

OFFICE USE ONLY	Prov.	FED No.	EA No.	VN	CCD	2 B		1.		
	Hhld No.	Form type 3	No. of persons	Questionnaire No. [] of []		UD 2 []	FR 4 []		Forms 3 []	2.
						TD 1 []	M 3 []	DC 5 []	TR []	

Count Yourself In! May 14, 1996

CENSUS

96

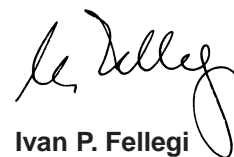
A message about the census

For over 300 years, the census has painted a picture of our people and the places in which we live. The information collected on May 14, 1996, will help all of us prepare for the future. The census provides information needed by community groups, businesses, and governments to develop plans for education and training, new products and services, housing for seniors, health care services, and many other programs that are important to all of us.

By law, Statistics Canada must take a census every five years, and every household must fill in a census form. And by law, no one, except employees of Statistics Canada, is allowed to see the personal information you provide.

Please fill in your census form and mail it back on May 14, 1996.

Thank you for your co-operation.



Ivan P. Fellegi
Chief Statistician of Canada

This information is collected under the authority of the *Statistics Act*, R.S.C. 1985, c. S-19, and must be provided by law.

CONFIDENTIAL WHEN COMPLETED



STEP 1

Begin here by printing your address

No. and street or lot and concession

Apt. No.

City, town, village, Indian reserve

Province / territory

Postal code

Area code

Telephone number

 -

Need Help?

Please see the Guide

or call us
free of charge:

1 800 670-3388



TDD/TTY users call:
1 800 303-9633



Statistics
Canada

Statistique
Canada

Canada



List below all persons who usually live here as of May 14, 1996, even if they are temporarily away on business, at school or on vacation.

STEP 2

Don't forget to include yourself!

- **Begin the list with** an adult followed, if applicable, by that person's spouse or common-law partner and by their children.
- Continue with all other persons who usually live here. Children should be listed immediately after their parent(s).

	Family name	Given name	Initial
Person 1			
Person 2			
Person 3			
Person 4			
Person 5			
Person 6			
Person 7			
Person 8			
Person 9			
Person 10			

FOR INFORMATION ONLY

If you need more space, use the "Comments" section on page 32.

BE SURE TO INCLUDE

- **everyone who usually lives here**, including newborn babies, room-mates, boarders and live-in employees;
- **sons or daughters who live somewhere else while attending school** but return to live here for part of the year;
- **children in joint custody** who live here most of the time (if they spend equal time with each parent, include them if they are staying here on May 14, 1996);
- persons from another country who live in Canada and have **work, student or Minister's permits, or persons claiming refugee status**, and family members living with them;
- persons who usually live here but are now in an **institution** (such as a home for the aged, a hospital or a prison), if they have been there **less than six months**;
- persons staying here on May 14, 1996, who have **no usual home elsewhere**.



Did you leave anyone out of Step 2 because you were not sure the person should be listed?

STEP 3

For example:

- other relatives living here;
- a student away at school;
- a lodger who has another home;
- a person who has moved recently; or
- a member of this household who is away in an institution.

00.

No

01 Yes → Print the name of each person left out and the reason.

Name
Reason

Name
Reason

If you need more space, use the "Comments" section on page 32.

FOR INFORMATION ONLY



Are ALL PERSONS in this household:

STEP 4

- government representatives of **another country** and their families;
- OR • members of the Armed Forces of **another country** and their families;
- OR • residents of **another country** visiting Canada, for example, on a business trip or on vacation?

No → **Continue with Step 5**

02 Yes → Do not complete this questionnaire. Mail it in the enclosed postage-paid envelope.



If **ALL PERSONS** in this household are staying here temporarily **and have a usual home somewhere else in Canada**, enter the total number of persons in this box

STEP 5

03 → Do not complete this questionnaire. Mail it in the enclosed postage-paid envelope.



Does anyone in this household OPERATE an agricultural operation?

STEP 6

Agricultural operations include: ranches, farms, feedlots, hobby farms, greenhouses, mushroom houses, nurseries, Christmas tree farms, fur farms, horse farms, game farms; beekeeping, sod, fruit and maple syrup operations, etc.

04 No

05 Yes



In Question 1 on the next page, copy the names from Step 2.

STEP 7

HOUSEHOLDS WITH MORE THAN SIX PERSONS

If there are more than six persons in this household, enter the first six on this questionnaire and continue on a second questionnaire. If you do not have a second questionnaire, note this in the "Comments" section on page 32. A Statistics Canada representative will contact you.

1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

2. RELATIONSHIP TO PERSON 1

For **each** person usually living here, describe his/her relationship to Person 1.

Mark or specify one response only.

Stepchildren, adopted children and children of a common-law partner should be considered sons and daughters.

If none of the choices apply, use the "Other" box to indicate this person's relationship to Person 1.

Examples of "Other" relationships to Person 1:

- *cousin*
- *niece or nephew*
- *son's common-law partner (common-law daughter-in-law)*
- *lodger's husband, wife or common-law partner*
- *lodger's son or daughter*
- *room-mate's daughter or son*
- *employee*

01.

01 **PERSON 1**

02.

- 02 Husband or wife of Person 1
- 03 Common-law partner of Person 1
- 04 Son or daughter of Person 1
- 05 Son-in-law or daughter-in-law of Person 1
- 06 Grandchild of Person 1
- 07 Father or mother of Person 1
- 08 Father-in-law or mother-in-law of Person 1
- 09 Grandparent of Person 1
- 10 Brother or sister of Person 1
- 11 Brother-in-law or sister-in-law of Person 1
- 12 Lodger or boarder
- 13 Room-mate
- Other — *Specify*

14

3. DATE OF BIRTH

Enter **day**, **month** and **year**.

Example:

If this person was born on the 23rd of February 1954, enter

Day	Month	Year
23	02	1954

If exact date is not known, enter best estimate.

Date of birth

Day	Month	Year
15		1

Date of birth

Day	Month	Year
15		1

4. SEX

16 Male 17 Female

16 Male 17 Female

5. MARITAL STATUS

Mark one circle only.

18 Legally married (and not separated)

19 Separated, but still legally married

20 Divorced

21 Widowed

22 Never married (single)

18 Legally married (and not separated)

19 Separated, but still legally married

20 Divorced

21 Widowed

22 Never married (single)

6. Is this person living with a **common-law** partner?

Common-law refers to two people who live together as husband and wife but who are not legally married to each other.

23 Yes

24 No

23 Yes

24 No

FOR INFORMATION ONLY

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

03.

04 Son or daughter of Person 1

05 Son-in-law or daughter-in-law of Person 1

06 Grandchild of Person 1

07 Father or mother of Person 1

08 Father-in-law or mother-in-law of Person 1

09 Grandparent of Person 1

10 Brother or sister of Person 1

11 Brother-in-law or sister-in-law of Person 1

12 Lodger or boarder

13 Room-mate

Other — *Specify*

14

04.

04 Son or daughter of Person 1

05 Son-in-law or daughter-in-law of Person 1

06 Grandchild of Person 1

07 Father or mother of Person 1

08 Father-in-law or mother-in-law of Person 1

09 Grandparent of Person 1

10 Brother or sister of Person 1

11 Brother-in-law or sister-in-law of Person 1

12 Lodger or boarder

13 Room-mate

Other — *Specify*

14

05.

04 Son or daughter of Person 1

05 Son-in-law or daughter-in-law of Person 1

06 Grandchild of Person 1

07 Father or mother of Person 1

08 Father-in-law or mother-in-law of Person 1

09 Grandparent of Person 1

10 Brother or sister of Person 1

11 Brother-in-law or sister-in-law of Person 1

12 Lodger or boarder

13 Room-mate

Other — *Specify*

14

06.

04 Son or daughter of Person 1

05 Son-in-law or daughter-in-law of Person 1

06 Grandchild of Person 1

07 Father or mother of Person 1

08 Father-in-law or mother-in-law of Person 1

09 Grandparent of Person 1

10 Brother or sister of Person 1

11 Brother-in-law or sister-in-law of Person 1

12 Lodger or boarder

13 Room-mate

Other — *Specify*

14

Date of birth

Day Month Year

15 1

Date of birth

Day Month Year

15 1

Date of birth

Day Month Year

15 1

Date of birth

Day Month Year

15 1

16 Male 17 Female

16 Male 17 Female

16 Male 17 Female

16 Male 17 Female

18 Legally married (and not separated)

19 Separated, but still legally married

20 Divorced

21 Widowed

22 Never married (single)

18 Legally married (and not separated)

19 Separated, but still legally married

20 Divorced

21 Widowed

22 Never married (single)

18 Legally married (and not separated)

19 Separated, but still legally married

20 Divorced

21 Widowed

22 Never married (single)

18 Legally married (and not separated)

19 Separated, but still legally married

20 Divorced

21 Widowed

22 Never married (single)

23 Yes

24 No

23 Yes

24 No

23 Yes

24 No

23 Yes

24 No

1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

ACTIVITY LIMITATIONS

7. Is this person limited in the kind or amount of activity that he/she can do because of a long-term physical condition, mental condition or health problem:

(a) at home?

