



Cook Islands Statistics Office
Rarotonga, COOK ISLANDS

CNSD


CONFIDENTIAL
All information obtained will be kept confidential and used for statistical purposes only.

QUESTIONNAIRES

Cook Islands Census

2001

*Be in the
Count*



AUTHORITY
This Census is taken under the authority of the Statistics Act 1966.

CENSUS NIGHT
Midnight, between Friday 30 November and Saturday 1 December 2001.

CENSUS DISTRICT NO: _____

ENUMERATION AREA NO: _____

DWELLING NO: _____

TOTAL PERSONS: _____

1	Na	_____
2	Nun	_____
	Ma	_____
3	Typ	1 [] 2 []
4	Yea	_____
5	Dwe	1 [] 2 [] 3 [] 4 [] 5 []
6	Mate	Oute Roof Floor
7	Spot	1 [] 2 [] 3 []

Telecommunication: Mark appropriate boxes

- 1 Telephone 3 Cellular Phone
 2 Facsimile 4 Internet Access

Agriculture Activity: Mark appropriate box

The household is engaged in:

- 1 Mainly subsistence
 2 Mainly commercial
 3 No agricultural activity

17 Fishing Activity: Mark appropriate box

(a) The household is engaged in: (b) The household fish:

- 1 Mainly subsistence 1 Only in reef
 2 Mainly commercial 2 Only outside reef
 3 No fishing activity 3 Both in and outside reef

(c) Is the household engaged in pearl farming?

- 1 Yes 2 No

18 Livestock & Pets: Count only those raised by your household

- 1 _____ Pig 5 _____ Horse
 2 _____ Goat 6 _____ Chicken
 3 _____ Cattle 7 _____ Cat
 4 _____ Duck 8 _____ Dog

Count only those owned by members of this household.

Do not count anything broken, borrowed or rented.

19 Farm Machinery:

- 1 _____ Tractor 6 _____ Disc
 2 _____ Rotary hoe 7 _____ Plough
 3 _____ Mist blower 8 _____ Tyne
 4 _____ Grass cutter 9 _____ Slasher
 5 _____ Motor mower 10 _____ Knapsack

20 Fishing Equipment:

- 1 _____ Speargun 6 _____ Fishing net
 2 _____ Canoe 7 _____ Scuba (full set)
 3 _____ Boat 8 _____ Hooka (full set)
 4 _____ Fishing rod imported 9 _____ Outboard motor
 5 _____ Fishing rod local

21 Power Tools:

- 1 _____ Drill 4 _____ Sander
 2 _____ Skill saw 5 _____ Battery charger
 3 _____ Compressor

22 Cooking Appliances:

- 1 _____ Electric Stove 8 _____ Jug/kettle
 2 _____ Gas Stove 9 _____ Frying pan
 3 _____ Kerosene burner 10 _____ Food processor
 4 _____ Microwave oven 11 _____ Toaster
 5 _____ Coffee percolator 12 _____ Eggbeater
 6 _____ Rice cooker 13 _____ Barbecue
 7 _____ Pressure cooker

23 Household Electrical Appliances:

- 1 _____ Freezer 9 _____ Hair dryer
 2 _____ Refrigerator 10 _____ Washing machine
 3 _____ Fridge/Freezer 11 _____ Clothes dryer
 4 _____ Zip 12 _____ Sewing machine
 5 _____ Dishwasher 13 _____ Vacuum Cleaner
 6 _____ Iron 14 _____ Fan
 7 _____ Shaver 15 _____ Air Conditioner
 8 _____ Hair cutter

24 Entertainment Appliances:

- 1 _____ Radio/cassette 7 _____ Guitar
 2 _____ Television Screen 8 _____ Piano
 3 _____ Video Recorder 9 _____ Organ
 4 _____ Video Camera 10 _____ TV Dish
 5 _____ Play station 11 _____ DVD player
 6 _____ Computer

25 Transport:

- 1 _____ Motor cycle 4 _____ Truck
 2 _____ Motor Car 5 _____ Utility vehicle
 3 _____ Van 6 _____ Bicycle

26 Safety Equipment: Mark appropriate boxes

- 1 Fire extinguisher 4 Lantern
 2 Fire safety alarm 5 Emergency lighting
 3 First aid kit e.g torch, candles, etc.

27 Declaration: I declare that the information given are true and complete.

X _____
Signature

A question

1 Name

2 Sex

1

3 Relative

1

2

3

4

4 Date of

5 Place

Village

City

6 Visitor

A V

7 Ethnic

1

2

3

Specify

8 Reside

1

2

3

National

How long

9 Do you

Mark a

1

if "Yes"

COOK ISLANDS

CENSUS OF POPULATION AND DWELLINGS

Personal Questionnaire

Person No:

A questionnaire is to be completed for each Person found in the Cook Islands on Census Night. Visitors need only answer Questions 1 to 6.

1 Name:

 Firstname Surname

2 Sex: Mark appropriate box
 1 Male 2 Female

3 Relationship to Head of Household: Mark appropriate box
 1 Head 5 Grandchild
 2 Spouse/partner 6 Nephew/niece
 3 Son/daughter 7 Guest
 4 Step/adopted child 8 Other, please specify

4 Date of Birth: _____ **Age:** _____
 Day / Month / Year yrs

5 Place of Birth:
 Village/ _____ Island/ _____
 City _____ Country _____

6 Visitors ONLY: If a visitor tick (✓) circle →
 A VISITOR is a person who does not normally reside in the Cook Islands.
 GOTO **23**

7 Ethnic Origin: Mark appropriate box
 1 Cook Island Maori
 2 Part Cook Island Maori } GOTO **9**
 3 Other ethnic origin
 Specify _____

8 Residential Status: Mark appropriate box
 1 Temporary contract worker
 2 Dependent of temporary worker
 3 Other
 Nationality _____
 How long have you lived in the Cook Islands? _____

Do you have any disability? (lasting 6 months or more)
 Mark appropriate box
 1 Yes 2 No. GOTO **10**
 If "Yes" describe the nature of the disability, eg. hearing, sight, etc.

