

SOCIALIST REPUBLIC OF VIETNAM

FINAL  
ENGLISH  
TRANSLATION

QUESTIONNAIRE FOR LIVING STANDARDS SURVEY

# HOUSEHOLD

1992 - 1993

CLUSTER:

--	--	--

HOUSEHOLD NUMBER:

--	--

NATIONAL STEERING COMMITTEE

SEPTEMBER - 1992

LIVING STANDARDS HOUSEHOLD SURVEY IS OF USE TO YOUR COUNTRY  
AND DOES GOOD TO YOUR FAMILY.

Data from the living standards household survey is absolutely confidential and it is not used for any other purpose. This data will be used as a base for Government studying and making socio-economic policies to stabilize and improve living conditions of the people and of every family.

National Steering Committee  
of LIVING STANDARDS HOUSEHOLD SURVEY

CLUSTER: \_\_\_\_\_  
HEAD OF  
HOUSEHOLD: \_\_\_\_\_  
ADDRESS (OR DESCRIPTION): \_\_\_\_\_

HOUSEHOLD QUESTIONNAIRE NUMBER

DA. SURVEY INFORMATION

SUPERVISION OF PRINTOUTS, FIRST ROUND

SUPERVISOR: \_\_\_\_\_ DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_

SECOND ROUND OF SURVEY

>> PROPOSED DATE: \_\_\_\_\_

INTERVIEWER: \_\_\_\_\_ DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_

VERIFICATION OF QUESTIONNAIRE, SECOND ROUND

SUPERVISOR: \_\_\_\_\_ DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_

REINTERVIEW YES..1  
BY SUPERVISOR? NO...2

DATA ENTRY, SECOND ROUND

OPERATOR: \_\_\_\_\_ DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_

SUPERVISION OF PRINTOUTS, SECOND ROUND

SUPERVISOR: \_\_\_\_\_ DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_

FIRST ROUND

INTERVIEWER: \_\_\_\_\_ DATE: \_\_\_\_\_

DWELLING YES..1  
FOUND? NO...2 ( >> SUPERVISOR) \_\_\_\_\_ IS THE HEAD OF YES..1  
HOUSEHOLD THE NO...2( >>SUPERVISOR) \_\_\_\_\_  
SAME?

NAME OF NEW HEAD: \_\_\_\_\_

RELIGION BUDDHIST....1 PROTESTANT.....3 NONE.....5  
OF HEAD: CATHOLIC....2 OTHER.....4

ETHNIC GROUP KINH.....1 THAI .....3 KHOME ..5 NUNG....7 DAO.....9  
OF HEAD: TAY .....2 CHINESE ..4 MUONG...8 H'MONG..8 OTHER..10

LANGUAGE USED BY THE VIETNAMESE.....1  
RESPONDENT: OTHER.....2 SPECIFY:( ) \_\_\_\_\_ INTER- YES.1  
PRETER? NO..2

REMARKS: \_\_\_\_\_

VERIFICATION OF THE QUESTIONNAIRE, FIRST ROUND

SUPERVISOR: \_\_\_\_\_ DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_

REINTERVIEW BY SUPERVISOR?  
YES...1 NO....2

REASON:(IF REPLACED)

THIS HOUSEHOLD REPLACES HOUSEHOLD NO: \_\_\_\_\_ THIS HOUSEHOLD WILL  
BE REPLACED BY NO: \_\_\_\_\_  
DWELLING NOT FOUND/VACANT. 1  
OCCUPANT NOT AT HOME . . . 2  
REFUSAL . . . . . 3  
OTHER . . . . . 4

DATA ENTRY, FIRST ROUND

OPERATOR: \_\_\_\_\_ DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_

OB. SUMMARY OF SURVEY RESULTS

S E C T I O N	INTERVIEWER							SUPERVISOR			
	FIRST ATTEMPT			SECOND ATTEMPT				INTERVIEWER  SATISFACTORY....1 TO BE COMPLETED.2 TO BE REDONE....3	OPERATOR  SATISFACTORY...1 CORRECTIONS....2	CORRECTED IN OFFICE..1 CORRECTED DURING SECOND ROUND .....2 CORRECTED DURING CHECK-UP VISIT.....3 NOT CORRECTED.....4	
	DATE			DATE							
	DAY	MONTH	YEAR	DAY	MONTH	YEAR	RESULT COMPLETE.....1 PARTIAL.....2 NOT APPLICABLE..3				RESULT COMPLETE.....1 PARTIAL.....2
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											

OC. OBSERVATION AND COMMENTS

REMARKS BY THE INTERVIEWER ON THE FIRST ROUND

REMARKS BY THE INTERVIEWER ON THE SECOND ROUND

REMARKS BY THE SUPERVISOR ON THE FIRST ROUND

REMARKS BY THE SUPERVISOR ON THE SECOND ROUND

**SECTION 1.****PART A. HOUSEHOLD ROSTER**

PERSON INTERVIEWED: PREFERABLY THE HEAD OF HOUSEHOLD. IF HE/SHE IS NOT AVAILABLE, FIND A "PRINCIPAL RESPONDENT" TO ANSWER THE QUESTIONS IN HIS/HER PLACE. THE PERSON SELECTED MUST BE A MEMBER OF THE HOUSEHOLD WHO IS ABLE TO GIVE INFORMATION ON THE OTHER HOUSEHOLD MEMBERS.

= INTERVIEWER _____	
RESPONDENT: _____	ID CODE: <input type="text"/>

1-3. I would like to make a complete list of all the people who normally live and eat their meals together in this dwelling.

- \* First, I would like to have the names of all the members of your immediate family, who normally live and eat their meals together in this dwelling. Start with the head of the household, wife/husband of household head, his/her children in order of age.

ALWAYS WRITE DOWN THE HEAD OF THE HOUSEHOLD FIRST, FOLLOWED BY HIS/HER SPOUSE AND THEIR CHILDREN IN ORDER OF AGE. IF THERE IS MORE THAN ONE WIFE, START WITH THE FIRST WIFE, FOLLOWED BY HER CHILDREN IN ORDER OF AGE, THEN THE SECOND WIFE AND HER CHILDREN IN ORDER OF AGE, AND SO ON.

WRITE DOWN THE NAME IN CAPITAL LETTERS, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD FOR EACH PERSON.

- \* Please give me the names of any other persons related to the head of the household or to his/her wife/husband, together with their families, who normally live and eat their meals here.

WRITE DOWN THE NAME, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD.

- \* Please give me the names of any other persons not related to the head of household or to his/her wife/husband but who normally live and eat their meals here. For instance, tenants, lodgers, servants or other persons who are not relatives.

WRITE THE NAME, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD.

- \* Are there any other persons not now present but who normally live and eat their meals here? For example, any person studying somewhere else or who is on vacation or who is visiting other people.

WRITE THE NAME, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD.

- \* Are there any other persons who slept here last night but who do not normally live here?

WRITE THE NAME, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD.

FOR EACH PERSON LISTED IN QUESTION 1, ASK THE QUESTIONS 4-11) AND CLASSIFY THE PERSON ACCORDINGLY IN Q.12. COMPLETE THE ENTIRE LINE BEFORE GOING ON TO THE NEXT PERSON LISTED.

4-11. Now I would like to have some information about each of the persons you mentioned.

