

35 In the last four weeks, were you actively looking for any kind of paid work?

- Yes
- No

36 If a job became available now, could you start it within two weeks?

- Yes
- No

37 In the last seven days, were you waiting to start a job already accepted?

- Yes
- No

38 Have you ever done any paid work?

- Yes, in the last 12 months
- Yes, but not in the last 12 months
- No, have never worked → **GO TO 51**

39 Answer the remaining questions for your main job or, if not working, your last main job.

- Your main job is the job in which you usually work (worked) the most hours



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Individual questions – Person 4 continued

| | |
|--|---|
| <p>40 In your main job, what is (was) your employment status?</p> <p><input type="checkbox"/> Employee</p> <p><input type="checkbox"/> Self-employed or freelance without employees</p> <p><input type="checkbox"/> Self-employed with employees</p> | <p>46 If you had a job last week → GO TO 47</p> <p>If you were temporarily away from work last week → GO TO 47</p> <p>If you did not have a job last week → GO TO 51</p> |
| <p>41 What is (was) the name of the organisation or business you work (worked) for?</p> <p>☞ If you are (were) self-employed in your own business, write in your business name</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> OR no organisation or work (worked) for a private individual</p> | <p>47 In your main job, how many hours a week do you usually work?</p> <p>☞ Include paid and unpaid overtime</p> <p>0 to 15 16 to 30 31 to 48 49 or more</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> |
| <p>42 What is (was) your full job title?</p> <p>☞ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER</p> <p>☞ Do not state your grade or pay band</p> <p>_____</p> <p>_____</p> | <p>48 How do you usually travel to work?</p> <p>☞ Tick one box only for the longest part, by distance, of your usual journey to work</p> <p><input type="checkbox"/> Work mainly at or from home</p> <p><input type="checkbox"/> Underground, metro, light rail, tram</p> <p><input type="checkbox"/> Train</p> <p><input type="checkbox"/> Bus, minibus or coach</p> <p><input type="checkbox"/> Taxi</p> <p><input type="checkbox"/> Motorcycle, scooter or moped</p> <p><input type="checkbox"/> Driving a car or van</p> <p><input type="checkbox"/> Passenger in a car or van</p> <p><input type="checkbox"/> Bicycle</p> <p><input type="checkbox"/> On foot</p> <p><input type="checkbox"/> Other</p> |
| <p>43 Briefly describe what you do (did) in your main job.</p> <p>_____</p> <p>_____</p> | <p>49 Where do you mainly work?</p> <p><input type="checkbox"/> At a workplace or report to a depot</p> <p><input type="checkbox"/> At or from home → GO TO 51</p> <p><input type="checkbox"/> An offshore installation → GO TO 51</p> <p><input type="checkbox"/> No fixed place → GO TO 51</p> |
| <p>44 What is (was) the main activity of your organisation, business or freelance work?</p> <p>☞ For example, CLOTHING RETAIL, GENERAL HOSPITAL, PRIMARY EDUCATION, FOOD WHOLESALE</p> <p>☞ If you are (were) a civil servant, write CIVIL SERVICE</p> <p>☞ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority</p> <p>_____</p> <p>_____</p> <p>_____</p> | <p>50 What is the address of your workplace or depot?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;">Postcode</p> <p>_____</p> |
| <p>45 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>51 There are no more questions for Person 4.</p> <p>→ GO TO questions for Person 5</p> <p>OR if there are no more people in this household</p> <p>→ GO TO the Visitor questions on the back page</p> <p>OR if there are no visitors staying here overnight</p> <p>→ GO TO the Declaration on the front page</p> |



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Individual questions – Person 5 start here

P Thinking about the people listed in question H3, are you Person 5?

Yes

No – enter the details for Person 5 in this section

1 What is your name? (Person 5 in question H3)

First name

Middle name(s)

Last name

2 What is your date of birth?

Day Month Year

3 What is your sex?

A question about gender identity will follow if you are aged 16 or over

Female

Male

4 On 21 March 2021, what is your legal marital or registered civil partnership status?

Never married and never registered a civil partnership → **GO TO 6**

Married

In a registered civil partnership

Separated, but still legally married

Separated, but still legally in a civil partnership

Divorced

Formerly in a civil partnership which is now legally dissolved

Widowed

Surviving partner from a registered civil partnership

5 Who is (was) your legal marriage or registered civil partnership to?

Someone of the opposite sex

Someone of the same sex

6 Do you stay at another address for more than 30 days a year?

These days could be in a row or separate

No → **GO TO 8**

Yes, write in other UK address below

Postcode

OR yes, outside the UK, write in country

7 What is that address?

Armed forces base address

Another address when working away from home

Student's home address

Student's term-time address

Another parent or guardian's address

Partner's address

Holiday home

Other

8 Are you a schoolchild or student in full-time education?

Yes No → **GO TO 10**

9 During term time, where do you usually live?

At the address on the front of this questionnaire

At the address in question 6 → **GO TO 51**

At another address → **GO TO 51**

10 What is your country of birth?

Wales → **GO TO 13**

England → **GO TO 13**

Scotland → **GO TO 13**

Northern Ireland → **GO TO 13**

Republic of Ireland

Elsewhere, write in current name of the country



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Individual questions – Person 5 continued

11 If you were not born in the United Kingdom, when did you most recently arrive to live here?
 Do not count short visits away from the UK

Month Year

If you arrived before 21 March 2020 → **GO TO 13**

If you arrived on or after 21 March 2020 → **GO TO 12**

12 Including the time you have already spent here, how long do you intend to stay in the United Kingdom?

- Less than 12 months
- 12 months or more

13 One year ago, what was your usual address?

If you had no usual address one year ago, state the address where you were staying

- Same as Person 1
- The address on the front of this questionnaire
- Student term-time or boarding school address in the UK, write in term-time address below
- Another address in the UK, write in below

Postcode

OR outside the UK, write in country

14 How would you describe your national identity?

Tick all that apply

- Welsh
- English
- Scottish
- Northern Irish
- British
- Other, write in

15 What is your ethnic group?

Choose **one** section from A to E, then tick **one** box to best describe your ethnic group or background

A White

- Welsh, English, Scottish, Northern Irish or British
- Irish
- Gypsy or Irish Traveller
- Roma
- Any other White background, write in

B Mixed or Multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed or Multiple background, write in

C Asian, Asian Welsh or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background, write in

D Black, Black Welsh, Black British, Caribbean or African

- Caribbean
- African background, write in below
- Any other Black, Black British or Caribbean background, write in

E Other ethnic group

- Arab
- Any other ethnic group, write in



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Individual questions – Person 5 continued

| | |
|---|--|
| <p>16 What is your religion?</p> <p>☞ This question is voluntary</p> <p><input type="checkbox"/> No religion</p> <p><input type="checkbox"/> Christian (all denominations)</p> <p><input type="checkbox"/> Buddhist</p> <p><input type="checkbox"/> Hindu</p> <p><input type="checkbox"/> Jewish</p> <p><input type="checkbox"/> Muslim</p> <p><input type="checkbox"/> Sikh</p> <p><input type="checkbox"/> Any other religion, write in</p> <p>_____</p> | <p>22 Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No → GO TO 24</p> |
| <p>17 Can you understand, speak, read or write Welsh?</p> <p>☞ Tick all that apply</p> <p><input type="checkbox"/> Understand spoken Welsh</p> <p><input type="checkbox"/> Speak Welsh</p> <p><input type="checkbox"/> Read Welsh</p> <p><input type="checkbox"/> Write Welsh</p> <p><input type="checkbox"/> OR none of the above</p> | <p>23 Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?</p> <p><input type="checkbox"/> Yes, a lot</p> <p><input type="checkbox"/> Yes, a little</p> <p><input type="checkbox"/> Not at all</p> |
| <p>18 What is your main language?</p> <p><input type="checkbox"/> English or Welsh → GO TO 20</p> <p><input type="checkbox"/> Other, write in (including British Sign Language)</p> <p>_____</p> | <p>24 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?</p> <p>☞ Exclude anything you do as part of your paid employment</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, 9 hours a week or less</p> <p><input type="checkbox"/> Yes, 10 to 19 hours a week</p> <p><input type="checkbox"/> Yes, 20 to 34 hours a week</p> <p><input type="checkbox"/> Yes, 35 to 49 hours a week</p> <p><input type="checkbox"/> Yes, 50 or more hours a week</p> |
| <p>19 How well can you speak English?</p> <p>Very well Well Not well Not at all</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> | <p>25 If you are aged 16 or over → GO TO 26</p> <p>If you are aged 15 or under → GO TO 51</p> |
| <p>20 What passports do you hold?</p> <p>☞ Tick all that apply</p> <p><input type="checkbox"/> United Kingdom</p> <p><input type="checkbox"/> Ireland</p> <p><input type="checkbox"/> Other, write in</p> <p>_____</p> <p><input type="checkbox"/> OR none</p> | <p>26 Which of the following best describes your sexual orientation?</p> <p>☞ This question is voluntary</p> <p><input type="checkbox"/> Straight/Heterosexual</p> <p><input type="checkbox"/> Gay or Lesbian</p> <p><input type="checkbox"/> Bisexual</p> <p><input type="checkbox"/> Other sexual orientation, write in</p> <p>_____</p> |
| <p>21 How is your health in general?</p> <p>Very good Good Fair Bad Very bad</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> | <p>27 Is the gender you identify with the same as your sex registered at birth?</p> <p>☞ This question is voluntary</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No, write in gender identity</p> <p>_____</p> |



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Individual questions – Person 5 continued

28 The next set of questions is about your qualifications.

➤ Record any qualifications you have ever achieved in Wales, England or worldwide, including equivalents, even if you are not using them now

29 Have you completed an apprenticeship?

➤ For example, trade, higher, foundation, modern

Yes No

30 Have you achieved a qualification at degree level or above?

➤ For example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing

Yes No

31 Have you achieved any other qualifications?

➤ Tick all that apply

GCSEs or equivalent

- 5 or more GCSEs (A*-C, 9-4), O levels (passes), CSEs (grade 1) or Intermediate Welsh Baccalaureate
- Any other GCSEs, O levels or CSEs (any grades), Basic Skills course or Foundation Welsh Baccalaureate

AS, A level or equivalent

- 2 or more A levels, 4 or more AS levels or Advanced Welsh Baccalaureate
- 1 A level, 2-3 AS levels
- 1 AS level

NVQ or equivalent

- NVQ level 3, BTEC National, OND or ONC, City and Guilds Advanced Craft
- NVQ level 2, BTEC General, City and Guilds Craft
- NVQ level 1

OR other or no qualifications

- Any other qualifications, equivalent unknown
- No qualifications

32 Have you **previously** served in the UK Armed Forces?

➤ Current serving members should only tick "no"

- Yes, previously served in **Regular** Armed Forces
- Yes, previously served in **Reserve** Armed Forces
- OR** no

33 In the last seven days, were you doing any of the following?

➤ Tick all that apply

➤ Include casual or temporary work, even if only for one hour

- Working as an employee ➔ **GO TO 39**
- Self-employed or freelance ➔ **GO TO 39**
- Temporarily away from work ill, on holiday or temporarily laid off ➔ **GO TO 39**
- On maternity or paternity leave ➔ **GO TO 39**
- Doing any other kind of paid work ➔ **GO TO 39**
- OR** none of the above

34 Which of the following describes what you were doing in the last seven days?

➤ Tick all that apply

- Retired (whether receiving a pension or not)
- Studying
- Looking after home or family
- Long-term sick or disabled
- Other

35 In the last four weeks, were you actively looking for any kind of paid work?

- Yes
- No

36 If a job became available now, could you start it within two weeks?

- Yes
- No

37 In the last seven days, were you waiting to start a job already accepted?

- Yes
- No

38 Have you ever done any paid work?

- Yes, in the last 12 months
- Yes, but not in the last 12 months
- No, have never worked ➔ **GO TO 51**

39 Answer the remaining questions for your main job or, if not working, your last main job.

➤ Your main job is the job in which you usually work (worked) the most hours



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Individual questions – Person 5 continued

40 In your main job, what is (was) your employment status?

- Employee
- Self-employed or freelance without employees
- Self-employed with employees

41 What is (was) the name of the organisation or business you work (worked) for?

- If you are (were) self-employed in your own business, write in your business name

- OR** no organisation or work (worked) for a private individual

42 What is (was) your full job title?

- For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER

- Do not state your grade or pay band

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

44 What is (was) the main activity of your organisation, business or freelance work?

- For example, CLOTHING RETAIL, GENERAL HOSPITAL, PRIMARY EDUCATION, FOOD WHOLESALE

- If you are (were) a civil servant, write CIVIL SERVICE

- If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority

45 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?

