

QUEST.4

CONFIDENTIAL

GENERAL SECRETARIAT OF THE
NATIONAL STATISTICAL SERVICE
OF GREECE
GENERAL DIRECTORATE OF
STATISTICAL SURVEYS

DIVISION OF POPULATION AND
LABOUR MARKET STATISTICS

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HOUSEHOLD ID : |_|_|_|_|_|_| |_|_| |_|_|

S/N MEMBER : _____ |_|_|

NAME/SURNAME : _____

INTERVIEWER : _____

_____ |_|_|_|

STATISTICS ON INCOME AND LIVING CONDITIONS (EU-SILC)

PERSONAL QUESTIONNAIRE

To be filled only for members born up to the year 1986

The survey is being conducted in a sample of households having been randomly designed by the NSSG. The supply of data is OBLIGATORY and the answers in the questions are CONFIDENTIAL (L.3267/56 και L.2392/96).

Athens, 2003

1. FOR THE INTERVIEWER: Please note :

- Time interview began (e.g. 19.00)

|||.|||

DEMOGRAPHIC CHARACTERISTICS

2. In which country were you born?

Country: _____

|||.|||*

3. What is your citizenship? If you have dual citizenship, please specify both.

- First citizenship _____

|||.|||*

- Second citizenship _____

|||.|||*

4. What is your legal marital status?

- Never married

1

- Married

2

- Separated

3

- Widowed

4

- Divorced

5

5. Are you living with a partner?

- Yes, on a legal basis

1

- Yes, without a legal basis

2

- No

3

EDUCATION

6. Are you attending, today, any educational program?

- Yes

1→7

- No

2→8

7. What are you currently studying for?

- Demotiko

1

- Gymnasio

2

- Lykeio

3

- Private/public centers of training.....

4

- Technological educational institutes

5A

- University

5B

- Msc, MBA.....

5F

- Ph.D

6

* To be filled only from National Statistical Service

8. What is the highest level of education you have actually completed?

- Never attended any level of education..... →10
- Few classes of Demotiko 1
- Demotiko 2
- Gymnasio 3
- Lykeio 4
- Private/ public centers of training..... 5
- Technological educational institutes 6A
- University 6B
- Msc, MBA..... 6Γ
- Ph.D 7

9. In which year did you complete the pre-mentioned educational level?

Year.....

HEALTH

10. How is your health in general?

- Very good 1
- Good..... 2
- Fair 3
- Bad..... 4
- Very bad 5

11. Do you suffer from any chronic illness?

The answer is subjective.

- Yes..... 1
- No 2

12. For at least the last 6 months have you been limited your daily activities because of a health problem?

- Yes, strongly limited 1
- Yes, limited..... 2
- No, not limited 3

13. Was there any time during the last 12 months when, in your opinion you really needed a dental examination or treatment but you did not receive it?

- Yes, there was at least one time 1→14
- No 2→15

14. What was the main reason for not receiving the dental examination or treatment (the most recent time)?

- Could not afford to (too expensive)..... 1
- Length of waiting list 2
- Could not take time because of work, care for children or for others..... 3
- Too far to travel, no means of transportation..... 4
- Fear of doctor, hospitals, examination, treatment..... 5
- Wanted to wait and see if problem got better on its own. 6
- Didn't know any good doctor or specialist..... 7
- Other reasons please specify: _____ 8

15. Was there any time during the last 12 months when, in your opinion you really needed a medical examination or treatment for a health problem but you did not receive it?

- Yes, there was at least one time 1→16
- No 2→17

16. What was the main reason for not receiving the examination or treatment (the most recent time)?

- Could not afford to (too expensive)..... 1
- Length of waiting list 2
- Could not take time because of work, care for children or for others..... 3
- Too far to travel, no means of transportation..... 4
- Fear of doctor, hospitals, examination, treatment..... 5
- Wanted to wait and see if problem got better on its own. 6
- Didn't know any good doctor or specialist..... 7
- Other reasons please specify: _____ 8

CURRENT ACTIVITY

17. During the previous week, did you do any work for payment or profit, even if it was only for one hour?

Unpaid workers for a family business will answer "Yes"

- Yes 1→19
- No 2→18

18. Even if you did not do paid work during last week, did you have a job or business from which you were away (due to maternity or parental leave, holidays, own illness, injury or temporary, bad weather etc.) and to which you expect to return?

