



CENTRAL BUREAU OF STATISTICS

NEPAL LIVING STANDARDS SURVEY II 2002/03

HOUSEHOLD QUESTIONNAIRE

All personal information asked within this questionnaire will be kept confidential according to Statistical Act, 2015. This information will be used only for statistical purposes.

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PSU NUMBER

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HOUSEHOLD

HEAD OF HOUSEHOLD _____ LOCALITY _____

VILLAGE / MUNICIPALITY _____ DISTRICT _____

Team No.

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INTERVIEW

DATE OF INTERVIEW:

YEAR

MONTH

DAY

INTERVIEWER'S NAME:..... CODE:

IS IT A HOUSEHOLD ORIGINALLY SELECTED?

YES..... 1 (→HOUSEHOLD DATA)

NO..... 2

WHAT IS THE REASON THAT THE HOUSEHOLD ORIGINALLY SELECTED COULD NOT BE INTERVIEWED?

DWELLING NOT FOUND... 1

HOUSHEOLD NOT FOUND.. 2

REFUSAL..... 3

SUPERVISOR: PLEASE FILL THE FOLLOWING IF THE HOUSEHOLD ORIGINALLY SELECTED COULD NOT BE INTERVIEWED AND ALTERNATE HOUSEHOLD IS TAKEN

HOUSEHOLD (NUMBER) TO BE INTERVIEWED:

HOUSEHOLD (NUMBER) THAT COULD NOT BE INTERVIEWED:

HOUSEHOLD DATA

RELIGION OF HEAD:

USE RELIGION CODES PROVIDED AT THE BACK OF THE QUESTIONNAIRE

LANGUAGE USED IN THE HOUSEHOLD:

USE LANGUAGE CODES

INTERPRETER: YES 1 NO 2

REMARKS:

DATA ENTRY OF QUESTIONNAIRE

DATE OF 1ST ROUND OF DATA ENTRY:

YEAR

MONTH

DAY

DATA ENTRY OPERATOR'S NAME:..... CODE:

REMARKS:

DATE OF REVIEW BY SUPERVISOR:

SUPERVISOR'S NAME:..... CODE:

REMARKS:

CORRECTION OF DATA ENTRY

DATE CORRECTIONS MADE:

DATA ENTRY OPERATOR'S NAME:..... CODE:

VERIFICATION BY SUPERVISOR: YES.....1 NO.....2

SIGNATURE:

I D E N T I F I C A T I O N C O D E	2. What is the sex of ..[NAME]..? MALE .. 1 FEMALE 2	3. What is the relationship of ..[NAME].. to the head of household? HEAD 1 HUSBAND/WIFE 2 SON/DAUGHTER 3 GRANDCHILD 4 FATHER/MOTHER 5 BROTHER/SISTER 6 NEPHEW/NIECE 7 SON/DAUGHTER-IN-LAW 8 BROTHER/SISTER-IN-LAW 9 FATHER/MOTHER-IN-LAW 10 OTHER FAMILY RELATIVE 11 SERVANT/SERVANT'S RELATIVE 12 TENANT/TENANT'S RELATIVE 13 OTHER PERSON NOT RELATED 14	4. Where was ..[NAME].. born? Was it then an urban or rural area? URBAN 1 RURAL 2	5. How old is ..[NAME]..? IF <10 YEARS THEN IF LESS THAN ONE YEAR, WRITE ZERO	6. What is the present marital status of ..[NAME]..? MARRIED . 1 DIVORCED 2(➔9) SEPARATED 3(➔9) WIDOW/ WIDOWER 4(➔9) NEVER MARRIED 5(➔9)	7. Is the spouse of ..[NAME].. in the list (Q. 1)? YES .. 1 NO 2(➔9)	8. COPY THE ID CODE OF THE SPOUSE	9. During the past 12 months, how many months did ..[NAME].. live here? WRITE 12 IF ALWAYS PRESENT, OR IF AWAY LESS THAN A MONTH MONTHS	10. ACCORDING TO CRITERIA, IS ..[NAME].. A MEMBER OF THE HOUSEHOLD? YES 1 NO 2
			DISTRICT	U/R					

01										
02										
03										
04										
05										
06										
07										
08										
09										
10										
11										
12										
13										
14										
15										

I D E N T I F I C A T I O N C O D E	1. Is the father of ..[NAME].. in the list? YES..... 1 NO 2(→3) DECEASED 3(→3)	2. COPY THE ID CODE OF THE FATHER <div>→5</div>	3. What is/was the highest level of education that ..[NAME'S].. father completed? EDUCATION CODE	4. Where was ..[NAME'S].. father born? Was it then an urban or rural area? URBAN 1 RURAL 2 DISTRICT U/R	5. Is the natural mother of ..[NAME].. in the list? YES1 NO2(→7) DECEASED3(→7)	6. COPY THE ID CODE OF THE MOTHER <div>→NEXT PERSON</div>	7. What is/was the highest level of education that ..[NAME'S].. mother completed?	8. Where was ..[NAME'S].. mother born? Was it then an urban or rural area? URBAN.....1 RURAL.....2 DISTRICT U/R
--	--	--	--	--	---	---	--	---

01					
02					
03					
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SECTION 1. HOUSEHOLD INFORMATION PART C

ACTIVITIES (ALL HOUSEHOLD MEMBERS 5 YEARS AND OLDER)

A C T I V I T Y C O D E	I D C O D E	1. During the past 12 months, what work did ..[NAME].. do?		DURING PAST 12 MONTHS			DURING PAST 7 DAYS			LOCATION		SECTOR OF EMPLOYMENT				
				2. During the past 12 months, how many months did ..[NAME].. do this work?	3. How many days per month did ..[NAME].. do this work?	4. How many hours per day did ..[NAME].. do this work?	5. During the past 7 days, how many days did ..[NAME].. do this work? IF DAY IS ZERO →7	6. How many hours did ..[NAME].. do this work?	7. Did ..[NAME].. do this work in this VDC/NP? YES ... 1(→9) NO . 2	8. Where did ..[NAME].. do this work? Was it an urban or rural area? URBAN ....1 RURAL ....2	9.					
											INTERVIEWER: PUT A LEAVE "1" IN THE RELEVANT COLUMN. THE OTHER COLUMNS BLANK.					
		WORK ACTIVITY	NSC O C O D E	MONTHS	DAYS/MONTH	HRS/DAY	DAYS A	HRS / DAY B	TOTAL HRS A*B	DISTRICT	U/R	WAGE EMPLOYMENT		SELF EMPLOYMENT		EXTENDED ECONOMIC WORK
										IN	NOT IN	IN	NOT IN			
										AGRI CULTURE	AGRI CULTURE	AGRI CULTURE	AGRI CULTURE			
A																
B																
C																
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SECTION 1. HOUSEHOLD INFORMATION PART C

ACTIVITIES (ALL HOUSEHOLD MEMBERS 5 YEARS AND OLDER)
CONTD.

A C T I V I T Y C O D E	I D E N T I F I C A T O R Y C O D E	1. During the past 12 months, what work did ..[NAME].. do?		DURING PAST 12 MONTHS			DURING PAST 7 DAYS			LOCATION		SECTOR OF EMPLOYMENT				
				2. During the past 12 months, how many months did ..[NAME].. do this work?	3. How many days per month did ..[NAME].. do this work?	4. How many hours per day did ..[NAME].. do this work?	5. During the past 7 days, how many days did ..[NAME].. do this work? IF DAY IS ZERO →7	6. How many hours did ..[NAME].. do this work?	7. Did ..[NAME].. do this work in this VDC/NP? YES ... 1(→9) NO . 2	8. Where did ..[NAME].. do this work? Was it an urban or rural area? URBAN ....1 RURAL ....2	9. INTERVIEWER: PUT A LEAVE		"1" IN THE RELEVANT COLUMN. THE OTHER COLUMNS BLANK.			
		WORK ACTIVITY		NSC OCO DE	MONTHS	DAYS/MON TH	HRS/DAY	DAYS A	HRS / DAY B	TOTAL HRS A*B	DISTRICT	U/R	WAGE EMPLOYMENT		SELF EMPLOYMENT		EXTENDED
												IN	NOT IN	IN	NOT IN	ECONOMIC WORK
												AGRI CULTURE	AGRI CULTURE	AGRI CULTURE	AGRI CULTURE	

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U																
V																
W																
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Y																
Z																
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5																
6																
7																
8																
9																
0																

UNEMPLOYMENT (NOT WORKING)			UNDEREMPLOYMENT (WORKING <40 HOURS/WEEK)			
I D E N T I F I C A T I O N C O D E	1. Was ..[NAME].. available for work during the past 7 days? YES.....1 NO2(→3)	2. Did ..[NAME].. look for work during the past 7 days? YES... 1(→NEXT PERSON) NO.... 2	3. Why was ..[NAME].. not available /did ..[NAME].. not look for work during the past 7 days? STUDENT..... 1 HOUSEWIFE..... 2 TOO OLD/RETIRED..... 3 SICK..... 4 HANDICAPPED..... 5 ON VACATION..... 6 AWAITING REPLY FROM EMPLOYER OR AGENCY.. 7 WAITING TO START NEW JOB 8 THERE IS NO WORK..... 9 DON'T KNOW HOW TO LOOK10 PREGNANT/DELIVERY... 11 OTHER REASONS..... 12	4. Was ..[NAME].. available for additional work during the past 7 days? YES 1 NO 2(→6)	5. Did ..[NAME].. look for work during the past 7 days? YES. 1(→NEXT PERSON) NO.. 2	6. Why was ..[NAME].. not available/ did ..[NAME].. not look for work during the past 7 days? THERE IS NO ADDITIONAL WORK1 LACK OF FINANCE, RAW MATERIALS2 MACHINERY, ELECTRICAL, ETC. BREAKDOWN3 OFF SEASON INACTIVITY4 INDUSTRIAL STRIKE, LAID-OFF5 ALREADY HAVE ENOUGH WORK .6 STUDENT, UNPAID TRAINEE ..7 HOUSEHOLD DUTIES8 SICK9 HANDICAPPED10 ON VACATION11 PREGNANT/DELIVERY12 OTHER REASONS13

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SECTION 2. HOUSING PART A

TYPE OF DWELLING

1. Is this dwelling unit occupied by your household only?

YES 1
 NO 2

2. How many rooms does your household occupy?

TOTAL	
KITCHEN	
TOILET/BATHROOM	
BEDROOMS	
LIVING/DINING ROOMS	
BUSINESS	
MIXED USE	
OTHER	

3. IS THERE A KITCHEN GARDEN?

YES 1
 NO 2

4. MAIN CONSTRUCTION MATERIAL OF OUTSIDE WALLS:

CEMENT BONDED BRICKS/STONES 1
 MUD BONDED BRICKS/STONES 2
 WOOD/BANCHES 3
 CONCRETE 4
 UNBAKED BRICKS 5
 OTHER MATERIAL 6
 NO OUTSIDE WALLS 7

5. MAIN FLOORING MATERIAL:

EARTH.....1
 WOOD.....2
 STONE/BRICK.....3
 CEMENT/TILE.....4
 OTHER.....5

6. MAIN MATERIAL ROOF IS MADE OF:

STRAW/THATCH.....1
 EARTH/MUD.....2
 WOOD/PLANKS.....3
 GALVANIZED IRON.....4
 CONCRETE/CEMENT.....5
 TILES/SLATE6
 OTHER.....7

7. HOW ARE THE WINDOWS?

NO WINDOWS/NO COVERING...1
 SHUTTERS.....2
 SCREENS/GLASS.....3
 OTHER.....4

8. HOW BIG IS THE HOUSING PLOT?
P/D

CODE R/B A/K

ROPANI.....1
 BIGHA.....2

9. HOW BIG IS THE INSIDE OF THE DWELLING?

SQ. FT.

10. Which year was the house that you are living built?

BEFORE 1996.....1
 AFTER 1995.....2

SECTION 2. HOUSING PART B

HOUSING EXPENSES

1. Is this dwelling yours?

YES 1

NO 2 (→6)

2. If you wanted to buy a dwelling just like this today, how much money would you have to pay?

INCLUDE VALUE OF HOUSING PLOT

RUPEES

3. If someone wanted to rent this dwelling today, how much money would they have to pay each month?

RUPEES

4. Did you rent out part of this dwelling unit?

YES 1

NO 2 (→PART C)

5. How much do you receive as rent per month?

RUPEES

→PART C

6. What is your present occupancy status?

RENTER 1(→8)

PROVIDED FREE OF CHARGE

BY RELATIVES OR LANDLORD

OR EMPLOYER 2

SQUATTING 3

OTHER 4

7. If someone wanted to rent this dwelling (only the unit occupied by the household) today, how much money would they have to pay each month?

RUPEES

→ PART C

8. What is the rent per month? (cash plus value of in-kind payments)

RUPEES

SECTION 2. HOUSING PART C

UTILITIES AND AMENITIES

1. What is the source of your drinking water?

PIPED WATER SUPPLY .. 1
COVERED WELL/HAND PUMP 2(→3)
OPEN WELL 3(→3)
OTHER WATER SOURCE .. 4(→3)

2. Do you have water piped into your house?

YES 1
NO 2

3. How much did you pay for water over the last 12 months?
(EXCLUDE WATER USED FOR IRRIGATION)

IF NOTHING, WRITE ZERO

RUPEES

4. What kind of sewerage facility does your household have?

UNDERGROUND DRAINS 1
OPEN DRAINS 2
SOAK PIT 3
NO 4

5. How does your household dispose of its garbage?

COLLECTED BY GARBAGE TRUCK 1
PRIVATE COLLECTOR 2
DUMPED 3(→7)
BURNED/BURIED 4(→7)
DUMPED AND USED FOR FERTILIZER 5(→7)
OTHER 6

6. How much did you pay for garbage disposal over the last 12 months?

IF NOTHING, WRITE ZERO

RUPEES

7. What type of toilet is used by your household?

HOUSEHOLD FLUSH (CONNECTED
TO MUNICIPAL SEWER) 1
HOUSEHOLD FLUSH (CONNECTED
TO SEPTIC TANK) 2
HOUSEHOLD NON-FLUSH 3
COMMUNAL LATRINE 4
NO TOILET 5

SECTION 2. HOUSING PART C

UTILITIES AND AMENITIES (CONTD.)