- Yes
- No

46 If you had a job last week → **GO TO 47**

If you were temporarily away from work last week → **GO TO 47**

If you did not have a job last week → **GO TO 51**

47 In your main job, how many hours a week do you usually work?

- Include paid and unpaid overtime

0 to 15 16 to 30 31 to 48 49 or more

-

48 How do you usually travel to work?

- Tick one box only for the longest part, **by distance**, of your usual journey to work

- Work mainly at or from home
- Underground, metro, light rail, tram
- Train
- Bus, minibus or coach
- Taxi
- Motorcycle, scooter or moped
- Driving a car or van
- Passenger in a car or van
- Bicycle
- On foot
- Other

49 Where do you mainly work?

- At a workplace or report to a depot
- At or from home → **GO TO 51**
- An offshore installation → **GO TO 51**
- No fixed place → **GO TO 51**

50 What is the address of your workplace or depot?

Postcode

51 There are no more questions for Person 5.

If there are more people in your household, you will need to request a Continuation Questionnaire.

→ **GO TO** the **Visitor questions** on the back page

OR if there are no visitors staying here overnight

→ **GO TO** the **Declaration** on the front page



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PART 5

Household Continuation Questionnaire (paper)



census
2021

**Household Continuation
Questionnaire**
Wales

| | |
|--|---|
| <p>FREEPOST Census 2021</p> | <p>If your address is incorrect or missing, enter your correct address below:</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/> <small>Postcode</small> <input type="text"/></p> |
| <p>Use this Continuation Questionnaire if there are more than five people in your household, and / or you have more than three visitors overnight on 21 March 2021.</p> <p>Answer the questions for everyone not included on your Household Questionnaire.</p> <p>If there are more than 10 people in your household, or if you have more than nine visitors, you will need an extra Continuation Questionnaire.</p> <p>All households should complete the census on 21 March 2021 or as soon as possible after.</p> <p>Thank you for taking part.</p>  <p>Professor Sir Ian Diamond National Statistician</p> | <p>Declaration</p> <p>This questionnaire has been completed to the best of my knowledge and belief.</p> <p>Signature <input type="text"/> Date <input type="text"/></p> |
| <p>Your information is protected by law. Find out more in the leaflet that comes with this questionnaire.</p> | <p>If you have lost your envelope, please return your completed questionnaire to: FREEPOST Census 2021</p> <p>Where you can get help: www.census.gov.uk/help Contact Centre 0800 169 2021 NGT (18001) 0800 169 2021 Language helpline 0800 587 2021</p> |

Office for
National Statistics

HC2



112001

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Before you start

The householder is responsible for ensuring that this questionnaire is completed and returned.

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

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

A **household** is:

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

What should I complete on this questionnaire?

If there are more than 5 people in this household:

- complete the relationship question on pages 4 and 5 of this questionnaire
- answer the remaining questions for every member of this household not included on your first Household Questionnaire

If there are more than 3 visitors in this household:

- complete the Visitor questions on pages 31 and 32 of this questionnaire
- include every visitor staying overnight on 21 March 2021 not included on your first Household Questionnaire

Will I need extra questionnaires?

If there are more than 10 people in this household:

- you will need another Continuation Questionnaire

If there are more than 9 visitors in this household:

- you will need another Continuation Questionnaire

How should I complete my questionnaire correctly?

You should:

- use black or blue ink to answer
- tick your answers within the box, like this:
- print in capital letters within the boxes, one letter per box, like this:

| | | | | | | |
|---|---|---|---|---|--|--|
| D | A | F | Y | D | | |
|---|---|---|---|---|--|--|
- correct any mistakes by filling in the box, like this:

| | | | | | | | |
|---|---|---|---|---|---|--|--|
| J | O | ■ | N | E | S | | |
|---|---|---|---|---|---|--|--|

 or this:

| | | | | | | |
|---|---|---|---|---|--|--|
| J | O | N | E | S | | |
|---|---|---|---|---|--|--|
- continue onto the next line (if possible) when a word will not fit, like this:

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| P | A | D | D | I | N | G | T | O |
| N | | S | T | R | E | E | T | |
- follow the → **GO TO** instructions and leave any questions or pages you do not need to answer completely blank; any marks or lines can be mistaken for answers



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Household questions

- C1** How are members of this household related to each other? If members are not related, tick the "Unrelated" box.
- Write the name of each person who was not included in your first Household Questionnaire at the top of each column. Remember to include children and babies
 - Tick a box to show the relationship of each person to each of the other members of this household you have listed

Example:

This shows how 3 more children who were not included in your first Household Questionnaire are related to each other **AND** to Person 1 from the first questionnaire.

DO NOT write in this section ➔

Provide details of members of the household in the section BELOW ↓

| Name of Person 6 | | Name of Person 7 | |
|---|-------------------------------------|---|-------------------------------------|
| First name | <input type="text" value="SARA"/> | First name | <input type="text" value="GETHIN"/> |
| Last name | <input type="text" value="JONES"/> | Last name | <input type="text" value="JONES"/> |
| How is Person 6 related to Person: | 1 | How is Person 7 related to Person: | 1 6 |
| Husband or wife | <input type="checkbox"/> | Husband or wife | <input type="checkbox"/> |
| Legally registered civil partner | <input type="checkbox"/> | Legally registered civil partner | <input type="checkbox"/> |
| Partner | <input type="checkbox"/> | Partner | <input type="checkbox"/> |
| Son or daughter | <input checked="" type="checkbox"/> | Son or daughter | <input checked="" type="checkbox"/> |
| Stepchild | <input type="checkbox"/> | Stepchild | <input type="checkbox"/> |
| Brother or sister (including half-brother or half-sister) | <input type="checkbox"/> | Brother or sister (including half-brother or half-sister) | <input checked="" type="checkbox"/> |

Name of Person 1

From H3 on your first Household Questionnaire

| | | | |
|------------|----------------------|-----------|----------------------|
| First name | <input type="text"/> | Last name | <input type="text"/> |
|------------|----------------------|-----------|----------------------|

| Name of Person 6 | | Name of Person 7 | | Name of Person 8 | |
|---|--------------------------|---|--------------------------|---|--------------------------|
| First name | <input type="text"/> | First name | <input type="text"/> | First name | <input type="text"/> |
| Last name | <input type="text"/> | Last name | <input type="text"/> | Last name | <input type="text"/> |
| How is Person 6 related to Person: | 1 | How is Person 7 related to Person: | 1 6 | How is Person 8 related to Person: | 1 6 7 |
| Husband or wife | <input type="checkbox"/> | Husband or wife | <input type="checkbox"/> | Husband or wife | <input type="checkbox"/> |
| Legally registered civil partner | <input type="checkbox"/> | Legally registered civil partner | <input type="checkbox"/> | Legally registered civil partner | <input type="checkbox"/> |
| Partner | <input type="checkbox"/> | Partner | <input type="checkbox"/> | Partner | <input type="checkbox"/> |
| Son or daughter | <input type="checkbox"/> | Son or daughter | <input type="checkbox"/> | Son or daughter | <input type="checkbox"/> |
| Stepchild | <input type="checkbox"/> | Stepchild | <input type="checkbox"/> | Stepchild | <input type="checkbox"/> |
| Brother or sister (including half-brother or half-sister) | <input type="checkbox"/> | Brother or sister (including half-brother or half-sister) | <input type="checkbox"/> | Brother or sister (including half-brother or half-sister) | <input type="checkbox"/> |
| Stepbrother or stepsister | <input type="checkbox"/> | Stepbrother or stepsister | <input type="checkbox"/> | Stepbrother or stepsister | <input type="checkbox"/> |
| Mother or father | <input type="checkbox"/> | Mother or father | <input type="checkbox"/> | Mother or father | <input type="checkbox"/> |
| Stepmother or stepfather | <input type="checkbox"/> | Stepmother or stepfather | <input type="checkbox"/> | Stepmother or stepfather | <input type="checkbox"/> |
| Grandchild | <input type="checkbox"/> | Grandchild | <input type="checkbox"/> | Grandchild | <input type="checkbox"/> |
| Grandparent | <input type="checkbox"/> | Grandparent | <input type="checkbox"/> | Grandparent | <input type="checkbox"/> |
| Relation – other | <input type="checkbox"/> | Relation – other | <input type="checkbox"/> | Relation – other | <input type="checkbox"/> |
| Unrelated (including foster child) | <input type="checkbox"/> | Unrelated (including foster child) | <input type="checkbox"/> | Unrelated (including foster child) | <input type="checkbox"/> |



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| Name of Person 8 | |
|---|--|
| First name | CATRIN |
| Last name | JONES |
| How is Person 8 related to Person: | 1 6 7 |
| Husband or wife | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Legally registered civil partner | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Partner | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Son or daughter | <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Stepchild | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Brother or sister (including half-brother or half-sister) | <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> |

| Name of Person 9 | | Name of Person 10 | |
|---|---|---|--|
| First name | | First name | |
| Last name | | Last name | |
| How is Person 9 related to Person: | 1 6 7 8 | How is Person 10 related to Person: | 1 6 7 8 9 |
| Husband or wife | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Husband or wife | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Legally registered civil partner | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Legally registered civil partner | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Partner | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Partner | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Son or daughter | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Son or daughter | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Stepchild | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Stepchild | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Brother or sister (including half-brother or half-sister) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Brother or sister (including half-brother or half-sister) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Stepbrother or stepsister | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Stepbrother or stepsister | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Mother or father | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Mother or father | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Stepmother or stepfather | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Stepmother or stepfather | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Grandchild | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Grandchild | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Grandparent | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Grandparent | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Relation – other | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Relation – other | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Unrelated (including foster child) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Unrelated (including foster child) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |



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Individual questions – Person 6 start here

P Thinking about the people listed in question C1, are you Person 6?