IF THE RESPONDENT HAS ANY DIFFICULTY WITH HIS AGE OR DATE OF BIRTH (QUESTION 6), USE THE CALENDAR OF EVENTS TO MAKE AN ESTIMATE.

12. CLASSIFY EACH PERSON ACCORDING TO THE FOLLOWING CRITERIA.

LOOK AT THE ANSWER TO QUESTION 11.

- \* ALL PERSONS ALIVE FOR WHOM THE ANSWER IS 6 MONTHS OR LESS ARE CLASSIFIED HOUSEHOLD MEMBERS. DECEASED INDIVIDUALS ARE NEVER CLASSIFIED AS HOUSEHOLD MEMBERS. LODGERS ARE NOT CLASSIFIED AS HOUSEHOLD MEMBERS. HIRED WORKERS AND SERVANTS, IF THEY HAVE THEIR OWN FAMILY IN A DIFFERENT PLACE ARE ALSO NOT CLASSIFIED AS HOUSEHOLD MEMBERS. GUESTS WHO HAVE COME TO VISIT FOR 6 OR MORE MONTHS ARE CLASSIFIED AS MEMBERS OF HOUSEHOLD.

- \* IF THE ANSWER IS MORE THAN 6 MONTHS, ONLY THE FOLLOWING ARE HOUSEHOLD MEMBERS:

- THE HEAD OF HOUSEHOLD
- INFANTS LESS THAN 6 MONTHS OLD
- PUPILS, STUDENTS LIVE IN THE SCHOOL OR ELSEWHERE BUT SUPPORTED BY THE HOUSEHOLD
- PEOPLE WHO WILL LIVE PERMANENTLY IN THE HOUSEHOLD, INCLUDING BOTH PEOPLE WITH CORRECT PAPERWORK (MARRIAGE CERTIFICATE, PERMISSION TO TRANSFER WORK, DEMOBILIZATION PAPERS,...) AND THOSE WITHOUT PAPERS LIKE IN-LAWS, OR DEMOBILIZED SOLDIERS.

- \* A PART FROM THE CASES LISTED ABOVE, ALL OTHER PERSONS FOR WHOM THE ANSWER IS MORE THAN 6 MONTHS ARE NOT HOUSEHOLD MEMBERS. ENTER CODE 1 FOR EACH HOUSEHOLD MEMBER AND CODE 2 FOR ALL OTHER PERSONS. GO ON TO THE NEXT PERSON LISTED.

**COLUMNS A AND B**

COLUMN A. ON THE LEFT SIDE OF THE FORM, PUT A CROSS IN COLUMN A NEXT TO THE NAMES OF ALL PERSONS WITH CODE 1 IN QUESTION 12.

COLUMN B. ENTER THE AGE IN COMPLETED YEARS (SEE QUESTION 6) OF ALL PERSONS WITH CODE 1 IN QUESTION 12 ( I.E. THOSE WITH A CROSS IN COLUMN A ). SEE HOW TO CALCULATE AGE IN THE INTERVIEWER'S HANDBOOK. THAT IS, FOR PEOPLE AGE 4 YEARS AND 8 MONTHS, ENTER 4. FOR PEOPLE AGE 9 MONTHS, ENTER 0.

**FILLING-IN THE HOUSEHOLD CARD**

WRITE THE NAMES OF ALL PERSONS WITH CODE 1 IN QUESTION 12 ON THE HOUSEHOLD CARD.

From now on, I would like you to talk about these persons when I ask you questions about the members of your household.

READ OUT THE NAMES AND GIVE THE CARD TO THE RESPONDENT.

>>NEXT PAGE

## PART A. HOUSEHOLD ROSTER ( CONT. )

FOR EACH PERSON LISTED IN QUESTION 1, ASK QUESTION 4 - 12

[illegible]

TABLE OF THE LUNAR - SUN CALENDAR YEAR EQUIVALENCE

LUNAR CALENDAR YEARS	S U N C A L E N D A R Y E A R S							
Mouse	1900	1912	1924	1936	1948	1960	1972	1984
Buffalo	1901	1913	1925	1937	1949	1961	1973	1985
Tiger	1902	1914	1926	1938	1950	1962	1974	1986
Cat	1903	1915	1927	1939	1951	1963	1975	1987
Dragon	1904	1916	1928	1940	1952	1964	1976	1988
Snake	1905	1917	1929	1941	1953	1965	1977	1989
Horse	1906	1918	1930	1942	1954	1966	1978	1990
Goat	1907	1919	1931	1943	1955	1967	1979	1991
Monkey	1908	1920	1932	1944	1956	1968	1980	1992
Cock	1909	1921	1933	1945	1957	1969	1981	1993
Dog	1910	1922	1934	1946	1958	1970	1982	
Pig	1911	1923	1935	1947	1959	1971	1983	

Years of which the last digit is 0 belong to the 7th Heaven's Stem

- # -	1	- # -	8th	- # -
- # -	2	- # -	9th	- # -
- # -	3	- # -	10th	- # -
- # -	4	- # -	1st	- # -
- # -	5	- # -	2sd	- # -
- # -	6	- # -	3rd	- # -
- # -	7	- # -	4th	- # -
- # -	8	- # -	5th	- # -
- # -	9	- # -	6th	- # -



## SECTION 1

## PART B. INFORMATION ON PARENTS' HOUSEHOLD MEMBERS

	1 Is the natural father of ... (NAME) living in this house- hold?	2 COPY THE IDENTI- FICA- TION CODE FOR THE FATHER	3 Is the father of ... (NAME) still alive?	4 Did the father of ... (NAME) attend school?	5 What was the highest grade he completed?	6 What year of high school, vocational school, university/ college did he finish?	7 What was the highest diploma or degree obtained by the father of (NAME)?	8 What kind of work did the father of (NAME'S). do for most of his life?	9 Is the natural mother of ... (NAME) living in this house- hold?	10 COPY THE MO- THER'S IDENTI- FICA- TION CODE	11 Is the mother of ... (NAME) still alive?	12 Did the mother of (NAME) attend school?	13 What was the highest grade she completed?	14 What year of high school, vocational school, university/ college did she finish?	15 What was the highest diploma or degree obtained by the mother of (NAME)?	16 What kind of work did the mother of (NAME'S). do for most of her life?	
	YES...1 NO...2 (>>3)	>>9	YES...1 NO...2 (>>8) DON'T KNOW...3 (>>9)	YES...1 NO...2 (>>8) DON'T KNOW...3 (>>8)	NONE ....0 GR.1 ....1 GR.2 ....2 GR.3 ....3 GR.4 ....4 GR.5 ....5 GR.6 ....6 GR.7 ....7 GR.8 ....8 GR.9 ....9 GR.10 ...10 GR.11 ...11 GR.12 ...12 KNOW ...13 (>>8)	NONE.....0 HSVE1.....1 HSVE2.....2 HSVE3.....3 U/C1.....4 U/C2.....5 U/C3.....6 U/C4.....7 U/C5.....8 U/C6.....9 U/C7.....10	NONE.....0 PRIMARY.....1 LOW SECONDARY.2 UPP. SECONDARY.3 TECHNICAL WORKER.....4 VOCATIONAL HIGH SCHOOL...5 UNDERGRADUATE.6 MASTERS.....7 UNDER- DOCTORATE.....8 DOCTORATE.....9	PROFES- SION CODE	>> NEXT PER- SON	YES...1 NO...2 (>>11)	YES...1 NO...2 (>>16) DON'T KNOW...3 (>>NEXT PERSON)	YES...1 NO...2 (>>16) DON'T KNOW...3 (>>16)	NONE ....0 GR.1 ....1 GR.2 ....2 GR.3 ....3 GR.4 ....4 GR.5 ....5 GR.6 ....6 GR.7 ....7 GR.8 ....8 GR.9 ....9 GR.10 ...10 GR.11 ...11 GR.12 ...12 KNOW ...13 (>>16)	NONE.....0 HSVE1.....1 HSVE2.....2 HSVE3.....3 U/C1.....4 U/C2.....5 U/C3.....6 U/C4.....7 U/C5.....8 U/C6.....9 U/C7.....10	NONE.....0 PRIMARY.....1 LOW SECONDARY.2 UPP. SECONDARY.3 TECHNICAL WORKER.....4 VOCATIONAL HIGH SCHOOL...5 UNDERGRADUATE.6 MASTERS.....7 UNDER- DOCTORATE.....8 DOCTORATE.....9	PROFES- SION CODE	>> NEXT PERSON
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
15																	

