

English copy

Iraq '87
(Same as
197)

نُصِرَ عَلَى الْبِنَاءِ فِي الْوَلْتِ الَّذِي
نَقَطْتُ لِأَنَّ الْكَثِيرَ مِنْ عَوَامِلِ
الْحَرْبِ وَالْعَدَوَانِ سَبَبُهَا هُوَ
إِبْقَاكُ الْبِنَاءِ فِي الْعِرَاقِ.

الرئيس القائد
صدام حسين

REPUBLIC OF IRAQ
MINISTRY OF PLANNING
CENTRAL STATISTICAL ORG.



1987 POPULATION CENSUS QUESTIONNAIRE

1. <input type="checkbox"/> Governorate	2. <input type="checkbox"/> Qadiah	3. <input type="checkbox"/> Nahiyah
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4. Environment 1. <input type="checkbox"/> Urban 2. <input type="checkbox"/> Rural	5. District name OR Mahalla name district no.	6. village name village no.	7. Zone no.	8. street no.	9. House census no.	10. Family series no. in the Zone.	11. No. of Families in the Residential unit
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put (x) in the correct square

12. No. of bedrooms for the family.	13. Ownership of the residential unit.		14. Volume of the rented residential unit		15. Monthly Rent (I.D.)
	1. <input type="checkbox"/> possession	2. <input type="checkbox"/> rent	3. <input type="checkbox"/> other	4. <input type="checkbox"/> rent	
	1. <input type="checkbox"/> All unit	2. <input type="checkbox"/> one room	3. <input type="checkbox"/> Two rooms	4. <input type="checkbox"/> Three rooms & more	

(16-26) filled for each family living alone in the residential unit, if engaged with more than one family, one of the families fills these columns only.

16. kind of residential unit		17. The material in construction of the residential unit		18. Total no. of rooms in the residential unit		Is there any?			
1. <input type="checkbox"/> House	5. <input type="checkbox"/> tent	1. <input type="checkbox"/> bricks	4. <input type="checkbox"/> concrete blocks			19. Bathroom in the living unit	20. Water closet	21. Bathroom & water closet in the same place	22. kitchen
2. <input type="checkbox"/> Flat	6. <input type="checkbox"/> Caravan	2. <input type="checkbox"/> stone	5. <input type="checkbox"/> Mud			1. <input type="checkbox"/> Yes	1. <input type="checkbox"/> Yes	1. <input type="checkbox"/> Yes	1. <input type="checkbox"/> Yes
3. <input type="checkbox"/> Mud house	7. <input type="checkbox"/> other	3. <input type="checkbox"/> blocks	6. <input type="checkbox"/> other	2. <input type="checkbox"/> No	2. <input type="checkbox"/> No	2. <input type="checkbox"/> No	2. <input type="checkbox"/> No		
4. <input type="checkbox"/> hut									
23. Is the living unit provided with electricity		24. Is the living unit provided with Telephone		25. source of drinking water in the living unit		26. throwing of the dirty water			
1. <input type="checkbox"/> Yes	2. <input type="checkbox"/> No	1. <input type="checkbox"/> Yes	2. <input type="checkbox"/> No	1. <input type="checkbox"/> Water nets	3. <input type="checkbox"/> Well	5. <input type="checkbox"/> other	1. <input type="checkbox"/> Public drainage	3. <input type="checkbox"/> others	
				2. <input type="checkbox"/> Public tap	4. <input type="checkbox"/> river or waterwheel		2. <input type="checkbox"/> Septing tank		

27. Filled for the people living the establishments (Hotels, clinics, prisons, etc.)

<input type="checkbox"/> Hotel or resthouse	<input type="checkbox"/> Hostel for students	<input type="checkbox"/> Buildings for social care	<input type="checkbox"/> Medical establishments.
<input type="checkbox"/> Mosques or churches, etc.	<input type="checkbox"/> Prisons, police stations, etc.		<input type="checkbox"/> residential units engaged with persons living outside households.
			<input type="checkbox"/> others

