Final draft approved by CTC on 24 August 2006

5. Galvanised Iron / Aluminium / Other metal sheets

6. Asbestos cement sheets

8. Other (specify)

7. Plastic / Synthetic material sheets

FORM A HOUSELIST

STRICTLY CONFIDENTIAL Identification Particulars

5. Galvanised Iron / Aluminium / Other metal sheets

6. Asbestos cement sheets

8. Other (specify)

7. Salvaged / Improvised materials

## Royal Government of Cambodia General Population Census of Cambodia, 2008



Page Number.....

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		Kh	et / Kror	ıg		Sro	k / Khai	nd			Kh	um / Sangka	ıt		Phum		Enumera	ation Area No.	
Name																			
Code																			
Buildi	ng / Structı	ıre and	House	iold Pai	rticular	s													
	Structure	Predomi Material Building	of		1. Residend		Househ No.	iold	Particul	ars of Hea	d of Hous	sehold		Persons Usu e Householc	ıally		Remarks	\$	
						ce & Shop ce & workshop													
		Wall	Roof	Floor	4. Residend establishme	ee & any other ent (specify) r Code)				Name		Sex 1 = Male 2 = Female	Males	Females	Persons				
												(Enter Code)							
1	2	3	4	5		6		7		8		9	10	11	12		13		
1																			
2																			
3																			
4 5													-		-				
6					-														
7																			
8																			
9																			
0																			
	(**Count tl	ne numb	er of ent	ries and	give tota	al) **Total						Total							
	O CODES													т					
	iterial ( Colum	<i>,</i>				Roof Material ( Colum	· ·					aterial ( Colui	mn 5)			Name of Enumerate	or :		
	oo / Thatch / G	rass / Reed	s			1. Bamboo / Thatch / Gr	ass				1. Earth /	2						1	/
2. Earth						2. Tiles						/ Bamboo plar							/
	/ Plywood					3. Wood / Plywood						ete / Brick / Sto	one			Signature	e I	Day Month	Year
4. Concre	ete / Brick / Sto	one				4. Concrete / Brick / Sto	ne				<ol><li>Polishe</li></ol>	ed stone		1					

5. Parquet / Polished wood

6. Mosaic / Ceramic tiles

7. Other (specify)

Name of Supervisor :



Final draft approved by CTC on 24 August 2006



**Identification Particulars** 

# **Royal Government of Cambodia** General Population Census of Cambodia, 2008



STRICTLY CONFIDENTIAL

FORM B HOUSEHOLD QUESTIONNAIRE PART 1

	Khet / Kr	ong	Srok / Kh	and	Khum / Sa	angkat	Phur	n	Enumerat	ion	Build	ing No.		Household	l No.	Name of Head of Household
									Area No.							
Name																
Code																
		Рори	lation Particula	rs												
		State	ement 1.1 : Usua	l Members Prese	ent on Census Ni	ight		State	ement 1.2 :	Visitors Pr	esent on Co	ensus Nigh	t			

Type of Household/	SI.	Full Name	Relationship to	Sex	1	SI.	Full Name	Relationship to	Sex	Usual Resider	ce
<b>Population</b> (Give appropriate code	No.		Head of Household	1 = Male 2 = Female		No.		Head of Household	1 = Male 2 = Female	Within Cambodia Give name of district and	Outside Cambodia
<i>in the box below )</i> 1 = Normal or Regular			(Write in words)	(Enter code)				(Write in words)	(Enter code)	write name of province within brackets	Give name of country
Household	1	2	3	4		1	2	3	4	5	6
2 = Institutional Household*	1					1					
3 = Homeless Household*	2					2					
4 = Boat Population*	3					3					
5 = Transient Population*	4					4					
(Specify location )	5					5					
	6					6					
	7					7					
	8					8					
	9					9					
	0					0					

Statement 1.3 : Usual Members Absent on Census Night

SL.	Full Name	Relationship to	Sex	Age	Location on Census Night		How long Absent		Total No. of Persons in Statement 1.1
No.		Head of	1 = Male		Within Cambodia	Outside Cambodia	( in completed		
		Household	2 = Female		Give name of district and write name	Give name of country	months). Write 0	1	
		(Write in words)	(Enter code)		of province within brackets		for less than 1 month		
1	2	3	4	5	6	7	8		Total No. of Persons in Statement 1.2
1									
2									
3									Total No. of Persons in Statements 1.1 & 1.2
4									
5								1 '	