8. What is the main source of lighting for your dwelling?

ELECTRICITY 1
 GAS/OIL/KEROSENE ... 2(→11)
 OTHER 3(→11)

9. Do you have a joint or individual electric meter?

JOINT 1
 INDIVIDUAL 2
 NO METER 3

10. How much did you spend on electricity over the past 12 months?

IF NOTHING, WRITE ZERO

RUPEES

11. Which of the following facilities are there in your dwelling unit?

Telephone

Mobile Phone

Pager

YES.....1

Cable T.V.

NO.....2

Email

Internet

IF ALL ANSWERS ARE "NO" →13

12. How much did you pay for using those facilities listed in Q. 11 over the past 12 months?

RUPEES

13. What kind of fuel is most often used by your household for cooking?

WOOD/FIREWOOD 1
 DUNG 2
 LEAVES/RUBBISH/STRAW/THATCH 3
 CYLINDER GAS 4
 KEROSENE 5
 BIO-GAS 6
 OTHER 7

14. What type of stove does your household mainly use for cooking?

OPEN FIREPLACE 1
 MUD STOVE 2
 SMOKELESS STOVE 3
 KEROSENE/GAS STOVE . 4
 OTHER 5

SECTION 2. HOUSING PART D

FIREWOOD

1. Did your household use any firewood over the past 12 months?

YES... 1

NO.... 2(→7)

2. Did your household collect any firewood in the past 12 months?

YES... 1

NO.... 2(→7)

3. On average, how many bharis/carts of firewood did you collect each month?

BHARI.. 1

CART.. 2

UNIT

NO.

4. How long does it take to collect one bhari/cart of firewood?

TIME TAKEN ROUND TRIP

HRS

MIN

5. Where did you collect the firewood?

OWN LAND..... 1(→7)

COMMUNITY MANAGED FOREST... 2

GOVERNMENT FOREST..... 3

OTHER..... 4

6. How much did you pay for each bhari/cart?

IF NOTHING WRITE ZERO

RUPEES

7. Did you collect fodder for your livestock over the past 12 months?

YES... 1

NO.... 2 (→NEXT SECTION)

8. Where did you collect the fodder?

OWN LAND..... 1

COMMUNITY MANAGED FOREST... 2

GOVERNMENT FOREST..... 3

OTHER..... 4

SECTION 3.

ACCESS TO FACILITIES

1. How long does it take to get from your house to the closest ..[FACILITY]..?	2. MODE OF TRANSPORT: FOOT (WITHOUT LOAD) ...1 BICYCLE/RICKSHAW .....2 MOTORCYCLE/TAMPOO .....3 CAR/BUS .....4 MIXED (FOOT+VEHICLE) ..5 PRESENT NEXT TO HH ....6(➔NEXT FACILITY) NOT APPLICABLE .....7(➔NEXT FACILITY)	3. TIME TAKEN: (ONE WAY)		
CODE		DAYS	HOURS	MINUTES

Primary School	101				
Health Post/Hospital	102				
Bus Stop	103				
Paved Road	104				
Dirt Road, vehicle passable	105				
Dirt Road, vehicle impassable	106				
Local Shop/Shops	107				
Haat Bazaar	108				
Market Center	109				
Agriculture Center	110				
Sajha/Cooperatives	111				
Bank	112				
Source of Drinking Water	113				
Post Office	114				
Telephone Booth	115				

SECTION 4.

MIGRATION (ALL HOUSEHOLD MEMBERS 5 YEARS AND OLDER)

I D E N T I F I C A T I O N C O D E	1.	2.		3.	4.	5.		6.	7.	8.		9.	
	Did ..[NAME]].. migrate to this place? YES.... 1 NO..... 2 (→NEXT PERSON)	From where did ..[NAME].. migrate to this place? Was it then an urban or rural area? URBAN 1 RURAL 2		How old was ..[NAME]].. when migrate d to this place? IF LESS THAN 5 YEARS →NEXT PERSON	Did ..[NAME]].. do any work activiti es there before migratin g? YES... 1 NO 2 (→6)	What was the primary activity did ..[NAME].. do there before migrating?			What was the main reason for ..[NAME].. to migrate here? FAMILY REASON (MARRIAGE,ETC.)..... ..1 (→NEXT PERSON) EDUCATION/TRAINING... ..2 POLITICAL REASONS.....3 NATURAL DISASTER.....4 LOOKING FOR WORK.....5 EASIER LIFESTYLE.....6 OTHER..... ..7	Who was the familiar person of ..[NAME].. here before migrating? FAMILY MEMBERS/ RELATIVES..... ..1 PEOPLE FROM SAME PLACE/FRIENDS.. ..2 NO ONE.....3	What was the primary activity did ..[NAME].. do here after migrating? FOR NOT WORKING OR STUDENT OR HOUSEHOLD WORK, WRITE THEIR CODES AND →NEXT PERSON			How long did it take ..[NAME].. to find this job? IF LESS THAN ONE MONTH, WRITE ZERO
		DISTRIC T	U/R	AGE		WORK ACTIVITY	NSCO CODE			WORK ACTIVITY	NSCO CODE	MONTHS	
01													
02													
03													
04													
05													
06													
07													
08													
09													
10													
11													
12													
13													
14													
15													

FOOD EXPENSES AND HOME PRODUCTION

1.

Have you consumed ..[FOOD].. during the past 12 months?

PUT A CHECK (✓) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. IF THE ANSWER TO Q. 1 IS YES, ASK Q. 2-8.

NO	YES	CODE
----	-----	------

HOME PRODUCTION		
2.	3.	4.
How many months in the past 12 months did you consume ..[FOOD].. that you grew or produced yourself?	In a typical month during which you ate ..[FOOD].., how much did your household consume ..[FOOD]..?	How much would your household have to spend in the market to buy this quantity of ..[FOOD].. (i.e. the amount consumed in a typical month)?
IF NONE, WRITE ZERO AND ➔5		
MONTHS	QUANTITY	UNIT
		RUPEES

FOOD PURCHASES		
5.	6.	7.
How many months in the past 12 months did you purchase ..[FOOD].. ?	In a typical month during which you purchased ..[FOOD].. how much did you purchase?	How much would you normally have to spend in total to buy this quantity?
IF NONE WRITE ZERO AND ➔8		
MONTHS	QUANTITY	RUPEES
	UNIT	

IN-KIND
<p>8.</p> <p>What is the total value of ..[FOOD].. consumed that you received in-kind over the past 12 months (wages for work, etc.)?</p> <p>IF NONE WRITE ZERO</p> <p>RUPEES</p>

1. GRAINS AND CEREALS			010
Fine rice			011
Coarse rice			012
Beaten, flattened rice			013
Maize			014
Maize flour			015
Wheat flour			016
Millet			017
Other grains/cereals (Buckwheat, Barley, Sorghum, etc.)			018
2. PULSES AND LEGUMES			020
Black gram (<i>Mas</i>)			021
Lentil (<i>Musuro</i>)			022
Red gram (<i>Rahar</i>)			023
Horse gram (<i>Chana</i>)			024
Other pulses (Green gram, <i>Masyang</i> , Coarse gram, Grass pea, etc.)			025
Other beans (Soybean, Pea, Bean, etc.)			026

[illegible][illegible][illegible]

1.				HOME PRODUCTION				FOOD PURCHASES				IN-KIND					
Have you consumed ..[FOOD].. during the past 12 months? PUT A CHECK (✓) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. IF THE ANSWER TO Q. 1 IS YES, ASK Q. 2-8.				2. How many months in the past 12 months did you consume ..[FOOD].. that you grew or produced yourself? IF NONE WRITE ZERO AND →5		3. In a typical month during which you ate ..[FOOD].., how much did your household consume ..[FOOD]..?		4. How much would your household have to spend in the market to buy this quantity of ..[FOOD].. (i.e. the amount consumed in a typical month)?		5. How many months in the past 12 months did you purchase ..[FOOD]..? IF NONE WRITE ZERO AND →8		6. In a typical month during which you purchased ..[FOOD].. how much did you purchase?		7. How much would you normally have to spend in total to buy this quantity?		8. What is the total value of the ..[FOOD].. consumed that you received in-kind over the past 12 months (wages for work, etc.)? IF NONE WRITE ZERO	
				MONTHS		QUANTITY		UNIT		MONTHS		QUANTITY		UNIT		RUPEES	
3. EGGS AND MILK PRODUCTS																	
Eggs																	
Milk																	
Condensed milk																	
Baby milk/Powder milk																	
Curd/Whey																	
Other milk products (Cheese, Paneer, etc.)																	
4. COOKING OILS																	
Ghee																	
Vegetable oil																	
Mustard oil																	
Other oil (Soybean, Sunflower, Corn, etc.)																	
5. VEGETABLES																	
Potatoes/Colocasia																	
Onions																	
Cauliflower/Cabbage																	
Tomatoes																	
Green leafy vegetables																	
Other vegetables (Brinjal, Pointed gourd, Bitter gourd, etc.)																	

16

17

1.

Have you consumed ..[FOOD]..
during the past 12 months?

PUT A CHECK (✓) IN THE APPROPRIATE BOX
FOR EACH FOOD ITEM. IF THE ANSWER TO Q.
1 IS YES, ASK
Q. 2-8.

NO	YES	CODE
----	-----	------

HOME PRODUCTION		
2.	3.	4.
How many months in the past 12 months did you consume ..[FOOD]. . that you grew or produced yourself?	In a typical month during which you ate ..[FOOD].., how much did your household consume ..[FOOD]..?	How much would your household have to spend in the market to buy this quantity of ..[FOOD]. . (i.e. the amount consumed in a typical month)?
IF NONE WRITE ZERO AND →5		
MONTHS	QUANTITY	UNIT
		RUPEES

FOOD PURCHASES			
2.	6.	7.	
How many months in the past 12 months did you purchase ..[FOOD].. ?	In a typical month during which you purchased ..[FOOD]. how much did you purchase?	How much would you normally have to spend in total to buy this quantity?	
IF NONE WRITE ZERO AND ➔8			
MONTHS	QUANTITY	UNIT	RUPEES

IN-KIND
8.
What is the total value of the ..[FOOD].. consumed that you received in-kind over the past 12 months (wages for work, etc.)?
IF NONE WRITE ZERO
RUPEES

11. ALCOHOLIC BEVERAGES			110
Wine			111
Gin, Whiskey, Rum			112
Beer/Jandh			113
Other alcoholic drinks (Tadi, etc.)			114
12. TOBACCO & TOBACCO PRODUCTS			120
Cigarettes			121
Bindis			122
Tobacco			123
Other (Jarda, Khaini, Betel nut, Tamakhu, etc.)			124
13. MISC. FOOD PRODUCTS			130
Meals/Snacks taken outside home			131
Bread/Biscuits/Noodles			132
Misc. other food expenditures			133

[illegible][illegible]

Total (1+2+3+4+5+6+7+8+9+10+11+12+13)	140
ASK RESPONDENT TO ESTIMATE AVERAGE MONTHLY EXPENDITURE ON FOOD, VALUE OF HOME PRODUCED FOOD, AND FOOD RECEIVED IN KIND	150

A diagram showing a large rectangle divided into four equal quadrants by a horizontal and a vertical line. The bottom-right quadrant is further divided into four smaller equal squares by another horizontal and vertical line, creating a 2x2 grid within that quadrant.

1. Were any of the following items purchased or received in-kind over the past 12 months? PUT A CHECK (✓) IN THE APPROPRIATE BOX FOR ALL ITEMS. IF THE ANSWER IS YES, ASK Q 2.				2. What is the money value of the amount purchased or received in-kind by your household during the past 12 months:	
				AMOUNT IN RUPEES 12 MONTHS	
	NO	YES	CODE		
31. INFREQUENT EXPENSES			310		
Legal expenses and insurance (life, car, etc.)			311		
Income taxes, land taxes, housing and property taxes			312		
Repair and other expenses for personal vehicle (registration, fines)			313		
Postal expenses, telegrams, fax, telephone			314		
Excursion, holiday, (including travel and lodging)			315		
Toys, sports goods			316		
Repair and maintenance of the house			317		
Repair and servicing of household effects			318		
Home improvements and additions			319		
32. MISCELLANEOUS EXPENSES			320		
Marriages, births, and other ceremonies			321		
Dowry & bride price given			322		
Dowry & bride price received			323		
Funeral and death related expenses			324		
Expenditure on religious ceremonies			325		
Charity			326		
Cash losses			327		

Gifts and donations			328	
1. Were any of the following items purchased or received in-kind over the past 12 months? PUT A CHECK (✓) IN THE APPROPRIATE BOX FOR ALL ITEMS. IF THE ANSWER IS YES, ASK Q 2.				2. What is the money value of the amount purchased or received in-kind by your household during the past:
				AMOUNT IN RUPEES 12 MONTHS
	NO	YES	CODE	
41. DURABLE GOODS			410	
Crockery, cutlery and kitchen utensils (household use)			411	
Kitchen appliances (refrigerator, cooking range, blenders, etc.)			412	
Pillows, mattresses, blankets, etc.			413	
Jewelry, watches			414	
Furniture and fixtures			415	
Electric fans			416	
Heaters (electric, gas, kerosene)			417	
Sewing machine			418	
Iron (electric or other)			419	
Television/VCR			421	
Washing machine			422	
Radio, tape, etc.			423	
Camera			424	
Bicycle			425	
Motorcycle/Scooter			426	
Motor car or other such vehicle			427	
Other durable goods (bullock/he buffalo carts, etc.)			428	

1.