- Yes 1
- No 2

19. Which is your main activity at present, are you?

The activity is self-defined

- Working full – time. 01→32
- Working part – time 02→32
- Unemployed..... 03
- Pupil, student, further training, unpaid work experience..... 04
- In retirement or in early retirement or has given up business..... 05
- Permanently disabled and/or unfit to work..... 06
- In compulsory military community or service..... 07
- Fulfilling domestic tasks and care responsibilities..... 08
- Other inactive person..... 09

20. Are/were you actively looking for a job in previous 4 weeks?

For persons:

- o *Waiting for the results of a job application*
- o *Expecting a call from the public employment office*
- o *Waiting for the results of a competition for recruitment to the public sector.*

the answer will be "No"

- Yes 1→21
- No 2→22

21. If you find a job are you available to undertake it within the next 2 weeks?

- Yes..... 1
- No 2

CHARACTERISTICS OF JOB (CURRENT OR PREVIOUS)

For persons not having as main activity work

22. Have you ever worked in a job or a business?

- Yes..... 1→23
- No..... 2→47

23. Please describe as fully as possible the nature of work done in your last main job or in your current main job.

..... *

24. In your main last job you were/are:

- Self-employed with employee(s)..... 1→47
- Self-employed without employee(s)..... 2→47
- Employee..... 3→25
- Family worker, unpaid..... 4→47

25. FOR THE INTERVIEWER: Check the answers of the questions 17 and 18.

- In question 17 or 18 there is answer "yes"..... 1→26
- In question 17 and question 18 there are answers "no"..... 2→30

26. Please describe the main activity of the local unit of the business or organization where you worked the previous week.

..... *

27. How many people worked in the local unit of the business or organization where you worked the previous week?

- Exact number if between 1 and 10..... 1
- 11 to 19 persons..... 2
- 20 to 49 persons..... 3
- 50 persons or more..... 4
- Do not know but less than 11 persons..... 5
- Do not know but more than 10 persons..... 6

* To be filled only from the National Statistical Service.

28. How many hours a week do you normally work in your main job or business?

Please include usual paid and unpaid overtime.

- Hours per week..... | | |

29. You said that you usually work xxx hours per week in your main job (see Q.28). What are your usual gross and net earnings in this job, including usual paid overtime and how often did you receive them?

Gross: are considered the earnings before the deduction of tax and obligatory social insurance contributions.

Net: are considered the earnings after the deduction of tax and obligatory social insurance contributions.

- Gross amount € | | |

- Net amount..... € | | |

- Received per: week 1
 fortnight 2
 month 3

30. Please, could you tell me what was/is the type of your work contract?

- Permanent job/contract of unlimited duration..... 1

- Temporary job/work contract of limited duration..... 2

31. In your job did/do you supervise or manage any personnel?

- Yes 1→47

- No..... 2→47

CHARACTERISTICS OF MAIN JOB
For persons having as main activity work

FOR THE INTERVIEWER :The questions that follow refer to interviewee's main job. If person has multiple jobs at present, as main job is considered the job in which he/she normally works the most hours.

32. What kind of work do you do in your main job? Please describe as fully as possible the nature of the work done.

| | | *

33. Please describe the main activity of the local unit of the business or organization where you work.

| | | *

* To be filled from the National Statistical Service.

40. In your job do you supervise or manage any personnel?

- Yes 1
- No..... 2

41. Have you changed your main job since the last 12 months?

- Yes..... 1→42
- No..... 2→43

42. What was the main reason for changing your previous job?

Please register the most important reason.

- To take up or seek better job..... 1
- End of temporary contract..... 2
- Obligated to stop by employer..... 3
(business closure, redundancy, early retirement, dismissal etc.)
- Sale or closure of own/family business..... 4
- Child care and care for other dependent..... 5
- Partner's job required us to move to another area or marriage..... 6
- Other reasons, please specify: _____ 7

43. Do you normally work at more than one jobs at present?

- Yes..... 1→44
- No..... 2→45

44. How many hours in total do you work each week in all your jobs?

- Hours per week.....

