



Republic of the Philippines  
**PHILIPPINE STATISTICS AUTHORITY**

**EDGE PILOT SURVEY ON MEASURING ASSET OWNERSHIP AND ENTREPRENEURSHIP  
FROM A GENDER PERSPECTIVE**

**HOUSEHOLD QUESTIONNAIRE**

CONFIDENTIALITY: This survey is authorized by RA 10625. All data obtained cannot be used for taxation, investigation, or law enforcement purposes.

Booklet \_\_\_\_ of \_\_\_\_ Booklets

**A**

**GEOGRAPHIC IDENTIFICATION AND OTHER INFORMATION**

**I GEOGRAPHIC IDENTIFICATION CODES**

1 REGION	_____				
2 PROVINCE	_____				
3 MUN/CITY	_____				
4 BARANGAY	_____				
5 EA	.....				
6 SHSN	.....				
7 HCN	.....				

**IV RECORD OF INDIVIDUAL VISIT**

Visit	1	2	3
Time			
19 Began	_____	_____	_____
20 Ended	_____	_____	_____
21 Date	_____	_____	_____
22 Result Code	<input type="text"/>	<input type="text"/>	<input type="text"/>

**II DESIGN CODES**

8 PSU No.	.....			
9 Stratum	.....			
10 Number of Households in the Housing Unit	.....			

**RESULT CODES**

- 01 - Completed Interview
- 02 - Refusal - do not want to spend time/busy
- 03 - Refusal - invasion of privacy
- 04 - Refusal - Other, specify \_\_\_\_\_
- 05 - No Household Member at Home or No Competent Respondent at Home at Time of Visit
- 06 - Entire Household Absent for Extended Period of Time
- 07 - Vacant Housing Unit
- 08 - Housing Unit Demolished, Destroyed by Fire, Typhoon, etc.
- 09 - Address Not a Housing Unit
- 10 - Housing Unit Not Found
- 11 - Critical Area, Flooded Area
- 12 - Others, specify \_\_\_\_\_

	LINE NO.
11 Name of Primary Respondent:	<input type="text"/>
12 Name of Primary Respondent's Spouse/Partner:	<input type="text"/>
13 Name of Household Head:	<input type="text"/>
14 Name of Household Questionnaire Respondent	<input type="text"/>
15 Address of Household:	<input type="text"/>

**V HOUSEHOLD SIZE AND NUMBER OF ADULT MEMBERS FOR INTERVIEWED HOUSEHOLDS**

Household Size		No. of Adults (18 or above) in the Household	
Listing	Enumeration	Listing	Enumeration

**III RECORD OF RESPONDENTS TO THE INDIVIDUAL QUESTIONNAIRE**

Respondent	1	2	3
17 Line number of Adult Member Selected for Interview	<input type="text"/>	<input type="text"/>	<input type="text"/>
18 Result Code	<input type="text"/>	<input type="text"/>	<input type="text"/>

**VI 23 - Manner in which individual interviews conducted**

- 01 - Simultaneously
- 02 - Sequentially
- 03 - Simultaneously and sequentially
- 04 - Other

Is there any OCW/OFW member in the household? Yes - 01 ; No - 02

Name and Line Number of OFW/OCW \_\_\_\_\_

**VI CERTIFICATION**

I hereby certify that the data gathered in this questionnaire were obtained/reviewed by me personally and in accordance with instructions stated in the Interviewer's Manual.

\_\_\_\_\_  
Signature Over Printed Name of Interviewer

\_\_\_\_\_  
Date Accomplished

\_\_\_\_\_  
Signature Over Printed Name of Reviewer/Supervisor

\_\_\_\_\_  
Date Reviewed

**ALL HOUSEHOLD MEMBERS**

**2**

**B**

**C**

**DEMOGRAPHIC CHARACTERISTICS**

**RESIDENCE OF SPOUSE/PARTNER**

**L  
I  
N  
E  
  
N  
U  
M  
B  
E  
R**  
  
(LN)