PROVINCE CODE	
HA GIANG.....	1
TUYEN QUANG.....	2
CAO BANG.....	3
LANG SON.....	4
LAI CHAU.....	5
SON LA.....	6
BAC THAI.....	7
LAO CAI.....	8
YEN BAI.....	9
QUANG NINH.....	10
LAM DONG.....	11
GIA LAI.....	12
KON TUM.....	13
DAC LAC.....	14
HA NOI.....	15
HAI PHONG.....	16
HA BAC.....	17
VINH PHU.....	18
HA TAY.....	19
HOA BINH.....	20
HAI HUNG.....	21
THAIBINH.....	22
NAM HA.....	23
NINH BINH.....	24
THANH HOA.....	25
NGHE AN.....	26
HA TINH.....	27
QUANG TRI.....	28
QUANG BINH.....	29
THUA THIEN HUE.....	30
QUANG NAM-DA NANG.....	31
QUANG NGAI.....	32
BINH DINH.....	33
PHU YEN.....	34
KHANH HOA.....	35
NINH THUAN.....	36
BINH THUAN.....	37
HO CHI MINH CITY.....	38
DONG NAI.....	39
SONG BE.....	40
TAY NINH.....	41
LONG AN.....	42
BEN TRE.....	43
DONG THAP.....	44
TRA VINH.....	45
VINH LONG.....	46
AN GIANG.....	47
TIEN GIANG.....	48
CAN THO.....	49
SOC TRANG.....	50
KIEN GIANG.....	51
MINH HAI.....	52
BA RIA-VUNG TAU.....	53

COUNTRC	
LAO.....	71
CAMPUCHEA.....	72
THAILAND.....	73
CHINA.....	74
HONGKONG.....	75
AUSTRALIA.....	76
FRANCE.....	77
WESTERN EUROPE.....	78
OLD USSR.....	79
EASTERN EUROPE.....	80
USA.....	81
CANADA.....	82
OTHER.....	83

## SECTION 1

## PART C. CHILDREN OF HOUSEHOLD MEMBERS WHO ARE LIVING ELSE WHERE AND NOT MEMBERS OF THE HOUSEHOLD

1. Does any member of your household have children under 30 years of age not living here in this household?

YES.....1

NO.....2 (&gt;&gt; SECTION 2)

FOR EACH CHILD LISTED IN QUESTION 2, ASK QUESTIONS 4 - 16

ORDER	2 What are their names?  LIST ALL THE CHILDREN UNDER 30 YEARS OF AGE WHO DO NOT LIVE IN THIS HOUSEHOLD  COMPLETE THE LIST BEFORE GOING TO 4 - 16	3 Sex ?  MAL.1 FEM.2	4 How old is... [NAME] now?  YEARS	5 Does the natural father of [NAME] live in this household ?  YES...1 NO...2 (>>7)	6 COPY THE FATHER'S ID CODE.	7 Does the natural mother of [NAME] live in this household ?  YES...1 NO...2 (>>9)	8 COPY THE MOTHER'S ID CODE.	9 Has [NAME] attended school?  YES...1 NO...2 (>>14)	10 Is [NAME] attending school now ?  YES...1 NO...2	11 What was/is the highest grade completed by [NAME] ? NONE ...0 GR.1 ...1 GR.2 ...2 GR.3 ...3 GR.4 ...4 GR.5 ...5 GR.6 ...6 GR.7 ...7 GR.8 ...8 GR.9 ...9 GR.10 ...10 GR.11 ...11 GR.12 ...12	12 What year of high school, vocational school, university/college did [NAME] finish? NONE...0 HSVE1...1 HSVE2...2 HSVE3...3 U/C1...4 U/C2...5 U/C3...6 U/C4...7 U/C5...8 U/C6...9 U/C7...10	13 What was the highest diploma or degree obtained by [NAME] ? PRIMARY.....1 LOWER SECONDARY...2 UPPER SECONDARY...3 TECHNICAL WORKER.....4 VOCATIONAL HIGH SCHOOL.....5 UNDERGRADUATE...6 MASTERS.....7 UNDERDOCTORATE...8 DOCTORATE.....9	14 In what province does [NAME] live ?  IF...[NAME]... LIVES OVERSEAS >> 16  NAME OF PROVINCE		PROVINCE CODE	15 Where does [NAME] live ?  Is it a...? READ TO THE RESPONDANT: City.....1 Large town...2 Small town...3 Rural areas.....4 Other.....5  >>NEXT PERSON	16 In what country does [NAME] live? LAO .....71 KAMPUCHEA...72 THAILAND...73 CHINA .....74 HONGKONG...75 AUSTRALIA...76 FRANCE.....77 ESTERN EUROPEAN...78 OLD USSR...79 EAST EUROPE...80 USA .....81 CANADA .....82 OTHER .....83  >>NEXT PERSON
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
15																	

