

QUEST. 2



HELLENIC REPUBLIC



HELLENIC STATISTICAL AUTHORITY

GENERAL DIVISION OF STATISTICS
DIVISION OF POPULATION AND
LABOUR MARKET STATISTICS
UNIT OF HOUSEHOLD SURVEYS

TEL.: 213 135 2897

FAX: 213 135 2906

CONFIDENTIAL

HOUSEHOLD ID

NAME/SURNAME:

INTERVIEWER :

EUROPEAN UNION STATISTICS ON INCOME AND
LIVING CONDITIONS 2016

MEMBERS
REGISTER

The survey is being conducted in a sample of households having been randomly designed by the HSA. The supply of data is OBLIGATORY and the answers in the questions are CONFIDENTIAL (L.3832/2010).

Piraeus 2016

A. BASIC CHARACTERISTICS AND KAI CURRENT MEMBERSHIP STATUS

(0)	(1)	(2)	(3)	(4)		(5)	(5a)	(6)	(7)	(8)		(9)		(10)	
S/N	Member's S/N	Name	Surname	Date of birth		Sex	Immigration year	For all current members	For members that moved out	For members that moved out or died		For members that moved out or died or resided in the household for at least 3 months		For members that moved in	
				Month	Year			1. Current member/ also in previous wave 2.Moved in from other sample household 3.Moved in from another household 4. Newborn 5. Moved out 6. Died 7. Lived in the household for at least 3 months*		Month of movement/death	Year of movement/death	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															

* They stayed in the household for three months at least, during 2015 and they are not household's members today.

** Split of household/Member's tracing sheet

	(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 1,2,3,or 4) Main activity Status	(To be filled if the column 6 has as code 1,2,3,or 4) Member's father s/n -2: If the father is not member of the household	(To be filled if the column 6 has as code 1,2,3,or 4) Member's mother s/n. -2: If the mother is not member of the household	(To be filled if the column 6 has as code 1,2,3,or 4) Member's spouse/partner s/n. -2: If there is no spouse/partner or is not member of the household	(To be filled if the column 6 has as code 1,2,3,or 4) 16 years and up 1:Yes 2:No	(To be filled if the column 6 has as code 1,2,3,or 4) Interview's result	(To be filled if the column 17 has as code 11) Type of interview	(To be filled if the column 18 has as code 5) S/n of the person who filled in the individual questionnaire	(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 women 12 years old and up)	<p>COLUMN 17:PERSONAL INTERVIEW RESULT</p> <p>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</p> <p>COLUMN 18: TYPE OF INTERVIEW</p> <p>1.Questionnaire completed (PAPI) 2. Questionnaire completed (CAPI) 3. Questionnaire completed (CATI) 4. Self-administered by respondent 5. Proxy interview</p> <p>COLUMN 19: Completed only if column 18 has value 5</p>
												COLUMNS 9 AND 12:
												1. Working
												2. Unemployed
												3. Retired
												4. Other inactive (student, in military service, housewife, etc.)

B1. ΚΟΣΤΟΣ ΥΠΗΡΕΣΙΩΝ ΦΡΟΝΤΙΔΑΣ & ΕΚΠΑΙΔΕΥΣΗΣ: *The following questions concern members of the household than participate in education or training programs as well as children aged up to 12 years old taking formal child care services.*

[illegible]

B2. CHILD CARE FOR CHILDREN UP TO 12 YEARS OLD

FOR THE INTERVIEWER: The following questions concern children born since April 2003. The rest members of the household will not be registered.

(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)
S/N	Member's S/N	(For children born since 2010) Number of hours per week in programs concerning pre-school education	(For children born from April 2004 up to 2009) Number of hours per week in programs concerning obligatory education	(For children born since April 2004) Number of hours per week in programs concerning child care inside school	(For children born since April 2004) Number of hours per week concerning child care outside school (baby parking)	(For children born since April 2004) Number of hours per week concerning child care by child-minders	(For children born since April 2004) Number of hours per week concerning child care by relatives or other persons
01							
02							
03							
04							
05							
06							
07							
08							
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. 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 new address by me

□ → Complete all the questionnaires

- b. The split-off household will be interviewed in its new address by another interviewer (in other prefecture)

$|_|\rightarrow$ Send a FAX(in the other prefecture)

END of the survey for the specific interviewer