



# Household Questionnaire England

Office for  
National Statistics



**Return to:**  
**FREEPOST 2011 Census,**  
**Processing Centre, UK**

## A message to everyone - act now

Everyone should be included in the census - all people, households and overnight visitors.

It is used to help plan and fund services for your community - services like transport, education and health.

Please complete your census questionnaire **on 27 March 2011, or as soon as possible afterwards.** You can fill it in online or on paper.

Taking part in the census is very important and it's also compulsory. You could face a fine if you don't participate or if you supply false information.

**Your personal information is protected by law.** Census information is kept confidential for 100 years.

So help tomorrow take shape and be part of the 2011 Census.

*J. N. Matheson*

Jil Matheson  
National Statistician

## Where can you get help?

- [www.census.gov.uk](http://www.census.gov.uk)
- Census helpline 0300 0201 101
- Text Relay 18001 0300 0201 160

Help is available in large print and Braille

## Complete online

[www.census.gov.uk](http://www.census.gov.uk)

Your personal internet access code is:

OR fill in this paper questionnaire and post it back using the pre-paid envelope supplied.

If your address is incorrect or missing, enter your correct address here:

Postcode

## Declaration

This questionnaire has been completed to the best of my knowledge and belief.

Signature

Date

Telephone number

We may contact you if we need to collect missing information.

If you have lost your envelope, please return to:  
FREEPOST 2011 Census, Processing Centre, UK

# H1



101001

# Before you start

## Who should complete this questionnaire?

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 you complete on this questionnaire?

- **Household questions on pages 3-6** about this household and its accommodation
- **Individual questions on pages 7-30** for every person who usually lives in this household. Every person who has been, or intends to be, in the UK for 3 months or more should be included in these questions at their usual UK address
- **Visitor questions on the back page (page 32)** for all other people staying overnight in this household on 27 March 2011

It is important to include visitors staying overnight in this household to make sure no-one is missed. Visitors who usually live elsewhere in the UK must also be included on a census questionnaire at their usual address.

You will find further information about who to include in this questionnaire on page 31.

## Will you need extra questionnaires?

- If there are more than six people in this household, or there are more than three visitors staying overnight, you can choose either to complete the entire questionnaire online, or fill in this questionnaire and contact us to request one or more **Continuation Questionnaires**
- If any member of this household aged 16 or over does not want to disclose their information to others in the household, you can request an **Individual Questionnaire**. Remember to include these people in Household questions (H1 to H14) on this questionnaire, but leave blank their Individual questions (1-43)
- If there is more than one household at this address, contact us to request one or more additional **Household Questionnaires**

You can request extra questionnaires online at [www.census.gov.uk](http://www.census.gov.uk) or by calling 0300 0201 101.

## This questionnaire will be scanned by a computer

You should:

- use black or blue ink to answer
- tick your answers within the box like this:
- print your answers within the box like this: 

S	M	I	T	H
---	---	---	---	---

 Use capital letters - one letter per box
- correct any mistakes by filling in the box like this: 

<del>S</del>	M	I	T	H		
--------------	---	---	---	---	--	--

 or: 

S	M	<del>E</del>	I	T	H		
---	---	--------------	---	---	---	--	--
- continue onto the next line (if possible) when a word will not fit, like this: 

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



# Household questions

## H1 Who usually lives here?

➤ Tick all that apply

- Me, this is my permanent or family home
- Family members including partners, children, and babies born on or before 27 March 2011
- Students and/or schoolchildren who live away from home during term time
- Housemates, tenants or lodgers
- People who usually live outside the UK who are staying in the UK for 3 months or more
- People who work away from home within the UK, or are members of the armed forces, if this is their permanent or family home
- People who are temporarily outside the UK for less than 12 months
- People staying temporarily who usually live in the UK but do not have another UK address, for example, relatives, friends
- Other people who usually live here, including anyone temporarily away from home

OR  No-one usually lives here, for example, this is a second address or holiday home ➔ **Go to H4**

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



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

➤ If a member of this household has requested an Individual Questionnaire, tick the box beside their name and leave blank the Individual questions 1 to 43 for that person

	First name	Last name	Individual Questionnaire requested?
Yourself (Person 1)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input type="checkbox"/>
Person 2	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input type="checkbox"/>
Person 3	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input type="checkbox"/>
Person 4	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input type="checkbox"/>
Person 5	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input type="checkbox"/>
Person 6	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input type="checkbox"/>

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

## H4 Apart from everyone counted in question H2, who else is staying overnight here on 27 March 2011? These people are counted as visitors. Remember to include children and babies.

➤ Tick all that apply

- People who usually live somewhere else in the UK, for example, boy/girlfriends, friends, relatives
- People staying here because it is their second address, for example, for work. Their permanent or family home is elsewhere
- People who usually live outside the UK who are staying in the UK for less than 3 months
- People here on holiday

OR  There are no visitors staying overnight here on 27 March 2011 ➔ **Go to H6**

## H5 Counting only the people included in question H4, how many visitors are staying overnight here on 27 March 2011?



➤ Remember to answer the Visitor questions on the back page (page 32) for these people

➤ If there is no-one usually living here (there are only visitors staying here) answer questions H7 to H11 on page 6 and then go to the back page (page 32) to answer the Visitor questions



# Household questions - continued

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

- If there are more than six people, contact us to request a Continuation Questionnaire
- If you live alone ➔ **Go to H7**
- If no-one usually lives here and there are no visitors staying overnight here on 27 March 2011, answer questions H7 to H11 on page 6 and then go to the Declaration on the front page

## Example:

This shows how a household with two parents and four children are related to each other

Name of Person 1	Name of Person 2	Name of Person 3
First name <b>ROBERT</b>	First name <b>MARY</b>	First name <b>ALISON</b>
Last name <b>SMITH</b>	Last name <b>SMITH</b>	Last name <b>SMITH</b>
	How is Person 2 related to Person: ➔ <b>1</b>	How is Person 3 related to Persons: ➔ <b>1 2</b>
	Husband or wife <input checked="" type="checkbox"/>	Husband or wife <input type="checkbox"/> <input type="checkbox"/>
	Same-sex civil partner <input type="checkbox"/>	Same-sex civil partner <input type="checkbox"/> <input type="checkbox"/>
	Partner <input type="checkbox"/>	Partner <input type="checkbox"/> <input type="checkbox"/>
	Son or daughter <input type="checkbox"/>	Son or daughter <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
	Step-child <input type="checkbox"/>	Step-child <input type="checkbox"/> <input type="checkbox"/>
	Brother or sister <input type="checkbox"/>	Brother or sister <input type="checkbox"/> <input type="checkbox"/>

- Using the same order you used in question H3 (page 3), write the name of everyone who usually lives here at the top of each column. Remember to include children, babies and people who have requested an Individual Questionnaire
- Tick a box to show the relationship of each person to each of the other members of this household

## Name of Person 1

First name

Last name

ENTER NAME OF PERSON 1 HERE AS IN QUESTION **H3**

## Name of Person 2

First name

Last name

How is Person 2 related to Person: ➔ **1**

Husband or wife	<input type="checkbox"/>
Same-sex civil partner	<input type="checkbox"/>
Partner	<input type="checkbox"/>
Son or daughter	<input type="checkbox"/>
Step-child	<input type="checkbox"/>
Brother or sister	<input type="checkbox"/>
Step-brother or step-sister	<input type="checkbox"/>
Mother or father	<input type="checkbox"/>
Step-mother or step-father	<input type="checkbox"/>
Grandchild	<input type="checkbox"/>
Grandparent	<input type="checkbox"/>
Relation - other	<input type="checkbox"/>
Unrelated (including foster child)	<input type="checkbox"/>

