|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| MINISTRY OF PLANNING AND INVESTMENT | | | | | | | | | | | | | |
| **GENERAL STATISTICS OFFICE** | | | | | | | | | | | | | |
| **LABOU FORCE SURVEY QUESTIONNAIRE**  (The information collected at this investigation is carried out in accordance with Decision No. 637/QD-TCTK dated July 17, 2023  of the Director General of the General Statistics Office; used and confidential in accordance with the provisions of the Law on Statistics) | | | | | | | | | | | | | |
|  | ***Name of the 2019 Investor Program*** | ***Investment Code 2019*** | | | | |  | ***The name of the 202nd Labor Federation...*** | ***Labor Code 202...*** | | | | |
| PROVINCE/CITY: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |
| DISTRICTS/TOWNS/PROVINCIAL CITIES: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |
| COMMUNES/WARDS/TOWNSHIPS: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |
| VILLAGES/HAMLETS/HAMLETS/RESIDENTIAL GROUPS: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |
| INVESTIGATION AREA: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |
| URBAN/RURAL (URBAN=1; NONG THON=2): | …………………………………………… |  |  |  |  |  |  | ……………………………………… |  |  |  |  |  |
| HOUSEHOLD NUMBER: | …………………………………………… |  |  |  |  |  |  | ……………………………………… |  |  |  |  |  |
| FULL NAME OF THE HEAD OF THE HOUSEHOLD: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |
| HOUSEHOLD ADDRESS: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |

|  |  |
| --- | --- |
| **DETERMINATION OF THE ACTUAL PERMANENT RESIDENCE POPULATION OF HOUSEHOLDS** | |
| Q1. Please tell us the full names of those who have been regularly eating and staying at the household **for 6 months or more** as of 00:00 on 01/.../202... regardless of whether or not there is a permanent residence in the household (excluding the person of the household who is a student who is studying away from home or a high school student studying at boarding schools)?  SPECIFY THE FULL NAME OF EACH PERSON | |
| |  | | --- | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | | |  | | --- | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Q2. In his/her household, who has just moved into the household (including newborn children) **for less than 6 months** as of 00:00 on 01/.../202... But determined to live in the household for a long time? | HAVE 1 ASK FOR FIRST AND LAST NAME TO WRITE IN Q1, THEN MOVE TO Q3  NOT 2 |
| Q3. Of all the people who have been named, who are: (THOSE IN Q1)   1. Do high school students come to the hostel/stay? 2. People who come to visit for less than 1 year for the following purposes: visiting/visiting; summer vacation and public holidays; cure; work; short-term training...? 3. Foreigners who have not yet acquired Vietnamese nationality, overseas Vietnamese to visit their families? 4. Troops and police eat and live concentrated in barracks/units? | YES NO  1 2  1 2  1 2  1 2  (IF YOU ASK FOR YOUR FIRST AND LAST NAME, AND CROSS OUT YOUR NAME IN Q1) |

**DETERMINATION OF THE ACTUAL PERMANENT RESIDENCE POPULATION OF HOUSEHOLDS**

|  |  |
| --- | --- |
| Q4a. In your household, is there anyone who has been staying at the household for a long time but at 00:00 on 01/.../202... temporarily absent for the following reasons?   1. Going on a business trip for less than 6 months and not having a recruitment decision or labor contract? 2. Inpatient treatment at a medical facility? 3. People who have left the household for less than 1 year for the following purposes: going out/visiting; summer vacation, public holidays, tourism; cure; work; short-term training...? 4. High school students go to school/stay; people who go on trips; ocean liners; Fishing? 5. Going abroad within the permitted period? 6. Temporarily detained by the police and the military? | YES NO    1 2  1 2  1 2  1 2  1 2  1 2  (IF NO ONE BELONGS TO THE ABOVE SUBJECTS, MOVE TO Q5a) |
| Q4b. Please tell us the full names of these people?  (SPECIFY THE FULL NAME OF EACH PERSON)   |  |  | | --- | --- | |  |  | |  |  | |  |  | | |
| Q5a. There are people who still regularly eat and stay at home but have died after 0:00 on 01/.../202... and not named above? | HAVE 1  NOT 2 Q6 |
| Q5b. Please tell us the full names of these people?  (SPECIFY THE FULL NAME OF EACH PERSON)   |  |  | | --- | --- | |  |  | |  |  | |  |  | | |
| Q6. Persons who are actual permanent residents of households are:  READ THE NAMES OF THE PEOPLE SHOWN IN THE LIST  *(PEOPLE WHOSE NAMES ARE NOT CROSSED OUT IN Q1 AND THOSE WHOSE NAMES ARE IN Q4b and Q5b)* | |
| Q7. Please tell me who is the head of the household? (SPECIFY FULL NAME) | |

**PART 1: INFORMATION ABOUT HOUSEHOLD MEMBERS**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | NAME AND SEQUENCE NUMBER  QUESTION | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |  | |
|  | 1. What is the relationship of [NAME] with the head of the household? | | | | | | | |  |  | |
|  |  | HEAD OF HOUSEHOLD........................................ | 1 | |  |  |  |  |  |  | |
|  |  | WIFE/WEATS................................... | 2 | |  |  |  |  |  |  | |
|  |  | OFFSPRING....................................... | 3 | |  |  |  |  |  |  | |
|  |  | GRANDCHILDREN/GRANDCHILDREN........................ | 4 | |  |  |  |  |  |  | |
|  |  | PARENTS.................................... | 5 | |  |  |  |  |  |  | |
|  |  | OTHER FAMILY RELATIONS.............. | 6 | |  |  |  |  |  |  | |
|  |  | MAIDS..................... | 7 | |  |  |  |  |  |  | |
|  |  | OTHER (SPECIFY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) | 8 | |  |  |  |  |  |  | |
|  |  |  |  | |  |  |  |  |  |  | |
|  | 2. Is the NAME] male or female? | | | | | | | |  |  | |
|  |  | SOUTH.......................................... | 1 | |  |  |  |  |  |  | |
|  |  | FEMALE............................................. | 2 | |  |  |  |  |  |  | |
|  |  |  |  | |  |  |  |  |  |  | |
|  | 3. What calendar month or year was [NAME] born in? | | | | | | | |  |  | |
|  |  | MONTH................................................... | | | | | |  |  |  | |
|  |  | YEAR...................................................... | | | |  |  | 🡪KT1 | | | |
|  |  | YEAR KXD............................9998 |  | |  |  |  |  |  |  | |
|  | 4. At present, how old is [NAME] according to the solar calendar? | | | | | |  |  |  |  | |
|  |  |  |  | |
| **KT1. CHECK QUESTION 3 AND QUESTION 4 IF THE SUBJECT IS FROM 25 TO 49 YEARS OLD, ASK QUESTION 5, DIFFERENT FROM 🡪 KT2** | | | | | | | | | | | |
| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  | 1. Does NAME have children under 3 years old living in the same household? | | | | | | | |  |  | HAVE...................................................... | 1 |  |  |  |  | |  |  | NOT............................................ | 2 |  |  |  |  | |  | | | | | | | | | | | | | | | | | | | |
| **KT2. CHECK QUESTION 3 OR QUESTION 4: IF THE SURVEY SUBJECT IS 15 YEARS OLD OR OLDER** **🡪 , QUESTION 6;**  **OTHER 🡪 KT10** | | | | | | | | | | | |
|  | 6. Currently, is [NAME] residing in Vietnam or abroad? | | | | | | | |  | |  |
|  |  | IN VIETNAM................................. | 1 | |  | 🡪 C8 |  |  |  | |  |
|  |  | OVERSEAS........................... | 2 | |  |  |  |  |  | |  |
|  |  |  |  | |  |  |  |  |  | |  |
|  | 7. Name and country code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    KT10 | | | | | | |  |  | |  |

**PART 2: CHARACTERISTICS OF THE SUBJECT OF INVESTIGATION**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | NAME AND SEQUENCE NUMBER  QUESTION | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | |  | |  | |
|  | 8. What is [NAME]'s current marital status? | | | | | | | | | | | | | | | | | |  | | | |  | | |
|  |  | |  | UNMARRIED.................................. | | | 1 |  | |  | | | | | | |  | | | | | |  | |  |
|  |  | |  | MARRIED.................................... | | | 2 |  | |  | | | | | | |  | | | | | |  | |  |
|  |  | |  | WIDOW................................................... | | | 3 |  | |  | | | | | | |  | | | | | |  | |  |
|  |  | |  | DIVORCE.............................................. | | | 4 |  | |  | | | | | | |  | | | | | |  | |  |
|  |  | |  | SEPARATION............................................. | | | 5 |  | |  | | | | | | |  | | | | | |  | |  |
|  |  | |  |  | | |  |  | |  | | | | | | |  | | | | | |  | |  |
|  | 9. How long has [NAME] permanently resided in this ward, township or commune? | | | | | | | | | | | | | | | | | |  | | | |  | | |
|  |  | |  | LESS THAN 1 MONTH................................... | | | 1 |  | |  | | | | | | |  | | | | | |  | |  |
|  |  | |  | 1 TO LESS THAN 6 MONTHS......................... | | | 2 |  | |  | | | | | | |  | | | | | |  | |  |
|  |  | |  | 6 TO LESS THAN 12 MONTHS....................... | | | 3 |  | |  | | | | | | |  | | | | | |  | |  |
|  |  | |  | 12 MONTHS TO LESS THAN 5 YEARS............... | | | 4 |  | |  | | | | | | |  | | | | | |  | |  |
|  |  | |  | 5 YEARS OR MORE................................. | | | 5 |  | | 🡪 C13 | | | | | | |  | | | | | |  | |  |
|  |  | |  |  | | |  |  | |  | | | | | | |  | | | | | |  | |  |
|  | 10. What province/city/country is [NAME] moving here from? | | | | | | | | | | | | | | | | | |  | | | |  | | |
|  |  | | IN VIETNAM .............................................. | | | | 1 |  | |  | | | |  | | | | |  | | | |  | | |
|  |  | |  | PROVINCE/CITY PHỐ\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |  | | | | |  | |  | | |
|  |  | | FOREIGN............................................. | | | | 2 |  | |  | | | |  | | | | |  | | | |  | | |
|  |  | |  | NAME AND NƯỚC\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CODE | | | | | |  | | | |  | | | | | 🡪C13 | | | |  | | |
|  | 11. Is the actual place of permanent residence before [NAME] moves here a ward, township or commune? | | | | | | | | | | | | | | | | | |  | | | |  | | |
|  |  | |  | WARD/TOWNSHIP...................... | | | 1 |  | |  | | | | | | | | | | | | | | | |
|  |  | |  | COMMUNE............................................... | | | 2 |  | |  | | | | | | | | | | | | | | | |
|  |  | |  |  | | |  |  | |  | | | | | | | | | | | | | | | |
| 12. What is the main reason for [NAME] moving to his current residence?  FIND A JOB/START A NEW JOB ................. 1  LOSS/LOSS OF WORK, UNABLE TO FIND WORK.......... 2  BY FAMILY/MOVING......................... 3  DUE TO THE ................................................ EPIDEMIC 4  MARRIED........................................................... 5  GO TO SCHOOL.............................................................. 6  OTHER 7  (SPECIFY) | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | |  | | | |  | | |
|  | 13. Currently, is [NAME] currently attending a school in the National Education System? | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | HAVE.............................................. | | | 1 |  | |  | | | |  | | | | |  | | | |  | | |
|  |  | |  | NOT........................................ | | | 2 |  | |  | | | |  | | | | |  | | | |  | | |
|  |  | |  |  | | |  |  | |  | | | |  | | | | |  | | | |  | | |
| **KT3. CHECK QUESTION 4: IF THE MOBILE PHONE IS FROM 15 TO 24 YEARS OLD AND C13=2 🡪 C14; OTHER 🡪 QUESTION 15** | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 14. Is [NAME] currently pursuing short-term vocational training or supplementing any knowledge and skills? | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | HAVE.............................................. | | | 1 |  | |  | | | |  | | | | |  | | | |  | | |
|  |  | |  | NOT........................................ | | | 2 |  | |  | | | |  | | | | |  | | | |  | | |
|  | 15. What is the highest level of general education that [NAME] has graduated/achieved? | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | NEVER WENT TO SCHOOL................. | | | 1 |  | | | | | |  | | | | |  | | | |  | | |
|  |  | |  | HAVEN'T FINISHED PRIMARY SCHOOL......... | | | 2 |  | |  | | | |  | | | | |  | | | |  | | |
|  |  | |  | PRIMARY EDUCATION.................................... | | | 3 |  | |  | | | |  | | | | |  | | | |  | | |
|  |  | |  | MIDDLE SCHOOL..................... | | | 4 |  | |  | | | |  | | | | |  | | | |  | | |
|  |  | |  | PHUTHONG HIGH SCHOOL............. | | | 5 |  | |  | | | |  | | | | |  | | | |  | | |
| **KT4.** | **CHECK QUESTION 15: IF QUESTION 15=1 🡪 QUESTION 18; OTHER 🡪 VERSE 16** | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 16. Does [NAME] have a [...] | | | | | | | | | | | | | 1.YES | | | | | 2.NO | | | | | | |
|  |  | | Primary/Driver's License............................................. | | | | | | | | | | |  | | | | |  | | | | | | |
|  |  | | Intermediate .................................................................. | | | | | | | | | | |  | | | | |  | | | | | | |
|  | **ONLY FOR PEOPLE 18 YEARS OF AGE OR OLDER** | | | | | | |  | |  | | | |  |  | | | |  | | | | | | |
|  |  | | College.................................................................. | | | | | | | | | |  | | | | | |  | | | | | | |
