




<p>FREEPOST Census 2021</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>If your address is incorrect or missing, enter your correct address below:</p> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="display: flex; justify-content: space-between;"> <div style="border-bottom: 1px solid black; width: 40%;"></div> <div style="text-align: center; font-size: small;">Postcode</div> <div style="border-bottom: 1px solid black; width: 55%;"></div> </div>
<p>Declaration</p> <p>This questionnaire has been completed to the best of my knowledge and belief.</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="font-size: small; color: #4F81BD;">Signature</p> <div style="border: 1px solid black; height: 60px; margin-top: 5px;"></div> </div> <div style="width: 45%;"> <p style="font-size: small; color: #4F81BD;">Date</p> <div style="border: 1px solid black; height: 60px; margin-top: 5px;"></div> </div> </div>	
<p>If you have lost your envelope, please return your completed questionnaire to: FREEPOST Census 2021</p>	
<p>Where you can get help:</p> <p>www.census.gov.uk/help</p> <p>Contact Centre 0800 169 2021</p> <p>NGT (18001) 0800 169 2021</p> <p>Language helpline 0800 587 2021</p>	
<p>Your information is protected by law.</p> <p>Find out more in the leaflet that comes with this questionnaire.</p>	

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Status: This is the original version (as it was originally made).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

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:

--	--	--	--	--	--	--

 or this:

J	O	E	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								

 STREET
- 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

First name

SARA

Last name

JONES

How is Person 6

related to Person:

1

Husband or wife

☐

Legally registered civil partner

☐

Partner

☐

Son or daughter

☒

Stepchild

☐

Brother or sister (including half-brother or half-sister)

☐

Name of Person 7

First name

GETHIN

Last name

JONES

How is Person 7

related to Person:

1

6

Husband or wife

☐

☐

Legally registered civil partner

☐

☐

Partner

☐

☐

Son or daughter

☒

☐

Stepchild

☐

☐

Brother or sister (including half-brother or half-sister)

☐

☒

Name of Person 1

From H3 on your first Household Questionnaire

First name

Last name

Name of Person 6

First name

Last name

How is Person 6

related to Person:

1

Husband or wife

☐

Legally registered civil partner

☐

Partner

☐

Son or daughter

☐

Stepchild

☐

Brother or sister (including half-brother or half-sister)

☐

Stepbrother or stepsister

☐

Mother or father

☐

Stepmother or stepfather

☐

Grandchild

☐

Grandparent

☐

Relation – other

☐

Unrelated (including foster child)

☐

Name of Person 7

First name

Last name

How is Person 7

related to Person:

1

6

Husband or wife

☐

☐

Legally registered civil partner

☐

☐

Partner

☐

☐

Son or daughter

☐

☐

Stepchild

☐

☐

Brother or sister (including half-brother or half-sister)

☐

☐

Stepbrother or stepsister

☐

☐

Mother or father

☐

☐

Stepmother or stepfather

☐

☐

Grandchild

☐

☐

Grandparent

☐

☐

Relation – other

☐

☐

Unrelated (including foster child)

☐

☐

Name of Person 8

First name

Last name

How is Person 8

related to Person:

1

6

7

Husband or wife

☐

☐

☐

Legally registered civil partner

☐

☐

☐

Partner

☐

☐

☐

Son or daughter

☐

☐

☐

Stepchild

☐

☐

☐

Brother or sister (including half-brother or half-sister)

☐

☐

☐

Stepbrother or stepsister

☐

☐

☐

Mother or father

☐

☐

☐

Stepmother or stepfather

☐

☐

☐

Grandchild

☐

☐

☐

Grandparent

☐

☐

☐

Relation – other

☐

☐

☐

Unrelated (including foster child)

☐

☐

☐



Name of Person 10					
First name	<input type="text"/>				
Last name	<input type="text"/>				
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"/>	<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"/>	<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"/>	<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"/>	<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"/>	<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"/>	<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"/>	<input type="checkbox"/>

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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
<input type="text"/>	<input type="text"/>

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									
<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"/>

☐ **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

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 → **GOTO 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 → **GOTO 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 → **GOTO 26** If you are aged 15 or under → **GOTO 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 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



112009

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
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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>P Thinking about the people listed in question C1, are you Person 7?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No – enter the details for Person 7 in this section</p> <p>1 What is your name? (Person 7 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 <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <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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112011

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 → **GOTO 13**

If you arrived on or after 21 March 2020 → **GOTO 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 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



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Page 13

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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



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Individual questions – Person 7 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> <table border="1"> <tr> <td>0 to 15</td> <td>16 to 30</td> <td>31 to 48</td> <td>49 or more</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	0 to 15	16 to 30	31 to 48	49 or more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0 to 15	16 to 30	31 to 48	49 or more						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<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 7.</p> <p>→ GO TO questions for Person 8</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 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 <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 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 8 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 → **GOTO 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 → **GOTO 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 → **GOTO 26** If you are aged 15 or under → **GOTO 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 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



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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
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 8.

→ **GO TO** questions for Person 9

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 9 start here

<p>P Thinking about the people listed in question C1, are you Person 9?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No – enter the details for Person 9 in this section</p> <p>1 What is your name? (Person 9 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 <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <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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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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Page 23

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 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

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

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51 There are no more questions for Person 9.

➔ **GO TO** questions for Person 10

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 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 <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 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

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 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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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?

C 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?

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

C 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?

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

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

C 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?

C 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?

C 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 10.

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

→ **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

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

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



112031

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Visitor questions – continued

Visitor G

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 H

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 I

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

Now ➔ **GO TO** the Declaration on the front page