45. FOR THE INTERVIEWER: Check the answers of questions 36 and 44.

The interviewee usually works in all of his/her jobs:

- Less than 30 hours per week..... 1→46
- 30 hours or more per week..... 2→47

46. What is the main reason for working less than 30 hours per week?

- Underdoing education or training..... 1
- Personal illness or disability..... 2
- Want to work more hours, but cannot find a full-time job or work more hours
in this job..... 3
- Do not want to work more hours..... 4
- Number of hours in all jobs are considered as a full-time job..... 5
- Housework, looking after children or other persons..... 6
- Other reasons, please specify: _____ 7

ACTIVITY HISTORY

47. At what age you began your first regular job or business?

- Age of first regular job..... →48
- Never worked..... →49

48. Since that time, roughly how many years have you spent at work, either as an employee or self-employed?

- Years.....

49. For each month of 2002 and up today, which was your main activity?

- **Working**
- Employee (full – time)..... **01**
- Employee (part – time)..... **02**
- Self – employed (full-time) including family worker..... **03**
- Self – employed (part-time) including family worker..... **04**
- **Unemployed**..... **05**
- **Retired**..... **06**
- **Student**..... **07**
- **Inactive (not including retired and persons in military service)**..... **08**
(apprentices without pay, persons fulfilling domestic tasks, taking care of children or other persons, men of independent means, incapacitated etc.)
- **Compulsory military service**..... **09**

- January 2002.....
- February 2002.....
- March 2002.....
- April 2002.....
- May 2002.....
- June 2002.....
- July 2002.....
- August 2002.....
- September 2002.....
- October 2002.....
- November 2002.....
- December 2002.....
- January 2003.....
- February 2003.....
- March 2003.....
- April 2003.....
- May 2003.....
- June 2003.....

INCOME FOR EMPLOYEES

50. During 2002, did you have any income as an employee or as an apprentice from wage, salary or other kind of pay?

Including income both from regular work as well as from any secondary, casual or temporary work.

- Yes 1→51
- No 2→77

51. During 2002, do you know what were your total gross earnings?

Gross is the amount before tax and social insurance were deducted.

- Yes 1→52
- No 2→53

52. If yes, what were your total gross earnings as an employee in 2002?

- Total amount (annual)..... € | _____ |

53. During 2002, do you know what were your total net earnings?

Net is the amount after tax and social insurance were deducted.

- Yes 1→54
- No 2→57

54. If yes, what were your total net earnings as an employee in 2002?

- Total amount (annual)..... € | _____ |

55. Please could you indicate if the net amount in Q. 54 was paid:

- After tax deduction?..... 1
- After social insurance deduction?..... 2
- After tax and social insurance deduction?..... 3
- Do not know..... 4

56. FOR THE INTERVIEWER: Answer will be given according Q. 51 and Q. 53.

- In Q. 51 and 53 there are answers “no”..... 1→57
- In any other case..... 2→60

57. During 2002, what was your normal pay each time you were paid? Please give the gross amount, before deduction of tax and social insurance, and the net amount after deduction of tax and/or social insurance.

If you had more than one job at a time, please give the total earnings.

α. Gross amount..... € | _____ |

Received per: week 1 |
 fortnight 2 |→59
 month 3 |

β. Net amount..... € | _____ |

Received per: week 1
 fortnight 2
 month 3

58. Please, could you indicate if the net amount in Q.57b was paid:

- After tax deduction?..... 1
- After social insurance deduction?..... 2
- After tax and social insurance deduction?..... 3
- Do not know..... 4

59. During 2002, for how many months, weeks or fortnights did you receive this income?

- Weeks.....
- Fortnights.....
- Months.....

60. During 2002, did you receive any payments from the following income sources?

- | | YES | NO |
|---|----------------------------|----------------------------|
| • Overtime..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| • Commission and tips..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| • Piece rate payments..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| • Payments for fostering children | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| • Profit sharing and bonuses..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| • Allowance for working in remote locations, for transport..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| • Remuneration for time not worked (e.g. holiday payments)..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| • Additional payments based on productivity..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| • Supplementary payments (e.g. thirteenth month payment)..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| • Marriage allowance..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| • Allowance to workers in the building constructions..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| • Other payments, specify: _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |

61. FOR THE INTERVIEWER: Answer according to Q. 60.

- There is at least a positive answer..... 1→62
- There is no positive answer..... 2→65

62. Are any of these payments in addition to the figures given above or are they all already included in the amounts registered in questions 52 or 54 or 57a and 57b?