Does your household own any of the following items?

PUT A CHECK (✓) IN THE APPROPRIATE BOX FOR ALL ITEMS. IF THE ANSWER IS YES, ASK Q. 2-6

ITEM	NO	YES	CODE
Radio/Tape/CD player			501
Camera (still/movie)			502
Bicycle			503
Motorcycle/scooter			504
Motor car, etc.			505
Refrigerator or freezer			506
Washing machine			507
Fans			508
Heaters			509
Television/Deck			510
Pressure lamps/Petromax			511
Telephone sets/Cordless phone/Mobile phone/Pager			512
Sewing machine			513
Furniture, clocks, etc.			514
Kitchen utensils			515
Jewelry, watches			516
Computer/Printer			517

[illegible]

1.

Were any of the following items produced and consumed by your household over the past 12 months?

[PUT A CHECK (✓) IN THE APPROPRIATE BOX FOR ALL ITEMS. IF THE ANSWER IS YES, ASK Q. 2 AND 3.]

SELF PRODUCED AND CONSUMED ITEMS	NO	YES	CODE
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EXPENDITURES ON SELF PRODUCED AND CONSUMED ITEMS:			600
Dalo, Nanglo, Doko, Namlo, Rope, Mudha, etc.			601
Mandro, Mat, Sukul, Bhakari, Ghum, Chitro, Broom, etc.			602
Radi, Pakhi, Homespun clothes, etc.			603
Firewood/Dung collection			604
Furniture and allied wooden materials			605
Sickle, Chulesi, Knife, etc.			606
Tailoring			607
Shoe making/repairing			608
Water fetching			609
Minor house repairing			610
Biogas			611
Pickle, Gundruk, Masyaura, Titaura, Jam, Mada, etc.			612
Other (Communal construction, Duna, Tapari, Batti, etc.)			613

2.	
What is the monetary value in the local market of the items produced and consumed yourself during the past:	
AMOUNT IN RUPEES	
2.	3.
30 DAYS	12 MONTHS

[illegible]

SECTION 7. EDUCATION PART A LITERACY (ALL PERSONS 5 YEARS AND OLDER)

I D E N T I F I C A T I O N C O D E	<p>1. ID CODE OF RESPONDENT</p> <p style="text-align: center;">WRITE ID CODE FROM HOUSEHOLD ROSTER OF PERSON PROVIDING THIS INFORMATION</p> <p>ID CODE</p>	<p>2. Can ..[NAME].. read a letter?</p> <p>YES 1</p> <p>NO 2(→5)</p>	<p>3. Can ..[NAME].. write a letter?</p> <p>YES..... 1</p> <p>NO 2(→5)</p>	<p>4. Where did ..[NAME].. learn to read and write?</p> <p>FORMAL SCHOOLING .. 1</p> <p>TAUGHT AT HOME 2</p> <p>GOVT. LITERACY COURSE 3</p> <p>NGO LITERACY COURSE4</p> <p>OTHER 5</p>	<p>5. INTERVIEWER:</p> <p>ASK EACH PERSON ABOUT THEIR EDUCATIONAL BACKGROUND, AND CODE THEIR EDUCATIONAL BACKGROUND AS FOLLOWS:</p> <p>NEVER ATTENDED SCHOOL 1</p> <p>ATTENDED SCHOOL/COLLEGE IN THE PAST 2(→PART B)</p> <p>CURRENTLY ATTENDING SCHOOL/COLLEGE 3(→PART C)</p>	<p>6. Why didn't ..[NAME].. ever attend school?</p> <p>SCHOOL NOT PRESENT 1</p> <p>TOO EXPENSIVE 2</p> <p>TOO FAR AWAY 3</p> <p>HAD TO HELP AT HOME 4</p> <p>EDUCATION NOT USEFUL 5</p> <p>PARENTS DID NOT WANT 6</p> <p>NOT WILLING TO ATTEND 7</p> <p>HANDICAPPED 8</p> <p>OTHER REASONS 9</p> <div style="border: 1px solid black; padding: 5px; text-align: center; margin-top: 10px;">→NEXT</div>
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SECTION 7. EDUCATION PART B

PAST ENROLLMENT (ALL PERSONS 5 YEARS AND OLDER)

INTERVIEWER: ASK ONLY OF THOSE PERSONS WHO HAVE ATTENDED SCHOOL/COLLEGE IN THE PAST

I D E N T I F I C A T I O N C O D E	1. What type of school/college did ..[NAME].. last attend?	2. What was the highest class that ..[NAME].. completed?	3. How many years did it take ..[NAME].. to complete primary school?	4. How many years did it take ..[NAME].. to pass the SLC examination?	5. Why did ..[NAME].. leave school/college?
	COMMUNITY/GOVERNMENT.. 1 INSTITUTIONAL/PRIVATE.. 2 TECHNICAL/VOCATIONAL.. 3 OTHER..... 4		WRITE "99" IF PRIMARY LEVEL IS COMPLETED WITHOUT ATTENDING SCHOOL IF PRIMARY SCHOOL NOT COMPLETED WRITE NUMBER OF YEARS SCHOOL ATTENDED AND →5	WRITE "99" IF PRIMARY LEVEL IS COMPLETED WITHOUT ATTENDING SCHOOL IF SLC LEVEL NOT COMPLETED WRITE NUMBER OF YEARS SCHOOL ATTENDED	FURTHER SCHOOLING NOT AVAILABLE 1 TOO EXPENSIVE 2 TOO FAR AWAY 3 HAD TO HELP AT HOME 4 PARENTS DID NOT WANT 5 COMPLETED DESIRED SCHOOLING 6 MOVED AWAY 7 POOR ACADEMIC PROGRESS 8 ENVIRONMENT OF SCHOOL NOT GOOD 9 OTHER REASONS 10
	EDUCATION CODE				

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SECTION 7. EDUCATION PART C

CURRENT ENROLLMENT (ALL PERSONS 5 YEARS AND OLDER)

INTERVIEWER: ASK ONLY OF THOSE PERSONS CURRENTLY ATTENDING SCHOOL/COLLEGE

I D E N T I F I C A T I O N C O D E	1.	2.	3.	4.	5.	6.		7.	8.	9.
	What type of school/college is ..[NAME].. currently attending?	What class is ..[NAME].. currently attending?	How many years did it take ..[NAME].. to complete primary school?	How many years did it take ..[NAME].. to pass the SLC examination?	How do ..[NAME].. go to school/college?	How much time do you spend commuting every day?		How much has your household spent during the past 12 months for ..[NAME's].. schooling?	Did ..[NAME].. receive a scholarship to help pay for your educational expenses?	How much did ..[NAME].. receive for scholarship over the past 12 months?
	COMMUNITY/GOVERNMENT 1 INSTITUTIONAL/PRIVATE 2 TECHNICAL/VOCATIONAL3 OTHER..... 4		IF PRIMARY SCHOOL NOT COMPLETED WRITE NUMBER OF YEARS SCHOOL ATTENDED AND →5	IF SLC LEVEL NOT COMPLETED WRITE NUMBER OF YEARS SCHOOL ATTENDED	WALK..... 1 BUS..... 2 BICYCLE/RICKSHAW. 3 MIXED (FOOT+VEHICLE)... 4 OTHER..... 5	HRS	MIN	RUPEES	YES..... 1 NO..... 2 (→NEXT PERSON)	RUPEES
		EDUCATION CODE								

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SECTION 8. HEALTH PART A

CHRONIC ILLNESSES (ALL HOUSEHOLD MEMBERS)

I D E N T I F I C A T I O N C O D E	1.	2.	3.	4.	5.	6.	7.
	ID CODE OF RESPONDENT WRITE ID CODE FROM HOUSEHOLD ROSTER OF PERSON PROVIDING INFORMATION	Does ..[NAME].. suffer from a chronic illness? YES ..1 NO ...2(→7)	What chronic illness does ..[NAME].. primarily suffer from? HEART CONDITIONS1 RESPIRATORY2 ASTHMA3 EPILEPSY4 CANCER5 DIABETES6 MALFUNCTION OF KIDNEY 7 CIRRHOSIS OF LIVER ...8 OCCUPATIONAL ILLNESSES9 HIGH/LOW BLOOD PRESSURE1 DRUG ABUSE11 OTHER12	How many years ago did the illness start?	How much has ..[NAME].. spent in the past 12 months on the treatment of this illness? INCLUDE COST OF CONSULTATIONS, DIAGNOSIS, MEDICINES AND TRAVEL	How many days did ..[NAME].. have to stop doing his/her usual activity due to this illness during the past 12 months?	What is the present health status of ..[NAME]..? EXCELLENT.....1 GOOD.....2 FAIR.....3 POOR.....4
	ID CODE			YEARS	RUPEES	DAYS	

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SECTION 8. HEALTH PART B

ILLNESSES OR INJURIES (ALL HOUSEHOLD MEMBERS)

I D E N T I F I C A T I O N C O D E	1. When was the last time that ..[NAME].. was ill? IF RESPONDENT NOT ILL DURING THE LAST 30 DAYS, WRITE THE DATE OR IF CANNOT REMEMBER THE DATE, WRITE "99" IN YEAR COLUMN; AND →13 FOR THOSE WHO ARE 10 YEARS AND OLDER AND →NEXT PERSON FOR THOSE WHO ARE UNDER 10 YEARS			2. What type of illness or injury? DIARRHOEA.. 1 DYSENTRY... 2 RESPIRATORY PROBLEMS.. 3 MALARIA.... 4 OTHER FEVER 5 SKIN DISEASE6 TB..... 7 MEASLES.... 8 JAUNDICE... 9 PARASITES.. 10 INJURY.... 11 OTHER..... 12	3. Was anyone consulted (e.g. a doctor, nurse or other healer) for the illness or injury in the last month? YES .1 NO .. 2(→7)	4. Where did ..[NAME].. go for the last consultation? GOVT.HEALTH INST. SHP 1 HP 2 PHC 3 HOSPITAL 4 MOBILE CLINIC .. 5 AYURVED CENTRE . 6 PVT. HEALTH INST. PHARMACY/CLINIC 7 PVT. HOSPITAL .. 8 HEALTH WORKER'S HOME 9 OTHER 10	5. Whom did ..[NAME].. consult with? GOVT.HEALTH WORKER DOCTOR 1 PARAMEDIC (HA, SAHW, AHW, ANM) 2 KAVIRAJ/VAIDYA . 3 PVT.HEALTH WORKER DOCTOR 4 PARAMEDIC 5 KAVIRAJ/VAIDYA . 6 TRADITIONAL HEALER 7 OTHER 8	6. How much was spent for the last consultation of this injury and illness for service cost (cost of diagnostic service consisting of laboratory fee and cost of other services consisting of registration fee, consultation fee, surgery fee, etc.) medicine cost and travel cost over the past 30 days?			
	YEAR	MONT H	DAY					RUPEES			
								TOTAL COST	DIAGNOSTIC & OTHER SERVICE COST	MEDICINE COST	TRAVEL COST
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		ALL PERSONS 5 YEARS AND OLDER		FOR CHILDREN UNDER 5 YEARS WITH DIARRHOEA			ALL PERSONS 10 YEARS AND OLDER	
I D E N T I F I C A T I O N C O D E	7.	8.	9.	10.	11.	12.	13.	14.
	How much in total was spent over this illness or injury over the past 30 days?	Did ..[NAME].. have to stop doing his/her usual activities because of this illness or injury?	How many days did ..[NAME].. have to stop doing his/her usual activities? <div>→13</div>	Did you give ..[NAME].. anything to treat the diarrhoea? ASK ONLY FOR CHILDREN UNDER 5 YEARS WITH ANSWER "1" TO Q.2 YES 1 NO 2 (→NEXT PERSON)	What did you give ..[NAME].. to treat the diarrhoea? ORS (PACKET OR HOME-MADE) 1 ALLOPATHIC MEDICINE... 2 (→NEXT PERSON) TRADITIONAL MEDICINE... 3 (→NEXT PERSON) OTHER 4 (→NEXT PERSON)	Where did you obtain the ORS? SHP 1 HP 2 PHC 3 HOSPITAL 4 MOBILE CLINIC 5 MADE AT HOME 6 NON-GOVT.INST.7 OTHER. 8	Have you heard about HIV/AIDS? YES 1 NO 2 (→NEXTPERSON)	How did you first hear about HIV/AIDS? RADIO 1 TELEVISION 2 NEWSPAPERS/ PAMPHLETS/POSTERS 3 FRIENDS/RELATIVES 4 HEALTH WORKERS .. 5 OTHER 6
	RUPEES		DAYS					

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I D E N T I F I C A T I O N C O D E	1.	2.	3.								4.	5.
	Has...[NAME]... ever been immunized? YES1 NO2 (→NEXT CHILD) DO NOT KNOW .3 (→NEXT CHILD)	Do you have an immunization card for ...[NAME]...? ASK TO SEE CARDS FOR ALL CHILDREN FOR WHOM CARDS ARE AVAILABLE YES .. 1 NO 2(→4)	INTERVIEWER: CHECK FROM CARD WHETHER IMMUNIZATION HAS TAKEN PLACE YES 1 NO 2								How many doses of vaccine has ...[NAME]... received?	Where was the most recent immunization given to ...[NAME]...? SHP 1 HP 2 PHC 2 HOSPITAL 4 OUTREACH CLINIC.. 5 OTHER HEALTH INST.6
			BCG	DPT 1	DPT 2	DPT 3	POLIO 1	POLIO 2	POLIO 3	MEASLES	NUMBER	
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NAME OF WOMAN _____

WRITE WOMAN'S ID CODE FROM ROSTER

WRITE ID CODE OF RESPONDENT

1

B I R T H O R D E R	1. When was [ORDER] child born? IF NOT KNOWN, ESTIMATE USING SUPPLEMENTARY CALENDAR	2. What is the [ORDER] child's name?	3. What is the sex of [NAME]? MALE ... 1 FEMALE . 2	4. Is [NAME] still alive? YES .. 1 NO ... 2(→7)	5. Does [NAME] currently live with you? YES 1 NO 2(→8)	6. COPY ID CODE OF [NAME] FROM HOUSEHOLD ROSTER <div>→NEXT CHILD</div>	7. How long did [NAME] live?	8. What was the highest level of schooling that [NAME] completed? IF CHILD HAS NEVER GONE TO SCHOOL WRITE "99"
	MONTH YEAR					ID CODE	YEARS MONTHS DAYS	EDUCATION CODE

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SECTION 9. MARRIAGE AND MATERNITY HISTORY
PART A

MATERNITY HISTORY (ALL EVER MARRIED WOMEN AGED 15-49 YEARS WHO HAVE GIVEN LIVE BIRTH) CONTD.