(b) at school or at work?

(c) in other activities, for example, in transportation to or from work, or in leisure time activities?

8. Does this person have any **long-term** disabilities or handicaps?

LANGUAGE

9. Can this person speak English or French well enough to conduct a conversation?

Mark one circle only.

10. What language(s), **other than English or French**, can this person speak well enough to conduct a conversation?

11. What language does this person speak **most often** at home?

12. What is the language that this person **first learned** at home **in childhood** and **still understands**?

If this person no longer understands the first language learned, indicate the second language learned.

07.

01 No, not limited

02 Yes, limited

03 No, not limited

04 Yes, limited

05 Not applicable

06 No, not limited

07 Yes, limited

08 No

09 Yes

10 English only

11 French only

12 Both English and French

13 Neither English nor French

14 None

OR

Specify other language(s)

15

16

17

18 English

19 French

Other — *Specify*

20

21 English

22 French

Other — *Specify*

23

08.

01 No, not limited

02 Yes, limited

03 No, not limited

04 Yes, limited

05 Not applicable

06 No, not limited

07 Yes, limited

08 No

09 Yes

10 English only

11 French only

12 Both English and French

13 Neither English nor French

14 None

OR

Specify other language(s)

15

16

17

18 English

19 French

Other — *Specify*

20

21 English

22 French

Other — *Specify*

23

FOR INFORMATION ONLY

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

<p>09.</p> <p>01 <input type="radio"/> No, not limited 02 <input type="radio"/> Yes, limited</p> <p>03 <input type="radio"/> No, not limited 04 <input type="radio"/> Yes, limited 05 <input type="radio"/> Not applicable</p> <p>06 <input type="radio"/> No, not limited 07 <input type="radio"/> Yes, limited</p> <p>08 <input type="radio"/> No 09 <input type="radio"/> Yes</p> <p>10 <input type="radio"/> English only 11 <input type="radio"/> French only 12 <input type="radio"/> Both English and French 13 <input type="radio"/> Neither English nor French</p> <p>14 <input type="radio"/> None OR Specify other language(s)</p> <p>15 <input type="text"/></p> <p>16 <input type="text"/></p> <p>17 <input type="text"/></p> <p>18 <input type="radio"/> English 19 <input type="radio"/> French Other — Specify</p> <p>20 <input type="text"/></p> <p>21 <input type="radio"/> English 22 <input type="radio"/> French Other — Specify</p> <p>23 <input type="text"/></p>	<p>10.</p> <p>01 <input type="radio"/> No, not limited 02 <input type="radio"/> Yes, limited</p> <p>03 <input type="radio"/> No, not limited 04 <input type="radio"/> Yes, limited 05 <input type="radio"/> Not applicable</p> <p>06 <input type="radio"/> No, not limited 07 <input type="radio"/> Yes, limited</p> <p>08 <input type="radio"/> No 09 <input type="radio"/> Yes</p> <p>10 <input type="radio"/> English only 11 <input type="radio"/> French only 12 <input type="radio"/> Both English and French 13 <input type="radio"/> Neither English nor French</p> <p>14 <input type="radio"/> None OR Specify other language(s)</p> <p>15 <input type="text"/></p> <p>16 <input type="text"/></p> <p>17 <input type="text"/></p> <p>18 <input type="radio"/> English 19 <input type="radio"/> French Other — Specify</p> <p>20 <input type="text"/></p> <p>21 <input type="radio"/> English 22 <input type="radio"/> French Other — Specify</p> <p>23 <input type="text"/></p>	<p>11.</p> <p>01 <input type="radio"/> No, not limited 02 <input type="radio"/> Yes, limited</p> <p>03 <input type="radio"/> No, not limited 04 <input type="radio"/> Yes, limited 05 <input type="radio"/> Not applicable</p> <p>06 <input type="radio"/> No, not limited 07 <input type="radio"/> Yes, limited</p> <p>08 <input type="radio"/> No 09 <input type="radio"/> Yes</p> <p>10 <input type="radio"/> English only 11 <input type="radio"/> French only 12 <input type="radio"/> Both English and French 13 <input type="radio"/> Neither English nor French</p> <p>14 <input type="radio"/> None OR Specify other language(s)</p> <p>15 <input type="text"/></p> <p>16 <input type="text"/></p> <p>17 <input type="text"/></p> <p>18 <input type="radio"/> English 19 <input type="radio"/> French Other — Specify</p> <p>20 <input type="text"/></p> <p>21 <input type="radio"/> English 22 <input type="radio"/> French Other — Specify</p> <p>23 <input type="text"/></p>	<p>12.</p> <p>01 <input type="radio"/> No, not limited 02 <input type="radio"/> Yes, limited</p> <p>03 <input type="radio"/> No, not limited 04 <input type="radio"/> Yes, limited 05 <input type="radio"/> Not applicable</p> <p>06 <input type="radio"/> No, not limited 07 <input type="radio"/> Yes, limited</p> <p>08 <input type="radio"/> No 09 <input type="radio"/> Yes</p> <p>10 <input type="radio"/> English only 11 <input type="radio"/> French only 12 <input type="radio"/> Both English and French 13 <input type="radio"/> Neither English nor French</p> <p>14 <input type="radio"/> None OR Specify other language(s)</p> <p>15 <input type="text"/></p> <p>16 <input type="text"/></p> <p>17 <input type="text"/></p> <p>18 <input type="radio"/> English 19 <input type="radio"/> French Other — Specify</p> <p>20 <input type="text"/></p> <p>21 <input type="radio"/> English 22 <input type="radio"/> French Other — Specify</p> <p>23 <input type="text"/></p>
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1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name	
Given name	Initial

PERSON 2

Family name	
Given name	Initial

SOCIO-CULTURAL INFORMATION

13. Where was this person born?

- Mark or specify one response only, according to present boundaries.

13.

Born in Canada

- | | |
|---------------------------------|---------------------------------|
| 01 <input type="radio"/> Nfld. | 07 <input type="radio"/> Man. |
| 02 <input type="radio"/> P.E.I. | 08 <input type="radio"/> Sask. |
| 03 <input type="radio"/> N.S. | 09 <input type="radio"/> Alta. |
| 04 <input type="radio"/> N.B. | 10 <input type="radio"/> B.C. |
| 05 <input type="radio"/> Que. | 11 <input type="radio"/> Yukon |
| 06 <input type="radio"/> Ont. | 12 <input type="radio"/> N.W.T. |

Born outside Canada

Country — Specify

13

14.

Born in Canada

- | | |
|---------------------------------|---------------------------------|
| 01 <input type="radio"/> Nfld. | 07 <input type="radio"/> Man. |
| 02 <input type="radio"/> P.E.I. | 08 <input type="radio"/> Sask. |
| 03 <input type="radio"/> N.S. | 09 <input type="radio"/> Alta. |
| 04 <input type="radio"/> N.B. | 10 <input type="radio"/> B.C. |
| 05 <input type="radio"/> Que. | 11 <input type="radio"/> Yukon |
| 06 <input type="radio"/> Ont. | 12 <input type="radio"/> N.W.T. |

Born outside Canada

Country — Specify

13

14. Of what country is this person a citizen?

- Indicate more than one citizenship, if applicable.

14 Canada, by birth

15 Canada, by naturalization

Other country — Specify

16

14 Canada, by birth

15 Canada, by naturalization

Other country — Specify

16

15. Is this person now, or has this person ever been, a **landed immigrant**?

A **landed immigrant** is a person who has been granted the right to live in Canada permanently by immigration authorities.

17 No → Go to Question 17

18 Yes

17 No → Go to Question 17

18 Yes

16. In what year did this person first become a landed immigrant?

If exact year is not known, enter best estimate.

Year

20 1

Year

20 1

17. To which ethnic or cultural group(s) did this person's **ancestors** belong?

For example, French, English, German, Scottish, Canadian, Italian, Irish, Chinese, Cree, Micmac, Métis, Inuit (Eskimo), Ukrainian, Dutch, East Indian, Polish, Portuguese, Jewish, Haitian, Jamaican, Vietnamese, Lebanese, Chilean, Somali, etc.