Sex	Date of birth			Marital status above 12 years of age and more	for married, divorced and widowed (both sexes)			(For married, divorced & widowed women)						
					Date of First marriage	No. of marriages	No. of wives recently (for married males only)	Duration of marriage	Total no. of Live births during marriage life		Total no. of Living children		Total no. of a live birth during the period 18-10-1986 / 17-10-1987.	
36	37			38	39	40	41	42	43		44		45	
1- male. <input type="checkbox"/>	day	month	year	1- <input type="checkbox"/> Never married 2- <input type="checkbox"/> Married 3- <input type="checkbox"/> Divorced 4- <input type="checkbox"/> Widowed				• <input type="checkbox"/> less than one year <input type="checkbox"/>	male	female	male	female	male	female
2- Female <input type="checkbox"/>								1 year & more give no. of years						
1- male. <input type="checkbox"/>	day	month	year	1- <input type="checkbox"/> Never married 2- <input type="checkbox"/> Married 3- <input type="checkbox"/> Divorced 4- <input type="checkbox"/> Widowed				• <input type="checkbox"/> less than one year <input type="checkbox"/>						
2- Female <input type="checkbox"/>								1 year & more give no. of years						
1- male. <input type="checkbox"/>	day	month	year	1- <input type="checkbox"/> Never married 2- <input type="checkbox"/> Married 3- <input type="checkbox"/> Divorced 4- <input type="checkbox"/> Widowed				• <input type="checkbox"/> less than one year <input type="checkbox"/>						
2- Female <input type="checkbox"/>								1 year & more give no. of years						
1- male. <input type="checkbox"/>	day	month	year	1- <input type="checkbox"/> Never married 2- <input type="checkbox"/> Married 3- <input type="checkbox"/> Divorced 4- <input type="checkbox"/> Widowed				• <input type="checkbox"/> less than one year <input type="checkbox"/>						
2- Female <input type="checkbox"/>								1 year & more give no. of years						
1- male. <input type="checkbox"/>	day	month	year	1- <input type="checkbox"/> Never married 2- <input type="checkbox"/> Married 3- <input type="checkbox"/> Divorced 4- <input type="checkbox"/> Widowed				• <input type="checkbox"/> less than one year <input type="checkbox"/>						
2- Female <input type="checkbox"/>								1 year & more give no. of years						
1- male. <input type="checkbox"/>	day	month	year	1- <input type="checkbox"/> Never married 2- <input type="checkbox"/> Married 3- <input type="checkbox"/> Divorced 4- <input type="checkbox"/> Widowed				• <input type="checkbox"/> less than one year <input type="checkbox"/>						
2- Female <input type="checkbox"/>								1 year & more give no. of years						
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2- Female <input type="checkbox"/>								1 year & more give no. of years						
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2- Female <input type="checkbox"/>								1 year & more give no. of years						
1- male. <input type="checkbox"/>	day	month	year	1- <input type="checkbox"/> Never married 2- <input type="checkbox"/> Married 3- <input type="checkbox"/> Divorced 4- <input type="checkbox"/> Widowed				• <input type="checkbox"/> less than one year <input type="checkbox"/>						
2- Female <input type="checkbox"/>								1 year & more give no. of years						
1- male. <input type="checkbox"/>	day	month	year	1- <input type="checkbox"/> Never married 2- <input type="checkbox"/> Married 3- <input type="checkbox"/> Divorced 4- <input type="checkbox"/> Widowed				• <input type="checkbox"/> less than one year <input type="checkbox"/>						
2- Female <input type="checkbox"/>								1 year & more give no. of years						

Labour Force in
pers

- 1- Working 5
- 2- Unemployed Seek 6
- 3- Housewife with part-time work, 7
- 4- student Full time 8
- 1- Working 5
- 2- Unemployed Seek 6
- 3- Housewife with part-time work, 7
- 4- student Full time 8
- 1- Working 5
- 2- Unemployed Seek 6
- 3- Housewife with part-time work, 7
- 4- student Full time 8
- 1- Working 5
- 2- Unemployed Seek 6
- 3- Housewife with part-time work, 7
- 4- student Full time 8
- 1- Working 5
- 2- Unemployed Seek 6
- 3- Housewife with part-time work, 7
- 4- student Full time 8
- 1- Working 5
- 2- Unemployed Seek 6
- 3- Housewife with part-time work, 7
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- 3- Housewife with part-time work, 7
- 4- student Full time 8
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- 4- student Full time 8
- 1- Working 5
- 2- Unemployed Seek 6
- 3- Housewife with part-time work, 7
- 4- student Full time 8