<b>201</b>	<b>202</b>	<b>203</b>	<b>204</b>		<b>205</b>	<b>206</b>	<b>207</b>	<b>208</b>	<b>209</b>
Please give me the names of the persons who usually live in your household starting with the head of the household.  <b>LIST THE PERSONS OR HOUSEHOLD MEMBERS IN THE ORDER SPECIFIED IN CODES FOR COL. 3</b>  <b>ENCIRCLE LINE NO. OF RESPONDENT</b>          <b>HOUSEHOLD MEMBERS AS OF DATE OF VISIT</b>	What is _____'s relationship to the household head?          <b>ENTER CODE</b>	Is _____ male or female?  <b>1-MALE</b>  <b>2-FEMALE</b>          <b>ENTER CODE</b>	In what month and year was _____ born?          <b>ENTER MONTH    ENTER YEAR</b>		What is _____'s age as of last birthday?          <b>(in completed years)</b>          <b>WRITE THE AGE IN THE BOXES</b>	What is _____'s marital (civil) status?          <b>FOR PERSONS 0 TO 9 YEARS OLD, ENTER "1" FOR SINGLE IF ≠ 2, →GO TO SECTION D (Q.210)</b>          <b>ENTER CODE</b>	Is _____'s spouse/partner a member of this household?  <b>1 - YES</b>  <b>2 - NO, →GO TO COL. 11 (Q.210)</b>          <b>ENTER CODE</b>	<b>COPY THE LINE NO. OF THE SPOUSE/PARTNER</b>          <b>ENTER LINE NO.</b>	In what year did _____ marry or form a consensual union with _____'s spouse/partner?          <b>ENTER YEAR</b>

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
01		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
04		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
08		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
09		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

