THIS SURVEY IS AUTHORIZED BY JTPA TITLE IV PART D SECTION 452

CASE # _____

NORC-4382-01
11/83--2nd Printing
OMB 1205-0044
EXP 12-31-84

INTERVIEWER:
(CODE ONE)

Personal
Interview 1

Telephone
Interview 2

NORC
University of Chicago

CENTER FOR HUMAN RESOURCE RESEARCH
Ohio State University

National Longitudinal Survey of Labor Force Behavior

ROUND SIX

Youth Survey, 1984

Introduction for Youth Survey Questionnaire:

Hello, I'm (NAME) from NORC at the University of Chicago. We'd like to talk to you once again about your recent work experiences and education, and this year we have some new questions on family life. You will receive $10 in appreciation for your time.

[(READ IF NECESSARY) In order that your answers to our questions are not biased by anyone else's presence, it is necessary that we conduct the interview in private.]

This study is sponsored by the U.S. Department of Labor, under authority of the Job Training Partnership Act, Public Law 97-300, as amended. The purpose of the survey is to conduct research on the education, training, and work experiences of youth in order to help solve youth's employment and unemployment problems. Your participation is vital to the success of the study, but is voluntary. Failure to respond will not have any effect on rights, benefits, and privileges under Federal programs. All the information you give will be protected under the Privacy Act of 1974. This means that your answers will be kept strictly confidential. Results of the study will be made public only in summary or statistical form so that individuals who participate cannot be identified.

NOTICE: ALL INFORMATION THAT WOULD PERMIT IDENTIFICATION OF RESPONDENTS OR THEIR HOUSEHOLDS WILL BE REGARDED AS STRICTLY CONFIDENTIAL, WILL BE USED ONLY FOR RESEARCH PURPOSES AND WILL NOT BE DISCLOSED OR RELEASED FOR ANY OTHER PURPOSE WITHOUT PRIOR CONSENT, EXCEPT AS REQUIRED BY LAW.

SECTION 1

10-13/

TIME BEGAN:	AM
	PM

1 INTERVIEWER: BEFORE CONDUCTING THIS INTERVIEW:

ENTER DATE OF LAST INTERVIEW AND TODAY'S DATE ON **CALENDAR.** DRAW A VERTICAL LINE THROUGH ROWS A-C AT EACH DATE TO INDICATE THE REFERENCE PERIOD FOR THIS YEAR'S INTERVIEW.

2. INTERVIEWER: USE **WEEK CALENDAR** TO DETERMINE WEEK NUMBERS FOR THE FOLLOWING DATES:

ENTER TODAY'S DATE: | | | | | 8| 4|

A. CIRCLE WEEK # ON THE **CALENDAR** OF TODAY'S DATE.

ENTER WEEK # OF TODAY'S DATE HERE -------> THIS WEEK | | | | A 14-16/

B. CIRCLE WEEK # ON THE CALENDAR OF LAST YEAR'S INTERVIEW DATE.

ENTER WEEK # OF LAST YEAR'S INTERVIEW DATE HERE ----------> LAST YEAR'S WEEK - | | | | B 17-19/

C. SUBTRACT B FROM A AND ENTER # OF WEEKS SINCE LAST INTERVIEW HERE ----------> = | | | | C 20-22/ ———

D. DOES C + B = A? YES.....(ASK E)..... 1
NO....(RETURN TO C AND CHECK SUBTRACTION)..... 0

E. SHOW R **CALENDAR** AND READ:

The last time we talked to you was on (DATE OF LAST INTERVIEW). That would be about (NUMBER OF WEEKS SINCE LAST INTERVIEW) weeks ago.

During how many of these weeks did you do any work for pay? Count weeks when you did any paid work and weeks on paid vacation or paid sick leave. Do not count weeks on layoff. Do not count military duty as work.

ENTER # OF WEEKS: | | | | E 23-25/ ———

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3. INTERVIEWER: DID R WORK THE ENTIRE TIME, THAT IS, ARE THE NUMBER OF WEEKS IN 2E EQUAL TO THE NUMBER OF WEEKS IN 2C?

Yes ..... (SKIP TO NEXT SECTION--2) 1 26/

No 0

4. INTERVIEWER: CALCULATE # OF WEEKS NOT WORKING.

→ A. NUMBER OF WEEKS SINCE LAST INTERVIEW (2C): |__|__|__|

→ B. NUMBER OF WEEKS WORKING (2E): - |__|__|__|

C. ENTER # OF WEEKS NOT WORKING = |__|__|__| 27-29/

D. DOES C + B = A? IF YES ..... (GO TO Q. 5)

IF NO ..... (REPEAT Q. 4 AND CHECK SUBTRACTION)

---

5. That leaves (NUMBER OF WEEKS NOT WORKING) weeks when you were not working or on paid vacation or paid sick leave. During how many of those weeks were you looking for work or on layoff from a job?

ENTER # OF WEEKS: |__|__|__| 30-32/

SECTION 2: MARITAL HISTORY

1. When we talked with you last, you said you were (READ MARITAL STATUS FROM **INFORMATION SHEET** ITEM # 1). Is that correct?

Yes ..... (ASK A) 1 33/

No ..... (CORRECT **INFO SHEET**, THEN ASK A) 0

A. Has there been any change in your marital status since (DATE OF LAST INTERVIEW)?

Yes ..... (GO TO Q.2) 1 34/

No ..... (ANSWER B) 0

B. INTERVIEWER: IF NO CHANGE IN STATUS, IS "MARRIED" CODED ON **INFO SHEET**?

Yes ..... (SKIP TO Q.5) 1 35/

No ..... (SKIP TO SECTION 3) 0

	FIRST CHANGE	SECOND CHANGE	THIRD CHANGE
2. A. Since (DATE OF LAST INTERVIEW), what was the (first/second/ ETC.) change in your marital status?	36/ Married .... 1 Separated .. 2 Divorced ... 3 Reunited ... 4 Remarried .. 5 Widowed 6	42/ Separated .. 2 Divorced ... 3 Reunited ... 4 Remarried .. 5 Widowed 6	48/ Separated .. 2 Divorced ... 3 Reunited ... 4 Remarried .. 5 Widowed 6
B. When did that happen? ENTER MONTH & YEAR.	37-38/ 39-40/ |_|_| 19 |_|_| MONTH YEAR	43-44/ 45-46/ |_|_| 19 |_|_| MONTH YEAR	49-50/ 51-52/ |_|_| 19 |_|_| MONTH YEAR
C. After that, was there any other change in your marital status?	Yes..(GO TO Q.2A FOR SECOND CHANGE) .. 1 41/ No . (GO TO Q. 3) 0	Yes..(GO TO Q.2A FOR THIRD CHANGE) .. 1 47/ No . (GO TO Q. 3) ... 0	Yes..(USE A 2ND QUESTIONNAIRE. GO TO Q. 2A, [P. 2-4] FOR THE NEXT CHANGE) .. 1 53/ No 0

3. INTERVIEWER: WAS "MARRIED" OR "REMARRIED" CODED IN Q. 2A FOR THE FIRST, SECOND, OR THIRD CHANGE?

YES ..... (GO TO. Q. 4) 1 54/

NO ..... (SKIP TO Q. 5) 0

IF Q. 2 WAS CODED "MARRIED" OR "REMARRIED", ASK Q. 4

4. When was your (most recent) (husband/wife) born?

ENTER MONTH: |__|__| 55-56/

AND YEAR: 19 |__|__| 57-58/

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5. INTERVIEWER: [IF R IS WIDOWED OR DIVORCED, READ: Even though your (husband/wife) is no longer with you, we would like to get some information about (him/her).]

During 1983, what kind of work did your (most recent) (husband/wife) do? RECORD VERBATIM.

INCLUDE MILITARY DUTY AS WORK FOR SPOUSE.

IF MORE THAN ONE OCCUPATION, PROBE FOR AND RECORD WORK DONE THE LONGEST DURING THAT PERIOD.

_____

PROBE: What were (his/her) main activities or duties?
PROBE FOR TWO MAIN DUTIES, RECORD VERBATIM, AND GO TO Q. 6

_____ 59-61/

_____

_____

_____

OR
DID NOT WORK DURING THAT PERIOD
(ENTER "00" IN 6A AND SKIP TO Q. 7) 995

OR
NEVER WORKED
(ENTER "00" IN 6A AND SKIP TO Q. 7) 996

OR
DON'T KNOW 998

---

6. A. During the 52 weeks of 1983, how many weeks did your (husband/wife) work at all jobs, either full or part time, not counting work around the house?

ENTER NUMBER OF WEEKS
WORKED IN 1983: |__|__| 62-63/

B. In the weeks your (husband/wife) worked, how many hours did (he/she) usually work per week?

ENTER NUMBER OF HOURS: |__|__| 64-65/

7. INTERVIEWER: TO FIND THE # OF WEEKS THE R'S SPOUSE WAS NOT WORKING IN 1983, SUBTRACT # OF WEEKS IN 6A FROM # OF WEEKS IN A YEAR (52) AND RECORD BELOW.

A. NUMBER OF WEEKS IN 1983: 52

B. NUMBER OF WEEKS IN 6A: -

C. ENTER NUMBER OF WEEKS NOT WORKING: |_|_| 66-67/

D. IF C = 00, GO TO SECTION 3.

IF C = 52, ASK:

You said your (husband/wife) did not work in 1983. How many weeks in 1983 was (he/she) looking for work or on layoff from a job?

OTHERWISE, ASK:

You said your (husband/wife) worked (NUMBER IN B) weeks during 1983. How many of the remaining (NUMBER ENTERED IN C) weeks was (he/she) looking for work or on layoff from a job?

ENTER NUMBER OF WEEKS LOOKING FOR WORK OR ON LAYOFF FROM A JOB: |_|_| 68-69/

SECTION 3: REGULAR SCHOOLING

Now, I would like to ask you some questions about school.

First, I would like to ask you about regular school, such as high school or college. By regular school we mean school which can be counted toward an elementary or high school diploma or a college, university, or professional school degree. Later in the interview I'll be asking about other types of schools and training programs.

1. At any time since (DATE OF LAST INTERVIEW), have you attended or been enrolled in regular school--that is, in an elementary school, a middle school, a high school, a college, or a graduate school?

Yes ..... (ASK A AND B)	1	10/
No ..... (SKIP TO Q. 8)	0	

A. IF YES: Since (MONTH AND YEAR OF LAST INTERVIEW), in which months were you attending regular school? (If you were attending regular school at all during the month, count it as a month attending school.) CODE ALL THAT APPLY. (IF INTERVIEW COVERS MORE THAN ONE YEAR, ONLY CODE FOR 1983 AND 1984.)

1983		
JANUARY	01	11-12/
FEBRUARY	02	13-14/
MARCH.....	03	15-16/
APRIL	04	17-18/
MAY	05	19-20/
JUNE	06	21-22/
JULY	07	23-24/
AUGUST	08	25-26/
SEPTEMBER	09	27-28/
OCTOBER	10	29-30/
NOVEMBER	11	31-32/
DECEMBER	12	33-34/
1984		
JANUARY	13	35-36/
FEBRUARY	14	37-38/
MARCH	15	39-40/
APRIL	16	41-42/
MAY	17	43-44/
JUNE	18	45-46/
JULY	19	47-48/
AUGUST	20	49-50/

1. (Continued)

B. Are you currently attending or enrolled in regular school?

Yes .. (CODE Q.E IN REGULAR SCHOOL BOX ON **CALENDAR.** THEN ASK C & D) 1 51/

No ... (CODE Q.E IN REGULAR SCHOOL BOX ON **CALENDAR.** THEN GO TO Q. 2) 0

IF YES TO B, ASK C & D:

C. What grade or year of regular school are you attending or enrolled in?

1ST GRADE	01	52-53/
2ND GRADE	02	
3RD GRADE	03	
4TH GRADE	04	
5TH GRADE	05	
6TH GRADE	06	
7TH GRADE	07	
8TH GRADE	08	
9TH GRADE	09	
10TH GRADE	10	
11TH GRADE	11	
12TH GRADE	12	
1ST YEAR OF COLLEGE	13	
2ND YEAR OF COLLEGE	14	
3RD YEAR OF COLLEGE	15	
4TH YEAR OF COLLEGE	16	
5TH YEAR OF COLLEGE	17	
6TH YEAR OF COLLEGE	18	
7TH YEAR OF COLLEGE	19	
8TH YEAR OF COLLEGE OR MORE	20	
UNGRADED	95	

D. INTERVIEWER: SPECIFY GRADE FROM C AT Q.E IN REGULAR SCHOOL BOX ON **CALENDAR.** THEN SKIP TO Q.4.

2. In what month and year were you last enrolled in regular school?

MONTH: |__|__| 54-55/

YEAR: |__|__| 56-57/

A. What is the main reason you left at that time? RECORD VERBATIM AND CODE ONE ONLY. IF MORE THAN ONE REASON GIVEN, PROBE: What is the one main reason?

_____

RECEIVED DEGREE, COMPLETED COURSE WORK 01 58-59/

EXPELLED OR SUSPENDED 10

GETTING MARRIED 02

PREGNANCY 03

SCHOOL TOO DANGEROUS 11

LACK OF ABILITY, POOR GRADES 05

OTHER REASONS DIDN'T LIKE SCHOOL 04

HOME RESPONSIBILITIES 06

OFFERED GOOD JOB, CHOSE TO WORK 07

FINANCIAL DIFFICULTIES, COULDN'T AFFORD TO ATTEND 08

ENTERED MILITARY 09

MOVED AWAY FROM SCHOOL 12

OTHER (SPECIFY) _____ 13

3. A. What is the highest grade of regular school you have ever attended? 60-61/

1ST GRADE	01
2ND GRADE	02
3RD GRADE	03
4TH GRADE	04
5TH GRADE	05
6TH GRADE	06
7TH GRADE	07
8TH GRADE	08
9TH GRADE	09
10TH GRADE	10
11TH GRADE	11
12TH GRADE	12
1ST YEAR OF COLLEGE	13
2ND YEAR OF COLLEGE	14
3RD YEAR OF COLLEGE	15
4TH YEAR OF COLLEGE	16
5TH YEAR OF COLLEGE	17
6TH YEAR OF COLLEGE	18
7TH YEAR OF COLLEGE	19
8TH YEAR OF COLLEGE OR MORE	20
UNGRADED	95

B. INTERVIEWER: ENTER HIGHEST GRADE R ATTENDED FROM Q. 3A AT Q.F IN REGULAR SCHOOL BOX ON **CALENDAR.** THEN GO ON TO Q.4 ON NEXT PAGE.

4. What is the highest grade or year of regular school that you have completed and gotten credit for? CIRCLE ONE CODE BELOW. 62-63/

1ST GRADE	01
2ND GRADE	02
3RD GRADE	03
4TH GRADE	04
5TH GRADE	05
6TH GRADE	06
7TH GRADE	07
8TH GRADE	08
9TH GRADE	09
10TH GRADE	10
11TH GRADE	11
12TH GRADE	12
1ST YEAR OF COLLEGE	13
2ND YEAR OF COLLEGE	14
3RD YEAR OF COLLEGE	15
4TH YEAR OF COLLEGE	16
5TH YEAR OF COLLEGE	17
6TH YEAR OF COLLEGE	18
7TH YEAR OF COLLEGE	19
8TH YEAR OF COLLEGE OR MORE	20
UNGRADED	95

5. INTERVIEWER: WHAT GRADE DOES R CURRENTLY ATTEND (SEE Q. 1C) OR WHAT IS THE HIGHEST GRADE R HAS ATTENDED SINCE THE DATE OF THE LAST INTERVIEW? (SEE Q. 3A)

UNGRADED ..... (SKIP TO Q. 33) 1 64/

GRADES 1-8 ... (SKIP TO Q. 33) 2

GRADES 9-12 .... (GO TO Q. 6) 3

GRADE 13 ..... (ASK A) 4

GRADES 14-20 .. (SKIP TO Q. 8) 5

A. IF GRADE 13: Since (DATE OF LAST INTERVIEW), have you attended grade 9, 10, 11, or 12?

Yes . (ENTER A CHECK MARK AT Q.G IN REGULAR SCHOOL BOX ON **CALENDAR.** THEN GO ON TO Q.6)..... 1 65/

No ..... (SKIP TO Q. 8) 0

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6. Do you feel that your high school program (is/was) largely vocational, commercial, college preparatory, or (is/was) it a general program? CODE ONE ONLY.

Vocational ..... (ASK A) 1 66/

Commercial ..... (ASK A) 2

College preparatory . (GO TO Q. 7) .. 3

General program ..... (GO TO Q. 7) .. 4

DON'T KNOW ..... (GO TO Q. 7) .. 8

A. IF CODES 1 OR 2: For what specific job (are/were) you training? RECORD VERBATIM.

_____ 67-69/

_____

_____

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7. INTERVIEWER: SEE 1C. IS RESPONDENT CURRENTLY ENROLLED IN GRADES 1-12 (Q. 1C CODED 1-12)?

YES ..... (SKIP TO Q. 33)..... 1 70/

NO 0

8. INTERVIEWER: SEE **INFORMATION SHEET**, ITEM 2. DID R HAVE A HIGH SCHOOL DIPLOMA OR GED AT THE TIME OF THE LAST INTERVIEW?

YES .....(SKIP TO Q. 10)..... 1 71/

NO 0

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9. Do you have a high school diploma or have you ever passed a high school equivalency or GED test?

Yes ..... (ASK A & B) 1 72/

No ..... (GO TO Q. 33)..... 0

IF YES, ASK A & B:

A. Which do you have, a high school diploma or a GED?

High school diploma..... 1 73/

GED 2

IF VOL.: Both ..(ASK B REGARDING HIGH SCHOOL DIPLOMA)..... 3

B. When did you receive your (high school diploma/GED)?

MONTH: |__|__| 74-75/

AND

YEAR: 19 |__|__| 76-77/

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10. INTERVIEWER: HAS R ATTENDED GRADE 13 OR HIGHER SINCE DATE OF LAST INTERVIEW (Q. 5 IS CODED 4 OR 5)?

YES ..... (SKIP TO Q.11) 1 78/

NO ..... (ANSWER A) 0

A. INTERVIEWER: IS A UNIVERSITY LISTED AT ITEM 3 OF THE **INFORMATION SHEET**?

YES ..... (GO TO Q.11) 1 79/

NO ..... (ASK B) 0

B. Have you ever attended a college or university? 80/

Yes ..... (GO TO Q.11) 1

NO ..... (SKIP TO Q.33) 0

11. Now, I would like to ask you about all of the degree-granting colleges or universities you have attended Let's start with the most recent first.