|  |  | | University..................................................................... | | | | | | | | | | |  | | | | |  | | | | | | |
|  |  | | Master of ..................................................................... | | | | | | | | | | |  | | | | |  | | | | | | |
|  |  | | Ph.D......................................................................... | | | | | | | | | | |  | | | | |  | | | | | | |
| **KT5. CHECK: IF QUESTION 16 HAS ANY CODE "1" 🡪 QUESTION 17; IF QUESTION 16 ALL HAVE THE CODE "2" 🡪 QUESTION 18;** | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 17. With the highest qualification being [CODE 1 AT THE HIGHEST LEVEL IN QUESTION 16], what major has [NAME] been trained in and what year is the year of graduation in that major? | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | MAJOR NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | |  | | | | | | |
|  |  | |  | | | |  | |  | |  |  | | | | | |  | |  | | | | | |
|  |  | | TRAINING CODE ...................................... | | | |  | |  | |  | | |  | |  | | | |  | | | | | |
|  |  | | GRADUATION YEAR ............................................ | | | |  | |  | |  | | |  | |  | | | | 🡪C19 | | | | | |
|  |  | | | | | | | |  | |  |  | | | | | |  | |  | | | | | |
|  | 18. Is [NAME] recognized [...] | | | | | | | | | 1.YES 2.NO | | | | | | | | |  | | | | | | |
|  |  | | Technical workers do not have degrees/certificates......... | | | | | | |  | | | | | | | | |  | | | | | | |
|  |  | | Vocational skills less than 3 months ......................................... | | | | | | |  | | | | | | | | |  | | | | | | |
|  |  | | Vocational certificate less than 3 months ..................................... | | | | | | |  | | | | | | | | |  | | | | | | |

**SECTION 3: EMPLOYMENT STATUS**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  |
|  | 19. In the past 7 days, has [NAME] done any job for 1 hour or more to receive wages/salaries? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | | 1 | | | 🡪 SECTION 4 | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | NOT........................................ | | | | | 2 | | |  | | | | | | | | | | | |  | | | | | |  | | | | |  | | |  | | |
|  | 20. In the past 7 days, has [NAME] participated in or performed any production or business work for 1 hour or more to generate income? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | | 1 | | | 🡪 C27 | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | NOT........................................ | | | | | 2 | | |  | | | | | | | | | | | |  | | | | | |  | | | | |  | | |  | | |
|  | 21. In the last 7 days, has [NAME] helped the member of the household or family in their work to receive wages/salaries or earn profits even in just 1 hour? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | | 1 | | | 🡪 C27 | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | NOT........................................ | | | | | 2 | | |  | | | | | | | | | | | |  | | | | | |  | | | | |  | | |  | | |
|  | 22. Despite not working in the last 7 days, does [NAME] still have a salaried/salaried job or a production or business job and plan to return to that job? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | | 1 | | | | |  | | | | | | | | | |  | | | | | |  | | | | |  | | |  | | |
|  |  |  | NOT........................................ | | | | | 2 | | | 🡪 C26 | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  | 23. What is the main reason for [NAME]'s temporary resignation in the last 7 days? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | WAITING TO START A NEW JOB OR BUSINESS............................ | | | | | | 1 | | 🡪 C26 | | | | | | |  | | |  | | | | |  | | | | | | | |
|  |  |  | WORK IN SHIFTS/CREWS, FLEXIBLE TIME/DUE TO THE NATURE OF THE WORK........................ | | | | | | 2 | |  | | | | | | |  | | |  | | | |  | | | | | | |  | |
|  |  |  | SEASONAL WORK........................ | | | | | | 3 | | 🡪 C26 | | | | | | |  | | |  | | | | |  | | | | | | | |
|  |  |  | SUMMER VACATION/HOLIDAYS/TRAVEL..................... | | | | | | 4 | | 🡪 C27 | | | | | | |  | | |  | | | | |  | | | | | | | |
|  |  |  | ILLNESS/ACCIDENT....................................... | | | | | | 5 | |  | | | | | |  | |  | |  | | | | | | | | |  | | | |
|  |  |  | MATERNITY LEAVE......................................... | | | | | | 6 | |  | | | | | |  | |  | |  | | | | | | | | |  | | | |
|  |  |  | SCHOOL/TRAINING...................................... | | | | | | 7 | |  | | | | | |  | |  | |  | | | | | | | | |  | | | |
|  |  |  | BUSY WITH PRIVATE AFFAIRS....................................... | | | | | | 8 | |  | | | | | |  | |  | |  | | | | | | | | |  | | | |
|  |  |  | FURLOUGH/PRODUCTION SUSPENSION/CUSTOMER REDUCTION.......................... | | | | | | 9 | |  | | | | | |  | |  | |  | | | | | | | | |  | | | |
|  |  |  | BAD WEATHER........................ | | | | | 10 | | |  | | | | | |  | |  | |  | | | | | | | | |  | | | |
|  |  |  | DUE TO THE EPIDEMIC.................................  STRIKES/DEMONSTRATIONS............................ | | | | | 11  12 | | |  | | | | | |  | |  | |  | | | | | | | | |  | | | |
|  |  |  | DISABILITY/LONG-TERM ILLNESS............... | | | | | 13 | | |  | | | | | |  | |  | |  | | | | | | | | |  | | | |
|  |  |  | OTHER (SPECIFY THIS) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | 14 | | |  | | | | | |  | |  | |  | | | | | | | | |  | | | |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | 24. Is [NAME] sure to return to work on leave within the next 30 days? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  | IF QUESTION 23=6, CAPI AUTOMATICALLY CORRECTS THE QUESTION: "WILL NAME] BE SURE TO RETURN TO WORK ON LEAVE WITHIN 30 DAYS AFTER THE END OF MATERNITY LEAVE?" | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | | | 1 | | 🡪 C27 | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  |  |  | NOT........................................ | | | | | | 2 | |  | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  | 25. During the break period, will [NAME] receive wages/salaries or benefit from the job? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | | 1 | | | 🡪 C27 | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  |  |  | NOT........................................ | | | | | 2 | | |  | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  | 26. In the past 7 days, has [NAME] done any work in the agriculture/livestock, fisheries or forestry industries? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | | 1 | | | 🡪 C28 | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  |  |  | NOT........................................ | | | | | 2 | | | 🡪C31 | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  | 27. Is [NAME] [currently doing/taking a break] in the cultivation/livestock, fisheries, forestry or other industries? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  | IF C20=1 OR C21=1 THEN CAPI APPEARS "IN PROGRESS". OTHER SCHOOLS APPEAR "ON BREAK" | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  |  | FARMING/LIVESTOCK.................. | | | | 1 | | | |  | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  |  |  | FISHERIES......................................... | | | | 2 | | | |  | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  |  |  | FORESTRY..................................... | | | | 3 | | |  | | | | | | | | | | | |  | | | | | | |  | | | | |  | | |  | | |