<p><u>TICK HERE IF CONTINUATION SET IS USED</u>    <input type="checkbox"/></p> <p>Just to make sure that I have a complete listing:</p> <p>1) Are there any other persons such as small children or infants that we have not listed?    YES <input type="checkbox"/>    NO <input type="checkbox"/></p> <p>2) Are there any other people who are members of your household, such as domestic helpers, lodgers or friends who usually live here?    YES <input type="checkbox"/>    NO <input type="checkbox"/></p> <p>3) Are there any other people who are members of this household who is abroad or in other place working, studying or temporarily away that we have not listed?    YES <input type="checkbox"/>    NO <input type="checkbox"/></p>	<p><b>Codes for Column 2 (Q.202)</b> <i>(Relationship to Household Head)</i></p> <p><b>01</b> - Head <b>02</b> - Wife/Spouse <b>03</b> - Son/Daughter <b>04</b> - Brother/Sister <b>05</b> - Son-in-law/ Daughter-in-law <b>06</b> - Grandson/ Granddaughter <b>07</b> - Father/Mother <b>08</b> - Other Relative <b>09</b> - Non-Relative <b>10</b> - Border/Guest</p>	<p><b>Codes for Column 7 (Q206)</b> <i>(Marital Status)</i></p> <p><b>1</b> - Single <b>2</b> - Married/Living Together <b>3</b> - Widowed <b>4</b> - Divorced/Separated/Annulled <b>5</b> - Unknown</p> <p><b>Codes for Column 11 (Q.210)</b> <i>(Ethnicity)</i></p> <p><b>01</b> - Tagalog    <b>06</b> - Hiligaynon <b>02</b> - Caviteño    <b>07</b> - Ilocano <b>03</b> - Bisaya/Binisaya    <b>08</b> - Kapampangan <b>04</b> - Bicol    <b>09</b> - Cebuano <b>05</b> - Waray    <b>96</b> - Others, Specify _____</p>
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ALL HOUSEHOLD MEMBER		5 YEARS OLD AND OVER		15 YEARS OLD AND OVER						LINE NUMBER
D	E	212	F	214	3		H	I	J	
ETHNICITY	RELIGIOUS AFFILIATION		HIGHEST GRADE COMPLETED		STATUS IN EMPLOYMENT	SELF-EMPLOYED DURING THE LAST 7 DAYS	PRIMARY WORK	SUBSIDIARY ACTIVITY		
210 What is _____ ethnic group/tribe? Is _____, Tagalog, Caviteño, etc.?  WRITE THE ETHNICITY IN THE SPACE PROVIDED  ENTER CODE	211 What is _____ religious affiliation?  WRITE THE RELIGION IN THE SPACE PROVIDED  ENTER CODE	EN-CIRCLE LINE NO. OF ALL HOUSEHOLD MEMBERS 5 YEARS OLD AND OVER  CHECK WITH Q205	213 What is the highest educational attainment completed by _____?  ENTER CODE	EN-CIRCLE LINE NO. OF ALL HOUSEHOLD MEMBERS 15 YEARS OLD AND OLDER  CHECK WITH Q205	215 In what kind of status in employment did _____ spend most of his/her time in any economic activity in the last 12 months?  ENTER CODE	216 In what kind of status in employment did _____ spend most of his/her time in any economic activity in the last 7 days?  IF ≠ 2, 3 OR 4, → GO TO SECTION J (Q.219)  IF = 9 → GO TO SECTION K (Q.220)  ENTER CODE	217 In what economic activity was _____ engaged as self-employed during the last 7 days?  1 - NON-AGRICULTURE 2 - AGRICULTURE → GO TO SECTION J (Q.219)  ENTER CODE	218 Is _____ in his/her primary work? <b>READ ALL CATERGORIES</b> 01 - A sole director of one's own limited-liability enterprise 02 - A partner/associate in one's own limited-liability enterprise 03 - Running alone one's own enterprise 04 - A partner in an enterprise 96 - Other activity, specify  ENTER CODE	219 In addition (to this primary status in employment), is (NAME) owning and operating a non- agricultural enterprise in subsidiary capacity?  1 - YES 2 - NO  ENTER CODE	
(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)
<input type="text"/>	<input type="text"/>	01	<input type="text"/>	01	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	01
<input type="text"/>	<input type="text"/>	02	<input type="text"/>	02	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	02
<input type="text"/>	<input type="text"/>	03	<input type="text"/>	03	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	03
<input type="text"/>	<input type="text"/>	04	<input type="text"/>	04	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	04
<input type="text"/>	<input type="text"/>	05	<input type="text"/>	05	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	05
<input type="text"/>	<input type="text"/>	06	<input type="text"/>	06	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	06
<input type="text"/>	<input type="text"/>	07	<input type="text"/>	07	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	07
<input type="text"/>	<input type="text"/>	08	<input type="text"/>	08	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	08
<input type="text"/>	<input type="text"/>	09	<input type="text"/>	09	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	09
<input type="text"/>	<input type="text"/>	10	<input type="text"/>	10	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	10

**Codes for Col. 12 (Q.211)**

Religious Affiliation

- 00 - None
- 01 - Roman Catholic
- 02 - Iglesia ni Cristo
- 03 - Aglipay
- 04 - Islam
- 05 - Evangelist
- 06 - Baptist
- 07 - Methodist
- 08 - Born Again
- 96 - Others, Specify \_\_\_\_\_

**Codes for Columns 14 (Q.213)**

(Grade/Year Currently Attending/Highest Educational Attainment)

- 000 - No Grade Completed
- 001 - Nursery
- 002 - Kinder
- 010 - Preparatory
- Elementary
- 210 - Grade 1
- 220 - Grade 2
- 230 - Grade 3
- 240 - Grade 4
- 250 - Grade 5
- 260 - Grade 6
- 270 - Grade 7
- 280 - Elementary Graduate
- High School
- 310 - 1st Year
- 320 - 2nd Year
- 330 - 3rd Year
- 340 - 4th Year
- 350 - 5th Year
- 380 - H. S. Graduate
- Post Secondary
- 410 - 1st Year
- 420 - 2nd Year
- 430 - 3rd Year
- IF GRADUATE, SPECIFY COURSE
- College
- 810 - 1st Year
- 820 - 2nd Year
- 830 - 3rd Year
- 840 - 4th Year
- 850 - 5th Year
- 860 - 6th Year or IF GRADUATE, SPECIFY COURSE
- 900 - Post Baccalaureate