TABLE OF OLD - EDUCATION SYSTEM FOR DATA COMPILING EQUIVALENCE

Level	Overall system of basic education	OLD EDUCATION SYSTEM							
		French-colonized period	1945 - 1954		Colonized areas	Supplementary evening school to make up for missed classes or grades	Education system in the North		Current system in the South
			Independent areas				Before 1951	Current system (from Vinh)	
			1945-1950	1950-1954					
Primary	Grade 1	Grade 5 (Cours enfantin)			Grade 5		Beginner's course	Grade 1	Grade 1
	Grade 2	Grade 4 (Cours preparatoire)	Grade 4	Grade 1	Grade 4	Grade 1	Grade 1	Grade 2	Grade 2
	Grade 3	Grade 3 (Cours elementaire)	Grade 3	Grade 2	Grade 3	Grade 2	Grade 2	Grade 3	Grade 3
	Grade 4	Grade 2 (Moyen1) Grade 2 (Moyen 2)	Grade 2	Grade 3	Grade 2	Grade 3	Grade 3	Grade 4	Grade 4
Lower secondary	Grade 5	Grade 1 (Superieur) Grade 1 (Certificat)	Grade 1	Grade 4	Grade 1	Grade 4	Grade 4	Grade 5	Grade 5
	Grade 6	First year (Premiere annee )	First year		First year	Grade 5			Grade 6
	Grade 7	Second year (Deuxieme annee)	Second year	Grade 5	Sixth year	Grade 6	Grade 5	Grade 5	Grade 7
	Grade 8	Third year (Troisieme annee)	Third year	Grade 6	Fifth year	Grade 7	Grade 6 Grade 7	Grade 6 Grade 7	Grade 8
	Grade 9	Fourth year(Quatrieme annee)	Fourth year	Grade 7	Fourth year	Grade 7B			Grade 9
Upper secondary	Grade 10	First year. First part of French baccalaureete (Baccalaureat premiere partie)	First year of speciality	Grade 8	Third year	Grade 8	Grade 8	Grade 10	Grade 10
	Grade 11	Second year (Baccalaureat deuxieme partie)	Second year of speciality	Grade 9	Second year	Grade 9 Grade 10A	Grade 9	Grade 11	Grade 11
	Grade 12	Third year. Completed French baccalaureete	Third year of speciality		First year	Grade 10	Grade 10	Grade 12	Grade 12

SECTION 2. EDUCATION  
ASK ALL HOUSEHOLD MEMBERS OF CRECHE, KINDERGARDEN AGE AND OVER.

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	10	11		12	13	14	15
	Can ...[NAME]... read, write?	do writ ten cal- culat- ions ?	Has... [NAME] worked as an apprentice?	How many months of appren- tice- ship?	Has... [NAME] ever atten- ded or is he/ she atten- ding a school?	What was/is the highest grade he/she completed?	What year of high school, vocational school, university/ college did he/she finish?	What was the highest diploma or degree obtained by [NAME].?	What kind of training was received? NATURAL SCIENCES.....1 SOCIAL SCs...2 ECONOMICS...3 TECHNOLOGY AND INDUSTRY.....4 AGRICULTURE, FORESTRY, FISHERIES...5 MEDICINE AND PHARMACY.....6 CULTURE, ART, SPORTS.....7 LITERATURE, FOREIGN LANGUAGE, INTERNATIONAL RELATIONS, HISTORY, EDUCATION....8 OTHER.....9	Besides that has [NAME] been trained in any other spe- cialty?	How long was [NAME]. trained?		What kind of training was received? NATURAL SCIENCES.....1 SOCIAL SCs...2 ECONOMICS...3 TECHNOLOGY AND INDUSTRY.....4 AGRICULTURE, FORESTRY, FISHERIES...5 MEDICINE AND PHARMACY.....6 CULTURE, ART, SPORTS.....7 LITERATURE, FOREIGN LANGUAGE, INTERNATIONAL RELATIONS, HISTORY, EDUCATION....8 OTHER.....9	Was the last school attend- ed...	Is... [NAME] attend- ing school this year?	When did [NAME]. stop attending school?
	BOTH....1 READ ONLY...2 NEITHER.3	YES.1 NO..2	YES, CURRENTLY APPRENTICE.1  YES, BUT NO LONGER APPRENTICE.2  NO, NEVER APPRENTICE.3 (>>5)	MONTHS	DON'T INCLUDE SHORT TERM SPECIAL TRAINING COURSES  YES..1 NO..2 (>>NEXT PERSON)	NONE .....0 GR.1 .....1 GR.2 .....2 GR.3 .....3 GR.4 .....4 GR.5 .....5 GR.6 .....6 GR.7 .....7 GR.8 .....8 GR.9 .....9 GR.10 .....10 GR.11 .....11 GR.12 .....12	NONE.....0 PRIMARY...1(>>10) LOWER SECONDARY.2 (>>10) UPPER SECONDARY.3 (>>10) TECHNICAL WORKER.....4 VOCATIONAL HIGH SCHOOL.....5 UNDERGRADUATE...6 MASTERS.....7 UNDERDOCTORATE..8 DOCTORATE.....9			YES..1 NO...2 (>>13)	MONTHS	YEARS		Pub- lic?..1  Mixed Govern./ pri- vate?..2  Pri- vate?..3	YES..1 (>>16 NEXT PAGE) NO...2	>>19 NEXT PAGE  MNT YEAR
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																
11																
12																
13																
14																
15																

SECTION 2. EDUCATION (CON.)

I D E N T I F I C A T I O N C O D E	16	17	18	19	20							
	Does .[NAME]. live in this house- hold while atten- ding school?	During the last 7 days accor- ding to the class sche- dule, how many hours has [NAME] had to attend class?	During the past 7 days how many hours has .[NAME]. actually spent attending classes?	EXAMINE Q.15  IF THE QUES- TION HAS BEEN ANSWERED AND THE DATE IS LESS THAN 12 MONTHS AGO.....1	How much has your household spent during the past 12 months on..[NAME] education for  IF NOTHING WAS SPENT, WRITE ZERO. IF THE RESPONDENT CAN ONLY GIVE A TOTAL AMOUNT, WRITE DK IN THE RELEVANT COLUMNS AND THE TOTAL NUMBER IN COLUMN H							
	YES,NOW STUDYING.1 YES,BUT NOW ON SUMMER BREAK....2 (>>20) NO.....3 (>>20)	1 DAYS	2 HOURS	Q.15 NOT ANSWERED OR GREATER OR EQUAL TO 12 MONTHS..2 (>>27 NEXT PAGE)	A. Tuition and registra- tion fees?	B. Contribution to parents associations or to school? INCLUDE PAYMENTS IN KIND SUCH AS RICE	C. Uniform and sport clothes?	D. Book and school supplies?	E. Transpor- tation to school?	F. Pocket money at school or food money and value in k'nd of room and board for students at boarding school and lunch money at nursery school or kindergarten?	G. Other? (club, extra classes,etc)	H. Total expenses? (A+B+C+D+E+F +G)  >>21 NEXT PAGE
					THOUSAND DONGS	THOUSAND DONGS	THOUSAND DONGS	THOUSAND DONGS	THOUSAND DONGS	THOUSAND DONGS	THOUSAND DONGS	THOUSAND DONGS
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												

## SECTION 2. EDUCATION ( END )

I D E N T I F I C A T I O N  C O D E	21	22	23		24	25		26	27	28	29
	Did ... [NAME]. have a schol- arship during the past 12 months?  INCLU- DING SCHOLAR- SHIPS IN KIND  YES...1 NO...2 ( >>23 )	What was the value of the scholarship for the past 12 months?  THOUSAND DONGS	How far is is..... [NAME's]... school from here?  DISTANCE CODE : METER...1 KILO- METER...2	DIS- TANCE	DIS- TANCE CODE	How does .[NAME].go to school?  PUBLIC TRASPORT...1 MOTO BIKE...2 BICYCLE/ CYCLO.....3 GO ON FOOT..4 OTHER.....5 ( SPECIFY__ )	TIME ONE WAY  HRS MIN		Does .[NAME] have enough text books ?  YES, ENOUGH.1 YES, SOME...2 NONE .....3	In addition has.[NAME]. attended any foreign language course in the past 12 months?  YES...1 NO...2 ( >> NEXT PERSON )	What foreign languages has .[NAME]. studied in the past 12 months?  ENGLISH.....1 FRANCH.....2 GERMAN.....3 RUSSIAN.....4 CHINESE.....5 JAPANESE....6 OTIHER.....7
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											

