HELLENIC STATISTICAL AUTHORITY	QUEST. 2	
GENERAL DIVISION OF STATISTICS		CONFIDENTIAL
DIVISION OF POPULATION AND LABOR MARKET STATISTICS		
	HOUS	SEHOLD I.D :  _ _ _ _   _   _
UNIT OF HOUSEHOLD URVEYS NOIKOKYΡΙΩΝ	NAME/SUR	NAME:
TEL.: 213 135 2897 FAX: 213 135 2906	INTERVIEV	NFR ·

# EUROPEAN UNION STATISTICS ON INCOME AND LIVING CONDITIONS 2012

MEMBERS REGISTER

The provision of data to ELSTAT is OBLIGATORY.

All information provided through the questionnaire is used only for statistical purposes and the answers in the questions are CONFIDENTIAL (L.3832/2010).

Piraeus 2012

(0)	(1)	(2)	(3)		(4)	(5)	(5a)	(6)	(7)	(	3)	(	9)	(10	))
	(-)	(4)	(6)	Date of birth		Sex	Immigrati on year	For all current members  ti 1. Current member/ also in previous wave 2. Moved in from other sample household		For members that moved out or died		For members that moved out			
S/N	Member's S/N	Name	Surname	Month	Year	Male=1 Female= 2		3.Moved in from	To another private household within the country**     To collective household or institution of the country     To another country     To unknown (non traceable) address	Month of movement/de ath	Year of movement/de ath	Number of months spent in the household	Main activity	Month at which the person moved in	Year
01															
02															
03									_						
04															
05															
06															
07															
08															
09															
10															

<sup>\*</sup> They stayed in the household for three months at least, during 2011 and they are not household's members today.

<sup>\*\*</sup> Split of household/Member's tracing sheet

## A. BASIC CHARACTERISTICS AND KAI CURRENT MEMBERSHIP STATUS

	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	
Person member	(To be filled if the column 6 has as code 1,2,3,or 4) Residential status 1: Lives here 2: Temporarily lives elsewhere	(To be filled if the column 6 has as code	column 6 has as code 1,2,3,or 4) Member's	Member's mother s/n. number. -2: If the mother is not member of the	the column 6 has as code	4) 16 years and up	has as code 1,2,3,or 4)	filled if the column 17 has as	s s s code 5)  S/n of the person who filled in the individual	(To be filled if the column 6 has as code 1,2,3,or 4)  Younger than 12 years old 1:Yes 2: No	(To be filled if the column 6 has as code 1,2,3,or 4) Number of children born (for	COLUMN 17:PERSONAL INTERVIEW RESULT 11. Personal Questionnaire completed 21. Personal questionnaire not completed due to illness or incapacity 22. The self-completed questionnaires weren't given back 23. Member refused to co-operate 31. Member is temporarily absent and the questionnaire cannot be filled in by proxy 32. Contact not made for other reasons 33. Interview not completed for unknown reasons  COLUMN 18: TYPE OF INTERVIEW 1.Questionnaire completed (PAPI) 2. Questionnaire completed (CAPI) 3. Questionnaire completed (CATI) 4. Self-administered by respondent 5. Proxy interview  COLUMN 19: Completed only if column 18 has value 5
												COLUMNS 9 AND 12: 1. Working
												2. Unemployed 3. Retired
												4. Other inactive (student, in military service, houswife, etc.)
												2.

#### **B. CHILD CARE FOR CHILDREN UP TO 12 YEARS OLD**

FOR THE INTERVIEWER: The following questions concern children born since April 2000. The rest members of the household will not be

registered.

regis	terea.						
(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)
		(For children born since 2006)	(For children born from April 2000 up to 2005)	(For children born since April 2000)	(For children born since April 2000)	(For children born since April 2000)	(For children born since April 2000)
S/N	Member's S/N	Number of hours per week in programs concerning pre-school education	Number of hours per week in programs concerning obligatory education	Number of hours per week in programs concerning child care inside school	Number of hours per week concerning child care outside school (baby parking)		Number of hours per week concerning child care by relatives or other persons
01							
02							
03							
04							
05							
06							
07							
80							
09							
10							

**COLUMN 2:** As pre-school education programs are considered kindergarten and creche.

**COLUMN 3:** As obligatory education program is considered the demotiko and gymnasium.

**COLUMN 4:** As child care program inside school is considered child care, in the morning, usually, from 7a.m. until lessons start and until 4p.m.The particular program does not exist in all schools. Included are private and public schools.

**COLUMN 5:** As child care program outside school is considered child care in especially adjusted places, at day-care centre, during the day.

**COLUMN 6:** Concerning child care by a professional child minder at child's minder home or at child's home.

COLUMN 7: Concerning child care by grand-parents, other household members (parents are excluded), other relatives, friends or neighbors.

### **C. IMMIGRATION**

**FOR THE INTERVIEWER:** The questions 1,2,3,4 concern persons with answer in column 5a.of section A( migration year) and question 5 concern persons with value 3 in column 7 of the same section.

(0)	(1)	(2)	(3)	(4)	(5)
	Member's S/N	Nationality	Birth country	Former residence country	Next residence country
01					
02					
03					
04					
05					
06					
07					
80					
09					
10					

# **C. MEMBER'S TRACING SHEET**

New address for split-off households		
MEMBER'S ID:  _ _ _ _   _	_ _	
NAME / SURNAME OF RESPONSIBLE	:	
PREFECTURE	÷	
MUNICIPALITY/COMMUNE	:	
ADDRESS	:	
PHONE NUMBER	:	
FOR THE INTERVIEWER:		
a. The split-off household will be interviewed in its	s new address by me	_  → Complete all the questionnaires
b. The split-off household will be interviewed in its interviewer (in other prefecture)	new address by another	$ \_ $ $ ightarrow$ Send a FAX(in the other prefecture
		END of the survey for the specific interviewer