- Yes, some in addition..... 1
- No, all are already included..... 2→65

63. During 2002, what were the total gross or net earnings from the payments of Q. 60?

- a. Gross amount..... € | _____ |
- b. Net amount..... € | _____ |

FOR THE INTERVIEWER: If there is no net amount provided, continue with Q. 65.

64. Please could you indicate if the net amount in Q. 63 was paid:

- Only after the deduction of tax..... 1
- Only after the deduction of social contributions..... 2
- After the deduction of both tax and social contributions..... 3
- Do not know..... 4

65. During 2002, did you receive any income from:
Payments made by the employer.

YES **NO**

- **A.** Additional payments made by the employer because of sickness, maternity, disability etc..... 1 2
- **B.** Payments made by the employer instead of salary because of sickness, maternity, disability etc..... 1 2

66. FOR THE INTERVIEWER: Answer according to Q. 65.

- There is at least one positive answer..... 1→67
- There is no positive answer..... 2→70

67. Are all or some of the income additional or include in the amounts registered in questions 52 or 54 or 57a and 57b? If some or all are included in your wage can you separate the amounts corresponding to the payments of Q.65?

- Yes, some or all are additional, but I cannot separate them..... 1→70
- Yes, some or all are additional and I can separate them..... 2→68
- No, all are included but I cannot separate them..... 3→70
- No, all are included and I can separate them..... 4→68

68. What were the prementioned payments concerning? What is the gross or net amount for each case?

	A	Gross Amount	Net Amount	B	Gross Amount	Net Amount
- Sickness.....	<input type="checkbox"/> 1	€ _____	€ _____	<input type="checkbox"/> 1	€ _____	€ _____
- Disability.....	<input type="checkbox"/> 1	€ _____	€ _____	<input type="checkbox"/> 1	€ _____	€ _____
- Maternity.....	<input type="checkbox"/> 1	€ _____	€ _____	<input type="checkbox"/> 1	€ _____	€ _____
- Survivors'.....	<input type="checkbox"/> 1	€ _____	€ _____	<input type="checkbox"/> 1	€ _____	€ _____

FOR THE INTERVIEWER: If there is no net amount provided, continue with Q.70.

69. The net amount/s provided in Q.68 was paid:

- | | A | B |
|--|----------------------------|----------------------------|
| - Only after the deduction of tax?..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 1 |
| - Only after the deduction of social contributions?..... | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 |
| - After the deduction of both tax and social contributions?..... | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 |
| - Do not know..... | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |

COMPANY CAR

70. During 2002, did your employer provide you with a car, van or other motor vehicle which was also available for private use?

- Yes 1→71
- No 2→75

71. Please tell me the make, model and registration year of the vehicle.

- Make _____
- Model _____
- Year |_|_|_|_|

72. During 2002, for how many months did you have use of the pre-mentioned vehicle provided by your employer?

- Number of months.....|_|_|

73. Did the employer pay for the insurance, the circulation fees or the service of the vehicle?

- | | YES | NO |
|--|----------------------------|----------------------------|
| - Insurance of the vehicle..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| - Circulation fees..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| - Regulars and non-regulars repairs..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |

74. During 2002, approximately how many kilometers did you travel with the company car only for private use?

- Number of kilometers.....|_|_|_|_|_|

OTHER ALLOWANCES IN KIND

75. During 2002, did your employer provide you?

- | | YES | NO |
|--|----------------------------|----------------------------|
| - Free of charge or contribution meals within working hours..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| - Reduced values for electricity, telephone, water etc..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| - Free of charge or with reduced price the produced goods or goods appropriate for commerce..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |

FOR THE INTERVIEWER: If in Q.75 all the answers are NO continue with Q. 77.

76. If yes, what was the total amount you saved from the pre-mentioned sources?

- Amount..... € |_____|

SELF-EMPLOYMENT INCOME

77. During 2002, did you receive any income from self-employment, such as from your own business, professional practice or farm, freelance work, or working as a subcontractor, providing services or selling goods. Royalties, rentals of buildings, vehicles, and equipment of business as well as grants (agricultural or others)-if any- or grants from the State or European Community are also included.