A. INTERVIEWER: ASK Q.12-31 FOR MOST RECENT SCHOOL BEFORE ASKING ABOUT NEXT SCHOOL, IF ANY.

	COLUMN 1 MOST RECENT SCHOOL BEGIN DECK 03	COLUMN 2 NEXT RECENT SCHOOL BEGIN DECK 04	COLUMN 3 NEXT RECENT SCHOOL BEGIN DECK 05
12. What is the name of the (next) college or university you (are currently attending/have most recently attended)?	10-40/ _____ _____	10-40/ _____ _____	10-40/ _____ _____
OFFICE USE ONLY	41-46/ |_____|	41-46/ |_____|	41-46/ |_____|
13. INTERVIEWER: SEE **INFORMATION SHEET** ITEM 3. IS THIS THE SAME SCHOOL AS LISTED ON THE **INFORMATION SHEET**?	47/ YES ..... 1 NO 0	47/ YES ..... 1 NO 0	47/ YES ..... 1 NO 0
14. Where is this school located? What is the town or city and state? INTERVIEWER NOTE: IF LOCATION IS IN A FOREIGN COUNTRY, LIST COUNTRY HERE ----->	48-65/ _____ (town or city)	48-65/ _____ (town or city)	48-65/ _____ (town or city)
	66-67/ _____ (state)	66-67/ _____ (state)	66-67/ _____ (state)
15. (Is/Was) (NAME OF SCHOOL) a 2-year or 4-year school?	68/ 2-year 1 4-year 2	68/ 2-year 1 4-year 2	68/ 2-year 1 4-year 2
16. When did you first attend or enroll in this (college/university)?	69-72/ |____| MONTH YEAR	69-72/ |____| MONTH YEAR	69-72/ |____| MONTH YEAR
17. What (is/was) your field of study at (NAME OF SCHOOL)? RECORD VERBATIM. PROBE IF NECESSARY: What (are/were) you majoring in?	73-76/ _____ _____ _____	73-76/ _____ _____ _____	73-76/ _____ _____ _____
18. (Does/Did) (NAME OF SCHOOL) consider you a full or part-time student? IF DON'T KNOW, PROBE: What (do/did) you consider yourself?	77/ full-time ... 1 part-time ... 2	77/ full-time ... 1 part-time ... 2	77/ full-time ... 1 part-time ... 2
19. About how many hours per week (do/did) your classes meet during the school year at (NAME OF SCHOOL) including time spent in lectures, laboratories, shop, etc.?	78-79/ |___| ENTER # OF HOURS (GO TO Q.20)	78-79/ |___| ENTER # OF HOURS (GO TO Q.20)	78-79/ |___| ENTER # OF HOURS (GO TO Q.20)

BEGIN DECK 06

	COLUMN 1 MOST RECENT SCHOOL	COLUMN 2 NEXT RECENT SCHOOL	COLUMN 3 NEXT RECENT SCHOOL
20. What (is/was) your class standing at (NAME OF SCHOOL)? RECORD VERBATIM IN COLUMN, THEN CODE ONE ONLY PER COLUMN. PROBE FOR YEAR IF RESPONSE IS "IN GRADUATE SCHOOL."	_____	_____	_____
	BEGIN DECK 06 10-11/	23-24/	36-37/
. . . 1ST YEAR OR FRESHMAN	13	13	13
. . . 2ND YEAR OR SOPHOMORE	14	14	14
. . . 3RD YEAR OR JUNIOR	15	15	15
. . . 4TH YEAR OR SENIOR	16	16	16
. . . 5TH YEAR OR 1ST ACADEMIC YEAR OF GRADUATE SCHOOL	17	17	17
. . . 6TH YEAR OR 2ND ACADEMIC YEAR OF GRADUATE ACHOOL	18	18	18
. . . 7TH YEAR OR 3RD ACADEMIC YEAR OF GRADUATE SCHOOL	19	19	19
. . . 8TH YEAR OR MORE OR 4TH YEAR OR MORE OF GRADUATE SCHOOL?	20	20	20
	12-14/	25-27/	38-40/
A. How many credit hours did you earn at (NAME OF SCHOOL)?	# OF HOURS	# OF HOURS	# OF HOURS
	15/	28/	41/
B. Were these semester hours or quarter hours?	semester .... 1 quarter 2	semester .... 1 quarter 2	semester ..... 1 quarter 2
21. (Do/Did) you receive a loan to cover any of the costs for your college expenses at (NAME OF SCHOOL)?	16/ Yes ..... 1 No (SKIP TO Q.23) ... 0	29/ Yes ..... 1 No (SKIP TO Q.23) ... 0	42/ Yes ..... 1 No (SKIP TO Q.23) 0
22. How much was the total dollar value of the loans you have ever received for your college expenses at (NAME OF SCHOOL)?	17-21/ Dollars	30-34/ Dollars	43-47/ Dollars
23. Other than loans, (do/did) you receive any other form of financial aid, such as a scholarship, a grant, a fellowship, an assistantship, a tuition waiver, or veteran's benefits under the G.I. Bill or V.E.A.P.?	22/ Yes (GO TO Q.24)..1 No (SKIP TO Q.25)...0	35/ Yes (GO TO Q.24)..1 No(SKIP TO Q.25)....0	48/ Yes (GO TO Q.24)...1 No (SKIP TO Q.25)....0

	COLUMN 1 MOST RECENT SCHOOL	COLUMN 2 NEXT RECENT SCHOOL	COLUMN 3 NEXT RECENT SCHOOL
			BEGIN DECK 07
24. How much was the total dollar value of financial aid you have ever received for your college expenses at (NAME (OF SCHOOL)?	49-53/ ___,___ Dollars (GO TO Q.25)	64-68/ ___,___ Dollars (GO TO Q.25)	10-14/ ___,___ Dollars (GO TO Q.25)
25. Other than the loans and aid we have already talked about, (do/did) any relatives or friends (other than your husband/ /wife) help pay for your schooling or living expenses at (NAME OF SCHOOL)?	54/ Yes ..... 1 No (SKIP TO Q.27) ... 0	69/ Yes ..... 1 No (SKIP TO Q.27) .. 0	15/ Yes ..... 1 No (SKIP TO Q.27) ... 0
26. Of your school expenses remaining after loans and aid, how much (do/did) they pay? Would you say they (pay/paid) all of your expenses, half or more of your expenses, or less than half of your expenses at (NAME OF SCHOOL)?	55/ All expenses.. 1 Half or more.. 2 Less than half 3	70/ All expenses.. 1 Half or more.. 2 Less than half..... 3	16/ All expenses... 1 Half or more... 2 Less than half..... 3
27. (Do/Did) you pay any of your schooling or living expenses at (NAME OF SCHOOL) from money you had saved or earned?	56/ Yes ..... 1 No (SKIP TO Q.29) 0	71/ Yes ..... 1 No (SKIP TO Q.30) 0	17/ Yes ..... 1 No (SKIP TO Q.30) 0
28. Of your schooling or living expenses remaining after loans, aid, or friend and relative assistance, how much (do/did) you pay? Would you say you (pay/paid) all of your expenses, half or more of your expenses, or less than half of your expenses?	57/ All expenses.. 1 Half or more.. 2 Less than half..... 3	72/ All expenses.. 1 Half or more.. 2 Less than half..... 3 (SKIP TO Q.30)	18/ All expenses... 1 Half or more... 2 Less than half..... 3 (SKIP TO Q.30)
29. INTERVIEWER: FOR COLUMN ONE - MOST RECENT SCHOOL ONLY: IS R CURRENTLY ATTENDING OR ENROLLED IN THIS SCHOOL? (Q. 1B IS CODED YES)	58/ YES (SKIP TO Q.31)..1 NO (GO TO Q.30)....0		
30. When did you last attend (NAME OF SCHOOL)?	59-62/ ____ MONTH YEAR	73-76/ ____ MONTH YEAR	19-22/ ____ MONTH YEAR
31. Have you attended any other college or university?	Yes (GO BACK TO Q.12 COLUMN 2).. 1 No ..(ASK A)... 0	Yes (GO BACK TO Q.12 COLUMN 3).... 1 No ..(ASK A) 0	Yes (GO TO Q.12 IN A NEW QUESTIONNAIRE.... 1 No ...(ASK A)..... 0

A. We are also interested in acquiring a copy of your college transcripts. Please sign this Transcript Release Form for universities or colleges you have attended. CODE ONE ONLY.

R SIGNED FORM (GO TO Q.32) 1
R REFUSED TO SIGN FORM (GO TO Q.32)..... 7

24/

32. Since we last talked with you on (DATE OF LAST INTERVIEW), have you obtained any kind of academic degree, for example, an associate's degree or any other type of college degree?

Yes ..... (ASK A & B) 1 25/

No ..... (GO TO Q. 33) 0

IF YES, ASK A & B:

A. What is the name of the (first) degree you received?

ASSOCIATE'S DEGREE 1 26/

BACHELOR'S DEGREE 2

MASTER'S DEGREE 3

OTHER (SPECIFY)

_____ 4

B. Since (DATE OF LAST INTERVIEW), have you obtained any other academic degrees?

Yes ... (ASK C FOR SECOND DEGREE) ... 1 27/

No ..... (GO TO Q. 33) 0

C. What is the name of the (second) degree you received?

ASSOCIATE'S DEGREE 1 28/

BACHELOR'S DEGREE 2

MASTER'S DEGREE 3

OTHER (SPECIFY)

_____ 4

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33. Do you have a valid driver's license?

Yes 1 29/

No 0

---

34. Are you a citizen of the United States?

Yes 1 30/

No 0

35. The next question is about vocational or industrial organizations and clubs. Look at this card. Please tell me to which of the following organizations you belonged when you were in high school, that is grades 9-12. CODE ALL THAT APPLY.

HAND CARD A

NEVER ATTENDED HIGH SCHOOL ... (SKIP TO SECTION 4)	96	31-32/
American Industrial Arts Association	01	33-34/
Distributive Education Clubs of America	02	35-36/
Future Business Leaders of America	03	37-38/
Future Farmers of America	04	39-40/
Future Homemakers of America	05	41-42/
Home Economics Related Occupations	06	43-44/
Health Occupations Student Association	07	45-46/
Office Education Association	08	47-48/
Vocations Industrial Club of America	09	49-50/
Other (SPECIFY) _____	10	51-52/
None ..... (SKIP TO Q.36)	00	53-54/

A. INTERVIEWER: IS MORE THAN ONE CODED ABOVE?

YES ..... (ASK B) 1
NO ..... (ASK C) 0

B. In which one of these organizations did you most actively participate?

ENTER CODE # HERE: |___|___| 55-56/

C. In (MAIN ORGANIZATION CODED IN Q.35 OR Q.35B) would you say that you were . . .

a member--someone who does not go to meetings on a regular basis or who does not participate in organizational activities 1 57/

or

an active member--someone who goes to meetings on a regular basis or who participates in organizational activities 2

or

a very active member including office holding--someone who goes to all meetings and participates in all organizational activities 3

D. How many years did you participate in this organization?

One year or less	1	58/
Two years	2	
Three years	3	
Four years or more	4	

36. Please look at this card and tell me to which of these other types of organizations you belonged to when you were in high school. CODE ALL THAT APPLY.

HAND CARD B

Community Youth Organization such as Scouts, Y, Junior Achievement	01	59-60/
School-sponsored hobby or subject matter clubs such as photography, history	02	61-62/
Student council, government	03	63-64/
Staff of yearbooks, school newspapers, magazines, manuals	04	65-66/
Athletics, including cheerleading, pep clubs	05	67-68/
Performing Arts, including band, drama, orchestra	06	69-70/
National Honor Society, Scholastic Achievement Club	07	71-72/
Other (SPECIFY) _____	08	73-74/
None ..... (SKIP TO SECTION 4)	00	75-76/

A. INTERVIEWER: IS MORE THAN ONE CODED ABOVE?

YES ..... (ASK B) 1

NO ..... (ASK C) 0

B. In which one of these organizations did you most actively participate?

ENTER CODE # HERE: |__|__| 77-78/

C. In (MAIN ORGANIZATION CODED IN Q.36 OR Q.36B) would you say that you were . . .

a member--someone who does not go to meetings on a regular basis or who does not participate in organizational activities 1 79/

or

an active member--someone who goes to meetings on a regular basis or who participates in organizational activities 2

or

a very active member including office holding--someone who goes to all meetings and participates in all organizational activities 3

GO TO SECTION 4

SECTION 4: MILITARY

And now I'd like to ask some questions about military service. Most of these questions have been written for enlisted personnel. If you are an officer, please answer all questions the best you can.

1. INTERVIEWER: WAS R SERVING IN THE MILITARY AT TIME OF LAST INTERVIEW? SEE **INFORMATION SHEET**, ITEM 4.

YES ..... (SKIP TO Q. 11)	1	10/
NO	0	

---

2. Since (DATE OF LAST INTERVIEW) have you been sworn into any branch of the Armed Services, including the National Guard, the Reserves, or a Delayed Entry Program?

Yes ..... (SKIP TO Q. 38)	1	11/
No	0	

---

3. Since (DATE OF LAST INTERVIEW) have you taken the three-hour written test called the ASVAB that is required to enter the military?

Yes .....(ASK A).....	1	12/
No .....(SKIP TO Q. 4).....	0	

A. Where did you take it--at a military recruiting station, at your high school, or somewhere else?

Military recruiting station	1	13/
High school	2	
Somewhere else	3	

---

4. Since our last interview, have you talked to a military recruiter to get information about a branch of the military?

Yes ..... (ASK A).....	1	14/
No ..... (SKIP TO Q. 10)	0	

A. IF YES, ASK:
Did you talk to a military recruiter at a military recruiting station, at your high school, or somewhere else? CODE ALL THAT APPLY.

Military recruiting station	1	15/
High school	2	16/
Somewhere else	3	17/

---

5. What branches of the armed forces did you talk to? CODE ALL THAT APPLY.

ARMY	01	18-19/
NAVY	02	20-21/
AIR FORCE	03	22-23/
MARINE CORPS	04	24-25/
ARMY RESERVES	05	26-27/
NAVY RESERVES	06	28-29/
AIR FORCE RESERVES	07	30-31/
MARINE CORPS RESERVES	08	32-33/
AIR NATIONAL GUARD	09	34-35/
ARMY NATIONAL GUARD	10	36-37/
COAST GUARD	11	38-39/
OTHER	12	40-41/

6. Since (DATE OF LAST INTERVIEW), have you taken the physical examination required to enter the military?

Yes	1	42/
No ..... (SKIP TO Q. 9)	0	

7. Which service were you trying to join when you took the physical exam? CODE ALL THAT APPLY.

ARMY	01	43-44/
NAVY	02	45-46/
AIR FORCE	03	47-48/
MARINE CORPS	04	49-50/
ARMY RESERVES	05	51-52/
NAVY RESERVES	06	53-54/
AIR FORCE RESERVES	07	55-56/
MARINE CORPS RESERVES	08	57-58/
AIR NATIONAL GUARD	09	59-60/
ARMY NATIONAL GUARD	10	61-62/
COAST GUARD	11	63-64/
OTHER	12	65-66/

A. When did you take the physical exam?

MONTH	DAY	YEAR	67-68/ 69-70/ 71-72/

8. Did you meet the physical requirements for enlisting in the (BRANCH FROM Q. 7/the service you were trying to join most recently)?

Yes	1	73/
No .....(**SKIP TO SECTION 5**).....	0	

9. Are you still considering joining the (BRANCH FROM Q. 5 OR Q. 7/the service you were trying to join most recently)?

Yes ..... (GO TO Q. 10)	1	74/
No ..... (ASK A)	0	

A. What is the main reason you did not enlist in the (BRANCH FROM Q. 5 OR Q. 7/the service you were trying to join most recently)? PROBE: What is the one main reason? CODE ONE ONLY.

HAND CARD C

A.	Job I wanted wasn't available when I wanted it..	01	75-76/
B.	Didn't qualify for job I wanted.....	02	
C.	Wasn't eligible for the service I wanted.....	03	
D.	Specific bonus program filled.....	04	
E.	Didn't think I'd like the military.....	05	
F.	Decided to go to school.....	06	
G.	Got a better civilian job.....	07	
H.	Scored low on the ASVAB.....	08	
I.	Family responsibilities/pregnancy.....	09	
J.	Length of obligation.....	10	
K.	Didn't want to leave home.....	11	
L.	Parents or friends opposed it.....	12	
M.	Insufficient pay or benefits.....	13	
N.	Other (SPECIFY) _____	14	

10. A. Do you think for a young person to serve in the military is ...

definitely a good thing, ...	1	77/
probably a good thing, ...	2	
probably not a good thing, or.....	3	
definitely not a good thing?	4	
DON'T KNOW	8	

B. Do you think, in the future, that you will ...

definitely try to enlist, ...	1	78/
probably try to enlist, ...	2	
probably not try to enlist, or (**SKIP TO SECTION 5**)	3	
definitely not try to enlist in the military ..... (**SKIP TO SECTION 5**)	4	

C. In which service do you think you will be most likely to enlist?

Army	1	79/
Navy	2	
Air Force	3	
Marines	4	
Reserves (any component)	5	
National Guard (Army or Air)	6	
Coast Guard	0	

D. Do you expect you would enter the service as an enlisted person or as an officer? BEGIN DECK 09

Enlisted person	1	10/
Officer	2	
Don't Know	8	

SKIP TO SECTION 5

---

11. Are you currently serving in (BRANCH FROM ITEM 4 OF **INFORMATION SHEET**)?

Yes ..... (ANSWER A)	1	11/
No ..... (GO TO Q. 12)	0	

A. IF YES: INTERVIEWER, WAS R IN ACTIVE FORCES (ARMY, NAVY, AIR FORCE, MARINES, COAST GUARD) DURING THIS PERIOD OF SERVICE? (SEE ITEM 4 ON **INFORMATION SHEET.**)

YES .. (DRAW A LINE ON ROW A OF **CALENDAR** FROM DATE OF LAST INTERVIEW TO NOW)	1	12/
NO	0	

NOW SKIP TO Q.44

12. We'd like to ask you a few questions about your service in the (BRANCH) since(DATE OF LAST INTERVIEW).

In what month and year did you separate from the (BRANCH)?

MONTH: |__|__| 13-14/

AND

YEAR: 19 |__|__| 15-16/

A. INTERVIEWER: WAS R IN ACTIVE FORCES (ARMY, NAVY, AIR FORCE, MARINES, COAST GUARD) DURING THIS PERIOD OF SERVICE? SEE ITEM 4 ON **INFORMATION SHEET.**

YES ..... (ASK B) 1 17/

NO ..... (GO TO Q. 13) 0

B. IF YES TO A, ASK:

On what day did you separate?

INTERVIEWER: ENTER DAY HERE AND RECORD DATE ON ROW A OF **CALENDAR.** DRAW A LINE FROM DATE OF LAST INTERVIEW TO DATE SEPARATED.

DAY DATE: |__|__| 18-19/

---

13. What was your pay grade when you left the (BRANCH)?

E: |__|__| 20-22/

O: |__|__|

W: |__|__|

---

14. INTERVIEWER: WAS R SERVING IN ACTIVE FORCES AT TIME OF LAST INTERVIEW? SEE ITEM 4 ON **INFORMATION SHEET.**

YES ..... (SKIP TO Q. 18) 1 23/

NO 0

---

15. Since (DATE OF LAST INTERVIEW), how many drills were you paid for? By drill we mean a 4-hour period of training.

ENTER # OF DRILLS: |__|__| 24-25/

---

16. In addition to weekly drills, how many weeks of active duty did you serve in the (Reserves/Guard) since (DATE OF LAST INTERVIEW), including initial training, annual training, and any mobilizations or call-ups?