NAME OF WOMAN _____

WRITE WOMAN'S ID CODE FROM ROSTER

WRITE ID CODE OF RESPONDENT

2

B I R T H O R D E R	1. When was [ORDER] child born? IF NOT KNOWN, ESTIMATE USING SUPPLEMENTARY CALENDAR	2. What is the [ORDER] child's name?	3. What is the sex of [NAME]? MALE ... 1 FEMALE . 2	4. Is [NAME] still alive? YES .. 1 NO ... 2(➔7)	5. Does [NAME] currently live with you? YES 1 NO 2(➔8)	6. COPY ID CODE OF [NAME] FROM HOUSEHOLD ROSTER <div>➔NEXT CHILD</div> ID CODE	7. How long did [NAME] live? YEARS MONTHS DAYS	8. What was the highest level of schooling that [NAME] completed? IF CHILD HAS NEVER GONE TO SCHOOL WRITE "99" EDUCATION CODE
	MONTH	YEAR						

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NAME OF WOMAN _____

WRITE WOMAN'S ID CODE FROM ROSTER

WRITE ID CODE OF RESPONDENT

3

B I R T H O R D E R	1. When was [ORDER] child born? IF NOT KNOWN, ESTIMATE USING SUPPLEMENTARY CALENDAR	2. What is the [ORDER] child's name?	3. What is the sex of [NAME]? MALE ... 1 FEMALE . 2	4. Is [NAME] still alive? YES .. 1 NO ... 2(➔7)	5. Does [NAME] currently live with you? YES 1 NO 2(➔8)	6. COPY ID CODE OF [NAME] FROM HOUSEHOLD ROSTER <div>➔ NEXT CHILD</div> ID CODE	7. How long did [NAME] live? YEARS MONTHS DAYS	8. What was the highest level of schooling that [NAME] completed? IF CHILD HAS NEVER GONE TO SCHOOL WRITE "99" EDUCATION CODE
	MONTH	YEAR						

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SECTION 9. MARRIAGE AND MATERNITY HISTORY PART B

PRE- AND POST-NATAL CARE (ALL WOMEN WHO HAVE GIVEN LIVE BIRTH DURING PAST 36 MONTHS)

LAST PRE-NATAL CARE						
	1.	2.	3.	4.	5.	6.
I D E N T I F I C A T I O N C O D E	While you were pregnant with your last child, did you go for prenatal consultations to a health care facility?	Where did you first receive this care? GOVT.HEALTH INST. SHP .....1 HP .....2 PHC .....3 HOSPITAL .....4 MOBILE CLINIC 5 AYURVED CENTRE6 PVT. HEALTH INST. PHARMACY/CLINIC .....7 PVT. HOSPITAL 8 HEALTH WORKER'S HOME 9 OTHER .....10	Who provided this care? DOCTOR ...1 NURSE/ANM HA/SAHW/AH W .....2 MCHW/VHW .3 TBA .....4 OTHER ....5	At what month of pregnancy did you go for your first visit?	During this pregnancy, were you given an injection in the arm to prevent the baby from getting tetanus that is convulsion s after birth? YES..1 NO ...2(→7)	How many times did you receive this injection ? ONCE....1 TWICE...2 MORE THAN TWICE ..3
	YES 1 NO . 2(→7)					
				MONTHS		

LAST POST-NATAL CARE				
7.	8.	9.	10.	11.
Where did you give birth? HOME..... 1 SHP..... 2 HP..... 3 PHC..... 4 HOSPITAL... 5 PVT. HOSPITAL... 6 OTHER..... 7	Who assisted you with this birth? FAMILY MEMBER OR RELATIVE1 NEIGHBOURS 2 TBA..... 3 MCHW/VHW.. 4 HA/SAHW/AHW5 ANM/NURSE/ DOCTOR.... 6 OTHER..... 7 NO ONE.... 8	After the birth, did you visit a health care facility within six weeks of delivery for a post-natal checkup? YES1 NO2 (→NEXT WOMAN)	Where did you go for this visit? GOVT.HEALTH INST. SHP 1 HP 2 PHC 3 HOSPITAL 4 MOBILE CLINIC 5 AYURVED CENTRE6 PVT. HEALTH INST. PHARMACY/CLINIC 7 PVT. HOSPITAL 8 HEALTH WORKER'S HOME 9 OTHER 10	Who provided this care? DOCTOR ...1 NURSE/ANM HA/SAHW/AH W2 MCHW/VHW .3 TBA4 OTHER5

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SECTION 9. MARRIAGE AND MATERNITY HISTORY PART C

FAMILY PLANNING (ALL CURRENTLY MARRIED WOMEN AGED 15-49 YEARS)

I D E N T I F I C A T I O N C O D E	1. How old were you when you first got married? AGE	2. Do you know of any method to prevent pregnancy or space births? YES..... 1 NO..... 2 (→9)	3. By which medium did You learn about family planning methods? RADIO..... 1 TELEVISION... 2 NEWSPAPERS/ PAMPHLETS/POSTE RS..... 3 FRIENDS/RELATIV ES..... 4 HEALTH WORKER 5 HUSBAND..... 6 OTHER..... 7	4. Have you (or your husband) ever used any of these methods ? YES.. 1 NO... 2 (→8)	5. Are you (or your husband) currently using any of these methods ? YES ... 1 NO 2 (→8)	6. Which method do you currently use? CONDOM 1 OTHER TEMPORARY 2 VASACTOMY 3 LAPOROSCOPY/MINIL AP 4 TRADITIONAL 5 (→9)	7. Where do you get this method? PUBLIC HEALTH INSTITUTION . 1 PRIVATE HEALTH INSTITUTION . 2 PHARMACY 3 VSC 4 HEALTH WORKER 5 OTHER 6 →9	8. Why don't you use family planning methods? NOT AVAILABLE 1 TOO EXPENSIVE 2 HUSBAND AWAY3 WANT MORE CHILDREN . 4 RELIGIOUS REASONS .. 5 SCARED OF SIDE-EFFECTS 6 HUSBAND DOES NOT WANT.. 7 OTHER..... 8	9. During the last six months, did any health worker visit your home to talk about family planning? YES..... 1 NO..... 2	10. How many children would you like to have? How many TOTAL? How many boys? How many girls? IF RESPONDENT REPLIES "UPTO GOD OR KARMA" CODE AS "99"TO COLUMN TOTAL	TOTAL	BOYS	GIRLS
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[illegible][illegible]

[illegible]

A C T I V I T Y C O D E	I D C O D E	JOB DESCRIPTION			
		1. WORK ACTIVITY (COPY FROM 1C)	2. Which industrial sector do you work for? WRITE THE NAME OF GOODS AND SERVICES PRODUCED AT THE INDUSTRIAL SECTOR WHERE THE RESPONDENT WORKS	3. How did you work to receive wages? DAILY BASIS . 1 LONG TERM BASIS 2 (→7) CONTRACT/ PIECE-RATE .. 3 (→13)	
		WORK ACTIVITY	NSCO CODE	PRODUCED GOODS AND SERVICES	NSIC CODE

PAID BY DAY			
4.	5.		6.
How much did you get in cash per day for this job?	What did you get in kind? PADDY/RICE..... 1 WHEAT..... 2 MAIZE..... 3 MEALS..... 4 CLOTHING..... 5 OTHER..... 6 RECEIVED NOTHING IN KIND..... 7 (→NEXT ACTIVITY)		What was the value of what you received in kind? RECORD VALUE OF DAILY IN-KIND PAYMENTS AND VALUE OF IN-KIND PAYMENTS FOR WHOLE PERIOD WORKED <div style="border: 1px solid black; padding: 5px; display: inline-block;">→NEXT ACTIVITY</div>
RUPEES/DAY	FIRST	SECOND	RUPEES/DAY Y RUPEES/WHOLE PERIOD

[illegible][illegible]

OUTSIDE AGRICULTURE (ALL PERSONS 5 YEARS AND OLDER) CONTD.

OUTSIDE AGRICULTURE (ALL PERSONS 5 YEARS AND OLDER) CONTD.

<div>A C T I V I T Y</div> <div>C O D E</div>	PAID ON A LONGER BASIS									CONTRACT/ PIECE-RATE	
	7. How much did you get for this job?					8. Are taxes already deducted? YES 1 NO 2	9. Do you contribute to an Employee Provident Fund? YES 1 NO 2	10. Will you receive a pension when you retire? YES 1 NO 2	11. Do you receive subsidized medical care? YES..... 1 NO..... 2	12. How many people work for your employer? 1 1 2-9 2 10 OR MORE 3 <div style="text-align: center;">→NEXT ACTIVITY</div>	13. During the past 12 months, how much did you receive from contract/piece-rate work? (cash + in-kind payments)
	PER MONTH (Rs.)		PAST 12 MONTHS (Rs.)								
	TAKE-HOME PAY	TRANSPORT	BONUSES, TIPS, DASHAIN/TIHAR ALLOWANCES	UNIFORM/CLOTHING ALLOWANCES	ANY OTHER PAYMENTS						
											RUPEES

[illegible]

SECTION 11.

FARMING AND LIVESTOCK

PART A1

LANDHOLDING - LAND OWNED

ID CODE OF
RESPONDENT:1. Does your household own any
agricultural land?YES....1
NO.....2 (→PART A2)

P L O T N U M B E R	2. MAKE A LIST OF ALL THE PLOTS/GARDENS THAT THE HOUSEHOLD OWNS:	3. What is the total area of this ..[PLOT]..?		4. Where is this plot located?	5. What type of land is the ..[PLOT]..?	6. Is the ..[PLOT]. irrigated or rainfed?	7. Is the irrigation on the ..[PLOT]. seasonal or year round?	8. What is the mode of irrigation on the ..[PLOT].?	9. If you wanted to buy/sell a plot exactly like this, how much would it cost/fetch you?
		ROPANI.....1 BIGHA.....2							

01										
02										
03										
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P L O T N U M B E R	DRY SEASON							WET SEASON						
	10.	11.	12.				13.	14.	15.					
	Over the past DRY SEASON what did you do with the .[PLOT].? CROPPED YOURSELF SHARECROPPED OUT FIXED RENT OUT .3 MORTGAGED OUT .4(→13) LEFT FALLOW ...5(→13) OTHER6	For the plots which you did not crop yourself, what net rent did you receive from the tenant? →13 NET RENT (Rs.)	For the plots which you cropped yourself, what crops did you grow? CROP CODE				Over the past WET SEASON what did you do with the .[PLOT].? CROPPED YOURSELF .1 (→15) SHARECROPPED OUT 2 FIXED RENT OUT .. 3 MORTGAGED OUT ... 4 (→NEXT PLOT) LEFT FALLOW 5 (→NEXT PLOT) OTHER 6	For the plots which you did not crop yourself, what net rent did you receive from the tenant? →NEXT PLOT NET RENT (Rs.)	For the plots which you cropped yourself, what crops did you grow? CROP CODE					
	CASH	IN-KIND	A	B	C	D		CASH	IN-KIND	A	B	C	D	
01														
02														
03														
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SECTION 11.