Positive answer will also be given by employees, pensioners etc. having income from agricultural or cattlery business etc.

- Yes..... 1→78
- No 2→94

78. Apart from yourself, are there other household members involved in running or managing this business or activity?
Included are paid or unpaid family workers.

- Yes..... 1→79
- No 2→81

79. From whom, you or another member of your household, shall we get information concerning your business or activity?

- Me myself..... 1→81
- Other household member..... 2→80

80. Please give from the Household Register member's personal line number.

S/N member..... →94

81. Do you think of yourself as having a job or a business?

- Job..... 1
- Business..... 2
- Neither..... 3

82. Are you working on your own account or are you in partnership with someone else?
Do not consider as partnerships other household members participating in business.

- Own account..... 1
- With partnership..... 2

83. FOR THE INTERVIEWER: The following questions are just for your **OWN** share of business and are NOT including your partner's share.

84. What is the most recent period for which you can provide us financial figures?

- From month year till month year

85. During the pre-mentioned financial figures' period what was the annual income from your business or activity after the deduction of business expences?

As expences are considered: The expences for raw material, product distribution, salaries (including the social insurance contribution), the general administration expences (rent, electricity bills, telephone bills etc.) etc.

Income should also include the value of goods received by the self-employed from his/her business or activity for own account, as well as grants (for agricultural or others businesses) -if any- from the State or the European Community.

The manager's payments (salaries) for persons owning the business, will be registered as employee's income (questions 50-69).

- Amount..... € | _____ |

86. Does the amount given refer to profit or loss?

- Profit 1→87

- Loss..... 2→94

87. Is the pre-mentioned amount subject to tax or social insurance contributions?

- Yes, subject to tax or social insurance contributions..... 1→88

- No, doesn't subject to tax or social insurance contributions..... 2→90

- Do not know if subject to tax or social insurance contributions..... 3→90

88. In the amount you already registered, are tax or social insurance contributions included?

Social insurance contributions refer to amounts paid for the insurance of the self-employed him/herself as well as of the rest members of the household working as unpaid family workers (if any).

- Only tax included..... 1

- Only social insurance contributions included..... 2

- Tax and social insurance contributions are included..... 3

- Tax and social insurance contributions are not included..... 4

- Do not know..... 5→90

89. Approximately, provide the amounts you paid, in advance, for tax or social insurance contributions.

a. Tax..... € | _____ |

b. Social insurance contributions..... € | _____ |

90. Did you draw money from your business account – only for business purposes- or for personal or family purposes?

The payments for your work in the business (salary, bonus etc.) will be included in the employee's income – questions 50-69.

- Yes..... 1→91

- No..... 2→92

91. On average how much did you take for these non-business purposes during 2002?

- Total amount..... € | _____ |

92. During 2002, did you pay additional tax for income concerning previous years (for closing yearly accounts, checking the last five year's accounts, fines etc.)?

- If yes, amount..... € | _____ |

- No.....

93. During 2002, did you pay additional social insurance contributions e.g in order to change insurance class, for fines etc.?

- If yes, amount..... € | _____ |

- No.....

PROPERTY INCOME

94. During 2002, did you receive or were entitled to receive any income from interest, dividends or from capital invested in a business?

Included are interest from bank account, post saving bank or dividends from stocks, profits from shares, bonds, repos, mutual funds.

- Yes..... 1→95

- No 2→99

95. The pre-mentioned income is:

- In your own name?..... 1→98

- Jointly, with other household members?..... 2→96

- Both sole and joint?..... 3→96

96. For each income jointly held, please give the following information:

Persons' line number	Amount <i>If the amount is reported in another Personal Questionnaire enter 0</i>	The pre-mentioned amount is: 1:Before tax deducted 2:After tax deducted 3:Not taxed 4:Do not know	Tax amount <i>For amounts subject to tax</i>
_ _ _ _ _ _	€ _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	€ _____
_ _ _ _ _ _	€ _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	€ _____
_ _ _ _ _ _	€ _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	€ _____

97. FOR THE INTERVIEWER: Check from Q.95 if income is:

- Jointly, with other household members..... 1→99
 -Both sole and joint..... 2→98

98. During 2002, how much did you receive from any of these sources held in your own name?

Amount	The pre-mentioned amount is: 1:Before tax deducted 2:After tax deducted 3:Not taxed 4:Do not know	Tax amount For amounts subject to tax
€ _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	€ _____
€ _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	€ _____
€ _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	€ _____

PRIVATE PENSIONS

99 . During 2002, did you receive any income from private pension schemes? Private old age pensions, survivor's, sickness, disability, unemployment etc. paid regularly are included, whether paid by yourself or by a dead spouse or relative.