Yes

No – enter the details for Person 6 in this section

1 What is your name? (Person 6 in question C1)

First name

Middle name(s)

Last name

2 What is your date of birth?

Day Month Year

3 What is your sex?

A question about gender identity will follow if you are aged 16 or over

Female

Male

4 On 21 March 2021, what is your legal marital or registered civil partnership status?

Never married and never registered a civil partnership → **GO TO 6**

Married

In a registered civil partnership

Separated, but still legally married

Separated, but still legally in a civil partnership

Divorced

Formerly in a civil partnership which is now legally dissolved

Widowed

Surviving partner from a registered civil partnership

5 Who is (was) your legal marriage or registered civil partnership to?

Someone of the opposite sex

Someone of the same sex

6 Do you stay at another address for more than 30 days a year?

These days could be in a row or separate

No → **GO TO 8**

Yes, write in other UK address below

Postcode

OR yes, outside the UK, write in country

7 What is that address?

Armed forces base address

Another address when working away from home

Student's home address

Student's term-time address

Another parent or guardian's address

Partner's address

Holiday home

Other

8 Are you a schoolchild or student in full-time education?

Yes No → **GO TO 10**

9 During term time, where do you usually live?

At the address on the front of this questionnaire

At the address in question 6 → **GO TO 51**

At another address → **GO TO 51**

10 What is your country of birth?

Wales → **GO TO 13**

England → **GO TO 13**

Scotland → **GO TO 13**

Northern Ireland → **GO TO 13**

Republic of Ireland

Elsewhere, write in current name of the country



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Individual questions – Person 6 continued

11 If you were not born in the United Kingdom, when did you most recently arrive to live here?

Do not count short visits away from the UK

Month Year

If you arrived before 21 March 2020 → GO TO 13

If you arrived on or after 21 March 2020 → GO TO 12

12 Including the time you have already spent here, how long do you intend to stay in the United Kingdom?

- Less than 12 months
- 12 months or more

13 One year ago, what was your usual address?

If you had no usual address one year ago, state the address where you were staying

- Same as Person 1
- The address on the front of this questionnaire
- Student term-time or boarding school address in the UK, write in term-time address below
- Another address in the UK, write in below

Postcode

- OR outside the UK, write in country

14 How would you describe your national identity?

Tick all that apply

- Welsh
- English
- Scottish
- Northern Irish
- British
- Other, write in

15 What is your ethnic group?

Choose one section from A to E, then tick one box to best describe your ethnic group or background

A White

- Welsh, English, Scottish, Northern Irish or British
- Irish
- Gypsy or Irish Traveller
- Roma
- Any other White background, write in

B Mixed or Multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed or Multiple background, write in

C Asian, Asian Welsh or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background, write in

D Black, Black Welsh, Black British, Caribbean or African

- Caribbean
- African background, write in below
- Any other Black, Black British or Caribbean background, write in

E Other ethnic group

- Arab
- Any other ethnic group, write in



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Individual questions – Person 6 continued

| | |
|--|--|
| <p>16 What is your religion?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> No religion</p> <p><input type="checkbox"/> Christian (all denominations)</p> <p><input type="checkbox"/> Buddhist</p> <p><input type="checkbox"/> Hindu</p> <p><input type="checkbox"/> Jewish</p> <p><input type="checkbox"/> Muslim</p> <p><input type="checkbox"/> Sikh</p> <p><input type="checkbox"/> Any other religion, write in</p> <p><input type="text"/></p> | <p>22 Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No → GO TO 24</p> |
| <p>17 Can you understand, speak, read or write Welsh?</p> <p>🔄 Tick all that apply</p> <p><input type="checkbox"/> Understand spoken Welsh</p> <p><input type="checkbox"/> Speak Welsh</p> <p><input type="checkbox"/> Read Welsh</p> <p><input type="checkbox"/> Write Welsh</p> <p><input type="checkbox"/> OR none of the above</p> | <p>23 Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?</p> <p><input type="checkbox"/> Yes, a lot</p> <p><input type="checkbox"/> Yes, a little</p> <p><input type="checkbox"/> Not at all</p> |
| <p>18 What is your main language?</p> <p><input type="checkbox"/> English or Welsh → GO TO 20</p> <p><input type="checkbox"/> Other, write in (including British Sign Language)</p> <p><input type="text"/></p> | <p>24 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?</p> <p>🔄 Exclude anything you do as part of your paid employment</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, 9 hours a week or less</p> <p><input type="checkbox"/> Yes, 10 to 19 hours a week</p> <p><input type="checkbox"/> Yes, 20 to 34 hours a week</p> <p><input type="checkbox"/> Yes, 35 to 49 hours a week</p> <p><input type="checkbox"/> Yes, 50 or more hours a week</p> |
| <p>19 How well can you speak English?</p> <p>Very well Well Not well Not at all</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> | <p>25 If you are aged 16 or over → GO TO 26</p> <p>If you are aged 15 or under → GO TO 51</p> |
| <p>20 What passports do you hold?</p> <p>🔄 Tick all that apply</p> <p><input type="checkbox"/> United Kingdom</p> <p><input type="checkbox"/> Ireland</p> <p><input type="checkbox"/> Other, write in</p> <p><input type="text"/></p> <p><input type="checkbox"/> OR none</p> | <p>26 Which of the following best describes your sexual orientation?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> Straight/Heterosexual</p> <p><input type="checkbox"/> Gay or Lesbian</p> <p><input type="checkbox"/> Bisexual</p> <p><input type="checkbox"/> Other sexual orientation, write in</p> <p><input type="text"/></p> |
| <p>21 How is your health in general?</p> <p>Very good Good Fair Bad Very bad</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> | <p>27 Is the gender you identify with the same as your sex registered at birth?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No, write in gender identity</p> <p><input type="text"/></p> |



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Individual questions – Person 6 continued

28 The next set of questions is about your qualifications.

- Record any qualifications you have ever achieved in Wales, England or worldwide, including equivalents, even if you are not using them now

29 Have you completed an apprenticeship?

- For example, trade, higher, foundation, modern

Yes No

30 Have you achieved a qualification at degree level or above?

- For example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing

Yes No

31 Have you achieved any other qualifications?

- Tick all that apply

GCSEs or equivalent

- 5 or more GCSEs (A*-C, 9-4), O levels (passes), CSEs (grade 1) or Intermediate Welsh Baccalaureate
- Any other GCSEs, O levels or CSEs (any grades), Basic Skills course or Foundation Welsh Baccalaureate

AS, A level or equivalent

- 2 or more A levels, 4 or more AS levels or Advanced Welsh Baccalaureate
- 1 A level, 2-3 AS levels
- 1 AS level

NVQ or equivalent

- NVQ level 3, BTEC National, OND or ONC, City and Guilds Advanced Craft
- NVQ level 2, BTEC General, City and Guilds Craft
- NVQ level 1

OR other or no qualifications

- Any other qualifications, equivalent unknown
- No qualifications

32 Have you **previously** served in the UK Armed Forces?

- Current serving members should only tick "no"

- Yes, previously served in **Regular** Armed Forces
- Yes, previously served in **Reserve** Armed Forces
- OR** no

33 In the last seven days, were you doing any of the following?

- Tick all that apply

- Include casual or temporary work, even if only for one hour

- Working as an employee → **GO TO 39**
- Self-employed or freelance → **GO TO 39**
- Temporarily away from work ill, on holiday or temporarily laid off → **GO TO 39**
- On maternity or paternity leave → **GO TO 39**
- Doing any other kind of paid work → **GO TO 39**
- OR** none of the above

34 Which of the following describes what you were doing in the last seven days?

- Tick all that apply

- Retired (whether receiving a pension or not)
- Studying
- Looking after home or family
- Long-term sick or disabled
- Other

35 In the last four weeks, were you actively looking for any kind of paid work?

- Yes
- No

36 If a job became available now, could you start it within two weeks?

- Yes
- No

37 In the last seven days, were you waiting to start a job already accepted?

- Yes
- No

38 Have you ever done any paid work?

- Yes, in the last 12 months
- Yes, but not in the last 12 months
- No, have never worked → **GO TO 51**

39 Answer the remaining questions for your main job or, if not working, your last main job.

- Your main job is the job in which you usually work (worked) the most hours



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Individual questions – Person 6 continued

40 In your main job, what is (was) your employment status?

Employee

Self-employed or freelance without employees

Self-employed with employees

41 What is (was) the name of the organisation or business you work (worked) for?

If you are (were) self-employed in your own business, write in your business name

OR no organisation or work (worked) for a private individual

42 What is (was) your full job title?

For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER

Do not state your grade or pay band

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

44 What is (was) the main activity of your organisation, business or freelance work?

For example, CLOTHING RETAIL, GENERAL HOSPITAL, PRIMARY EDUCATION, FOOD WHOLESALE

If you are (were) a civil servant, write CIVIL SERVICE

If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority

45 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?

Yes No

46 If you had a job last week → **GO TO 47**

If you were temporarily away from work last week → **GO TO 47**

If you did not have a job last week → **GO TO 51**

47 In your main job, how many hours a week do you usually work?

Include paid and unpaid overtime

0 to 15 16 to 30 31 to 48 49 or more

48 How do you usually travel to work?

Tick one box only for the longest part, by distance, of your usual journey to work

Work mainly at or from home

Underground, metro, light rail, tram

Train

Bus, minibus or coach

Taxi

Motorcycle, scooter or moped

Driving a car or van

Passenger in a car or van

Bicycle

On foot

Other

49 Where do you mainly work?

At a workplace or report to a depot

At or from home → **GO TO 51**

An offshore installation → **GO TO 51**

No fixed place → **GO TO 51**

50 What is the address of your workplace or depot?

Postcode

51 There are no more questions for Person 6.

→ **GO TO** questions for Person 7

OR if there are no more people in this household

→ **GO TO** the Visitor questions on page 31

OR if there are no visitors staying here overnight

→ **GO TO** the Declaration on the front page



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Individual questions – Person 7 start here

P Thinking about the people listed in question C1, are you Person 7?

- Yes
- No – enter the details for Person 7 in this section

1 What is your name? (Person 7 in question C1)

First name

Middle name(s)

Last name

2 What is your date of birth?

Day Month Year

3 What is your sex?

⌚ A question about gender identity will follow if you are aged 16 or over

- Female
- Male

4 On 21 March 2021, what is your legal marital or registered civil partnership status?

- Never married and never registered a civil partnership → **GO TO 6**
- Married
- In a registered civil partnership
- Separated, but still legally married
- Separated, but still legally in a civil partnership
- Divorced
- Formerly in a civil partnership which is now legally dissolved
- Widowed
- Surviving partner from a registered civil partnership

5 Who is (was) your legal marriage or registered civil partnership to?

- Someone of the opposite sex
- Someone of the same sex

6 Do you stay at another address for more than 30 days a year?

⌚ These days could be in a row or separate

- No → **GO TO 8**
- Yes, write in other UK address below

Postcode

- OR** yes, outside the UK, write in country

7 What is that address?

- Armed forces base address
- Another address when working away from home
- Student's home address
- Student's term-time address
- Another parent or guardian's address
- Partner's address
- Holiday home
- Other

8 Are you a schoolchild or student in full-time education?

- Yes
- No → **GO TO 10**

9 During term time, where do you usually live?

- At the address on the front of this questionnaire
- At the address in question 6 → **GO TO 51**
- At another address → **GO TO 51**

10 What is your country of birth?

- Wales → **GO TO 13**
- England → **GO TO 13**
- Scotland → **GO TO 13**
- Northern Ireland → **GO TO 13**
- Republic of Ireland
- Elsewhere, write in current name of the country



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Individual questions – Person 7 continued

11 If you were not born in the United Kingdom, when did you most recently arrive to live here?
 Do not count short visits away from the UK

Month Year

If you arrived before 21 March 2020 → **GO TO 13**

If you arrived on or after 21 March 2020 → **GO TO 12**

12 Including the time you have already spent here, how long do you intend to stay in the United Kingdom?

- Less than 12 months
- 12 months or more

13 One year ago, what was your usual address?

If you had no usual address one year ago, state the address where you were staying

- Same as Person 1
- The address on the front of this questionnaire
- Student term-time or boarding school address in the UK, write in term-time address below
- Another address in the UK, write in below

 Postcode

OR outside the UK, write in country

14 How would you describe your national identity?

Tick all that apply

- Welsh
- English
- Scottish
- Northern Irish
- British
- Other, write in

15 What is your ethnic group?

Choose **one** section from A to E, then tick **one** box to best describe your ethnic group or background

A White

- Welsh, English, Scottish, Northern Irish or British
- Irish
- Gypsy or Irish Traveller
- Roma
- Any other White background, write in

B Mixed or Multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed or Multiple background, write in

C Asian, Asian Welsh or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background, write in

D Black, Black Welsh, Black British, Caribbean or African

- Caribbean
- African background, write in below
- Any other Black, Black British or Caribbean background, write in

E Other ethnic group

- Arab
- Any other ethnic group, write in



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

Individual questions – Person 7 continued

16 What is your religion?

↻ This question is **voluntary**

- No religion
- Christian (all denominations)
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion, write in

17 Can you understand, speak, read or write Welsh?

↻ Tick all that apply

- Understand spoken Welsh
- Speak Welsh
- Read Welsh
- Write Welsh
- OR** none of the above

18 What is your main language?

- English or Welsh → **GO TO 20**
- Other, write in (including British Sign Language)

19 How well can you speak English?

- | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Very well | Well | Not well | Not at all |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

20 What passports do you hold?

↻ Tick all that apply

- United Kingdom
- Ireland
- Other, write in

OR none

21 How is your health in general?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Very good | Good | Fair | Bad | Very bad |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

22 Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?