## Name of Person 3

First name

Last name

How is Person 3 related to Persons: ➔ **1 2**

Husband or wife	<input type="checkbox"/> <input type="checkbox"/>
Same-sex civil partner	<input type="checkbox"/> <input type="checkbox"/>
Partner	<input type="checkbox"/> <input type="checkbox"/>
Son or daughter	<input type="checkbox"/> <input type="checkbox"/>
Step-child	<input type="checkbox"/> <input type="checkbox"/>
Brother or sister	<input type="checkbox"/> <input type="checkbox"/>
Step-brother or step-sister	<input type="checkbox"/> <input type="checkbox"/>
Mother or father	<input type="checkbox"/> <input type="checkbox"/>
Step-mother or step-father	<input type="checkbox"/> <input type="checkbox"/>
Grandchild	<input type="checkbox"/> <input type="checkbox"/>
Grandparent	<input type="checkbox"/> <input type="checkbox"/>
Relation - other	<input type="checkbox"/> <input type="checkbox"/>
Unrelated (including foster child)	<input type="checkbox"/> <input type="checkbox"/>





For Person 5 (James), there is a tick next to 'Son or daughter' in the columns for Persons 1 and 2 to show he is the son of Robert and Mary. Columns 3 and 4 show he is the brother of Persons 3 and 4 (Alison and Stephen).

**Name of Person 4**

First name

Last name

How is Person 4 related to Persons: → **1** **2** **3**

Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Same-sex civil partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Son or daughter	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**Name of Person 5**

First name

Last name

How is Person 5 related to Persons: → **1** **2** **3** **4**

Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Same-sex civil partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Son or daughter	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**Name of Person 6**

First name

Last name

How is Person 6 related to Persons: → **1** **2** **3** **4** **5**

Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Same-sex 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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**Name of Person 4**

First name

Last name

How is Person 4 related to Persons: → **1** **2** **3**

Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Same-sex civil partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Son or daughter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-brother or step-sister	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mother or father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-mother or step-father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grandchild	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grandparent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relation - other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unrelated (including foster child)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Name of Person 5**

First name

Last name

How is Person 5 related to Persons: → **1** **2** **3** **4**

Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Same-sex civil partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Son or daughter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-brother or step-sister	<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"/>
Step-mother or step-father	<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"/>
Grandparent	<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"/>
Unrelated (including foster child)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Name of Person 6**

First name

Last name

How is Person 6 related to Persons: → **1** **2** **3** **4** **5**

Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Same-sex 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"/>
Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-brother or step-sister	<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"/>
Step-mother or step-father	<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"/>



# Household questions - continued

**H7** What type of accommodation is this?

A whole house or bungalow that is:

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

A flat, maisonette or apartment that is:

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

A mobile or temporary structure:

- a caravan or other mobile or temporary structure

**H8** Is this household's accommodation self-contained?

- ➔ This means that all the rooms, including the kitchen, bathroom and toilet, are behind a door that only this household can use
- Yes, all the rooms are behind a door that only this household can use
- No

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

- ➔ **Do NOT count:**
  - bathrooms
  - toilets
  - halls or landings
  - rooms that can only be used for storage such as cupboards
- ➔ **Count** all other rooms, for example:
  - kitchens
  - living rooms
  - utility rooms
  - bedrooms
  - studies
  - conservatories
- ➔ If two rooms have been converted into one, count them as one room

Number of rooms

**H10** How many of these rooms are bedrooms?

- ➔ Include all rooms built or converted for use as bedrooms, even if they are not currently used as bedrooms

Number of bedrooms

**H11** What type of central heating does this accommodation have?

- ➔ Tick all that apply, whether or not you use it
- ➔ Central heating is a central system that generates heat for multiple rooms
- No central heating
- Gas
- Electric (including storage heaters)
- Oil
- Solid fuel (for example wood, coal)
- Other central heating

**H12** Does your household own or rent this accommodation?

- ➔ Tick one box only
- Owns outright ➔ **Goto H14**
- Owns with a mortgage or loan ➔ **Goto H14**
- Part owns and part rents (shared ownership)
- Rents (with or without housing benefit)
- Lives here rent free

**H13** Who is your landlord?

- ➔ Tick one box only
- Housing association, housing co-operative, charitable trust, registered social landlord
- Council (local authority)
- Private landlord or letting agency
- Employer of a household member
- Relative or friend of a household member
- Other

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

- ➔ Include any company car(s) or van(s) available for private use
- None
- 1
- 2
- 3
- 4 or more, write in number



# Individual questions - Person 1 start here

**1** What is your name? (Person 1 on page 3)

First name

Last name

**2** What is your sex?

- Male  Female

**3** What is your date of birth?

Day

Month

Year




**4** On 27 March 2011, what is your legal marital or same-sex civil partnership status?

- |  |  |
|--|--|
| <input type="checkbox"/> Never married and never registered a same-sex civil partnership | <input type="checkbox"/> In a registered same-sex civil partnership                              |
| <input type="checkbox"/> Married   | <input type="checkbox"/> Separated, but still legally in a same-sex civil partnership            |
| <input type="checkbox"/> Separated, but still legally married                            | <input type="checkbox"/> Formerly in a same-sex civil partnership which is now legally dissolved |
| <input type="checkbox"/> Divorced  | <input type="checkbox"/> Surviving partner from a same-sex civil partnership                     |
| <input type="checkbox"/> Widowed   |  |

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

- No → **Go to 7**  
 Yes, write in other UK address below




Postcode



**OR**  Yes, outside the UK, write in country

**6** What is that address?

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

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

- Yes  No → **Go to 9**

**8** During term time, do you live:

- at the address on the front of this questionnaire?  
 at the address in question 5? → **Go to 43**  
 at another address? → **Go to 43**

**9** What is your country of birth?

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

**10** 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



**11** If you arrived before 27 March 2010 → **Go to 13**

If you arrived on or after 27 March 2010 → **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 6 months  
 6 months or more but less than 12 months  
 12 months or more

**13** How is your health in general?

- Very good Good Fair Bad Very bad
- 

**14** Do you look after, or give any help or support to family members, friends, neighbours or others because of either:

- long-term physical or mental ill-health/disability?
  - problems related to old age?
- ↻ Do not count anything you do as part of your paid employment
- No  
 Yes, 1 - 19 hours a week  
 Yes, 20 - 49 hours a week  
 Yes, 50 or more hours a week



# Person 1 - continued

**15** How would you describe your national identity?

➤ Tick all that apply

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

**16** 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**

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

**B Mixed/multiple ethnic groups**

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed/multiple ethnic background, write in

**C Asian/Asian British**

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

**D Black/African/Caribbean/Black British**

- African
- Caribbean
- Any other Black/African/Caribbean background, write in

**E Other ethnic group**

- Arab
- Any other ethnic group, write in

**17** This question is intentionally left blank ➔ Go to **18**

**18** What is your main language?

- English ➔ 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
- 

**20** What is your religion?

- This question is voluntary
- No religion
  - Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
  - Buddhist
  - Hindu
  - Jewish
  - Muslim
  - Sikh
  - Any other religion, write in