Number of Form B used for the Household	Enumerator:			<u>/</u>
		Name	Signature	Day Month Year
* In these cases, fill-in only Identification Particulars	Supervisor :			/ / 2
Population Particulars in Statements 1.1,1.2 and 1.3 are not be collected in these cases		Name	Signature	Day Month Year

			For	all person	\$															
SI. No.	Full Name of the person	Relationship	Sex	Age		Marital status	Mothe Tongu		Religion	Birth P	lace		Previous Residen	ce			Durat of Sta		Reason for Migration	
1	2	3	4	5		6		7	8	9			10					11	1	12
	Names of Usual Members Present and Visitors (Please refer to Statements 1.1 and 1.2 in Part 1)	Relationship to Head of Household (Enter Code from the list below )	1: Male 2: Female ( <i>Enter</i> Code)	Age in completec years 00: Less t 01: 1 year 02: 2 year  97: 97 yea 98: 98 yea and over	han 1 yean s ırs	2: Married (i.e. currently married) 3: Widowed 4: Divorced 5: Separated ( Enter Code)	Mother Tongue 1: Khmer 2: Vietna 3: Chines 4: Lao 5: Thai 6: French 7: Englisl 8: Other (Specify)	mese ke h	2: Islam	Place of Birth of the per- if in this village, enter cc If in another village, giv district of that village an province within brackets If outside Cambodia, wr country.	de 1. e name o d write n	ame of	Where has the person been livin If always lived in this village, e and skip to col. 13 If in another village, give name district of that village and write province within brackets If outside Cambodia, write nam country	nter co of the	de 1 of		How long h person lived this village? (Enter Code the list belo	in from	Give reason change of res if present re is different f previous resi (Enter Code the list below	sidence, sidence from idence. from
1																				
2																				
3																_				
4																_				
5															_	_				
7		1																		
8																				
9		1	1																	
0																				

Codes for column 3
Relationship to Head of Household
1: Head
2: Wife / Husband
3: Son / Daughter
4: Father / Mother
5: Grand child
6: Other Relative
7: Non-Relative

Codes for column 11	
Duration of Stay	
00: less than 1 year	

01: 1 year to less than 2 years
---------------------------------

02: 2 years to less 3 years

03: 3 years to less than 4 years 04: 4 years to less than 5 years

.

10: 10 years to less than 11 years

20: 20 years to less than 21 years

97: 97 years to less than 98 years

98:98 years and over

07: Natural calamities

03: Education

04: Marriage

05: Family moved 06: Lost land / lost home

Codes for column 12

Reason for Migration 01: Transfer of work place

02: In search of employment

08: Insecurity

09: Repatriation or return after displacement

- 10: Orphaned
- 11: Visiting only
- 12: Other (specify)

							For All Persons												d Persons and Stud des 1 or 5 in col. 16		)nly	
Literacy		Full Time Ed	ucation		Physical/Men Disability, if any	tal	Main Activity	Employr Period	nent	Occ	ıpation	Employment Status	Industry, Trade or 3	Service	Sector of Employment	Secondary eco activity (For a 1 to 8 in Col 1	all Codes		Place of Wor	k or S	choolii	g
1	3		14		15		16	17		18		19	20		21	22			23			
(a) Can the person read and write with understanding in Khmer language ? I: Yes 2: No (Enter Code )	(b) Can this person read and write with under- standing in any other language? If so which language? (Enter code from list below)	(a) Has the person attended School/ Educational Institution ? 1: Never 2: Now 3: Past (Enter Code )	(b) What is the hi grade complet (Enter Code from list below )	~	If the person is physically/ mentally disat give appropria code numbe from the list below. Otherwise ente dash (-)	oled te r	Main activity of the person during last year (Enter Code from list below )	Number of months employed the last 1 months	in	Name of Occu	pation	Employment Status/Class (Enter Code from list below )	Nature of Industry, T Service	rade or	Sector in which Employed (Enter Code from list below )	In terms of contribution to income or subs what was the s most important economic activ this individual the last year	sistence, econd t vity of over	3: Working of 4: Working of of the country (Enter code) If in another of and write nam	schooling in the sar schooling in anothe r schooling across th	er distrie ne borde f the dis n bracke ne of th	ict, ler strict :ets.	
					Since birth	After birth										(Enter code no	nn nsc	coue	Province/Country		country	
																						Ŧ
	1	1											1 1									