Person Series no.	Name	Father's name	Grand father's name	Family name (surname)	Mother's name & her Father's name	Residential status	Relation to head of the household
28	29	30	31	32	33	34	35
1						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present 3- <input type="checkbox"/> Absent. 4- <input type="checkbox"/> Prisoner. 5- <input type="checkbox"/> Lost	1 <input checked="" type="checkbox"/> Head of the household
2						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present 3- <input type="checkbox"/> Absent. 4- <input type="checkbox"/> Prisoner. 5- <input type="checkbox"/> Lost	2- <input type="checkbox"/> Spouse 6- <input type="checkbox"/> par 3- <input type="checkbox"/> Son or daughter 7- <input type="checkbox"/> bro 4- <input type="checkbox"/> daughter / son in law 8- <input type="checkbox"/> Res 5- <input type="checkbox"/> grand son / grand daughter
3						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present 3- <input type="checkbox"/> Absent. 4- <input type="checkbox"/> Prisoner. 5- <input type="checkbox"/> Lost	2- <input type="checkbox"/> Spouse 6- <input type="checkbox"/> par 3- <input type="checkbox"/> Son or daughter 7- <input type="checkbox"/> bro 4- <input type="checkbox"/> daughter / son in law 8- <input type="checkbox"/> Res 5- <input type="checkbox"/> grand son / grand daughter
4						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present 3- <input type="checkbox"/> Absent. 4- <input type="checkbox"/> Prisoner. 5- <input type="checkbox"/> Lost	2- <input type="checkbox"/> Spouse 6- <input type="checkbox"/> par 3- <input type="checkbox"/> Son or daughter 7- <input type="checkbox"/> bro 4- <input type="checkbox"/> daughter / son in law 8- <input type="checkbox"/> Res 5- <input type="checkbox"/> grand son / grand daughter
5						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present 3- <input type="checkbox"/> Absent. 4- <input type="checkbox"/> Prisoner. 5- <input type="checkbox"/> Lost	2- <input type="checkbox"/> Spouse 6- <input type="checkbox"/> par 3- <input type="checkbox"/> Son or daughter 7- <input type="checkbox"/> bro 4- <input type="checkbox"/> daughter / son in law 8- <input type="checkbox"/> Res 5- <input type="checkbox"/> grand son / grand daughter
6						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present 3- <input type="checkbox"/> Absent. 4- <input type="checkbox"/> Prisoner. 5- <input type="checkbox"/> Lost	2- <input type="checkbox"/> Spouse 6- <input type="checkbox"/> par 3- <input type="checkbox"/> Son or daughter 7- <input type="checkbox"/> bro 4- <input type="checkbox"/> daughter / son in law 8- <input type="checkbox"/> Res 5- <input type="checkbox"/> grand son / grand daughter
7						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present 3- <input type="checkbox"/> Absent. 4- <input type="checkbox"/> Prisoner. 5- <input type="checkbox"/> Lost	2- <input type="checkbox"/> Spouse 6- <input type="checkbox"/> par 3- <input type="checkbox"/> Son or daughter 7- <input type="checkbox"/> bro 4- <input type="checkbox"/> daughter / son in law 8- <input type="checkbox"/> Res 5- <input type="checkbox"/> grand son / grand daughter
8						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present 3- <input type="checkbox"/> Absent. 4- <input type="checkbox"/> Prisoner. 5- <input type="checkbox"/> Lost	2- <input type="checkbox"/> Spouse 6- <input type="checkbox"/> par 3- <input type="checkbox"/> Son or daughter 7- <input type="checkbox"/> bro 4- <input type="checkbox"/> daughter / son in law 8- <input type="checkbox"/> Res 5- <input type="checkbox"/> grand son / grand daughter
9						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present 3- <input type="checkbox"/> Absent. 4- <input type="checkbox"/> Prisoner. 5- <input type="checkbox"/> Lost	2- <input type="checkbox"/> Spouse 6- <input type="checkbox"/> par 3- <input type="checkbox"/> Son or daughter 7- <input type="checkbox"/> bro 4- <input type="checkbox"/> daughter / son in law 8- <input type="checkbox"/> Res 5- <input type="checkbox"/> grand son / grand daughter
10						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present 3- <input type="checkbox"/> Absent. 4- <input type="checkbox"/> Prisoner. 5- <input type="checkbox"/> Lost	2- <input type="checkbox"/> Spouse 6- <input type="checkbox"/> par 3- <input type="checkbox"/> Son or daughter 7- <input type="checkbox"/> bro 4- <input type="checkbox"/> daughter / son in law 8- <input type="checkbox"/> Res 5- <input type="checkbox"/> grand son / grand daughter
11						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present 3- <input type="checkbox"/> Absent. 4- <input type="checkbox"/> Prisoner. 5- <input type="checkbox"/> Lost	2- <input type="checkbox"/> Spouse 6- <input type="checkbox"/> par 3- <input type="checkbox"/> Son or daughter 7- <input type="checkbox"/> bro 4- <input type="checkbox"/> daughter / son in law 8- <input type="checkbox"/> Res 5- <input type="checkbox"/> grand son / grand daughter
						1- <input type="checkbox"/> Resident present (permanently) 2- <input type="checkbox"/> Visitor present	2- <input type="checkbox"/> Spouse 6- <input type="checkbox"/> par 3- <input type="checkbox"/> Son or daughter 7- <input type="checkbox"/> bro

