

VILLAGE	EA No.
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**APPENDIX 1: QUESTIONNAIRE FORM
FOR CENSUS OFFICE USE**

KIRIBATI POPULATION CENSUS 1995

HOUSEHOLD NO.	HOUSEHOLD TYPE	NO. OF PERSONS
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FOR ALL PERSONS		PERSON 1	PERSON 2	PERSON 3	PERSON 4	PERSON 5	PERSON 6	PERSON 7	PERSON 8	PERSON 9	PERSON 10
1A. NAME	all who stayed at census night										
1B. FATHER	family's name or father's name										
2. RELATIONSHIP	to head of household eg. wife, son										
3. SEX	m for male, f for female										
4. DATE OF BIRTH	if date unknown, estimate year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year
5. ETHNIC ORIGIN	IKiribati, IK/Tuvalu, IK/Other, Tuvalu, European, other										
6. MARITAL STATUS	never married, married, widowed, divorced										
7. REAL FATHER	alive or dead										
8. REAL MOTHER	alive or dead, person no. if present										
9. RELIGION											
10. HOME ISLAND	Island if in Kiribati, for others country										
11. BIRTH PLACE	Island if in Kiribati, for others country										
12. RESIDENCE AT LAST CENSUS	Island if in Kiribati, for others, country										
13. SCHOOL ATTENDANCE	Pri, Sec, Uni, left school(LS) never been to school										
14. EDUCATIONAL ATTAINMENT	highest level completed eg. class 9 Form 7, Uni, Dip, Deg, Mas, etc										

FOR ALL PERSONS BORN IN 1980 OR BEFORE, i.e. 15years and over - TYPE OF ACTIVITY LAST WEEK

		PERSON 1	PERSON 2	PERSON 3	PERSON 4	PERSON 5	PERSON 6	PERSON 7	PERSON 8	PERSON 9	PERSON 10
15. TYPE OF ACTIVITY	Cash or village work, if no work state reasons										
16. CASH WORK STATUS	employer, self employed, employed part time employed										
17. OCCUPATION	state occupation, eg. registry clerk bus driver, etc										
18. EMPLOYER	name of employer, department if government										

FOR ALL WOMEN BORN IN 1980 OR BEFORE, i.e. 15years and over - CHILDREN EVER BORN

		PERSON 1		PERSON 2		PERSON 3		PERSON 4		PERSON 5		PERSON 6		PERSON 7		PERSON 8		PERSON 9		PERSON 10	
		boys	girls	boys	girls	boys	girls	boys	girls	boys	girls	boys	girls	boys	girls	boys	girls	boys	girls	boys	girls
19. HOW MANY CHILDREN HAS THIS WOMAN BORN ALIVE?	if none write 0																				
20. HOW MANY OF THEM ARE STILL ALIVE?	-as above-																				
21. HOW MANY HAVE DIED?	-as above-																				
22. HOW OLD IS YOUR FIRST BORN?	-as above-	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year
23. WHEN WAS THE LAST CHILD BORN?	-as above-	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year	day month year

HOUSEHOLD

WRITE YES OR NO - OR STATE NUMBERS

1. HOUSING AND LANDS

How is the main house constructed?

(permanent, local, combination).....

Does this house need urgent repair?.....

Who owns the land on which
the main house is built?.....

2. FOOD

Does this household grow

breadfruit.....

babai.....

banana.....

pawpaw.....

sweet potatoes.....

other vegetables.....

Does this household
cut toddy.....

3. LIVESTOCK

How many of the following
does this household have?

pigs.....

chickens.....

ducks.....

4. FISHING

Does this household catch fish by

collecting on ocean flat.....

collecting on lagoon flat.....

ocean fishing.....

lagoon fishing.....

How many of the following does this
household own in working order

canoes.....

skiffs (wa-uowa).....

boats.....

outboard engine.....

nets.....

cooler boxes.....

5. CAPITAL GOODS

How many of is household have in working
order?

a bicycle.....

a motor cycle.....

a motor car.....

a sewing machine.....

a radio.....

radio cassette player.....

video.....

a handcart.....

a solar generator.....

6. WATER AND SANITATION

Does this household have/use

flush toilet.....

water seal latrine.....

lagoon beach.....

ocean beach.....

other specify (e.g bush etc).....

SOURCE OF DRINKING WATERS

rain water tank.....

pipe system.....

well water.....

8. CASH INFLOW

Did any member of this household receive
cash in these ways in the last one month?

employment.....

own business.....

copra.....

fish.....

seaweed.....

agricultural produce.....

handicrafts.....

selling anything else.....

Did any member of this household receive
cash from any of the following sources in
the last one month?

rent of Land.....

rent of Building.....

pensions.....

financial investment.....

cash remittances from Nauru.....

from seaman.....

from abroad.....

other.....