Codes for column 13(b)	Codes for column 14(b)		Codes for column 15	Codes for Column 16	Codes for Column 19	Codes for column 21	Codes for Column 22
Literacy in any other language	What is the Highest Grade Completed ?		Type of disability	Main Activity During last Year	Employment Status/	Sector of employment	Secondary economic activity
1: No other language	For Never in 14(a) put dash (-) in 14(b)		1: In seeing		Class	1. Government	01. None
2: Vietnamese	For Now or Past in 14(a), Code as follows	S	2: In speech	1 : Employed (Fill in cols. 17 to 23)	1 : Employer	2. State owned enterprise	Farming (growing crops)
3: Chinese	00: No class completed	19: Post graduate	3: In hearing	2 : Unemployed (Employed any time before)	2 : Paid employee	3. Cambodian enterprise (Private)	02. Unpaid Employment (Self-employed o
4: Lao	01: Class 1 completed	and above	4: In movement	(Fill in cols. 17 to 21 for last employment, fill in Col. 22	3 : Own-account worker	4. Foreign enterprise	employed in family enterprise)
5: Thai	02: Class 2 completed	20: Other (specify )	5: Mental	and put dash (-) in col. 23)	4 : Unpaid family worker	5. Non profit institution	03. Paid Employment (Wage labourer)
6: French				3 : Unemployed (Never employed any time before )	5 : Other (Specify )	6. Household sector	Livestock farming
7: English	11: Class 11 completed					7. Embassies, International institutions,	04. Unpaid Employment (Self-employed of
8: Other (Specify)	12: Class 12 completed			4 : Home maker	-	and foreign aid and development agencies	employed in family enterprise)
	13: Lower Secondary diploma holder			5 : Student (Put dash (-) in cols 17 to 21 and fill in cols 22&2	23)	8. Other, specify	05. Paid Employment (Wage labourer)
	14: Secondary School/Baccalaureate holde	er		6 : Dependent			Other Activities
	15: Technical/vocational pre-secondary di	ploma/certificate		7 : Rent-receiver, Retired or other income recipient			06. Fishing
	16:Technical/vocational post-secondary di	ploma/certificate		8 : Other (Specify)			07. Other household -based production
	17: Undergraduate			(For codes 3, 4, 6,7 & 8 put dash (-) in Cols. 17 to 21			or services
	18: Graduate			fill in Col. 22 and put dash (-) in Col. 23)			08. Construction
			-		•		09. Wholesale or retail trade
							10. Transport

4

11. Other paid employment (services like teaching, cooking, child care, medical, etc.)

SI. No.	Full Name of woman	Sl. No. in col.1 of Part 2				FER	ATILITY INFORMA	ΓΙΟΝ			
				(Give number in two o	Number of Ch digits like 01, 02,	<b>ildren Born</b> 10, 11. If None, writ	e 00)		Particulars of Birt women aged 15-49	h in the last 12 montl years	is to
			How many Chi been born alive woman ?		How many of a	ihem are	How many of the have diec		Any child born ali woman during the 12 months ? (Give actual numbe under the appropria If none write 0 ) (If no child was bon the last 12 months,	<b>last</b> rr like 1,2 te column. rn to the woman in	State who assisted her during the delivery (Enter Code from list below)
(1)	(2)	(3)		(4)		(5)	(6)			(7)	(8)
			(a) Male	(b) Female	(a) Male	(b) Female	(a) Male	(b) Female	Male	Female	
1											
2					<b> </b>						
3					<b>├</b> ──						_
4 5											
6		1					1				
7											
8											
9											
0											

#### FORM B HOUSEHOLD QUESTIONNAIRE PART 3 : FERTILITY INFORMATION OF FEMALES AGED 15 AND OVER LISTED IN COLUMN 2 OF PART 2

