

REPUBLIC OF CHILE
NATIONAL INSTITUTE OF STATISTICS
SEVENTEENTH NATIONAL POPULATION AND HOUSING CENSUS

(THE INFORMATION REQUESTED BY THE INE IS CONFIDENTIAL PURSUANT TO
ARTICLE 29, LAW 17 374, ESTABLISHING STATISTICAL SECRECY)

CENSUS 2002
CENSUS QUESTIONNAIRE

A. IDENTIFICATION

FILE NUMBER

Copy the file number here

Transfer this number to each questionnaire

Dwelling No. _____ Household No. _____

If this questionnaire is a continuation of the previous one, indicate here: Continuation

Street or Road:

No.: Block No.: Floor: Apartment No.:

Use only the pencil provided; complete this questionnaire by filling in the oval spaces as appropriate; use capital letters without accents; do not cross out, if necessary make corrections using the eraser provided; use letters and numbers of this type:

ABCDEFGHIJKLMNÑOPQRSTUVWXYZ 0123456789

B. DWELLING

DATA ON THE DWELLING

1. Indicate type of dwelling:

a. Private dwelling

House

Apartment in a building

Rooms in an old house or convent

Shack (*mejora, mediagua*)

Hut (*choza*)

Cabin (*ruca*)

Mobile dwelling (tent, wagon, container, boat, launch or similar)

b. Collective dwelling

(e.g. residential guesthouse, hotel, hospital, etc.)

If the dwelling is collective, skip to Section D "Number of persons in household". If the dwelling has no guests, conclude the interview.

2. Indicate whether the dwelling is:

a. Occupied

With persons present

With persons absent

b. Unoccupied

If the dwelling is occupied with persons absent, return to it after completing the circuit.

ONLY FOR PRIVATE DWELLINGS THAT ARE OCCUPIED WITH PERSONS PRESENT

3. The dwelling you occupy is...

Your own (fully paid)

Your own (paid in instalments)

Rented

Available to you in return for work or services rendered

Free

4. The predominant construction material used...

a. For the external walls, is:

Reinforced concrete, stone

Brick

Structural panels, block (prefabricated)

Wood or lined partition

Intermit

Adobe, wattle and daub

Waste material (tin, cardboard, plastic, etc)

b. For the roof covering is:

Tile (clay, metal, cement)

Tile (wood, asphalt)

Concrete slab

Zinc

Corrugated iron

Fibreglass / Fermocolor

Fonolite

Wattle and daub

Waste material (tin, cardboard, plastic, etc)

c. For flooring is:

Parquet
Ceramic floor tiles
Wooden floorboards
Cement slabs
Plastic
Brick
Concrete slab
Dirt

5. Electric lighting comes from:

Public grid (Electricity company)
Own or communal generator
Solar panel

The dwelling does not have electric light

6. The water used by this dwelling comes from:

Public network (Water company)
Well or borehole
River, spring, stream

7. In this dwelling, water is:

Piped inside the dwelling
Piped outside the dwelling by inside the property

The dwelling does not have piped water

8. The sanitary facility (WC) in this dwelling is ...

Connected to the sewerage system
Connected to a septic tank
A box placed over a pit
A box placed over a drainage ditch or canal
Chemical toilet

The dwelling does not have a sanitary facility (WC)

9. How many showers does the dwelling have?

1 2 3 4 5 or more
The dwelling does not have a shower

10. Excluding the bathrooms, how many rooms does the dwelling have altogether, including the kitchen?

1 2 3 4 5 6 7 8 9 10 or more

Indicate the uses made of each room

Bedroom, Living/dining room, Living room, Dining room, Kitchen, Room for paid work, Study, Other use

- Room 1
- Room 2
- Room 3
- Room 4
- Room 5
- Room 6
- Room 7
- Room 8
- Room 9
- Room 10

11. How many households are there in this dwelling?

1 (Continue at C. Household Data) 2 3 4 or more (for the other households in the dwelling: use one questionnaire for each additional household, and repeat Dwelling No. Note the number of the next household, and enter the file number. Leave blank Section B. Dwelling. Start the interview at C. Household Data.)

C. HOUSEHOLD DATA

12. What is the main fuel used for cooking?

- Natural gas
- Liquefied gas
- Paraffin
- Fuelwood, sawdust
- Coal
- Electricity
- Solar energy
- Household does not cook

13. How many rooms does this household use only for sleeping in?

1 2 3 4 5 6 7 8 9 10 or more

14. Does the household have a shower?

Yes No

15. Does the household have any of the following appliances and/or services?

(Yes /No)

- Black and white TV
- Colour TV
- Video recorder, video player
- Cable/satellite TV connection
- High fidelity music player and or equipment
- Washing machine

Dryer or centrifuge
Refrigerator
Freezer
Microwave oven
Dishwasher
Water heater
Cellphone
Fixed line telephone
Computer
Internet connection

16. Does this household have any of the following vehicles exclusively for their private use?

(Yes/No)

Bicycle
Motorcycle, scooter, moped
Van (e.g. utility vehicle)
Automobile, station wagon
Truck, van, jeep
Launch, yacht, boat

D. PERSONS COMPRISING THE HOUSEHOLD

NUMBER OF PERSONS IN THE HOUSEHOLD

In the first or only questionnaire for the household, note the number of men, women, and total number of persons comprising it. Men _____ Women _____ Total _____
Remember that each person indicated should be counted in Section E, "Persons in the Household."