|  |  |  | DIFFERENT................................................ | | | | 4 | | | | 🡪 SECTION 4 | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  | 28. Is the primary purpose of the products produced from this work for sale or for family use? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | FOR SALE ONLY......................................... | | | | 1 | | | | 🡪SECTION 4 | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | MAINLY FOR SALE................................. | | | | 2 | | | | 🡪SECTION 4 | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | FOR FAMILY USE ONLY........................ | | | | 3 | | | |  | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  |  |  | MAINLY FOR FAMILY USE................ | | | | 4 | | | |  | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  | 29. Does this [NAME] work for someone else or for one's family? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | FOR MY FAMILY.................. | | | | 1 | | | |  | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  |  |  | WORK FOR OTHERS........... | | | | 2 | | | | 🡪 SECTION 4 | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  | 30. Apart from creating products for family use, in the past 7 days, has [NAME] done any other work or business activity even for an hour to generate income? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | 1 | | | | 🡪 SECTION 4 | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | NOT........................................ | | | | 2 | | | |  | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | 31. In the past 30 days, did [NAME] actively look for a job or prepare to start production and business activities? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | 1 | | | | 🡪 C33 | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | NOT........................................ | | | | 2 | | | |  | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
|  | 32. Is [NAME] not looking for a job because he has found a job or is ready to start a business? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | 1 | | | |  | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | NOT........................................ | | | | 2 | | | | 🡪 C34 | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
| 33. How did [NAME] find a job or start production and business activities?   |  |  |  | | --- | --- | --- | |  | 1.YES | 2.NO | | Apply for a job .............................................................................. A |  |  | | Contact/Consult ...................................... employment service establishments B |  |  | | Through friends/relatives ................................................................... C |  |  | | Set up .................................................................... job ads D |  |  | | Via recruitment announcement (online/print) ........................... E |  |  | | Participated in the interview .................................................................... F |  |  | | Find a freelance job ................................................................................. G |  |  | | Preparing to start production and business activities......................... H |  |  | | Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ I  (Write specifically) |  |  | | C36 |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | |
|  | 34. Currently, does [NAME] really need a job to generate income? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | 1 | | | |  | | | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | NOT........................................ | | | | 2 🡪 C38 | | | | | | |  | | | | | | | | | | | | | | | | |  | |  |  | | | | | | |  |
|  |  |  |  | | | |  | | | |  | | | | | | | | | | |  | | | | | |  | | | | | |  | | |  | | |
| NAME AND ORDER NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  QUESTION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 35. What is the main reason that [NAME] hasn't looked for a job in the last 30 days? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | TOO OLD/TOO YOUNG........................................ | | | | | | | | 1 | | | |  | | | | | | | | | | | | | | | | | | |  | | | | |  | |
|  |  |  | INCAPACITY............................. | | | | | | | | 2 | | | | |  | | | | | | | | | | | | | | | | | |  | | |
|  |  |  | DOMESTIC........................................................ | | | | | | | | 3 | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | |
|  |  |  | BUSY STUDYING (STUDENTS/APPRENTICES) ............................ | | | | | | | | 4 | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | |
|  |  |  | DON'T WANT/DON'T NEED TO GO TO WORK.................. | | | | | | | | 5 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  |  |  | BELIEVE THERE IS NO JOB/NO PROPER JOB............................................................... | | | | | | | | 6 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  |  |  | I DON'T KNOW WHERE/HOW TO FIND IT............................................................... | | | | | | | | 7 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  |  |  | TEMPORARY SUSPENSION DUE TO DOWNSIZING/DISCONTINUATION OF PRODUCTION............................................................. | | | | | | | | 8 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  |  |  | WAITING FOR WORK/WAITING FOR THE OPENING OF THE Business CONTRACT.................. | | | | | | | | 9 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  |  |  | SEASONAL BREAK ............................................... | | | | | | | | 10 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  |  |  | BAD WEATHER................................ | | | | | | | | 11 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  |  |  | DUE TO THE EPIDEMIC............................................... | | | | | | | | 12 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  |  |  | BUSY WITH FAMILY/RESTING .............. | | | | | | | | 13 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  |  |  | FARMING......................................... | | | | | | | | 14 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  |  |  | TEMPORARY SICKNESS/ILLNESS ......................................... | | | | | | | | 15 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  |  |  | OTHER (SPECIFY) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | 16 | | | |  | | | | | | | | |  | | | | | |  | | | |  | | | | |  | |