- Codes for Column 8
- 1. Doctor
- 2. Nurse
- 3. Midwife
- 4. Traditional Birth Attendant (TBA)
- 5. Other
- 6. None

FORM B HOUSEHOLD QUESTIONNAIRE PART 4 : HOUSING CONDITIONS AND FACILITIES (Part 4 need not be filled in for institutional and homeless households and for boat and transient population) (Enter Code in the box below)

Enter Code in the box below)							
On what basis does the	Main Source of light	Main Cooking Fuel	Toilet facility within	Main Source of drinking water	Location of	No. of rooms occupied by	
household occupy this			premises	supply	Drinking water	household (exclude kitchen,	
dwelling?					source:	bathroom, toilet and storeroom)	
1	2	3	4	5	6	7	
	1 : City power	1 : Firewood	1 : Not available	1 : Piped water	1: Within the	1 : One Room	
1 : Owner occupied	2 : Generator	2 : Charcoal	If available give one of the	2 : Tube / pipe well	premises	2 : Two Rooms	
2 : Rent	3 : Both city power and generator	3 : Kerosene	codes 2 to 5:	3: Protected dug well	2: Near the	3 : Three Rooms	
3 : Not owner, but rent free	4 : Kerosene	4 : Liquefied Petroleum Gas (LPG)	2 : Connected to sewerage	4 : Unprotected dug well	premises	4 : Four Rooms	
4 : Other (specify )	5 : Candle	5 : Electricity	3 : Septic tank	5 : Rain	3: Away	5 : Five Rooms	
	6 : Battery	6 : None	4 : Pit latrine	6 : Spring, river, stream,		6 : Six Rooms	
	7 : Other (specify)	7 : Other (specify )	5 : Other type	lake/pond		7 : Seven Rooms	
			of toilet (specify)	7 : Bought		8 : Eight Rooms and above	
				8 : Other (specify)			
(Enter Code )	(Enter Code )	(Enter Code )	(Enter Code )	(Enter Code )	(Enter Code )	(Enter Code )	

#### INFORMATION ON OWNERSHIP OF SOME FACILITIES BY THE HOUSEHOLD (Under each item write "00" in the square if not available, or give the actual number if available)

Radio/ Transistor Television Telephone C		Cell phone	Personal Computer	Bicycle	Motorcycle	Car/Van	Boat	Tractor	
		(Fixed)							
8	9	10	11	12	13	14	15	16	17
									(a) (b) Big tractor Hand tractor (Koyaon)

#### State whether the household accesses the Internet

At home	Outside home
18	19
1: Yes 2: No	1: Yes 2: No
(Enter Code )	(Enter Code )

### FORM B HOUSEHOLD QUESTIONNAIRE PART 5 : DEATH IN HOUSEHOLD

Deaths in Household in the last 12 months : Total Number of Deaths

				PARTICULARS OF THE DEC	EASED				
SI. No.	Name of Deceased	Sex 1: Male	Relationship to Head of	Age at DeathWhat wasWrite the age in total years completedthe cause		For woman aged 15-49 years who died			
		2: Female	Household (Use Code	at the time of death	of death ?	Did the woman die while pregnant,	If 'yes ' in col State where the death	lumn 7 (a) State who attended on	
		(Enter Code)	given for col.3 of Par 2)	00: less than one year 01: 1 year to less than 2 years 02: 2 year to less than 3 years	(Enter Code from list below)	during delivery or within 42 days after giving birth ?	took place.	her before death .	
				97:97 year to less than 98 years 98: 98 year and over		1: Yes 2: No	(Enter Code from the list below)	(Enter Code from the the list below)	
1	2	3	4	5	6	7(a)	7(b)	7( c)	
1									
2									
3									
4									
5									
6									
7									
8									
9									
0									

ACCIDENT			
	NOT KNOWN		
12: Land mine	16: Don't know		
13: Road Accident			
14: Drowning			
15: Other accident			
	13: Road Accident 14: Drowning		

Codes for Col. 7(b)
Place of Death
1: Hospital
2: Health Center
3: Home
4: Other

## Codes for col. 7( c) Attended by: 1: Doctor 2: Nurse 3: Midwife 4: Traditional Birth Attendant (TBA) 5: Other (Specify)..... 6: None