Specify as many groups as applicable

21

22

23

24

Specify as many groups as applicable

21

22

23

24

PERSON 3	
Family name	
Given name	Initial

PERSON 4	
Family name	
Given name	Initial

PERSON 5	
Family name	
Given name	Initial

PERSON 6	
Family name	
Given name	Initial

FOR INFORMATION ONLY

15.

Born in Canada

01 Nfld. 07 Man.
 02 P.E.I. 08 Sask.
 03 N.S. 09 Alta.
 04 N.B. 10 B.C.
 05 Que. 11 Yukon
 06 Ont. 12 N.W.T.

Born outside Canada
 Country — *Specify*

13

16.

Born in Canada

01 Nfld. 07 Man.
 02 P.E.I. 08 Sask.
 03 N.S. 09 Alta.
 04 N.B. 10 B.C.
 05 Que. 11 Yukon
 06 Ont. 12 N.W.T.

Born outside Canada
 Country — *Specify*

13

17.

Born in Canada

01 Nfld. 07 Man.
 02 P.E.I. 08 Sask.
 03 N.S. 09 Alta.
 04 N.B. 10 B.C.
 05 Que. 11 Yukon
 06 Ont. 12 N.W.T.

Born outside Canada
 Country — *Specify*

13

18.

Born in Canada

01 Nfld. 07 Man.
 02 P.E.I. 08 Sask.
 03 N.S. 09 Alta.
 04 N.B. 10 B.C.
 05 Que. 11 Yukon
 06 Ont. 12 N.W.T.

Born outside Canada
 Country — *Specify*

13

14 Canada, by birth
 15 Canada, by naturalization
 Other country — *Specify*

16

14 Canada, by birth
 15 Canada, by naturalization
 Other country — *Specify*

16

14 Canada, by birth
 15 Canada, by naturalization
 Other country — *Specify*

16

14 Canada, by birth
 15 Canada, by naturalization
 Other country — *Specify*

16

17 No → **Go to Question 17**
 18 Yes

17 No → **Go to Question 17**
 18 Yes

17 No → **Go to Question 17**
 18 Yes

17 No → **Go to Question 17**
 18 Yes

Year

20 1

Year

20 1

Year

20 1

Year

20 1

Specify as many groups as applicable

21
 22
 23
 24

Specify as many groups as applicable

21
 22
 23
 24

Specify as many groups as applicable

21
 22
 23
 24

Specify as many groups as applicable

21
 22
 23
 24

1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name	
Given name	Initial

PERSON 2

Family name	
Given name	Initial

FOR INFORMATION ONLY

18. Is this person an Aboriginal person, that is,
 ■ North American Indian, Métis or Inuit (Eskimo)?

If "Yes", mark the circle(s) that best describe(s) this person now.

19.

01 No

02 Yes, North American Indian

03 Yes, Métis

04 Yes, Inuit (Eskimo)

Go to Question 20

20.

01 No

02 Yes, North American Indian

03 Yes, Métis

04 Yes, Inuit (Eskimo)

Go to Question 20

19. Is this person:

■ *Mark or specify more than one, if applicable.*

Note:
This information is collected to support programs which promote equal opportunity for everyone to share in the social, cultural and economic life of Canada.

05 White

06 Chinese

07 South Asian (e.g., East Indian, Pakistani, Punjabi, Sri Lankan)

08 Black (e.g., African, Haitian, Jamaican, Somali)

09 Arab / West Asian (e.g., Armenian, Egyptian, Iranian, Lebanese, Moroccan)

10 Filipino

11 South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)

12 Latin American

13 Japanese

14 Korean

Other — Specify

15

05 White

06 Chinese

07 South Asian (e.g., East Indian, Pakistani, Punjabi, Sri Lankan)

08 Black (e.g., African, Haitian, Jamaican, Somali)

09 Arab / West Asian (e.g., Armenian, Egyptian, Iranian, Lebanese, Moroccan)

10 Filipino

11 South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)

12 Latin American

13 Japanese

14 Korean

Other — Specify

15

20. Is this person a member of an Indian Band/First Nation?

16 No

17 Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

18

16 No

17 Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

18

21. Is this person a Treaty Indian or a Registered Indian as defined by the *Indian Act* of Canada?

19 No

20 Yes, Treaty Indian or Registered Indian

19 No

20 Yes, Treaty Indian or Registered Indian

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

21.

01 No

02 Yes, North American Indian

03 Yes, Métis

04 Yes, Inuit (Eskimo)

Go to Question 20

22.

01 No

02 Yes, North American Indian

03 Yes, Métis

04 Yes, Inuit (Eskimo)

Go to Question 20

23.

01 No

02 Yes, North American Indian

03 Yes, Métis

04 Yes, Inuit (Eskimo)

Go to Question 20

24.

01 No

02 Yes, North American Indian

03 Yes, Métis

04 Yes, Inuit (Eskimo)

Go to Question 20

05 White

06 Chinese

07 South Asian (e.g., East Indian, Pakistani, Punjabi, Sri Lankan)

08 Black (e.g., African, Haitian, Jamaican, Somali)

09 Arab/West Asian (e.g., Armenian, Egyptian, Iranian, Lebanese, Moroccan)

10 Filipino

11 South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)

12 Latin American

13 Japanese

14 Korean

Other — Specify

15

05 White

06 Chinese

07 South Asian (e.g., East Indian, Pakistani, Punjabi, Sri Lankan)

08 Black (e.g., African, Haitian, Jamaican, Somali)

09 Arab/West Asian (e.g., Armenian, Egyptian, Iranian, Lebanese, Moroccan)

10 Filipino

11 South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)

12 Latin American

13 Japanese

14 Korean

Other — Specify

15

05 White

06 Chinese

07 South Asian (e.g., East Indian, Pakistani, Punjabi, Sri Lankan)

08 Black (e.g., African, Haitian, Jamaican, Somali)

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10 Filipino

11 South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)

12 Latin American

13 Japanese

14 Korean

Other — Specify

15

05 White

06 Chinese

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08 Black (e.g., African, Haitian, Jamaican, Somali)

09 Arab/West Asian (e.g., Armenian, Egyptian, Iranian, Lebanese, Moroccan)

10 Filipino

11 South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)

12 Latin American

13 Japanese

14 Korean

Other — Specify

15

16 No

17 Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

18

16 No

17 Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

18

16 No

17 Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

18

16 No

17 Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

18

19 No

20 Yes, Treaty Indian or Registered Indian

19 No

20 Yes, Treaty Indian or Registered Indian

19 No

20 Yes, Treaty Indian or Registered Indian

19 No

20 Yes, Treaty Indian or Registered Indian

1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

Answer Questions 22 to 47 for each person aged 15 and over.

MOBILITY

22. Where did this person live **1 year ago**, that is, on May 14, 1995?

Mark one circle only.

Note:

Some large cities are made up of smaller cities or towns called municipalities. Where applicable, identify the municipality rather than the larger city, for example, Dorval rather than Montréal, Scarborough rather than Toronto, St. Albert rather than Edmonton, Saanich rather than Victoria.

23. Where did this person live **5 years ago**, that is, on May 14, 1991?

Mark one circle only.

Note:

Some large cities are made up of smaller cities or towns called municipalities. Where applicable, identify the municipality rather than the larger city, for example, Dorval rather than Montréal, Scarborough rather than Toronto, St. Albert rather than Edmonton, Saanich rather than Victoria.

25.

- 01** Lived at the **same** address as now
- 02** Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 03** Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify below
City, town, village, township, municipality or Indian reserve
- 04** →
Province/territory
- 05** Lived **outside Canada**
Specify name of country
- 06** →

26.

- 01** Lived at the **same** address as now
- 02** Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 03** Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify below
City, town, village, township, municipality or Indian reserve
- 04** →
Province/territory
- 05** Lived **outside Canada**
Specify name of country
- 06** →

- 07** Lived at the **same** address as now
- 08** Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 09** Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify below
City, town, village, township, municipality or Indian reserve
- 10** →
Province/territory
- 11** Lived **outside Canada**
Specify name of country
- 12** →

- 07** Lived at the **same** address as now
- 08** Lived at a **different** address in the **same** city, town, village, township, municipality or Indian reserve
- 09** Lived in a **different** city, town, village, township, municipality or Indian reserve **in Canada**
Specify below
City, town, village, township, municipality or Indian reserve
- 10** →
Province/territory
- 11** Lived **outside Canada**
Specify name of country
- 12** →

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Answer Questions 22 to 47 for each person aged 15 and over.