FARMING AND LIVESTOCK

PART A2

LANDHOLDING - LAND SHARECROPPED/RENTED/MORTGAGED -IN

1. Over the past AGRICULTURE YEAR did your household cultivate land owned YES 1
by someone else (or that was mortgaged in)? NO 2 (→PART A3)

P L O T N U M B E R	2. MAKE A LIST OF ALL THE PLOTS/GARDENS THAT THE HOUSEHOLD CULTIVATED THROUGH SHARECROPPING-IN, RENTING-IN OR MORTGAGING-IN:	3. What is the contractual arrangement on this ..[PLOT]..? SHARECROPPED1 (→5) RENTED-IN2 MORTGAGED-IN3 (→5) OTHER4	4. How much "rent" did you pay for this plot to the landlord? INCLUDE ONLY CASH PAYMENTS IF NOTHING WRITE ZERO RUPEES	5. What is the total area of this ..[PLOT]..? ROPANI1 BIGHA2 AREA UNIT		6. What type of land is the ..[PLOT]..? UPLAND1 LOWLAND2
--	---	---	---	--	--	---

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P L O T N U M B E R	7. Is the .[PLOT]. irrigated or rainfed? IRRIGATED 1 RAINFED .. 2(→10)	8. Is the irrigation on the .[PLOT]. seasonal or year round? SEASONAL 1 YEAR ROUND 2	9. What is the mode of irrigation on the .[PLOT].? TUBEWELL/BORING 1 CANAL 2 POND/TANK 3 OTHER NATURAL SOURCES... 4 MIXED 5	DRY SEASON				WET SEASON			
				10. What crops did you cultivate over the past DRY SEASON?				11. What crops did you cultivate over the past WET SEASON?			
				CROP CODE				CROP CODE			
				A	B	C	D	A	B	C	D

01											
02											
03											
04											
05											
06											
07											
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11											
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20											

1. Did your household sell/transfer any land over the past 12 months?

YES.....1
NO.....2(→4)

2. How much land did your household sell/transfer?

AREA:

--	--	--

ROPANI1
BIGHA2

UNIT:

3. How much did your household receive from the sales?

WRITE ZERO IF FREE

RUPEES:

4. Did your household buy/get any land over the past 12 months?

YES.....1
NO.....2 (→PART B)IF THERE IS NO LAND ON THE OWNERSHIP, NO LAND OPERATED AND NO LAND SOLD/BOUGHT DURING THE REFERENCE PERIOD
→PART E1

5. How much land did your household buy/get?

AREA:

--	--	--

ROPANI ... 1
BIGHA 2

UNIT:

6. How much did your household pay for this land?

WRITE ZERO IF FREE

RUPEES:

<p>1.</p> <p>In the past AGRICULTURE YEAR, what crops did you grow?</p> <p>LIST ALL CROPS GROWN BY HOUSEHOLD FIRST BEFORE ASKING Q. 2 - 4.</p>	<p>2.</p> <p>Did you use an improved variety of seed?</p> <p>YES 1 NO 2</p>	<p>3.</p> <p>Please provide the following information related to quantity of ..[CROP].. produced by your household, as well as the various uses to which it was put:</p> <p>USE QUANTITY CODES LISTED AT END OF THE QUESTIONNAIRE IN COLUMN "A" FOR THE QUANTITY OF PRODUCTION</p>				<p>4.</p> <p>Report the total quantity and value of ...[CROP]...sold.</p> <p>IF CROP NOT SOLD, WRITE ZERO IN TOAL SALES COLUMN AND LEAVE THE OTHERS BLANK</p>			
CROP CODE		A. UNIT	B. TOTAL QUANTITY HARVESTED	C. QUANTITY GIVEN TO LANDLORD	D. QUANTITY SOLD (OR EXPECTED TO SELL)	A. UNIT	B. TOTAL QUANTITY SOLD	C. PRICE PER UNIT RUPEES	D. TOTAL SALES (B×C) RUPEES

[illegible]

[illegible]

11

YES 1
NO 2 (→PART C2)

11

[illegible]

TOTAL EXPENDITURE ON SEEDS AND PLANTS:

--

1. Did you purchase any chemical fertilizers or insecticides over the past AGRICULTURE YEAR (or receive them from the landlord)?

YES 1
 NO..... 2 (→PART C3)

2. TYPE OF FERTILIZER OR INSECTICIDE:		3. WHAT ARE THE CROPS (MAIN THREE) ON WHICH FERTILIZERS AND INSECTICIDES USED?			4. AMOUNT PURCHASED	
		CROP CODE				
	CODE	A	B	C	QUANTITY (KG)	EXPENDITURE (Rs)
UREA	01					
COMPLEX	02					
DAP	03					
OTHER FERTILIZER	04					
INSECT/PEST-ICIDES	05					
	06	TOTAL TRANSPORTATION COSTS:				

99

TOTAL EXPENDITURE ON FERTILIZER AND INSECTICIDES:

5. Were you able to obtain all the fertilizer you needed over the past AGRICULTURE YEAR?

YES.....1(→PART C3)
 NO.....2

6. Why were you unable to get all the fertilizer you needed in the past AGRICULTURE YEAR?

NOT AVAILABLE FOR PURCHASE 1
 NO MONEY FOR PURCHASE..... 2
 OTHER 3

1. Did you hire any casual farm workers over the past AGRICULTURE YEAR?

YES 1
NO..... 2(→9)

2. PROVIDE INFORMATION ON WORKERS HIRED ON WAGE BASIS USE SEPARATE ROWS FOR WORKERS HIRED ON A PIECE- RATE BASIS AND TIME BASIS		PAID ON A DAILY BASIS											
		3. How did you hire these workers on a daily wages or piece-rate basis? DAILY WAGES.....1(→8) PIECE-RATE. 2	4.		5.		6.		7. INTERVIEWER:		8. INTERVIEWER:		
			For how many days in total did you hire this type of workers over the past AGRICULTURE YEAR? TOTAL MAN- DAYS		How much did you pay in cash per day to each worker? RUPEES PER DAY		What was the value of what you gave in kind to each worker? (meals, snacks, etc.) RUPEES PER DAY		ADD THE AMOUNTS REPORTED IN Q. 5 AND 6 (Q. 5 + Q. 6) EXPENDITURE/WORKER (Rs.)		MULTIPLY MAN-DAYS REPORTED IN Q. 4 BY THE AMOUNT IN Q. 7 IF SKIPPED FROM Q.3, WRITE THE TOTAL ONLY (Q. 4. x Q. 7) TOTAL EXPENDITURE (Rs.)		
S.N.	DESCRIPTION		MALE	FEMALE	MALE	FEMAL E	MALE	FEMAL E	MALE	FEMALE	MALE	FEMAL E	TOTA L

01													
02													
03													
04													
05													
06													
07													
08													
09													
10													
11													
12													
13													
14													
15													
16	EXCHANGE LABOUR												

9. TOTAL EXPENDITURE ON CASUAL WORKERS: (IF NOTHING WRITE ZERO)

10. Did you hire any permanent farm workers over the past AGRICULTURE YEAR?

YES..... 1

NO..... 2 (→13)

11. How many permanent workers did you hire over the past AGRICULTURE YEAR?
NUMBER12. How much did you pay (cash and in-kind) the permanent workers over the past AGRICULTURE YEAR? TOTAL EXPENDITURE ON
PERMANENT WORKERS(Rs.)13. TOTAL EXPENDITURE ON HIRING FARM LABOR (ADD THE AMOUNT OF Q. 9 AND Q. 12)
EXPENDITURE ON HIRED LABOUR (Rs.)

GRAND TOTAL

REVENUES		EXPENDITURES	
REVENUE SOURCE:	TOTAL REVENUE OVER AGRICULTURE YEAR	EXPENDITURE ITEM:	TOTAL EXPENDITURE OVER AGRICULTURE YEAR
1. TOTAL CROP SALES (COPY FROM PART B ROW 99)		9. TOTAL EXPENDITURE ON SEEDS, ETC. (COPY FROM PART C1 ROW 99)	
2. Sale of crop by-products (straw, husk, etc.)		10. TOTAL EXPENDITURE ON FERTILIZER (COPY FROM PART C2 ROW 99)	
		11. TOTAL EXPENDITURE ON HIRED LABOR (COPY FROM PART C3 Q NO. 13)	
		12. Irrigation charges/maintenance of watercourse, etc.	
		13. Transportation of crops to market	
		14. Sacks, twine, or other containers	
		15. Storage facilities	
		16. Improvements on land or buildings	
		17. Repair and maintenance of equipment	
<u>INCOME FROM RENTING OUT:</u>		<u>EXPENDITURE ON RENTING IN:</u>	
3. Draft animals		18. Draft animals	
4. Tractor		19. Tractor	
5. Thresher		20. Thresher	
6. Other machinery		21. Other machinery	
7. Other income		22. Other expenditures	
8. TOTAL REVENUES		23. TOTAL EXPENDITURES	

SECTION 11. FARMING AND LIVESTOCK PART E1 LIVESTOCK - OWNERSHIP

1. Has your household owned any livestock over the past 12 months?

YES 1

NO 2 (→PART F)

2. Did you own any ..[ANIMALS].. over the past 12 months? PUT A CHECK (✓) IN THE APPROPRIATE BOX FOR ANIMAL. IF THE ANSWER TO Q. 2 IS YES, ASK Q. 3-6.				3. How many do you own now? For how much could you buy them all today?		4. How many did you have 12 months ago? For how much could you have bought them all then?		5. How many did you sell over the past 12 months? How much did you sell them for?		6. How many did you buy over the past 12 months? How much did you pay for them?	
ANIMALS	NO	YES	CODE	NUMBER	RUPEES	NUMBER	RUPEES	NUMBER	RUPEES	NUMBER	RUPEES

Bullocks/Cows			01								
He/She Buffaloes			02								
Goats/Castrated goat			03								
He/She Sheep			04								
Yaks/Naks			05								
Pigs/Pork			06								
Horses/Donkeys/Mules,			07								
Poultry/Ducks/ Pigeons			08								
Other livestock			09								
TOTAL			10								

INCOME		EXPENDITURES	
INCOME ITEM	TOTAL REVENUE OVER PAST 12 MONTHS	EXPENDITURE ITEM:	TOTAL EXPENDITURE OVER PAST 12 MONTHS
1. Milk		9 Fodder/Animal feed	
2. Ghee		10 Transportation of animal feed	
3. Eggs		11. Veterinary services, inoculations, etc.	
4. Curd			
5. Meat			
6. Animal hides			
7. Other income (Breeding, Manure, Wool, Bones, etc.)		12. Other expenditures (Breeding, Shade improvement, Twine, etc.)	
8. TOTAL INCOME		13. TOTAL EXPENDITURES	

1. Has your household owned any equipment over the past 12 months?

YES 1

NO..... 2(→9)

2. Do you own a ..[EQUIPMENT]..? PUT A CHECK (✓) IN THE APPROPRIATE BOX FOR ALL EQUIPMENT. IF THE ANSWER TO Q.2 IS YES, ASK Q. 3-8.			3. How many ..[AGRICULTURAL EQUIPMENT].. does your household presently own?	4. For how much could you sell them all today?	5. How many ..[AGRICULTURAL EQUIPMENT].. did your household sell over the past 12 months? IF NONE WRITE ZERO AND →7	6. How much did you receive from the sale of ..[AGRICULTURAL EQUIPMENT]..?	7. How many ..[AGRICULTURAL EQUIPMENT].. did your household buy over the past 12 months? IF NONE WRITE ZERO AND →9	8. How much did you pay for ..[AGRICULTURAL EQUIPMENT]..?
NO	YES	COD E	NUMBER	RUPEES	NUMBER	RUPEES	NUMBER	RUPEES

Tractor/Power tiller			01					
Plough			02					
Cart			03					
Thresher			04					
Trolley			05					
Water Pump			06					
Generator/Diesel Engine			07					
Grain Storage Bin (Drum)			08					
Other Machinery			09					
TOTAL			10					

9. Have you or any member of your household taken technical advice from Government Agriculture Technician over the past 12 months?

YES 1(→11)

NO..... 2

10. Why did you not take any advice?

SERVICE FAR
AWAY.....1
SERVICE IS NOT
GOOD.....2

11. Have you or any member of your household taken technical advice from Government Livestock Service Technician over the past 12 months?

YES 1(→NEXT SECTION)

NO..... 2

12. Why did you not take any advice?

SERVICE FAR
AWAY.....1
SERVICE IS NOT
GOOD.....2

INTERVIEWER: CHECK SECTION 1 PART C TO SEE IF ANY SELF-EMPLOYMENT ACTIVITIES OUTSIDE AGRICULTURE REPORTED

Yes1
 No2(→NEXT
 SECTION)

☐

E N T E R P R I S E C O D E	1. What kind of enterprise did/do you operate? CROSS CHECK SELF-EMPLOYMENT ACTIVITIES REPORTED IN SECTION 1 PART C WRITE DESCRIPTION IN FULL THE KIND OF ACTIVITY, GOODS AND SERVICES PRODUCED			2. Which people in the household work in this enterprise/activity? WRITE ID CODES OF MAIN PERSON IN COLUMN "A" AND OF OTHERS IN OTHER COLUMNS FROM HOUSEHOLD ROSTER					3. WRITE ID CODE OF PERSON INTERVIEWED	4. For how long has the enterprise been operating? TOTAL TIME IS SUM OF YEARS AND MONTHS.		5. Where do you operate the enterprise? HOME 1 OTHER FIXED LOCATION.. 2 OTHER CHANGING LOCATION.. 3	6. In the past 12 months, how many months did the enterprise operate? MONTHS	7. Who owns the business? OWNED BY HOUSEHOLD ONLY 1 (→9) PARTNERSHIP/SHARE WITH OTHER OWNERS 2	8. What share of the profits does your household keep? PERCENT
	DESCRIPTION OF THE ACTIVITY	PRODUCED, GOODS AND SERVICES	NSIC CODE	A	B	C	D	E	ID CODE	YEARS	MONTHS				

01															
02															
03															
04															
05															
06															
07															
08															
09															
10															

SECTION 12. NON-AGRICULTURE ENTERPRISES/ACTIVITIES PART

GENERAL CHARACTERISTICS
(CONTD.)

