I. Demography

1. Sex:
   - male ☒
   - female ☒

2. Date of birth:
   - year [__] month [__] day [__]

3. Citizenship:
   - Hungarian ☒
   - Hungarian and foreign, namely: [__]
   - foreign, namely: [__]
   - stateless person ☒

4. Data on the address provided on the dwelling questionnaire
   - residence (registered permanent address) ☒
   - place of stay (registered temporary address) ☒
   - not registered address ☒

4.1. Under what title do you live there?
   - owner or relative, beneficial owner ☒
   - tenant of the whole dwelling or relative of tenant ☒
   - tenant of a part of the dwelling ☒
   - other ☒

4.2. How long have you lived there?
   - since your birth ☒
   - year [__] month [__]

5. Where were you living before?
   - locality (town, village), in Budapest also the district, in case of a foreign address the current name of the country [__] [__] [__]

6. Where was your address when born?
   - locality (town, village), in Budapest also the district, in case of a foreign address the current name of the country [__] [__] [__]

7. Do you have an address in addition to the address provided on the dwelling questionnaire?
   - If yes, where? (in case of more than one address write in all!)
     - no ☒
     - yes, (permanent) address registered as a residence ☒
     - yes, (temporary) address registered as a place of stay ☒
     - yes, not registered address ☒
     - yes, abroad ☒

8. At what address of yours are you living?
   - residence (registered permanent address) ☒
   - place of stay (registered temporary address) ☒
   - not registered address ☒
   - abroad ☒

9.1. Have you ever been living abroad (outside the present area of Hungary) for at least one year? If you have been living abroad more than once for at least one year, please provide data on the last period!
   - no ☒
   - yes, the current name of the country: [__] [__] [__]

9.2. When did you return or actually move to Hungary?
   - year [__] month [__]

10. What is your legal marital status?
    - never married ☒
    - married ☒
    - widow(er) ☒
    - divorced ☒
    - registered cohabiting partner ☒
    - widowed registered cohabiting partner ☒
    - divorced registered cohabiting partner ☒

11. If you are married,
    - date of current marriage:
      - year [__] month [__]
    - do you live with your spouse?
      - yes ☒
      - no ☒

12. Do you have a cohabiting partner?
    - no ☒
    - yes, beginning of the cohabiting partnership:
      - year [__] month [__]
    - do you live in the same dwelling as your cohabiting partner?
      - yes ☒
      - no ☒
16. Number of the household which you belong to (take into consideration your answer given to question 14 on the dwelling questionnaire).

one household lives in the dwelling: ✗
more than one household lives in the dwelling, number of the household:   

Persons belonging to the same household should write in the same household number.

14. What role do you have in the family (household)?

Mark the first answer you consider valid for yourself.

husband, wife:   
cohabiting partner:   
lone parent living together with her/his children (if the children do not live in couple relationship):   
child (including fostered and adopted children):   
ascendant (parents and grandparents living together with the family):   
other relative:   
not relative:   
living alone (no other persons belong to the household):   

13. Number of children born alive:

No children born alive:   

Children:   

15. When were your children born?

the first (oldest) child: year  month  
the second child: year  month  
the third child: year  month  
the fourth child: year  month  
the fifth child: year  month  
the sixth child, or in case there are more than six, the youngest one: year  month  

17.1. Do you learn, or attend infant nursery/kindergarten at present?

no:   
attend infant nursery:   
attend kindergarten:   
attend primary school:   
attend vocational school:   
attend secondary general school:   
attend secondary vocational school (including secondary vocational programmes built on general certificate of education):   
attend higher vocational programmes:   
attend college-level or BA/BSc training:   
attend university-level or MA/MSc training, or unified undivided training:   
attend college- or university-level professional further training:   
attend PhD or DLA training:   

17.2. What is the form of education?

full-time:   
other:   

18. Write in the number of classes or grades that you completed in the following types of schools or training?

Write in the number of grades completed for all types of schools. Those attending school should write in the number of classes or grades already completed.

19. What is your highest completed level of education?

lower than the eighth grade in primary (general, higher general) school:   
eighth grade in primary (general, higher general) school:   
certificate of apprentice school education:   
certificate of vocational school education:   
general certificate of education without qualifications:   
general certificate of education with qualifications:   
school-leaving certificate:   
certificate of vocational programmes built on general certificate of education:   
certificate of higher (also accredited) vocational programmes (granted only after 1998):   
college (or equivalent, e.g. BA/BSc) diploma:   
university (or equivalent, e.g. MA/MSc) diploma:   
PhD or DLA degree:   

20. Highest completed level of education

In case of more than one qualification of the same level give answers to questions 20.1 – 20.3 with reference to the first qualification.