<p>27.</p> <p>01 <input type="radio"/> Lived at the same address as now</p> <p>02 <input type="radio"/> Lived at a different address in the same city, town, village, township, municipality or Indian reserve</p> <p>03 <input type="radio"/> Lived in a different city, town, village, township, municipality or Indian reserve in Canada <i>Specify below</i> City, town, village, township, municipality or Indian reserve</p> <p>04 → <input style="width: 100%;" type="text"/> Province/territory</p> <p>05 <input type="radio"/> Lived outside Canada <i>Specify name of country</i></p> <p>06 → <input style="width: 100%;" type="text"/></p>	<p>28.</p> <p>01 <input type="radio"/> Lived at the same address as now</p> <p>02 <input type="radio"/> Lived at a different address in the same city, town, village, township, municipality or Indian reserve</p> <p>03 <input type="radio"/> Lived in a different city, town, village, township, municipality or Indian reserve in Canada <i>Specify below</i> City, town, village, township, municipality or Indian reserve</p> <p>04 → <input style="width: 100%;" type="text"/> Province/territory</p> <p>05 <input type="radio"/> Lived outside Canada <i>Specify name of country</i></p> <p>06 → <input style="width: 100%;" type="text"/></p>	<p>29.</p> <p>01 <input type="radio"/> Lived at the same address as now</p> <p>02 <input type="radio"/> Lived at a different address in the same city, town, village, township, municipality or Indian reserve</p> <p>03 <input type="radio"/> Lived in a different city, town, village, township, municipality or Indian reserve in Canada <i>Specify below</i> City, town, village, township, municipality or Indian reserve</p> <p>04 → <input style="width: 100%;" type="text"/> Province/territory</p> <p>05 <input type="radio"/> Lived outside Canada <i>Specify name of country</i></p> <p>06 → <input style="width: 100%;" type="text"/></p>	<p>30.</p> <p>01 <input type="radio"/> Lived at the same address as now</p> <p>02 <input type="radio"/> Lived at a different address in the same city, town, village, township, municipality or Indian reserve</p> <p>03 <input type="radio"/> Lived in a different city, town, village, township, municipality or Indian reserve in Canada <i>Specify below</i> City, town, village, township, municipality or Indian reserve</p> <p>04 → <input style="width: 100%;" type="text"/> Province/territory</p> <p>05 <input type="radio"/> Lived outside Canada <i>Specify name of country</i></p> <p>06 → <input style="width: 100%;" type="text"/></p>
<p>07 <input type="radio"/> Lived at the same address as now</p> <p>08 <input type="radio"/> Lived at a different address in the same city, town, village, township, municipality or Indian reserve</p> <p>09 <input type="radio"/> Lived in a different city, town, village, township, municipality or Indian reserve in Canada <i>Specify below</i> City, town, village, township, municipality or Indian reserve</p> <p>10 → <input style="width: 100%;" type="text"/> Province/territory</p> <p>11 <input type="radio"/> Lived outside Canada <i>Specify name of country</i></p> <p>12 → <input style="width: 100%;" type="text"/></p>	<p>07 <input type="radio"/> Lived at the same address as now</p> <p>08 <input type="radio"/> Lived at a different address in the same city, town, village, township, municipality or Indian reserve</p> <p>09 <input type="radio"/> Lived in a different city, town, village, township, municipality or Indian reserve in Canada <i>Specify below</i> City, town, village, township, municipality or Indian reserve</p> <p>10 → <input style="width: 100%;" type="text"/> Province/territory</p> <p>11 <input type="radio"/> Lived outside Canada <i>Specify name of country</i></p> <p>12 → <input style="width: 100%;" type="text"/></p>	<p>07 <input type="radio"/> Lived at the same address as now</p> <p>08 <input type="radio"/> Lived at a different address in the same city, town, village, township, municipality or Indian reserve</p> <p>09 <input type="radio"/> Lived in a different city, town, village, township, municipality or Indian reserve in Canada <i>Specify below</i> City, town, village, township, municipality or Indian reserve</p> <p>10 → <input style="width: 100%;" type="text"/> Province/territory</p> <p>11 <input type="radio"/> Lived outside Canada <i>Specify name of country</i></p> <p>12 → <input style="width: 100%;" type="text"/></p>	<p>07 <input type="radio"/> Lived at the same address as now</p> <p>08 <input type="radio"/> Lived at a different address in the same city, town, village, township, municipality or Indian reserve</p> <p>09 <input type="radio"/> Lived in a different city, town, village, township, municipality or Indian reserve in Canada <i>Specify below</i> City, town, village, township, municipality or Indian reserve</p> <p>10 → <input style="width: 100%;" type="text"/> Province/territory</p> <p>11 <input type="radio"/> Lived outside Canada <i>Specify name of country</i></p> <p>12 → <input style="width: 100%;" type="text"/></p>

1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

EDUCATION

24. What is the **highest** grade (or year) of **secondary** (high school) or **elementary** school this person ever attended?

Enter highest number (1 to 13) of grades or years, excluding kindergarten.

25. How many years of education has this person completed at **university**?

26. How many years of schooling has this person ever completed at an institution **other than** a university, a secondary (high) school or an elementary school?

Include years of schooling at community colleges, technical institutes, CEGEPs (general and professional), private trade schools or private business colleges, diploma schools of nursing, etc.

27. In the **past eight months** (that is, since last September), was this person attending a school, college or university?

Include attendance at elementary or secondary schools, business or trade schools, community colleges, technical institutes, CEGEPs, etc., for courses which can be used as credits towards a certificate, diploma or degree.

Mark one circle only.

31.

- 01 ◀ Number (1 to 13) of grades or years of secondary and/or elementary school

OR

- 02 Never attended school or attended kindergarten only

- 03 None

- 04 Less than 1 year (of completed courses)

- 05 ◀ Number of completed years at university

- 06 None

- 07 Less than 1 year (of completed courses)

- 08 ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.

- 09 No, did not attend in past eight months

- 10 Yes, full time

- 11 Yes, part time, day or evening

32.

- 01 ◀ Number (1 to 13) of grades or years of secondary and/or elementary school

OR

- 02 Never attended school or attended kindergarten only

- 03 None

- 04 Less than 1 year (of completed courses)

- 05 ◀ Number of completed years at university

- 06 None

- 07 Less than 1 year (of completed courses)

- 08 ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.

- 09 No, did not attend in past eight months

- 10 Yes, full time

- 11 Yes, part time, day or evening

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>33.</p> <p>01 <input type="text"/> ◀ Number (1 to 13) of grades or years of secondary and/or elementary school</p> <p style="text-align: center;">OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>	<p>34.</p> <p>01 <input type="text"/> ◀ Number (1 to 13) of grades or years of secondary and/or elementary school</p> <p style="text-align: center;">OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>	<p>35.</p> <p>01 <input type="text"/> ◀ Number (1 to 13) of grades or years of secondary and/or elementary school</p> <p style="text-align: center;">OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>	<p>36.</p> <p>01 <input type="text"/> ◀ Number (1 to 13) of grades or years of secondary and/or elementary school</p> <p style="text-align: center;">OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>
<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> ◀ Number of completed years at university</p>	<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> ◀ Number of completed years at university</p>	<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> ◀ Number of completed years at university</p>	<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> ◀ Number of completed years at university</p>
<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>	<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>	<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>	<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>
<p>09 <input type="radio"/> No, did not attend in past eight months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>	<p>09 <input type="radio"/> No, did not attend in past eight months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>	<p>09 <input type="radio"/> No, did not attend in past eight months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>	<p>09 <input type="radio"/> No, did not attend in past eight months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>

1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

Remember, these questions are only for persons aged 15 and over.

28. What certificates, diplomas or degrees has this person ever obtained?

- person ever obtained?

*Include all qualifications obtained from **secondary** (high) schools, or trade schools and other postsecondary educational institutions.*

Mark as many circles as applicable.

37.

01 None → **Go to Question 30**

02 Secondary (high) school graduation certificate or equivalent

03 Trades certificate or diploma

04 Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)

05 University certificate or diploma **below** bachelor level

06 Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)

07 University certificate or diploma **above** bachelor level

08 Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)

09 Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)

10 Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)

38.

01 None → **Go to Question 30**

02 Secondary (high) school graduation certificate or equivalent

03 Trades certificate or diploma

04 Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)

05 University certificate or diploma **below** bachelor level

06 Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)

07 University certificate or diploma **above** bachelor level

08 Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)

09 Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)

10 Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)

29. What was the major field of study or training of this person's **highest** degree, certificate or diploma (**excluding** secondary or high school graduation certificates)?

For example, accounting, carpentry, civil engineering, history, legal secretary, welding.

Major field of study or training

11

OR

12 This person's highest qualification is a secondary (high) school graduation certificate

Major field of study or training

11

OR

12 This person's highest qualification is a secondary (high) school graduation certificate

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>39.</p> <p>01 <input type="radio"/> None → Go to Question 30</p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma below bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma above bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p>	<p>40.</p> <p>01 <input type="radio"/> None → Go to Question 30</p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma below bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma above bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p>	<p>41.</p> <p>01 <input type="radio"/> None → Go to Question 30</p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma below bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma above bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p>	<p>42.</p> <p>01 <input type="radio"/> None → Go to Question 30</p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma below bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma above bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p>
<p>Major field of study or training</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p>	<p>Major field of study or training</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p>	<p>Major field of study or training</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p>	<p>Major field of study or training</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p>
OR			
<p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>	<p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>	<p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>	<p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>

1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

HOUSEHOLD ACTIVITIES

Note:

Last week refers to Sunday, May 5 to Saturday, May 11, 1996.