Labour force information for persons 7 years and more	Main occupation	Economic activity	Employment status	Sector	go to work
46	47	48	49	50	51
1- <input type="checkbox"/> Working 5- <input type="checkbox"/> Housewife 2- <input type="checkbox"/> Unemployed Seeking work 6- <input type="checkbox"/> pensioner 3- <input type="checkbox"/> Housewife with 7- <input type="checkbox"/> Have income part-time work, but not working 4- <input type="checkbox"/> student Full time 8- <input type="checkbox"/> others			1- <input type="checkbox"/> employer 2- <input type="checkbox"/> own-acco- unt worker 3- <input type="checkbox"/> employee 4- <input type="checkbox"/> unpaid Family worker	1- <input type="checkbox"/> Governmental 2- <input type="checkbox"/> Mixed 3- <input type="checkbox"/> Cooperative 4- <input type="checkbox"/> Private 5- <input type="checkbox"/> Arabic 6- <input type="checkbox"/> Foreigner	1- <input type="checkbox"/> Full time 2- <input type="checkbox"/> Parte time
1- <input type="checkbox"/> Working 5- <input type="checkbox"/> Housewife 2- <input type="checkbox"/> Unemployed Seeking work 6- <input type="checkbox"/> pensioner 3- <input type="checkbox"/> Housewife with 7- <input type="checkbox"/> Have income part-time work, but not working 4- <input type="checkbox"/> student Full time 8- <input type="checkbox"/> others			1- <input type="checkbox"/> employer 2- <input type="checkbox"/> own-acco- unt worker 3- <input type="checkbox"/> employee 4- <input type="checkbox"/> unpaid Family worker	1- <input type="checkbox"/> Governmental 2- <input type="checkbox"/> Mixed 3- <input type="checkbox"/> Cooperative 4- <input type="checkbox"/> Private 5- <input type="checkbox"/> Arabic 6- <input type="checkbox"/> Foreigner	1- <input type="checkbox"/> Full time 2- <input type="checkbox"/> Parte time
1- <input type="checkbox"/> Working 5- <input type="checkbox"/> Housewife 2- <input type="checkbox"/> Unemployed Seeking work 6- <input type="checkbox"/> pensioner 3- <input type="checkbox"/> Housewife with 7- <input type="checkbox"/> Have income part-time work, but not working 4- <input type="checkbox"/> student Full time 8- <input type="checkbox"/> others			1- <input type="checkbox"/> employer 2- <input type="checkbox"/> own-acco- unt worker 3- <input type="checkbox"/> employee 4- <input type="checkbox"/> unpaid Family worker	1- <input type="checkbox"/> Governmental 2- <input type="checkbox"/> Mixed 3- <input type="checkbox"/> Cooperative 4- <input type="checkbox"/> Private 5- <input type="checkbox"/> Arabic 6- <input type="checkbox"/> Foreigner	1- <input type="checkbox"/> Full time 2- <input type="checkbox"/> Parte time
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1- <input type="checkbox"/> Working 5- <input type="checkbox"/> Housewife 2- <input type="checkbox"/> Unemployed Seeking work 6- <input type="checkbox"/> pensioner 3- <input type="checkbox"/> Housewife with 7- <input type="checkbox"/> Have income part-time work, but not working 4- <input type="checkbox"/> student Full time 8- <input type="checkbox"/> others			1- <input type="checkbox"/> employer 2- <input type="checkbox"/> own-acco- unt worker 3- <input type="checkbox"/> employee 4- <input type="checkbox"/> unpaid Family worker	1- <input type="checkbox"/> Governmental 2- <input type="checkbox"/> Mixed 3- <input type="checkbox"/> Cooperative 4- <input type="checkbox"/> Private 5- <input type="checkbox"/> Arabic 6- <input type="checkbox"/> Foreigner	1- <input type="checkbox"/> Full time 2- <input type="checkbox"/> Parte time
1- <input type="checkbox"/> Working 5- <input type="checkbox"/> Housewife 2- <input type="checkbox"/> Unemployed Seeking work 6- <input type="checkbox"/> pensioner 3- <input type="checkbox"/> Housewife with 7- <input type="checkbox"/> Have income part-time work, but not working 4- <input type="checkbox"/> student Full time 8- <input type="checkbox"/> others			1- <input type="checkbox"/> employer 2- <input type="checkbox"/> own-acco- unt worker 3- <input type="checkbox"/> employee 4- <input type="checkbox"/> unpaid Family worker	1- <input type="checkbox"/> Governmental 2- <input type="checkbox"/> Mixed 3- <input type="checkbox"/> Cooperative 4- <input type="checkbox"/> Private 5- <input type="checkbox"/> Arabic 6- <input type="checkbox"/> Foreigner	1- <input type="checkbox"/> Full time 2- <input type="checkbox"/> Parte time
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1- <input type="checkbox"/> Working 5- <input type="checkbox"/> Housewife 2- <input type="checkbox"/> Unemployed Seeking work 6- <input type="checkbox"/> pensioner 3- <input type="checkbox"/> Housewife with 7- <input type="checkbox"/> Have income part-time work, but not working 4- <input type="checkbox"/> student Full time 8- <input type="checkbox"/> others			1- <input type="checkbox"/> employer 2- <input type="checkbox"/> own-acco- unt worker 3- <input type="checkbox"/> employee 4- <input type="checkbox"/> unpaid Family worker	1- <input type="checkbox"/> Governmental 2- <input type="checkbox"/> Mixed 3- <input type="checkbox"/> Cooperative 4- <input type="checkbox"/> Private 5- <input type="checkbox"/> Arabic 6- <input type="checkbox"/> Foreigner	1- <input type="checkbox"/> Full time 2- <input type="checkbox"/> Part. time
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1- <input type="checkbox"/> Working 5- <input type="checkbox"/> Housewife 2- <input type="checkbox"/> Unemployed Seeking work			1- <input type="checkbox"/> employer 2- <input type="checkbox"/> own-acco- unt worker	1- <input type="checkbox"/> Governmental 2- <input type="checkbox"/> Mixed 3- <input type="checkbox"/> Cooperative	1- <input type="checkbox"/> Full time

