

Does the household questionnaire have 1one or more sheets?
Sheet No: from..... sheets

Ostan (Province):
Shahrestan (subprovince):
Bakhsh (county)
Shahr / Dehestan (city/ agglomeration)
Village:

Block No./ Village code

District No.

Number . of household members
Male Number of 17-year persons
Female: Number of persons aged 18 and over

Household type: Settled private... Unsettled..... Collective

Household Line No. (column 10 Form 1)

Full name of census enumerator

Full name of the group expert

Full name of the technical editor

For rural areas: Full name of Household Head's father

Main Place No.....

Address of Household residence (District , No of residence, floor and unit should be written).....

No. of side to side place...
No. of side place
No. of side place/ side to side
Postal code (10 digits).....

Full name of the editing expert



2011 Population and Housing Census
Form 2- Household Questionnaire


*. Columns 3, 37 and 38 are not for collective households and should be left blank. **. Columns 9 to 16 and columns 22, 29 and 39 are completed for unsettled private households and should be left blank

Line No.	For all household members								** For present and temporally absent people (codes 1 & 2 in column 8) **							
	Full name.. National Card No.		Relationship to head of the household*	Sex	Birth date		Age	Residence status	Does he/she reside in another place?	For codes 2 & 3 in column 9	Has she/ he changed his/ her residences since 2006?	For persons who have changed their residence since 2006 (box yes, column 11)				
	Name	Surname			Month	Year						Age at last birthday	Present 1 Temporarily absent 2 Abroad for work or education 3 Other 4	In the same city or village... 1 In other city, cite it... 2 In other village 3 No... .. 4	Length of residence in the same city or village (full year)	Reasons for change of previous residence
1	2		3	4	5	6	7	8	9	10	11	12	13	14	15	16
Age	National code		1	Male Female	Lunar year Aged 100 or over	Under one year Aged 100 or over	1 2 3 4	1 2 3 4	1 2 3 4	1 2	Y N					
Ag	National code			Male Female	Lunar year Aged 100 or over	Under one year Aged 100 or over	1 2 3 4	1 2 3 4	1 2	Y N						
Ag	National code			Male Female	Lunar year Aged 100 or over	Under one year Aged 100 or over	1 2 3 4	1 2 3 4	1 2	Y N						

For persons aged 6 and over

Has she/ he used the Internet at least once during the last 12 months?	Is / she attending school/ university?	Literacy status	For code 1 column 19		For present and temporarily absent people (codes 1& 2 column 8) which has code 1 in column 18
Yes , at Home 1 Work 2 Educational institutes 3 Coffee net 4 Other 5 No. 6	Yes In Iran 1 Abroad 2 No 3	Literate 1 Illiterate 2	Grade and educational attainment Grade for school students Educational course for university student The highest grade or educational attainment for other people	Field of study For grade, course or educational attainment in column 20	**Place of education In the same city or village 1 In other city, mention the name 2 In other village 3
17	18	19	20	21	22
<div style="display: flex; flex-wrap: wrap; gap: 10px;"> <div style="border: 1px solid black; padding: 2px;">1</div> <div style="border: 1px solid black; padding: 2px;">2</div> <div style="border: 1px solid black; padding: 2px;">3</div> <div style="border: 1px solid black; padding: 2px;">4</div> <div style="border: 1px solid black; padding: 2px;">5</div> <div style="border: 1px solid black; padding: 2px;">6</div> </div>	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="border: 1px solid black; padding: 2px;">1</div> <div style="border: 1px solid black; padding: 2px;">2</div> <div style="border: 1px solid black; padding: 2px;">3</div> </div>	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="border: 1px solid black; padding: 2px;">1</div> <div style="border: 1px solid black; padding: 2px;">2</div> </div>	<div style="border: 1px solid black; padding: 5px; min-height: 40px;">20</div>	<div style="border: 1px solid black; padding: 5px; min-height: 40px;">21</div>	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="border: 1px solid black; padding: 5px; min-height: 20px;">1</div> <div style="border: 1px solid black; padding: 5px; min-height: 20px;">2</div> <div style="border: 1px solid black; padding: 5px; min-height: 20px;">3</div> </div>
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Questions 43 to 59 should be completed for private settled and collective households