|  | 36. If there is a job, will [NAME] be available to work within the next 2 weeks? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | HAVE................................................................ | | | | | | | 1 | | |  | | | | | | | | |  | | | | | | |  | | | | |  | | |  | | | | | | |
|  |  |  | NOT............................................................. | | | | | | | 2 | | | 🡪 C38 | | | | | | | | | |  | | | |  | | | | | | |  |
|  | 37. How long is [NAME] unemployed and looking for a job or preparing for production and business activities? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | LESS THAN 1 MONTH ............................................. | | | | | | | 1 | | |  | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | 1 TO LESS THAN 3 MONTHS ................................... | | | | | | | 2 | | |  | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | 3 TO LESS THAN 6 MONTHS.................................... | | | | | | | 3 | | |  | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | 6 TO LESS THAN 12 MONTHS ................................ | | | | | | | 4 | | |  | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | 1 YEAR TO LESS THAN 2 YEARS .............................. | | | | | | | 5 | | |  | | | | | | | | | |  | | | |  | | | | | | |  |
|  |  |  | FROM 2 YEARS OR MORE ..................................... | | | | | | | 6 | | |  | | | | | | | | | |  | | | |  | | | | | | |  |
|  | 38. What is the main reason that [NAME] is not working? | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  |  |  | SCHOOL/TRAINING.......................................... | | | | | | | 1 | | 🡪 SECTION 6 | | | | | | | | | | |  | | | | | |  | | | | |  | | | |  | | | | | | |
|  |  |  | HOUSEWORK, HOUSEWORK.......................... | | | | | | | 2 | | 🡪 SECTION 6 | | | | | | | | | | |  | | | | | |  | | | | |  | | | |  | | | | | | |
|  |  |  | ILLNESS/INCAPACITY............... | | | | | | | 3 | | 🡪 SECTION 6 | | | | | | | | | | |  | | | | | |  | | | | |  | | | |  | | | | | | |
|  |  |  | FARMING/FISHERY IS MAINLY FOR FAMILY USE....................................... | | | | | | | 4 | | 🡪 SECTION 6 | | | | | | | | | | |  | | | | | |  | | | | |  | | | |  | | | | | | |
|  |  |  | RETIRE.................................................... | | | | | | | 5 | | 🡪 SECTION 6 | | | | | | | | | | |  | | | | | |  | | | | |  | | | |  | | | | | | |
|  |  |  | OTHER (SPECIFY )...................................... | | | | | | | 6 | | 🡪 SECTION 6 | | | | | | | | | | |  | | | | |  | | | | | |  | |

**SECTION 4: MAIN WORK**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| Now I'm going to ask about [NAME's] main job. The main job is the work that is frequent, takes up the most time or generates the largest income, excluding the work of creating products with the main purpose of using the family. | | | | | | | | | | | | | | | | | |
|  | 39. Describe the main work of [NAME]? (E.G. MORTAR OR BRICK PORTERS TO BUILD HOUSES) | | | | | | | | | | | | | | | | |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | |  |  |
|  | 40. Describe the title (if any) of [NAME] in this work? | | | | | | | | | | | | |  | |  |  |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  | | |  | |  | |  | |  |  |
|  |  |  |  | | | |  | | | JOB CODE | | | | | | |  |
|  | 41. What is the name of the establishment where [NAME] does the above work? | | | | | | | | | | | | | | | |  |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | |  |
|  | 42. What are the main activities or main products/services of the facility where [NAME] works? | | | | | | | | | | | | | | | |  |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  | | |  | |  | |  | |  |  |
|  |  |  |  | | | | INDUSTRY CODE | | | | | | | | | |  |
|  | 43. What are the following types of establishments where [NAME] works? | | | | | | | | | | | | | | |  |  |
|  |  |  | Households engaged in agricultural, forestry and fishery activities............ | | | | | 1 | | |  |  | |  | |  |  |
|  |  |  | Individual production and business establishments (other than agricultural, forestry and fishery households............. ................ | | | | | 2 | | |  |  | |  | |  |  |
|  |  |  | Individuals are freelancing......................................... | | | | | 3 | | |  |  | |  | |  |  |
|  |  |  | ................................................... Cooperative | | | | | 4 | | | 🡪 C45 | | |  | |  |  |
|  |  |  | State-owned enterprises.................. | | | | | 5 | | | 🡪 C45 | | |  | |  |  |
|  |  |  | Privately owned enterprises.................... | | | | | 6 | | | 🡪 C45 | | |  | |  |  |
|  |  |  | Foreign-owned enterprises.... | | | | | 7 | | | 🡪 C45 | | |  | |  |  |
|  |  |  | State non-business units............................ | | | | | 8 | | | 🡪 C45 | | |  | |  |  |
|  |  |  | Non-state non-business units...................... | | | | | 9 | | | 🡪 C45 | | |  | |  |  |
|  |  |  | Legislature/executive/judiciary................ | | | | | 10 | | | 🡪 C45 | | |  | |  |  |
|  |  |  | socio-political organizations (Party, Youth Union, Women's Union...) ………………………...……….. | | | | | 11 | | | 🡪 C45 | | |  | |  |  |
|  |  |  | Foreign organization (non-profit operation) | | | | | 12 | | | 🡪 C45 | | |  | |  |  |
|  |  |  | Other mass organizations (Textile and Garment Association. Vietnam Leather Footwear Association...) ………………………….. | | | | | 13 | | |  | | |  | |  |  |
|  | 44. Does the establishment where [NAME] works have a business registration? | | | | | | | | | | | | | | |  |  |
|  |  |  | HAVE................................................................. | | | | 1 | | |  | |  | |  | |  |  |
|  |  |  | NOT.............................................................. | | | | 2 | | |  | |  | |  | |  |  |
