



# POPULATION AND HOUSING CENSUS MALAYSIA 2000

DOCUMENT 2b

LIVING QUARTERS (LQ), HOUSEHOLD (HH)  
AND PERSON PARTICULARS

CONTROL PARTICULARS		IDENTIFICATION PARTICULARS <small>(PLEASE FILL UP BEFORE STARTING FIELD WORK)</small>	
<b>K1</b>	ADDRESS .....		
<b>K2</b>	LQ NUMBER <input style="width: 40px;" type="text"/>	<b>K5</b>	HOUSEHOLD NUMBER <small>(For the second HH and thereafter, cancel Part A and begin with Part B)</small> <input style="width: 40px;" type="text"/>
<b>K3</b>	<input style="width: 40px;" type="text"/> WHAT IS THE TOTAL NUMBER OF PERSONS WHO USUALLY LIVE IN THIS LIVING QUARTERS?	} <i>For Household 02 and thereafter cancel K3 and K4.</i>	(1) STATE ..... <input style="width: 40px;" type="text"/>
<b>K4</b>	<input style="width: 40px;" type="text"/> HOW MANY HOUSEHOLDS LIVE IN THIS LIVING QUARTERS?		(2) ADMINISTRATIVE DISTRICT / JAJAHAN ..... <input style="width: 40px;" type="text"/>
<i>Household is a group of persons who :</i> - Usually live together and - Make common provisions for food and other essentials of living			(3) CENSUS DISTRICT NUMBER ..... <input style="width: 40px;" type="text"/>
			(4) CENSUS CIRCLE NUMBER ..... <input style="width: 40px;" type="text"/>
			(5) ENUMERATION BLOCK NUMBER ..... <input style="width: 40px;" type="text"/>

**A. LIVING QUARTERS PARTICULARS**      - Mark  in one of the boxes to Questions A1 - A4 and A6 - A9  
 - Write the number of bedrooms inside the box that is provided for Question A5

**A1 TYPE OF LIVING QUARTERS**  
*(OBSERVATION QUESTION)*

i) BUILT OR CONVERTED FOR LIVING Housing Unit

*House*

01  Detached

02  Semi-detached

03  Terrace, Row or Link, Townhouse

04  Longhouse ( Sabah & Sarawak only )

*Flat / Apartment / Condominium / Shophouse*

05  Flat / Apartment / Condominium

06  Shophouse / Office

*Room ( with direct access )*

07  In Shophouse, Office; In / Attached to House, Factory, Mill etc.

*Improvised / Temporary Hut*

08  Improvised / Temporary Hut, etc.

*Others*

09  Others ( e.g. mobile unit )  
*(Specify) .....*

Collective Living Quarters

10  Hotel, Lodging House, Rest House, etc.

11  Medical Institution ( e.g. Hospital, etc.

12  Educational Institution ( e.g. Hostel )

13  Charitable or Social Welfare Institution

14  Religious Home  
*(Specify) .....*

15  Prison, Detention Centre etc.

16  Labour Camp

17  Others  
*(Specify) .....*

(ii) NOT INTENDED FOR LIVING BUT USED AS SUCH ON CENSUS DAY

18  In a permanent building ( e.g. office, school, shop, mosque, etc.)

19  Others  
*(Specify) .....*

**A2 CONSTRUCTION MATERIAL OF OUTER WALLS**  
*(OBSERVATION QUESTION)*

1  Brick

2  Plank

3  Brick and Plank

4  Others  
*(Specify) .....*

**A3 OCCUPIED OR VACANT LIVING QUARTERS**

**Occupied**

1  Occupied

**Vacant**

2  Newly completed / for rent or sale

3  For repair / renovation

4  Holiday Resort

5  Seasonal Workers Quarters

6  Dilapidated

7  Others  
*(Specify) .....*

*(END INTERVIEW FOR THIS LQ)*

**A4 OWNER OF THIS LIVING QUARTERS**

1  Individual Owner

2  Government / Statutory Body

3  Private

4  Others  
*(Specify) .....*

**A5 NUMBER OF BEDROOMS**

**A6 DRINKING WATER SUPPLY FACILITY**

1  Treated piped water

2  Other sources  
*(Specify) .....*

**A7 ELECTRICITY SUPPLY FACILITY**

**Supplied**

1  24 hours a day

2  Less than 24 hours a day

**Not Supplied**

3  Self-owned generator

4  None

**A8 TYPE OF TOILET FACILITY**

1  Flush System

2  Pour flush

3  Pit

4  Enclosed space over water

5  None

**A9 DOES THE GARBAGE COLLECTION FACILITY REACH YOUR LIVING QUARTERS / AREA?**

1  Yes, to this living quarters

2  Yes, to this area

3  None

→ **GO TO PART B**  
*(Questions B1 - B6, B11 only)*

**B. HOUSEHOLD PARTICULARS** - Mark  inside the relevant box for Questions B2, B6 - B10

- **Households** - A Household consists of related and / or unrelated persons who usually live together and make common provisions for food and other essentials of living.
- **Head of Household** - The Head of Household is any one of the household members who **USUALLY LIVES** in the Living Quarters and is regarded as head by the other household members.