**21** One year ago, what was your usual address?

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

- The address on the front of this questionnaire
- Student term time/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





**22** What passports do you hold?

➤ Tick all that apply

United Kingdom

Irish

Other, write in

None

**23** Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

➤ Include problems related to old age

Yes, limited a lot

Yes, limited a little

No

**24** If you are aged 16 or over ➔ Go to **25**

If you are aged 15 or under ➔ Go to **43**

**25** Which of these qualifications do you have?

➤ Tick **every** box that applies if you have **any** of the qualifications listed

➤ If your UK qualification is not listed, tick the box that contains its nearest equivalent

➤ If you have qualifications gained outside the UK, tick the 'Foreign qualifications' box and the nearest UK equivalents (if known)

1-4 O levels/CSEs/GCSEs (any grades), Entry Level, Foundation Diploma

NVQ Level 1, Foundation GNVQ, Basic Skills

5+ O levels (passes)/CSEs (grade 1)/GCSEs (grades A\*-C), School Certificate, 1 A level/2-3 AS levels/VCEs, Higher Diploma

NVQ Level 2, Intermediate GNVQ, City and Guilds Craft, BTEC First/General Diploma, RSA Diploma

Apprenticeship

2+ A levels/VCEs, 4+ AS levels, Higher School Certificate, Progression/Advanced Diploma

NVQ Level 3, Advanced GNVQ, City and Guilds Advanced Craft, ONC, OND, BTEC National, RSA Advanced Diploma

Degree (for example BA, BSc), Higher degree (for example MA, PhD, PGCE)

NVQ Level 4-5, HNC, HND, RSA Higher Diploma, BTEC Higher Level

Professional qualifications (for example teaching, nursing, accountancy)

Other vocational/work-related qualifications

Foreign qualifications

No qualifications

**26** Last week, were you:

➤ Tick all that apply

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

working as an employee? ➔ Go to **32**

on a government sponsored training scheme? ➔ Go to **32**

self-employed or freelance? ➔ Go to **32**

working paid or unpaid for your own or your family's business? ➔ Go to **32**

away from work ill, on maternity leave, on holiday or temporarily laid off? ➔ Go to **32**

doing any other kind of paid work? ➔ Go to **32**

none of the above

**27** Were you actively looking for any kind of paid work during the last four weeks?

Yes

No

**28** If a job had been available last week, could you have started it within two weeks?

Yes

No

**29** Last week, were you waiting to start a job already obtained?

Yes

No

**30** Last week, were you:

➤ Tick all that apply

retired (whether receiving a pension or not)?

a student?

looking after home or family?

long-term sick or disabled?

other

**31** Have you ever worked?

Yes, write in the year that you last worked

➔ Go to **32**

No, have never worked ➔ Go to **43**



# Person 1 - continued

**32** 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

**33** In your main job, are (were) you:

- an employee?
- self-employed or freelance without employees?
- self-employed with employees?

**34** What is (was) your full and specific job title?

- For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER
- Do not state your grade or pay band



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



**36** Do (did) you supervise any employees?

- Supervision involves overseeing the work of other employees on a day-to-day basis
- Yes  No

**37** At your workplace, what is (was) the main activity of your employer or business?

- For example, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING
- If you are (were) a civil servant, write GOVERNMENT
- If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority




**38** In your main job, what is (was) the name of the organisation you work (worked) for?

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



- No organisation, for example, self-employed, freelance, or work (worked) for a private individual

**39** If you had a job last week ➔ Go to **40**

If you didn't have a job last week ➔ Go to **43**

**40** In your main job, what is the address of your workplace?

- If you work at or from home, on an offshore installation, or have no fixed workplace, tick one of the boxes below

- If you report to a depot, write in the depot address





Postcode



**OR**  Mainly work at or from home

Offshore installation

No fixed place

**41** How do you usually travel to work?

- Tick one box only

- Tick the box 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

**42** In your main job, how many hours a week (including paid and unpaid overtime) do you usually work?

15 or less

16 - 30

31 - 48

49 or more

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

➔ Go to questions for Person 2

**OR** If there are no more people in this household,

➔ Go to the Visitor questions on the back page

**OR** If there are no visitors staying here overnight,

➔ Go to the Declaration on the front page



# Individual questions - Person 2 start here

**1** What is your name? (Person 2 on page 3)

First name

Last name

**2** What is your sex?

- Male  Female

**3** What is your date of birth?

Day

Month

Year

**4** On 27 March 2011, what is your legal marital or same-sex civil partnership status?

- |  |  |
|--|--|
| <input type="checkbox"/> Never married and never registered a same-sex civil partnership | <input type="checkbox"/> In a registered same-sex civil partnership                              |
| <input type="checkbox"/> Married   | <input type="checkbox"/> Separated, but still legally in a same-sex civil partnership            |
| <input type="checkbox"/> Separated, but still legally married                            | <input type="checkbox"/> Formerly in a same-sex civil partnership which is now legally dissolved |
| <input type="checkbox"/> Divorced  | <input type="checkbox"/> Surviving partner from a same-sex civil partnership                     |
| <input type="checkbox"/> Widowed   |  |

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

- No → **Goto 7**  
 Yes, write in other UK address below




Postcode

**OR**  Yes, outside the UK, write in country

**6** What is that address?

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

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

- Yes  No → **Goto 9**

**8** During term time, do you live:

- at the address on the front of this questionnaire?  
 at the address in question 5? → **Goto 43**  
 at another address? → **Goto 43**

**9** What is your country of birth?

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

**10** 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

**11** If you arrived before 27 March 2010 → **Goto 13**

If you arrived on or after 27 March 2010 → **Goto 12**

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

- Less than 6 months  
 6 months or more but less than 12 months  
 12 months or more

**13** How is your health in general?

- Very good Good Fair Bad Very bad
- 

**14** Do you look after, or give any help or support to family members, friends, neighbours or others because of either:

- long-term physical or mental ill-health/disability?
  - problems related to old age?
- ↻ Do not count anything you do as part of your paid employment
- No  
 Yes, 1 - 19 hours a week  
 Yes, 20 - 49 hours a week  
 Yes, 50 or more hours a week



# Person 2 - continued

**15** How would you describe your national identity?

➤ Tick all that apply

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

**16** 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**

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

**B Mixed/multiple ethnic groups**

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed/multiple ethnic background, write in

**C Asian/Asian British**

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

**D Black/African/Caribbean/Black British**

- African
- Caribbean
- Any other Black/African/Caribbean background, write in

**E Other ethnic group**

- Arab
- Any other ethnic group, write in

**17** This question is intentionally left blank ➔ Go to **18**

**18** What is your main language?

- English ➔ 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
- 

**20** What is your religion?

- This question is voluntary
- No religion
  - Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
  - Buddhist
  - Hindu
  - Jewish
  - Muslim
  - Sikh
  - Any other religion, write in

**21** 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/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



**22** What passports do you hold?

➤ Tick all that apply

United Kingdom

Irish

Other, write in

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

None

**23** Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

➤ Include problems related to old age

Yes, limited a lot

Yes, limited a little

No

**24** If you are aged 16 or over ➔ Go to **25**

If you are aged 15 or under ➔ Go to **43**

**25** Which of these qualifications do you have?

➤ Tick **every** box that applies if you have **any** of the qualifications listed