# SECTION 3. HEALTH

I D E N T I F I C A T I O N  C O D E	1 Have you had any illness or injury during the past 4 wks? For example, have you had a cough, a cold, diarrhea, an injury due to an accident, or any other illness?	2 And during the past 12 months?	3 What diseases did you suffer from?	4 How long ago did this illness or injury start?	5 For how many days during the past 4 weeks did you suffer from this illness or injury?	6 For how many days during the past 4 weeks were you unable to carry on your usual activities because of this illness or injury?	7 Has anyone been consulted for treating this illness or injury during the past 4 weeks. For example a doctor, physician, nurse, pharmacist, healer, midwife, or other health practitioner?	8 Who was the first person consulted to treat you in past 4 weeks?	9 Where did the consultation take place?	10 To whom does this treatment establishment belong?	11 How far was this consultation from here?	12 How did you go to the consultation place?
	YES.....1 (>>3) NO ILLNESS OR INJURY..2	YES.....1 NO.....2 (>>NEXT PAGE)	CHECK Q.1 IF THE ANSWER IS "NO" >>21  DISEASES CODE  IF "OTHER, CODE 27" SPECIFY THE DISEASE ON THE RIGHT SIDE OF THIS PAGE	TIME UNIT DAY.....3 WEEK.....4 MONTH...5 QUARTER.6 HALF YEAR....7 YEAR....8  AMOUNT OF TIME TIME UNIT	DAYS	DAYS	YES..1 NO...2(>>19)	DOCTOR.....1 PHYSICIAN'S ASSISTANT..2 NURSE.....3 PHARMACIST..4 MIDWIFE.....5 BONZE.....6 HEALER.....7 OTHER.....8 (SPECIFY)	HOSPITAL....1 CLINIC.....2 WORK PLACE..3 PHARMACY....4 COMMUNAL CLINIC.....5 PAGODA.....6 (>>11) THE HOME OF THE PERSON CONSULTED..7 (>>11) THE SICK PERSON'S HOME.8 (>>15) OTHER.....9 (SPECIFY)	PUBLIC...1 PRIVATE.2	KILOMETERS	PUBLIC TRANSPORT.1 OFFICE CAR.....2 MOTORBIKE, PRIVATE CAR .....3 BICYCLE/CYCLO....4 GO ON FOOT.....5 OTHER.....6 (SPECIFY.....)  >>13 NEXT PAGE
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												



## SECTION 3. HEALTH (CON.)

I D E N T I F I C A T I O N C O D E	13 How long did it take you to go to this consultation?		14 How much has been spent altogether for transportation to the place of consultation during the past 4 weeks?	15 How much did you pay or will you have to pay to the person who treated you during the past 4 weeks? (EXCLUDE THE COST OF THE MEDICINE)	16 Did you have to spend a night in a hospital or other establishment during the past 4 weeks because of this illness or injury?	17 How many nights during the past 4 weeks?	18 How much have you paid or will you pay altogether for this hospital stay?	19 In the past 4 weeks did you use oriental or western medicine to treat this illness?	20 How much has been spent altogether for medicine for this illness or injury in the past 4 weeks?	21 How much have you paid altogether including money and value in kind for illness injury or for your health in general in the past 12 months?	22 IS THE PERSON 6 OR OLDER?	23 Have you ever smoked cigarettes for more than 6 months?	24 Do you smoke cigarettes now?	25 How many cigarettes do you smoke per day, on average?	26 Have you ever smoked tobacco with a water-pipe or chewed tobacco for more than 6 months?	27 Do you smoke or chew tobacco now?	28 How many grams of pipe tobacco do you smoke per day, on average?
	HOURS	TIME ONE WAY ONLY MINS	THOUSAND DONGS	THOUSAND DONGS	YES..1 NO...2 (>>19)	NIGHTS	THOUSAND DONGS	NONE ...0 (>>21) ORIENTAL..1 WESTERN..2 COMBINATION ...3	THOUSAND DONGS	THOUSAND DONGS	YES..1 NO...2 (>>NEXT PERSON)	YES..1 NO...2 (>>26)	YES..1 NO...2 (>>26)	NUMBERS	YES..1 NO...2 (>>NEXT PERSON)	YES..1 NO...2 (>>NEXT PERSON)	GRAMS
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
15																	

S E C T I O N   4  
E M P L O Y M E N T

Now I would like to ask you some questions about all work that your household members have done during the past 12 months. Let's begin with the head of household, then other members.

## SECTION 4

## PART A. TYPE OF WORK AND JOB SEARCH

ASK ALL HOUSEHOLD MEMBERS AGED 6 YEARS OLD AND OVER

	1 IS THE HOUSE- HOLD MEMBER ANSWER- ING THE QUES- TIONS 11- 13 SELF?	2 During the past 7 days, have you worked for pay for a unit or someone not a member of your household, for example, an employer, a firm, the Government or some other person outside your household, or foreign company?	3 And dur- ing the past 12 mon- ths?	4 During the past 7 days, have you worked in a field or garden belonging to or rented by yourself or your house- hold, or have you raised livestock?	5 And dur- ing the past 12 mon- ths?	6 During the past 7 days have you worked in a business enterprise or profession belonging to yourself or your household? For example as an indepen- dent merchant or fisherman, lawyer, trader doctor or other self-employed activity?	7 And dur- ing the past 12 mon- ths?	8 AMONG THE ANSWERS TO 2, 4 AND 6 IS THERE A "YES" (CODE 1)?	9 Have you looked for work during the last 7 days?	10 What is the form of work you are looking now?	11 In looking for work, during the past 7 days, have you been helped by, or made use of.... A government organization?.....1 A social organization?.....2 A private service?.....3 Family connections?.....4 Mass media?.....5 Yourself?.....6 Other methods?.....7  WAGE EARNER...1 SELF- EMPLOYED...2 ANY WORK....3	12 Why did you not look for work during the past 7 days? (MAIN REASON)  SICK.....1 HANDICAPPED.....2 TOO OLD/RETIRED...3 DO NOT WANT WORK...4(>>14) STUDENT.....5(>>14) HOUSEWORK/ CHILDCARE.....6(>>14) TOO YOUNG.....7(>>14) ON VACATION.....8(>>14) WAITING TO START NEW JOB.....9(>>14) NO WORK EXISTS...10(>>14) DON'T KNOW HOW TO LOOK.....11(>>14) OTHER REASONS...12(>>14)	13 What kind of work did you do for most of your life?  PROFES- SION CODE (AS IN VLSS1B)	14 AMONG THE ANSWERS TO QUES- TIONS 3, 5 AND 7, IS THERE A "YES" (CODE 1)?  YES.....1 ( >> PART E ) NO.....2 ( >> PART H )
1	YES...1 NO...2	YES...1 (>>4) NO...2	YES...1 NO...2	YES...1(>>6) NO...2	YES...1 NO...2	YES...1 (>> 8) NO...2	YES...1 NO...2	YES...1 NO...2	YES...1 NO...2 (>>12)	WAGE EARNER...1 SELF- EMPLOYED...2 ANY WORK....3	FIRST SECOND THIRD			
2														
3														
4														
5														
6														
7														
8														
9														
10														
11														
12														
13														
14														
15														