E N T E R P R I S E C O D E	9.		10.	11.	12.	13.	14.	15.	16.
	Who are your customers?								
	OTHER HOUSEHOLDS OR INDIVIDUALS 1		Is the enterpris e registere d with the governmen t?	What was your main source of money for setting up the business?	Have you tried to borrow money to operate or expand your business in the past 12 months?	Whom did you borrow, or try to borrow, from?	Did you hire anyone over the past 12 months?	How many workers do you normally hire, during a month when the enterpris e is operating ?	What problems, if any, do you have in running your business?
	SMALL ENTERPRISES 2			DIDN'T NEED ANY MONEY 1					NO MAJOR PROBLEM.. 1
	LARGE PRIVATE ENTERPRISES 3			OWN SAVINGS..... 2	YES, SUCCESSFULLY 1	RELATIVES/FRIENDS .. 1	YES ... 1		CAPITAL OR CREDIT PROBLEMS..... 2
	GOVT. OR OTHER PUBLIC FIRM4		YES ... 1	RELATIVES/FRIENDS.. 3	YES, BUT	AGRI. DEV. BANK ... 2	NO 2		LACK OF TECHNICAL KNOW-HOW..... 3
	LOCAL RETAIL TRADERS 5		NO 2	AGRI. DEV. BANK.... 4	UNSUCCESSFULLY2	COMMERCIAL BANK 3	(→16)		PROBLEMS WITH SUPPLY OF POWER OR WATER 4
	EXPORTERS OR FOREIGN PURCHASERS 6			COMMERCIAL BANK.... 5	NO 3	GRAMEEN-TYPE BANK .. 4			PROBLEMS WITH EQUIPMENT OR SPARE PARTS... 5
	CONTRACTOR..... 7			GRAMEEN-TYPE BANK.. 6	(→14)	OTHER FINANCIAL INSTITUTION..... 5			LACK OF ADEQUATE LABOR..... 6
	TOURISTS..... 8			OTHER FINANCIAL INSTITUTION..... 7		LOCAL GROUP (DHUKUTI) 6			GOVERNMENT REGULATIONS..... 7
	NGO/INTERNAT. ORGANIZATION9			LOCAL GROUP (DHUKUTI) 8		NGO OR RELIEF AGENCY ... 7			LACK OF RAW MATERIALS..... 8
	OTHER 10			NGO OR RELIEF AGENCY9		OTHER			LACK OF CUSTOMERS . 9
				SALE OF ASSETS.... 10		..... 8			TRANSPORT PROBLEMS10
				OTHER..... 11					OTHER 11
	PRIMARY	SECONDARY							

01									
02									
03									
04									
05									
06									
07									
08									
09									
10									

SECTION 12. NON-AGRICULTURE ENTERPRISES/ACTIVITIES	INCOME FROM ENTERPRISES
--	-------------------------

E N T E R P R I S E C O D E	INCOMES		EXPENDITURES OVER PAST 12 MONTHS					7. NET REVENUES [2- (3+4+5+6)]	8. EXPENDITU RE ON CAPITAL GOODS OVER PAST 12 MONTHS	9. SALE OF ASSETS OVER PAST 12 MONTHS	10. If someone wanted to buy this enterprise today, how much would he have to pay?	11. What was its valuatio n a year ago?
	1. ENTERPRISE/ACTIVI TY (COPY FROM PART A)	2. GROSS REVENUES OVER THE PAST 12 MONTHS (FROM SALES)	3. EXPENDITUR ES ON WAGES BOTH CASH AND IN- KIND	4. EXPENDITUR E ON FUEL, KEROSENE, ELECTRICIT Y, ETC.	5. EXPENDITURE ON RAW MATERIALS		6. OTHER OPERATING EXPENSES					
	RUPEES	RUPEES	RUPEES	RUPEES		RUPEES						
				CASH	IN- KIND							

01		
02		
03		
04		
05		
06		
07		
08		
09		
10		

[illegible][illegible]

Borrowing and Outstanding Loans

[illegible]

01							
02							
03							
04							
05							
06							
07							
08							
09							
10							

BORROWING AND OUTSTANDING LOANS
(CONTD.)

01								
02								
03								
04								
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07								
08								
09								
10								

L O A N N U M B E R	8. What is/was the interest or interest rate on the loan?		9. When is/was the borrower scheduled to finish repaying the loan?		10. Has the borrower finished repaying the loan? FULLY PAID 1 PARTLY PAID 2 NOT PAID AT ALL ... 3(→12)	11. How much principal and interest in total has been repaid on the loan? RUPEES	12. What collateral did you lend against? AGRICULTURAL LAND 1 BUILDINGS OR OTHER PROPERTY 2 GOLD/SILVER 3 PROPERTY DOCUMENTS 4 PERSONAL GUARANTEE 5 PAST BORROWING RECORD .. 6 OTHER 7 NO COLLATERAL 8
	RUPEES	PERCENT PER YEAR	MONTH	YEAR			

01							
02							
03							
04							
05							
06							
07							
08							
09							
10							

SECTION 13. CREDIT AND SAVINGS PART C

OTHER ASSETS

1. Does your household own any land or property (do not include property in which the household lives, or land or property already reported in Section 11 or 12)?

YES 1
NO 2 (→5)

2. How much money would it cost to buy property like that (reported in Q. 1) owned by your household?

RUPEES

3. How much money would it have cost a year ago to buy the property (reported in Q. 1) that your household now owns?

....

RUPEES

4. How much did your household spend in total over the past 12 months in purchasing property?

IF NOTHING WRITE ZERO

RUPEES

5. How much did your household receive in total over the past 12 months from selling property?

IF NOTHING WRITE ZERO

RUPEES

6. How much did your household receive in total over the past 12 months from renting property to others?

IF NOTHING WRITE ZERO

RUPEES

7. Does your household own any other real assets (other than financial assets or those assets already been reported in Section 11 or 12)?

YES 1
NO 2 (→11)

8. How much money would it cost to buy assets like those (reported in Q. 7) owned by your household?

RUPEES

9. How much money would it have cost a year ago to buy the assets (reported in Q. 7) that your household now owns?

RUPEES

10. How much did your household spend in total over the past 12 months in purchasing assets?

IF NOTHING WRITE ZERO

RUPEES

11. How much did your household receive in total over the past 12 months from selling assets?

IF NOTHING WRITE ZERO

RUPEES

12. How much did your household receive in total over the past 12 months from renting these assets to others?

IF NOTHING WRITE ZERO

RUPEES

SECTION 14. REMITTANCES AND TRANSFER PART A

REMITTANCES AND TRANSFER INCOME SENT

1. During the past 12 months, did any member of your household send money or other payments (for example, food or clothing) to someone who is not a member of your household?

YES..... 1

NO..... 2 (→PART B)

L I N E N U M B E R	ID CODE OF RESPONDENT	2. What are the names of the people to whom members of your household have sent money or goods during the past 12 months? LIST ALL NAMES BEFORE GOING TO Q. 3-8. IF THE RESPONDENT DOES NOT WISH TO GIVE NAMES, LEAVE BLANK	3. Who in your household is primarily responsible for sending this assistance? WRITE ID CODE FROM SECTION 1A ID CODE	4. What is the relationship of the ..[RECIPIENT].. to the donor? USE RELATIONSHIP CODES FROM SECTION 1A	5. What is the sex of the ..[RECIPIENT]..? MALE .....1 FEMALE ....2	6. Where does the ..[RECIPIENT].. currently live? Is it an urban or rural area? URBAN ....1 RURAL ....2		7. What is the ..[RECIPIENT'S].. primary work activity? WAGE EMPLOYEE IN AG 1 WAGE EMPLOYEE IN NON-AG..... 2 SELF EMPLOYEE IN AG 3 SELF EMPLOYEE IN NON-AG..... 4 STUDY..... 5 OTHER..... 6	8. How much in total did you send to ..[RECIPIENT].. over the past 12 months? RUPEES	
	ID CODE					DISTRICT	U/R		CASH	IN-KIND

01										
02										
03										
04										
05										
06										
07										
08										
09										
10										

SECTION 14. REMITTANCES AND TRANSFERS PART B

REMITTANCES AND TRANSFER INCOME RECEIVED

1. During the past 12 months, has any member of your household received any money or payments in kind, or gifts from any person who is not a member of your household?

YES..... 1

NO..... 2 (→NEXT SECTION)

L I N E N U M B E R	ID CODE OF RESPONDENT	2.	3.	4.	5.	6.	7.		8.	9.		10.
		What are the names of all the people who sent you money or goods during the past 12 months? LIST ALL NAMES BEFORE GOING TO Q. 3-10. IF THE RESPONDENT DOES NOT WISH TO GIVE NAMES, LEAVE BLANK	Who in your household is the primary recipient of the assistance? WRITE ID CODE FROM SECTION 1A ID CODE	What is the relationship of the ..[DONOR].. to the recipient? USE RELATIONSHIP CODES FROM SECTION 1A	What is the sex of the ..[DONOR]..? IF THE DONOR IS AN ORGANIZATION, WRITE "9" AND →9 MALE .....1 FEMALE ...2	What is the age of the ..[DONOR]..? YEARS	Where does the ..[DONOR].. currently live? Is it an urban or rural area? URBAN .....1 RURAL .....2	DISTRICT T U/R		What is the ..[DONOR'S].. primary work activity? WAGE EMPLOYEE IN AG. 1 WAGE EMPLOYEE IN NON-AG..... 2 SELF EMPLOYEE IN AG. 3 SELF EMPLOYEE IN NON-AG..... 4 STUDY..... 5 OTHER..... 6	How much in total did you receive from. ..[DONOR].. over the past 12 months? RUPEES CASH IN-KIND		How does the ..[DONOR].. usually send the amount? FINANCIAL INSTITUTION 1 HUNDI ..... 2 PERSONAL ... 3 OTHER ..... 4
01												
02												
03												
04												
05												
06												
07												
08												
09												
10												

SECTION 15.

OTHER INCOME

1. TYPE OF ASSET OR SOURCE OF INCOME		2. What is the current value of the .[ITEM]. that the household owns?	3. What was the value of the ..[ITEM].. a year ago?	4. How much has the household received from ..[ITEM].. in the past 12 months? (interest, dividends, profit, payments, etc.)
ITEM	CODE	RUPEES	RUPEES	RUPEES
Cash/Current/Saving account	101			
Fixed deposit	102			
Shares, stocks, treasury bills	103			
Employee Provident Fund/Citizen Investment Fund	104			
Internal Pension (Domestic)	105			
External Pension (Foreign)	106			
Commission fee, royalties, etc.	107			
Other	108			

SECTION 16.

CHILDREN AWAY FROM HOME (UNDER 15 YEARS)

1. Are any children under 15 years of age away from this household? Yes...1
No...2→NEXT SECTION

CHILD NUMBER	2. CHILD'S NAME LIST ALL THE CHILDREN UNDER 15 YEARS OF AGE ABSENT FROM THE HOUSEHOLD	3. RECORD THE ID CODE OF ..[NAME'S].. PARENTS FROM THE ROSTER. IF IT IS NOT ON ROSTER, CODE AS FOLLOWING. ALIVE.....97 DECEASED.....98 UNKNOWN.....99		4. What is the sex of ..[NAME].. ..? MALE 1 FEMALE2	5. What is the relation of ..[NAME].. to the household head? SON/DAUGHTER 1 STEP-SON/ DAUGHTER ..2 GRANDCHILD .3 BROTHER/SISTER .....4 NEPHEW/NIECE 5 OTHER .....6	6. What was/is the age of ..[NAME].. ..? WRITE THE AGE OF NAME WHEN HE/SHE LEFT THE HOME AND OF NOW. WRITE THE AGE IN COMPLETE YEAR.		7. What was/is the highest level of education that ..[NAME].. completed ? WRITE THE EDUCATION CODE OF NAME WHEN HE/SHE LEFT THE HOME AND OF NOW		8. Where has ..[NAME].. gone when he/she left? Was it then an urban or rural area? URBAN.....1 RURAL.....2 IF PLACE IS UNKNOWN, WRITE "99" IN DISTRICT COLUMN		9. What does ..[NAME].. primarily do there? WORK 1 STUDY 2 (→NEXT PERSON) LIVE WITH RELATIVES . 3 (→NEXT PERSON) LEAVE WITH PARENTS .. 4 (→NEXT PERSON) DON'T KNOW 5 (→NEXT PERSON)	10. What work does ..[NAME].. primarily do there? SPECIFY THE WORK DONE AND GIVE APPROPRIATE NSCO CODE IN CASE OF 'OTHER' RAG PICKING .916 DOMESTIC WORK913 PORTER .....915 WORK IN MINES711 WORK IN CARPET FACTORY ....743 BONDED LABOUR996 AGRI. LABOUR 921 OTHER DON'T KNOW .009	11. Did your household receive any money or goods from ..[NAME].. or ..[NAME'S].. employer during the past 12 months? INTERVIEWER : CHECK THIS WITH SECTION 14 PART B YES.....1 NO.....2
		FATHER'S ID CODE	MOTHER'S ID CODE			THEN	NOW	THEN	NOW	DISTRICT	U/R			
01														
02														
03														
04														
05														
06														
07														
08														
09														
10														

ID CODE OF RESPONDENT

I would like to ask your opinion of your family's standard of living.	It was less than adequate for your family's needs .....1 It was just adequate for your family's needs .....2 It was more than adequate for your family's needs .....3 Not applicable .....4
1. Concerning your family's food consumption over the past one month, which of the following is true?	
2. Concerning your family's housing, which of the following is true?	
3. Concerning your family's clothing, which of the following is true?	
4. Concerning the health care your family gets, which of the following is true?	
5. Concerning your children's schooling, which of the following is true?	
6. Concerning your family's total income over the past one month, which of the following is true?	