|  | 45. In fact, how many hours has [NAME] been doing this job in the last 7 days? (UNIT: HOURS) | | | | | | | | | | | | | | |  |  |
| **KT6. CHECK QUESTION 45=0 🡪 QUESTION 46; OTHER 🡪 VERSE 47** | | | | | | | | | | | | | | | | | |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | |
|  | 46. Is [NAME] taking a break from this job for the past 7 days? | | | | | | | | | | | | | |  |  |  |
|  |  |  | HAVE.............................................. | | | | 1 | | |  | |  | |  | |  |  |
|  |  |  | NOT........................................ | | | | 2 | | | 🡪 CHECK VERSE 45 | | | | | | |  |
|  | 47. How much wage/salary or profit did [NAME] receive from this job last month? Does wage/salary include overtime, bonuses, occupational allowances and other benefits? | | | | | | | | | | | | | | | | |
|  |  |  | No income | | | | 1 | | |  | |  | |  | |  |  |
|  |  |  | Less than 1 million | | | | 2 | | |  | |  | |  | |  |  |
|  |  |  | From 1 million to less than 10 million | | | | 3 | | |  | |  | |  | |  |  |
|  |  |  | From 10 million to less than 20 million............ | | | | 4 | | |  | |  | |  | |  |  |
|  |  |  | From 20 million to less than 50 million............ | | | | 5 | | |  | |  | |  | |  |  |
|  |  |  | From 50 million to less than 100 million............ | | | | 6 | | |  | |  | |  | |  |  |
|  |  |  | From 100 million or more............ | | | | 7 | | |  | |  | |  | |  |  |
| **KT7. CHECK: IF SENTENCE 47=1 THEN CAPI AUTOMATICALLY ASSIGNS SENTENCE 48=0 AND TRANSFERS SENTENCE 49; OTHER => VERSE 48** | | | | | | | | | | | | | | | | | |
|  | 48. Specifically, how much money does [NAME] receive for this job*?*  *(*UNIT OF CALCULATION: THOUSAND VND) | | | | | | | | | | | | | | |  |  |
|  | 49.[NAME] What is the role of doing this job? | | | | | | | | | | | | | | |  |  |
|  |  |  | Owner of the establishment (with hired labor) ............ | | | | 1 | | | 🡪 C51 | | | |  | |  |  |
|  |  |  | DIY .................................... | | | | 2 | | | 🡪 C51 | | | |  | |  |  |
|  |  |  | Domestic Labor .......................... | | | | 3 | | | 🡪 C51 | | | |  | |  |  |
|  |  |  | Cooperative members ......................... | | | | 4 | | | 🡪 C51 | | | |  | |  |  |
|  |  |  | Working as a ..................... salary | | | | 5 | | |  | |  | |  | |  |  |
|  | 50. For this job, what type of labor contract has [NAME] signed? | | | | | | | | | | | | | | |  |  |
|  |  |  | Indefinite-term contracts..... | | | | 1 | | |  | |  | |  | |  |  |
|  |  |  | The contract is 1 year to less than 3 years...... | | | | 2 | | |  | |  | |  | |  |  |
|  |  |  | The contract is 3 months to less than 1 year.... | | | | 3 | | |  | |  | |  | |  |  |
|  |  |  | The contract is less than 3 months.................... | | | | 4 | | |  | |  | |  | |  |  |
|  |  |  | Work contract......... | | | | 5 | | |  | |  | |  | |  |  |
|  |  |  | Oral Agreement........................... | | | | 6 | | |  | |  | |  | |  |  |
|  |  |  | No labor contract............. | | | | 7 | | |  | |  | |  | |  |  |
|  | 51. Does [NAME] participate in paying social insurance premiums at the place where [NAME] works above? | | | | | | | | | | | | | | |  |  |
|  |  |  | HAVE.................................................... | | | | 1 | | |  | |  | |  | |  |  |
|  |  |  | NOT............................................... | | | | 2 | | | 🡪 C53 | | | |  | |  |  |
|  | 52. What is the type of social insurance that [NAME] is participating in paying? | | | | | | | | | | | | | | |  |  |
|  |  |  | COMPULSORY SOCIAL INSURANCE.................................. | | | | 1 | | |  | |  | |  | |  |  |
|  |  |  | VOLUNTARY SOCIAL INSURANCE............................... | | | | 2 | | |  | |  | |  | |  |  |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | |
|  | 53. How long has [NAME] been doing the above work? | | | | | | | | | | | | | | |  |  |
|  |  |  | LESS THAN 1 MONTH................................... | | | | 1 | | |  | |  | |  | |  |  |
|  |  |  | FROM 1 TO LESS THAN 3 MONTHS..................... | | | | 2 | | |  | |  | |  | |  |  |
|  |  |  | FROM 3 TO LESS THAN 12 MONTHS................... | | | | 3 | | |  | |  | |  | |  |  |
|  |  |  | FROM 12 MONTHS TO LESS THAN 3 YEARS............. | | | | 4 | | |  | |  | |  | |  |  |
|  |  |  | FROM 3 YEARS TO LESS THAN 9 YEARS ................ | | | | 5 | | |  | |  | |  | |  |  |
|  |  |  | FROM 9 YEARS OR MORE .............................. | | | | 6 | | |  | |  | |  | |  |  |
|  | 54. Apart from this job, does [NAME] do any other job to receive salary/wages or production and business activities to generate income? (Excluding the work of creating products with the main purpose of using them for their families) | | | | | | | | | | | | | | | | |
|  |  |  | HAVE.............................................. | | | | 1 | | |  | |  | |  | |  |  |
|  |  |  | NOT........................................ | | | | 2 | | 🡪 C65 | | | |  |  | |  |  |

**SECTION 5: WORK OTHER THAN THE MAIN JOB**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | |  | | |  |
| Now I'm going to ask about [NAME's] second job. | | | | | | | | | | | | | | | | | |  | | |  |
|  | 55. Describe [NAME]'s second job? (E.G. MORTAR OR BRICK PORTERS TO BUILD HOUSES) | | | | | | | | | | | | | | | | |  | | |  |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | |  | | |  |
|  | 56. Describe the title (if any) of [NAME] in this work? | | | | | | | | | | | | | | | | |  | | |  |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |  | | |  | | | |  | |  | | | |  |
|  |  |  |  | | |  | | JOB CODE | | | | | | | | | | | | |  |
|  | 57. What is the name of the establishment where [NAME] does this job? | | | | | | | | | | | | | | | | |  | | |  |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | |  | | |  |
|  | 58. What is the main activity or main product/service of the facility where [NAME] works? | | | | | | | | | | | | | | | | |  | | |  |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  | | |  | | |  |  | | |  | | | |  | |
|  |  |  |  | | | INDUSTRY CODE | | | | | | | | | | | | | | |  |
|  | 59. In the last 7 days, how many hours has [NAME] been doing this job? (UNIT: HOURS) | | | | | | | | | | | | | | | | |  | | |  |
|  | 60. How much wage/salary or profit did [NAME] receive from this job last month? Does wage/salary include overtime, bonuses, occupational allowances and other benefits? | | | | | | | | | | | | | | | | | | | | |
|  |  |  | No income............................ | | | | 1 |  | |  | | | |  | | | |  | | |  |
