REPUBLIC OF GUYANA



INSTRUCTIONS

Use No. 2 pencil only. Completely fill in the boxes and shade the ovals. Erase cleanly any changes. Make no stray marks on the form.



ERIAL UMBER	Region Number	Village/Ward Number	Ed Nun	nber	Buildin	g Number	Househo Numbe
0974							
ddress of H	ousehold						
own / Village	e / Ward						
siephone W	imper						
siephone w	imber						
INTERVIEV							
		NAME					DATE
		NAME					DATE
INTERVIEV	VER	NAME					DATE
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INTERVIEV	VER	NAME					DATE
SUPERVISO	VER						
SUPERVISO	VER	NAME					DATE
SUPERVISO	VER	NAME					DATE
SUPERVISO	VER DR	NAME					DATE
SUPERVISO	VER DR	NAME					DATE



HOUSEHOLD QUESTIONNAIRE (One for each household)

INTERVIEWER SAY:

I am a Census Interviewer assigned to this area and I would like to get some information about this household and its members. Here is my ID card. First please give me the names of the persons who live and share at least one meal daily with your household including persons who were present on census night but are no longer here.

		LISTING	OF HOUSE	HOLD ME	MBERS		-	R/V
Something the state of the stat	SURNAME			F	FIRST NAME			
7.00								
	SURNAME			F	FIRST NAME			
	12							
	SURNAME			F	FIRST NAME			
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	SURNAME			F	FIRST NAME			
	SURNAME				FIRST NAME			
	SOTIVAINE				THO I HAME			
	SURNAME			F	FIRST NAME			
				Total	Male	Female		
	Number	r of Persons in	Household					
			RI	ECORD O	F VISITS			
IN	TERVIEW CALLS		DATE		TIME STARTED	TIME ENDED	DURATION	* RESULTS
	1							
	2							
	3							
	4							

* RESULT CODES:

1 = Completed

2 = Partially completed

3 = Dwelling vacant

4 = Address not a dwelling

5 = Address not found or non-existent

6 = No suitable respondent at home

7 = Refused

8 = Other (specify):_____

SECTION H1

HOUSING



H1.1	Does this household	own, rent, or	lease this dwelling?	H1.9	What type of toilet facility does	this househ	old have	9?
	0 -			_	1 O W.C linked to sewer	4 Oth	er (spec	ify)
		Rented - priva	ite 6 Rent free	S	2 W.C cesspit or septic tank			
H		Rented - govt.	7 Don't know / not stated	0	3 O Pit - Latrine	5 Nor	ne (skip	to H1.11)
	2 Squatted 5 L	eased	8 Other (specify)	(Skip to H1.10	Is this toilet facility shared with	persons wh	o are no	t members of
					this household 1 O Yes	2 O No		
H1 2	Under what type of a	rrangement is	the land occupied?		10 163	20110		
	Is it freehold, leased,			H1.11	What type of lighting does this h	nousehold i	ise mos	12
	1 Owned/Freehold		5 O Sharecropping		1 O Gas	4 O Ger		
	2 O Leased-hold		6 O Squatted		2 Kerosene	5 Oth		
	3 O Rented		7 O Don't know / not stated		3 Electricity	00011	CI (Spec	m(y)
	4 O Permission to wor	k land	8 Other (specify)					
			(-)	H1.12	What type of fuel does this house	sehold use	most for	cooking?
					1 O Coal	4 O Ker		J
H1.3	What type of dwelling	does this ho	usehold occupy?		2 Wood	5 O Ele	ctricity	
	1 O Undivided private		5 O Double house / duplex		3 O Gas	6 Oth		ifv)
	2 Part of private hou		6 Combined business & dwell	ing				**
A	3 Flat / apartament		7 O Barracks					
	condominium		8 Other (specify)	H1.13	Is your kitchen indoors or outdo	ors?		
	4 O Townhouse				1 O Indoors	3 O No	kitchen	(skip to H1.15)
					2 Outdoors			
H1.4	Which year was this o	dwelling built's	?					
	1 O Before 1970		6 (1998	H1.14	Is your kitchen shared with pers	ons who a	e not m	embers of this
	2 0 1970 - 1979		7 🔾 1999		household?			
	3 🔾 1980 - 1989		8 2000		1 O Yes	2 (No		
	4 🔾 1990 - 1995		9 0 2001 or later					
	5 🔾 1996 - 1997		10 O Don't know / not stated	H1.15	How many rooms does your ho	ousehold od	cupy? -	Do not count
					bathrooms, porches, and kitche	n.		
H1.5	What is the main con-	struction mate	erial of the outer walls?		No. of Rooms			
	1 Wood		5 Adobe		NO. OF HOOFIS			
	2 O Concrete		6 Makeshift	H1.16	How many bedrooms are	there in t	this dw	elling unit?
	3 Wood & concrete		7 OClay brick		Bedrooms are rooms used ma			
	4 O Stone		8 Other (specify)		makeshift and temporary s	leeping q		
					bedrooms including spares not	occupieu.		
H1.6	What is the main mat	erial used for	roofing?		No. of Bedrooms			
	1 Sheet metal (zinc,	, aluminum,	6 Concrete	H1.17	Does this household have a	ny of the	followir	na items in
	galvanize)		7 O Thatched/troolie palm		working condition?			
	2 Shingle (asphalt)		8 O Makeshift			Yes	No	Don't know
	3 O Shingle (wood)		9 Other (specify)		1 Radio / stereo			
	4 O Shingle (other)		Section Colonial In		2 Television set			
	5 O Tile				3 VCR / DVD			Q
		2 2	A STATE OF THE STA		4 Personal computer	P	9	
H1.7	What is the main source	ce of water sur	oply for members of this household	?	5 Internet connection			
	1 O Private, piped into	dwelling	6 O Public standpipe or hand pu	mp	6 Private vehicle			
	2 O Private catchments		7 O Public well		7 Refrigerator / freezer			
	3 O Private, piped into		8 O River/stream/creek/pond/sp	rina	8 Washing machine	P		
	4 O Public, piped into		9 Other (specify)		9 Gas stove			
	5 Public, piped into		(0)		10 Microwave			
					11 Telephone (land)			
H1.8	What is the main source	ce of drinking v	water for members of this househol	d?	12 Cellular telephone			
					13 Water pump			
	1 O Piped into dwelling	_	8 Rain water collection		14 Electrical generator			
	2 Piped into yard or	plot	9 O Unprotected dug well					
	3 Public standpipe		10 O Unprotected spring	H1.18	3	arbage disp	osal?	
			11 O Pond/river/stream		1 O Dumping on land	5 O Bur		
	5 O Protected dug we	II	12 O Vendor/Private Supplier		2 O Compost	6 O Gar	bage co	llection service
	6 Protected Spring		13 Other (specify)		3 O Burning	7 Oth	er (spec	ify)
	7 O Bottled water				4 O Dumping river / sea / pond			

	O Yes	no nodochola gone a	2 No (SKIP TO SEC	y in the past 5 years, i.e. beto	ween 1997 and present?	
2.2 Hov	v many persons?	?				
	Total		Males		Females	
	H2.3	H2.4 What was () age at time of departure?	H2.5 What was () occupation at time of departure?	H2.6 What was the highest level of education reached by () at time of departure?	H2.7 Which country did () migrate to?	H2.8 In which year did () migrate?
Person Number	What is () sex?	If emigrant was less than 15 years at time of departure skip to H2.6	Please specify in detais	None/Nursey/Kindergarten Primary Secondary Post secondary University/Tertiary Other (specify below) Not stated/Don't know	N.B Write country on line.	
1	Male Female		For official use only		For official use only	O Don't Know / not stated
2	Male Female		For official use only		For official use only	Opon't Know / not stated
3	Male Female		For official use only		For official use only	O Don't Know / not stated
4	Male Female		For official use only		For official use only	Opon't Know / not stated
5	Male Female		For official use only		For official use only	O Don't Know / not stated
6	* Male Female		For official use only		For official use only	O Don't Know / not stated