- Yes
- No → **GO TO 24**

23 Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?

- Yes, a lot
- Yes, a little
- Not at all

24 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?

↻ Exclude anything you do as part of your paid employment

- No
- Yes, 9 hours a week or less
- Yes, 10 to 19 hours a week
- Yes, 20 to 34 hours a week
- Yes, 35 to 49 hours a week
- Yes, 50 or more hours a week

25 If you are aged 16 or over → **GO TO 26**
If you are aged 15 or under → **GO TO 51**

26 Which of the following best describes your sexual orientation?

↻ This question is **voluntary**

- Straight/Heterosexual
- Gay or Lesbian
- Bisexual
- Other sexual orientation, write in

27 Is the gender you identify with the same as your sex registered at birth?

↻ This question is **voluntary**

- Yes
- No, write in gender identity



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

Individual questions – Person 7 continued

28 The next set of questions is about your qualifications.

➤ Record any qualifications you have ever achieved in Wales, England or worldwide, including equivalents, even if you are not using them now

29 Have you completed an apprenticeship?

➤ For example, trade, higher, foundation, modern

Yes No

30 Have you achieved a qualification at degree level or above?

➤ For example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing

Yes No

31 Have you achieved any other qualifications?

➤ Tick all that apply

GCSEs or equivalent

- 5 or more GCSEs (A*-C, 9-4), O levels (passes), CSEs (grade 1) or Intermediate Welsh Baccalaureate
- Any other GCSEs, O levels or CSEs (any grades), Basic Skills course or Foundation Welsh Baccalaureate

AS, A level or equivalent

- 2 or more A levels, 4 or more AS levels or Advanced Welsh Baccalaureate
- 1 A level, 2-3 AS levels
- 1 AS level

NVQ or equivalent

- NVQ level 3, BTEC National, OND or ONC, City and Guilds Advanced Craft
- NVQ level 2, BTEC General, City and Guilds Craft
- NVQ level 1

OR other or no qualifications

- Any other qualifications, equivalent unknown
- No qualifications

32 Have you **previously** served in the UK Armed Forces?

➤ Current serving members should only tick "no"

- Yes, previously served in **Regular** Armed Forces
- Yes, previously served in **Reserve** Armed Forces
- OR** no

33 In the last seven days, were you doing any of the following?

➤ Tick all that apply

➤ Include casual or temporary work, even if only for one hour

- Working as an employee ➔ **GO TO 39**
- Self-employed or freelance ➔ **GO TO 39**
- Temporarily away from work ill, on holiday or temporarily laid off ➔ **GO TO 39**
- On maternity or paternity leave ➔ **GO TO 39**
- Doing any other kind of paid work ➔ **GO TO 39**
- OR** none of the above

34 Which of the following describes what you were doing in the last seven days?

➤ Tick all that apply

- Retired (whether receiving a pension or not)
- Studying
- Looking after home or family
- Long-term sick or disabled
- Other

35 In the last four weeks, were you actively looking for any kind of paid work?

- Yes
- No

36 If a job became available now, could you start it within two weeks?

- Yes
- No

37 In the last seven days, were you waiting to start a job already accepted?

- Yes
- No

38 Have you ever done any paid work?

- Yes, in the last 12 months
- Yes, but not in the last 12 months
- No, have never worked ➔ **GO TO 51**

39 Answer the remaining questions for your main job or, if not working, your last main job.

➤ Your main job is the job in which you usually work (worked) the most hours



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

Individual questions – Person 7 continued

40 In your main job, what is (was) your employment status?

- Employee
- Self-employed or freelance without employees
- Self-employed with employees

41 What is (was) the name of the organisation or business you work (worked) for?

☞ If you are (were) self-employed in your own business, write in your business name

OR no organisation or work (worked) for a private individual

42 What is (was) your full job title?

☞ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER

☞ Do not state your grade or pay band

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

44 What is (was) the main activity of your organisation, business or freelance work?

☞ For example, CLOTHING RETAIL, GENERAL HOSPITAL, PRIMARY EDUCATION, FOOD WHOLESALE

☞ If you are (were) a civil servant, write CIVIL SERVICE

☞ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority

45 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?

- Yes
- No

46 If you had a job last week → **GO TO 47**

If you were temporarily away from work last week → **GO TO 47**

If you did not have a job last week → **GO TO 51**

47 In your main job, how many hours a week do you usually work?

☞ Include paid and unpaid overtime

0 to 15 16 to 30 31 to 48 49 or more

-
-
-
-

48 How do you usually travel to work?

☞ Tick one box only for the longest part, by distance, of your usual journey to work

- Work mainly at or from home
- Underground, metro, light rail, tram
- Train
- Bus, minibuss or coach
- Taxi
- Motorcycle, scooter or moped
- Driving a car or van
- Passenger in a car or van
- Bicycle
- On foot
- Other

49 Where do you mainly work?

- At a workplace or report to a depot
- At or from home → **GO TO 51**
- An offshore installation → **GO TO 51**
- No fixed place → **GO TO 51**

50 What is the address of your workplace or depot?

Postcode

51 There are no more questions for **Person 7**.

→ **GO TO** questions for **Person 8**

OR if there are no more people in this household

→ **GO TO** the **Visitor questions** on page 31

OR if there are no visitors staying here overnight

→ **GO TO** the **Declaration** on the front page



112015

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Individual questions – Person 8 start here

| | |
|--|--|
| <p>P Thinking about the people listed in question C1, are you Person 8?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No – enter the details for Person 8 in this section</p> <p>1 What is your name? (Person 8 in question C1)</p> <p>First name <input type="text"/></p> <p>Middle name(s) <input type="text"/></p> <p>Last name <input type="text"/></p> <p>2 What is your date of birth?</p> <p>Day Month Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>3 What is your sex?</p> <p><input type="checkbox"/> A question about gender identity will follow if you are aged 16 or over</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p> <p>4 On 21 March 2021, what is your legal marital or registered civil partnership status?</p> <p><input type="checkbox"/> Never married and never registered a civil partnership → GO TO 6</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> In a registered civil partnership</p> <p><input type="checkbox"/> Separated, but still legally married</p> <p><input type="checkbox"/> Separated, but still legally in a civil partnership</p> <p><input type="checkbox"/> Divorced</p> <p><input type="checkbox"/> Formerly in a civil partnership which is now legally dissolved</p> <p><input type="checkbox"/> Widowed</p> <p><input type="checkbox"/> Surviving partner from a registered civil partnership</p> <p>5 Who is (was) your legal marriage or registered civil partnership to?</p> <p><input type="checkbox"/> Someone of the opposite sex</p> <p><input type="checkbox"/> Someone of the same sex</p> | <p>6 Do you stay at another address for more than 30 days a year?</p> <p><input checked="" type="checkbox"/> These days could be in a row or separate</p> <p><input type="checkbox"/> No → GO TO 8</p> <p><input type="checkbox"/> Yes, write in other UK address below</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Postcode <input type="text"/> <input type="text"/></p> <p><input type="checkbox"/> OR yes, outside the UK, write in country</p> <p><input type="text"/></p> <p>7 What is that address?</p> <p><input type="checkbox"/> Armed forces base address</p> <p><input type="checkbox"/> Another address when working away from home</p> <p><input type="checkbox"/> Student's home address</p> <p><input type="checkbox"/> Student's term-time address</p> <p><input type="checkbox"/> Another parent or guardian's address</p> <p><input type="checkbox"/> Partner's address</p> <p><input type="checkbox"/> Holiday home</p> <p><input type="checkbox"/> Other</p> <p>8 Are you a schoolchild or student in full-time education?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No → GO TO 10</p> <p>9 During term time, where do you usually live?</p> <p><input type="checkbox"/> At the address on the front of this questionnaire</p> <p><input type="checkbox"/> At the address in question 6 → GO TO 51</p> <p><input type="checkbox"/> At another address → GO TO 51</p> <p>10 What is your country of birth?</p> <p><input type="checkbox"/> Wales → GO TO 13</p> <p><input type="checkbox"/> England → GO TO 13</p> <p><input type="checkbox"/> Scotland → GO TO 13</p> <p><input type="checkbox"/> Northern Ireland → GO TO 13</p> <p><input type="checkbox"/> Republic of Ireland</p> <p><input type="checkbox"/> Elsewhere, write in current name of the country</p> <p><input type="text"/></p> |
|--|--|



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Individual questions – Person 8 continued

| | |
|--|--|
| <p>16 What is your religion?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> No religion</p> <p><input type="checkbox"/> Christian (all denominations)</p> <p><input type="checkbox"/> Buddhist</p> <p><input type="checkbox"/> Hindu</p> <p><input type="checkbox"/> Jewish</p> <p><input type="checkbox"/> Muslim</p> <p><input type="checkbox"/> Sikh</p> <p><input type="checkbox"/> Any other religion, write in</p> <p><input type="text"/></p> | <p>22 Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No → GO TO 24</p> |
| <p>17 Can you understand, speak, read or write Welsh?</p> <p>🔄 Tick all that apply</p> <p><input type="checkbox"/> Understand spoken Welsh</p> <p><input type="checkbox"/> Speak Welsh</p> <p><input type="checkbox"/> Read Welsh</p> <p><input type="checkbox"/> Write Welsh</p> <p><input type="checkbox"/> OR none of the above</p> | <p>23 Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?</p> <p><input type="checkbox"/> Yes, a lot</p> <p><input type="checkbox"/> Yes, a little</p> <p><input type="checkbox"/> Not at all</p> |
| <p>18 What is your main language?</p> <p><input type="checkbox"/> English or Welsh → GO TO 20</p> <p><input type="checkbox"/> Other, write in (including British Sign Language)</p> <p><input type="text"/></p> | <p>24 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?</p> <p>🔄 Exclude anything you do as part of your paid employment</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, 9 hours a week or less</p> <p><input type="checkbox"/> Yes, 10 to 19 hours a week</p> <p><input type="checkbox"/> Yes, 20 to 34 hours a week</p> <p><input type="checkbox"/> Yes, 35 to 49 hours a week</p> <p><input type="checkbox"/> Yes, 50 or more hours a week</p> |
| <p>19 How well can you speak English?</p> <p>Very well Well Not well Not at all</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> | <p>25 If you are aged 16 or over → GO TO 26</p> <p>If you are aged 15 or under → GO TO 51</p> |
| <p>20 What passports do you hold?</p> <p>🔄 Tick all that apply</p> <p><input type="checkbox"/> United Kingdom</p> <p><input type="checkbox"/> Ireland</p> <p><input type="checkbox"/> Other, write in</p> <p><input type="text"/></p> <p><input type="checkbox"/> OR none</p> | <p>26 Which of the following best describes your sexual orientation?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> Straight/Heterosexual</p> <p><input type="checkbox"/> Gay or Lesbian</p> <p><input type="checkbox"/> Bisexual</p> <p><input type="checkbox"/> Other sexual orientation, write in</p> <p><input type="text"/></p> |
| <p>21 How is your health in general?</p> <p>Very good Good Fair Bad Very bad</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> | <p>27 Is the gender you identify with the same as your sex registered at birth?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No, write in gender identity</p> <p><input type="text"/></p> |



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Individual questions – Person 8 continued

28 The next set of questions is about your qualifications.

- Record any qualifications you have ever achieved in Wales, England or worldwide, including equivalents, even if you are not using them now