<b>B1</b>	<b>B2</b>	<b>B3</b>	<b>B4</b>	<b>B5</b>	<b>B6</b>	<b>B7</b>
<b>Give the names of persons who usually live together as members of this household on CENSUS DAY.</b>  ( Do not include persons who live in separate living quarters and who return to this living quarters during weekends / holidays only.)  <b>PLEASE REFER TO NOTE PROVIDED BELOW ON THIS PAGE.</b>  <b>Start with Head of Household followed by :</b> <ul style="list-style-type: none"><li>- Spouse of Head</li><li>- Unmarried children</li><li>- Married children and their families</li><li>- Father / mother of Head or spouse of Head</li><li>- Brother / sisters of Head or spouse of Head</li><li>- Other relatives</li><li>- Others ( e.g. servant, tenant, boarder )</li></ul>	<b>Besides the names of persons mentioned in Question B1, did you miss out / are unsure of including any other person who eats and lives together in this Household?</b> <ul style="list-style-type: none"><li>- baby, young children</li><li>- old people</li><li>- student(s) in primary / secondary school hostel</li><li>- servant</li><li>- tenant, boarder</li><li>- usual household member who is temporarily away</li></ul> <input type="checkbox"/> Yes ( Please list their names in B1 and complete columns B3 until B6 )  <input type="checkbox"/> No ( Ask Question B3 and thereafter )	<b>Relationship to Head of Household</b>	<b>Sex</b>  M - Male F - Female	<b>Person Number ( 3 digit )</b>	<b>Is any member of this household handicapped?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes  <b>Type of handicap</b> <ul style="list-style-type: none"><li>1 - Sight</li><li>2 - Hearing</li><li>3 - Speech</li><li>4 - Limbs</li><li>5 - Mental</li><li>6 - Others</li></ul> ( Fill in the respective handicap code for the relevant member only; transfer the code(s) to Question C30 for the respective person )  ( Multiple answers accepted )	<b>Are the following items available for use by the members of this Household.</b>  Mark X in the relevant boxes  ( Multiple answers accepted )
		<b>HEAD</b>				<b>Motorcar</b>
						<input type="checkbox"/> 1 unit
						<input type="checkbox"/> 2 units
						<input type="checkbox"/> 3 units or more
						<b>Motorcycle / Scooter</b>
						<input type="checkbox"/> 1 unit
						<input type="checkbox"/> 2 units or more
						<b>Bicycle</b>
						<input type="checkbox"/> Bicycle
						<b>Others</b>
						<input type="checkbox"/> Air-Conditioner
						<input type="checkbox"/> Washing Machine
						<input type="checkbox"/> Refrigerator
						<input type="checkbox"/> Microwave
						<input type="checkbox"/> Radio / Hi-fi
						<input type="checkbox"/> Television
						<input type="checkbox"/> Video / VCD / DVD
						<input type="checkbox"/> Fixed Telephone Line
						<input type="checkbox"/> Mobile phone
						<input type="checkbox"/> Personal Computer (PC)
						<input type="checkbox"/> Internet Subscription
						<b>None of the items mentioned above</b>
						<input type="checkbox"/>

**B8**  
(a) Does any member of this HOUSEHOLD own this living quarters?  
1  Yes → ( Go to B11 )  
2  No  
↓  
(b) Does any member of this household own any other living quarters in Malaysia?  
1  Yes  
2  No

**B9**  
Is this household paying rent for this living quarters?  
1  Yes, furnished  
2  Yes, not furnished  
3  None → ( Go to B11 )

**B10**  
How much is the current monthly rental payment?  
1  Less than RM 100  
2  RM 100-249  
3  RM 250-499  
4  RM 500-749  
5  RM 750-999  
6  RM 1000 and more

**B11**  
**SUMMARY**  
( No. of usual household members )  
  
( From Question B1 and B4 )

Male	Female	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>

**NOTE FOR QUESTION B1**

- **Do not forget to include :**
  - (i) Babies born on or before Census Day and still living on Census Day.
  - (ii) Boarders, lodgers, visitors, maids, elderly persons, relatives who usually live in this household.
  - (iii) Usual members who are temporarily away because of work, study, on leave, on vacation ( in and outside Malaysia ) etc.
  - (iv) Students ( primary and secondary schools ) not living with parents but in hostels ( in Malaysia ) although for more than 6 months in the year 2000.
  - (v) Any person staying / will be staying in hospital for less than 6 months in the year 2000.
  - (vi) Those who passed away after Census Day.
- **Do not include :**
  - (i) Babies born after Census Day.
  - (ii) Those who passed away before Census Day.
  - (iii) Malaysian students who have been / will be living overseas for 6 months or more in the year 2000.
  - (iv) Students ( college / university ) in Malaysia who do not live with parents for a period of 6 months or more in the year 2000.
  - (v) Malaysians working overseas for a period of 6 months or more in the year 2000.