10 Religion: Mark appropriate box
 1 No Religion
 2 Cook Islands Christian Church
 3 Roman Catholic
 4 Seventh Day Adventist
 5 Church of Jesus Christ of Latter Days Saints
 6 Other, specify _____
 7 I OBJECT to answering this question

11 Your address on Census Night
 Village _____ Island _____
 (i) If you usually live at the above address, tick (✓) circle, if not, where do you usually live?
 Village/ _____ Island/ _____
 City _____ Country _____
 (ii) How long have you lived on the island of your usual address.

If person is less than 1 year old GO TO END else Continue
 (iii) If one year ago, you were at the same address as in 11(i) tick (✓) circle if not, where were you on December 1, 2000.
 Village/ _____ Island/ _____
 City _____ Country _____

Ask only to persons 5 years and over. If under 5 years GO TO END
 (iv) If five years ago, you were at the same address as in 11(iii) tick (✓) circle if not where were you on December 1, 1996
 Village/ _____ Island/ _____
 City _____ Country _____

12 Education: Mark appropriate box
 (a) Are you still attending school?
 1 Yes 2 No. GOTO **12(c)**
 (b) What type of school are you attending?
 1 Public 2 Private
 (c) What is your highest primary or secondary level completed?
 e.g. Grade 6, Form 5, etc.
 Specify _____

(d) What is your highest school qualification gained?
e.g. School Certificate, Sixth Form, University Bursary

Specify _____

**Ask only to persons 15 years and over
If under 15 years GO TO END**

(e) What is your highest Trade, Vocational or Professional qualification gained?

e.g. Trade Certificate, Bachelors Degree, Teachers Diploma.

Specify _____

13 Marital Status: Mark appropriate box

- 1 Never married
- 2 Married
- 3 Widowed
- 4 Separated from legal partner
- 5 Divorced

14 Activity Status: Mark appropriate box

- 1 Employer, own business/plantation without employees
- 2 Employer, own business/plantation with employees
- 3 Working full time for wages/salary
- 4 Working part-time for wages/salary
- 5 Unpaid family worker in plantation/store/business
- 6 Full time students → GOTO (16)
- 7 Unemployed → GOTO (17)
- 8 Home Duties } → GOTO (18)
- 9 Retired }

15 Principal Activity:

(a) Give details of work done:

e.g. Ticketing clerk, shop assistant, bank officer, etc.

(b) Give name of the business/employer that you worked for:

e.g. Island Hopper, CITC, Westpac, etc.

(c) Type of business/activity:

e.g. Travel Agent, Retail Trade, Banking, etc.

(d) How many hours usually worked at this job in a week.

_____ hrs

16 Secondary Activity: IF NO activity, tick(✓) circle →

(a) Give details of work done:

e.g. Bar tender, food sales, craft making, etc.

GOTO (18)

(b) Give name of the business/employer that you worked for:

e.g. Trader Jack, Self, Island Craft, etc.

(c) Type of business/activity:

e.g. Restaurant, Retail trade, Manufacturing, etc.

(d) How many hours usually worked at this job in a week.

_____ hrs

17 Unemployed ONLY: Mark appropriate box

(a) Have you ever had paid work?

- 1 Yes
- 2 No, GOTO (17(c))

(b) How many weeks since you last had paid work? _____

(c) If a job had been available, would you have started work?

- 1 Yes
- 2 No

18 Unpaid Work: Mark appropriate boxes

- 1 Looking after children
- 2 Housework
- 3 Handicraft making
- 4 Tending the livestock
- 5 Tending the garden
- 6 Fishing
- 7 Catering
- 8 Sewing

19 Social Welfare Benefits: Mark appropriate boxes

(a) Indicate benefit(s) received in the last twelve months.

- 1 None
- 2 Child
- 3 Old Age
- 4 Destitute/Infirmit
- 5 Superannuation
- 6 War Pension

20 Income: Gross Income from all sources, including benefits, for the 12 months ending 1st December, 2001. Mark appropriate box

- 1 no income
- 2 less than \$5,001
- 3 \$5,000 - \$9,998
- 4 \$10,000 - \$14,998
- 5 \$15,000 - \$19,998
- 6 \$20,000 - \$29,998
- 7 \$30,000 - \$39,999
- 8 \$40,000 - \$49,999
- 9 \$50,000 - \$59,999
- 10 \$60,000 - \$69,999
- 11 \$70,000 - \$79,999
- 12 \$80,000 and over

21 Land Tenure: If Not Succeeded/No Right, tick(✓) circle →

and if MALE GOTO 23 else GOTO 22.

(a) Your rights have been determined by the land court

- 1 By Succession
- 2 Sole Occupation
- 3 Joint Occupation
- 4 Lease
- 5 Sub lease

(b) State Island(s):

(c) Purpose of rights: e.g. house site, agriculture, etc.

22 Females ONLY: Number of children born alive

(a) Born alive:

Males _____
Females _____

(b) Still living:

Males _____
Females _____

(c) Date of birth of:

First child _____
Day / Month / Year

Last child _____
Day / Month / Year

23 Declaration: I declare that the information given are true and complete.

X

Signature