29 Have you completed an apprenticeship?

- For example, trade, higher, foundation, modern

Yes No

30 Have you achieved a qualification at degree level or above?

- For example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing

Yes No

31 Have you achieved any other qualifications?

- Tick all that apply

GCSEs or equivalent

- 5 or more GCSEs (A*-C, 9-4), O levels (passes), CSEs (grade 1) or Intermediate Welsh Baccalaureate
- Any other GCSEs, O levels or CSEs (any grades), Basic Skills course or Foundation Welsh Baccalaureate

AS, A level or equivalent

- 2 or more A levels, 4 or more AS levels or Advanced Welsh Baccalaureate
- 1 A level, 2-3 AS levels
- 1 AS level

NVQ or equivalent

- NVQ level 3, BTEC National, OND or ONC, City and Guilds Advanced Craft
- NVQ level 2, BTEC General, City and Guilds Craft
- NVQ level 1

OR other or no qualifications

- Any other qualifications, equivalent unknown
- No qualifications

32 Have you **previously** served in the UK Armed Forces?

- Current serving members should only tick "no"

- Yes, previously served in **Regular** Armed Forces
- Yes, previously served in **Reserve** Armed Forces
- OR** no

33 In the last seven days, were you doing any of the following?

- Tick all that apply

- Include casual or temporary work, even if only for one hour

- Working as an employee → **GO TO 39**
- Self-employed or freelance → **GO TO 39**
- Temporarily away from work ill, on holiday or temporarily laid off → **GO TO 39**
- On maternity or paternity leave → **GO TO 39**
- Doing any other kind of paid work → **GO TO 39**
- OR** none of the above

34 Which of the following describes what you were doing in the last seven days?

- Tick all that apply

- Retired (whether receiving a pension or not)
- Studying
- Looking after home or family
- Long-term sick or disabled
- Other

35 In the last four weeks, were you actively looking for any kind of paid work?

- Yes
- No

36 If a job became available now, could you start it within two weeks?

- Yes
- No

37 In the last seven days, were you waiting to start a job already accepted?

- Yes
- No

38 Have you ever done any paid work?

- Yes, in the last 12 months
- Yes, but not in the last 12 months
- No, have never worked → **GO TO 51**

39 Answer the remaining questions for your main job or, if not working, your last main job.

- Your main job is the job in which you usually work (worked) the most hours



112019

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

Individual questions – Person 8 continued

| | |
|--|---|
| <p>40 In your main job, what is (was) your employment status?</p> <p><input type="checkbox"/> Employee</p> <p><input type="checkbox"/> Self-employed or freelance without employees</p> <p><input type="checkbox"/> Self-employed with employees</p> | <p>46 If you had a job last week → GO TO 47</p> <p>If you were temporarily away from work last week → GO TO 47</p> <p>If you did not have a job last week → GO TO 51</p> |
| <p>41 What is (was) the name of the organisation or business you work (worked) for?</p> <p>☞ If you are (were) self-employed in your own business, write in your business name</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> OR no organisation or work (worked) for a private individual</p> | <p>47 In your main job, how many hours a week do you usually work?</p> <p>☞ Include paid and unpaid overtime</p> <p>0 to 15 16 to 30 31 to 48 49 or more</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> |
| <p>42 What is (was) your full job title?</p> <p>☞ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER</p> <p>☞ Do not state your grade or pay band</p> <p>_____</p> <p>_____</p> | <p>48 How do you usually travel to work?</p> <p>☞ Tick one box only for the longest part, by distance, of your usual journey to work</p> <p><input type="checkbox"/> Work mainly at or from home</p> <p><input type="checkbox"/> Underground, metro, light rail, tram</p> <p><input type="checkbox"/> Train</p> <p><input type="checkbox"/> Bus, minibus or coach</p> <p><input type="checkbox"/> Taxi</p> <p><input type="checkbox"/> Motorcycle, scooter or moped</p> <p><input type="checkbox"/> Driving a car or van</p> <p><input type="checkbox"/> Passenger in a car or van</p> <p><input type="checkbox"/> Bicycle</p> <p><input type="checkbox"/> On foot</p> <p><input type="checkbox"/> Other</p> |
| <p>43 Briefly describe what you do (did) in your main job.</p> <p>_____</p> <p>_____</p> | <p>49 Where do you mainly work?</p> <p><input type="checkbox"/> At a workplace or report to a depot</p> <p><input type="checkbox"/> At or from home → GO TO 51</p> <p><input type="checkbox"/> An offshore installation → GO TO 51</p> <p><input type="checkbox"/> No fixed place → GO TO 51</p> |
| <p>44 What is (was) the main activity of your organisation, business or freelance work?</p> <p>☞ For example, CLOTHING RETAIL, GENERAL HOSPITAL, PRIMARY EDUCATION, FOOD WHOLESALE</p> <p>☞ If you are (were) a civil servant, write CIVIL SERVICE</p> <p>☞ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority</p> <p>_____</p> <p>_____</p> <p>_____</p> | <p>50 What is the address of your workplace or depot?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;">Postcode</p> <p>_____</p> |
| <p>45 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>51 There are no more questions for Person 8.</p> <p>→ GO TO questions for Person 9</p> <p>OR if there are no more people in this household</p> <p>→ GO TO the Visitor questions on page 31</p> <p>OR if there are no visitors staying here overnight</p> <p>→ GO TO the Declaration on the front page</p> |



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Individual questions – Person 9 start here

P Thinking about the people listed in question C1, are you Person 9?

Yes

No – enter the details for Person 9 in this section

1 What is your name? (Person 9 in question C1)

First name

Middle name(s)

Last name

2 What is your date of birth?

Day Month Year

3 What is your sex?

A question about gender identity will follow if you are aged 16 or over

Female

Male

4 On 21 March 2021, what is your legal marital or registered civil partnership status?

Never married and never registered a civil partnership → **GO TO 6**

Married

In a registered civil partnership

Separated, but still legally married

Separated, but still legally in a civil partnership

Divorced

Formerly in a civil partnership which is now legally dissolved

Widowed

Surviving partner from a registered civil partnership

5 Who is (was) your legal marriage or registered civil partnership to?

Someone of the opposite sex

Someone of the same sex

6 Do you stay at another address for more than 30 days a year?

These days could be in a row or separate

No → **GO TO 8**

Yes, write in other UK address below

Postcode

OR yes, outside the UK, write in country

7 What is that address?

Armed forces base address

Another address when working away from home

Student's home address

Student's term-time address

Another parent or guardian's address

Partner's address

Holiday home

Other

8 Are you a schoolchild or student in full-time education?

Yes No → **GO TO 10**

9 During term time, where do you usually live?

At the address on the front of this questionnaire

At the address in question 6 → **GO TO 51**

At another address → **GO TO 51**

10 What is your country of birth?

Wales → **GO TO 13**

England → **GO TO 13**

Scotland → **GO TO 13**

Northern Ireland → **GO TO 13**

Republic of Ireland

Elsewhere, write in current name of the country



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Individual questions – Person 9 continued

11 If you were not born in the United Kingdom, when did you most recently arrive to live here?
 Do not count short visits away from the UK

Month Year

If you arrived before 21 March 2020 → **GO TO 13**

If you arrived on or after 21 March 2020 → **GO TO 12**

12 Including the time you have already spent here, how long do you intend to stay in the United Kingdom?

- Less than 12 months
- 12 months or more

13 One year ago, what was your usual address?

If you had no usual address one year ago, state the address where you were staying

- Same as Person 1
- The address on the front of this questionnaire
- Student term-time or boarding school address in the UK, write in term-time address below
- Another address in the UK, write in below

 Postcode

OR outside the UK, write in country

14 How would you describe your national identity?

Tick all that apply

- Welsh
- English
- Scottish
- Northern Irish
- British
- Other, write in

15 What is your ethnic group?

Choose **one** section from A to E, then tick **one** box to best describe your ethnic group or background

A White

- Welsh, English, Scottish, Northern Irish or British
- Irish
- Gypsy or Irish Traveller
- Roma
- Any other White background, write in

B Mixed or Multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed or Multiple background, write in

C Asian, Asian Welsh or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background, write in

D Black, Black Welsh, Black British, Caribbean or African

- Caribbean
- African background, write in below
- Any other Black, Black British or Caribbean background, write in

E Other ethnic group

- Arab
- Any other ethnic group, write in



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Individual questions – Person 9 continued

16 What is your religion?

↻ This question is **voluntary**

- No religion
- Christian (all denominations)
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion, write in

17 Can you understand, speak, read or write Welsh?

↻ Tick all that apply

- Understand spoken Welsh
- Speak Welsh
- Read Welsh
- Write Welsh
- OR** none of the above

18 What is your main language?

- English or Welsh → **GO TO 20**
- Other, write in (including British Sign Language)

19 How well can you speak English?

- | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Very well | Well | Not well | Not at all |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

20 What passports do you hold?

↻ Tick all that apply

- United Kingdom
- Ireland
- Other, write in

OR none

21 How is your health in general?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Very good | Good | Fair | Bad | Very bad |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

22 Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?

- Yes
- No → **GO TO 24**

23 Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?

- Yes, a lot
- Yes, a little
- Not at all

24 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?

↻ Exclude anything you do as part of your paid employment

- No
- Yes, 9 hours a week or less
- Yes, 10 to 19 hours a week
- Yes, 20 to 34 hours a week
- Yes, 35 to 49 hours a week
- Yes, 50 or more hours a week

25 If you are aged 16 or over → **GO TO 26**
If you are aged 15 or under → **GO TO 51**

26 Which of the following best describes your sexual orientation?

↻ This question is **voluntary**

- Straight/Heterosexual
- Gay or Lesbian
- Bisexual
- Other sexual orientation, write in

27 Is the gender you identify with the same as your sex registered at birth?

↻ This question is **voluntary**

- Yes
- No, write in gender identity



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Individual questions – Person 9 continued

28 The next set of questions is about your qualifications.
 ☞ Record any qualifications you have ever achieved in Wales, England or worldwide, including equivalents, even if you are not using them now

29 Have you completed an apprenticeship?
 ☞ For example, trade, higher, foundation, modern

Yes No

30 Have you achieved a qualification at degree level or above?
 ☞ For example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing

Yes No

31 Have you achieved any other qualifications?

☞ Tick all that apply

GCSEs or equivalent

- 5 or more GCSEs (A*-C, 9-4), O levels (passes), CSEs (grade 1) or Intermediate Welsh Baccalaureate
- Any other GCSEs, O levels or CSEs (any grades), Basic Skills course or Foundation Welsh Baccalaureate

AS, A level or equivalent

- 2 or more A levels, 4 or more AS levels or Advanced Welsh Baccalaureate
- 1 A level, 2-3 AS levels
- 1 AS level

NVQ or equivalent

- NVQ level 3, BTEC National, OND or ONC, City and Guilds Advanced Craft
- NVQ level 2, BTEC General, City and Guilds Craft
- NVQ level 1

OR other or no qualifications

- Any other qualifications, equivalent unknown
- No qualifications

32 Have you **previously** served in the UK Armed Forces?

☞ Current serving members should only tick "no"

- Yes, previously served in **Regular** Armed Forces
- Yes, previously served in **Reserve** Armed Forces
- OR** no

33 In the last seven days, were you doing any of the following?

☞ Tick all that apply

☞ Include casual or temporary work, even if only for one hour

- Working as an employee → **GO TO 39**
- Self-employed or freelance → **GO TO 39**
- Temporarily away from work ill, on holiday or temporarily laid off → **GO TO 39**
- On maternity or paternity leave → **GO TO 39**
- Doing any other kind of paid work → **GO TO 39**
- OR** none of the above

34 Which of the following describes what you were doing in the last seven days?

☞ Tick all that apply

- Retired (whether receiving a pension or not)
- Studying
- Looking after home or family
- Long-term sick or disabled
- Other