(A)Deaths happened during 18-10-1986 / 17-10-1987, for Iraqis only
for Iraqis only

Sex of death	Age of death:	Reason of death
<input type="checkbox"/> male <input type="checkbox"/> female	<input type="radio"/> less than one year <input type="checkbox"/> 1 year & more	1- <input type="checkbox"/> illness 2- <input type="checkbox"/> Accident 3- <input type="checkbox"/> other
<input type="checkbox"/> male <input type="checkbox"/> female	<input type="radio"/> less than one year <input type="checkbox"/> 1 year & more	1- <input type="checkbox"/> illness 2- <input type="checkbox"/> Accident 3- <input type="checkbox"/> other
<input type="checkbox"/> male <input type="checkbox"/> female	<input type="radio"/> less than one year <input type="checkbox"/> 1 year & more	1- <input type="checkbox"/> illness 2- <input type="checkbox"/> Accident 3- <input type="checkbox"/> other
<input type="checkbox"/> male <input type="checkbox"/> female	<input type="radio"/> less than one year <input type="checkbox"/> 1 year & more	1- <input type="checkbox"/> illness 2- <input type="checkbox"/> Accident 3- <input type="checkbox"/> other
<input type="checkbox"/> male <input type="checkbox"/> female	<input type="radio"/> less than one year <input type="checkbox"/> 1 year & more	1- <input type="checkbox"/> illness 2- <input type="checkbox"/> Accident 3- <input type="checkbox"/> other
<input type="checkbox"/> male <input type="checkbox"/> female	<input type="radio"/> less than one year <input type="checkbox"/> 1 year & more	1- <input type="checkbox"/> illness 2- <input type="checkbox"/> Accident 3- <input type="checkbox"/> other

Sex \ Nationality	the presents in census day			
	Iraqis	Arabs	Foreigners	Total
male				
female				
Total				

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 توقيع

خاص بموظفي الجهاز

..... / (التاريخ توقيع