In Question 30, where activities overlap, report the same hours in more than one part.

30. Last week, how many hours did this person spend doing the following activities?

(a) Doing **unpaid** housework, yard work or home maintenance for members of this household, or others.

Some examples include: preparing meals, doing laundry, household planning, shopping and cutting the grass.

(b) Looking after one or more of this person's own children, or the children of others, **without pay**.

Some examples include: bathing or playing with young children, driving children to sports activities or helping them with homework, and talking with teens about their problems.

(c) Providing **unpaid** care or assistance to one or more seniors.

Some examples include: providing personal care to a senior family member, visiting seniors, talking with them on the telephone, and helping them with shopping, banking or with taking medication.

43.

- 01 None
- 02 Less than 5 hours
- 03 5 to 14 hours
- 04 15 to 29 hours
- 05 30 to 59 hours
- 06 60 hours or more

- 07 None
- 08 Less than 5 hours
- 09 5 to 14 hours
- 10 15 to 29 hours
- 11 30 to 59 hours
- 12 60 hours or more

- 13 None
- 14 Less than 5 hours
- 15 5 to 9 hours
- 16 10 hours or more

44.

- 01 None
- 02 Less than 5 hours
- 03 5 to 14 hours
- 04 15 to 29 hours
- 05 30 to 59 hours
- 06 60 hours or more

- 07 None
- 08 Less than 5 hours
- 09 5 to 14 hours
- 10 15 to 29 hours
- 11 30 to 59 hours
- 12 60 hours or more

- 13 None
- 14 Less than 5 hours
- 15 5 to 9 hours
- 16 10 hours or more

LABOUR MARKET ACTIVITIES

31. Last week, how many hours did this person spend working for pay or in self-employment?

Include:

- working directly towards the operation of a family farm or business without formal pay arrangements (e.g., assisting in seeding, doing accounts);
- working in his/her own business, farm or professional practice, alone or in partnership;
- working for wages, salary, tips or commission.

17 None → Continue with the next question

OR

18 ← Number of hours (to the nearest hour)

→ Go to Question 37

17 None → Continue with the next question

OR

18 ← Number of hours (to the nearest hour)

→ Go to Question 37

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

Remember, these questions are only for persons aged 15 and over.

<p>45.</p> <p>01 <input type="radio"/> None</p> <p>02 <input type="radio"/> Less than 5 hours</p> <p>03 <input type="radio"/> 5 to 14 hours</p> <p>04 <input type="radio"/> 15 to 29 hours</p> <p>05 <input type="radio"/> 30 to 59 hours</p> <p>06 <input type="radio"/> 60 hours or more</p>	<p>46.</p> <p>01 <input type="radio"/> None</p> <p>02 <input type="radio"/> Less than 5 hours</p> <p>03 <input type="radio"/> 5 to 14 hours</p> <p>04 <input type="radio"/> 15 to 29 hours</p> <p>05 <input type="radio"/> 30 to 59 hours</p> <p>06 <input type="radio"/> 60 hours or more</p>	<p>47.</p> <p>01 <input type="radio"/> None</p> <p>02 <input type="radio"/> Less than 5 hours</p> <p>03 <input type="radio"/> 5 to 14 hours</p> <p>04 <input type="radio"/> 15 to 29 hours</p> <p>05 <input type="radio"/> 30 to 59 hours</p> <p>06 <input type="radio"/> 60 hours or more</p>	<p>48.</p> <p>01 <input type="radio"/> None</p> <p>02 <input type="radio"/> Less than 5 hours</p> <p>03 <input type="radio"/> 5 to 14 hours</p> <p>04 <input type="radio"/> 15 to 29 hours</p> <p>05 <input type="radio"/> 30 to 59 hours</p> <p>06 <input type="radio"/> 60 hours or more</p>
<p>07 <input type="radio"/> None</p> <p>08 <input type="radio"/> Less than 5 hours</p> <p>09 <input type="radio"/> 5 to 14 hours</p> <p>10 <input type="radio"/> 15 to 29 hours</p> <p>11 <input type="radio"/> 30 to 59 hours</p> <p>12 <input type="radio"/> 60 hours or more</p>	<p>07 <input type="radio"/> None</p> <p>08 <input type="radio"/> Less than 5 hours</p> <p>09 <input type="radio"/> 5 to 14 hours</p> <p>10 <input type="radio"/> 15 to 29 hours</p> <p>11 <input type="radio"/> 30 to 59 hours</p> <p>12 <input type="radio"/> 60 hours or more</p>	<p>07 <input type="radio"/> None</p> <p>08 <input type="radio"/> Less than 5 hours</p> <p>09 <input type="radio"/> 5 to 14 hours</p> <p>10 <input type="radio"/> 15 to 29 hours</p> <p>11 <input type="radio"/> 30 to 59 hours</p> <p>12 <input type="radio"/> 60 hours or more</p>	<p>07 <input type="radio"/> None</p> <p>08 <input type="radio"/> Less than 5 hours</p> <p>09 <input type="radio"/> 5 to 14 hours</p> <p>10 <input type="radio"/> 15 to 29 hours</p> <p>11 <input type="radio"/> 30 to 59 hours</p> <p>12 <input type="radio"/> 60 hours or more</p>
<p>13 <input type="radio"/> None</p> <p>14 <input type="radio"/> Less than 5 hours</p> <p>15 <input type="radio"/> 5 to 9 hours</p> <p>16 <input type="radio"/> 10 hours or more</p>	<p>13 <input type="radio"/> None</p> <p>14 <input type="radio"/> Less than 5 hours</p> <p>15 <input type="radio"/> 5 to 9 hours</p> <p>16 <input type="radio"/> 10 hours or more</p>	<p>13 <input type="radio"/> None</p> <p>14 <input type="radio"/> Less than 5 hours</p> <p>15 <input type="radio"/> 5 to 9 hours</p> <p>16 <input type="radio"/> 10 hours or more</p>	<p>13 <input type="radio"/> None</p> <p>14 <input type="radio"/> Less than 5 hours</p> <p>15 <input type="radio"/> 5 to 9 hours</p> <p>16 <input type="radio"/> 10 hours or more</p>
<p>17 <input type="radio"/> None → Continue with the next question</p> <p>OR</p> <p>18 <input type="text"/> ← Number of hours (to the nearest hour)</p> <p>→ Go to Question 37</p>	<p>17 <input type="radio"/> None → Continue with the next question</p> <p>OR</p> <p>18 <input type="text"/> ← Number of hours (to the nearest hour)</p> <p>→ Go to Question 37</p>	<p>17 <input type="radio"/> None → Continue with the next question</p> <p>OR</p> <p>18 <input type="text"/> ← Number of hours (to the nearest hour)</p> <p>→ Go to Question 37</p>	<p>17 <input type="radio"/> None → Continue with the next question</p> <p>OR</p> <p>18 <input type="text"/> ← Number of hours (to the nearest hour)</p> <p>→ Go to Question 37</p>

1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

- 32. Last week**, was this person on temporary lay-off
■ or absent from his/her job or business?

Mark one circle only.

- 33. Last week**, did this person have definite arrangements
■ to start a new job within the next four weeks?

- 34. Did this person look for paid work during the past
■ four weeks?**

For example, did this person contact a Canada Employment Centre, check with employers, place or answer newspaper ads?

Mark one circle only.

- 35. Could this person have started a job last week
■ had one been available?**

Mark one circle only.

- 36. When did this person last work for pay or in
■ self-employment, even for a few days?**

Mark one circle only.

49.

- 01** No
- 02** Yes, on temporary lay-off from a job to which this person expects to return
- 03** Yes, on vacation, ill, on strike or locked out, or absent for other reasons

- 04** No

- 05** Yes

- 06** No → **Go to Question 36**

- 07** Yes, looked for full-time work

- 08** Yes, looked for part-time work (less than 30 hours per week)

- 09** Yes, could have started a job

- 10** No, already had a job

- 11** No, because of temporary illness or disability

- 12** No, because of personal or family responsibilities

- 13** No, going to school

- 14** No, other reasons

- 15** In 1996 → **Continue with the next question**
- 16** In 1995 → **Continue with the next question**

- 17** Before 1995 → **Go to Question 47**
- 18** Never → **Go to Question 47**

50.