35 In the last four weeks, were you actively looking for any kind of paid work?

- Yes
- No

36 If a job became available now, could you start it within two weeks?

- Yes
- No

37 In the last seven days, were you waiting to start a job already accepted?

- Yes
- No

38 Have you ever done any paid work?

- Yes, in the last 12 months
- Yes, but not in the last 12 months
- No, have never worked → **GO TO 51**

39 Answer the remaining questions for your main job or, if not working, your last main job.

☞ Your main job is the job in which you usually work (worked) the most hours



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Individual questions – Person 9 continued

| | |
|---|---|
| <p>40 In your main job, what is (was) your employment status?</p> <p><input type="checkbox"/> Employee</p> <p><input type="checkbox"/> Self-employed or freelance without employees</p> <p><input type="checkbox"/> Self-employed with employees</p> | <p>46 If you had a job last week → GO TO 47</p> <p>If you were temporarily away from work last week → GO TO 47</p> <p>If you did not have a job last week → GO TO 51</p> |
| <p>41 What is (was) the name of the organisation or business you work (worked) for?</p> <p>☞ If you are (were) self-employed in your own business, write in your business name</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> OR no organisation or work (worked) for a private individual</p> | <p>47 In your main job, how many hours a week do you usually work?</p> <p>☞ Include paid and unpaid overtime</p> <p>0 to 15 16 to 30 31 to 48 49 or more</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> |
| <p>42 What is (was) your full job title?</p> <p>☞ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER</p> <p>☞ Do not state your grade or pay band</p> <p>_____</p> <p>_____</p> | <p>48 How do you usually travel to work?</p> <p>☞ Tick one box only for the longest part, by distance, of your usual journey to work</p> <p><input type="checkbox"/> Work mainly at or from home</p> <p><input type="checkbox"/> Underground, metro, light rail, tram</p> <p><input type="checkbox"/> Train</p> <p><input type="checkbox"/> Bus, minibus or coach</p> <p><input type="checkbox"/> Taxi</p> <p><input type="checkbox"/> Motorcycle, scooter or moped</p> <p><input type="checkbox"/> Driving a car or van</p> <p><input type="checkbox"/> Passenger in a car or van</p> <p><input type="checkbox"/> Bicycle</p> <p><input type="checkbox"/> On foot</p> <p><input type="checkbox"/> Other</p> |
| <p>43 Briefly describe what you do (did) in your main job.</p> <p>_____</p> <p>_____</p> | <p>49 Where do you mainly work?</p> <p><input type="checkbox"/> At a workplace or report to a depot</p> <p><input type="checkbox"/> At or from home → GO TO 51</p> <p><input type="checkbox"/> An offshore installation → GO TO 51</p> <p><input type="checkbox"/> No fixed place → GO TO 51</p> |
| <p>44 What is (was) the main activity of your organisation, business or freelance work?</p> <p>☞ For example, CLOTHING RETAIL, GENERAL HOSPITAL, PRIMARY EDUCATION, FOOD WHOLESAL</p> <p>☞ If you are (were) a civil servant, write CIVIL SERVICE</p> <p>☞ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority</p> <p>_____</p> <p>_____</p> <p>_____</p> | <p>50 What is the address of your workplace or depot?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____ Postcode _____</p> |
| <p>45 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>51 There are no more questions for Person 9.</p> <p>→ GO TO questions for Person 10</p> <p>OR if there are no more people in this household</p> <p>→ GO TO the Visitor questions on page 31</p> <p>OR if there are no visitors staying here overnight</p> <p>→ GO TO the Declaration on the front page</p> |



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Individual questions – Person 10 start here

| | |
|--|---|
| <p>P Thinking about the people listed in question C1, are you Person 10?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No – enter the details for Person 10 in this section</p> <p>1 What is your name? (Person 10 in question C1)</p> <p>First name <input type="text"/></p> <p>Middle name(s) <input type="text"/></p> <p>Last name <input type="text"/></p> <p>2 What is your date of birth?</p> <p>Day Month Year <input type="text"/> <input type="text"/> <input type="text"/></p> <p>3 What is your sex?</p> <p><input type="checkbox"/> A question about gender identity will follow if you are aged 16 or over</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p> <p>4 On 21 March 2021, what is your legal marital or registered civil partnership status?</p> <p><input type="checkbox"/> Never married and never registered a civil partnership → GO TO 6</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> In a registered civil partnership</p> <p><input type="checkbox"/> Separated, but still legally married</p> <p><input type="checkbox"/> Separated, but still legally in a civil partnership</p> <p><input type="checkbox"/> Divorced</p> <p><input type="checkbox"/> Formerly in a civil partnership which is now legally dissolved</p> <p><input type="checkbox"/> Widowed</p> <p><input type="checkbox"/> Surviving partner from a registered civil partnership</p> <p>5 Who is (was) your legal marriage or registered civil partnership to?</p> <p><input type="checkbox"/> Someone of the opposite sex</p> <p><input type="checkbox"/> Someone of the same sex</p> | <p>6 Do you stay at another address for more than 30 days a year?</p> <p><input checked="" type="checkbox"/> These days could be in a row or separate</p> <p><input type="checkbox"/> No → GO TO 8</p> <p><input type="checkbox"/> Yes, write in other UK address below</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Postcode <input type="text"/></p> <p><input type="checkbox"/> OR yes, outside the UK, write in country</p> <p><input type="text"/></p> <p>7 What is that address?</p> <p><input type="checkbox"/> Armed forces base address</p> <p><input type="checkbox"/> Another address when working away from home</p> <p><input type="checkbox"/> Student's home address</p> <p><input type="checkbox"/> Student's term-time address</p> <p><input type="checkbox"/> Another parent or guardian's address</p> <p><input type="checkbox"/> Partner's address</p> <p><input type="checkbox"/> Holiday home</p> <p><input type="checkbox"/> Other</p> <p>8 Are you a schoolchild or student in full-time education?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No → GO TO 10</p> <p>9 During term time, where do you usually live?</p> <p><input type="checkbox"/> At the address on the front of this questionnaire</p> <p><input type="checkbox"/> At the address in question 6 → GO TO 51</p> <p><input type="checkbox"/> At another address → GO TO 51</p> <p>10 What is your country of birth?</p> <p><input type="checkbox"/> Wales → GO TO 13</p> <p><input type="checkbox"/> England → GO TO 13</p> <p><input type="checkbox"/> Scotland → GO TO 13</p> <p><input type="checkbox"/> Northern Ireland → GO TO 13</p> <p><input type="checkbox"/> Republic of Ireland</p> <p><input type="checkbox"/> Elsewhere, write in current name of the country</p> <p><input type="text"/></p> |
|--|---|



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Individual questions – Person 10 continued

| | |
|--|--|
| <p>16 What is your religion?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> No religion</p> <p><input type="checkbox"/> Christian (all denominations)</p> <p><input type="checkbox"/> Buddhist</p> <p><input type="checkbox"/> Hindu</p> <p><input type="checkbox"/> Jewish</p> <p><input type="checkbox"/> Muslim</p> <p><input type="checkbox"/> Sikh</p> <p><input type="checkbox"/> Any other religion, write in</p> <p><input type="text"/></p> | <p>22 Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No → GO TO 24</p> |
| <p>17 Can you understand, speak, read or write Welsh?</p> <p>🔄 Tick all that apply</p> <p><input type="checkbox"/> Understand spoken Welsh</p> <p><input type="checkbox"/> Speak Welsh</p> <p><input type="checkbox"/> Read Welsh</p> <p><input type="checkbox"/> Write Welsh</p> <p><input type="checkbox"/> OR none of the above</p> | <p>23 Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?</p> <p><input type="checkbox"/> Yes, a lot</p> <p><input type="checkbox"/> Yes, a little</p> <p><input type="checkbox"/> Not at all</p> |
| <p>18 What is your main language?</p> <p><input type="checkbox"/> English or Welsh → GO TO 20</p> <p><input type="checkbox"/> Other, write in (including British Sign Language)</p> <p><input type="text"/></p> | <p>24 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?</p> <p>🔄 Exclude anything you do as part of your paid employment</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, 9 hours a week or less</p> <p><input type="checkbox"/> Yes, 10 to 19 hours a week</p> <p><input type="checkbox"/> Yes, 20 to 34 hours a week</p> <p><input type="checkbox"/> Yes, 35 to 49 hours a week</p> <p><input type="checkbox"/> Yes, 50 or more hours a week</p> |
| <p>19 How well can you speak English?</p> <p>Very well Well Not well Not at all</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> | <p>25 If you are aged 16 or over → GO TO 26</p> <p>If you are aged 15 or under → GO TO 51</p> |
| <p>20 What passports do you hold?</p> <p>🔄 Tick all that apply</p> <p><input type="checkbox"/> United Kingdom</p> <p><input type="checkbox"/> Ireland</p> <p><input type="checkbox"/> Other, write in</p> <p><input type="text"/></p> <p><input type="checkbox"/> OR none</p> | <p>26 Which of the following best describes your sexual orientation?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> Straight/Heterosexual</p> <p><input type="checkbox"/> Gay or Lesbian</p> <p><input type="checkbox"/> Bisexual</p> <p><input type="checkbox"/> Other sexual orientation, write in</p> <p><input type="text"/></p> |
| <p>21 How is your health in general?</p> <p>Very good Good Fair Bad Very bad</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> | <p>27 Is the gender you identify with the same as your sex registered at birth?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No, write in gender identity</p> <p><input type="text"/></p> |



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Individual questions – Person 10 continued

28 The next set of questions is about your qualifications.

- Record any qualifications you have ever achieved in Wales, England or worldwide, including equivalents, even if you are not using them now

29 Have you completed an apprenticeship?

- For example, trade, higher, foundation, modern

Yes No

30 Have you achieved a qualification at degree level or above?

- For example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing

Yes No

31 Have you achieved any other qualifications?

- Tick all that apply

GCSEs or equivalent

- 5 or more GCSEs (A*-C, 9-4), O levels (passes), CSEs (grade 1) or Intermediate Welsh Baccalaureate
- Any other GCSEs, O levels or CSEs (any grades), Basic Skills course or Foundation Welsh Baccalaureate

AS, A level or equivalent

- 2 or more A levels, 4 or more AS levels or Advanced Welsh Baccalaureate
- 1 A level, 2-3 AS levels
- 1 AS level

NVQ or equivalent

- NVQ level 3, BTEC National, OND or ONC, City and Guilds Advanced Craft
- NVQ level 2, BTEC General, City and Guilds Craft
- NVQ level 1

OR other or no qualifications

- Any other qualifications, equivalent unknown
- No qualifications

32 Have you **previously** served in the UK Armed Forces?

- Current serving members should only tick "no"

- Yes, previously served in **Regular** Armed Forces
- Yes, previously served in **Reserve** Armed Forces
- OR** no

33 In the last seven days, were you doing any of the following?

- Tick all that apply

- Include casual or temporary work, even if only for one hour

- Working as an employee → **GO TO 39**
- Self-employed or freelance → **GO TO 39**
- Temporarily away from work ill, on holiday or temporarily laid off → **GO TO 39**
- On maternity or paternity leave → **GO TO 39**
- Doing any other kind of paid work → **GO TO 39**
- OR** none of the above

34 Which of the following describes what you were doing in the last seven days?

- Tick all that apply

- Retired (whether receiving a pension or not)
- Studying
- Looking after home or family
- Long-term sick or disabled
- Other

35 In the last four weeks, were you actively looking for any kind of paid work?

- Yes
- No

36 If a job became available now, could you start it within two weeks?

- Yes
- No

37 In the last seven days, were you waiting to start a job already accepted?

- Yes
- No

38 Have you ever done any paid work?

- Yes, in the last 12 months
- Yes, but not in the last 12 months
- No, have never worked → **GO TO 51**