Death event in household	Agricultural holding.	Household facilities and housing			Q 49-59 should be completed by households residing in apartments or non-apartment dwellings (cells 1&2 in Q 48)																																																																																																				
<p>43. Has any person died in this household?</p> <p>Yes..... No → Q 44</p> <p>↓</p> <p>43.1. Is the dead person a girl/ a woman?</p> <p>43.1. has the dead person been aged between 10 to 60?</p> 	<p>44- In what activities are household engaged?</p> <p>Farming (at least 400 m²).....1</p> <p>Horticulture (at least 200 ²).....2</p> <p>Livestock and poultry3</p> <p>(at least 2 small livestock , at least one large livestock , at least 10 poultries, raising of honeybees in every number , raising of silkworm in every number.</p> <p>Greenhouse production.....4</p> <p>None.....5</p>	<p>45. Are the following facilities available to the household?</p> <p>1. Motorcycle (with gearbox and moped)</p> <p><input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>2. Light automobile(car, pick-up,...)</p> <p><input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>3. Personal computer</p> <p><input type="checkbox"/> Y <input type="checkbox"/> N</p>	<p>46. The major fuel used by the household</p> <table border="1"> <thead> <tr> <th></th> <th>Cooking</th> <th>Heating</th> <th>Providing warm water</th> </tr> </thead> <tbody> <tr> <td>Natural gas (public network)</td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 1</td> </tr> <tr> <td>Liquid gas</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 2</td> </tr> <tr> <td>Burning oil</td> <td><input type="checkbox"/> 3</td> <td><input type="checkbox"/> 3</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>Gas oil</td> <td><input type="checkbox"/> 4</td> <td><input type="checkbox"/> 4</td> <td><input type="checkbox"/> 4</td> </tr> <tr> <td>Electricity</td> <td><input type="checkbox"/> 5</td> <td><input type="checkbox"/> 5</td> <td><input type="checkbox"/> 5</td> </tr> <tr> <td>Solid fuel (firewood, Charcoal, animal waste,..)</td> <td><input type="checkbox"/> 6</td> <td><input type="checkbox"/> 6</td> <td><input type="checkbox"/> 6</td> </tr> <tr> <td>Other fuels</td> <td><input type="checkbox"/> 7</td> <td><input type="checkbox"/> 7</td> <td><input type="checkbox"/> 7</td> </tr> <tr> <td>None</td> <td><input type="checkbox"/> 8</td> <td><input type="checkbox"/> 8</td> <td><input type="checkbox"/> 8</td> </tr> </tbody> </table>		Cooking	Heating	Providing warm water	Natural gas (public network)	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	Liquid gas	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	Burning oil	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	Gas oil	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	Electricity	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	Solid fuel (firewood, Charcoal, animal waste,..)	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	Other fuels	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	None	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<p>47. Main source of water supply used by the household:</p> <table border="1"> <thead> <tr> <th></th> <th>Drinking</th> <th>Cooking</th> <th>Other uses</th> </tr> </thead> <tbody> <tr> <td>Public reservoir of city or village)</td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 1</td> </tr> <tr> <td>Well, spring, aqueduct and improved water reservoir</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 2</td> </tr> <tr> <td>Well, spring, aqueduct and unimproved water reservoir</td> <td><input type="checkbox"/> 3</td> <td><input type="checkbox"/> 3</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>Mobile water tank</td> <td><input type="checkbox"/> 4</td> <td><input type="checkbox"/> 4</td> <td><input type="checkbox"/> 4</td> </tr> <tr> <td>Bottled water</td> <td><input type="checkbox"/> 5</td> <td><input type="checkbox"/> 5</td> <td><input type="checkbox"/> 5</td> </tr> <tr> <td>River, pool, brooks and rain water</td> <td><input type="checkbox"/> 6</td> <td><input type="checkbox"/> 6</td> <td><input type="checkbox"/> 6</td> </tr> <tr> <td>Others</td> <td><input type="checkbox"/> 7</td> <td><input type="checkbox"/> 7</td> <td><input type="checkbox"/> 7</td> </tr> <tr> <td>None</td> <td><input type="checkbox"/> 8</td> <td><input type="checkbox"/> 8</td> <td><input type="checkbox"/> 8</td> </tr> </tbody> </table> <p>48. Type of the household residence:</p> <table> <tr> <td>Apartment unit(conventional)</td> <td>non-apartment housing Tent</td> <td>Straw hut (Kapar)</td> </tr> <tr> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td><input type="checkbox"/> 4</td> <td><input type="checkbox"/> 5</td> <td><input type="checkbox"/> 6</td> </tr> <tr> <td>Hut and the like</td> <td>other</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 5</td> <td><input type="checkbox"/> 6</td> <td></td> </tr> </table>		Drinking	Cooking	Other uses	Public reservoir of city or village)	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	Well, spring, aqueduct and improved water reservoir	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	Well, spring, aqueduct and unimproved water reservoir	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	Mobile water tank	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	Bottled water	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	River, pool, brooks and rain water	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	Others	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	None	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	Apartment unit(conventional)	non-apartment housing Tent	Straw hut (Kapar)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	Hut and the like	other		<input type="checkbox"/> 5	<input type="checkbox"/> 6		<p>49 Type of tenure of housing unit.....