➤ If your UK qualification is not listed, tick the box that contains its nearest equivalent

➤ If you have qualifications gained outside the UK, tick the 'Foreign qualifications' box and the nearest UK equivalents (if known)

1-4 O levels/CSEs/GCSEs (any grades), Entry Level, Foundation Diploma

NVQ Level 1, Foundation GNVQ, Basic Skills

5+ O levels (passes)/CSEs (grade 1)/GCSEs (grades A\*-C), School Certificate, 1 A level/2-3 AS levels/VCEs, Higher Diploma

NVQ Level 2, Intermediate GNVQ, City and Guilds Craft, BTEC First/General Diploma, RSA Diploma

Apprenticeship

2+ A levels/VCEs, 4+ AS levels, Higher School Certificate, Progression/Advanced Diploma

NVQ Level 3, Advanced GNVQ, City and Guilds Advanced Craft, ONC, OND, BTEC National, RSA Advanced Diploma

Degree (for example BA, BSc), Higher degree (for example MA, PhD, PGCE)

NVQ Level 4-5, HNC, HND, RSA Higher Diploma, BTEC Higher Level

Professional qualifications (for example teaching, nursing, accountancy)

Other vocational/work-related qualifications

Foreign qualifications

No qualifications

**26** Last week, were you:

➤ Tick all that apply

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

working as an employee? ➔ Go to **32**

on a government sponsored training scheme? ➔ Go to **32**

self-employed or freelance? ➔ Go to **32**

working paid or unpaid for your own or your family's business? ➔ Go to **32**

away from work ill, on maternity leave, on holiday or temporarily laid off? ➔ Go to **32**

doing any other kind of paid work? ➔ Go to **32**

none of the above

**27** Were you actively looking for any kind of paid work during the last four weeks?

Yes

No

**28** If a job had been available last week, could you have started it within two weeks?

Yes

No

**29** Last week, were you waiting to start a job already obtained?

Yes

No

**30** Last week, were you:

➤ Tick all that apply

retired (whether receiving a pension or not)?

a student?

looking after home or family?

long-term sick or disabled?

other

**31** Have you ever worked?

Yes, write in the year that you last worked

--	--	--	--

➔ Go to **32**

No, have never worked ➔ Go to **43**



# Person 2 - continued

**32** 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

**33** In your main job, are (were) you:  
 an employee?  
 self-employed or freelance without employees?  
 self-employed with employees?

**34** What is (was) your full and specific job title?  
 ➤ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER  
 ➤ Do not state your grade or pay band

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

**36** Do (did) you supervise any employees?  
 ➤ Supervision involves overseeing the work of other employees on a day-to-day basis

Yes       No

**37** At your workplace, what is (was) the main activity of your employer or business?  
 ➤ For example, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING  
 ➤ If you are (were) a civil servant, write GOVERNMENT  
 ➤ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**38** In your main job, what is (was) the name of the organisation you work (worked) for?  
 ➤ If you are (were) self-employed in your own organisation, write in the business name

\_\_\_\_\_

\_\_\_\_\_

No organisation, for example, self-employed, freelance, or work (worked) for a private individual

**39** If you had a job last week ➔ Go to **40**  
 If you didn't have a job last week ➔ Go to **43**

**40** In your main job, what is the address of your workplace?  
 ➤ If you work at or from home, on an offshore installation, or have no fixed workplace, tick one of the boxes below  
 ➤ If you report to a depot, write in the depot address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postcode \_\_\_\_\_

OR  Mainly work at or from home  
 Offshore installation  
 No fixed place

**41** How do you usually travel to work?  
 ➤ Tick one box only  
 ➤ Tick the box 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

**42** In your main job, how many hours a week (including paid and unpaid overtime) do you usually work?  
 15 or less  
 16 - 30  
 31 - 48  
 49 or more

**43** There are no more questions for Person 2.  
 ➔ Go to questions for Person 3

OR If there are no more people in this household,  
 ➔ Go to the Visitor questions on the back page

OR If there are no visitors staying here overnight,  
 ➔ Go to the Declaration on the front page



# Individual questions - Person 3 start here

**1** What is your name? (Person 3 on page 3)

First name

Last name

**2** What is your sex?

- Male  Female

**3** What is your date of birth?

Day

Month

Year

**4** On 27 March 2011, what is your legal marital or same-sex civil partnership status?

- |  |  |
|--|--|
| <input type="checkbox"/> Never married and never registered a same-sex civil partnership | <input type="checkbox"/> In a registered same-sex civil partnership                              |
| <input type="checkbox"/> Married   | <input type="checkbox"/> Separated, but still legally in a same-sex civil partnership            |
| <input type="checkbox"/> Separated, but still legally married                            | <input type="checkbox"/> Formerly in a same-sex civil partnership which is now legally dissolved |
| <input type="checkbox"/> Divorced  | <input type="checkbox"/> Surviving partner from a same-sex civil partnership                     |
| <input type="checkbox"/> Widowed   |  |

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

- No → **Goto 7**  
 Yes, write in other UK address below




Postcode

**OR**  Yes, outside the UK, write in country

**6** What is that address?

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

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

- Yes  No → **Goto 9**

**8** During term time, do you live:

- at the address on the front of this questionnaire?  
 at the address in question 5? → **Goto 43**  
 at another address? → **Goto 43**

**9** What is your country of birth?

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

**10** 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

**11** If you arrived before 27 March 2010 → **Goto 13**

If you arrived on or after 27 March 2010 → **Goto 12**

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

- Less than 6 months  
 6 months or more but less than 12 months  
 12 months or more

**13** How is your health in general?

- Very good Good Fair Bad Very bad
- 

**14** Do you look after, or give any help or support to family members, friends, neighbours or others because of either:

- long-term physical or mental ill-health/disability?
  - problems related to old age?
- ↻ Do not count anything you do as part of your paid employment
- No  
 Yes, 1 - 19 hours a week  
 Yes, 20 - 49 hours a week  
 Yes, 50 or more hours a week



# Person 3 - continued

**15** How would you describe your national identity?

➤ Tick all that apply

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

**16** 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**

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

**B Mixed/multiple ethnic groups**

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed/multiple ethnic background, write in

**C Asian/Asian British**

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

**D Black/African/Caribbean/Black British**

- African
- Caribbean
- Any other Black/African/Caribbean background, write in

**E Other ethnic group**

- Arab
- Any other ethnic group, write in

**17** This question is intentionally left blank ➔ Go to **18**

**18** What is your main language?

- English ➔ 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
- 

**20** What is your religion?

- This question is voluntary
- No religion
  - Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
  - Buddhist
  - Hindu
  - Jewish
  - Muslim
  - Sikh
  - Any other religion, write in

**21** 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/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





**22** What passports do you hold?

➤ Tick all that apply

United Kingdom

Irish

Other, write in

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

None

**23** Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

➤ Include problems related to old age

Yes, limited a lot

Yes, limited a little

No

**24** If you are aged 16 or over ➔ Go to **25**

If you are aged 15 or under ➔ Go to **43**

**25** Which of these qualifications do you have?

➤ Tick **every** box that applies if you have **any** of the qualifications listed