39 Answer the remaining questions for your main job or, if not working, your last main job.

- Your main job is the job in which you usually work (worked) the most hours



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Individual questions – Person 10 continued

| | |
|--|---|
| <p>40 In your main job, what is (was) your employment status?</p> <p><input type="checkbox"/> Employee</p> <p><input type="checkbox"/> Self-employed or freelance without employees</p> <p><input type="checkbox"/> Self-employed with employees</p> | <p>46 If you had a job last week → GO TO 47</p> <p>If you were temporarily away from work last week → GO TO 47</p> <p>If you did not have a job last week → GO TO 51</p> |
| <p>41 What is (was) the name of the organisation or business you work (worked) for?</p> <p>☞ If you are (were) self-employed in your own business, write in your business name</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> OR no organisation or work (worked) for a private individual</p> | <p>47 In your main job, how many hours a week do you usually work?</p> <p>☞ Include paid and unpaid overtime</p> <p>0 to 15 16 to 30 31 to 48 49 or more</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> |
| <p>42 What is (was) your full job title?</p> <p>☞ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER</p> <p>☞ Do not state your grade or pay band</p> <p>_____</p> <p>_____</p> | <p>48 How do you usually travel to work?</p> <p>☞ Tick one box only for the longest part, by distance, of your usual journey to work</p> <p><input type="checkbox"/> Work mainly at or from home</p> <p><input type="checkbox"/> Underground, metro, light rail, tram</p> <p><input type="checkbox"/> Train</p> <p><input type="checkbox"/> Bus, minibus or coach</p> <p><input type="checkbox"/> Taxi</p> <p><input type="checkbox"/> Motorcycle, scooter or moped</p> <p><input type="checkbox"/> Driving a car or van</p> <p><input type="checkbox"/> Passenger in a car or van</p> <p><input type="checkbox"/> Bicycle</p> <p><input type="checkbox"/> On foot</p> <p><input type="checkbox"/> Other</p> |
| <p>43 Briefly describe what you do (did) in your main job.</p> <p>_____</p> <p>_____</p> | <p>49 Where do you mainly work?</p> <p><input type="checkbox"/> At a workplace or report to a depot</p> <p><input type="checkbox"/> At or from home → GO TO 51</p> <p><input type="checkbox"/> An offshore installation → GO TO 51</p> <p><input type="checkbox"/> No fixed place → GO TO 51</p> |
| <p>44 What is (was) the main activity of your organisation, business or freelance work?</p> <p>☞ For example, CLOTHING RETAIL, GENERAL HOSPITAL, PRIMARY EDUCATION, FOOD WHOLESALE</p> <p>☞ If you are (were) a civil servant, write CIVIL SERVICE</p> <p>☞ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority</p> <p>_____</p> <p>_____</p> <p>_____</p> | <p>50 What is the address of your workplace or depot?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;">Postcode</p> <p>_____</p> |
| <p>45 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>51 There are no more questions for Person 10.</p> <p>If there are more people in your household, you will need to request another Continuation Questionnaire.</p> <p>→ GO TO the Visitor questions on page 31</p> <p>OR if there are no visitors staying here overnight</p> <p>→ GO TO the Declaration on the front page</p> |



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Visitor questions

V How many visitors not listed on your first Household Questionnaire are staying overnight here on 21 March 2021?

- One to six visitors – answer questions V1 to V4 below for each visitor
- Seven or more visitors – answer questions V1 to V4 below for the six visitors not included in your first Household Questionnaire, then go to www.census.gov.uk or call 0800 169 2021 to request another Continuation Questionnaire

Visitor D

V1 What is this person's name?

First name

 Last name

V2 What is this person's date of birth?

Day Month Year

V3 What is this person's sex?

Female Male

V4 What is this person's usual UK address?

Postcode

OR outside the UK, write in country

Visitor E

V1 What is this person's name?

First name

 Last name

V2 What is this person's date of birth?

Day Month Year

V3 What is this person's sex?

Female Male

V4 What is this person's usual UK address?

Same address as Visitor D

 Postcode

OR outside the UK, write in country

Visitor F

V1 What is this person's name?

First name

 Last name

V2 What is this person's date of birth?

Day Month Year

V3 What is this person's sex?

Female Male

V4 What is this person's usual UK address?

Same address as Visitor D

 Postcode

OR outside the UK, write in country



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Before you start

Who should complete this questionnaire?

Everyone who has stayed, or intends to stay, in the United Kingdom for 3 months or more needs to be included on a census questionnaire.

This Individual Questionnaire is for:

- those living in a private household who have requested an Individual Questionnaire
- those who usually live in the UK and have stayed, or expect to stay, in a communal establishment (excluding prison) for 6 months or more
- those who usually live in the UK and are currently detained for 12 months or more
- those living or staying temporarily in a communal establishment who do not have another usual UK address

What is a communal establishment?

A communal establishment is a place providing managed residential accommodation. "Managed" here means full-time or part-time supervision of the accommodation.

Examples of communal establishments include student halls of residence, boarding schools, armed forces bases, hospitals, care homes and prisons.

How should I complete my questionnaire correctly?

You should:

- use black or blue ink to answer
- tick your answers within the box, like this:
- print in capital letters within the boxes, one letter per box, like this:

| | | | | | | |
|---|---|---|---|---|--|--|
| D | A | F | Y | D | | |
|---|---|---|---|---|--|--|
- correct any mistakes by filling in the box, like this:

| | | | | | | | |
|---|---|---|---|---|---|--|--|
| J | O | ■ | N | E | S | | |
|---|---|---|---|---|---|--|--|

 or this:

| | | | | | | |
|---|---|---|---|---|--|--|
| J | O | N | E | S | | |
|---|---|---|---|---|--|--|
- continue onto the next line (if possible) when a word will not fit, like this:

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| P | A | D | D | I | N | G | T | O |
| N | | S | T | R | E | E | T | |
- follow the → **GO TO** instructions and leave any questions or pages you do not need to answer completely blank; any marks or lines can be mistaken for answers

Remember to sign the Declaration on the front page before you return your completed questionnaire.

How do I return my completed questionnaire?

Put your completed and signed questionnaire into the prepaid envelope provided. If you've lost your prepaid envelope, you can use a plain envelope and write the below address on it.

FREEPOST Census 2021

Then put it in the post.

If you live in a communal establishment, you may prefer to pass your completed and signed questionnaire in your envelope to your establishment manager. They can then return it on your behalf.

All the personal information that you give us will be kept strictly confidential and will only be used for statistical purposes.



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Start here

A1 What type of accommodation is this?

- A communal establishment (for example, student hall of residence, boarding school, armed forces base, hospital, care home, prison)
- A private or family household → **GO TO** Individual questions on page 4

A2 What is your position in this establishment?

↻ If you are answering on behalf of someone else, please record their position and not your own

- Resident (for example, student, member of armed forces, patient, detainee)
- Staff or owner
- Family member or partner of staff or owner
- Staying temporarily (no usual UK address)



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Individual questions

P Are you answering these questions for yourself or for someone else?

For myself

For someone else – please ensure their details and not your own are inserted in this questionnaire

1 What is your name?

First name

Middle name(s)

Last name

2 What is your date of birth?

Day Month Year

3 What is your sex?

A A question about gender identity will follow if you are aged 16 or over

Female

Male

4 On 21 March 2021, what is your legal marital or registered civil partnership status?

Never married and never registered a civil partnership → **GO TO 6**

Married

In a registered civil partnership

Separated, but still legally married

Separated, but still legally in a civil partnership

Divorced

Formerly in a civil partnership which is now legally dissolved

Widowed

Surviving partner from a registered civil partnership

5 Who is (was) your legal marriage or registered civil partnership to?

Someone of the opposite sex

Someone of the same sex

6 Do you stay at another address for more than 30 days a year?

A These days could be in a row or separate

No → **GO TO 8**

Yes, write in other UK address below

Postcode

OR yes, outside the UK, write in country

7 What is that address?

Armed forces base address

Another address when working away from home

Student's home address

Student's term-time address

Another parent or guardian's address

Partner's address

Holiday home

Other

8 Are you a schoolchild or student in full-time education?

Yes No → **GO TO 10**

9 During term time, where do you usually live?

At the address on the front of this questionnaire

At the address in question 6 → **GO TO 51**

At another address → **GO TO 51**

10 What is your country of birth?

Wales → **GO TO 13**

England → **GO TO 13**

Scotland → **GO TO 13**

Northern Ireland → **GO TO 13**

Republic of Ireland

Elsewhere, write in current name of the country



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Individual questions – continued

| | |
|--|--|
| <p>16 What is your religion?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> No religion</p> <p><input type="checkbox"/> Christian (all denominations)</p> <p><input type="checkbox"/> Buddhist</p> <p><input type="checkbox"/> Hindu</p> <p><input type="checkbox"/> Jewish</p> <p><input type="checkbox"/> Muslim</p> <p><input type="checkbox"/> Sikh</p> <p><input type="checkbox"/> Any other religion, write in</p> <p><input type="text"/></p> | <p>22 Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No → GO TO 24</p> |
| <p>17 Can you understand, speak, read or write Welsh?</p> <p>🔄 Tick all that apply</p> <p><input type="checkbox"/> Understand spoken Welsh</p> <p><input type="checkbox"/> Speak Welsh</p> <p><input type="checkbox"/> Read Welsh</p> <p><input type="checkbox"/> Write Welsh</p> <p><input type="checkbox"/> OR none of the above</p> | <p>23 Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?</p> <p><input type="checkbox"/> Yes, a lot</p> <p><input type="checkbox"/> Yes, a little</p> <p><input type="checkbox"/> Not at all</p> |
| <p>18 What is your main language?</p> <p><input type="checkbox"/> English or Welsh → GO TO 20</p> <p><input type="checkbox"/> Other, write in (including British Sign Language)</p> <p><input type="text"/></p> | <p>24 Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?</p> <p>🔄 Exclude anything you do as part of your paid employment</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, 9 hours a week or less</p> <p><input type="checkbox"/> Yes, 10 to 19 hours a week</p> <p><input type="checkbox"/> Yes, 20 to 34 hours a week</p> <p><input type="checkbox"/> Yes, 35 to 49 hours a week</p> <p><input type="checkbox"/> Yes, 50 or more hours a week</p> |
| <p>19 How well can you speak English?</p> <p>Very well Well Not well Not at all</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> | <p>25 If you are aged 16 or over → GO TO 26</p> <p>If you are aged 15 or under → GO TO 51</p> |
| <p>20 What passports do you hold?</p> <p>🔄 Tick all that apply</p> <p><input type="checkbox"/> United Kingdom</p> <p><input type="checkbox"/> Ireland</p> <p><input type="checkbox"/> Other, write in</p> <p><input type="text"/></p> <p><input type="checkbox"/> OR none</p> | <p>26 Which of the following best describes your sexual orientation?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> Straight/Heterosexual</p> <p><input type="checkbox"/> Gay or Lesbian</p> <p><input type="checkbox"/> Bisexual</p> <p><input type="checkbox"/> Other sexual orientation, write in</p> <p><input type="text"/></p> |
| <p>21 How is your health in general?</p> <p>Very good Good Fair Bad Very bad</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> | <p>27 Is the gender you identify with the same as your sex registered at birth?</p> <p>🔄 This question is voluntary</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No, write in gender identity</p> <p><input type="text"/></p> |



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Individual questions – continued

28 The next set of questions is about your qualifications.

- Record any qualifications you have ever achieved in Wales, England or worldwide, including equivalents, even if you are not using them now

29 Have you completed an apprenticeship?

- For example, trade, higher, foundation, modern

Yes No

30 Have you achieved a qualification at degree level or above?

- For example, degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing

Yes No

31 Have you achieved any other qualifications?

- Tick all that apply

GCSEs or equivalent

- 5 or more GCSEs (A*-C, 9-4), O levels (passes), CSEs (grade 1) or Intermediate Welsh Baccalaureate
- Any other GCSEs, O levels or CSEs (any grades), Basic Skills course or Foundation Welsh Baccalaureate

AS, A level or equivalent

- 2 or more A levels, 4 or more AS levels or Advanced Welsh Baccalaureate
- 1 A level, 2-3 AS levels
- 1 AS level