ENTER # OF WEEKS: |__|__| 26-27/

17. Since (DATE OF LAST INTERVIEW), have you enlisted or been sworn into any other branch of the Armed Services?

Yes ..... (SKIP TO Q. 38) 1 28/

No ..... (SKIP TO Q. 111) 0

---

18. When you left the (BRANCH), what was your total monthly pay before taxes and other deductions? Please include basic pay and allowances for housing or food and any special pay.

$ |__|__| , |__|__|__| 29-33/

---

19. Have you worked at a civilian job for pay since leaving the military?

Yes 1 34/

No ..... (SKIP TO Q. 23) 0

---

20. You had certain expectations about a civilian job when you left the (BRANCH). With your most recent job in mind, would you say that your expectations have been completely met, partially met, or not met at all?

Completely met 1 35/

Partially met 2

Not met at all 3

---

21. (Are/Were) you doing the same kind of work in your most recent civilian job that you did while you were in the (BRANCH)?

Yes ..... (SKIP TO Q. 23) 1 36/

No 0

---

22. Have you used any of the job skills you learned while in the (BRANCH) in any of the civilian jobs you held since leaving the military?

Yes 1 37/

No 0

---

23. Since (DATE OF LAST INTERVIEW), have you received any formal school training for your Primary (MOS/RATING/AFSC)?

Yes ..... (ASK A)..... 1 38/

No ..... (SKIP TO Q. 24) 0

A. In all, how many weeks of formal school training did you complete for your Primary (MOS/RATING/AFSC)?

ENTER # OF WEEKS: |__|__| 39-40/

24. Not counting basic training, since (DATE OF LAST INTERVIEW), have you received any on-the-job training for this (MOS/RATING/AFSC)?

Yes .....(ASK A).....1 41/
No .....(SKIP TO Q.25).....0

A. Not counting basic training, since (DATE OF LAST INTERVIEW), how many weeks of on-the-job training for this (MOS/RATING/AFSC) have you received?

ENTER # OF WEEKS: |__|__| 42-43/

---

25. Since (DATE OF LAST INTERVIEW), while you were in the (BRANCH), did you take any courses for which you received high school or college credit?

Yes .....(ASK A)..... 1 44/
No .....(SKIP TO Q.27)..... 0

A. Since (DATE OF LAST INTERVIEW), while you were in the (BRANCH), how many years of regular school did you complete and get credit for?

LESS THAN ONE 0 45/
ONE YEAR 1
TWO YEARS 2
THREE OR MORE YEARS 3

---

26. Since (DATE OF LAST INTERVIEW), while you were in the (BRANCH), did you receive a diploma or degree?

Yes .....(ASK A)..... 1 46/
No ..... (SKIP TO Q. 27) 0

A. What type of diploma or degree did you receive? RECORD VERBATIM AND CODE ONE ONLY.

_____

_____

_____

HIGH SCHOOL DIPLOMA (OR EQUIVALENT) 01 47-48/
ASSOCIATE/JUNIOR COLLEGE (AA) 02
BACHELOR'S DEGREE 03
MASTER'S DEGREE 04
DOCTORAL DEGREE (PhD) 05
PROFESSIONAL DEGREE (MD, LLD, DDS) 06
OTHER (SPECIFY):

_____ 07

27. Since (DATE OF LAST INTERVIEW), while you were in the (BRANCH), did you participate in the Veteran's Education Assistance Program (VEAP)?

Yes	1	49/
No ..... (SKIP TO Q. 30)	0	

---

28. When you left the (BRANCH), what was the total amount of VEAP benefits you had accumulated. Please include both your contribution and the government's.

$ |__|__| , |__|__|__| 50-54/

---

29. Are you currently using your VEAP benefits to pay for schooling?

Yes	1	55/
No	0	

---

30. Did you leave the (BRANCH) at the end of your term of service or before the end of your term of the service?

Left at end	1	56/
Left before end	2	

---

31. Which of the reasons on this card describe why you decided to leave the (BRANCH)? CODE ALL THAT APPLY.

HAND CARD D

A.	Low pay and allowances	01	57-58/
B.	Better civilian job opportunities	02	59-60/
C.	Reduction in military benefits	03	61-62/
D.	Decline in quality of military personnel	04	63-64/
E.	Unable to practice my job skills	05	65-66/
F.	Bored with my job or occupation	06	67-68/
G.	Didn't like my job or occupation	07	69-70/
H.	Plan to continue my education or to use G.I./VEAP benefits	08	71-72/
I.	Not eligible to reenlist	09	73-74/
J.	Disliked location of my assignments	10	75-76/
K.	Didn't get desired type of training	11	77-78/
			BEGIN DECK 10
L.	Had to move too often	12	10-11/
M.	Disliked being separated from my family	13	12-13/
N.	My family wanted me to leave the service	14	14-15/
O.	Disagreed with personnel policies	15	16-17/
P.	Discrimination against military personnel based on race	16	18-19/
Q.	Discrimination against military personnel based on sex	17	20-21/
R.	Discrimination against military personnel based on rank	18	22-23/
S.	Other (SPECIFY) _____	19	24-25/
	DON'T KNOW	98	26-27/

32. Please tell me if each of the following items is true or false.

	True	False	
A. While I was serving in the (BRANCH), I looked for a civilian job	1	0	28/
B. At the time I left the (BRANCH), I had been offered a civilian job	1	0	29/
C. At the time I left the (BRANCH), I planned to enroll in school	1	0	30/
D. By the time I left the (BRANCH), I had accepted a civilian job	1	0	31/

---

33. Where was your permanent post base or duty station? If on board a ship, indicate the location of your home port.

STATE OR COUNTRY (IF OUTSIDE THE U.S.)

OFFICE USE

32-33/

34-36/

---

34. INTERVIEWER: DID R LEAVE BEFORE THE END OF TERM OF SERVICE (IS Q. 30 CODED 2)?

YES ..... (SKIP TO Q. 111) 1 37/

NO 0

---

35. At the end of your term of service, were you eligible to reenlist?

Yes 1 38/

No 0

Don't know 8

---

36. Did you consider reenlisting in the (BRANCH)?

Yes 1 39/

No 0

A. Since (DATE OF LAST INTERVIEW), have you been sworn into any other branch of the Armed Services?

Yes ..... (SKIP TO Q. 38) 1 40/

No 0

37. Are you currently a member of the Selected Reserves and receiving pay for drill participation?

Yes ..... (ASK A) 1 41/

No ..... (SKIP TO Q. 111) 0

A. IF YES: In what month and year will your service in the Selected Reserves end?

MONTH: |__|__| 42-43/

AND

YEAR: 19 |__|__| 44-45/

---

38. Which branch (were you sworn into)? CODE ONE ONLY. (IF MORE THAN ONE, PROBE FOR MOST RECENT BRANCH.)

ACTIVE FORCES	ARMY ..... (ASK A)	01	46-47/
	NAVY ..... (ASK A)	02	
	AIR FORCE ..... (ASK A)	03	
	MARINE CORPS ..... (ASK A)	04	
	COAST GUARD ..... (ASK A)	11	
RESERVES	ARMY RESERVES .....(GO TO Q.39)..	05	
	NAVY RESERVES .....(GO TO Q.39)..	06	
	AIR FORCE RESERVES ....(GO TO Q.39)..	07	
	MARINE CORPS RESERVES .(GO TO Q.39)..	08	
	COAST GUARD RESERVES ..(GO TO Q.39)..	12	
GUARD	AIR NATIONAL GUARD ....(GO TO Q.39)..	09	
	ARMY NATIONAL GUARD ...(GO TO Q.39)..	10	
	OTHER (SPECIFY BELOW AND SKIP TO **SECTION 5**) _____	13	

A. IF CODES 01-04 OR 11, ASK A:
Was that in the regular (BRANCH OF SERVICE), the (BRANCH) Reserves, or the (BRANCH) National Guard?

Regular 1 48/

Reserves ..... (ASK B) 2

Guard ..... (ASK B) 3

BOTH (PROBE FOR AND CODE Q. 38 FOR THE MOST RECENT BRANCH) ... 4

B. INTERVIEWER: IF RESERVES OR GUARD IN A., IS Q. 38 CODED ACTIVE FORCES?

YES ...(CORRECT Q.38 TO RESERVES OR GUARD)..... 1

NO ....(GO TO Q.39)..... 0

39. What is your current pay grade?

E: |__|__| 49-51/

O: |__|__|

W: |__|__|

---

40. INTERVIEWER: IS R AN OFFICER (IS Q.39 CODED "O")?

YES ..... (ASK A) 1 52/

NO ..... (ASK B) 0

A. When you were first sworn into (MOST RECENT BRANCH) how many years (of active duty) was your term of service obligation?

ENTER # OF YEARS: |__|__| (GO TO Q.41) 53-54/

B. When you first enlisted [in the (MOST RECENT BRANCH)], how many years (of active duty) did you sign up for?

ENTER # OF YEARS: |__|__| (GO TO Q.41) 55-56/

---

41. INTERVIEWER: SEE Q. 37 ON PREVIOUS PAGE AND CODE BELOW:

Q. 37 IS CODED "Yes"... (GO TO Q. 42) 1 57/

Q. 37 IS BLANK ..... (ASK A) 2

A. IF CODED 2: Are you currently serving in the (MOST RECENT BRANCH)?

Yes 1 58/

No ..... (SKIP TO Q. 103) 0

---

42. In what month and year did you enter the (MOST RECENT BRANCH)?

MONTH: |__|__| 59-60/

AND

YEAR: 19 |__|__| 61-62/

A. INTERVIEWER: DID R ENTER THE ACTIVE FORCES? (Q. 38, CODES 01-04 OR 11)

YES .....(ASK B)..... 1 63/

NO ..... (GO TO Q. 43) 0

IF YES TO A, ASK B:

B. On what day was that? ENTER DAY HERE AND RECORD DATE ON **CALENDAR**, ROW A. DRAW A LINE FROM DATE ENTERED TO NOW.

DAY DATE: |__|__| 64-65/

---

43. In what month and year will your current (enlistment/term of service obligation) end?

MONTH: |__|__| 66-67/

AND

YEAR: 19 |__|__| 68-69/

A. INTERVIEWER: **NOW SKIP TO Q.50** IN THIS SECTION ON NEXT PAGE.

44. What is your current pay grade?

E: |__|__| 70-72/

O: |__|__|

W: |__|__|

---

45. INTERVIEWER: IS R AN OFFICER (IS Q.44 IS CODED "O")?

YES ..... (SKIP TO Q.50) 1 73/

NO ..... (GO TO Q.46) 0

---

46. Since (DATE OF LAST INTERVIEW), did you reenlist or extend your term of service?

Yes 1 74/

No ..... (SKIP TO Q. 50) 0

---

47. How many years did you reenlist or extend for?

ENTER # OF YEARS: |__|__| 75-76/

OR

ENTER # OF MONTHS: |__|__| 77-78/

---

48. Did you receive a reenlistment bonus?

Yes 1 79/

No ..... (SKIP TO Q. 50) 0

---

49. What was the total amount before taxes and deductions of the bonus you received? BEGIN DECK 11

$ |__|__| , |__|__|__| .00 10-14/

---

50. INTERVIEWER: IS R CURRENTLY IN ACTIVE FORCES?

(Q. 38 = CODES 01-04 OR 11)
OR
(ITEM 4 ON **INFORMATION SHEET** WAS ACTIVE FORCE BRANCH AND Q. 11A = YES)

YES ..... (SKIP TO Q. 66) 1 15/

NO 0

---

51. Since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)], how many drills were you paid for? By drill we mean a 4-hour period of training.

ENTER # OF DRILLS: |__|__| 16-17/

52. In addition to weekly drills, how many weeks of active duty did you serve in the (Reserves/Guard) since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)], including initial active duty training, annual training or summer camp, and any mobilizations or call-ups?

ENTER # OF WEEKS: |__|__| 18-19/

OR

NO WEEKS .... (SKIP TO Q. 57) 00

---

53. What were you doing most of the time the month before you entered the most recent period of active duty in the (Reserves/Guard)? Were you working full time, working part time, going to school, or something else? RECORD VERBATIM AND CODE ONE ONLY.

_____

Working full time 01 20-21/
Working part time 02
WITH A JOB BUT NOT AT WORK BECAUSE OF
TEMPORARY ILLNESS, VACATION, STRIKE 03
UNEMPLOYED, LAID OFF, LOOKING FOR WORK ... 04
Going to school 05
KEEPING HOUSE 06
Something else (SPECIFY) 07

_____

---

54. What were you doing most of the time the month after you completed your most recent period of active duty in the (Reserves/Guard)? RECORD VERBATIM AND CODE ONE ONLY.

_____

WORKING FULL TIME 01 22-23/
WORKING PART TIME 02
WITH A JOB BUT NOT AT WORK BECAUSE OF
TEMPORARY ILLNESS, VACATION, STRIKE 03
UNEMPLOYED, LAID OFF,
LOOKING FOR WORK ... (SKIP TO Q. 57) ... 04
GOING TO SCHOOL ..... (SKIP TO Q. 57) ... 05
KEEPING HOUSE ..... (SKIP TO Q. 57) ... 06
OTHER (SPECIFY) ..... (SKIP TO Q. 57) ... 07

_____

OR
STILL IN ACTIVE DUTY
TRAINING ..... (SKIP TO Q. 57) 00

---

55. INTERVIEWER: DID R HAVE A JOB THE MONTH BEFORE ENTERING ACTIVE DUTY FOR TRAINING? (Q. 53 = CODES 01-03)

Yes 1 24/

No ..... (SKIP TO Q. 57) 0

---

56. After you completed your most recent period of active duty training for the (Reserves/Guard), did you return to work for the same employer you had prior to training?

Yes 1 25/

No 0

57. Have you received tuition assistance for your participation in the (Reserves/Guard) as part of the Educational Tuition Assistance Plan (ETAP) since [(DATE OF LAST INTERVIEW)/you joined]?

Yes 1 26/

No ..... (SKIP TO Q. 59) 0

---

58. Since [(DATE OF LAST INTERVIEW)/you joined], what is the total amount of ETAP tuition assistance you received?

$ |__|__| , |__|__|__| .00 27-31/

DON'T KNOW 99998

---

59. Do you currently have a civilian job for pay?

Yes 1 32/

No ..... (SKIP TO Q. 61) 0

---

60. INTERVIEWER: ASK A, B, OR C AS APPROPRIATE.

A. FOR ARMY, MARINE CORPS, AND NATIONAL GUARD AND THE RESERVES OF THESE BRANCHES:
Does your current civilian job use any skills from your most current MOS?

Yes 1 33/

No 0

B. FOR NAVY AND NAVY RESERVES; FOR COAST GUARD AND COAST GUARD RESERVES:
Does your current civilian job use any skills from your most current RATING?

Yes 1

No 0

C. FOR AIR FORCE AND AIR FORCE RESERVES:
Does your current civilian job use any skills from your most current AFSC?

Yes 1

No 0

---

61. INTERVIEWER: HAS R ENLISTED IN THIS BRANCH SINCE DATE OF LAST INTERVIEW (IS A BRANCH CODED IN Q.38)?

YES ..... (GO TO Q.62) 1 34/

NO ..... (SKIP TO Q.66) 0

62. On this card are some reasons people have for joining the (Reserves/Guard). Please tell me if each one is true for you or not true for you. READ A-I AND CODE FOR EACH.

HAND CARD E

		True	Not True	
A.	I wanted to join my friends in the unit	1	0	35/
B.	I wanted to earn extra income	1	0	36/
C.	I wanted to serve my country	1	0	37/
D.	I wanted to learn a new job skill	1	0	38/
E.	I wanted to try the military way of life	1	0	39/
F.	I wanted to use educational benefits	1	0	40/
G.	I couldn't get into the active force	1	0	41/
H.	I wanted retirement or fringe benefits	1	0	42/
I.	Service in the Reserves was part of my enlistment obligation for the Active Forces	1	0	43/

A. IF MORE THAN ONE "TRUE" (CODE 1) IN Q. 62; ASK:
Which of these was your most important reason for joining the (Reserves/Guard)?

ENTER LETTER CORRESPONDING TO LIST ABOVE HERE: |__| 44/

---

63. INTERVIEWER: IS R AN OFFICER (IS Q.39 OR Q.44 CODED "0")?

Yes ....(SKIP TO Q.66)..... 1 45/
No .....(GO TO Q.64)..... 0

---

64. When you entered the (BRANCH), did you receive any enlistment bonuses?

Yes 1 46/
No ..... (SKIP TO Q. 66) 0

---

65. What was the total amount before taxes and deductions of the bonus you received?

$ |__|__| , |__|__|__| .00 47-51/

---

66. At the time you decided to enter the (MOST RECENT BRANCH), had you considered joining the (Reserves/Active Force) instead?

Yes 1 52/
No 0

67. INTERVIEWER: IS R AN OFFICER (IS Q.39 OR Q.44 CODED "0")?

Yes .....(READ A)..... 1 53/

No .....(READ B)..... 0

A. Please look at this card. Assuming that all other special pays which you currently receive are still available, how likely are you to remain in the (BRANCH) at the end of your current term of service? CODE ONE ONLY BELOW

B. Please look at this card. Assuming that no reenlistment Bonus Payments will be given, but that all other special pays which you currently receive are still available, how likely are you to reenlist at the end of your current term of service? CODE ONE ONLY BELOW

HAND CARD F

(0 in 10)	No chance	(ASK C)	00
(1 in 10)	Very slight possibility	(ASK C)	01
(2 in 10)	Slight possibility	(ASK C)	02
(3 in 10)	Some possibility	(ASK C)	03
(4 in 10)	Fair possibility	(ASK C)	04
(5 in 10)	Fairly good possibility	(ASK C)	05
(6 in 10)	Good possibility	(ASK C)	06
(7 in 10)	Probable		07
(8 in 10)	Very probable		08
(9 in 10)	Almost sure		09
(10 in 10)	Certain		10
	Don't know		98

54-55/

67. (continued)

C. IF CODES 00-06: Military personnel may have several reasons for leaving the Armed Forces. If you do leave the service at the end of your current term, which of these would be your most important reasons for doing so?
CODE ALL THAT APPLY.