Before conducting the census for each individual in Section E, "Persons in the Household":

Note on the first line of each page the name of each person who spent the night here. On the first page, write Person No. 1, name of head of household; on the second page, Person No. 2, name of spouse, cohabitant, partner, and so on successively until all members of the household have been enumerated.

If there are more than six persons in the household and other questionnaires are used, repeat on these: File No., Dwelling No., Household No.; Fill the oval box "Continuation" and continue as from Section E "Persons in the household".

Check that the number noted for the last person in the household is equal to total of Section D "Persons Comprising the Household".

Do not forget to include the following:

Persons who live in this household but did not spend the night there for reasons of work (e.g. an individual who works in shifts)

Old people

Babies born before 0 hours on 24 April 2002.

Persons who died after 0 hours on 24 April 2002.

Name of Census Enumerator:

Signature:

E. PERSONS IN THE HOUSEHOLD

PERSON No. NAME:

FOR ALL PERSONS

17. What is the person's relationship with the head of the household?

Head of household
Spouse
Cohabitant/partner
Son/daughter
Stepson/stepdaughter
Son /daughter-in-law
Grandchild
Brother/sister
Brother /sister-in-law
Parent
Mother/father-in-law
Other relation
No relation
Live-in domestic servant
Member of collective household

18. Sex

Man Woman

19. How old is the person?

If the person is not yet one year old, put 00

If the person is between one and 99 years old, put 01, 05, 10, 19, 43, ..., 99.

If the person is a 100 years old or more, complete the missing figures: 1__

20. Does the person suffer from any of the following disabilities?

Total blindness
Total deafness
Mutism
Cripple/paralysis
Mental deficiency
None of the above

21. Does the person belong to any of the following original or indigenous peoples?

Alacalufe (Kawashkar)
Atacameño
Aimara
Colla
Mapuche
Quechua
Rapa Nui

Yámana (Yagán)
None of the above

22. When the person was born, in what borough was his/her mother living?

In this borough In another borough

Name of borough or place:

In another country
Name of country:

Year of arrival in this country

23. Does the person live most of the time in this borough?

Yes No (in what borough does the person live?)

Name of borough or place:

In another country

Name of country:

FOR ALL PERSONS OF FIVE YEARS OLD OR MORE

24. In what borough was the person living in April 1997?

In this borough In another borough

Name of borough or place:

In another country
Name of country:

25. Can the person read and write?

If the person can either read or write, but not both, put No.

Yes No

26. What is the highest level and course of formal education completed?

Never attended school
Pre-basic
Special/Differential
Basic/primary
Common secondary
Humanities

Commercial secondary
Industrial secondary
Agricultural secondary
Maritime secondary
Normal
Female technical
Technical training centre
Professional Institute
University

Course/Year 1st 2nd, 3rd, 4th, 5th, 6th, 7th, 8th

FOR ALL PERSONS OF 15 YEARS OLD OR MORE

27. What the person's current marital or conjugal status?

Married
Cohabiting/partner
Single
Annulled
Separated
Widow/widower

28. What is the person's religion?

Catholic
Evangelical
Jehovah's Witness
Judaism
Mormon
Muslim
Orthodox
Other religion or creed
None, atheist, agnostic

29. Which of these situations describes the person's activity status for most of last week?

Working for income
Had a job but was not working
Looking for work, having worked previously
Working for a family relative without monetary payment
Looking for work for the first time
Undertaking domestic chores
Studying
Retired or living from investments
Permanently disabled for work
Other situation

30. In this work is/was the person...

Wage earner (e.g. employee, labourer, manual worker, etc)

Domestic service worker

Self-employed

Employer, entrepreneur or boss

Unpaid family worker

31. What job or type of work does the person currently do (or used to do if currently unemployed)?

e.g. motor mechanic; university professor

Factory worker

Cameraman

Graphic designer

Cashier in...

Seller of ... etc.

32. What is the main activity of the establishment in which the person works (or used to work if currently unemployed)?

e.g. factory making... ; pre-prepared food sales; livestock farm; canning firm; supermarket; repair workshop for ...; bank, etc.

33. In which the borough does the person work or study? (Ask this question only to persons who answered question 29 with alternatives 1, 2, 4 or 7).

In this borough In another borough

Name of borough:

ONLY FOR WOMEN OF 15 YEARS OLD OR MORE

34. How many live-born children has the person had in total?

None (If the person has not had any live-born children, continue with the next person in the household.)

Number: _____

35. How many of those children are currently living?

None Number: _____

36. What is the date of birth of the person's last live-born child?

Month Year

*** this page repeated five times ***