SECTION 4. PART B. MAIN JOB DURING THE PAST 7 DAYS

I D E N T I F I C A T I O N  C O D E	1 During the past 7 days, what was your main job?		2 What kind of trade, industry, or business is it connected with?		3 For how many days during the past 7 days did you do this work?	4 During these days, on average how many hours per day did you do this work?	5 For how many weeks during the past 12 months did you do this work?  CALENDAR WEEKS	6 During these weeks how many hours did you usually work per week?	7 How long have you been doing this work?  IF OVER 5 YEARS, LEAVE MONTHS BLANK		8 In this work, were you self-employed on a farm or in a business belonging to your household?	9 Have you done any other work in the past 7 days?  YES...1 (>>PART C)  NO....2 (>>10 NEXT PAGE) (>>PART D)
	DESCRIPTION	CODE	TYPE	CODE	DAYS	HOURS PER DAY	WEEKS	HOURS PER WEEK	YRS.	MON.		
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												

SECTION 4. PART B. MAIN JOB DURING THE PAST 7 DAYS (CONT.)

	10 For whom did you work? READ TO THE RESPONDENT The Communist Party, government or army?.....1 (>>12) Social organi- zation?....2 (>>12) State owned company?...3 (>>12) Mixed govt/private enterprise?.....4 Joint venture with foreign partner..5 100%foreign investment?....6 Cooperative?.....7 Private company or household?.....8 Other?.....9 (SPECIFY _____)	11 How many people altogether work at the place where you do this work?  PERSONS	12 How far from this dwelling is the place where you did this work?  DISTANCE CODE METER...1 KILOME- TER....2		13 How do you go to work?  PUBLIC TRAN- SPORT....1 OFFICE'S BUS/CAR..2 MOTORBIKE/ PRIVATE CAR.....3 BICYCLE..4 FOOT.....5 OTHER ....6 (SPECIFY)	14 How long does it take you to go to your work- place?  TIME ONE WAY ONLY		15 How often do you go there? For example, twice a day, once a week?  EACH TIME INCLUDES THE RETURN		16 Have you received or will receive money or value in kind as salary or wage for this work?  YES....1 NO.....2 (>>18 NEXT PAGE )	17 How much is the money or the value in kind?  How often do you receive it?  THOUSAND DONGS TIME UNIT	
			DIS- TANCE	DIST ANCE CODE		HRS	MIN	TIMES	TIME UNIT			
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												

1016

TIME UNIT: HOUR...2 DAY...3 WEEK...4 MONTH...5 QUARTER...6 HALF YEAR..7 YEAR...8

VLSS482

SECTION 4. PART B. MAIN JOB DURING THE PAST 7 DAYS (CONT.)

I D E N T I F I C A T I O N  C O D E	18 Besides the money reported earlier do you receive any of following additional payments ?																			
	IF NOTHING WRITE ZERO IN THE COLUMN OF THE CORRESPONDING ITEM																			
	IF RESPONDENT CAN ONLY GIVE A TOTAL AMOUNT WRITE UNCLER IN THE RELEVANT COLUMNS AND THE TOTAL AMOUNT IN COLUMN H ( NEXT PAGE )																			
	A. Payment in cash and in kind as monthly, quarterly, and yearly remuneration ?				B. Payment in cash or kind of initiative, science study rewards ?				C. Payment in cash and in kind for lunch ?				D. Payment in cash and in kind in the TEI or other holidays?				E. Payment in cash and in kind for subsidies on rice, electricity, bicycle,...?			
	A1. IN CASH		A2. IN KIND		B1. IN CASH		B2. IN KIND		C1. IN CASH		C2. IN KIND		D1. IN CASH		D2. IN KIND		E1. IN CASH		E2. IN KIND	
	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT
	1																			
	2																			
	3																			
	4																			
5																				
6																				
7																				
8																				
9																				
10																				
11																				
12																				
13																				
14																				
15																				

1017

TIME UNIT: HOUR...2 DAY...3 WEEK...4 MONTH...5 QUARTER...6 HALF YEAR...7 YEAR...8

VLSS403

SECTION 4. PART B. MAIN JOB DURING THE PAST 7 DAYS (END)

I D E N T I F I C A T I O N  C O D E	18 (CONT.)												19		20		21	22	23	24	25			
	<div style="text-align: center; border: 1px solid black; padding: 5px;">TOTAL AMOUNT</div>												Do you receive protective clothing and equipment for this work?		Have you spent any money to keep or to guarantee this work?		Have you had or will have excursion or summer holidays in this work?	Do you receive paid sick, pregnant or injury leave in this work?	Will you receive a retirement pension in this work?	Are you entitled to free or subsidized medical care in this work?	Have you done any other work during the last 7 days?			
	F. Value in cash and in kind for compensation for exposure to toxins and poisons, night shift, additional hours,...				G. Value in cash and in kind of other kind of payments? (SPECIFY _____)				H. Total amount? (A+B+C+D+E+F+G)				And what is the value of this clothing and equipment?		And how much is it?									
	F1. IN CASH		F2. IN KIND		G1. IN CASH		G2. IN KIND		H1. IN CASH		H2. IN KIND		IF NO WRITE ZERO		IF NO WRITE ZERO									
THOUSAND DONGS		TIME UNIT		THOUSAND DONGS		TIME UNIT		THOUSAND DONGS		TIME UNIT		THOUSAND DONGS		TIME UNIT		THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	YES...1 NO...2	YES...1 NO...2	YES...1 NO...2	YES...1 NO...2	YES...1 NO...2  PROBE THOROUGHLY FOR SECONDARY JOBS  YES...1 (>>PART C) NO...2 (>>PART D)
1																								
2																								
3																								
4																								
5																								
6																								
7																								
8																								
9																								
10																								
11																								
12																								
13																								
14																								
15																								

1018

TIME UNIT: HOUR...2 DAY...3 WEEK...4 MONTH...5 QUARTER...6 HALF YEAR...7 YEAR...8

VI SS404

SECTION 4. PART C. SECONDARY JOB DURING THE PAST 7 DAYS

I D E N T I F I C A T I O N  C O D E	1 Please describe the work to which you devoted most time, after your main job during the past 7 days.		2 What kind of trade, industry or business is it connected with?		3 For how many days during the past 7 days did you do this work?	4 On these days, on average about how many hours a day did you do this work?	5 For how many weeks during the past 12 months did you do this work?  CALENDAR WEEKS	6 During these weeks how many hours per week did you usually do this work?  HOURS PER WEEK	7 How long have you been doing this work?  IF MORE THAN 5 YEARS, LEAVE MONTHS BLANK  <div style="border: 1px solid black; padding: 2px; display: inline-block;">                     &gt;&gt; 8 NEXT PAGE                 </div>	
	DESCRIPTION	CODE	TYPE	CODE	DAYS	HOURS PER DAY	WEEKS	HOURS PER WEEK	YEARS	MONTHS
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										



SECTION 4. PART C. SECONDARY JOB DURING THE PAST 7 DAYS (END)