HAND CARD G

A.	Low pay and allowances	01	56-57/
B.	Better civilian job opportunities	02	58-59/
C.	Reduction in military benefits	03	60-61/
D.	Decline in quality of military personnel	04	62-63/
E.	Unable to practice my job skills	05	64-65/
F.	Bored with my job or occupation	06	66-67/
G.	Don't like my job or occupation	07	68-69/
H.	Plan to continue my education or to use G.I./VEAP benefits	08	70-71/
I.	Not eligible to reenlist	09	72-73/
J.	Dislike location of my assignments	10	74-75/
K.	Don't get desired type of training	11	76-77/
L.	Have to move too often	12	78-79/
			BEGIN DECK 12
M.	Dislike being separated from my family	13	10-11/
N.	My family wants me to leave the service	14	12-13/
O.	Disagree with personnel policies	15	14-15/
P.	Discrimination against military personnel based on race	16	16-17/
Q.	Discrimination against military personnel based on sex	17	18-19/
R.	Discrimination against military personnel based on rank	18	20-21/
S.	Other (SPECIFY) _____	19	22-23/
	DON'T KNOW	98	24-25/

68. Which of the following was important to you at the time you first enlisted? CODE ALL THAT APPLY.

HAND CARD H

		L. FOR EACH ITEM A-J CODED, ASK: Was your expectation about (READ ITEM CODED) met?				
		Yes	No	N/A		
A. Hours of work	01	1	0		26-27/	28/
B. Kind of work	02	1	0		29-30/	31/
C. Place of work	03	1	0		32-33/	34/
D. Compensation (wages, salary)	04	1	0		35-36/	37/
E. Opportunities for promotion	05	1	0		38-39/	40/
F. Training opportunities	06	1	0		41-42/	43/
G. Educational benefits	07	1	0		44-45/	46/
H. Health benefits	08	1	0		47-48/	49/
I. Retirement benefits	09	1	0	2	50-51/	52/
J. Housing allowance	10	1	0		53-54/	55/
IF VOLUNTEERED: K. NONE	00				56-57/	

L. INTERVIEWER: SEE INSTRUCTIONS IN BOX ABOVE.

69. Suppose a new enlistee was unhappy with military life. How easy or difficult do you think it would be for (him/her) to get out of the military before the end of the enlistment period that (he/she) signed up for? Would it be very easy, somewhat easy, somewhat difficult, very difficult, or impossible?

Very easy 1 58/
Somewhat easy 2
Somewhat difficult 3
Very difficult 4
Impossible 5

70. When you finally leave the (MOST RECENT BRANCH), how many total years of service do you expect to have (in your current branch)?

ENTER # OF YEARS: |__|__| 59-60/

71. INTERVIEWER: IS PAY GRADE CATEGORY "O" (OFFICER) CODED IN Q.39 or Q.44?

YES ...(SKIP TO Q.73).....1 61/
NO ....(GO TO Q.72).....0

---

72. Now I'd like to ask you about military jobs and training in the (MOST RECENT BRANCH).
INTERVIEWER: IN MAKING ENTRIES FOR THIS QUESTION, ENTER LETTER "i" as "I," LETTER "O" as "Ø."

A. FOR ARMY, MARINE CORPS, AND NATIONAL GUARD AND THE RESERVES OF THESE BRANCHES:

What is your current Primary MOS?

RECORD VERBATIM IN THE MARGIN. THEN ENTER IN THE BOXES THE FIRST FIVE NUMBERS OR LETTERS R GAVE YOU. FOR EXAMPLE, 11B20 WOULD BE ENTERED 11B20.

SKIP TO Q. 74 |_|_|_|_|_|
OR
DON'T KNOW ..... (GO TO Q. 73) 99998
OR
NONE ..... (SKIP TO Q. 80) 00000

B. FOR NAVY AND NAVY RESERVES; FOR COAST GUARD AND COAST GUARD RESERVES:

What is your current Primary RATING?

RECORD VERBATIM IN THE MARGIN. THEN ENTER IN THE BOXES THE FIRST FIVE NUMBERS OR LETTERS R GAVE YOU.

62-66/

SKIP TO Q. 74 |_|_|_|_|_|
OR
DON'T KNOW ..... (GO TO Q. 73) 99998
OR
NONE .... (SKIP TO Q. 80) 00000

|_|_|_|_|_|
OFFICE USE ONLY

C. FOR AIR FORCE AND AIR FORCE RESERVES:

What is your current Primary AFSC?

RECORD VERBATIM IN THE MARGIN. THEN ENTER IN THE BOXES THE FIRST FIVE NUMBERS OF R'S AFSC. DO NOT ENTER ANY LETTERS. FOR EXAMPLE, A43130C WOULD BE ENTERED AS 43130.

SKIP TO Q. 74 |_|_|_|_|_|
OR
DON'T KNOW ..... (GO TO Q. 73) 99998
OR
NONE ..... (SKIP TO Q. 80) 00000

73. A. What (is/was) the name of the job you were trained for?

_____ 67-69/

B. What (are/were) your main activities or duties?

_____

_____

_____

_____

---

74. Since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)], have you received any formal school training for your current Primary (MOS/RATING/AFSC)?

Yes 1 70/

No ..... (SKIP TO Q. 76) 0

---

75. In all, how many weeks of formal school training did you complete for your current Primary (MOS/RATING/AFSC)?

ENTER # OF WEEKS: |__|__| 71-72/

---

76. Not counting basic training, [since (DATE OF LAST INTERVIEW)/you joined the (BRANCH)], have you received any on-the-job training for this (MOS/RATING/AFSC)?

Yes 1 73/

No ..... (SKIP TO Q. 78) 0

---

77. Not counting basic training, [since (DATE OF LAST INTERVIEW)/you joined the (BRANCH)], how many weeks of on-the-job training for this (MOS/RATING/AFSC) have you received?

ENTER # OF WEEKS: |__|__| 74-75/

---

78. Not counting basic training, [(and) OJT (and) formal school training], how many months have you actually worked in your current (MOS/RATING/AFSC) [between (DATE OF LAST INTERVIEW) and now/since you joined the (BRANCH)]?

ENTER # OF MONTHS: |__|__| 76-77/

79. What is your total monthly pay before taxes and other deductions? Please include basic pay and allowances for housing or food and any special pays.

$ |__|__|, |__|__|__| 10-14/

A. Do you receive any special pays or bonuses, not counting an enlistment bonus?

Yes ..... (ASK B)..... 1 15/
No ..... (GO TO Q. 80)..... 0

B. How much do you usually receive per month in special pays and bonuses?

$ |__|__|, |__|__|__| .00 per month 16-20/

80. INTERVIEWER: IS R CURRENTLY IN THE ACTIVE FORCES? (Q. 50 = YES)

YES 1 21/

NO ..... (SKIP TO Q. 111) 0

---

81. In addition to your current Primary (MOS/RATING/AFSC), have you received training in another (MOS/RATING/AFSC) since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)]?

Yes 1 22/

No ..... (SKIP TO Q. 90) 0

---

82. INTERVIEWER: IS PAY GRADE CATEGORY "0" (OFFICER) CODED IN Q.39 OR 44?

YES ..... (SKIP TO Q.84)..... 1 23/

NO .....(GO TO Q.83) 0

83. Now I'd like to ask you about your military jobs and training for this other (MOS/RATING/AFSC).

INTERVIEWER: IN MAKING ENTRIES FOR THIS QUESTION, ENTER LETTER "i" as "I," LETTER "O" as "Ø."

A. FOR ARMY, MARINE CORPS:

What is your other MOS?

RECORD VERBATIM IN THE MARGIN. THEN ENTER IN THE BOXES THE FIRST FIVE NUMBERS OR LETTERS R GAVE YOU. FOR EXAMPLE, 11B20 WOULD BE ENTERED 11B20.

SKIP TO Q. 85 |_|_|_|_|_|

OR

DON'T KNOW ..... (GO TO Q. 84) 99998

B. FOR NAVY, COAST GUARD:

What is this other RATING?

ENTER FIRST FIVE NUMBERS OR LETTERS OF R'S RATING 24-28

SKIP TO Q. 85 |_|_|_|_|_|

|_|_|_|_|_|_|
OFFICE USE ONLY

OR

DON'T KNOW ..... (GO TO Q. 84) 99998

C. FOR AIR FORCE:

What is this other AFSC?

RECORD VERBATIM IN THE MARGIN. THEN ENTER IN THE BOXES THE FIRST FIVE NUMBERS OF R'S AFSC. DO NOT ENTER ANY LETTERS. FOR EXAMPLE, A43130C WOULD BE ENTERED AS 43130.

|_|_|_|_|_|

SKIP TO Q. 85

OR

DON'T KNOW ..... (GO TO Q. 84) 99998

84. A. What is the name of the job you were trained for?

_____ 29-31/

B. What are your main activities or duties?

_____

_____

_____

_____

85. Since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)], have you received any formal school training for this other (MOS/RATING/AFSC)?

Yes 1 32/

No ..... (SKIP TO Q. 87) 0

86. Since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)], how many weeks of formal school training did you complete for this other (MOS/RATING/AFSC)?

ENTER # OF WEEKS: |__|__| 33-34/

87. Since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)], have you received any on-the-job training for this other (MOS/RATING/AFSC)?

Yes 1 35/

No ..... (SKIP TO Q. 89) 0

88. Since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)], how many weeks of on-the-job training for this other (MOS/RATING/AFSC) did you receive?

ENTER # OF WEEKS: |__|__| 36-37/

89. Excluding basic training [(and) OJT (and) formal school training], how many months have you actually worked in this other (MOS/RATING/AFSC) between (DATE OF LAST INTERVIEW) and now?

ENTER # OF MONTHS: |__|__| 38-39/

90. During the last 7 days, how many hours did you work at a military job? Do not include any hours you were on call but not actually working.

ENTER # OF HOURS: |__|__| 40-41/

A. How many hours per week do you usually work?

ENTER # OF HOURS: |__|__| 42-43/

---

91. Certain military jobs carry a cash enlistment bonus. When you enlisted in the (BRANCH), did you sign up for a job which paid such a bonus?

Yes 1 44/

No ..... (SKIP TO Q. 93) 0

---

92. What was the total amount before taxes and deductions of the bonus you (received/will receive)?

$ |__|__| , |__|__|__| 45-49/

---

93. INTERVIEWER: DID R ENLIST IN BRANCH SINCE LAST INTERVIEW? (IS Q.42A CODED YES?)

Yes 1 50/

No ..... (SKIP TO Q. 95) 0

---

94. At the time you entered the (BRANCH), how many years of regular school had you completed and gotten credit for? CODE ONE ONLY.

51-52/

None	00	1ST YEAR OF COLLEGE	13
1ST GRADE	01	2ND YEAR OF COLLEGE	14
2ND GRADE	02	3RD YEAR OF COLLEGE	15
3RD GRADE	03	4TH YEAR OF COLLEGE	16
4TH GRADE	04	5TH YEAR OF COLLEGE	17
5TH GRADE	05	6TH YEAR OF COLLEGE	18
6TH GRADE	06	7TH YEAR OF COLLEGE	19
7TH GRADE	07	8TH YEAR OF COLLEGE	20
8TH GRADE	08		
9TH GRADE	09		
10TH GRADE	10		
11TH GRADE	11		
12TH GRADE	12		

95. Since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)], have you taken any courses for which you received high school or college credit?

Yes 1 53/

No ..... (SKIP TO Q. 99) 0

---

96. Since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)], how many years of regular school have you completed and gotten credit for?

LESS THAN ONE 0 54/

ONE YEAR 1

TWO YEARS..... 2

THREE OR MORE YEARS 3

---

97. Since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)], have you received a diploma or degree?

Yes 1 55/

No ..... (SKIP TO Q. 99) 0

---

98. What type of diploma or degree did you receive? RECORD VERBATIM AND CODE ONE ONLY.

_____

_____

HIGH SCHOOL DIPLOMA (OR EQUIVALENT) 01 56-57/

ASSOCIATE/JUNIOR COLLEGE (AA) 02

BACHELOR'S DEGREE 03

MASTER'S DEGREE 04

DOCTORAL DEGREE (PhD) 05

PROFESSIONAL DEGREE (MD, LLD, DDS) 06

OTHER (SPECIFY):

_____ 07

---

99. In the Veteran's Educational Assistance Program (VEAP), if you contribute to an education fund, the Veterans Administration will add to your contribution. Since [(DATE OF LAST INTERVIEW)/you joined the (BRANCH)], have you participated in the VEAP program?

Yes 1 58/

No ..... (SKIP TO Q.101) 0

---

100. How much money do or did you contribute to this program each month?

$ |__|__|__| .00 59-61/

101. INTERVIEWER: HAS R ENLISTED IN THIS BRANCH SINCE DATE OF LAST INTERVIEW (IS A BRANCH CODED IN Q.38)?

YES ..... (GO TO Q.102) 1 62/
NO ..... (SKIP TO Q.111) 0

---

102. On this card are some reasons people have for enlisting in the military. Please tell me if each one is true for you or not true for you.

I enlisted because . . .

HAND CARD I

		True	Not True	
A.	I was unemployed and couldn't find a job	1	0	63/
B.	I want to give myself a chance to be away from home on my own	1	0	64/
C.	the military will give me a chance to better myself in life	1	0	65/
D.	I want to travel and live in different places	1	0	66/
E.	I wanted to get away from a personal problem	1	0	67/
F.	I want to serve my country	1	0	68/
G.	I can earn more money than I could as a civilian	1	0	69/
H.	it is a family tradition to serve	1	0	70/
I.	I want to prove that I can make it	1	0	71/
J.	I want to get trained in a skill that will help me to get a civilian job when I get out	1	0	72/
K.	I want to obtain retirement or fringe benefits	1	0	73/
L.	I can get money for a college education	1	0	74/

IF MORE THAN ONE "TRUE" (CODE 1) IN Q.102, ASK A; OTHERWISE **SKIP TO Q. 111.**

A. Which of these was your most important reason for enlisting in the military?

ENTER LETTER CORRESPONDING TO LIST ABOVE HERE: [ ] 75/

SKIP TO Q.111

---

103. Are you now in the Delayed Entry Program in the (BRANCH), that is, are you scheduled to enter basic training some time in the future?

Yes 1 76/
No ..... (SKIP TO Q.105) 0

104. When will you enter active duty? MONTH: |_ |_| 10-11/

AND

YEAR: 19 |_|_| 12-13/

---

105. On this card are some reasons people have for enlisting in the military. Please tell me if each one is true for you or not true for you.

I enlisted because . . .

HAND CARD I

		True	Not True	
A.	I was unemployed and couldn't find a job	1	0	14/
B.	I want to give myself a chance to be away from home on my own	1	0	15/
C.	the military will give me a chance to better myself in life	1	0	16/
D.	I want to travel and live in different places	1	0	17/
E.	I wanted to get away from a personal problem	1	0	18/
F.	I want to serve my country	1	0	19/
G.	I can earn more money than I could as a civilian	1	0	20/
H.	it is a family tradition to serve	1	0	21/
I.	I want to prove that I can make it	1	0	22/
J.	I want to get trained in a skill that will help me to get a civilian job when I get out	1	0	23/
K.	I want to obtain retirement or fringe benefits	1	0	24/
L.	I can get money for a college education	1	0	25/

---

106. IF MORE THAN ONE "TRUE" (CODE 1) IN Q. 105, ASK A; OTHERWISE, GO TO B.

A. Which of these was your most important reason for enlisting in the military?

ENTER LETTER CORRESPONDING TO LIST ABOVE. LETTER: |_| 26/

B. INTERVIEWER: IS R IN A DELAYED ENTRY PROGRAM (IS Q. 103 CODED "YES")?

YES .....(**SKIP TO SECTION 5**) 1 27/
NO .....(GO TO Q.107)..... 0

107. Did you serve any time on active duty in the (BRANCH)?

Yes ..... (ASK A) 1 28/

No .....(**SKIP TO SECTION 5**).....0

A. On what date did you enter active duty in the (BRANCH)?

ENTER DATE HERE. |_|_|_|_|, 19 |_|_| 29-30/ 31-32/ 33-34/
MONTH DAY YEAR

B. INTERVIEWER: DID R ENTER THE ACTIVE FORCES? (Q. 38, CODES 01-04 OR 11)

YES .. (RECORD DATE IN ROW A OF **CALENDAR**) 1 35/

NO 0

---

108. And on what date did you separate from the (BRANCH)?

ENTER DATE HERE. |_|_|_|_|, 19 |_|_| 36-37/ 38-39/ 40-41/
MONTH DAY YEAR

A. INTERVIEWER: WAS R IN THE ACTIVE FORCES?

YES .. (RECORD DATE IN ROW A OF **CALENDAR.** DRAW A LINE FROM DATE ENTERED TO DATE SEPARATED) 1 42/

NO 0

---

109. While you were on active duty, did you complete training for an (MOS/RATING/AFSC)?

Yes ..... (ASK A) 1 43/

No 0

A. IF YES: What was the (MOS/RATING/AFSC)?

RECORD VERBATIM IN THE MARGINS.

_____

(OFFICE USE) 44-48/
|_|_|_|_|_|

110. Which of the reasons on this card describes why you decided to leave the (BRANCH)? CODE ALL THAT APPLY.

HAND CARD J

A.	Low pay and allowances 01	49-50/
B.	Better civilian job opportunities 02	51-52/
C.	Reduction in military benefits 03	53-54/
D.	Decline in quality of military personnel 04	55-56/
E.	Unable to practice my job skills 05	57-58/
F.	Bored with my job or occupation 06	59-60/
G.	Don't like my job or occupation 07	61-62/
H.	Plan to continue my education or to use G.I./VEAP benefits 08	63-64/
I.	Not eligible to reenlist 09	65-66/
J.	Dislike location of my assignments 10	67-68/
K.	Didn't get desired type of training 11	69-70/
L.	Had to move too often 12	71-72/
M.	Dislike being separated from my family 13	73-74/
N.	My family wants me to leave the service 14	75-76/
O.	Disagree with personnel policies 15	77-78/
P.	Discrimination against military personnel based on race 16	79-80/
Q.	Discrimination against military personnel based on sex 17	BEGIN DECK 15 10-11/
R.	Discrimination against military personnel based on rank 18	12-13/
S.	Other (SPECIFY) _____ 19	14-15/
	DON'T KNOW 98	16-17/

---

111. Taking all things together, how satisfied (are/were) you with the (MOST RECENT BRANCH)--very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

Very satisfied 1 18/

Somewhat satisfied 2

Somewhat dissatisfied 3

Very dissatisfied 4

---

112. INTERVIEWER: IS R CURRENTLY ON ACTIVE DUTY IN THE ACTIVE FORCES? (IS Q. 50 CODED "YES"?)

YES ..... (ASK A) 1 19/

NO ..(**GO TO SECTION 5 ON NEXT PAGE**)... 0

A. IF YES: Now we would like to ask you some more specific questions about your current military job.

SKIP TO Q.32--SECTION 5

SECTION 5: ON CURRENT LABOR FORCE STATUS (CPS QUESTIONS)

1. Now I'd like some information on what you were doing last week. What were you doing most of last week--working, going to school, or something else? RECORD VERBATIM AND CODE ONE ONLY.

_____

_____

CODE SMALLEST # MENTIONED

Working .....(SKIP TO Q. 3)..... 01 20-21/
WITH A JOB BUT NOT AT WORK..... 02
LOOKING FOR WORK..... 03
KEEPING HOUSE..... 04
Going to school..... 05
UNABLE TO WORK ..(SKIP TO Q. 20).... 06
Other (SPECIFY) _____ 07

---

2. Did you do any work at all last week, not counting work around the house?
-------> (INTERVIEWER NOTE: DO NOT INCLUDE VOLUNTEER WORK OR WORK DONE IN PRISON. IF FARM OR BUSINESS OPERATOR IN HH, ASK R ABOUT UNPAID WORK.)

Yes..... 1 22/
No .....(SKIP TO Q. 8)..... 0

---

3. How many hours did you work last week at all jobs?

ENTER # OF HOURS: |_|_|_| 23-24/

---

4. INTERVIEWER: CODE FROM Q. 3. RESPONDENT WORKED:

1 - 34 HOURS .....(ASK Q. 5)..... 1 25/
35 - 48 HOURS .....(SKIP TO Q. 6)..... 2
49 OR MORE HOURS .....(SKIP TO Q. 26).... 3

ASK Q. 5 ONLY IF CODE 1 IN Q. 4.