➤ If your UK qualification is not listed, tick the box that contains its nearest equivalent

➤ If you have qualifications gained outside the UK, tick the 'Foreign qualifications' box and the nearest UK equivalents (if known)

1-4 O levels/CSEs/GCSEs (any grades), Entry Level, Foundation Diploma

NVQ Level 1, Foundation GNVQ, Basic Skills

5+ O levels (passes)/CSEs (grade 1)/GCSEs (grades A\*-C), School Certificate, 1 A level/2-3 AS levels/VCEs, Higher Diploma

NVQ Level 2, Intermediate GNVQ, City and Guilds Craft, BTEC First/General Diploma, RSA Diploma

Apprenticeship

2+ A levels/VCEs, 4+ AS levels, Higher School Certificate, Progression/Advanced Diploma

NVQ Level 3, Advanced GNVQ, City and Guilds Advanced Craft, ONC, OND, BTEC National, RSA Advanced Diploma

Degree (for example BA, BSc), Higher degree (for example MA, PhD, PGCE)

NVQ Level 4-5, HNC, HND, RSA Higher Diploma, BTEC Higher Level

Professional qualifications (for example teaching, nursing, accountancy)

Other vocational/work-related qualifications

Foreign qualifications

No qualifications

**26** Last week, were you:

➤ Tick all that apply

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

working as an employee? ➔ Go to **32**

on a government sponsored training scheme? ➔ Go to **32**

self-employed or freelance? ➔ Go to **32**

working paid or unpaid for your own or your family's business? ➔ Go to **32**

away from work ill, on maternity leave, on holiday or temporarily laid off? ➔ Go to **32**

doing any other kind of paid work? ➔ Go to **32**

none of the above

**27** Were you actively looking for any kind of paid work during the last four weeks?

Yes

No

**28** If a job had been available last week, could you have started it within two weeks?

Yes

No

**29** Last week, were you waiting to start a job already obtained?

Yes

No

**30** Last week, were you:

➤ Tick all that apply

retired (whether receiving a pension or not)?

a student?

looking after home or family?

long-term sick or disabled?

other

**31** Have you ever worked?

Yes, write in the year that you last worked

--	--	--	--

➔ Go to **32**

No, have never worked ➔ Go to **43**



# Person 3 - continued

**32** 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

**33** In your main job, are (were) you:  
 an employee?  
 self-employed or freelance without employees?  
 self-employed with employees?

**34** What is (was) your full and specific job title?  
 ➤ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER  
 ➤ Do not state your grade or pay band

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

**36** Do (did) you supervise any employees?  
 ➤ Supervision involves overseeing the work of other employees on a day-to-day basis

Yes       No

**37** At your workplace, what is (was) the main activity of your employer or business?  
 ➤ For example, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING  
 ➤ If you are (were) a civil servant, write GOVERNMENT  
 ➤ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**38** In your main job, what is (was) the name of the organisation you work (worked) for?  
 ➤ If you are (were) self-employed in your own organisation, write in the business name

\_\_\_\_\_

\_\_\_\_\_

No organisation, for example, self-employed, freelance, or work (worked) for a private individual

**39** If you had a job last week ➔ Go to **40**  
 If you didn't have a job last week ➔ Go to **43**

**40** In your main job, what is the address of your workplace?  
 ➤ If you work at or from home, on an offshore installation, or have no fixed workplace, tick one of the boxes below  
 ➤ If you report to a depot, write in the depot address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

OR  Mainly work at or from home  
 Offshore installation  
 No fixed place

**41** How do you usually travel to work?  
 ➤ Tick one box only  
 ➤ Tick the box 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

**42** In your main job, how many hours a week (including paid and unpaid overtime) do you usually work?  
 15 or less  
 16 - 30  
 31 - 48  
 49 or more

**43** There are no more questions for Person 3.  
 ➔ Go to questions for Person 4

OR If there are no more people in this household,  
 ➔ Go to the Visitor questions on the back page

OR If there are no visitors staying here overnight,  
 ➔ Go to the Declaration on the front page



# Individual questions - Person 4 start here

**1** What is your name? (Person 4 on page 3)

First name

Last name

**2** What is your sex?

- Male  Female

**3** What is your date of birth?

Day

Month

Year

**4** On 27 March 2011, what is your legal marital or same-sex civil partnership status?

- |  |  |
|--|--|
| <input type="checkbox"/> Never married and never registered a same-sex civil partnership | <input type="checkbox"/> In a registered same-sex civil partnership                              |
| <input type="checkbox"/> Married   | <input type="checkbox"/> Separated, but still legally in a same-sex civil partnership            |
| <input type="checkbox"/> Separated, but still legally married                            | <input type="checkbox"/> Formerly in a same-sex civil partnership which is now legally dissolved |
| <input type="checkbox"/> Divorced  | <input type="checkbox"/> Surviving partner from a same-sex civil partnership                     |
| <input type="checkbox"/> Widowed   |  |

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

- No → **Go to 7**  
 Yes, write in other UK address below




Postcode

**OR**  Yes, outside the UK, write in country

**6** What is that address?

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

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

- Yes  No → **Go to 9**

**8** During term time, do you live:

- at the address on the front of this questionnaire?  
 at the address in question 5? → **Go to 43**  
 at another address? → **Go to 43**

**9** What is your country of birth?

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

**10** 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

**11** If you arrived before 27 March 2010 → **Go to 13**

If you arrived on or after 27 March 2010 → **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 6 months  
 6 months or more but less than 12 months  
 12 months or more

**13** How is your health in general?

- Very good Good Fair Bad Very bad
- 

**14** Do you look after, or give any help or support to family members, friends, neighbours or others because of either:

- long-term physical or mental ill-health/disability?
  - problems related to old age?
- ↻ Do not count anything you do as part of your paid employment
- No  
 Yes, 1 - 19 hours a week  
 Yes, 20 - 49 hours a week  
 Yes, 50 or more hours a week



# Person 4 - continued

**15** How would you describe your national identity?

➤ Tick all that apply

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

**16** 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**

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

**B Mixed/multiple ethnic groups**

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed/multiple ethnic background, write in

**C Asian/Asian British**

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

**D Black/African/Caribbean/Black British**

- African
- Caribbean
- Any other Black/African/Caribbean background, write in

**E Other ethnic group**

- Arab
- Any other ethnic group, write in

**17** This question is intentionally left blank ➔ Go to **18**

**18** What is your main language?

- English ➔ 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
- 

**20** What is your religion?

- This question is voluntary
- No religion
  - Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
  - Buddhist
  - Hindu
  - Jewish
  - Muslim
  - Sikh
  - Any other religion, write in

**21** 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/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



**22** What passports do you hold?

➤ Tick all that apply

United Kingdom

Irish

Other, write in

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

None

**23** Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

➤ Include problems related to old age

Yes, limited a lot

Yes, limited a little

No

**24** If you are aged 16 or over ➔ Go to **25**

If you are aged 15 or under ➔ Go to **43**

**25** Which of these qualifications do you have?

➤ Tick **every** box that applies if you have **any** of the qualifications listed

➤ If your UK qualification is not listed, tick the box that contains its nearest equivalent

➤ If you have qualifications gained outside the UK, tick the 'Foreign qualifications' box and the nearest UK equivalents (if known)