**Codes for Columns 16 (Q.215) & 17 (Q.216)**

Status in Employment

- 01 - Wage Employment/Paid Trainee (Not including Casual Labour)
- 02 - Self-Employment (Employer)
- 03 - Self-Employment (Own account worker)
- 04 - Self-Employment (Members of producers' cooperative)
- 05 - Contributing Family Member
- 06 - Casual Labourer
- 07 - Unpaid Trainee
- 08 - Not Engaged in Economic Activity (Those who have NOT worked at all or who have worked for less than one month during the last 12 months) FOR Q215.
- 09 - Not Engaged in Economic Activity (Those who have NOT worked at all or who have worked for less than one hour during the last 7 days) FOR Q216.
- 96 - Other (Specify) \_\_\_\_\_

**K HOUSING CHARACTERISTICS**

(ENCIRCLE CODE AND WRITE IN THE BOX)

**At the time of visit:****220 MAIN MATERIALS OF THE ROOF**

- 1 - Strong materials (galvanized iron, aluminum, tile, concrete, brick, stone, etc.)
- 2 - Light materials (cogon, nipa, anahaw)
- 3 - Salvaged/makeshift materials
- 4 - Mixed but predominantly strong materials
- 5 - Mixed but predominantly light materials
- 6 - Mixed but predominantly salvaged materials
- 7 - Not Applicable

**221 MAIN MATERIALS OF THE OUTER WALL**

- 1 - Strong materials (galvanized iron, aluminum, tile, concrete, brick, stone, glass, etc.)
- 2 - Light materials (cogon, nipa, anahaw)
- 3 - Salvaged/makeshift materials
- 4 - Mixed but predominantly strong materials
- 5 - Mixed but predominantly light materials
- 6 - Mixed but predominantly salvaged materials
- 7 - Not Applicable

**222 MAIN MATERIALS OF THE FLOOR**

- |                                      |                                  |
|--------------------------------------|----------------------------------|
| <b>01</b> - Earth/Sand               | <b>06</b> - Ceramic Tiles        |
| <b>02</b> - Wood Planks              | <b>07</b> - Cement               |
| <b>03</b> - Palm/Bamboo              | <b>08</b> - Marble               |
| <b>04</b> - Parquet or Polished Wood | <b>96</b> - Other, Specify _____ |
| <b>05</b> - Vinyl or Asphalt Strips  |                                  |

**223** What kind of toilet facility does the household use?

- |                          |                                  |
|--------------------------|----------------------------------|
| <b>01</b> - Flush Toilet | <b>04</b> - Drop/Overhang        |
| <b>02</b> - Closed Pit   | <b>05</b> - Pail system          |
| <b>03</b> - Open Pit     | <b>96</b> - Other, Specify _____ |

**224** What is your household's main source of electricity?

- |   |                                  |
|---|----------------------------------|
| <b>01</b> - Electricity from power supplier | <b>04</b> - Solar Panel          |
| <b>02</b> - Generator                       | <b>05</b> - None                 |
| <b>03</b> - Inverter                        | <b>96</b> - Other, specify _____ |

**225** What is your household's main source of drinking water?

- Community water piped into:
- |   |   |
|---|---|
| <b>01</b> - Dwelling                    | <b>07</b> - Undeveloped Spring              |
| <b>02</b> - Yard/Plot                   | <b>08</b> - River/Stream/Pond/Lake/Dam      |
| <b>03</b> - Public Tap                  | <b>09</b> - Bottled Water/Refilling Station |
| Point Source                            | <b>10</b> -Rainwater                        |
| <b>04</b> - Protected Well              | <b>11</b> -Tanker Truck/Peddler             |
| <b>05</b> - Unprotected (Open dug well) | <b>96</b> -Other, specify _____             |
| <b>06</b> - Developed Spring            |   |

**REMARKS**


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