	8	9	10	11		12	13	14	
I D E N T I F I C A T I O N	In this work were you self-employed on a farm or in a business belonging to your household?	Whom did you work for?  READ TO THE RESPONDENT  The Communist Party, government or the army?..1 Social organization?....2 State owned company?....3 Mixed govt/private enterprise?.....4 Joint venture with a foreign partner?.....5 100% foreign investment Company?.....6 Cooperative?.....7 Private Company/ household?.....8 Other?.....9	Have you received or will receive money or value in kind for this work?	What is the amount of cash and value in kind?  How often do you receive it?	THOUSAND DONGS	TIME UNIT	Have you done any other work during the past 7 days?	In this work were you self-employed or a worker on a farm or in a business belonging to your household?	How much did you or will you receive for all this other work, including payment in the form of goods and services for past 12 months?
	YES...1 (>>12) NO....2		YES...1 NO....2 (>>12)				YES....1 NO.....2 (>>PART D)	YES....1 ( >> PART D ) NO.....2	
									THOUSAND DONGS
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

1020

TIME UNIT : HOUR...2 DAY...3 WEEK...4 MONTH...5 QUARTER...6 HALF YEAR..7 YEAR...8

V1SS4C2

SECTION 4. PART D. SEARCH FOR ADDITIONAL EMPLOYMENT

I D E N T I F I C A T I O N  C O D E	1	2	3			4	5		
	Have you looked for extra work during the past 7 days?  YES...1 (>>3)  NO....2	Why haven't you looked for extra work during the past 7 days?  (MAIN REASON)  DID NOT WANT EXTRA WORK....1 WAITING TO START A NEW JOB.....2 TOO OLD/SICK/DISABLED.....3 THERE IS NO MORE WORK.....4 DON'T KNOW HOW TO LOOK.....5 OTHER REASONS.....6  >>4	While looking for extra work in the past few days whose help, or which method did you use for such as:  CONTACT WITH GOVT ORGANIZATION.....1 CONTACT WITH SOCIAL ORGANIZATION.....2 CONTACT WITH PRIVATE SERVICES....3 USE FAMILY CONNECTION.....4 USE MASS MEDIA .....5 BY HIMSELF.....6 USE OTHER METHODS ..7  FIRST    SECOND    THIRD	During the past 7 days, have you looked for other work to replace your present work?  YES...1  NO....2 (>>PART E)	What kind of work are you looking for?  Wage earner?....1  Self-employed?..2  Not yet determined.3	Setor: Government?..1 Social organizations? ....2 Cooperatives/collectives?..3 Private?.....4 Joint venture with a foreign partner?.....5	Agricultural?....1 Non-agricultural?....2 Not yet determined?3  >>PART E		
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

## SECTION 4. PART E. MAIN JOB DURING THE PAST 12 MONTHS

I D E N T I F I C A T I O N  C O D E	1  During the past 12 months what was your main job? That is, the work to which you devoted the most time during the past 12 months even if you weren't paid for it?		2  What kind of trade, industry, or business is it connected with?		3  Is this work the same as your main or secondary job during the past 7 days?  YES, SAME AS MAIN JOB.....1 ( >> PART F)  YES, SAME AS SECONDARY JOB...2 ( >> PART F)  NO, DIFFERENT WORK.....3	4  For how many weeks during the past 12 months did you do this work?  CALENDAR WEEKS	5  During these weeks, on average how many days a week do you work?  DAYS PER WEEK	6  How many hours a day did you usually work?  HOURS PER DAY	7  How long have you been doing this work?  IF MORE THAN 5 YEARS, LEAVE MONTHS BLANK  YRS. MOS.		8  In this work were you self-employed or a worker on a farm or in a business belonging to your household?  YES.....1 ( >>PART F) NO.....2	9  For whom did you work? The Communist, Party, government or army?...1(>>11) Social organization?...2(>>11) State owned company?...3(>>11) Mixed govt/private enterprise?...4 Joint venture company?...5 100%foreign investment?...6 Cooperative?...7 Private company or household?...8 Other?...9 (SPECIFY.....)	10  How many people altogether work at the place where you do this work?  PERSONS
	DESCRIPTION	CODE	TYPE	CODE	WEEKS								
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													
15													

>> 11  
NEXT  
PAGE

SECTION 4. PART E. MAIN JOB DURING THE PAST 12 MONTHS ( CONT. )

I D E N T I F I C A T I O N C O D E	11 How far from this dwelling is the place where you did this work?		12 How do you go to work ?		13 How long does it take you to go to the workplace?		14 How often do you go there ? For example, twice a day, once a week?		15 Have you received or will you receive money for this work, include the value of in kind payments?		16 How much money ? How often ?	
	DISTANCE METER...1 KILOMETER....2	DISTANCE CODE	PUBLIC TRANSPORT....1 BUS/CAR...2 MOTORBIKE/PRIVATE CAR.....3 BICYCLE...4 FOOT.....5 OTHER ...6 (SPECIFY)	TIME ONE WAY ONLY	HRS	MIN	TIMES	TIME UNIT	YES....1 NO.....2 ( >> 17 NEXT PAGE )	THOUSAND DONGS	TIME UNIT	
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												

>> 17  
NEXT PAGE

JVLSS4E7

1023

TIME UNIT: HOUR...2 DAY...3 WEEK...4 MONTH...5 QUARTER...6 HALF YEAR...7 YEAR...8

SECTION 4. PART E. MAIN JOB DURING THE PAST 12 MONTHS (CONT.)

I D E N T I F I C A T I O N  C O D E	17 Besides the money reported earlier do you receive any of following additional payments ?																			
	IF NOTHING WRITE ZERO IN THE COLUMN OF THE CORRESPONDING ITEM IF RESPONDENT CAN ONLY GIVE A TOTAL AMOUNT WRITE UNCLER IN THE RELEVANT COLUMNS AND THE TOTAL AMOUNT IN COLUMN H ( NEXT PAGE )																			
	A. Payment in cash and in kind as monthly, quarterly, and yearly remuneration ?				B. Payment in cash or kind for initiative or innovations, science study rewards ?				C. Payment in cash and in kind for lunch ?				D. Payment in cash and in kind for TET or other holidays?				E. Payment in cash and in kind for subsidies for rice, electricity, bicycle,...?			
																	<div style="border: 1px solid black; padding: 2px; display: inline-block;">             &gt;&gt; F. NEXT PAGE           </div>			
	A1. IN CASH		A2. IN KIND		B1. IN CASH		B2. IN KIND		C1. IN CASH		C2. IN KIND		D1. IN CASH		D2. IN KIND		E1. IN CASH		E2. IN KIND	
	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT
1																				
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
12																				
13																				
14																				
15																				

SECTION 4. PART E. MAIN JOB DURING THE PAST 12 MONTHS (END)

IDENTIFICATION CODE	17 (CONT.)												18		19		20		21		22		23	
	TOTAL AMOUNT												Do you receive protective clothing and equipment for this work?		Have you spent any money to keep or to guarantee this work?		Have you had or will have excursion or summer holidays in this work?		Do you receive paid sick, pregnant or injury leave in this work?		Will you receive a retirement pension in this work?		Are you entitled to free or subsidized medical care in this work?	
	F. Value in cash and in kind for compensation, for exposure to toxins and poisons, night shift, additional hours, ...?				G. Value in cash and in kind of other kind of payments? (SPECIFY _____)				H. Total amount? (A+B+C+D+E+F+G)				And what is the value of this clothing?		And how much is it?									
	F1. IN CASH		F2. IN KIND		G1. IN CASH		G2. IN KIND		H1. IN CASH		H2. IN KIND		IF NO WRITE ZERO		IF NO WRITE ZERO									
	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	THOUSAND DONGS	TIME UNIT	YES...1 NO...2	YES...1 NO...2	YES...1 NO...2	YES...1 NO...2		
1																								
2																								
3																								
4																								
5																								
6																								
7																								
8																								
9																								
10																								
11																								
12																								
13																								
14																								
15																								