Excluded are pensions from work, social benefits etc.

Excluded are life insurance schemes yielding a lump sum on maturing as well as private pensions paid by your employer.

- Yes..... 1→100
 - No..... 2→101

100. If YES, register the number of months you received this amount during 2002 as well as tax information.

PRIVATE PENSIONS	If YES: Please register the amount	Number of months	The pre-mentioned amount is: 1:Before tax deducted 2:After tax deducted 3:Not taxed 4:Do not know	Tax amount For amounts subject to tax	
Old age pension	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	€ _____
Other, please specify:	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	€ _____

101. During 2002, did you make any regular payments for individual private pension schemes, on your own initiative?

Excluded are the amounts paid for social insurance schemes or private schemes on the employer's initiative.

- Yes..... 1→102

- No..... 2→103

102. During 2002, what was the net amount paid each time and what was the paying period?

Net amount..... € | _____ |

Paying period : year 1

 semester 2

 quarterly 3

UNEMPLOYMENT ALLOWANCES / ALLOWANCES FOR VOCATIONAL TRAINING

103. During 2002, did you receive any income from unemployment related benefits, training allowance or reimbursement because of dismissal?

- Yes..... 1→104

- No 2→105

104. For each of these allowances please record the amount you received each month and the number of months. You could also clarify whether the amount received was gross, net of tax on income and social contributions net of tax on income, net of social contributions and tax amount.

ALLOWANCE OR BENEFIT	If yes: Please register the monthly amount	Number of months received	The pre-mentioned amount is:					Amount of tax or social contributions <i>If the amount subject to tax and social contributions</i>	
			1:Gross	2:Net of tax on income and social contributions	3:Net of tax on income at source	4:Net of social contributions	5: Do not know		
Full unemployment allowance	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Partial unemployment allowance	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Early retirement for labour market reasons	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Allowance for the vocational training of unemployed	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Reimbursement due to dismissal from work	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Seasonal unemployment benefit for persons seasonally working (e.g. actresses, musicians, building workers, hotel staff, etc.)	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Allowance for young persons aged 20-29 years	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Allowance for persons in military service	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Placement, resettlement or rehabilitation benefit	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Other allowances, please specify:	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____

PENSIONS

105. During 2002 did you receive any old age pension?

Exclude purely private pensions that were fully arranged and paid for by the individual, but include private pensions paid for by the employer.

- Yes..... 1 → 106
- No 2 → 107

106. For each of the following old age pension schemes, please register the amount you received each month and the number of months. You could also clarify whether the amount received was gross, net of tax on income and social contributions net of tax on income, net of social contributions and the tax amount.

PENSIONS		If yes: Please register the monthly amount	Number of months received	The pre-mentioned amount is:	Amount of tax or social contributions <i>If the amount subject to tax and social contributions</i>
				1:Gross 2:Net of tax on income and social contributions 3:Net of tax on income at source 4:Net of social contributions 5: Do not know	
Old age pension from public sector	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_ _	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	€ _____
Supplementary pension from public sector	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_ _	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	€ _____
Early retirement pension due to resignation	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_ _	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	€ _____
Care allowance	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_ _	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	€ _____
Parallel pension from private sector (paid by the employer)	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_ _	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	€ _____
Lumb sum due to retirement	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_ _	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	€ _____
National resistance pension	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_ _	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	€ _____
Other pensions, please specify:	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_ _	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	€ _____

SURVIVOR'S PENSION AND BENEFITS

107. During 2002, did you receive any survivor's pension, benefit or allowance?

Exclude purely private pensions that were fully arranged and paid for by the extinct, but include private pensions paid for by the employer.