5. Do you usually work 35 hours or more a week at this job?

Yes.....(ASK A)..... 1 26/
No.....(ASK B)..... 0

(Continued)

A. IF YES: What is the reason you worked less than 35 hours last week? RECORD VERBATIM AND CODE ONE ONLY.

IF MORE THAN ONE REASON GIVEN, PROBE: What is the one main reason you worked less than 35 hours last week?

_____

_____

_____

SLACK WORK	01	27-28/
MATERIAL SHORTAGE	02	
PLANT OR MACHINE REPAIR	03	
NEW JOB STARTED DURING WEEK	04	
JOB TERMINATED DURING WEEK	05	
COULD FIND ONLY PART-TIME WORK	06	
HOLIDAY--LEGAL OR RELIGIOUS	07	
LABOR DISPUTE	08	
BAD WEATHER	09	
OWN ILLNESS	10	
ILLNESS OF OTHER FAMILY MEMBER	11	
ON VACATION	12	
ATTENDS SCHOOL	13	
TOO BUSY WITH HOUSEWORK, PERSONAL BUSINESS, ETC	14	
DID NOT WANT FULL-TIME WORK	15	
FULL-TIME WORK WEEK UNDER 35 HOURS	16	
OTHER REASON .. (SPECIFY) _____	17	

NOW SKIP TO Q. 26

(Continued)

B. IF NO: What is the reason you usually work less than 35 hours a week? RECORD VERBATIM AND CODE ONE ONLY.

IF MORE THAN ONE REASON GIVEN, PROBE: What is the one main reason you worked less than 35 hours last week?

_____

_____

_____

SLACK WORK	01	29-30/
MATERIAL SHORTAGE	02	
PLANT OR MACHINE REPAIR	03	
COULD FIND ONLY PART-TIME WORK	06	
BAD WEATHER	09	
OWN ILLNESS	10	
ILLNESS OF OTHER FAMILY MEMBER	11	
ATTENDS SCHOOL	13	
TOO BUSY WITH HOUSEWORK, PERSONAL BUSINESS, ETC	14	
DID NOT WANT FULL-TIME WORK	15	
FULL-TIME WORK WEEK UNDER 35 HOURS	16	
OTHER REASON..(SPECIFY) _____	17	

NOW SKIP TO Q. 26

ASK Q. 6 ONLY IF "35-48" HOURS IN Q. 4.

6. Did you lose any time or take any time off last week for any reason such as illness, holiday, or slack work?

Yes ..... (ASK A & B)..... 1 31/

No ..... (GO TO Q. 7)..... 0

IF YES, ASK A & B. OTHERWISE, GO TO Q. 7.

A. How many hours did you take off?

ENTER # OF HOURS: |__|__| 32-33/

B. You told me earlier that you worked (# OF HOURS IN Q. 3) hours last week. In saying that you worked (# OF HOURS IN Q. 3) hours, had you already subtracted the (# OF HOURS IN A) hours that you took off last week?

Yes .....(SKIP TO Q. 26).....1 34/

No .....(ASK C & D).....0

IF "NO" TO B, ASK C & D. OTHERWISE, GO TO Q. 26.

C. Thinking of the (# OF HOURS IN A) hours that you took off last week, how many hours did you end up working last week, at all jobs?

ENTER # OF HOURS: |__|__| 35-36/

D. INTERVIEWER: CODE FROM C--RESPONDENT WORKED

1 - 34 HOURS ....(ASK E)..... 1 37/

35 OR MORE HOURS (SKIP TO Q. 26).... 2

(Continued)

E. IF "1 - 34" HOURS IN D: What is the reason you worked less than 35 hours last week? RECORD VERBATIM AND CODE ONE ONLY.

IF MORE THAN ONE REASON GIVEN, PROBE: What is the one main reason you worked less than 35 hours last week?

_____

_____

_____

SLACK WORK.....	01	38-39/
MATERIAL SHORTAGE.....	02	
PLANT OR MACHINE REPAIR.....	03	
NEW JOB STARTED DURING WEEK.....	04	
JOB TERMINATED DURING WEEK.....	05	
COULD FIND ONLY PART-TIME WORK.....	06	
HOLIDAY--LEGAL OR RELIGIOUS.....	07	
LABOR DISPUTE.....	08	
BAD WEATHER.....	09	
OWN ILLNESS.....	10	
ILLNESS OF OTHER FAMILY MEMBER.....	11	
ON VACATION.....	12	
ATTENDS SCHOOL.....	13	
TOO BUSY WITH HOUSEWORK, PERSONAL BUSINESS, ETC.....	14	
DID NOT WANT FULL-TIME WORK.....	15	
FULL-TIME WORK WEEK UNDER 35 HOURS..	16	
OTHER REASON ... (SPECIFY) _____	17	

NOW SKIP TO Q. 26

7. Did you work any overtime or at more than one job last week?

Yes .....(ASK A)..... 1 40/

No.....(SKIP TO Q. 26)..... 0

IF "YES," ASK A. OTHERWISE, SKIP TO Q. 26.

A. How many extra hours did you work?

ENTER # OF EXTRA HOURS: |_|_|_| (ASK B) 41-42/

OR

NO EXTRA HOURS .....(SKIP TO Q. 26)..... 00

B. You told me earlier that you worked (# OF HOURS IN Q. 3) hours last week. In saying that you worked (# OF HOURS IN Q. 3) hours, had you already included those extra hours you just told me about?

Yes.....(SKIP TO Q. 26)..... 1 43/

No.....(ASK C)..... 0

C. IF "NO" TO B: Think of the (# OF HOURS IN A) hours that you worked extra last week. How many hours altogether, did you end up working last week?

ENTER # OF HOURS: |_|_|_| 44-45/

NOW SKIP TO Q. 26.

ASK Q. 8 ONLY IF "NO" TO Q. 2

8. A. INTERVIEWER: LOOK AT Q. 1. WAS CATEGORY 02 "WITH A JOB BUT NOT AT WORK" CODED?

YES .....(GO TO Q. 9)..... 1 46/

NO .....(ASK B)..... 0

B. IF NO: Did you have a job or business from which you were temporarily absent or on layoff last week?

Yes .....(ASK Q. 9)..... 1 47/

No .....(SKIP TO Q. 13)..... 0

ASK Q. 9 ONLY IF "YES" TO Q. 8A OR 8B.

9. Why were you absent from work last week? RECORD VERBATIM AND CODE ONLY ONE.

IF MORE THAN ONE REASON GIVEN, PROBE: What was the main reason why you were absent from work last week?

_____

_____

_____

OWN ILLNESS.....(SKIP TO Q. 11)..... 01 48-49/

ILLNESS OF OTHER FAMILY MEMBER
(SKIP TO Q. 11)..... 02

ON VACATION.....(SKIP TO Q. 11)..... 03

BAD WEATHER.....(SKIP TO Q. 11)..... 04

LABOR DISPUTE.....(SKIP TO Q. 11)..... 05

NEW JOB TO BEGIN...(ASK A)..... 06

ON LAYOFF.....(GO TO Q. 10)..... 07

SCHOOL INTERFERED..(SKIP TO Q. 11)..... 08

OTHER.....(SPECIFY BELOW AND
SKIP TO Q. 11)..... 09

_____

A. IF "NEW JOB TO BEGIN": Is your new job scheduled to begin within 30 days from today, or sometime after that?

Within 30 days.....(SKIP TO Q. 15)..... 1 50/

Sometime after that....(SKIP TO Q. 13B)..... 2

ASK Q. 10 IF "ON LAYOFF" IN Q. 9.

10. A. When you were laid off, were you given a definite date on which to report back to work, or were you not given such a date?

Was given a definite date to report back to work .....(ASK B)..... 1 51/

Was not given such a date to report back to work .....(GO TO C)..... 2

B. IF "WAS GIVEN A DEFINITE DATE": Altogether, will your period of layoff last 30 days or less, or will it last more than 30 days?

30 days or less..... 1 52/

More than 30 days..... 2

C. How many weeks ago were you laid off?

ENTER # OF WEEKS: |___|___| 53-54/

D. Is the job from which you were laid off a full-time or a part-time job?

Full-time..... 1 55/

Part-time..... 2

NOW SKIP TO Q. 19

---

11. Are you getting wages or salary for any of the time off last week?

Yes..... 1 56/

No..... 0

(IF VOLUNTEERED): SELF-EMPLOYED..... 3

---

12. Do you usually work 35 hours or more a week at this job?

Yes..... 1 57/

No..... 0

NOW SKIP TO Q. 26

ASK Q. 13 ONLY IF "NO" TO Q. 8B.

13. A. INTERVIEWER: SEE Q. 1. WAS CATEGORY 3, "LOOKING FOR WORK" CODED?

YES .....(GO TO Q. 14)..... 1 58/

NO .....(ASK B)..... 0

IF "NO" TO Q. 13A, OR IF CODE 2 IN Q. 9A, ASK B:

B. Have you been looking for work during the past 4 weeks?

Yes..... 1 59/

No.....(SKIP TO Q. 20)..... 0

---

14. What have you been doing in the last 4 weeks to find work?
RECORD VERBATIM AND CODE ALL THAT APPLY.

_____

_____

_____

NOTHING...(SKIP TO Q.20)..... 01 60-61/

CHECKED WITH:
- STATE EMPLOYMENT AGENCY.... 02 62-63/
- PRIVATE EMPLOYMENT AGENCY.. 03 64-65/
- EMPLOYER DIRECTLY..... 04 66-67/
- FRIENDS OR RELATIVES..... 05 68-69/

PLACED OR ANSWERED ADS..... 06 70-71/

LOOKED IN THE NEWSPAPER..... 07 72-73/

SCHOOL EMPLOYMENT SERVICE..... 08 74-75/

OTHER (SPECIFY)_____ 09 76-77/

15. Why did you start looking for work? Was it because you lost or quit a job at that time (PAUSE) or was there some other reason? RECORD VERBATIM AND CODE ONE ONLY.

_____

_____

_____

LOST JOB.....	01	10-11/
QUIT JOB.....	02	
LEFT SCHOOL.....	03	
CHILDREN ARE OLDER.....	04	
ENJOY WORKING.....	05	
NEEDED MONEY TO SUPPORT MYSELF OR MY FAMILY.....	06	
WANTED TEMPORARY WORK.....	07	
HEALTH IMPROVED.....	08	
PROGRAM ENDED.....	11	
OTHER (SPECIFY)_____	12	

---

16. INTERVIEWER: ANSWER CODED IN Q. 9 IS:

NEW JOB TO BEGIN .....(ASK Q. 17).....	1	12/
BLANK--Q. 9 NOT ASKED..(SKIP TO Q. 18).....	2	

IF CODE 1 IN Q. 16, ASK Q. 17.

17. A. How many weeks ago did you start looking for work?

ENTER # OF WEEKS: | | | 13-14/

B. Is your new job a full-time or a part-time job?

Full-time..... 1 15/

Part-time..... 2

C. Is there any reason why you could not take a job last week?

Yes .....(ASK D)..... 1 16/

No .....(SKIP TO Q. 24)..... 0

D. IF YES TO C: What was the reason?
RECORD VERBATIM AND CODE ONE ONLY.

_____

_____

_____

ALREADY HAD A JOB..... 1 17/

TEMPORARY ILLNESS..... 2

GOING TO SCHOOL..... 3

NEEDED AT HOME..... 4

OTHER (SPECIFY)

_____ 5

NOW SKIP TO Q. 24

IF CODE 2 IN Q. 16, ASK Q. 18.

18. A. How many weeks have you been looking for work?

ENTER # OF WEEKS: |___|___| 18-19/

B. Have you been looking for full-time or part-time work?
IF "BOTH," CODE "FULL-TIME."

Full-time..... 1 20/

Part-time..... 2

---

19. Is there any reason why you could not take a job last week?

Yes .....(ASK A)..... 1 21/

No .....(SKIP TO Q. 24)..... 0

A. IF YES: What was the reason? RECORD VERBATIM AND CODE ONE ONLY.

_____

_____

_____

ALREADY HAD A JOB..... 1 22/

TEMPORARY ILLNESS..... 2

GOING TO SCHOOL..... 3

NEEDED AT HOME..... 4

OTHER (SPECIFY BELOW)..... 5

_____

NOW SKIP TO Q. 24

20. Now I'd like you to think about the time since (DATE OF LAST INTERVIEW). (Not counting your military service,) Did you do any work for pay since (DATE OF LAST INTERVIEW)?

Yes.....	1	23/
No.....	0	

---

21. Do you want a regular job now, either full- or part-time?

Yes .....(ASK A).....	1	24/
No.....(ASK B).....	0	
Maybe, it depends...(ASK A).....	3	
Don't know .....(ASK B).....	8	

A. IF YES OR MAYBE:

What are the reasons you are not looking for work? RECORD VERBATIM AND CODE ALL THAT APPLY.

B. IF NO OR DON'T KNOW:

What are the reasons you do not want a regular job now? RECORD VERBATIM AND CODE ALL THAT APPLY.

BELIEVE NO WORK AVAILABLE IN LINE OF WORK OR AREA....	01	BELIEVE NO WORK AVAILABLE IN LINE OF WORK OR AREA.....	01	25-26/
COULDN'T FIND ANY WORK.....	02	COULDN'T FIND ANY WORK.....	02	27-28/
LACKS NECESSARY SCHOOLING, TRAINING, SKILLS, OR EXPERIENCE.....	03	LACKS NECESSARY SCHOOLING, TRAINING, SKILLS, OR EXPERIENCE.....	03	29-30/
EMPLOYERS THINK TOO YOUNG....	04	EMPLOYERS THINK TOO YOUNG.....	04	31-32/
CAN'T ARRANGE CHILD CARE.....	06	CAN'T ARRANGE CHILD CARE.....	06	33-34/
FAMILY RESPONSIBILITIES.....	07	FAMILY RESPONSIBILITIES.....	07	35-36/
IN SCHOOL OR OTHER TRAINING..	08	IN SCHOOL OR OTHER TRAINING.....	08	37-38/
ILL HEALTH, PHYSICAL DISABILITY.....	09	ILL HEALTH, PHYSICAL DISABILITY.....	09	39-40/
PREGNANCY.....	10	PREGNANCY.....	10	41-42/
OTHER PERSONAL HANDICAPS IN FINDING JOB.....	05	OTHER PERSONAL HANDICAPS IN FINDING JOBS.....	05	43-44/
SPOUSE OR PARENT AGAINST MY WORKING.....	11	SPOUSE OR PARENT AGAINST MY WORKING.....	11	45-46/
DOES NOT WANT TO WORK.....	12	DOES NOT WANT TO WORK.....	12	47-48/
CAN'T ARRANGE TRANSPORTATION	13	CAN'T ARRANGE TRANSPORTATION.....	13	49-50/
DON'T KNOW WHERE TO LOOK.....	14	DON'T KNOW WHERE TO LOOK.....	14	51-52/
OTHER (SPECIFY)_____	15	OTHER (SPECIFY) _____....	15	53-54/
OR		OR		
DON'T KNOW.....	98	DON'T KNOW.....	98	55-56/

22. Do you intend to look for work of any kind in the next 12 months?

Yes .....(ASK A)..... 1 57/

No .....(SKIP TO Q. 23)... 0

It depends ...(SKIP TO Q. 23)... 3

Don't Know ...(SKIP TO Q. 23)... 8

A. What type of work will you be looking for? RECORD VERBATIM 58-60/

_____

_____

_____

B. INTERVIEWER: EXAMINE R'S ANSWER TO A AND CODE BELOW:

ONE TYPE OF WORK MENTIONED...(GO TO D)..... 1 61/

MORE THAN ONE TYPE OF WORK MENTIONED .....(ASK C)..... 2

ANYTHING .....(GO TO D)..... 3

C. IF CODE 2: Which one would you prefer? RECORD VERBATIM

_____

NOW ASK D.

D. What would the wage or salary have to be for you to be willing to take it? PROBE IF NECESSARY: Is that per hour, day, week, or what?

						.			
DOLLARS							CENTS		
62-66/							67-68/		

Per hour..... 01 69-70/

Per day..... 02

Per week..... 03

Bi-weekly (every 2 weeks)... 04

Per month..... 05

Per year..... 06

.....Other (SPECIFY) _____ 07

OR, IF VOLUNTEERED

ANY PAY..... 08

E. How many days per week (do/would) you want to work?

ENTER # OF DAYS PER WEEK: | 0 | | 71-72/

F. Now we are going to ask about hours per day.
How many hours per day (do/would) you want to work?

ENTER # OF HOURS PER DAY: | | | 73-74/

---

23. INTERVIEWER: HAS R WORKED FOR PAY SINCE DATE OF LAST INTERVIEW (IS Q. 20 CODED "YES")?

YES ...(SKIP TO Q. 26)..... 1 75/

NO ..(SKIP TO SECTION 6)... 0

---

24. Now I'd like you to think about the time since (DATE OF LAST INTERVIEW). (Not counting your military service,) Did you do any work for pay since (DATE OF LAST INTERVIEW)?

Yes 1 76/

No 0

A. INTERVIEWER: WAS R LOOKING FOR WORK LAST WEEK (IS Q.13A CODED "1") OR HAS R BEEN LOOKING FOR WORK IN THE PAST FOUR WEEKS (IS Q.13B CODED "1")? (IF Q.13A AND Q.13B ARE BOTH BLANK, CODE "NO", BELOW).

YES .....(ASK B)..... 1 77/

NO .....(GO TO Q. 25)..... 0

B. Earlier you said that you have been looking for work. What type of work are you looking for? RECORD VERBATIM.

_____ 78-80/

_____

_____

C. INTERVIEWER: EXAMINE R'S ANSWER TO A AND CODE BELOW: BEGIN DECK 17

ONE TYPE OF WORK MENTIONED.....(ASK E).... 1 10/

MORE THAN ONE TYPE OF WORK MENTIONED..(ASK D).... 2

ANYTHING .....(ASK E).... 3

D. IF CODE 2: Which one would you prefer? RECORD VERBATIM AND ASK E.

_____

_____

(Continued)

E. What would the wage or salary have to be for you to be willing to take it? PROBE IF NECESSARY: Is that per hour, day, week, or what?

|_|_|_|_|_|_| . |_|_|
DOLLARS CENTS
11-15/ 16-17/

Per hour..... 01 18-19/
Per day..... 02
Per Week..... 03
Bi-weekly (every 2 weeks).... 04
Per month..... 05
Per year..... 06
Other (SPECIFY) _____ 07
OR, IF VOLUNTEERED ANY PAY 08

F. How many days per week (do/would) you want to work?

ENTER # OF DAYS PER WEEK: |0|_| 20-21/

G. Now we are going to ask about hours per day. How many hours per day (do/would) you want to work?

ENTER # OF HOURS PER DAY: |_|_| 22-23/

---

25. INTERVIEWER: HAS R WORKED FOR PAY SINCE DATE OF LAST INTERVIEW (IS Q. 24 CODED "YES")?

YES .....(GO TO Q. 26)... 1 24/
NO ....(SKIP TO Q.34)..... 0

26. A. For whom did you work last (week)? IF MORE THAN ONE EMPLOYER, PROBE: For whom did you work the most hours during the last week (you worked)?