1-4 O levels/CSEs/GCSEs (any grades), Entry Level, Foundation Diploma

NVQ Level 1, Foundation GNVQ, Basic Skills

5+ O levels (passes)/CSEs (grade 1)/GCSEs (grades A\*-C), School Certificate, 1 A level/2-3 AS levels/VCEs, Higher Diploma

NVQ Level 2, Intermediate GNVQ, City and Guilds Craft, BTEC First/General Diploma, RSA Diploma

Apprenticeship

2+ A levels/VCEs, 4+ AS levels, Higher School Certificate, Progression/Advanced Diploma

NVQ Level 3, Advanced GNVQ, City and Guilds Advanced Craft, ONC, OND, BTEC National, RSA Advanced Diploma

Degree (for example BA, BSc), Higher degree (for example MA, PhD, PGCE)

NVQ Level 4-5, HNC, HND, RSA Higher Diploma, BTEC Higher Level

Professional qualifications (for example teaching, nursing, accountancy)

Other vocational/work-related qualifications

Foreign qualifications

No qualifications

**26** Last week, were you:

➤ Tick all that apply

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

working as an employee? ➔ Go to **32**

on a government sponsored training scheme? ➔ Go to **32**

self-employed or freelance? ➔ Go to **32**

working paid or unpaid for your own or your family's business? ➔ Go to **32**

away from work ill, on maternity leave, on holiday or temporarily laid off? ➔ Go to **32**

doing any other kind of paid work? ➔ Go to **32**

none of the above

**27** Were you actively looking for any kind of paid work during the last four weeks?

Yes

No

**28** If a job had been available last week, could you have started it within two weeks?

Yes

No

**29** Last week, were you waiting to start a job already obtained?

Yes

No

**30** Last week, were you:

➤ Tick all that apply

retired (whether receiving a pension or not)?

a student?

looking after home or family?

long-term sick or disabled?

other

**31** Have you ever worked?

Yes, write in the year that you last worked

--	--	--	--

➔ Go to **32**

No, have never worked ➔ Go to **43**



# Person 4 - continued

**32** 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

**33** In your main job, are (were) you:

- an employee?
- self-employed or freelance without employees?
- self-employed with employees?

**34** What is (was) your full and specific job title?

- For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER
- Do not state your grade or pay band



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



**36** Do (did) you supervise any employees?

➤ Supervision involves overseeing the work of other employees on a day-to-day basis

- Yes  No

**37** At your workplace, what is (was) the main activity of your employer or business?

- For example, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING
- If you are (were) a civil servant, write GOVERNMENT
- If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority




**38** In your main job, what is (was) the name of the organisation you work (worked) for?

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



- No organisation, for example, self-employed, freelance, or work (worked) for a private individual

**39** If you had a job last week ➔ Go to **40**

If you didn't have a job last week ➔ Go to **43**

**40** In your main job, what is the address of your workplace?

➤ If you work at or from home, on an offshore installation, or have no fixed workplace, tick one of the boxes below

➤ If you report to a depot, write in the depot address





Postcode

- OR
- Mainly work at or from home
  - Offshore installation
  - No fixed place

**41** How do you usually travel to work?

- Tick one box only
- Tick the box 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

**42** In your main job, how many hours a week (including paid and unpaid overtime) do you usually work?

- 15 or less
- 16 - 30
- 31 - 48
- 49 or more

**43** There are no more questions for Person 4.  
➔ Go to questions for Person 5

OR If there are no more people in this household,  
➔ Go to the Visitor questions on the back page

OR If there are no visitors staying here overnight,  
➔ Go to the Declaration on the front page



# Individual questions - Person 5 start here

**1** What is your name? (Person 5 on page 3)

First name

Last name

**2** What is your sex?

- Male  Female

**3** What is your date of birth?

Day

Month

Year

**4** On 27 March 2011, what is your legal marital or same-sex civil partnership status?

- |  |  |
|--|--|
| <input type="checkbox"/> Never married and never registered a same-sex civil partnership | <input type="checkbox"/> In a registered same-sex civil partnership                              |
| <input type="checkbox"/> Married   | <input type="checkbox"/> Separated, but still legally in a same-sex civil partnership            |
| <input type="checkbox"/> Separated, but still legally married                            | <input type="checkbox"/> Formerly in a same-sex civil partnership which is now legally dissolved |
| <input type="checkbox"/> Divorced  | <input type="checkbox"/> Surviving partner from a same-sex civil partnership                     |
| <input type="checkbox"/> Widowed   |  |

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

- No → **Go to 7**  
 Yes, write in other UK address below




Postcode

**OR**  Yes, outside the UK, write in country

**6** What is that address?

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

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

- Yes  No → **Go to 9**

**8** During term time, do you live:

- at the address on the front of this questionnaire?  
 at the address in question 5? → **Go to 43**  
 at another address? → **Go to 43**

**9** What is your country of birth?

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

**10** 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

**11** If you arrived before 27 March 2010 → **Go to 13**

If you arrived on or after 27 March 2010 → **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 6 months  
 6 months or more but less than 12 months  
 12 months or more

**13** How is your health in general?

- Very good Good Fair Bad Very bad
- 

**14** Do you look after, or give any help or support to family members, friends, neighbours or others because of either:

- long-term physical or mental ill-health/disability?
  - problems related to old age?
- ↻ Do not count anything you do as part of your paid employment
- No  
 Yes, 1 - 19 hours a week  
 Yes, 20 - 49 hours a week  
 Yes, 50 or more hours a week



# Person 5 - continued

**15** How would you describe your national identity?

➤ Tick all that apply

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

**16** 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**

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

**B Mixed/multiple ethnic groups**

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed/multiple ethnic background, write in

**C Asian/Asian British**

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

**D Black/African/Caribbean/Black British**

- African
- Caribbean
- Any other Black/African/Caribbean background, write in

**E Other ethnic group**

- Arab
- Any other ethnic group, write in

**17** This question is intentionally left blank ➔ Go to **18**

**18** What is your main language?

- English ➔ 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
- 

**20** What is your religion?

- This question is voluntary
- No religion
  - Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
  - Buddhist
  - Hindu
  - Jewish
  - Muslim
  - Sikh
  - Any other religion, write in

**21** 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/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





**22** What passports do you hold?

➤ Tick all that apply

United Kingdom

Irish

Other, write in

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

None

**23** Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

➤ Include problems related to old age

Yes, limited a lot

Yes, limited a little

No

**24** If you are aged 16 or over ➔ Go to **25**

If you are aged 15 or under ➔ Go to **43**

**25** Which of these qualifications do you have?

➤ Tick **every** box that applies if you have **any** of the qualifications listed

➤ If your UK qualification is not listed, tick the box that contains its nearest equivalent

➤ If you have qualifications gained outside the UK, tick the 'Foreign qualifications' box and the nearest UK equivalents (if known)

1-4 O levels/CSEs/GCSEs (any grades), Entry Level, Foundation Diploma

NVQ Level 1, Foundation GNVQ, Basic Skills

5+ O levels (passes)/CSEs (grade 1)/GCSEs (grades A\*-C), School Certificate, 1 A level/2-3 AS levels/VCEs, Higher Diploma

NVQ Level 2, Intermediate GNVQ, City and Guilds Craft, BTEC First/General Diploma, RSA Diploma