- Yes..... 1→108

- No..... 2→109

108. For each of the following survivor's pensions benefits or allowances, please register the amount you received each month and the number of months. You could also clarify whether the amount received was gross, net of tax on income and social contributions net of tax on income, net of social contributions and the tax amount.

PENSIONS	If yes: Please register the monthly amount	Number of months received	The pre-mentioned amount is:					Amount of tax or social contributions <i>If the amount subject to tax and social contributions</i>	
			1:Gross	2:Net of tax on income and social contributions	3:Net of tax on income at source	4:Net of social contributions	5: Do not know		
Old age pension from public sector	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Supplementary pension from public sector	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Parallel pension from private sector (paid by the employer)	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Orphans' pension	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Pension of war victims	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
*Other pensions/benefits, please specify:	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____

*** FOR THE INTERVIEWER:** As far as possible, ensure that income of this kind is not added in the income from salaries.

SICKNESS SOCIAL BENEFITS / ALLOWANCES

109. During 2002, did you receive any sickness benefit or allowance?

(Included are benefits/allowances received due to physical or mental health but NOT these received by disabled persons. Included are paid leaves in work due to sickness, as well as reimbursement for working accidents and sickness. Excluded are allowances paid from private sickness insurances paid for by the individual).

- Yes..... 1→110
- No 2→111

110. For each of the following sickness social benefits or allowances, please register the amount you received each month and the number of months. You could also clarify whether the amount received was gross, net of tax on income and social contributions net of tax on income, net of social contributions and the tax amount.

BENEFIT ALLOWANCE	If yes: Please register the monthly amount	Number of months received	The pre-mentioned amount is:					Amount of tax or social contributions <i>If the amount subject to tax and social contributions</i>
			1:Gross	2:Net of tax on income and social contributions	3:Net of tax on income at source	4:Net of social contributions	5: Do not know	
*Pay sick leave	YES <input type="checkbox"/> NO <input type="checkbox"/> € _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
*Benefit for accidents at work	YES <input type="checkbox"/> NO <input type="checkbox"/> € _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
*Benefit for spa therapy, airing etc.	YES <input type="checkbox"/> NO <input type="checkbox"/> € _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Assistance for movement of sick persons	YES <input type="checkbox"/> NO <input type="checkbox"/> € _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
*Other benefits/allowances, please specify:	YES <input type="checkbox"/> NO <input type="checkbox"/> € _____	_	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____

* **FOR THE INTERVIEWER:** As far as possible, ensure that income of this kind is not added in the income from salaries.

PENSIONS – INVALIDITY BENEFITS

111. During 2002, did you receive any benefit / allowance or pension related to disability?

(Included are disability pensions and benefits / allowances received due to physical or mental invalidity). Excluded are purely private sickness schemes that were fully arranged and paid for by the individual.

- Yes..... 1→112
- No..... 2→113

112. For each of the following pensions - invalidity benefits, please register the amount you received each month and the number of months. You could also clarify whether the amount received was gross, net of tax on income and social contributions net of tax on income, net of social contributions and the tax amount.

PENSIONS BENEFITS ALLOWANCES	If yes: Please register the monthly amount	Number of months received	The pre-mentioned amount is:					Amount of tax or social contributions <i>If the amount subject to tax and social contributions</i>
			1:Gross	2:Net of tax on income and social contributions	3:Net of tax on income at source	4:Net of social contributions	5: Do not know	
Disability pension <i>The disability pension becomes regular old age pension after a certain age</i>	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Benefit for persons with special needs	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Care allowance for incapacitated persons	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Care allowance for incapacitated children	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Nutrition allowance for people suffering from kidney disease	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
*Other benefits/allowances, please specify:	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____

*** FOR THE INTERVIEWER:** As far as possible, ensure that income of this kind is not added in the income from salaries.

EDUCATIONAL- RELATED ALLOWANCES

113 . During 2002, did you receive any educational – related allowance?

Included are benefits/allowances received by students due to their participation in research programs, scholarships, etc. *Excluded* are benefits for training/retraining.

- Yes..... 1→114
- No 2→115

114. For each of the following benefits / allowances, please register the amount you received each month and the number of months. You could also clarify whether the amount received was gross, net of tax on income and social contributions net of tax on income, net of social contributions and the tax amount.