7. IF THE ANSWER TO Q. 1 IS "1", ASK:

Do you consider that you, or any member of your family eats too little food to live a healthy and active live? YES... 1
 NO.... 2

Now, I would like to ask you to rate the government services/facilities that your household uses.	GOOD..... 1 FAIR..... 2 BAD..... 3 NOT APPLICABLE..... 4
8. How do you take the health services consuming by your household?	
9. How do you take the education services consuming by your household?	
10. How do you take the drinking water services consuming by your household?	
11. How do you take the electricity services consuming by your household?	
12. How do you take the road facilities consuming by your household?	
13. How do you take the postal services consuming by your household?	
14. How do you take the telephone services consuming by your household?	

SECTION 18.

PANEL SAMPLE HOUSEHOLD TRACKING

District	Municipality/VDC	Ward	Sub-ward	Household S. No.

PSU	HH

1. Is this household in the NLSS-01 form? Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>	2. Was this household found? Yes 1 → 6 <input type="checkbox"/> No 2 <input type="checkbox"/>	3. What is the reason of not found? Moved 1 Other 2 → 5 Don't know 3 → NEXT HH <input type="checkbox"/>	4. Where and when did the HH move? District <input type="text"/> Urban 1 Rural 2 <input type="text"/> Year <input type="text"/>	5. Who stated this reason? Relative 1 Neighbour 2 <input type="checkbox"/> Knowledgeable person 3 Other person 4 → NEXT HOUSEHOLD
--	---	--	--	--

HOUSEHOLD COMPOSITION IN 1996					
I D C O D E I N 1 9 9 6	6. NAME	7. SEX	8. RELATIONSHIP TO THE HEAD OF THE HOUSEHOLD IN 1996	9. AGE IN 1996	
				HEAD 1	
				HUSBAND/WIFE 2	
				SON/DAUGHTER 3	
				GRANDCHILD 4	
				FATHER/MOTHER 5	
				BROTHER/SISTER 6	
				NEPHEW/NIECE 7	
				SON/DAUGHTER-IN-LAW 8	
				BROTHER/SISTER-IN-LAW 9	
				FATHER/MOTHER-IN-LAW 10	
				OTHER FAMILY RELATIVE 11	
				SERVANT/SERVANT'S RELATIVE 12	
		MALE 1		TENANT/TENANT'S RELATIVE 13	
		FEMALE 2		OTHER PERSON NON RELATED 14	YEARS

CURRENT SITUATION				
HOUSEHOLD MEMBER		NOT HOUSEHOLD MEMBER		
10. IS THIS PERSON MEMBER IN THE NEW HOUSEHOLD ROSTER?	11. WRITE THE ID CODE OF THIS PERSON IN THE NEW ROSTER	12. WHY IS THIS PERSON NOT THE HOUSEHOLD MEMBER NOW?	13. WHERE IS THIS PERSON LIVING NOW?	14. WHEN DID THIS PERSON DIE, OR MOVE?
			IS IT IN THIS SAME PSU?	IN WHAT DISTRICT OR COUNTRY IS THIS PERSON LIVING NOW?
		DIED 1 → 14		IS IT AN URBAN OR RURAL AREA?
		HOUSEHOLD SPLIT 2		URBAN 1
		MOVED FOR WORK 3		RURAL 2
		MOVED DUE TO MARRIAGE 4		
		MOVED FOR STUDIES 5	YES 1 → 14	
YES 1		OTHER 6 → 14	NO 2	
NO 2 → 12	ID CODE		DISTRICT	U/R YEAR

01				
02				
03				
04				
05				
06				
07				
08				
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10				

TICK
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ONLY
THE
HOUSEHO
LD
MEMBERS
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'A' AND
WRITE
THE AGE
OF ALL
HOUSEHO
LD
MEMBERS
IN
COLUMN
'B'.

	1. INTERVIEWER:	
I D E N T I F I C A T I O N C O D E	MAKE A COMPLETE LIST OF ALL CONCERNED BEFORE GOING TO Q.2 - 9. FIRST OF ALL WRITE THE NAME OF HOUSEHOLD HEAD, THEN HEAD'S SPOUSE, SON/DAUGHTER, GRAND-SON/DAUGHTER, PARENTS, ETC. RESPECTIVELY.	I D E N T I F I C A T I O N C O D E

CASTE/ETHNIC GROUP	E T H N I C I T Y C O D E
-----------------------	---

A	B

01		01
02		02
03		03
04		04
05		05
06		06
07		07
08		08
09		09
10		10
11		11
12		12
13		13
14		14
15		15

C	D

LIST OF CODES

ANNEX 1

NSIC CODES

01 AGRICULTURE AND RELATED SERVICE ACTIVITIES	37 RECYCLING
02 FORESTRY, LOGGING AND RELATED SERVICE ACTIVITIES	40 ELECTRICITY AND GAS SUPPLY
05 FISHING, OPERATION OF FISH HATCHERIES AND FISH FARMS; SERVICE ACTIVITIES INCIDENTAL TO FISHING	41 COLLECTIONS, PURIFICATION AND DISTRIBUTION OF WATER
10 MINING OF COAL AND LIGNITE; EXTRACTION OF PEAT	45 CONSTRUCTION
11 EXTRACTION OF CRUDE PETROLIUM AND NATURAL GAS; SERVICE ACTIVITIES INCIDENTAL TO OIL AND GAS EXTRACTION EXCLUDING SURVEYING	50 SALE, MAINTENANCE AND REPAIR OF MOTOR VEHICLES AND MOTORCYCLES; RETAIL SALE OF AUTOMOTIVE FUEL
12 MINING OF URANIUM AND THORIUM ORES	51 WHOLESALE TRADE AND COMMISSION TRADE, EXCEPT OF MOTOR VEHICLES AND MOTORCYCLES
13 MINING OF METAL ORES	52 RETAIL TRADE, EXCEPT OF MOTOR VEHICLES AND MOTORCYCLES; REPAIR OF PERSONAL AND HOUSEHOLD GOODS
14 OTHER MINING AND QUARRYING	55 HOTELS AND RESTAURANTS
15 MANUFACTURE OF FOOD PRODUCTS AND BEVERAGES	60 LAND TRANSPORT
16 MANUFACTURE OF TOBACCO PRODUCTS	61 WATER TRANSPORT
17 MANUFACTURE OF TEXTILES	62 AIR TRANSPORT
18 MANUFACTURE OF WEARING APPREL; DRESSING AND DYEING OF FUR	63 SUPPORTING AND AUXILIARY TRANSPORT ACTIVITIES; ACTIVITIES OF TRAVEL AGENCIES
19 TANNING AND DRESSING OF LEATHER; MANUFACTURE OF LUGGAGE, HANDBAGS, SADDLERY AND HARNESS	64 POST AND TELECOMMUNICATIONS
20 MANUFACTURE OF WOOD AND OF PRODUCTS OF WOOD AND CORK, EXCEPT FURNITURE; MANUFACTURE OF ARTICLES OF STRAW AND PLAITING MATERIALS	65 FINANCIAL INTERMEDIATION, EXCEPT INSURANCE AND PENSION FUNDING
21 MANUFACTURE OF PAPER AND PAPER PRODUCTS	66 INSURANCE AND PENSION FUNDING, EXCEPT COMPULSORY SOCIAL SECURITY
22 PUBLISHING, PRINTING AND REPRODUCTION OF RECORDED MEDIA	67 ACTIVITIES AUXILIARY TO FINANCIAL INTERMEDIATION
23 MANUFACTURE OF COKE, REFINED PETROLIUM PRODUCTS AND NUCLEAR FUEL	70 REAL ESTATE ACTIVITIES
24 MANUFACTURE OF CHEMICALS AND CHEMICAL PRODUCTS	71 RENTING OF MACHINERY AND EQUIPMENT WITHOUT OPERATOR AND OF PERSONAL AND HOUSEHOLD GOODS
25 MANUFACTURE OF RUBBER AND PLASICS PRODUCTS	72 COMPUTER AND RELATED ACTIVITIES
26 MANUFACTURE OF OTHER NON-METALIC MINARAL PRODUCTS	73 RESEARCHES AND DEVELOPMENT
27 MANUFACTURE OF BASIC METALS	74 OTHER BUSINESS ACTIVITIES
28 MANUFACTURE OF FABRICATED METAL PRODUCTS, EXCEPT MACHINERY AND EQUIPMENT	75 PUBLIC ADMINISTRATION AND DEFENCE; COMPULSORY SOCIAL SECURITY
29 MANUFACTURE OF MACHINERY AND EQUIPMENT N.E.C.	80 EDUCATION
30 MANUFACTURE OF OFFICE, ACCOUNTING AND COMPUTING MACHINERY	85 HEALTHS AND SOCIAL WORK
31 MANUFACTURE OF ELECTRICAL MACHINERY AND APPARATUS N.E.C.	90 SEWAGE AND REFUSE DISPOSAL, SANITATION AND SIMILAR ACTIVITIES
32 MANUFACTURE OF RADIO, TV AND COMMUNICATION EQUIPMENT AND APPARATUS	91 ACTIVITIES OF MEMBERSHIP ORGANIZATIONS N.E.C.
33 MANUFACTURE OF MEDICAL, PRECISION AND OPTICAL INSTRUMENTS, WATCHES AND CLOCKS	92 RECREATIONAL, CULTURAL AND SPORTING ACTIVITIES
34 MANUFACTURE OF MOTOR VEHICLES; TRAILERS AND SEMI-TRAILERS	93 OTHER SERVICE ACTIVITIES
35 MANUFACTURE OF OTHER TRANSPORT EQUIPMENT	95 PRIVATE HOUSEHOLDS WITH EMPLOYED PERSONS
36 MANUFACTURE OF FURNITURE; MANUFACTURING N.E.C.	99 EXTRA-TERRITORIAL ORGANIZATION AND BODIES