_____ 25-51/

B. INTERVIEWER: ALSO ENTER NAME OF EMPLOYER ON THE COVER OF AN EMPLOYER SUPPLEMENT.

---

27. What kind of business or industry is this? (FOR EXAMPLE: TV AND RADIO MFG., RETAIL SHOE STORE, STATE LABOR DEPT., FARM.)

_____ 52-54/

_____

_____

---

28. A. What kind of work were you doing for this job? RECORD VERBATIM. IF MORE THAN ONE KIND OF WORK, PROBE: What kind of work were you doing for the most hours last week?

_____ 55-57/

_____

B. What were your most important activities or duties? RECORD VERBATIM.

_____

_____

_____

C. Some jobs are odd jobs--that is, work done from time to time, like occasional lawnmowing or babysitting. Others are regular jobs--that is, jobs done on a more or less regular basis. Is this a job that was done on a more or less regular basis or is it an odd job?

Regular job..... 1 58/

Odd job..... 2

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Industry: |___|___|___| 59-61/

Occupation: |___|___|___| 62-64/

29. Were you ... (READ CATEGORIES BELOW)

HAND CARD K

An employee of a private company business or individual for wages, salary or commission, or (GO TO Q. 30)... 1 65/

A government employee, or ....(ASK A)..... 2

Self-employed in own business, professional practice, or farm, or .....(ASK B)..... 3

Working without pay in family business or farm? .....(SKIP TO Q. 32)..... 4

IF CODE 2 IN Q. 29, ASK A:

A. Were you an employee of the federal government, state government, or local government?

Federal government employee..... 1 66/

State government employee..... 2

Local government employee..... 3

Don't know..... 8

GO TO Q. 30

IF CODE 3 IN Q. 29, ASK B:

B. Is your business incorporated or unincorporated?

Business incorporated..... 1 67/

Business unincorporated..... 2

Don't know..... 8

---

30. A. How many hours per week (do/did) you usually work at this job?

ENTER # OF HOURS: | | | 68-69/

B. INTERVIEWER: ARE Q.20 AND Q.24 BOTH BLANK?

YES 1 70/
NO ....(SKIP TO Q.32)..... 0

C. INTERVIEWER: IS ANSWER AT Q.30A, 20 HOURS OR MORE?

YES 1 71/
NO .....(SKIP TO Q. 32).... 0

31. INTERVIEWER: (IS/WAS) R SELF-EMPLOYED IN A BUSINESS WHICH IS UNINCORPORATED (IS Q. 29B CODED "2" OR "8")?

YES .....(SKIP TO Q. 32)..	1	72/
NO	0	

A. (Does/did) your employer make (READ CATEGORY . . .) available to you? CODE "YES" OR "NO" FOR EACH.

	Yes	No	
medical, surgical, or hospital insurance that covers injuries or major illnesses off the job	1	0	73/
life insurance that would cover your death for reasons not connected with your job	1	0	74/
paid vacation	1	0	75/

---

32. What hours (do/did) you usually work? (Is/was) it the regular day shift, the regular evening shift, the regular night shift, a split shift, or (do/did) your hours vary? CODE ONE ONLY.

Regular day shift.....	1	76/
Regular evening shift.....	2	
Regular night shift.....	3	
A split shift.....	4	
Hours vary.....	5	

33. A. How (do/did) you feel about (the job you have now/ your most recent job)? (Do/Did) you like it very much, like it fairly well, dislike it somewhat, or dislike it very much? CODE ONE ONLY.

Like it very much.....	1	77/
Like it fairly well.....	2	
Dislike it somewhat.....	3	
Dislike it very much.....	4	

B. INTERVIEWER: IS R CURRENTLY ON ACTIVE DUTY IN THE ACTIVE FORCES? (DOES SECTION 4, Q. 50 = YES?)

YES ..(**SKIP TO SECTION 6**)..	1	78/
NO	0	

C. Since you first started to work for your employer (have you ever received/did you ever receive) a promotion?

Yes .....(ASK D).....	1	79/
No ....(SKIP TO Q.34).....	0	

D. How many times (have you been/were you) promoted? BEGIN DECK 18

ENTER # OF TIMES [ ][ ] 10-11/

E. In what month and year were you (most recently) promoted?

[ ][ ][ ][ ][ ] 12-13/ 14-15/
Month Year

F. INTERVIEWER: IS DATE IN Q.33E BEFORE DATE OF LAST INTERVIEW?

YES ...(SKIP TO Q.34).....1		16/
NO .....(GO TO G.).....0		

G. Did your (most recent) promotion give you ....(READ CATEGORIES 1-4 AND CODE "YES" OR "NO" FOR EACH) ....

	Yes	No	
1. more pay, ...	1	0	17/
2. more challenging work, ...	1	0	18/
3. more authority over other workers, ...	1	0	19/
and finally,			
4. more responsibility	1	0	20/

34. A. INTERVIEWER: DOES R HAVE NEW JOB TO BEGIN (IS Q. 9 CODED "6")?

YES ..(**SKIP TO SECTION 6**).. 1 21/

NO .....(ASK B)..... 0

B. INTERVIEWER: WAS R WORKING LAST WEEK (IS Q. 1 CODED "1" OR Q. 2 CODED "1")?

YES .....(GO TO Q. 35)..... 1 22/

NO .....(ASK C)..... 0

C. INTERVIEWER: WAS R TEMPORARILY ABSENT OR ON LAYOFF FROM JOB OR BUSINESS (IS Q. 1 CODED "2" OR Q. 8B CODED "1")?

YES .....(GO TO Q. 35)..... 1 23/

NO ...(**SKIP TO SECTION 6**).. 0

---

35. Have you been looking for other work in the last 4 weeks?

Yes .....(ASK A)..... 1 24/

No .....(GO TO Q. 36)..... 0

A. IF YES: What have you been doing in the last four weeks to find work? RECORD VERBATIM AND CODE ALL THAT APPLY.

_____

_____

_____

NOTHING .....(GO TO Q. 36)..... 01 25-26/

CHECKED WITH:

STATE EMPLOYMENT AGENCY....(SKIP TO Q. 37)..... 02 27-28/

PRIVATE EMPLOYMENT AGENCY..(SKIP TO Q. 37)..... 03 29-30/

EMPLOYER DIRECTLY.....(SKIP TO Q. 37)..... 04 31-32/

FRIENDS OR RELATIVES.....(SKIP TO Q. 37)..... 05 33-34/

PLACED OR ANSWERED ADS.....(SKIP TO Q. 37)..... 06 35-36/

LOOKED IN THE NEWSPAPER.....(SKIP TO Q. 37)..... 07 37-38/

SCHOOL EMPLOYMENT SERVICE....(SKIP TO Q. 37)..... 08 39-40/

OTHER .....(SPECIFY AND SKIP TO Q. 37)..... 09 41-42/

_____

IF "NO" TO Q. 35, OR "NOTHING" IN Q. 35A, ASK Q. 36. OTHERWISE SKIP TO Q. 37.

36. Do you intend to look for work of any kind in the next 12 months? 43/

Yes.....	1
No.....	0
OR	
IT DEPENDS	3
OR	
DON'T KNOW.....	8

NOW SKIP TO SECTION 6

37. What was the main reason you were looking for a new job during the past 4 weeks? RECORD VERBATIM AND CODE ONE ONLY.

_____

_____

_____

LITTLE CHANCE FOR ADVANCEMENT IN CURRENT JOB 01 44-45/

PAY INADEQUATE AT CURRENT JOB..... 02

WORKING CONDITIONS BAD AT CURRENT JOB..... 03

CURRENT JOB IS PART-TIME OR SEASONAL, DESIRE FULL-TIME WORK..... 04

CURRENT JOB DOES NOT MAKE GOOD USE OF MY EXPERIENCE OR SKILLS..... 05

WISH TO LIVE IN A NEW LOCATION..... 06

WANT JOB IN A DIFFERENT FIELD..... 07

NEEDED MONEY 08

LAID OFF, JOB ENDED..... 09

PROBLEMS WITH SUPERVISOR..... 10

OTHER (SPECIFY) _____ 11

---

38. For how many weeks have you been looking for a new job?

ENTER NUMBER OF WEEKS: |_|_|_| 46-47/

---

39. A. What type of work are you looking for? RECORD VERBATIM.

_____ 48-50/

_____

_____

B. INTERVIEWER: EXAMINE R'S ANSWER TO A AND CODE BELOW:

ONE TYPE OF WORK MENTIONED.....(GO TO Q. 40)..... 1 51/

MORE THAN ONE TYPE OF WORK MENTIONED..(ASK C)..... 2

ANYTHING..... (GO TO Q. 40)..... 3

C. IF CODE 2: Which one would you prefer? RECORD VERBATIM AND GO TO Q. 40.

_____

_____

40. What would the wage or salary have to be for you to be willing to take it?
PROBE IF NECESSARY: Is that per hour, day, week, or what?

						.			
DOLLARS							CENTS		
52-56/							57-58/		

Per hour..... 01 59-60/
Per day..... 02
Per week..... 03
Bi-weekly
(every 2 weeks)..... 04
Per month..... 05
Per year..... 06
Other (SPECIFY)
_____ 07
OR, IF VOLUNTEERED
ANY PAY..... 08

A. How many days per week (do/would) you want to work?

ENTER # OF DAYS PER WEEK: | 0 | | 61-62/

B. Now we are going to ask about hours per day.
How many hours per day (do/would) you want to work?

ENTER # OF HOURS PER DAY: | | | 63-64/

GO TO SECTION 6

SECTION 6: ON JOBS

1. INTERVIEWER: DID R HAVE A CIVILIAN JOB SINCE THE LAST INTERVIEW? (IF YES, YOU HAVE ENTERED NAME ON AN **EMPLOYER SUPPLEMENT**)

OR DID R SERVE IN ANY BRANCH OF THE MILITARY SINCE THE DATE OF THE LAST INTERVIEW? (SEE **CALENDAR**, ROW A, OR "YES" TO Q.2, SECTION 4)

YES 1 65/

NO ..... (SKIP TO Q. 3) 0

---

2. Besides [(the job with (EMPLOYER IN Q. 26, SECTION 5)/(and)/(your military service,)] have you done any other work for pay since (DATE OF LAST INTERVIEW)?

Yes ..... (SKIP TO Q. 4) 1 66/

No ..... (SKIP TO Q. 6) 0

---

3. Since (DATE OF LAST INTERVIEW), have you done any work at all for which you were paid?

Yes 1 67/

No ..... (SKIP TO Q. 6) 0

---

4. Some jobs are odd jobs--that is, work done from time to time, like occasional lawnmowing or babysitting. Others are regular jobs--that is, jobs done on a more or less regular basis.

[Not counting your job with (EMPLOYER IN SEC. 5, Q. 26A), since (DATE OF LAST INTERVIEW)], have any of the jobs you've had for pay been done on a more-or-less regular basis?

Yes ..... (GO TO Q. 5) 1 68/

No ..... (SKIP TO Q. 6) 0

5. Please give me the names of each of your employers for all regular jobs you've had for pay since (DATE OF LAST INTERVIEW) [not counting your job with (EMPLOYER IN SEC. 5, Q. 26A)]. If you had more than one job at the same time, please tell me about each job separately. Let's start with the most recent regular job you've had and work back in time to (DATE OF LAST INTERVIEW).

LIST EMPLOYER NAMES ON THE EMPLOYER LINES BELOW AND IN Q. 1 ON THE COVERS OF THE **EMPLOYER SUPPLEMENTS**, STARTING WITH THE MOST RECENT JOB.

A. PROBE: What was the name of your employer for the next most recent regular job you've had since (DATE OF LAST INTERVIEW)?

CONTINUE PROBING UNTIL R SAYS "NO OTHER EMPLOYER." IF R VOLUNTEERS THAT (HE/SHE) WORKED FOR MORE THAN ONE EMPLOYER FOR A JOB, ASK B.

B. During a single month, (do/did) you generally work for one employer or more than one employer for this job?

One employer ..... [ASK (1)]

More than one employer ..... [ASK (2)]

(1) IF ONE EMPLOYER IN B: What (is/was) the name of the (next) most recent employer you've worked for on this job?

RECORD IN Q. 1 ON THE COVER OF AN **EMPLOYER SUPPLEMENT** AND REPEAT THIS QUESTION UNTIL YOU GET "NO OTHER EMPLOYER." THEN GO BACK TO "A" ABOVE.

(2) IF MORE THAN ONE EMPLOYER IN B: RECORD "VARIETY OF EMPLOYERS" IN Q. 1 OF THE **EMPLOYER SUPPLEMENT.** THEN GO BACK TO "A" ABOVE. CONTINUE PROBING UNTIL R SAYS "NO OTHER EMPLOYER."

EMPLOYERS

(ENTER HERE AND IN Q. 1 ON THE COVERS OF **EMPLOYER SUPPLEMENTS.**)

_____

_____

_____

_____

_____

_____

6. INTERVIEWER: SEE ROW A OF **CALENDAR.** WAS R ON ACTIVE DUTY IN THE ACTIVE FORCES THE ENTIRE TIME FROM DATE OF THE LAST INTERVIEW UNTIL NOW?

YES ..... (SKIP TO Q. 17) 1 69/

NO 0

---

7. INTERVIEWER: SEE **CALENDAR.** HAS R BEEN ENROLLED IN REGULAR SCHOOL AT ANY TIME SINCE THE DATE OF THE LAST INTERVIEW? (**CALENDAR**, Q. E CODED "YES" OR THERE IS A GRADE ENTERED AT Q. F OF THE **CALENDAR**)

YES 1 70/

NO ..... (SKIP TO Q. 12) 0

---

8. INTERVIEWER: WAS R ENROLLED IN COLLEGE SINCE DATE OF LAST INTERVIEW? (SEE **CALENDAR**, Q. E OR Q. F = 13 OR HIGHER)

YES ..... (ASK A) 1 71/

NO ..... (SKIP TO Q. 10) 0

A. IF YES: Since (DATE OF LAST INTERVIEW), have you had a job for pay that was provided by a college work-study program? [Be sure to tell me if (any of) the job(s) you already told me about was this kind of job.]

Yes ..... (ASK B) 1 72/

No ..... (SKIP TO Q. 9) 0

IF YES TO A, ASK B:

B. What was the name of your employer for your college work-study job? RECORD VERBATIM. PROBE: Any others?

	_____	_____	_____
FOR EACH EMPLOYER NAME RECORDED IN B, ANSWER C:			
C. INTERVIEWER: IS THE EMPLOYER NAME RECORDED IN 'B' ALREADY ENTERED IN Q.1 ON THE COVER OF AN **EMPLOYER SUPPLEMENT?**	YES..(CIRCLE CODE 2 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1	YES..(CIRCLE CODE 2 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1	YES..(CIRCLE CODE 2 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1
	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 2 ON THE COVER OF THAT SUPPLEMENT) . 0	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 2 ON THE COVER OF THAT SUPPLEMENT) . 0	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 2 ON THE COVER OF THAT SUPPLEMENT) . 0

9. INTERVIEWER: SINCE DATE OF LAST INTERVIEW, HAS R BEEN ENROLLED IN GRADES 1-12? (SEE **CALENDAR.** Q. E CODED 1-12, OR Q. F CODED 1-12, OR THERE IS A CHECK MARK AT Q. G)

YES 1 73/

NO ..... (SKIP TO Q. 11) 0

---

10. Some schools have cooperative work-study programs in which students work part time for pay and their schools give time off or credit for the job. Since (DATE OF LAST INTERVIEW), have you had a job for pay that was part of a work-study program? [Please tell me if (any of) the job(s) you've already told me about was this kind of job.]

Yes ..... (ASK A) 1 74/

No ..... (GO TO Q. 11) 0

A. IF YES: What was the name of your employer for your work-study job? RECORD VERBATIM. PROBE: Any others?

FOR EACH EMPLOYER NAME RECORDED IN A, ANSWER B:	_____	_____	_____
B. INTERVIEWER: IS THE EMPLOYER NAME RECORDED IN "A" ALREADY ENTERED IN Q. 1 ON THE COVER OF AN **EMPLOYER SUPPLEMENT**?	YES..(CIRCLE CODE 3 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1	YES..(CIRCLE CODE 3 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1	YES..(CIRCLE CODE 3 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1
	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 3 ON THE COVER OF THAT SUPPLEMENT) . 0	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 3 ON THE COVER OF THAT SUPPLEMENT) . 0	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 3 ON THE COVER OF THAT SUPPLEMENT) . 0

11. Some government programs provide students with part-time jobs during the school year.

Since (DATE OF LAST INTERVIEW), have you had a government-sponsored part-time job for pay during the school year? (PAUSE) [Please tell me if (any of) the job(s) you've already told me about earlier was this kind of job.]

Yes ..... (ASK A) 1 75/

No ..... (GO TO Q. 12) 0

A. IF YES: What was the name of your employer for this job? RECORD VERBATIM. PROBE: Any others?

FOR EACH EMPLOYER NAME RECORDED IN A, ANSWER B:	_____	_____	_____
B. INTERVIEWER: IS THE EMPLOYER NAME RECORDED IN "A" ALREADY ENTERED IN Q. 1 ON THE COVER OF AN **EMPLOYER SUPPLEMENT**?	YES..(CIRCLE CODE 4 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1 NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 4 ON THE COVER OF THAT SUPPLEMENT) . 0	YES..(CIRCLE CODE 4 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1 NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 4 ON THE COVER OF THAT SUPPLEMENT) . 0	YES..(CIRCLE CODE 4 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1 NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 4 ON THE COVER OF THAT SUPPLEMENT) . 0

12. Some government-sponsored programs provide jobs for youth for about 10 weeks during the summer.

Since (DATE OF LAST INTERVIEW), have you had a government-sponsored summer job for pay? (PAUSE) [Please tell me if (any of) the job(s) you've already told me about was this kind of summer job.]

Yes ..... (ASK A) 1 76/

No ..... (GO TO Q. 13) 0

A. IF YES: What was the name of your employer for this summer job? RECORD VERBATIM. PROBE: Any others?

FOR EACH EMPLOYER NAME RECORDED IN A, ANSWER B:	_____	_____	_____
B. INTERVIEWER: IS THE EMPLOYER NAME RECORDED IN "A" ALREADY ENTERED IN Q. 1 ON THE COVER OF AN **EMPLOYER SUPPLEMENT**?	YES..(CIRCLE CODE 5 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1 NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 5 ON THE COVER OF THAT SUPPLEMENT) . 0	YES..(CIRCLE CODE 5 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1 NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 5 ON THE COVER OF THAT SUPPLEMENT) . 0	YES..(CIRCLE CODE 5 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1 NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 5 ON THE COVER OF THAT SUPPLEMENT) . 0

13. INTERVIEWER: IS R CURRENTLY ENROLLED IN GRADES 1-12?
(SEE **CALENDAR.** Q. E CODED 1-12?)

YES ..... (SKIP TO Q. 15) 1 77/

NO ..... (ASK Q. 14) 0

IF NO TO Q. 13, ASK Q. 14:

14. Some other government-sponsored programs provide jobs or on-the-job training for pay.

Since (DATE OF LAST INTERVIEW), have you had a government-sponsored job or on-the-job training for pay? (PAUSE) [Please tell me if (any of) the job(s) you've already told me about was this kind of job.]