- 01** No
- 02** Yes, on temporary lay-off from a job to which this person expects to return
- 03** Yes, on vacation, ill, on strike or locked out, or absent for other reasons

- 04** No

- 05** Yes

- 06** No → **Go to Question 36**

- 07** Yes, looked for full-time work

- 08** Yes, looked for part-time work (less than 30 hours per week)

- 09** Yes, could have started a job

- 10** No, already had a job

- 11** No, because of temporary illness or disability

- 12** No, because of personal or family responsibilities

- 13** No, going to school

- 14** No, other reasons

- 15** In 1996 → **Continue with the next question**
- 16** In 1995 → **Continue with the next question**

- 17** Before 1995 → **Go to Question 47**
- 18** Never → **Go to Question 47**

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>51.</p> <p>01 <input type="radio"/> No</p> <p>02 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>03 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>	<p>52.</p> <p>01 <input type="radio"/> No</p> <p>02 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>03 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>	<p>53.</p> <p>01 <input type="radio"/> No</p> <p>02 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>03 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>	<p>54.</p> <p>01 <input type="radio"/> No</p> <p>02 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>03 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>
<p>04 <input type="radio"/> No</p> <p>05 <input type="radio"/> Yes</p>	<p>04 <input type="radio"/> No</p> <p>05 <input type="radio"/> Yes</p>	<p>04 <input type="radio"/> No</p> <p>05 <input type="radio"/> Yes</p>	<p>04 <input type="radio"/> No</p> <p>05 <input type="radio"/> Yes</p>
<p>06 <input type="radio"/> No → Go to Question 36</p> <p>07 <input type="radio"/> Yes, looked for full-time work</p> <p>08 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>	<p>06 <input type="radio"/> No → Go to Question 36</p> <p>07 <input type="radio"/> Yes, looked for full-time work</p> <p>08 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>	<p>06 <input type="radio"/> No → Go to Question 36</p> <p>07 <input type="radio"/> Yes, looked for full-time work</p> <p>08 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>	<p>06 <input type="radio"/> No → Go to Question 36</p> <p>07 <input type="radio"/> Yes, looked for full-time work</p> <p>08 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>
<p>09 <input type="radio"/> Yes, could have started a job</p> <p>10 <input type="radio"/> No, already had a job</p> <p>11 <input type="radio"/> No, because of temporary illness or disability</p> <p>12 <input type="radio"/> No, because of personal or family responsibilities</p> <p>13 <input type="radio"/> No, going to school</p> <p>14 <input type="radio"/> No, other reasons</p>	<p>09 <input type="radio"/> Yes, could have started a job</p> <p>10 <input type="radio"/> No, already had a job</p> <p>11 <input type="radio"/> No, because of temporary illness or disability</p> <p>12 <input type="radio"/> No, because of personal or family responsibilities</p> <p>13 <input type="radio"/> No, going to school</p> <p>14 <input type="radio"/> No, other reasons</p>	<p>09 <input type="radio"/> Yes, could have started a job</p> <p>10 <input type="radio"/> No, already had a job</p> <p>11 <input type="radio"/> No, because of temporary illness or disability</p> <p>12 <input type="radio"/> No, because of personal or family responsibilities</p> <p>13 <input type="radio"/> No, going to school</p> <p>14 <input type="radio"/> No, other reasons</p>	<p>09 <input type="radio"/> Yes, could have started a job</p> <p>10 <input type="radio"/> No, already had a job</p> <p>11 <input type="radio"/> No, because of temporary illness or disability</p> <p>12 <input type="radio"/> No, because of personal or family responsibilities</p> <p>13 <input type="radio"/> No, going to school</p> <p>14 <input type="radio"/> No, other reasons</p>
<p>15 <input type="radio"/> In 1996 → Continue with the next question</p> <p>16 <input type="radio"/> In 1995 → Continue with the next question</p> <p>17 <input type="radio"/> Before 1995 → Go to Question 47</p> <p>18 <input type="radio"/> Never → Go to Question 47</p>	<p>15 <input type="radio"/> In 1996 → Continue with the next question</p> <p>16 <input type="radio"/> In 1995 → Continue with the next question</p> <p>17 <input type="radio"/> Before 1995 → Go to Question 47</p> <p>18 <input type="radio"/> Never → Go to Question 47</p>	<p>15 <input type="radio"/> In 1996 → Continue with the next question</p> <p>16 <input type="radio"/> In 1995 → Continue with the next question</p> <p>17 <input type="radio"/> Before 1995 → Go to Question 47</p> <p>18 <input type="radio"/> Never → Go to Question 47</p>	<p>15 <input type="radio"/> In 1996 → Continue with the next question</p> <p>16 <input type="radio"/> In 1995 → Continue with the next question</p> <p>17 <input type="radio"/> Before 1995 → Go to Question 47</p> <p>18 <input type="radio"/> Never → Go to Question 47</p>

1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

Note:
Questions 37 to 44 refer to this person's job or business last week. If this person held no job last week, answer for the job of longest duration since January 1, 1995. If this person held more than one job last week, answer for the job at which he/she worked the most hours.

37. For whom did this person work?

55.

Name of firm, government agency, etc.

01

Section, plant, department, branch or division

02

56.

Name of firm, government agency, etc.

01

Section, plant, department, branch or division

02

38. What kind of business, industry or service was this?

Give full description. For example, wheat farm, trapping, road maintenance, retail shoe store, secondary school, temporary help agency, municipal police.

Kind of business, industry or service

03

04

Kind of business, industry or service

03

04

39. What kind of work was this person doing?

For example, janitor, medical lab technician, accounting clerk, manager of civil engineering department, secondary school teacher, supervisor of data entry unit, fishing guide. (If in the Armed Forces, give rank.)

Kind of work

05

Kind of work

05

40. In this work, what were this person's most important duties or activities?

For example, cleaning buildings, analysing blood samples, verifying invoices, coordinating civil engineering projects, teaching mathematics, organizing work schedules and monitoring data entry systems, guiding fishing parties.

Most important duties or activities

06

Most important duties or activities

06

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>57.</p> <p>Name of firm, government agency, etc.</p> <p>01 <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/></p> <p>Section, plant, department, branch or division</p> <p>02 <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/></p> <p>Kind of business, industry or service</p> <p>03 <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/></p> <p>04 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/></p> <p>Kind of work</p> <p>05 <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/></p> <p>Most important duties or activities</p> <p><input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/></p> <p>06 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/></p>	<p>58.</p> <p>Name of firm, government agency, etc.</p> <p>01 <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/></p> <p>Section, plant, department, branch or division</p> <p>02 <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/></p> <p>Kind of business, industry or service</p> <p>03 <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/></p> <p>04 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/></p> <p>Kind of work</p> <p>05 <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/></p> <p>Most important duties or activities</p> <p><input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/></p> <p>06 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; 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1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

41. In this job or business, was this person mainly:

Mark one circle only.

61.

- 01 working for wages, salary, tips or commission?
→ **Go to Question 43**
- 02 working without pay for his/her spouse or another relative in a family farm or business?
→ **Go to Question 43**
- 03 self-employed without paid help (alone or in partnership)?
- 04 self-employed with paid help (alone or in partnership)?

62.

- 01 working for wages, salary, tips or commission?
→ **Go to Question 43**
- 02 working without pay for his/her spouse or another relative in a family farm or business?
→ **Go to Question 43**
- 03 self-employed without paid help (alone or in partnership)?
- 04 self-employed with paid help (alone or in partnership)?

42. If self-employed, was this person's farm or business incorporated?

- 05 No
- 06 Yes

- 05 No
- 06 Yes

43. At what address did this person **usually** work?

Example:

365 Laurier Ave. West
 Number ↑ ↑ ↑ ↑
 Name ↑ ↑
 Type ↑
 Direction ↑

If direction (e.g., North, South, East or West) is a part of the street address, please include it.

If street address is unknown, specify the building or nearest street intersection.

Note:

Some large cities are made up of smaller cities or towns called municipalities. Where applicable, identify the municipality rather than the larger city, for example, Dorval rather than Montréal, Scarborough rather than Toronto, St. Albert rather than Edmonton, Saanich rather than Victoria.

