



Republic of Uganda
National Population and Housing Census 2014
INSTITUTIONS QUESTIONNAIRE



BOOK NUMBER

IDENTIFICATION PARTICULARS

WRITE NAME IN CAPITAL LETTERS															CODE	
DISTRICT																
COUNTY / MUNICIPALITY																
SUB-COUNTY / DIVISION / T. C.																
PARISH / WARD																
LC1																
EA																

NAME OF ENUMERATOR		CODE

SIGNATURE OF ENUMERATOR	
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DATE OF ENUMERATION		DD	MM	YYYY

NAME OF PARISH SUPERVISOR		CODE

SIGNATURE OF PARISH SUPERVISOR	
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DATE OF SUPERVISION		DD	MM	YYYY

Institution Codelist

Type of Institution

- 11 Educational
- 12 Religious
- 13 Medical
- 15 Hostel
- 16 Prison
- 17 Barracks
- 18 Orphanage / Reformatory
- 19 Refugee Camp
- 20 IDP Camp
- 21 Homeless
- 22 Floating population
- 96 Other



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CODE

DISTRICT			
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SUB-COUNTY / DIVISION / T.C.			
PARISH / WARD			
LC1			
EA			

ENUMERATOR'S NAME

--	--

SIGNATURE OF
ENUMERATOR

--	--

DATE (dd / mm / yyyy)

--	--	--

PARISH SUPERVISOR'S
NAME

--	--

SIGNATURE OF PARISH
SUPERVISOR

--	--

DATE (dd / mm / yyyy)

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SUMMARY INFORMATION

Institution Number	Institution Type	Total Population			Institution Number	Institution Type	Total Population		
		Male	Female	Total			Male	Female	Total
(1)	(2)	(3)	(4)	(5)	(1)	(2)	(3)	(4)	(5)

BOOK NUMBER		INSTITUTION NUMBER		INSTITUTION TYPE	
NAME OF INSTITUTION					

PARTICULARS OF INSTITUTION MEMBERS

	FULL NAME	SEX	DATE OF BIRTH			AGE
P0	P1	P3	P4			P5
Person Number ■	Please give the full names of all persons who spent the Night of 27/28th August 2014 in this institution <i>(Exclude caretakers with independent households)</i> <i>(Write First Name and Last Name only. No Initials)</i> Example:	Is [NAME] male or female? 1=Male 2=Female	What is [NAME]'s exact date of birth? DC4 ■ <i>(Write the Day, Month, Year)</i> DD MM YYYY			What is [NAME]'s age in completed years? If age is less than one year record 00; if 95 years and above record 95
000	F A I T H A L I A U	2	1 3	0 8	1 9 3 8	7 6

BOOK NUMBER			INSTITUTION NUMBER		INSTITUTION TYPE	
NAME OF INSTITUTION						

PARTICULARS OF INSTITUTION MEMBERS

	FULL NAME	SEX	DATE OF BIRTH			AGE	
P0	P1	P3	P4			P5	
Person Number ■	<p><i>Please give the full names of all persons who spent the Night of 27/28th August 2014 in this institution</i></p> <p><i>(Exclude caretakers with independent households)</i></p> <p><i>(Write First Name and Last Name only. No Initials)</i></p> <p>Example:</p>	<p>Is [NAME] male or female?</p> <p>1=Male 2=Female</p>	<p>What is [NAME]'s exact date of birth?</p> <p style="text-align: center;">DC4 ■</p> <p><i>(Write the Day, Month, Year)</i></p> <p style="text-align: center;">DD MM YYYY</p>			<p>What is [NAME]'s age in completed years?</p> <p>If age is less than one year record 00; if 95 years and above record 95</p>	
0 0 0	F A I T H A L I A U	2	1	3	0 8	1 9 3 8	7 6