</p> <p>Owned land and building 1</p> <p>Owned building 2</p> <p>Rented 3</p> <p>Against service 4</p> <p>Rent free 5</p> <p>Other 6</p>	<p>50. Number of rooms, hall, dining rooms, closed kitchen,... available to the household available....</p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p>How many households live in this housing unit?</p> <p>One household → Q53</p> <p>More than one household</p> <p>N of Hs</p> <table border="1"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table> <p>52. Has this form been already completed for a household?</p> <p>Yes Line No of Household</p> <table border="1"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table> <p>No → q.60</p> <table border="1"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>												
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Activity and marital status- For people aged 10 and over								Fertility status- for women aged 10 and over who have code 1, 2 or 3 in column 30						For all household's persons																				
Activity status during the last 7 days	For code 4 column 23	For codes 1, 2 and 3 column 24	For codes 1, 2 and 3 column 25			For present persons or temporarily absent (codes 1&2 column 8)	Marital status	Has she ever given a live birth?	For box Yes, column 31						Is the mother a member of the very household?	For box Yes, column 37	Place of birth (Residence place of mother at the time of delivery)	40. Is there anybody in the household with at least one of the following disabilities?			Religious	Citizenship												
			Status of work seeking during the last 30 day	Status of availability to work	Main activity of the work place				Job	Job Status	Work place *	Number of ever born children		For women aged 10 to 54				For box Yes, column 34	Number of children born alive during the last 365	Total			Living	Yes	No	Blind	Deaf	Voice and speech disorder	Hand amputation	Hand impairment	Leg amputation	Leg impairment	Torso impairment	Mental disorder
												Employer	Own-account worker...																					
23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40/1	40/2	40/3	41	42													
1 2 3 4	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	26 <input type="checkbox"/>	27 <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	1 2 3 4	Yes No	Boy Girl	<input type="checkbox"/> <input type="checkbox"/>	Yes No	Boy Girl	<input type="checkbox"/> <input type="checkbox"/>	Yes No	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	Not having the above disability	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>														
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53. Facilities in housing unit			54. Number of rooms, hall, dining room, open kitchen, closed kitchen, and other in this housing unit			Only for "Other" (Box 3) in question 56:					
	Available	Not available				57. Main construction materials of the housing unit:					
			1. Room	<input type="text"/>	<input type="text"/>	Brick and steel or stone and steel		1			
1. Electricity	1	2	2. Hall and dining room	<input type="text"/>	<input type="text"/>	Brick and wood or stone and wood		2			
						Cement blocks (roof of any kind)		3			
						All brick or stone and brick		4			
						All wood		5			
						Sun-dried brick and wood		6			
						Sun-dried brick and mud		7			
						Other (mention the type)		8			
			3. Open kitchen	<input type="text"/>	<input type="text"/>	58. Year of construction completion of the housing unit:					
2. Fixed telephone	1	2				2011	1	2006	6		
						2010	2	1996-2005	7		
						2009	3	1986-1995	8		
						2008	4	1976-1985	9		
						2007	5	1966-1975	10		
						Before 1966	11				
			4. Closed kitchen	<input type="text"/>	<input type="text"/>	59. Type of sewage disposal in the housing unit:					
3. Piped water	1	2				Toilet		kitchen		other	
						Public sewerage			1	1	1
						Private sewerage			2	2	2
						Absorbing well			3	3	3
						Septic tank			4	4	4
						Area around the unit			5	5	5
						Other (mention the type)			6	6	6
4. Piped gas	1	2	5. Other	<input type="text"/>	<input type="text"/>	60. Line No. of respondent & household Tel. No.					
						Line No of respondent.....					
						Household Tel. No.					
5. Central heating system (package , shofezh)	1	2	55. Floor area of the housing unit:			Interview Date					
			50 m ² or less		1	2011/Nov/					
			51-75 m ²		2						
			76- 80 m ²								
			81-100 m ²		4						
			101-150 m ²		5						
			151-200 m ²		6						
			201-300 m ²		7						
			301-500 m ²		8						
			501 m ² and more		9						
		 meters from.....								
6. Central heating and cooling system (Fan coil, panel,...)	1	2	56. Type of housing unit skeleton								
			Metal		1						
			Reinforced concrete		2	Q.58					
			Other		3						
7. Kitchen	1	2	Only for "Other" (Box 3) in question 56:								
			57. Main construction materials of the housing unit:								
			Brick and steel or stone and steel		1						
			Brick and wood or stone and wood		2						
			Cement blocks (roof of any kind)		3						
			All brick or stone and brick		4						
			All wood		5						
			Sun-dried brick and wood		6						
			Sun-dried brick and mud		7						
			Other (mention the type)								
8. Bathroom	1	2									
9. Toilet	1	2									