1025

TIME UNIT: HOUR...2 DAY...3 WEEK...4 MONTH...5 QUARTER...6 HALF YEAR...7 YEAR...8

VLSS4F4

SECTION 4. PART F. EMPLOYMENT HISTORY

I D E N T I F I C A T I O N	1 What did you do before starting this work? That is were you doing other work, studying, or were you unemployed?  OTHER WORK...1 SCHOOL.....2(>> 6) UNEMPLOYED.3(>> 6) HOUSEWORK..4(>> 6) TOO YOUNG..5(>> 6)	2 The work you did before your main job during the past twelve months, what did that work consist of?		3 What kind of business, trade, industry, or profession was it connected with?		4 In this work were you self-employed on a farm or in a business belonging to your household?  YES....1 NO.....2	5 For how long did you do this work?		6 Have you done any other work in addition to your main employment in the last 12 months?  INTERVIEWER: PROBE THOROUGHLY FOR ALL SECONDARY JOBS  YES....1 (>> PART G)  NO.....2 (>> PART H)
		DESCRIPTION .	CODE	TYPE	CODE		YEARS	MONTHS	
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

SECTION 4. PART G. SECONDARY JOB DURING THE PAST 12 MONTHS

IDENTIFICATION CODE	1 During the past 12 months, what was your secondary job? That is, the work on which you spent the most time other than your main job in the past 12 months?		2 What kind of trade, industry, or business is it connected with?		3 Is this work the same as your main or secondary job during the past 7 days?  YES, SAME AS MAIN JOB.....1 (>> 11 NEXT PAGE)  YES, SAME AS SECONDARY JOB....2 (>> 11 NEXT PAGE)  NO, DIFFERENT WORK.....3	4 For how many weeks during the past 12 months did you do this work?  CALENDAR WEEKS	5 During these weeks, how many hours per week did you usually do this work?	6 How long have you been doing this work?  IF MORE THAN 5 YEARS, LEAVE MONTHS BLANK  <div style="border: 1px solid black; padding: 2px; display: inline-block;">                     &gt;&gt;7 NEXT PAGE                 </div>	
	DESCRIPTION	CODE	T Y P E	CODE	WEEKS	HOURS PER WEEK	YRS.	MOS.	
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									



SECTION 4. PART G. SECONDARY JOB DURING THE PAST 12 MONTHS (END)

I D E N T I F I C A T I O N  C O D E	7 In this work were you self-employed or a worker on a farm or in a business belonging to your household?	8 Whom did you work for? READ TO THE RESPONDENT: The Communist Party, the government or the army?.....1 Social orga- zation ?.....2 State owned enterprise?.....3 Mixed govt/ private Co?.....4 Joint venture with foreign partner?..5 100% foreign investmen?.....6 Cooperative?.....7 Private Co./ Household ?.....8 Other?.....9 (SPECIFY _____)	9 Have you received or will receive money or value in kind for this work?	10 What is the amount of cash and value in kind?  How often do you receive it?		11 Have you done other work during the past 12 months?	12 In this work were you self-employed or a worker on a farm or in a business belonging to your household?	13 How much have you received or will you receive for this otherwork, including payment in the of goods and services for the past 12 months?
	YES.....1 (>> 11) NO.....2	YES.....1 NO.....2 (>> 11)	THOUSAND DONGS	TIME UNIT	YES....1 NO.....2 (>>PART II)	YES.....1 (>>PART II) NO.....2	THOUSAND DONGS	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								

INTERVIEWER:  
PROBE  
THOROUGHLY  
FOR ALL  
ADDITIONAL  
WORK IN THE  
PAST 12  
MONTHS

>> PART II

T028

TIME UNIT : HOUR...2 DAY...3 WEEK...4 MONTH...5 QUARTER...6 HALF YEAR..7 YEAR...8

VL554G

SECTION 4. PART II. OTHER ACTIVITIES

	1	2	3	4	5	6	7
I D E N T I F I C A T I O N S C O D E	During the last 7 days, have you worked in your home, for example, cleaning the house, preparing meals for your family, washing the family's clothes, buying food or clothes, fetching water or wood for cooking, building or maintaining household's house, livestock enclosures, making or repairing tools, vehicles, means of production...?	For how many days have you done this work during the past 7 days (since .....)?	On average for how many hours each day?	During the past 12 months (since...) has there been any period of time when you were without paid work?	During the past 12 months, for how many weeks altogether were you without paid work?	Have you looked for work during the past 12 months?	Of the weeks without a paid job, for how many weeks were you looking for a job?
	YES.....1 NO.....2 ( >> 4 )	DAYS	HOURS	YES.....1 NO.....2 ( >> NEXT PERSON)	CALENDAR WEEKS  WEEKS	YES...1  NO....2 ( >> NEXT PERSON)	>> NEXT PERSON  WEEKS
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

## SECTION 5. MIGRATION

ONLY ASK PEOPLE 15 YEARS OLD AND OVER

I D E N T I F I C A T I O N  C O D E	1 Were you born in [PRESENT PLACE OF RESID- ENCE] district?	2 Have you lived any where else for more than 12 months?	3 In what province were you born?		4 At the time of your birth, was your birth- place a...	5 How old were you when you left your place of birth for the first time to live some- where else?	6 For what reason did you leave... birth- place?	7 How long have you lived in [PRESENT PLACE OF RESIDENCE] ...since your last move?	8 What was the main reason you came to [PRESENT RESIDENCE].?	9 In what province did you live before coming here?	10 Was the place where you were living before coming here?	11 How many times have you moved, include only if the period was for more than 12 months?
	YES...1 NO...2 ( >> 3 )	YES...1 ( >> 5 ) NO...2 ( >> NEXT PERSON )	NAME OF PRO- VINCE/COUNTRY	CODE	City?...1 Large town?...2 Small town?...3 Rural area?...4 Other...5	YEARS	FOLLOW/JOIN FAMILY...1 WORK RELATED...2 MARRIAGE...3 SCHOOL...4 JOIN THE ARMY...5 MOVE TO NEW ECONOMIC ZONES...6 FORCED RELOCATION...7 WAR...8 DISASTER OR FIRE...9 ADVENTURE/ BY CHANCE...10 ESCAPE FAMILY PROBLEMS...11 LOOKING FOR NEW JOB...12 MOVE FROM HABIT...13 OTHER...14	TIME IN YEARS  IN MONTHS IF LESS THAN A YEAR  YEARS MON.	IF .[NAME]. LIVED ABROAD WRITE THE NAME OF THE COUNTRY AND >> 11	City?...1 Large town?...2 Small town?...3 Rural area?...4 Other?...5	>> NEXT PERSON  NUMBER OF PLACES	
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												