- 07 Worked at home (including farms)
Go to Question 45
- 08 Worked outside Canada
Go to Question 45
- 09 No fixed workplace address
Go to Question 44
- 10 Worked at the address specified below:
Specify complete address
Street address (see example)
11 →
City, town, village, township, municipality or Indian reserve
12 →
Province / territory
→
Postal code
13 →

- 07 Worked at home (including farms)
Go to Question 45
- 08 Worked outside Canada
Go to Question 45
- 09 No fixed workplace address
Go to Question 44
- 10 Worked at the address specified below:
Specify complete address
Street address (see example)
11 →
City, town, village, township, municipality or Indian reserve
12 →
Province / territory
→
Postal code
13 →

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>63.</p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? → Go to Question 43</p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? → Go to Question 43</p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p>	<p>64.</p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? → Go to Question 43</p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? → Go to Question 43</p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p>	<p>65.</p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? → Go to Question 43</p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? → Go to Question 43</p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p>	<p>66.</p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? → Go to Question 43</p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? → Go to Question 43</p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p>
<p>07 <input type="radio"/> Worked at home (including farms) Go to Question 45</p> <p>08 <input type="radio"/> Worked outside Canada Go to Question 45</p> <p>09 <input type="radio"/> No fixed workplace address Go to Question 44</p> <p>10 <input type="radio"/> Worked at the address specified below: Specify complete address Street address (see example)</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input style="width: 100%; height: 20px;" type="text"/></p> <p>Province / territory</p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p>Postal code</p> <p>13 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/></p>	<p>07 <input type="radio"/> Worked at home (including farms) Go to Question 45</p> <p>08 <input type="radio"/> Worked outside Canada Go to Question 45</p> <p>09 <input type="radio"/> No fixed workplace address Go to Question 44</p> <p>10 <input type="radio"/> Worked at the address specified below: Specify complete address Street address (see example)</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input style="width: 100%; height: 20px;" type="text"/></p> <p>Province / territory</p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p>Postal code</p> <p>13 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/></p>	<p>07 <input type="radio"/> Worked at home (including farms) Go to Question 45</p> <p>08 <input type="radio"/> Worked outside Canada Go to Question 45</p> <p>09 <input type="radio"/> No fixed workplace address Go to Question 44</p> <p>10 <input type="radio"/> Worked at the address specified below: Specify complete address Street address (see example)</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input style="width: 100%; height: 20px;" type="text"/></p> <p>Province / territory</p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p>Postal code</p> <p>13 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/></p>	<p>07 <input type="radio"/> Worked at home (including farms) Go to Question 45</p> <p>08 <input type="radio"/> Worked outside Canada Go to Question 45</p> <p>09 <input type="radio"/> No fixed workplace address Go to Question 44</p> <p>10 <input type="radio"/> Worked at the address specified below: Specify complete address Street address (see example)</p> <p>11 <input style="width: 100%; height: 20px;" type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input style="width: 100%; height: 20px;" type="text"/></p> <p>Province / territory</p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p>Postal code</p> <p>13 <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/></p>

1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

44. How did this person **usually** get to work?

*If this person used more than one method of transportation, **mark the one used for most of the travel distance.***

67.

- 01 Car, truck or van — as driver
- 02 Car, truck or van — as passenger
- 03 Public transit (e.g., bus, street car, subway, light rail transit, commuter train, ferry)
- 04 Walked to work
- 05 Bicycle
- 06 Motorcycle
- 07 Taxicab
- 08 Other method

68.

- 01 Car, truck or van — as driver
- 02 Car, truck or van — as passenger
- 03 Public transit (e.g., bus, street car, subway, light rail transit, commuter train, ferry)
- 04 Walked to work
- 05 Bicycle
- 06 Motorcycle
- 07 Taxicab
- 08 Other method

45. In how many **weeks** did this person work
■ **in 1995?**

Include those weeks in which this person:

- was on vacation or sick leave with pay;
- worked full time or part time;
- worked for wages, salary, tips or commission;
- was self-employed;
- worked directly towards the operation of a family farm or business without formal pay arrangements.

09 None → **Go to Question 47**

OR

10 ◀ Number of weeks

09 None → **Go to Question 47**

OR

10 ◀ Number of weeks

46. During **most** of those weeks, did this person
■ work **full time** or **part time**?

Mark one circle only.

11 Full time
(30 hours or more
per week)

12 Part time
(less than 30 hours
per week)

11 Full time
(30 hours or more
per week)

12 Part time
(less than 30 hours
per week)

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

FOR INFORMATION ONLY

Remember, these questions are only for persons aged 15 and over.

<p>69.</p> <p>01 <input type="radio"/> Car, truck or van — as driver</p> <p>02 <input type="radio"/> Car, truck or van — as passenger</p> <p>03 <input type="radio"/> Public transit (e.g., bus, street car, subway, light rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>	<p>70.</p> <p>01 <input type="radio"/> Car, truck or van — as driver</p> <p>02 <input type="radio"/> Car, truck or van — as passenger</p> <p>03 <input type="radio"/> Public transit (e.g., bus, street car, subway, light rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>	<p>71.</p> <p>01 <input type="radio"/> Car, truck or van — as driver</p> <p>02 <input type="radio"/> Car, truck or van — as passenger</p> <p>03 <input type="radio"/> Public transit (e.g., bus, street car, subway, light rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>	<p>72.</p> <p>01 <input type="radio"/> Car, truck or van — as driver</p> <p>02 <input type="radio"/> Car, truck or van — as passenger</p> <p>03 <input type="radio"/> Public transit (e.g., bus, street car, subway, light rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>
<p>09 <input type="radio"/> None → Go to Question 47</p> <p>OR</p> <p>10 <input style="width: 40px; height: 20px;" type="text"/> ◀ Number of weeks</p>	<p>09 <input type="radio"/> None → Go to Question 47</p> <p>OR</p> <p>10 <input style="width: 40px; height: 20px;" type="text"/> ◀ Number of weeks</p>	<p>09 <input type="radio"/> None → Go to Question 47</p> <p>OR</p> <p>10 <input style="width: 40px; height: 20px;" type="text"/> ◀ Number of weeks</p>	<p>09 <input type="radio"/> None → Go to Question 47</p> <p>OR</p> <p>10 <input style="width: 40px; height: 20px;" type="text"/> ◀ Number of weeks</p>
<p>11 <input type="radio"/> Full time (30 hours or more per week)</p> <p>12 <input type="radio"/> Part time (less than 30 hours per week)</p>	<p>11 <input type="radio"/> Full time (30 hours or more per week)</p> <p>12 <input type="radio"/> Part time (less than 30 hours per week)</p>	<p>11 <input type="radio"/> Full time (30 hours or more per week)</p> <p>12 <input type="radio"/> Part time (less than 30 hours per week)</p>	<p>11 <input type="radio"/> Full time (30 hours or more per week)</p> <p>12 <input type="radio"/> Part time (less than 30 hours per week)</p>

1. NAME

In the spaces provided, copy the names in the same order as in **Step 2**.

Then answer the following questions for each person.

PERSON 1

Family name

Given name

Initial

PERSON 2

Family name

Given name

Initial

FOR INFORMATION ONLY

INCOME IN 1995

47. During the year ending December 31, 1995, did this person receive any income from the sources listed below?

- **Answer "Yes" or "No" for all sources.**
- *If "Yes", also enter the amount; in case of a loss, also mark "Loss".*
- *Do not include Child Tax Benefit.*

PAID EMPLOYMENT:

(a) Total **wages** and **salaries**, including commissions, bonuses, tips, etc., before any deductions

SELF-EMPLOYMENT:

- (b) **Net farm income** (gross receipts minus expenses), including grants and subsidies under farm-support programs, marketing board payments, gross insurance proceeds
- (c) **Net non-farm income** from **unincorporated business, professional practice, etc.** (gross receipts minus expenses)

INCOME FROM GOVERNMENT:

- (d) **Old Age Security Pension, Guaranteed Income Supplement and Spouse's Allowance** from federal government only (provincial income supplements should be reported in (g))
- (e) Benefits from **Canada or Quebec Pension Plan**
- (f) Benefits from **Unemployment Insurance** (total benefits before tax deductions)
- (g) **Other income** from **government sources**, such as provincial income supplements and grants, refunds of GST, provincial tax credits, workers' compensation, veterans' pensions, welfare payments (Do **not** include Child Tax Benefit.)

OTHER INCOME:

- (h) **Dividends, interest** on bonds, deposits and savings certificates, and **other investment income**, such as net rents from real estate, interest from mortgages
- (i) **Retirement pensions, superannuation and annuities**, including those from RRSPs and RRIFs
- (j) **Other money income**, such as alimony, child support, scholarships

TOTAL INCOME FROM ALL OF THE ABOVE SOURCES

Remember,

73.

Dollars Cents
01 Yes ▶
02 No

03 Yes ▶
04 Loss
05 No

06 Yes ▶
07 Loss
08 No

09 Yes ▶
10 No

11 Yes ▶
12 No

13 Yes ▶
14 No

15 Yes ▶
16 No

17 Yes ▶
18 Loss
19 No

20 Yes ▶
21 No

22 Yes ▶
23 No

24 Yes ▶
25 Loss
26 No

74.