20.1. year of completion: year  
20.2. form of education: full-time:   
other:   
20.3. field:   

E.g. bricklayer, mason, radio mechanic, wood engineer, general economy, primary school teacher of English language and literature.
Do you have another completed level of education of the same level?
no .......................................................................................................................
yes, data on the other qualification

20.4. year of completion: year

20.5. form of education:
full-time ...........................................................................................................
other .............................................................................................................

20.6. field:
e.g. bricklayer, mason, radio mechanic, wood engineer, general economy, primary school teacher of English language and literature

20.7. further completed levels of education of the same level:
no .......................................................................................................................
yes, namely: ..........................................................................................

III. Command of languages

21. What languages do you speak? In what languages can you understand others and make yourself be understood?
Hungarian ..........................................................................................................

IV. Occupation, workplace and transport

22. Mark which of the following groups you belong to.
working (employee, entrepreneur, helping family member, casual worker, primary producer, member of a co-operative)...............................................................................................................
jobless, job-seeker...................................................................................................
old-age pension, retirement provision recipient on own right...........................
disability pensioner, accident annuity beneficiary on own right...........................
survivors’ (widows'/widowers’, parents’) pension, retirement provision recipient.......................................................................................................................
child-care benefit (child-care allowance, child-care fee, child-care support) recipient .......................................................................................................................
nursing allowance recipient..................................................................................
child attending infant nursery or kindergarten, student, student of a tertiary-education institution.................................................................
0–15 year-old child not attending infant nursery, kindergarten or school living on own asset or on real estate leasing ..........................................................
housewife .............................................................................................................
social support recipient........................................................................................
other, namely: .....................................................................................................

If you are younger than 15 i.e. born after 30th September 1996. 

23. Did you work on the week preceding the population census (between 24th and 30th September 2011)?
yes, in the given period you did at least one hour of work for income........................................
you did not work because you were on leave (including maternity leave), or were temporarily absent from work because of sick-pay etc..........................................
you did not work for other reason (e.g. you did not have a job, you were a pensioner, made your studies, received child-care allowance or child-care fee) ........................................

24. Have you actively looked for work during the last four weeks?
no .......................................................................................................................
yes ..................................................................................................................

25. If you could find a job, could you start it within two weeks?
no .......................................................................................................................
yes ..................................................................................................................

26. When did you work last time?
year ..................................................................................................................
month .............................................................................................................
you have never worked ..................................................................................

27. Your (present or last) occupation:

28. What is (was) your status in employment?
employee ..........................................................................................................
sole proprietor, self-employed ...........................................................................
working member of a company ..........................................................................
working member of a co-operative ....................................................................
casual employee (working by special commission contract, casual worker, day worker) ..........................................................................................................
employed in public works (doing work for public benefit, public purposes etc., employed in public employment) ..................................................................
helping family member ..................................................................................

29. Do you have employees?
no ..................................................................................................................
1–2 person(s) ..................................................................................................
3–9 person(s) ..................................................................................................
10–19 person(s) ..................................................................................................
20 or more persons ..........................................................................................

30. Name and typical activity of your employer or enterprise, OR description of the activity of your employer or enterprise (current or last employer):

31. Where, in which locality is your workplace/infant nursery/kindergarten/school?
do not work and do not study (do not attend infant nursery, kindergarten or school) .......................................................................................................................
in your dwelling or home (at the address provided on the dwelling questionnaire) ..........................................................................................................
in the same locality or the same district of Budapest as where your dwelling or home can be found (at the address provided on the dwelling questionnaire) ..................................................................................
in another locality, another district of Budapest, abroad, namely: ..........................................................................................................................
in different localities (you cannot state a particular locality or a particular district of Budapest) ..........................................................................................................

32. How do you travel from your actual residence to work/school/kindergarten/infant nursery? (Please mark three answers maximum!)
on foot.............................................................................................................
by local bus, tram, trolleybus, metro or underground..........................................................................................................
by long-distance bus..................................................................................
by train or suburban rail.............................................................................
by car...............................................................................................................
by motorcycle ...................................................................................................
by bicycle ........................................................................................................
in another way ..................................................................................................

33. How many minutes does the journey to work/school/kindergarten/infant nursery usually take?

Question 21: Do you have another completed level of education of the same level?

Question 27: Your (present or last) occupation:

Question 34: Where, in which locality is your workplace/infant nursery/kindergarten/school?

Question 31: Where, in which locality is your workplace/infant nursery/kindergarten/school?

Question 27: Your (present or last) occupation:
You finished filling in this personal questionnaire. If there are other people living in the dwelling, please fill in a personal questionnaire for each of them. If you filled in a personal questionnaire for each person in the dwelling, the filling in is finished.

Thank you for your answers!