# C. PERSON PARTICULARS

- Mark **X** in one of the boxes for Questions C3, C4, C7, C9, C10(a), C12, C14 - C18, C20 - C24, C25(c), C27 - C28  
 - Write the number or code in the boxes for Questions C1, C5-C6, C8, C10(b) & (c), C11, C13, C29(a) & (b), C30  
 - Write the number or words on the dotted lines.

**PART C TO BE FILLED FOR EACH PERSON WITH A GIVEN PERSON NUMBER IN B5.**

\_\_\_\_\_ member from a total of \_\_\_\_\_ household members.

**C1 PERSON NUMBER**  
 (Obtain from column B5)

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**C8 WHICH ETHNIC GROUP OR DIALECT GROUP DO YOU BELONG TO?**  
 (Refer to code card - Document 4)

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**C13 FOR NON-MALAYSIAN CITIZEN, PLEASE SPECIFY COUNTRY**  
 (Refer to code card - Document 4)

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(Write Country) \_\_\_\_\_

**C2 NAME** (Corresponding to C1)

\_\_\_\_\_

**C9 WHAT IS YOUR RELIGION?**

- 1  Islam
- 2  Christianity
- 3  Hinduism
- 4  Buddhism
- 5  Confucianism / Taoism, Other Traditional Chinese Religion
- 6  Tribal / Folk Religion
- 7  Others (Specify) \_\_\_\_\_
- 8  No Religion

**C14 WHERE WAS YOUR USUAL PLACE OF RESIDENCE 5 YEARS AGO (i.e IN 1995)?**  
 [For children aged less than 5 years (i.e. born after 1995) record mother's usual residence at time of his/her birth]

- 1  This house as in Question K1
- 2  Different house (Give full address)
  - (a) Name Of Street / Housing Estate  
 \_\_\_\_\_
  - (b) Name of Town / Village  
 \_\_\_\_\_
  - (c) Mukim / District (Kelantan) / Sub-District (Sarawak)  
 \_\_\_\_\_
  - (d) Administrative District / Jajahan (Kelantan)  
 \_\_\_\_\_
  - (e) State / Country  
 \_\_\_\_\_

**C3 RELATIONSHIP TO HEAD OF HOUSEHOLD**  
 (Obtain from column B3)

- 01  Head of Household
- 02  Spouse of Head
- 03  Unmarried child of Head
- 04  Married child of Head
- 05  Daughter-in-law / Son-in-law of Head
- 06  Grandchild of Head
- 07  Father / Mother of Head or spouse of Head
- 08  Brother / sister of Head or spouse of Head
- 09  Other relatives of Head or spouse of Head
- 10  Others who are not related to Head or spouse of Head

**C10 BIRTHPLACE**

(a) Where were you born?

- 1  Malaysia → [Go to C10 (b)]
- 2  Outside Malaysia → [Go to C10 (c)]

(b) State of birth?  
 (Refer to code card - Document 4)

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→ (Go to C12)  
 (Specify State) \_\_\_\_\_

(c) Country of birth?  
 (Refer to code card - Document 4)

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(Specify Country) \_\_\_\_\_

C14.1	C14.2	C14.3	For Office Use Only
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**C4 SEX** (Obtain from column B4)

- 1  Male
- 2  Female

**C5 WHAT IS YOUR DATE OF BIRTH?**

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Date    Month    Year

(If no information for C5, ask C6)

**C11 YEAR OF FIRST ARRIVAL IN MALAYSIA**  
 (For those born outside Malaysia)

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**C15 HAVE YOU EVER BEEN TO SCHOOL / COLLEGE / POLYTECHNIC / UNIVERSITY?**  
 (Including Pre-school)

- 1  Yes, currently schooling (full time)
- 2  Yes, currently schooling (part time)
- 3  Completed schooling
- 4  No, too young → (END INTERVIEW FOR THIS PERSON)
- 5  Never attended school → (Go to C17)

**C6 HOW OLD ARE YOU? (In completed years)**  
 (If age is less than 1 year write "00"  
 If age is 99 years or more write "99")

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**C12 CITIZENSHIP / RESIDENCE STATUS**