NVQ or equivalent

- NVQ level 3, BTEC National, OND or ONC, City and Guilds Advanced Craft
- NVQ level 2, BTEC General, City and Guilds Craft
- NVQ level 1

OR other or no qualifications

- Any other qualifications, equivalent unknown
- No qualifications

32 Have you **previously** served in the UK Armed Forces?

- Current serving members should only tick "no"

- Yes, previously served in **Regular** Armed Forces
- Yes, previously served in **Reserve** Armed Forces
- OR** no

33 In the last seven days, were you doing any of the following?

- Tick all that apply
- Include casual or temporary work, even if only for one hour

- Working as an employee → **GO TO 39**
- Self-employed or freelance → **GO TO 39**
- Temporarily away from work ill, on holiday or temporarily laid off → **GO TO 39**
- On maternity or paternity leave → **GO TO 39**
- Doing any other kind of paid work → **GO TO 39**
- OR** none of the above

34 Which of the following describes what you were doing in the last seven days?

- Tick all that apply

- Retired (whether receiving a pension or not)
- Studying
- Looking after home or family
- Long-term sick or disabled
- Other

35 In the last four weeks, were you actively looking for any kind of paid work?

- Yes
- No

36 If a job became available now, could you start it within two weeks?

- Yes
- No

37 In the last seven days, were you waiting to start a job already accepted?

- Yes
- No

38 Have you ever done any paid work?

- Yes, in the last 12 months
- Yes, but not in the last 12 months
- No, have never worked → **GO TO 51**

39 Answer the remaining questions for your main job or, if not working, your last main job.

- Your main job is the job in which you usually work (worked) the most hours



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Individual questions – continued

| | |
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| <p>40 In your main job, what is (was) your employment status?</p> <p><input type="checkbox"/> Employee</p> <p><input type="checkbox"/> Self-employed or freelance without employees</p> <p><input type="checkbox"/> Self-employed with employees</p> | <p>46 If you had a job last week → GO TO 47</p> <p>If you were temporarily away from work last week → GO TO 47</p> <p>If you did not have a job last week → GO TO 51</p> |
| <p>41 What is (was) the name of the organisation or business you work (worked) for?</p> <p>☞ If you are (were) self-employed in your own business, write in your business name</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> OR no organisation or work (worked) for a private individual</p> | <p>47 In your main job, how many hours a week do you usually work?</p> <p>☞ Include paid and unpaid overtime</p> <p>0 to 15 16 to 30 31 to 48 49 or more</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> |
| <p>42 What is (was) your full job title?</p> <p>☞ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER</p> <p>☞ Do not state your grade or pay band</p> <p>_____</p> <p>_____</p> | <p>48 How do you usually travel to work?</p> <p>☞ Tick one box only for the longest part, by distance, of your usual journey to work</p> <p><input type="checkbox"/> Work mainly at or from home</p> <p><input type="checkbox"/> Underground, metro, light rail, tram</p> <p><input type="checkbox"/> Train</p> <p><input type="checkbox"/> Bus, minibus or coach</p> <p><input type="checkbox"/> Taxi</p> <p><input type="checkbox"/> Motorcycle, scooter or moped</p> <p><input type="checkbox"/> Driving a car or van</p> <p><input type="checkbox"/> Passenger in a car or van</p> <p><input type="checkbox"/> Bicycle</p> <p><input type="checkbox"/> On foot</p> <p><input type="checkbox"/> Other</p> |
| <p>43 Briefly describe what you do (did) in your main job.</p> <p>_____</p> <p>_____</p> | <p>49 Where do you mainly work?</p> <p><input type="checkbox"/> At a workplace or report to a depot</p> <p><input type="checkbox"/> At or from home → GO TO 51</p> <p><input type="checkbox"/> An offshore installation → GO TO 51</p> <p><input type="checkbox"/> No fixed place → GO TO 51</p> |
| <p>44 What is (was) the main activity of your organisation, business or freelance work?</p> <p>☞ For example, CLOTHING RETAIL, GENERAL HOSPITAL, PRIMARY EDUCATION, FOOD WHOLESALE</p> <p>☞ If you are (were) a civil servant, write CIVIL SERVICE</p> <p>☞ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority</p> <p>_____</p> <p>_____</p> <p>_____</p> | <p>50 What is the address of your workplace or depot?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;">Postcode</p> <p>_____</p> |
| <p>45 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>51 There are no more questions.</p> <p>→ GO TO page 2 for instructions explaining how to return your questionnaire, then</p> <p>→ GO TO the Declaration on the front page</p> |



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PART 7

Communal Establishment Questionnaire (paper)



census
2021

Communal Establishment
Questionnaire
Wales

| | |
|---|--|
| <p>FREEPOST Census 2021</p> | <p>The information on this form is protected by law. Find out more in the leaflet that comes with this questionnaire.</p> <p>If the establishment's name or address is incorrect or missing, write in the correct address here:</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p style="text-align: right;">Postcode</p> <p><input type="text"/></p> <p><input type="text"/></p> |
| <p>The manager or person in charge of this establishment is responsible for completing this questionnaire.</p> <p>What you need to do</p> <ul style="list-style-type: none"> • Answer the questions about the establishment on the next page. • Ensure all usual residents receive an Individual Questionnaire (usual residents are those people, including staff, who are staying, or expect to stay, in the establishment for six months or more). • Count shift workers (for example, hotel porters) who are staying overnight on 21 March 2021 as visitors. • Return residents' completed paper questionnaires in the package provided. <p>Everyone should complete the census on 21 March 2021 or as soon as possible after.</p> <p>Thank you for taking part.</p> <p></p> <p>Professor Sir Ian Diamond National Statistician</p> | <p>Declaration</p> <p>This questionnaire has been completed to the best of my knowledge and belief.</p> <p>Signature <input type="text"/></p> <p>Date <input type="text"/></p> <p>If you have lost your envelope, please return your completed questionnaire to: FREEPOST Census 2021</p> <p>Where you can get help: www.census.gov.uk/help Contact Centre 0800 169 2021 NGT (18001) 0800 169 2021 Language helpline 0800 587 2021</p> |
| <p>You must take part in the census by law. If you do not, or if you supply false information, you could be prosecuted and fined.</p> | <p> Office for National Statistics</p> <p>CE2</p> |

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Establishment questions

| | |
|---|---|
| <p>1 What is the nature of this establishment? <input type="checkbox"/> Tick one box only</p> <p>Medical or care</p> <p><input type="checkbox"/> Care home without nursing</p> <p><input type="checkbox"/> Care home with nursing</p> <p><input type="checkbox"/> Children's home (including secure units)</p> <p><input type="checkbox"/> General hospital</p> <p><input type="checkbox"/> Mental health hospital or unit (including secure units)</p> <p><input type="checkbox"/> Other hospital</p> <p><input type="checkbox"/> Other medical or care establishment</p> <p>Education</p> <p><input type="checkbox"/> School</p> <p><input type="checkbox"/> University (for example, halls of residence)</p> <p><input type="checkbox"/> Other education establishment</p> <p>Armed forces</p> <p><input type="checkbox"/> Defence establishment (including ships)</p> <p>Detention</p> <p><input type="checkbox"/> Prison service establishment (including young offender institutions)</p> <p><input type="checkbox"/> Approved premises (probation or bail hostel)</p> <p><input type="checkbox"/> Detention centre</p> <p><input type="checkbox"/> Other detention establishment</p> <p>Travel or temporary accommodation</p> <p><input type="checkbox"/> Hotel, guest house, B&B, youth hostel (including inns and pubs)</p> <p><input type="checkbox"/> Holiday accommodation (for example, holiday parks)</p> <p><input type="checkbox"/> Hostel or temporary shelter for homeless people</p> <p><input type="checkbox"/> Other travel or temporary accommodation</p> <p>Other</p> <p><input type="checkbox"/> Religious establishment</p> <p><input type="checkbox"/> Staff or worker accommodation only</p> <p><input type="checkbox"/> Other establishment</p> | <p>2 Who is responsible for the management of this establishment?</p> <p><input type="checkbox"/> NHS</p> <p><input type="checkbox"/> Local authority</p> <p><input type="checkbox"/> Government department or agency</p> <p><input type="checkbox"/> Registered social landlord or housing association</p> <p><input type="checkbox"/> Charity or voluntary organisation</p> <p><input type="checkbox"/> Private owner or company</p> <p><input type="checkbox"/> Higher or further education institution</p> <p><input type="checkbox"/> Other</p> <p>3 Do any of the following currently live in this establishment? <input type="checkbox"/> Tick all that apply</p> <p><input type="checkbox"/> Anyone who has already spent, or is expected to spend, 6 months or more in this establishment, even if they are away on 21 March 2021</p> <p><input type="checkbox"/> UK residents who are staying in this establishment on 21 March 2021 and have no other usual UK address</p> <p><input type="checkbox"/> People who usually live outside the UK who have stayed, or intend to stay, in the UK for 3 months or more who do not have another UK address</p> <p><input type="checkbox"/> Students or schoolchildren who stay in this establishment during term time</p> <p><input type="checkbox"/> Yourself, your family, staff, and any others who live in this establishment</p> <p><input type="checkbox"/> OR none of the above</p> <p>4 How many people are currently living in this establishment?</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>5 Are any of the following visitors staying overnight in this establishment on 21 March 2021? <input type="checkbox"/> Tick all that apply</p> <p><input type="checkbox"/> Anyone with another usual address in the UK who has spent, or expects to spend, less than 6 months in this establishment</p> <p><input type="checkbox"/> Anyone from outside the UK who intends to stay in the UK for less than 3 months</p> <p><input type="checkbox"/> OR none of the above</p> <p>6 How many visitors are staying overnight in this establishment on 21 March 2021?</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> |
|---|---|

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PART 8

Functions and Features of Online Questionnaires

1. Online questionnaires and the Authority website hosting online questionnaires will contain information relating to the census and to the completion and submission of online questionnaires, including information about—

- (a) starting an online questionnaire,
- (b) the persons who must complete the census,
- (c) members of the household answering the parts of a questionnaire relevant to them,
- (d) when the census should be completed,
- (e) how the Authority will use and protect information relating to a prescribed person,
- (f) where and how help to complete an online questionnaire can be found, and
- (g) the mandatory nature of the census as a whole, but the voluntary nature of certain questions within the census.

2. Online questionnaires and the Authority website hosting online questionnaires will contain functions and features to enable—

- (a) a prescribed person to access the relevant online questionnaire by entering a unique access code online,
- (b) a unique access code to link automatically to an address of a household or a communal establishment,
- (c) the address of a prescribed person to be displayed automatically where relevant in different parts of an online questionnaire,
- (d) where an online questionnaire is being completed by a person on behalf of another person in accordance with these Regulations, the automatic modification of any words, letters or punctuation necessary to ensure the grammatical sense of instructions or questions, including the automatic replacement of the words ‘you’ and ‘your’ in any question with the name of the person on whose behalf the online questionnaire is being completed,
- (e) the use of responses regarding the relationship of one person to other persons in a household of five or more persons to infer the relationship of those other persons to each other, including for this purpose the function to ask the intermediate question “Are any of these people related to you?” or third-person variations of that question,
- (f) the display of text containing instructions or information relating to the completion of specific questions, or generally to the completion of the online questionnaire,
- (g) information to be displayed as to why a particular question is important,
- (h) questions to be answered in different sequences,
- (i) a range of pre-determined response options to be offered in relation to a question,
- (j) typed responses to be assisted by predictive text (where appropriate),
- (k) routing through the online questionnaire by the use of routing questions,
- (l) indication to be given that a routing question has not been answered,
- (m) the requirement that a routing question be answered before further questions may be answered,
- (n) the prevention of mutually incompatible answers being selected in response to a question,
- (o) the display of a prompt where appropriate to encourage the review of a response,
- (p) the amendment of a response before submission, and

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(q) a partially completed online questionnaire to be saved and continued later.