Yes ..... (ASK A) 1 78/

No ..... (GO TO Q. 15) 0

A. IF YES: What was the name of your employer for this job?
RECORD VERBATIM. PROBE: Any others?

	_____	_____	_____
FOR EACH EMPLOYER NAME RECORDED IN A, ANSWER B:			
B. INTERVIEWER: IS THE EMPLOYER NAME RECORDED IN "A" ALREADY ENTERED IN Q. 1 ON THE COVER OF AN **EMPLOYER SUPPLEMENT**?	YES..(CIRCLE CODE 6 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1	YES..(CIRCLE CODE 6 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1	YES..(CIRCLE CODE 6 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1
	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 6 ON THE COVER OF THAT SUPPLEMENT) . 0	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 6 ON THE COVER OF THAT SUPPLEMENT) . 0	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 6 ON THE COVER OF THAT SUPPLEMENT) . 0

15. Some government programs give employers tax credits for hiring people. The names of some are: Targeted Jobs Tax Credits and, WIN Tax Credit.

Since January 1, 1979, have you received a certificate to show employers that you are eligible for any of these programs?

Yes ..... (ASK A) 1 79/

No ..... (GO TO Q. 16) 0

A. IF YES: Since (DATE OF LAST INTERVIEW), have you had a job that was part of a tax credit program? [Please tell me if (any of) the job(s) you already told me about was this kind of job.]

Yes ..... (ASK B) 1 80/

No ..... (GO TO Q. 16) 0

B. IF YES: What was the name of your employer for this job? RECORD VERBATIM. PROBE: Any others?

FOR EACH EMPLOYER NAME RECORDED IN B, ANSWER C:	_____	_____	_____
C. INTERVIEWER: IS THE EMPLOYER NAME RECORDED IN "B" ALREADY ENTERED IN Q. 1 ON THE COVER OF AN **EMPLOYER SUPPLEMENT**?	YES..(CIRCLE CODE 7 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1	YES..(CIRCLE CODE 7 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1	YES..(CIRCLE CODE 7 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1
	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 7 ON THE COVER OF THAT SUPPLEMENT) . 0	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 7 ON THE COVER OF THAT SUPPLEMENT) . 0	NO ..(RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 7 ON THE COVER OF THAT SUPPLEMENT) . 0

16. Finally, take a look at this card. Since (DATE OF LAST INTERVIEW), have you had a job for pay that was sponsored by the kinds of government programs listed here? (PAUSE) [Again, please tell me if (any of) the job(s) you already told me about was part of one of these programs.]

HAND CARD L

Yes ..... (ASK A) 1 10/
No ..... (GO TO Q. 17) 0

A. IF YES: What was the name of your employer for this job? RECORD VERBATIM. PROBE: Any others?

FOR EACH EMPLOYER NAME RECORDED IN A, ANSWER B:	_____	_____	_____
B. INTERVIEWER: IS THE EMPLOYER NAME RECORDED IN "A" ALREADY ENTERED IN Q. 1 ON THE COVER OF AN **EMPLOYER SUPPLEMENT**?	YES..(CIRCLE CODE 8 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1 NO . (RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 8 ON THE COVER OF THAT SUPPLEMENT) . 0	YES..(CIRCLE CODE 8 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1 NO . (RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 8 ON THE COVER OF THAT SUPPLEMENT) . 0	YES..(CIRCLE CODE 8 ON THE COVER OF THE **EMPLOYER SUPPLEMENT** FOR THIS EMPLOYER) ... 1 NO . (RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPP.** AND CIRCLE CODE 8 ON THE COVER OF THAT SUPPLEMENT) . 0

17. INTERVIEWER: SEE ITEM 5 ON **INFORMATION SHEET.** WAS R EMPLOYED ON DATE OF LAST INTERVIEW?

YES ..... (ASK A) 1 11/

NO ..... (SKIP TO Q. 19) 0

A. IF YES, INTERVIEWER: ARE ALL OF R'S EMPLOYERS IN ITEM 5 OF **INFORMATION SHEET** NOW ENTERED AT Q. 1 ON THE COVERS OF **EMPLOYER SUPPLEMENTS**?

YES ..... (SKIP TO Q. 19) 1 12/

NO 0

---

18. INTERVIEWER: LIST BELOW ALL EMPLOYERS IN ITEM 5 OF **INFORMATION SHEET** THAT ARE NOT NOW ENTERED AT Q. 1 ON THE COVER OF **EMPLOYER SUPPLEMENTS.** THEN ASK A.

	_____	_____	_____
FOR EACH EMPLOYER NAME RECORDED ABOVE, ASK A:			
A. When we interviewed you last on (DATE OF LAST INTERVIEW) you were working for (READ EMPLOYER NAME). Have you already told me about (EMPLOYER) for this year but called it by another name?			
	YES 1	YES 1	YES 1
	NO . (RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPPLEMENT**) . 0	NO . (RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPPLEMENT**) . 0	NO . (RECORD THIS EMPLOYER AT Q. 1 ON THE COVER OF AN **EMPLOYER SUPPLEMENT** .. 0

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19. INTERVIEWER: ALTOGETHER, ON HOW MANY **EMPLOYER SUPPLEMENTS** HAVE YOU RECORDED AN EMPLOYER NAME?

NONE ..... (GO TO SECTION 7) 00 13-14/

ONE OR MORE . . .
(SPECIFY NUMBER HERE AND ADMINISTER SUPPLEMENTS NOW.
START WITH THE MOST RECENT JOB).. |__|__|

PLEASE GO ON TO NEXT PAGE ---------->>

SECTION 7: GAPS WHEN R WAS NOT WORKING OR IN THE MILITARY

---> (INTERVIEWER NOTE: BY NOW YOU SHOULD HAVE ADMINISTERED AN EMPLOYER SUPPLEMENT FOR EACH JOB COUNTED AT SECTION 6, Q.19)

---

1. INTERVIEWER: HOW MANY EMPLOYER SUPPLEMENTS HAVE YOU ADMINISTERED TO THE RESPONDENT?

ENTER NUMBER: |__|__|

---

2. INTERVIEWER: HAVE YOU DRAWN ANY LINES ON ROW A OR B OF THE **CALENDAR**?

YES ..... (GO TO Q. 3) 1 15/

NO ...(INTERVIEWER: PUT DATE OF LAST INTERVIEW AND TODAY'S DATE IN BOXES FOR PERIOD 1, Q.4A, ON THE NEXT PAGE. PUT BOTH DATES ON ROW C OF THE **CALENDAR.** DRAW A LINE TO CONNECT THESE DATES. THEN GO TO Q.4B, NEXT PAGE.)..... 0

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3. INTERVIEWER: SEE **CALENDAR** ROWS A AND B. ARE THERE ANY GAPS OF A WEEK OR MORE BETWEEN EMPLOYERS AND/OR ACTIVE DUTY SINCE DATE OF LAST INTERVIEW AND NOW?

IN OTHER WORDS, ARE THERE ANY SPACES OF A WEEK OR MORE WHERE YOU DO NOT HAVE A LINE DRAWN IN ROW A OR ROW B?
(CHECK ALL YOUR DATES CAREFULLY. CHECK THE ENDING DATE OF EACH JOB HELD AND THE STARTING DATE OF THE NEXT JOB.)

THERE ARE SOME GAPS .... (GO TO Q. 4A, NEXT PAGE) 1 16/

ALL TIME IS ACCOUNTED FOR IN LINES A AND B .. (SKIP TO SECTION 8) 2

GAPS BETWEEN JOBS: MOST RECENT TO LEAST RECENT

	PERIOD 1	PERIOD 2
4. A. INTERVIEWER: DRAW LINES ON ROW C TO REPRESENT PERIODS DURING WHICH THERE ARE NO LINES IN ROW A OR B. USE DATES ENTERED IN ROWS A & B TO INDICATE IN ROW C DATES R BEGAN AND ENDED EACH PERIOD OF NON-EMPLOYMENT. ENTER THE DATES FOR EACH PERIOD INTO BOX A, MOST RECENT PERIOD FIRST. NOW ENTER BELOW THE TOTAL NUMBER OF SEPARATE PERIODS OF NON-EMPLOYMENT:	A. FROM	FROM
	MONTH DAY YEAR 19-24/	MONTH DAY YEAR 49-54/
	TO	TO
TOTAL # OF SEPARATE PERIODS: | | | 17-18/	MONTH DAY YEAR 25-30/	MONTH DAY YEAR 55-60/
FOR EACH SET OF DATES ENTERED IN A, ASK B-J:		
B. You said you were not working between (DATES OF FIRST/NEXT PERIOD). During how many of those weeks were you looking for work or on layoff from a job--during none, some, or all of those weeks?	B. None ... (GO TO I) .. 1	None ... (GO TO I) .. 1
	Some ... (GO TO C) .. 2	Some ... (GO TO C) .. 2
INTERVIEWER: FOLLOW SKIP INSTRUCTIONS AT B IN COLUMNS.	All .... (GO TO J) .. 3 31/	All .... (GO TO J) .. 3 61/
C. INTERVIEWER: USE WEEK **CALENDAR** TO DETERMINE WEEK # OF EACH DATE. CIRCLE WEEK #'S ON **CALENDAR**		
D. ENTER ENDING WEEK # IN BOX D HERE.	D. | | | | WEEK PERIOD ENDED 32-34/	| | | | WEEK PERIOD ENDED 62-64/
E. ENTER BEGINNING WEEK # IN BOX E HERE	E. - | | | | WEEK PERIOD BEGAN 35-37/	- | | | | WEEK PERIOD BEGAN 65-67/
F. SUBTRACT WEEK BEGAN FROM WEEK ENDED (D-E=F) AND ENTER THE DIFFERENCE HERE (# OF WEEKS IN GAP)	F. = | | | | # OF WEEKS 38-40/	= | | | | # OF WEEKS 68-70/
G. You were not working from (DATE) to (DATE). That would be about (# IN BOX F) weeks when you were not working. For how many of these weeks were you looking for work or on layoff from a job? ENTER IN BOX G HERE.	G. | | | | # OF WEEKS LOOKING OR ON LAYOFF 41-43/	| | | | # OF WEEKS LOOKING OR ON LAYOFF 71-73/
H. INTERVIEWER: SUBTRACT # OF WEEKS LOOKING OR ON LAYOFF FROM # OF WEEKS IN GAP PERIOD (F-G=H). ENTER DIFFERENCE IN BOX H HERE READ: That leaves (# IN H) weeks that you were not working or looking for work.	H. | | | | # OF WEEKS NOT LOOKING 44-46/	| | | | # OF WEEKS NOT LOOKING 74-76/
I. What would you say was the main reason that you were not looking for work during that period? RECORD VERBATIM AND ENTER CODE IN BOX I BELOW.	_____	_____
	_____	_____
	I. | | | REASON NOT LOOKING 47-48/	| | | REASON NOT LOOKING 77-78/

DID NOT WANT TO WORK ... 01
ILL, DISABLED, UNABLE TO WORK 02
FOR SCHOOL EMPLOYEES: SCHOOL WAS NOT IN SESSION FOR THIS PERIOD 03
ARMED FORCES 04
PREGNANCY 05
CHILD CARE PROBLEMS 06
PERSONAL/FAMILY REASONS 07
VACATION 08
LABOR DISPUTE/STRIKE 09
BELIEVED NO WORK AVAILABLE . 10
COULD NOT FIND WORK 11
IN SCHOOL 12
OTHER 13

J. INTERVIEWER: IF THERE ARE ANY ADDITIONAL PERIODS, GO BACK TO B FOR NEXT PERIOD. OTHERWISE, GO TO SECTION 8.

BEGIN DECK 20

BEGIN DECK 21

TO LEAST RECENT

PERIOD 3	PERIOD 4	PERIOD 5	PERIOD 6
FROM	FROM	FROM	FROM
MONTH DAY YEAR 10-15/	MONTH DAY YEAR 40-45/	MONTH DAY YEAR 10-15/	MONTH DAY YEAR 40-45/
TO	TO	TO	TO
MONTH DAY YEAR 16-21/	MONTH DAY YEAR 46-51/	MONTH DAY YEAR 16-21/	MONTH DAY YEAR 46-51/
None ... (GO TO I) .. 1	None ... (GO TO I) .. 1	None ... (GO TO I) .. 1	None ... (GO TO I) .. 1
Some ... (GO TO C) .. 2	Some ... (GO TO C) .. 2	Some ... (GO TO C) .. 2	Some ... (GO TO C) .. 2
All .... (GO TO J) .. 3 22/	All .... (GO TO J) .. 3 52/	All .... (GO TO J) .. 3 22/	All .... (GO TO J) .. 3 52/
WEEK PERIOD ENDED 23-25/	WEEK PERIOD ENDED 53-55/	WEEK PERIOD ENDED 23-25/	WEEK PERIOD ENDED 53-55/
- WEEK PERIOD BEGAN 26-28/	- WEEK PERIOD BEGAN 56-58/	- WEEK PERIOD BEGAN 26-28/	- WEEK PERIOD BEGAN 56-58/
= # OF WEEKS 29-31/	= # OF WEEKS 59-61/	= # OF WEEKS 29-31/	= # OF WEEKS 59-61/
# OF WEEKS LOOKING OR ON LAYOFF 32-34/	# OF WEEKS LOOKING OR ON LAYOFF 62-64/	# OF WEEKS LOOKING OR ON LAYOFF 32-34/	# OF WEEKS LOOKING OR ON LAYOFF 62-64/
# OF WEEKS NOT LOOKING 35-37/	# OF WEEKS NOT LOOKING 65-67/	# OF WEEKS NOT LOOKING 35-37/	# OF WEEKS NOT LOOKING 65-67/
REASON NOT LOOKING 38-39/	REASON NOT LOOKING 68-69/	REASON NOT LOOKING 38-39/	REASON NOT LOOKING 68-69/

SECTION 8: ON GOVERNMENT TRAINING

1. There are certain kinds of training programs sponsored by the government in which young people receive training or assistance in a workshop or a classroom to prepare them for jobs. Examples of these kinds of training or assistance include certain CETA, JTPA, OR TAA programs and the Job Corps, but there are others.

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2. INTERVIEWER: SEE **INFORMATION SHEET**, ITEM 7. IS A GOVERNMENT TRAINING PROGRAM FROM LAST YEAR'S INTERVIEW LISTED THERE?

YES ..... (READ A) 1 70/

NO ..... (GO TO Q. 3) 0

IF YES TO Q. 2, ASK A:

A. Our records show that at our last interview (DATE OF LAST INTERVIEW), you were receiving this kind of training at (NAME OF SCHOOL OR AGENCY FROM **INFORMATION SHEET**). We would like to ask some questions about your participation in this program since (DATE OF LAST INTERVIEW).
ENTER IN Q. 8 (ON NEXT PAGE) THE NAME OF THE SCHOOL OR AGENCY FROM ITEM 7 OF **INFORMATION SHEET.** THEN GO TO Q. 5

IF NO TO Q. 2, ASK Q. 3:

3. (Besides the jobs you already told me about,) Since (DATE OF LAST INTERVIEW), have you received training or assistance from any of these kinds of government-sponsored programs?

HAND CARD Q

Yes 1 71/

No ..... (**SKIP TO SECTION 9**) 0

---

4. Thinking of the (first/next) training program that you attended since (DATE OF LAST INTERVIEW), what is the name of the school or agency where you've received this training? RECORD IN Q. 8, NEXT PAGE, AND GO ON TO Q. 5.
(IF NECESSARY, USE A SECOND QUESTIONNAIRE.)

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5. What is the name of the government program that sponsors this training? RECORD IN Q. 9, NEXT PAGE, AND GO ON TO Q. 6.

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6. (Besides the job(s) you already told me about,) Since (DATE OF LAST INTERVIEW), have you received any other training or assistance [either from (NAME OF SCHOOL OR AGENCY FROM **INFORMATION SHEET**, ITEM 7) or] from any of these kinds of government-sponsored training programs?

HAND CARD Q

IF YES, GO BACK TO Q. 4
FOR THE NEXT PROGRAM 1 72/

IF NO, GO TO Q. 7 0

7. INTERVIEWER: IF THERE ARE ANY PROGRAMS ENTERED IN QS. 8 & 9 BELOW, ASK QS. 10-32 NOW. OTHERWISE, SKIP TO SECTION 9.

	COLUMN #1 BEGIN DECK 22	COLUMN #2
8. ENTER NAME OF SCHOOL OR AGENCY WHERE R RECEIVED TRAINING.	10-34/ _____	54-78/ _____
9. ENTER NAME OF THE GOVERNMENT PROGRAM THAT SPONSORS THIS TRAINING.	35-36/ _____	79-80/ _____
10. You told me that you received training or assistance at (ENTRY IN Q. 8) through the (ENTRY IN Q. 9).		BEGIN DECK 23
A. INTERVIEWER: WAS THIS TRAINING PROGRAM LISTED ON ITEM 7 OF **INFO SHEET?** (DID YOU ENTER IN Q. 8 FOR THIS PROGRAM THE NAME OF THE SCHOOL OR AGENCY FROM ITEM 7 OF INFO SHEET?)	37/ YES .. (ENTER THE DATE OF THE LAST INTERVIEW IN "B" BELOW AND GO TO Q. 11) ... 1 NO ... (ASK B) 0	10/ YES .. (ENTER THE DATE OF THE LAST INTERVIEW IN "B" BELOW AND GO TO Q. 11) ... 1 NO ... (ASK B) 0
B. IF NO TO A: When did you start participating in this program?	38-43/ |_|_|_|_|_|_| MONTH DAY YEAR	11-16/ |_|_|_|_|_|_| MONTH DAY YEAR
11. Are you currently participating in this program?	44/ Yes . (SKIP TO Q. 13) ..... 1 No 0	17/ Yes . (SKIP TO Q. 13) ..... 1 No 0
12. When did you stop participating in this program? PROBE FOR AND RECORD MONTH, DAY, AND YEAR.	45-50/ |_|_|_|_|_|_| MONTH DAY YEAR	18-23/ |_|_|_|_|_|_| MONTH DAY YEAR
13. For a variety of reasons, people often do not participate in their programs some of the time. Between (DATE IN Q. 10) and (now/DATE IN Q. 12), were there any periods of a full week or more during which you did not participate in this program?	51/ Yes ... (ASK A) ..... 1 No .. (GO TO Q. 14) .. 0	24/ Yes ... (ASK A) ..... 1 No .. (GO TO Q. 14) .. 0
A. IF YES: Between (DATE IN Q. 10) and (now/DATE IN Q. 12), for how many weeks, altogether, did you not participate in this program?	# WEEKS |_|_| 52-53/	# WEEKS |_|_| 25-26/

