KHDS-2 Household Tracking Form

Enumerator Code: [ ]

Date of completion: [ ][ ][ ]

Name of respondent:_____

Contact details:_____

_____

Is respondent a Previous Household Member? Yes.....1 (>Roster) No.....2 [ ]

Relative/Friend..1 Neighbour.....2 Employer.....3 Teacher.....4 Community Leader...5 Other(Specify:__)..6 [ ]

PRE-FILLED INFORMATION FROM PREVIOUS HOUSEHOLD ROSTER							6 Where does [….] currently reside? SAME VILLAGE.....1 (>8) NEARBY VILLAGE....2 (>8) KAGERA.....3 TANZANIA.....4 NEIGHBOURING COUNTRY.....5 ANOTHER COUNTRY.....6 DIED.....7 (NEXT PERSON) DON'T KNOW.....8 (NEXT PERSON) CHOOSE LOWEST APPROPRIATE NUMBER		7 IF RESPONSE TO QUESTION 6 IS: ….3 SPECIFY DISTRICT ….4 SPECIFY REGION …5 or 6 SPECIFY COUNTRY	8 Are they residing with any other previous HH members? [READ NAMES ON ROSTER] YES...1 NO....2 DK....3	9 NEW TEMPORARY HH No. GIVE ALL HHs THAT SPLIT OFF FROM THE ORIGINAL HH A NEW UNIQUE No. START WITH 01 AND COUNT UPWARDS	10 FILL IN AN INDIVIDUAL TRACKING FORM? YES.....1 NO.....2
1 1991-1994 six-digit ID no.			2 Name	3 Sex	4 Current age	5 Previous relation to head							
CN	HH	IND					NAME	CODE					