|  |  |  | Less than 1 million..................................... | | | | 2 |  | |  | | | |  | | | |  | | |  |
|  |  |  | From 1 million to less than 10 million................ | | | | 3 |  | |  | | | |  | | | |  | | |  |
|  |  |  | From 10 million to less than 20 million.............. | | | | 4 |  | |  | | | |  | | | |  | | |  |
|  |  |  | From 20 million to less than 50 million.............. | | | | 5 |  | |  | | | |  | | | |  | | |  |
|  |  |  | From 50 million to less than 100 million............ | | | | 6 |  | |  | | | |  | | | |  | | |  |
|  |  |  | From 100 million or more.......................... | | | | 7 |  | |  | | | |  | | | |  | | |  |
| **KT8. IF THE SENTENCE 60=1 IS AUTOMATICALLY ASSIGNED THE SENTENCE 61=0 AND THE SENTENCE 62 IS TRANSFERRED, DIFFERENT 🡪 FROM THE 61 SENTENCE** | | | | | | | | | | | | | | | | | | | | | |
|  | 61. Specifically, how much money does [NAME] receive for this job*? (*UNIT OF CALCULATION: THOUSAND VND) | | | | | | | | | | | | | | | | |  | | |  |
|  | 62. In addition to the above two jobs, does [NAME] do any other jobs? (Excluding the work of creating products with the main purpose of using them for their families) | | | | | | | | | | | | | | | | |  | | |  |
|  |  |  | HAVE.............................................. | | | 1 | |  | |  | | | |  | | | |  | | |  |
|  |  |  | NOT........................................ | | | 2 | | 🡪C65 | | | | | |  | | | |  | | |  |
|  | 63. How many hours has [NAME] been doing these other jobs in the past 7 days? (UNIT: HOURS) | | | | | | | | | | | | | | | | |  | | |  |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | |
|  | 64. How much wage/salary or profit did [NAME] receive from these jobs last month? Does wage/salary include overtime, bonuses, occupational allowances and other benefits?  (UNIT OF CALCULATION: THOUSAND VND) | | | | | | | | | | | | | | | | | |  | |  |
|  | 65. In the last 7 days, the total number of hours done by [NAME] all jobs, including the main job and other jobs if any, is [......] hours, right? CAPI AUTOMATICALLY CALCULATES QUESTION 65 = QUESTION 45 + QUESTION 59 + QUESTION 63 | | | | | | | | | | | | | | | | |  | | |  |
|  |  |  | HAVE.............................................. | | | 1 | |  | |  | | | |  | | | |  | | |  |
|  |  |  | NOT........................................ | | | 2 | | 🡪Retest sentences: C45, C59 and C63 | | | | | | | | | | | | | |
|  |  |  |  | | |  | |  | | | | | | | | | | | | |  |
|  | 66. Last month, the total income from all of [NAME's jobs], including her main job and other jobs if any, was [......] right? CAPI AUTOMATICALLY CALCULATES QUESTION 66 = QUESTION 48 + QUESTION 61 + QUESTION 64 | | | | | | | | | | | | | | | | |  | | |  |
|  |  |  | HAVE.............................................. | | | 1 | |  | |  | | | |  | | | |  | | |  |
|  |  |  | NOT........................................ | | | 2 | | 🡪Retest sentences: C48, C61 and C64 | | | | | | | | | | | | | |
|  |  |  |  | | |  | |  | | | | | | | | | | | | |  |
|  | 67. Does [NAME] want to work overtime? | | | | | | | | | | | | | | | | |  | | |  |
|  |  |  | HAVE........................................... | | | 1 | |  | |  | | | |  | | | |  | | |  |
|  |  |  | NOT...................................... | | | 2 | | 🡪 SECTION 6 | | | | | |  | | | |  | | |  |
|  | 68. Can [NAME] start working overtime within the next 2 weeks? | | | | | | | | | | | | | | | | |  | | |  |
|  |  |  | HAVE.............................................. | | | 1 | |  | |  | | | |  | | | |  | | |  |
|  |  |  | NOT........................................ | | | 2 | |  | |  | | | |  | | | |  | | |  |
|  |  |  |  | | |  | |  | |  | | | |  | | | |  | | |  |

**SECTION 6: HOUSEHOLD CHORES**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 69. In the past 7 days, how many hours has [NAME] worked to grow crops or harvest or raise cattle or poultry or to cultivate or fish or hunt or collect natural products for the main purpose of their household use? (UNIT: HOURS) | | | | | | | | |  | | |  | |
| **KT9. CHECK IF 69=0 🡪 QUESTION 71; OTHER 🡪 QUESTION 70** | | | | | | | | | | | | | | |
|  | | 70. For the above job, is [NAME] the main worker or assistant to the household/family member? | | | | | |  | | | | | |  |
|  | |  |  | BE THE MAIN WORKER............. | 1 |  |  | | | |  |  | |  |
|  | |  |  | HELPER.............. | 2 |  |  | | | |  |  | |  |
|  | | 71. In the past 7 days, how many hours did [NAME] work to clean the house, wash clothes, cook, prepare food for the household, go to buy groceries and food for the household? (UNIT: HOURS) | | | | | | |  | | | | |  |
|  | | 72. In the past 7 days, how many hours did [NAME] work to produce products for family use such as making beds, cabinets, tables and chairs, making ceramics, sewing clothes, weaving carpets, repairing broken household items, repainting walls, ...? (UNIT: HOURS) | | | | | | |  | | | | |  |
|  | | 73. In the past 7 days, how many hours did [NAME] work to build, expand or expand the house or construction works of the household? (UNIT: HOURS) | | | | | | |  | | | | |  |
|  | | 74. In the past 7 days, how many hours did [NAME] work to care, help or support members (aged 18 years and over) of the household who are disabled, sick, or infirm? (UNIT: HOURS) | | | | | | |  | | | | |  |
|  | | 75. In the last 7 days, how many hours did [NAME] work to care for a child under the age of 18 in the household? (UNIT: HOURS) | | | | | | |  | | | | |  |
| **KT10. CHECK: IF THERE ARE NO MORE HOUSEHOLD MEMBERS ASK PART 7, IF THERE ARE STILL HOUSEHOLD MEMBERS 🡪 IN QUESTION 1** | | | | | | | | | | | | | | |

**PART 7: INFORMATION ABOUT THE LIVING SITUATION OF THE HOUSEHOLD**

**(ASK THE HEAD OF THE HOUSEHOLD OR A PERSON WHO IS KNOWLEDGEABLE ABOUT THE LIVING SITUATION OF THE HOUSEHOLD)**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
|  | 76**.** Compared to the previous month, has the current family life of Mr. / Mrs. [NAME OF HEAD OF HOUSEHOLD] improved? | | | | | | | | | | |
|  |  |  | IMPROVED........................ | | 1 | |  |  |  | |  |
|  |  |  | THE SAME................................. | | 2 | |  |  |  | |  |
|  |  |  | DECREASE.............................. | | 3 | |  |  |  | |  |
|  |  |  | UNFAMILIAR........................... | | 4 | |  |  |  | |  |
|  |  |  |  | |  | |  |  |  | |  |
|  | 77**.** Compared to the previous month, how has the current income of Mr. / Mrs. [NAME OF HEAD OF HOUSEHOLD] changed? | | | | | | | | | | |
|  |  |  | INCREASE................................... | | 1 | |  | 🡪 C79 |  | |  |