Apprenticeship

2+ A levels/VCEs, 4+ AS levels, Higher School Certificate, Progression/Advanced Diploma

NVQ Level 3, Advanced GNVQ, City and Guilds Advanced Craft, ONC, OND, BTEC National, RSA Advanced Diploma

Degree (for example BA, BSc), Higher degree (for example MA, PhD, PGCE)

NVQ Level 4-5, HNC, HND, RSA Higher Diploma, BTEC Higher Level

Professional qualifications (for example teaching, nursing, accountancy)

Other vocational/work-related qualifications

Foreign qualifications

No qualifications

**26** Last week, were you:

➤ Tick all that apply

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

working as an employee? ➔ Go to **32**

on a government sponsored training scheme? ➔ Go to **32**

self-employed or freelance? ➔ Go to **32**

working paid or unpaid for your own or your family's business? ➔ Go to **32**

away from work ill, on maternity leave, on holiday or temporarily laid off? ➔ Go to **32**

doing any other kind of paid work? ➔ Go to **32**

none of the above

**27** Were you actively looking for any kind of paid work during the last four weeks?

Yes

No

**28** If a job had been available last week, could you have started it within two weeks?

Yes

No

**29** Last week, were you waiting to start a job already obtained?

Yes

No

**30** Last week, were you:

➤ Tick all that apply

retired (whether receiving a pension or not)?

a student?

looking after home or family?

long-term sick or disabled?

other

**31** Have you ever worked?

Yes, write in the year that you last worked

--	--	--	--

➔ Go to **32**

No, have never worked ➔ Go to **43**



# Person 5 - continued

**32** 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

**33** In your main job, are (were) you:

- an employee?
- self-employed or freelance without employees?
- self-employed with employees?

**34** What is (was) your full and specific job title?

- For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER
- Do not state your grade or pay band



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



**36** Do (did) you supervise any employees?

- Supervision involves overseeing the work of other employees on a day-to-day basis
- Yes  No

**37** At your workplace, what is (was) the main activity of your employer or business?

- For example, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING
- If you are (were) a civil servant, write GOVERNMENT
- If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority




**38** In your main job, what is (was) the name of the organisation you work (worked) for?

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



- No organisation, for example, self-employed, freelance, or work (worked) for a private individual

**39** If you had a job last week ➔ Go to **40**

If you didn't have a job last week ➔ Go to **43**

**40** In your main job, what is the address of your workplace?

- If you work at or from home, on an offshore installation, or have no fixed workplace, tick one of the boxes below
- If you report to a depot, write in the depot address





Postcode

- OR
- Mainly work at or from home
  - Offshore installation
  - No fixed place

**41** How do you usually travel to work?

- Tick one box only
- Tick the box 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

**42** In your main job, how many hours a week (including paid and unpaid overtime) do you usually work?

- 15 or less
- 16 - 30
- 31 - 48
- 49 or more

**43** There are no more questions for Person 5.

➔ Go to questions for Person 6

OR If there are no more people in this household, ➔ Go to the Visitor questions on the back page

OR If there are no visitors staying here overnight, ➔ Go to the Declaration on the front page



# Individual questions - Person 6 start here

**1** What is your name? (Person 6 on page 3)

First name

Last name

**2** What is your sex?

- Male  Female

**3** What is your date of birth?

Day Month Year

**4** On 27 March 2011, what is your legal marital or same-sex civil partnership status?

- |  |  |
|--|--|
| <input type="checkbox"/> Never married and never registered a same-sex civil partnership | <input type="checkbox"/> In a registered same-sex civil partnership                              |
| <input type="checkbox"/> Married   | <input type="checkbox"/> Separated, but still legally in a same-sex civil partnership            |
| <input type="checkbox"/> Separated, but still legally married                            | <input type="checkbox"/> Formerly in a same-sex civil partnership which is now legally dissolved |
| <input type="checkbox"/> Divorced  | <input type="checkbox"/> Surviving partner from a same-sex civil partnership                     |
| <input type="checkbox"/> Widowed   |  |

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

- No → **Go to 7**  
 Yes, write in other UK address below




Postcode

**OR**  Yes, outside the UK, write in country

**6** What is that address?

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

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

- Yes  No → **Go to 9**

**8** During term time, do you live:

- at the address on the front of this questionnaire?  
 at the address in question 5? → **Go to 43**  
 at another address? → **Go to 43**

**9** What is your country of birth?

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

**10** 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

**11** If you arrived before 27 March 2010 → **Go to 13**

If you arrived on or after 27 March 2010 → **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 6 months  
 6 months or more but less than 12 months  
 12 months or more

**13** How is your health in general?

Very good Good Fair Bad Very bad

- 

**14** Do you look after, or give any help or support to family members, friends, neighbours or others because of either:

- long-term physical or mental ill-health/disability?
  - problems related to old age?
- ↻ Do not count anything you do as part of your paid employment

- No  
 Yes, 1 - 19 hours a week  
 Yes, 20 - 49 hours a week  
 Yes, 50 or more hours a week



# Person 6 - continued

**15** How would you describe your national identity?

➤ Tick all that apply

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

**16** 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**

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

**B Mixed/multiple ethnic groups**

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed/multiple ethnic background, write in

**C Asian/Asian British**

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

**D Black/African/Caribbean/Black British**

- African
- Caribbean
- Any other Black/African/Caribbean background, write in

**E Other ethnic group**

- Arab
- Any other ethnic group, write in

**17** This question is intentionally left blank ➔ Go to **18**

**18** What is your main language?

- English ➔ 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
- 

**20** What is your religion?

- This question is voluntary
- No religion
  - Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
  - Buddhist
  - Hindu
  - Jewish
  - Muslim
  - Sikh
  - Any other religion, write in

**21** 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/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



**22** What passports do you hold?

➤ Tick all that apply

United Kingdom

Irish

Other, write in

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

None

**23** Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

➤ Include problems related to old age

Yes, limited a lot

Yes, limited a little

No

**24** If you are aged 16 or over ➔ Go to **25**

If you are aged 15 or under ➔ Go to **43**

**25** Which of these qualifications do you have?

➤ Tick **every** box that applies if you have **any** of the qualifications listed

➤ If your UK qualification is not listed, tick the box that contains its nearest equivalent

➤ If you have qualifications gained outside the UK, tick the 'Foreign qualifications' box and the nearest UK equivalents (if known)

1-4 O levels/CSEs/GCSEs (any grades), Entry Level, Foundation Diploma

NVQ Level 1, Foundation GNVQ, Basic Skills

5+ O levels (passes)/CSEs (grade 1)/GCSEs (grades A\*-C), School Certificate, 1 A level/2-3 AS levels/VCEs, Higher Diploma

NVQ Level 2, Intermediate GNVQ, City and Guilds Craft, BTEC First/General Diploma, RSA Diploma

Apprenticeship

2+ A levels/VCEs, 4+ AS levels, Higher School Certificate, Progression/Advanced Diploma

NVQ Level 3, Advanced GNVQ, City and Guilds Advanced Craft, ONC, OND, BTEC National, RSA Advanced Diploma

Degree (for example BA, BSc), Higher degree (for example MA, PhD, PGCE)

NVQ Level 4-5, HNC, HND, RSA Higher Diploma, BTEC Higher Level

Professional qualifications (for example teaching, nursing, accountancy)