BENEFITS ALLOWANCES	If yes: Please register the monthly amount	Number of months received	The pre-mentioned amount is:					Amount of tax or social contributions <i>If the amount subject to tax and social contributions</i>
			1:Gross	2:Net of tax on income and social contributions	3:Net of tax on income at source	4:Net of social contributions	5: Do not know	
Benefit received for participation in research programs	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____ __ __	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Scholarships	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____ __ __	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____
Other educational benefits/allowances, please specify:	YES <input type="checkbox"/> NO <input type="checkbox"/>	€ _____ __ __	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	€ _____

TAXES ON INCOME

115. In 2002, did you make an income tax return for income of the previous year?

- Yes, only for my income..... 1→118
- Tax return made by another household member covering my income, as well as his/her own income..... 2→116
- I had no income..... 3→131
- No tax return made even though I had income..... 4→131

116. Please, could you give me the name of the member whose income was taxed with yours? Please record the person number of these household members from the Individual Register.

- Name - surname: _____ α/α μέλους

117. FOR THE INTERVIEWER: Is the particular questionnaire yours or another household's member?

- It is the questionnaire of the household member who covered my income 1→118
- Other member's questionnaire..... 2→125

118. Did your tax return include only your personal income or also the income of other household members?

- Personal income only..... 1→120
- Other members income..... 2→119

119. Please note the sequence numbers of members whose income has been included in your tax return.

- S/n of first member.....
- S/n of second member.....
- S/n of third member.....

120. Please, register the total amount of tax paid in 2002, which may concern:

- (a) tax paid for income of 2002 and
- (b) tax paid in 2002 referring to income of 2001.

- Total amount of tax..... € →122
- Don't know exact amount..... 1→121
- Didn't pay any tax..... 2→123

121. Could you please indicate income range for tax paid?

- Less than 500 € 1
- 500€ up to under 1.000 € 2
- 1.000€ up to under 3.000 € 3
- 3.000€ up to under 5.000 € 4
- 5.000€ up to under 10.000€..... 5
- 10.000 € or more..... 6

122. The pre-mentioned tax in Q.120 or Q.121 refers to tax already being deducted from your salary or pension or paid in advance for your income from self-employment etc. or tax additionally paid?

- Tax deducted at source and the amount has been added in the gross amount for income received from any source..... 1
- Tax deducted at source and the amount has not been added in the gross amount for income received from any source..... 2
- Tax paid in 2002 concerning the income of 2001..... 3
- Tax deducted at source and the amount has been added in the gross amount for income received from any source and tax for income of 2001 4
- Tax deducted at source and the amount has not been added in the gross amount for income received from any source and tax for income of 2001..... 5

123. During 2002, did you pay any additional tax such as fines etc. for all your income?

- Yes, tax amount.....€ | _____ | →125
- Do not know..... →124
- No..... →125

124. Could you please indicate the income range of amount of the additional tax paid?

- Less than 500 € 1
- 500€ up to under 1.000 € 2
- 1.000€ up to under 3.000 € 3
- 3.000€ up to under 5.000 € 4
- 5.000€ up to under 10.000€..... 5
- 10.000 € or more..... 6

125. During 2002, did you have any tax reimbursement?

Tax may concern income of 2001 or and income of 2002.

- Yes..... 1→126
- No..... 2→131

126. Does this tax reimbursement concerns only your own income or also other household members' income?

- Personal only..... 1→128
- Share with other members..... 2→127

127. Which household member received the tax reimbursement?

Member.....s/n member

128. FOR THE INTERVIEWER: Is the particular questionnaire yours or another household's member?

- It is the questionnaire of the household member who received the tax reimbursement 1→129
- Other member's questionnaire..... 2→131

129. What was the total amount of tax reimbursement for income of 2001?

- Tax amount € →131
- Do not know the exact amount.....

130. Please could you give an approximate range for tax reimbursement?

- Less than 500 € 1
- 500€ to under 1.000 € 2
- 1.000€ to under 3.000 € 3
- 3.000€ to under 5.000 € 4
- 5.000€ to under 10.000€..... 5
- 10.000 € or more..... 6

DURATION AND DATE OF INTERVIEW

131. FOR THE INTERVIEWER: Please note the time and the date the interview ended:

• Time interview ended

Date of interview : Day Month Year **2003**