ANNEX 2
NSCO CODES

011	ARMED FORCES	344	CUSTOMS, TAX AND RELATED GOVERNMENT ASSOCIATE PROFESSIONALS	742	WOOD TREATERS, CABINET-MAKERS AND RELATED TRADERS WORKERS
111	LEGISLATORS	345	POLICE INSPECTORS AND DETECTIVES	743	TEXTILE, GARMENT AND RELATED TRADES WORKERS
112	GOVERNMENT OFFICIALS	346	SOCIAL WORK ASSOCIATE PROFESSIONALS	744	PELT, LEATHER AND SHOE MAKING TRADES WORKERS
114	OFFICIALS OF SPECIAL INTEREST ORGANIZATIONS	347	ARTISTIC, ENTERTAINMENT AND SOPRTS ASSOCIATE PROFESSIONALS	811	MINING AND MINERAL-PROCESSING PLANT OPERATORS
121	DIRECTORS AND CHIEF EXECUTIVES	348	RELIGIOUS ASSOCIATE PROFESSIONALS	812	METAL-PROCESSING-PLANT OPERATORS
122	PRODUCTION AND OPERATIONS DEPARTMENT MANAGERS	411	SECRETARIES AND KEYBOARD-OPERATING CLERKS/ASSISTANTS	813	GLASS, CERAMICS AND RELATIVE PLANT OPERATORS
123	OTHER DEPARTMENT MANAGERS	412	NUMERICAL CLERKS/OFFICE ASSISTANTS	814	WOOD-PROCESSING AND PAPERMAKING-PLANT OPERATORS
131	GENERAL MANAGERS/MANAGING PROPRIETORS	413	MATERIAL-RECORDING AND TRANSPORT CLERKS/OFFICE ASSISTANTS	815	CHEMICAL-PROCESSING-PLANT OPERATORS
211	PHYSICISTS, CHEMISTS AND RELATED PROFESSIONALS	414	LIBRARY, MAIL AND RELATED CLERKS/OFFICE ASSISTANTS	816	POWER-PRODUCTION AND RELATED PLANT OPERATORS
212	MATHEMATICIANS, STATISTICIANS AND RELATED PROFESSIONALS	419	OTHER OFFICE CLERKS/ASSISTANTS	817	AUTOMATED-ASSEMBLY-LINE AND INDUSTRIAL-ROBOT OPERATORS
213	COMPUTING PROFESSIONALS	421	CASHIERS, TELLERS AND RELATED CLERKS/OFFICE ASSISTANTS	821	METAL AND MINERAL PRODUCTS MACHINE OPERATORS
214	ARCHITECTS, ENGINEERS AND RELATED PROFESSIONALS	422	CLIENT INFORMATION CLERKS/OFFICE ASSISTANTS	822	CHEMICAL-PRODUCTS MACHINE OPERATORS
221	LIFE SCIENCE PROFESSIONALS	511	TRAVEL ATTENDANTS AND RELATED WORKERS	823	RUBBER AND PLASTIC PRODUCTS MACHINE OPERATORS
222	HEALTH PROFESSIONALS, EXCEPT NURSING	512	HOUSEKEEPING AND RESTAURANT SERVICES WORKERS	824	WOOD-PRODUCTS MACHINE OPERATORS
223	NURSING AND MIDWIFERY PROFESSIONALS	513	PERSONAL CARE AND RELATED WORKERS	825	PRINTING, BINDING AND PAPER PRODUCTS MACHINE OPERATORS
231	COLLEGE, UNIVERSITY AND HIGHER EDUCATION TEACHING PROFESSIONALS	514	OTHER PROFESSIONAL SERVICES WORKERS	826	TEXTILE, FUR AND LEATHER-PRODUCTS MACHINE OPERATORS
232	SECONDARY EDUCATION TEACHING PROFESSIONALS	515	ASTROLOGERS, FORTUNE-TELLERS AND RELATED WORKERS	827	FOOD AND RELATED PRODUCTS MACHINE OPERATORS
233	PRIMARY AND PRE-PRIMARY EDUCATION TEACHING PROFESSIONALS	516	PROTECTIVE SERVICE WORKERS	828	ASSEMBLERS
234	SPECIAL EDUCATION TEACHING PROFESSIONALS	521	FASHION AND OTHER MODELS	829	OTHER MACHINE OPERATORS AND ASSEMBLERS
235	OTHER TEACHING PROFESSIONALS	522	SHOP SALESPERSONS AND DEMONSTRATOTRS	831	LOCOMOTIVE-ENGINE DRIVERS AND RELATED WORKERS
241	BUSINESS PROFESSIONALS	523	STALL AND MARKET SALESPERSONS	832	MOTOR VEHICLE DRIVERS
242	LEGAL PROFESSIONALS	611	MARKET-ORIENTED GARDENERS AND CROP GROWERS	833	AGRICULTURAL AND OTHER MOBILE-PLANT OPERATORS
243	ARCHIVISTS, LIBRARIANS AND RELATED INFORMATION PROFESSIONALS	612	MARKET-ORIENTED ANIMAL PRODUCERS AND RELATED WORKERS	911	STREET VENDORS AND RELATED WORKERS
244	SOCIAL SCIENCE AND RELATED PROFESSIONALS	613	MARKET-ORIENTED CROP AND ANIMAL PRODUCERS	912	SHOE CLEANING AND OTHER STREET SERVICES ELEMENTARY OCCUPATIONS
245	WRITERS AND CREATIVE OR PERFORMING ARTISTS	614	FORESTRY AND RELATED WORKERS	913	DOMESTIC AND RELATED HELPERS, CLEANERS AND LAUNDERERS
246	RELIGIOUS PROFESSIONALS	615	FISHERY WORKERS	914	BUILDING CARETAKERS, WINDOWS AND RELATED CLEANERS
311	PHYSICAL AND ENGINEERING SCIENCE TECHNICIANS	621	SUBSISTENCE AGRICULTURAL AND FISHERY WORKERS	915	MESSENGERS, PORTERS, DOORKEEPERS AND RELATED WORKERS
312	COMPUTER ASSOCIATE PROFESSIONALS	711	MINERS, SHOFTIRERS, STONE CUTTERS AND CARVERS	916	GARBAGE COLLECTORS AND RELATED LABOURERS
313	OPTICAL AND ELECTRONIC EQUIPMENT OPERATORS	712	BUILDING FRAME AND RELATED TRADES WORKERS	921	AGRICULTURAL, FISHERY AND RELATED LABOURERS
314	AIRCRAFT CONTROLLERS AND TECHNICIANS	713	BUILDING FINISHERS AND RELATED TRADES WORKERS	931	MINING AND CONSTRUCTION LABOURERS
315	SAFETY AND QUALITY INSPECTORS	714	PAINTERS, BUILDING STRUCTURE CLEANERS AND RELATED TRADES WORKERS	932	MANUFACTURING LABOURERS
321	LIFE SCIENCE TECHNICIANS AND RELATED ASSOCIATE PROFESSIONALS	721	METAL MOULDERS, WELDERS, SHEET-METAL WORKERS, STRUCTURAL-METAL PREPARER	933	TRANSPORT LABOURERS AND FREIGHT HANDLERS
322	MODERN HEALTH ASSOCIATE PROFESSIONAL, EXCEPT NURSING	722	BLACKSMITHS, TOOL-MAKERS AND RELATED TRADES WORKERS	997	HOUSEHOLD WORK
323	NURSING AND MIDWIFERY ASSOCIATE PROFESSIONALS	723	MACHINERY MECHANICS AND FITTERS	998	STUDENT
324	TRADITIONAL MEDICINE PRACTITIONERS AND FAITH HEALERS	724	ELECTRICAL AND ELECTRONIC EQUIPMENT MECHANICS AND FITTERS	999	NOT WORKING
331	PRIMARY EDUCATION TEACHING ASSOCIATE PROFESSIONALS	731	PRECISION WORKERS IN METAL AND RELATED MATERIALS		
332	PRE-PRIMARY EDUCATION TEACHING ASSOCIATE PROFESSIONALS	732	POTTERS, GLASS-MAKERS AND RELATED TRADES WORKERS		
333	SPECIAL EDUCATION TEACHING ASSOCIATE PROFESSIONALS	733	HANDICRAFT WORKERS IN WOOD, TEXTILE, LEATHER AND RELATED MATERIALS		
334	OTHER TEACHING ASSOCIATE PROFESSIONALS	734	PRINTING AND RELATED TRADES WORKERS		
341	FINANCE AND SALES ASSOCIATE PROFESSIONALS	741	FOOD PROCESSING AND RELATED TRADES WORKERS		
342	BUSINESS SERVICES AGENT AND TRADE BROKERS				
343	ADMINISTRATIVE ASSOCIATE PROFESSIONALS				

ANNEX 3		SYANGJA	39	BANGLADESH	84	BANIYA	28	TAJPURIYA	68
DISTRICT CODES		KASKI	40	HONG KONG	85	GHARTI/BHUJEL	29	THAKALI	69
TAPLEJUNG	01	MANANG	41	MALAYASIA	86	MALLAH	30	CHIDIMAR	70
PANCHTHAR	02	MUSTANG	42	JAPAN	87	KALWAR	31	PAHARI	71
ILAM	03	MYAGDI	43	SAUDI ARABIA	88	KUMAL	32	MALI	72
JHAPA	04	PARBAT	44	QATAR	89	HAJAM/THAKUR	33	BANGALI	73
MORANG	05	BAGLUNG	45	UNITED ARAB EMIRATES	90	KANU	34	CHHANTAL	74
SUNSARI	06	GULMI	46	UNITED KINGDOM	91	RAJBANSI	35	DOM	75
DHANKUTA	07	PALPA	47	UNITED STATES OF AMERICA	92	SUNUWAR	36	KAMAR	76
TEHRATHUM	08	NAWALPARASI	48	OTHER COUNTRY	93	SUDHI	37	BOTE	77
SANKHUWASABHA	09	RUPANDEHI	49	ANNEX 4		LOHAR	38	BRAHMU/BARAMU	78
BHOJPUR	10	KAPILBASTU	50	ETHNICITY CODES		TATMA	39	GAINE	79
SOLUKHUMBU	11	ARGHAKHANCHI	51	CHHETRI	01	KHATWE	40	JIREL	80
OKHALDHUNGA	12	PYUTHAN	52	BRAHMAN (HILL)	02	DHOBI	41	ADIBASI/JANAJATI	81
KHOTANG	13	ROLPA	53	MAGAR	03	MAJHI	42	DURA	82
UDAYAPUR	14	RUKUM	54	THARU	04	NUNIYA	43	CHURAUTE	83
SAPTARI	15	SALYAN	55	TAMANG	05	KUMHAR	44	BADI	84
SIRAHA	16	DANG	56	NEWAR	06	DANUWAR	45	MECHE	85
DHANUSHA	17	BANKE	57	MUSLIM	07	CHEPANG/PRAJA	46	LEPCHA	86
MAHOTTARI	18	BARDIYA	58	KAMI	08	HALUWAI	47	HALKHOR	87
SARLAHI	19	SURKHET	59	YADAV	09	RAJPUT	48	PUNJABI/SIKH	88
SINDHULI	20	DAILEKH	60	RAI	10	KAYASTHA	49	KISAN	89
RAMECHHAP	21	JAJARKOT	61	GURUNG	11	BADHAE	50	RAJI	90
DOLAKHA	22	DOLPA	62	DAMAIN/DHOLI	12	MARWADI	51	BYANGSI	91
SINDHUPALCHOK	23	JUMLA	63	LIMBU	13	SANTHAL/SATAR	52	HAYU	92
KAVREPALANCHOK	24	KALIKOT	64	THAKURI	14	DHAGAR/JHAGAR	53	KOCHE	93
LALITPUR	25	MUGU	65	SARKI	15	BANTAR	54	DHUNIA	94
BHAKTAPUR	26	HUMLA	66	TELI	16	BARAE	55	WALUNG	95
KATHMANDU	27	BAJURA	67	CHAMAR/HARIJAN/RAM . .	17	KAHAR	56	JAINE	96
NUWAKOT	28	BAJHANG	68	KOIRI	18	GANGAI	57	MUNDA	97
RASUWA	29	ACHHAM	69	KURMI	19	LODHA	58	RAUTE	98
DHADING	30	DOTI	70	SANYASI	20	RAJBHAR	59	YEHLMO	99
MAKWANPUR	31	KAILALI	71	DHANUK	21	THAMI	60	PATHARKATA/KUSWADIYA	100
RAUTAHAT	32	KANCHANPUR	72	MUSAHAR	22	DHIMAL	61	KUSUNDA	101
BARA	33	DANDHELDHURA	73	DUSADH/PASWAN/PASI . .	23	BHOTE	62	OTHER CASTE	102
PARSA	34	BAITADI	74	SHERPA	24	BING/BINDA	63		
CHITWAN	35	DARCHULA	75	SONAR	25	BHEDIYAR/GADERI	64		
GORKHA	36	INDIA	81	KEWAT	26	NURANG	65		
LAMJUNG	37	BHUTAN	82	BRAHMAN (TARAI)	27	YAKKHA	66		
TANAHUN	38	CHINA	83			DARAI	67		

ANNEX 5		ANNEX 7		ANNEX 9		OTHER LEGUMES 21		LEMON 47	
LANGUAGE CODES		MONTH CODES		QUANTITY CODES		TUBER AND BULB CROPS:		LIME 48	
NEPALI	01	BAISHAKH	01	KILOGRAM	01	WINTER POTATO	22	SWEET LIME 49	
MAITHILI	02	JETH	02	GRAM	02	SUMMER POTATO	23	OTHER CITRUS 50	
BHOJPURI	03	ASAR	03	MAUND	03	SWEET POTATO	24	NON-CITRUS FRUITS:	
THARU (DAGAURA/RANA)	04	SAUN	04	LITRE	04	COLOCASIA	25	MANGO 51	
TAMANG	05	BHADAU	05	MURI	05	OTHER TUBERS	26	BANANA 52	
NEWAR	06	ASOJ	06	PATHI	06	OILSEED CROPS:		GUAVA 53	
MAGAR	07	KATTIK	07	MANA	07	MUSTARD	27	JACK FRUIT 54	
AWADHI	08	MANGSIR	08	KURUWA	08	GROUND NUT	28	PINEAPPLE 55	
BANTAWA	09	PUS	09	NUMBER/PIECES	09	LINSEED	29	LICHEE 56	
GURUNG	10	MAGH	10	DOZEN	10	SESAME	30	PEAR 57	
LIMBU	11	FAGUN	11	ANNEX 10		OTHER OILSEED	31	APPLE 58	
BAJJIKA	12	CHAIT	12	CROP CODES		CASH CROPS:		PLUM 59	
URDU	13	ANNEX 8		CEREALS:		SUGARCANE	32	PAPAYA 60	
RAJBANSI	14	EDUCATION CODES		EARLY PADDY	01	JUTE	33	POMEGRANATE 61	
SHERPA	15	PRE-SCHOOL/KINDERGARTEN		MAIN PADDY	02	TOBACCO	34	OTHER FRUIT 62	
HINDI	16	. . . . .	00	UPLAND PADDY	03	OTHER (INCLUDING COTTON)		OTHER:	
CHAMLING	17	CLASS 1	01	WHEAT	04	. . . . .	35	TEA 63	
SANTHALI	18	CLASS 2	02	WINTER/SPRING MAIZE	05	SPICES:		THATCH 64	
CHEPANG	19	CLASS 3	03	SUMMER MAIZE	06	CHILIES	36	FODDER TREES 65	
DANUWAR	20	CLASS 4	04	MILLET	07	ONIONS	37	BAMBOO 66	
JHANGAD/DHANGAD	21	CLASS 5	05	BARLEY	08	GARLIC	38	OTHER TREES 67	
SUNUWAR	22	CLASS 6	06	BUCKWHEAT	09	GINGER	39		
BANGLA	23	CLASS 7	07	OTHER CEREALS	10	TURMERIC	40		
MARWADI/RAJASTHANI	24	CLASS 8	08	PULSES AND LEGUMES:		CARDAMOM	41		
MAJHI	25	CLASS 9	09	SOYBEAN	11	CORIANDER SEED	42		
OTHER LANGUAGE	26	CLASS 10	10	BLACK GRAM	12	OTHER SPICES	43		
ANNEX 6		SLC	11	RED GRAM	13	VEGETABLES:			
RELIGION CODES		CLASS 12/INTERMEDIATE		GRASS PEA	14	WINTER VEGETABLES	44		
HINDU	01	LEVEL	12	LENTIL	15	SUMMER VEGETABLES	45		
BOUDDHA	02	BACHELOR LEVEL	13	HORSE GRAM	16	CITRUS FRUITS:			
ISLAM	03	MASTER LEVEL	14	PEA	17	ORANGE	46		
KIRANT	04	PROFESSIONAL DEGREE	15	GREEN GRAM	18				
JAIN	05	LITERATE (NON-FORMAL		COARSE GRAM	19				
CHRISTIAN	06	EDUCATION)	16	COW PEA	20				
SHIKH	07	ILLITERATE	17						
BAHAI	08								
OTHER RELIGION	09								