|  |  |  | UNCHANGED....................... | | 2 | |  | 🡪 C79 |  | |  |
|  |  |  | REDUCE .................................... | | 3 | |  |  |  | |  |
|  |  |  | UNFAMILIAR.............................. | | 4 | |  | 🡪 C79 |  | |  |
|  |  |  |  | |  | |  |  |  | |  |
|  | 78**.** What are the reasons for the decrease in the current income of Mr. / Mrs. [NAME OF HEAD OF HOUSEHOLD] compared to the previous month? | | | | | | | | | | |
|  |  |  |  | | 1.YES | | | 2.NO |  | |  |
|  |  |  | There are members who have lost their jobs/temporarily quit their jobs...................................... | |  | | |  |  | |  |
|  |  |  | Input costs for production and business activities of households increased ............... | |  | | |  |  | |  |
|  |  |  | The selling price of products from production and business activities of households decreased ............ | |  | | |  |  | |  |
|  |  |  | The scale of production and business activities of households decreased ...................................... | |  | | |  |  | |  |
|  |  |  | Due to the impact of natural disasters ........ | |  | | |  |  | |  |
|  |  |  | Due to the impact of the epidemic on people ............................... | |  | | |  |  | |  |
|  |  |  | Due to the impact of the epidemic on livestock, crops ..................... | |  | | |  |  | |  |
|  |  |  | Due to the influence of fire, fire and explosion | |  | | |  |  | |  |
|  |  |  | Other causes (Specified) \_\_\_\_\_\_\_\_ | |  | | |  |  | |  |
|  |  |  |  | |  | |  |  |  | |  |
|  | 79. Compared to the month [survey month] of the previous year, how has the current income of Mr. [NAME OF HEAD OF HOUSEHOLD] changed? | | | | | | | | | | |
|  |  |  | INCREASE................................... | | 1 | |  | 🡪C81 |  | |  |
|  |  |  | UNCHANGED....................... | | 2 | |  | 🡪C81 |  | |  |
|  |  |  | REDUCE .................................... | | 3 | |  |  |  | |  |
|  |  |  | UNFAMILIAR.............................. | | 4 | |  | 🡪C81 |  | |  |
|  |  |  |  | |  | | |  |  | |  |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
|  | 80. What are the reasons for the decrease in the current income of Mr. and Mrs. [NAME OF HEAD OF HOUSEHOLD] compared to the month [survey month] of the previous year? | | | | | | | | | | |
|  |  |  |  | | 1. YES | | | 2.NO |  | |  |
|  |  |  | There are members who have lost their jobs/temporarily quit their jobs ................................. | |  | | |  |  |  | |
|  |  |  | Input costs for production and business activities of households increased .................... | |  | | |  |  |  | |
|  |  |  | The selling price of products from production and business activities of households decreased ........... | |  | | |  |  |  | |
|  |  |  | The scale of production and business activities of households decreased ................................. | |  | | |  |  |  | |
|  |  |  | Due to the impact of natural disasters ....... | |  | | |  |  |  | |
|  |  |  | Due to the impact of the epidemic on humans........................ | |  | | |  |  |  | |
|  |  |  | Due to the impact of the epidemic on livestock, crops ....................... | |  | | |  |  |  | |
|  |  |  | Due to the influence of fire, fire and explosion | |  | | |  |  |  | |
|  |  |  | Other causes (Specified) \_\_\_\_ | |  | | |  |  |  | |
|  |  |  |  | |  | | |  |  |  | |
|  | 81. Compared to the previous month, how has the expenditure on food items of your household [NAME OF HEAD OF HOUSEHOLD] changed? | | | | | | | | | | |
|  |  |  | INCREASE................................... | | 1 |  | | 🡪C83 |  | |  |
|  |  |  | UNCHANGED....................... | | 2 |  | | 🡪C83 |  | |  |
|  |  |  | REDUCE .................................... | | 3 |  | |  |  | |  |
|  |  |  | UNFAMILIAR.............................. | | 4 |  | | 🡪C83 |  | |  |
|  |  |  |  | |  |  | |  |  | |  |
|  | 82. What are the reasons for the decrease in spending on food and food items of your household [NAME OF HEAD OF HOUSEHOLD] compared to the previous month? | | | | | | | | | | |
|  |  |  |  | | 1. YES | | | 2.NO |  | |  |
|  |  |  | Income decreases............................ | |  | | |  |  | |  |
|  |  |  | Due to the impact of natural disasters............. | |  | | |  |  | |  |
|  |  |  | Due to the influence of commodity prices  increase ..................................... | |  | | |  |  | |  |
|  |  |  | Due to the impact of the epidemic on humans.................................. | |  | | |  |  | |  |
|  |  |  | Due to the impact of the epidemic on livestock, crops ....................... | |  | | |  |  | |  |
|  |  |  | Other causes (Specified) \_\_\_\_\_\_\_ | |  | | |  |  | |  |
|  |  |  |  | |  | | |  |  | |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME AND SEQUENCE NUMBER  QUESTION | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
|  | 83. From the beginning of the year to the present, your household [NAME OF HEAD OF HOUSEHOLD] has been negatively affected by which of the following events? | | | | | | | |
|  |  |  |  | | 1. YES | 2.NO |  |  |
|  |  |  | Natural disasters ...................................... | |  |  |  |  |
|  |  |  | Prices of goods and services increased ..... | |  |  |  |  |
|  |  |  | Epidemics for humans ...... | |  |  |  |  |
|  |  |  | Epidemics for livestock and plants | |  |  |  |  |
|  |  |  | Fire, explosion ................... | |  |  |  |  |
|  |  |  | Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  |  |
|  |  |  |  | |  |  |  |  |
|  | 84. From the beginning of the year to the present, what sources of assistance has your household [NAME OF HEAD OF HOUSEHOLD] received? | | | | | | | |
|  |  |  |  | | 1. YES | 2.NO |  |  |
|  |  |  | General programs and policies of the .............................. | |  |  |  |  |
|  |  |  | Programs and policies of  local............................... | |  |  |  |  |
|  |  |  | Charitable activities of other organizations and individuals ............... | |  |  |  |  |
|  |  |  | Relatives and relatives ................ | |  |  |  |  |
|  |  |  | Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |  |  |
|  |  |  |  | |  |  |  |  |

FULL NAME OF THE INFORMANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER OF INFORMANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***The General Statistics Office would like to thank you for providing the information.***

***The information provided by you is for statistical purposes only***

***and shall be kept confidential in accordance with the provisions of the Law on Statistics.***