Dollars Cents
01 Yes ▶
02 No

03 Yes ▶
04 Loss
05 No

06 Yes ▶
07 Loss
08 No

09 Yes ▶
10 No

11 Yes ▶
12 No

13 Yes ▶
14 No

15 Yes ▶
16 No

17 Yes ▶
18 Loss
19 No

20 Yes ▶
21 No

22 Yes ▶
23 No

24 Yes ▶
25 Loss
26 No

PERSON 3	
Family name	
Given name	Initial

PERSON 4	
Family name	
Given name	Initial

PERSON 5	
Family name	
Given name	Initial

PERSON 6	
Family name	
Given name	Initial

FOR INFORMATION ONLY

this question is only for persons aged 15 and over.

75.	
Dollars Cents	
01 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
02 <input type="radio"/> No	
Dollars Cents	
03 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
05 <input type="radio"/> No	04 <input type="radio"/> Loss
Dollars Cents	
06 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
08 <input type="radio"/> No	07 <input type="radio"/> Loss
Dollars Cents	
09 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
10 <input type="radio"/> No	
Dollars Cents	
11 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
12 <input type="radio"/> No	
Dollars Cents	
13 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
14 <input type="radio"/> No	
Dollars Cents	
15 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
16 <input type="radio"/> No	
Dollars Cents	
17 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
19 <input type="radio"/> No	18 <input type="radio"/> Loss
Dollars Cents	
20 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
21 <input type="radio"/> No	
Dollars Cents	
22 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
23 <input type="radio"/> No	
Dollars Cents	
24 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
26 <input type="radio"/> No	25 <input type="radio"/> Loss

76.	
Dollars Cents	
01 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
02 <input type="radio"/> No	
Dollars Cents	
03 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
05 <input type="radio"/> No	04 <input type="radio"/> Loss
Dollars Cents	
06 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
08 <input type="radio"/> No	07 <input type="radio"/> Loss
Dollars Cents	
09 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
10 <input type="radio"/> No	
Dollars Cents	
11 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
12 <input type="radio"/> No	
Dollars Cents	
13 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
14 <input type="radio"/> No	
Dollars Cents	
15 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
16 <input type="radio"/> No	
Dollars Cents	
17 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
19 <input type="radio"/> No	18 <input type="radio"/> Loss
Dollars Cents	
20 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
21 <input type="radio"/> No	
Dollars Cents	
22 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
23 <input type="radio"/> No	
Dollars Cents	
24 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
26 <input type="radio"/> No	25 <input type="radio"/> Loss

77.	
Dollars Cents	
01 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
02 <input type="radio"/> No	
Dollars Cents	
03 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
05 <input type="radio"/> No	04 <input type="radio"/> Loss
Dollars Cents	
06 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
08 <input type="radio"/> No	07 <input type="radio"/> Loss
Dollars Cents	
09 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
10 <input type="radio"/> No	
Dollars Cents	
11 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
12 <input type="radio"/> No	
Dollars Cents	
13 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
14 <input type="radio"/> No	
Dollars Cents	
15 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
16 <input type="radio"/> No	
Dollars Cents	
17 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
19 <input type="radio"/> No	18 <input type="radio"/> Loss
Dollars Cents	
20 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
21 <input type="radio"/> No	
Dollars Cents	
22 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
23 <input type="radio"/> No	
Dollars Cents	
24 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
26 <input type="radio"/> No	25 <input type="radio"/> Loss

78.	
Dollars Cents	
01 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
02 <input type="radio"/> No	
Dollars Cents	
03 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
05 <input type="radio"/> No	04 <input type="radio"/> Loss
Dollars Cents	
06 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
08 <input type="radio"/> No	07 <input type="radio"/> Loss
Dollars Cents	
09 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
10 <input type="radio"/> No	
Dollars Cents	
11 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
12 <input type="radio"/> No	
Dollars Cents	
13 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
14 <input type="radio"/> No	
Dollars Cents	
15 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
16 <input type="radio"/> No	
Dollars Cents	
17 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
19 <input type="radio"/> No	18 <input type="radio"/> Loss
Dollars Cents	
20 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
21 <input type="radio"/> No	
Dollars Cents	
22 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
23 <input type="radio"/> No	
Dollars Cents	
24 <input type="radio"/> Yes ▶	<input type="text"/> <input type="text"/>
26 <input type="radio"/> No	25 <input type="radio"/> Loss



Answer Questions H1 to H8 about this dwelling.

STEP 8

A **dwelling** is a separate set of living quarters with a **private entrance** from the outside or from a common hallway or stairway inside the building. This entrance should not be through someone else's living quarters.

H1. Who pays the rent or mortgage, taxes, electricity, etc., for this dwelling?

If more than one person contributes to such payments, mark as many circles as apply.

79.

- 01 Person 1
02 Person 2
03 Person 3
04 Person 4
05 Person 5
06 Person 6
07 A person who is listed on another questionnaire for this dwelling
08 A person who does not live here

H2. Is this dwelling:

Mark one circle only.

- 10 owned by you or a member of this household (even if it is still being paid for)?
11 rented (even if no cash rent is paid)?

H3. (a) How many rooms are there in this dwelling?

Include kitchen, bedrooms, finished rooms in attic or basement, etc.

Do not count bathrooms, halls, vestibules and rooms used solely for business purposes.

12 ◀ Number of rooms

(b) How many of these rooms are bedrooms?

13 ◀ Number of bedrooms

H4. When was this dwelling originally built?

Mark the period in which the building was completed, not the time of any later remodelling, additions or conversions. If year is not known, give best estimate.

- 14 1920 or before
15 1921-1945
16 1946-1960
17 1961-1970
18 1971-1980
19 1981-1985
20 1986-1990
21 1991-1995
22 1996

H5. Is this dwelling in need of any repairs?

Do not include desirable remodelling or additions.

- 23 No, only **regular maintenance** is needed (painting, furnace cleaning, etc.)
24 Yes, **minor repairs** are needed (missing or loose floor tiles, bricks or shingles, defective steps, railing or siding, etc.)
25 Yes, **major repairs** are needed (defective plumbing or electrical wiring, structural repairs to walls, floors or ceilings, etc.)

FOR INFORMATION ONLY

Answer Questions **H6** to **H8** for only the dwelling that you **now occupy**, even if you own or rent more than one dwelling. If the exact amount is not known, please give best estimate.

80.

Note: *If you are a farm operator living on the farm you operate, mark here* **01** *and go to Step 9.*

FOR INFORMATION ONLY

H6. For this dwelling, what are the YEARLY payments (last 12 months) for:

- (a) electricity? **02** None
03 Included in rent or other payments **OR** **04**

Dollars	Cents
---------	-------

 per year
-
- (b) oil, gas, coal, wood or other fuels? **05** None
06 Included in rent or other payments **OR** **07**

Dollars	Cents
---------	-------

 per year
-
- (c) water and other municipal services? **08** None
09 Included in rent or other payments **OR** **10**

Dollars	Cents
---------	-------

 per year

H7. For RENTERS only:

- What is the **monthly rent** paid for this dwelling? **11** Rented without payment of cash rent **OR** **12**

Dollars	Cents
---------	-------

 per month

H8. For OWNERS only, answer parts (a) through (f):

- (a) What are the total regular **monthly** mortgage or loan payments for this dwelling? **13** None **Go to part (c)** **OR** **14**

Dollars	Cents
---------	-------

 per month
-
- (b) Are the property taxes (municipal and school) included in the amount shown in part (a)? **15** Yes → **Go to part (d)**
16 No
-
- (c) What are the estimated **yearly** property taxes (municipal and school) for this dwelling? **17** None **OR** **18**

Dollars	Cents
---------	-------

 per year
-
- (d) If you were to sell this dwelling now, for how much would you expect to sell it? **19**

Dollars

-
- (e) Is this dwelling part of a registered condominium? **20** Yes → **Continue with part (f)**
21 No → **Go to Step 9**
-
- (f) What are the **monthly** condominium fees? **22** None **OR** **23**

Dollars	Cents
---------	-------

 per month



**You have now completed your questionnaire. Please mail it today.
 Thank you for your co-operation.**

STEP 9

If you have any comments, please enter them on the back cover.

THE LAW PROTECTS WHAT YOU TELL US

The confidentiality of your census form is protected by law. This means that only Statistics Canada employees who work with census data and have taken an oath of secrecy see your form. Your personal census information cannot be given to anyone outside Statistics Canada — not the police, not another government department, not another person. This is your right.

You can ask to see the information you gave about yourself on your 1996 Census form after November 1996. To do this, write to the Privacy Co-ordinator, Statistics Canada, 25th Floor, R.H. Coats Building, Ottawa, Ontario, K1A 0T6.

COMMENTS

FOR INFORMATION ONLY



Recycled paper