Other vocational/work-related qualifications

Foreign qualifications

No qualifications

**26** Last week, were you:

➤ Tick all that apply

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

working as an employee? ➔ Go to **32**

on a government sponsored training scheme? ➔ Go to **32**

self-employed or freelance? ➔ Go to **32**

working paid or unpaid for your own or your family's business? ➔ Go to **32**

away from work ill, on maternity leave, on holiday or temporarily laid off? ➔ Go to **32**

doing any other kind of paid work? ➔ Go to **32**

none of the above

**27** Were you actively looking for any kind of paid work during the last four weeks?

Yes

No

**28** If a job had been available last week, could you have started it within two weeks?

Yes

No

**29** Last week, were you waiting to start a job already obtained?

Yes

No

**30** Last week, were you:

➤ Tick all that apply

retired (whether receiving a pension or not)?

a student?

looking after home or family?

long-term sick or disabled?

other

**31** Have you ever worked?

Yes, write in the year that you last worked

--	--	--	--

➔ Go to **32**

No, have never worked ➔ Go to **43**



# Person 6 - continued

**32** 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

**33** In your main job, are (were) you:  
 an employee?  
 self-employed or freelance without employees?  
 self-employed with employees?

**34** What is (was) your full and specific job title?  
 ➤ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER  
 ➤ Do not state your grade or pay band

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

**36** Do (did) you supervise any employees?  
 ➤ Supervision involves overseeing the work of other employees on a day-to-day basis

Yes  No

**37** At your workplace, what is (was) the main activity of your employer or business?  
 ➤ For example, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING  
 ➤ If you are (were) a civil servant, write GOVERNMENT  
 ➤ If you are (were) a local government officer, write LOCAL GOVERNMENT and give the name of your department within the local authority

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**38** In your main job, what is (was) the name of the organisation you work (worked) for?  
 ➤ If you are (were) self-employed in your own organisation, write in the business name

\_\_\_\_\_

\_\_\_\_\_

No organisation, for example, self-employed, freelance, or work (worked) for a private individual

**39** If you had a job last week ➔ Go to **40**  
 If you didn't have a job last week ➔ Go to **43**

**40** In your main job, what is the address of your workplace?  
 ➤ If you work at or from home, on an offshore installation, or have no fixed workplace, tick one of the boxes below  
 ➤ If you report to a depot, write in the depot address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postcode \_\_\_\_\_

OR  Mainly work at or from home  
 Offshore installation  
 No fixed place

**41** How do you usually travel to work?  
 ➤ Tick one box only  
 ➤ Tick the box 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

**42** In your main job, how many hours a week (including paid and unpaid overtime) do you usually work?

15 or less  
 16 - 30  
 31 - 48  
 49 or more

**43** There are no more questions for Person 6.  
 ➔ Go to the Visitor questions on the back page  
 OR If there are no visitors staying here overnight,  
 ➔ Go to the Declaration on the front page



## Further information

### Students / schoolchildren who live away from home during term time

All students or schoolchildren who live away from home during term time need to be included on a questionnaire at both their home and term time addresses.

- At their home address they must be included in Household questions (H1 to H3 and H6) and Individual questions (1 to 8)
- At their term time address they must be included in Household questions (H1 to H3 and H6) and Individual questions (1 to 43)

### Children with parents who live apart

Children with parents who live apart should be included on the questionnaire for the address where they spend the majority of their time. They should be included in Household questions (H1 to H3 and H6) and Individual questions (1 to 43).

If they are staying overnight at their other address on 27 March 2011, they must also be included on the questionnaire for that other address in Household questions (H4 to H5) and Visitor questions (V1 to V4).

If they live equally between two addresses, they should be included at the address where they are staying overnight on 27 March 2011 in Household questions (H1 to H3 and H6) and Individual questions (1 to 43).

### People from outside the UK

People from outside the UK whose total length of stay in the UK will be 3 months or more should be included on the questionnaire where they usually stay. They should be included in Household questions (H1 to H3 and H6) and Individual questions (1 to 43).

If their total length of stay is less than 3 months, they should only be included as a visitor on the questionnaire at the address where they are staying overnight on 27 March 2011, in Household questions (H4 to H5) and Visitor questions (V1 to V4).

### People with no usual address

People who usually live in the UK but have no usual address should be included on a questionnaire at the address where they are staying overnight on 27 March 2011, in Household questions (H1 to H3 and H6) and Individual questions (1 to 43).

### Households away on 27 March 2011

If this address is unoccupied overnight on 27 March 2011 because the whole household is away, the questionnaire should be completed as soon as possible upon their return.

### People temporarily away from home

Anyone who is temporarily away from their permanent or family home on 27 March 2011 should be included at their home address in Household questions (H1 to H3 and H6) and Individual questions (1 to 43). This includes people who are:

- staying, or expecting to stay, in an establishment such as a hospital, care home or hostel, for less than 6 months
- living away from home while working, on holiday or travelling (unless outside the UK for 12 months or more)
- members of the armed forces
- staying at their second address
- visiting friends or relatives
- in prison on remand (for any length of time), or sentenced to less than 6 months' imprisonment

### People who live at more than one UK address

People with more than one UK address, for example people who live away from home while working, should be included on the questionnaire at:

- their permanent or family home; or
- the address where they spend the majority of their time, if they do not have a permanent or family home

They should be included in Household questions (H1 to H3 and H6) and Individual questions (1 to 43).

If they are staying overnight at their second UK address on 27 March 2011, they must also be included as a visitor on the questionnaire for that address in Household questions (H4 to H5) and Visitor questions (V1 to V4).

### Lodgers

Lodgers who live full time at their lodging address should be included on the questionnaire where they lodge, in Household questions (H1 to H3 and H6) and Individual questions (1 to 43).

People who only lodge part time should refer to the other section on this page 'People who live at more than one UK address'.

### Unrelated / shared households

One of the householders/tenants must complete Household questions (H1 to H14) and ensure Individual questions (1 to 43) are completed for each household member. The Individual questions may be completed separately by requesting an Individual Questionnaire.



# Visitor questions

**V** How many visitors did you include in question H5?

- 1 to 3 - answer questions V1 to V4 below for each visitor
- 4 or more - answer questions V1 to V4 below for the first three visitors then go to [www.census.gov.uk](http://www.census.gov.uk) or call 0300 0201 101 to request a Continuation Questionnaire

## Visitor A

**V1** What is this person's name?

First name

Last name

**V2** What is this person's sex?

- Male  Female

**V3** What is this person's date of birth?

Day Month Year

**V4** What is this person's usual UK address?

Postcode

**OR**  Outside the UK, write in country

## Visitor B

**V1** What is this person's name?

First name

Last name

**V2** What is this person's sex?

- Male  Female

**V3** What is this person's date of birth?

Day Month Year

**V4** What is this person's usual UK address?

- Same address as Visitor A

Postcode

**OR**  Outside the UK, write in country

## Visitor C

**V1** What is this person's name?

First name

Last name

**V2** What is this person's sex?

- Male  Female

**V3** What is this person's date of birth?

Day Month Year

**V4** What is this person's usual UK address?

- Same address as Visitor A

Postcode

**OR**  Outside the UK, write in country

Now ➔ Go to the Declaration on the front page