**Malaysian Citizen**

- 1  Malaysian Citizen → (Go to C14)

**Non-Malaysian Citizen**

- 2  Permanent Resident
- 3  Expatriate
- 4  Foreign Visitor
- 5  Foreign Student
- 6  Foreign Worker
- 7  Others (specify) \_\_\_\_\_

**C16 WHAT IS THE HIGHEST LEVEL OF EDUCATION ATTAINED / CURRENTLY STUDYING?**

- 1  Pre-school
- 2  Primary School (Standard / Year 1 till 6)
- 3  Lower Secondary (Remove / Form 1 till 3)
- 4  Upper Secondary (Form 4 till 5, GCE O Level)
- 5  Vocational / Technical (Form 4 till 5)
- 6  Trade & Technical Skills Institution
- 7  Post Secondary (Form 6, GCE A Level, Matriculation)
- 8  Tertiary (Polytechnic / College / University)

(END INTERVIEW FOR PERSON AGED LESS THAN 10 YEARS)

**QUESTION C17 - C29 FOR PERSON AGED 10 YEARS AND ABOVE**

**C17** WHAT IS THE HIGHEST CERTIFICATE / DIPLOMA / DEGREE YOU HAVE ATTAINED?

01  None

02  PMR / SRP / LCE

03  SPM / MCE / SC / GCE O Level → (Go to C20)

04  STPM / HSC / STA / 4 Thanawi / GCE A Level

05  SPVM / SPM(V) / MCVE → (Go to C19)

06  Certificate / Diploma in trade or technical skills

07  Certificate ( Polytechnic / College )

08  Diploma ( Polytechnic / College )

09  Degree / Advanced Diploma

10  Post Graduate Certificate / Diploma

11  Post Graduate Degree

**C22** DO YOU HAVE ANY WORK TO RETURN TO?

1  Yes → (Go to C25)

2  No

**C23** DID YOU LOOK FOR WORK DURING THE LAST 7 DAYS?

1  Yes → \* (END INTERVIEW FOR THIS PERSON)

2  No

**C24** WHAT IS THE MAIN REASON FOR NOT SEEKING WORK?

01  Believe no suitable job available / bad weather / sick / confinement / will start new job / waiting for answers to job applications / no qualification

02  Housewife

03  Still schooling

04  Going for further studies

05  Handicapped / disabled → \* (END INTERVIEW FOR THIS PERSON)

06  Not interested

07  Retired / too old

08  Too young

09  Others (Specify) \_\_\_\_\_

**C26** INDUSTRY

(a) What are the Activities / Services / Products of your place of work? (Describe in a few words)

\_\_\_\_\_

\_\_\_\_\_

(b) What is the Name and Address of the your Company / Employer? (If relevant only)

(i) Name of Company / Employer : .....

\_\_\_\_\_

(ii) Address of Company / Employer : .....

\_\_\_\_\_

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**C18** FROM WHERE DID YOU OBTAIN YOUR CERTIFICATE / DIPLOMA / DEGREE?

**Within Malaysia**

1  Public Institution

2  Private Institution

**Overseas**

3  Overseas Institution

**C27** WHAT IS YOUR EMPLOYMENT STATUS?

1  Employer

2  Employee

3  Self-employed → \* (END INTERVIEW FOR THIS PERSON)

4  Unpaid family worker

**C19** WHAT WAS YOUR MAIN FIELD OF STUDY?

\_\_\_\_\_

\_\_\_\_\_

For Office Use Only

**FOR EVER MARRIED WOMAN ( SABAH, W.P. LABUAN AND SARAWAK ONLY )**

**C25** OCCUPATION

(a) What is your occupation?

\_\_\_\_\_

\_\_\_\_\_

(b) Please describe your duties / nature of work

\_\_\_\_\_

\_\_\_\_\_

(c) In which sector is your occupation :-

1  Government

2  Private

3  Own business

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**C28** HAVE YOU EVER GIVEN BIRTH?

1  Yes → (Go to C29)

2  No → (END INTERVIEW FOR THIS PERSON)

**C29** (a) Number of children ever born alive?

| |

(b) Number of children currently still living? (If none, record "00")

| |

**C20** CAN YOU READ AND WRITE IN ANY LANGUAGE?

1  Yes

2  No

**C30** HANDICAPPED : Copy code(s) from Question B6 into the box(es) given below ( if relevant ).

| | |

**C21** DID YOU WORK FOR AT LEAST 1 HOUR DURING THE LAST 7 DAYS? (Work means doing a job for salary / wages or profit or family gain)

1  Yes → (Go to C25)

2  No

\* In Sabah, W.P. Labuan and Sarawak, go to Question C28 for ever married woman.

REMINDER : If a Household has more than 7 members, please use the Continuation Person Form.