	COLUMN #1	COLUMN #2
14. How many hours a week (do/did) you usually spend in the program? ENTER # OF HOURS	# HOURS |__|__| 27-28/	# HOURS |__|__| 35-36/
15. How many hours a day (do/did) you usually spend in the program? ENTER # OF HOURS	# HOURS |__|__| 29-30/	# HOURS |__|__| 37-38/
16. A. As far as you know, (is/was) this training part of a CETA, JTPA, or TAA program?	31/ Yes ..... 1 No 0	39/ Yes ..... 1 No 0
B. As far as you know, (is/was) this training (also) part of a WIN program?	32/ Yes ..... 1 No 0	40/ Yes ..... 1 No 0
17. Why did you decide to enter this training program? RECORD VERBATIM. IF MORE THAN ONE REASON GIVEN, PROBE: What was the one main reason? CODE ONE ONLY.	_____ _____ _____ _____ 33-34/ TO GET MONEY ..... 01 TO GET A BETTER JOB THAN COULD GET ON MY OWN ..... 02 TO GET A JOB ..... 03 TO GET JOB TRAINING OR EXPERIENCE ..... 04 TO HAVE SOMETHING TO DO ..... 05 THE TRAINING SOUNDED INTERESTING ..... 06 OTHER (SPECIFY) ..... 07 _____	_____ _____ _____ _____ 41-42/ TO GET MONEY ..... 01 TO GET A BETTER JOB THAN COULD GET ON MY OWN ..... 02 TO GET A JOB ..... 03 TO GET JOB TRAINING OR EXPERIENCE ..... 04 TO HAVE SOMETHING TO DO ..... 05 THE TRAINING SOUNDED INTERESTING ..... 06 OTHER (SPECIFY) ..... 07 _____

	COLUMN #1 DECK 23	COLUMN #2
18. INTERVIEWER, IS R CURRENTLY PARTICIPATING IN THIS PROGRAM? ("YES" TO Q. 11)	43/ YES .(SKIP TO Q. 20) . 1 NO 0	49/ YES .(SKIP TO Q. 20) . 1 NO 0
19. Did you complete this training program or not?	44/ Completed this program (GO TO Q. 20) ..... 1 Did not complete this program . (ASK A) .. 0	50/ Completed this program (GO TO Q. 20) ..... 1 Did not complete this program . (ASK A) .. 0
A. IF CODE 0: Why did you leave this program? RECORD VERBATIM. IF MORE THAN ONE REASON GIVEN, PROBE: What was the main reason? CODE ONE ONLY.	_____ _____ _____ _____	_____ _____ _____ _____
	45-46/ EXPELLED FROM PROGRAM .. 01 QUIT BECAUSE FOUND A JOB ..... 02 TRANSFERRED TO ANOTHER PROGRAM ..... 03 DISSATISFIED WITH PAY .. 04 UNSATISFACTORY CONDITIONS ..... 05 LOST INTEREST ..... 06 TOO DIFFICULT ..... 07 PROBLEMS WITH TRANSPORTATION ..... 08 TOO MUCH TIME INVOLVED . 09 PREGNANCY ..... 10 OWN ILLNESS OR DISABILITY ..... 11 OTHER PERSONAL OR FAMILY REASONS ..... 12 MOVED ..... 13 OTHER (SPECIFY) ..... _____ 14	51-52/ EXPELLED FROM PROGRAM . 01 QUIT BECAUSE FOUND A JOB ..... 02 TRANSFERRED TO ANOTHER PROGRAM ..... 03 DISSATISFIED WITH PAY . 04 UNSATISFACTORY CONDITIONS ..... 05 LOST INTEREST ..... 06 TOO DIFFICULT ..... 07 PROBLEMS WITH TRANSPORTATON..... 08 TOO MUCH TIME INVOLVED. 09 PREGNANCY ..... 10 OWN ILLNESS OR DISABILITY ..... 11 OTHER PERSONAL OR FAMILY REASONS ..... 12 MOVED ..... 13 OTHER (SPECIFY) ..... _____ 14
20. We would like to know more about the kinds of services the program provided you. (First/Next) (does/did) this program provide you with ... (READ CATEGORIES A & B AND CODE "YES" OR "NO" FOR EACH)	Yes No	Yes No
A. Job search assistance?	1 0 47/	1 0 53/
B. Classroom training to prepare for a GED?	1 0 48/	1 0 54/

	COLUMN #1	COLUMN #2
21. (Does/did) this program provide you with other classroom training in reading, writing, or arithmetic?	55/ Yes .... (ASK A) ..... 1 No .. (GO TO Q. 22) .. 0	63/ Yes .....(ASK A) ..... 1 NO .. (GO TO Q. 22) .. 0
A. IF YES: Was that classroom training part of a program of English as a second language--that is, a program for people who grew up speaking a language other than English?	56/ Yes ..... 1 No 0	64/ Yes ..... 1 No 0
22. (Does/did) this program provide you with classroom training in other skills needed for certain types of jobs?	57/ Yes .... (ASK A) ..... 1 No .. (GO TO Q. 23) .. 0	65/ Yes .... (ASK A) ..... 1 No .. (GO TO Q. 23) .. 0
A. IF YES: What kind of job were you being trained for? RECORD VERBATIM.	58-60/ _____ _____ _____ _____	66-68/ _____ _____ _____ _____
23. INTERVIEWER: IS R CURRENTLY PARTICIPATING IN THIS PROGRAM? ("YES" TO Q.11)	61/ YES (SKIP TO Q.26) ... 1 NO .... (ASK Q.24) ... 0	69/ YES (SKIP TO Q.26) ... 1 NO .. (ASK Q.24) 0
24. Were you placed in a job as part of your training, for example; on-the-job training or work experience?	62/ Yes ..... 1 No 0	70/ Yes ..... 1 No 0

	COLUMN #1	COLUMN #2
25. After completion of training, were you placed in a job by this program?	71/ Yes ..... 1 No 0	79/ Yes ..... 1 No 0
26. (Does/did) this program provide you with (READ CATEGORIES AND CODE "YES" OR "NO" FOR EACH)		BEGIN DECK 24
	Yes / No	Yes / No
A. Extra help preparing for college?	1 / 0 / 72/	1 / 0 / 10/
B. Health care or medical services?	1 / 0 / 73/	1 / 0 / 11/
C. Childcare?	1 / 0 / 74/	1 / 0 / 12/
D. Transportation or bus tokens?	1 / 0 / 75/	1 / 0 / 13/
E. Lodging?	1 / 0 / 76/	1 / 0 / 14/
F. Meals?	1 / 0 / 77/	1 / 0 / 15/
27. (Does/did) this program provide you with any other kinds of services?	78/ Yes .... (ASK A) ..... 1 No .. (GO TO Q. 28) .. 0	16/ Yes .... (ASK A) ..... 1 No .. (GO TO Q. 28) .. 0
A. IF YES: What other kinds of services? RECORD VERBATIM.	_____ _____ _____	_____ _____ _____

	COLUMN #1	COLUMN #2
28. Besides any money you may (presently receive/ have received) through public assistance or Unemployment Compensation (do/while you were in the program, did) you receive any money for participating in this program?	17/ Yes .... (ASK A) ..... 1 No .. (GO TO Q. 29) .. 0	28/ Yes .... (ASK A) ..... 1 No .. (GO TO Q. 29) .. 0
A. IF YES: How much money (do/did) you usually receive for participating in this program? Please give me the amount you receive(d) before any deductions like taxes and social security (are/were) taken out. PROBE IF NECESARY: (Is/Was) that per hour, per day, per week, or what?	18-22/ 23-24/ ____, ____ . ____ DOLLARS CENTS	29-33/ 34-35/ ____, ____ . ____ DOLLARS CENTS
	25-26/ Per hour ..... 01 Per day ..... 02 Per week ..... 03 Bi-Weekly (every 2 weeks) ..... 04 Per month ..... 05 Per year ..... 06 OTHER (SPECIFY) _____ 07	36-37/ Per hour ..... 01 Per day ..... 02 Per week ..... 03 Bi-Weekly (every 2 weeks) ..... 04 Per month ..... 05 Per year ..... 06 OTHER (SPECIFY) _____ 07
29. How (does/did) the training or experience you received in this program affect your chances of getting a good job--do you feel that your chances of getting a good job (are/ were) improved or not improved?	27/ Improved ..... 1 Not improved 2	38/ Improved ..... 1 Not improved 2

	COLUMN #1	COLUMN #2
30. INTERVIEWER: SEE ROW B ON **CALENDAR.** HAS R HAD A JOB SINCE LEAVING THIS PROGRAM?	39/ YES .. (ASK Q. 31) ... 1 NO . (SKIP TO Q. 32) . 0	43/ YES ..(ASK Q. 31) .... 1 NO . (SKIP TO Q. 32) . 0
31. After you left the program, did the training or experience you received in this program help you or not help you in performing any job you have held?	40/ Helped ..... 1 Did not help 2	44/ Helped ..... 1 Did not help 2
32. Thinking back over your entire experience in this program, how satisfied or dissatisfied are you with it overall--very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?	41/ Very satisfied ..... 1 Somewhat satisfied ... 2 Somewhat dissatisfied. 3 Very dissatisfied 4	45/ Very satisfied ..... 1 Somewhat satisfied ... 2 Somewhat dissatisfied. 3 Very dissatisfied 4
33. INTERVIEWER: ARE THERE ANY ADDITIONAL PROGRAMS RECORDED IN COLUMN HEADINGS (Qs 8 AND 9) NOT YET ASKED ABOUT?	42/ YES .. (RE-ASK Q.10-33 FOR THE NEXT PROGRAM ..... 1 NO ... (**GO TO SECTION 9**) ... 0	46/ YES .. (USING THE SECOND QUESTIONNAIRE, ASK Q.10-33 FOR THE NEXT PROGRAM ..... 1 NO ... (**GO TO SECTION 9**) ... 0

SECTION 9: OTHER TRAINING

1. Excluding regular schooling, military training, and government training we have already talked about, I would now like to ask you about other types of schooling and training you may have had.

---

2. INTERVIEWER: SEE **INFORMATION SHEET**, ITEM 8. IS AN "OTHER TRAINING PROGRAM" FROM LAST YEAR'S INTERVIEW LISTED THERE?

YES ..... (ASK Q. 3) 1 47/

NO ..... (GO TO Q. 4) 0

IF YES TO Q. 2, ASK Q. 3:

3. A. INTERVIEWER: CODE BELOW EACH TYPE OF TRAINING AGENCY FROM **INFORMATION SHEET**, ITEM 8.

	1st PROGRAM		2nd PROGRAM	
1) BUSINESS COLLEGE	 01	48-49/	 01	57-58/
2) A NURSE'S PROGRAM	 02		 02	
3) AN APPRENTICESHIP PROGRAM	 03		 03	
4) A VOCATIONAL OR TECHNICAL INSTITUTE	 04		 04	
5) BARBER OR BEAUTY SCHOOL	 05		 05	
6) FLIGHT SCHOOL	 06		 06	
7) A CORRESPONDENCE COURSE	 07		 07	
8) COMPANY TRAINING	 08		 08	
9) OTHER (SPECIFY) _____	 09		 09	

FOR EACH TYPE OF TRAINING AGENCY IN A, ASK B-Q.

B. Our records show that on our last interview on (DATE OF LAST INTERVIEW), you were receiving training at (TYPE OF TRAINING AGENCY). We would (also) like to ask you a few questions about that training. First, what job were you being trained for?

1st PROGRAM		2nd PROGRAM	
_____	50-52/	_____	59-61/
_____	53-56/	_____	62-65/

C. When did you finish or leave the training?

1st PROGRAM	2nd PROGRAM
| | | | | MONTH YEAR	| | | | | MONTH YEAR
OR	OR
STILL ENROLLED (GO TO E) 0001	STILL ENROLLED (GO TO E) 0001

3. (continued)

	1st PROGRAM		2nd PROGRAM	
D. Did you complete this training or not?				
Completed training	 1	66/	 1	77/
Did not complete training	 0		 0	
E. How many hours per week (did/do) you usually spend ...				
IF APPRENTICESHIP: in all your apprenticeship activities?				
IF CORRESPONDENCE COURSE: working on these materials?				
ALL OTHERS: in this training?				
ENTER HOURS/WEEK:	|_|_|	67-68/	|_|_|	78-79/
				BEGIN DECK 25
F. Were you employed at the time that you enrolled in this training program? (MILITARY DUTY IS CONSIDERED EMPLOYER HERE.)	Yes .. (SKIP TO H) . 1 No 0	69/	Yes .. (SKIP TO H) . 1 No 0	10/
G. Did you enroll in training as a (JOB IN B) to qualify for a specific job at a specific firm?	Yes ...(SKIP TO M).. 1 No ....(SKIP TO M).. 0	70/	Yes ...(SKIP TO M).. 1 No ....(SKIP TO M).. 0	11/
IF EMPLOYED AT TIME OF ENROLLMENT ASK H:				
H. Did you enroll in this training because your employer encouraged you or required it?	Yes ..... 1 No 0	71/	Yes ..... 1 No 0	12/
I. Was this training done at work during regular working hours?	Yes ..... 1 No 0	72/	Yes ..... 1 No 0	13/
J. Was this training done on company property?	Yes ..... 1 No 0	73/	Yes ..... 1 No 0	14/
K. Did you enroll in training as a (JOB IN B) to qualify for a specific job at a specific firm?	Yes ..... 1 No .. (SKIP TO M) .. 0	74/	Yes ..... 1 No .. (SKIP TO M) .. 0	15/
L. Was this with your employer at the time?	Yes ..... 1 No 0	75/	Yes ..... 1 No 0	16/
M. Did anyone (else) encourage you to enroll in this training?	Yes ..... 1 No .. (SKIP TO O) .. 0	76/	Yes ..... 1 No .. (SKIP TO O) .. 0	17/

(Continued)

N. Who encouraged you to enroll in this training? CODE ALL THAT APPLY.

PROBE: Did anyone else encourage you to enroll in this training?

	1st PROGRAM		2nd PROGRAM	
Friend	01	18-19/	01	57-58/
Relative ..	02	20-21/	02	59-60/
Former employer .	03	22-23/	03	61-62/
Prospective employer .	04	24-25/	04	63-64/
Job counselor.	05	26-27/	05	65-66/
Teacher ...	06	28-29/	06	67-68/
Other (SPECIFY).	07	30-31/	07	69-70/
_____			_____	

O. What was your main reason for enrolling in training as a (JOB IN B)?

Jobs are plentiful.	1	32/	1	71/
Pay is high	2		2	
Program sounded interesting	3		3	
Related to job at the time	4		4	
Other (SPECIFY) _____	5		5	

P. Where did you get the money to pay for this training? WRITE VERBATIM. CODE ALL THAT APPLY.

_____

_____

Employer lent it ..	01	33-34/	01	72-73/
Employer gave it ..	02	35-36/	02	74-75/
Friends, relatives gave it	03	37-38/	03	76-77/
Friends, relatives lent it	04	39-40/	04	78-79/
Lent by Program	05	41-42/	05	BEGIN DECK 26 10-11/
Government grant	06	43-44/	06	12-13/
Government loan	07	45-46/	07	14-15/
Bank loan	08	47-48/	08	16-17/
Own money	09	49-50/	09	18-19/
No money needed ...	10	51-52/	10	20-21/
Other (SPECIFY) _____	11	53-54/	11	22-23/

Q. IF MORE THAN ONE CODE: CIRCLED, ASK: Which source of money was most important?

ENTER CODE IN BOXES. [ ][ ] 55-56/ [ ][ ] 24-25/

(Besides the training we've already talked about) Since (DATE OF LAST INTERVIEW), have you received training from any (other) source, such as the kinds of places listed on this card? For example, training in a business college, nurses program, an apprenticeship program, a vocational-technical institute, or any of these other kinds of sources?

HAND CARD R

Yes 1 26/

No .... (SKIP TO SECTION 10) 0

Did you receive training from any of these sources for one month or more?

Yes 1 27/

No .... (SKIP TO SECTION 10) 0

Now I would like to ask you some questions about each kind of training in which you were enrolled for at least a month since (DATE OF LAST INTERVIEW). Let's begin with the first program in which you were enrolled since (DATE OF LAST INTERVIEW).

	1st PROGRAM		2nd PROGRAM		3rd PROGRAM	
What job were you being trained for?	_____	28-30/	_____	33-35/	_____	38-40/
HAND CARD R. Which category on this card best describes where you received this training?		31-32/		36-37/		41-42/
1) Business college	.....	01	.....	01	.....	01
2) A nurses program	.....	02	.....	02	.....	02
3) An apprenticeship program	.....	03	.....	03	.....	03
4) A vocational or technical institute	.....	04	.....	04	.....	04
5) Barber or beauty school	.....	05	.....	05	.....	05
6) Flight school	.....	06	.....	06	.....	06
7) A correspondence course	.....	07	.....	07	.....	07
8) Company training	.....	08	.....	08	.....	08
9) Other (SPECIFY)	.....	09	.....	09	.....	09

6. (continued)

	1st PROGRAM	2nd PROGRAM	3rd PROGRAM
C. When did you start the training?	43-46/ Month Year	58-61/ Month Year	73-76/ Month Year
D. When did you finish or leave the training?	47-50/ Month Year	62-65/ Month Year	77-80/ Month Year
	OR	OR	OR
	STILL ENROLLED (GO TO F) 0001	STILL ENROLLED (GO TO F) 0001	STILL ENROLLED (GO TO F) 0001
			BEGIN DECK 27
E. Did you complete this training or not?	51/	66/	10/
Completed training	 1	 1	 1
Did not complete training?	 0	 0	 0
F. How many hours per week (did/do) you usually spend . . . IF APPRENTICESHIP: in all your apprenticeship activities? IF CORRESPONDENCE COURSE: working on these materials? ALL OTHERS: in this training?			
ENTER HOURS/WEEK:	52-53/	67-68/	11-12/
G. Were you employed at the time you enrolled in this training? (MILITARY DUTY IS CONSIDERED EMPLOYER HERE)	54/ Yes . (SKIP TO I) . 1 No 0	69/ Yes . (SKIP TO I) . 1 No 0	13/ Yes . (SKIP TO I) . 1 No 0
H. Did you enroll in training as a (JOB IN A) to qualify for a specific job at a specific firm?	55/ Yes ..(SKIP TO N).. 1 No ...(SKIP TO N).. 0	70/ Yes ..(SKIP TO N).. 1 No ...(SKIP TO N).. 0	14/ Yes ..(SKIP TO N).. 1 No ...(SKIP TO N).. 0
I. Did you enroll in this training because your employer encouraged you or required it?	56/ Yes ..... 1 No 0	71/ Yes ..... 1 No 0	15/ Yes ..... 1 No 0
J. Was this training done at work during regular working hours?	57/ Yes ..... 1 No 0	72/ Yes ..... 1 No 0	16/ Yes ..... 1 No 0

6. (continued)

	1st PROGRAM	2nd PROGRAM	3rd PROGRAM
K. Was this training done on company property?	17/ Yes ..... 1 No 0	36/ Yes ..... 1 No 0	55/ Yes ..... 1 No 0
L. Did you enroll in training as a (JOB IN A) to qualify for a specific job at a specific firm?	18/ Yes ... (ASK M) ... 1 No .. (SKIP TO N) . 0	37/ Yes ... (ASK M) ... 1 No .. (SKIP TO N) . 0	56/ Yes ... (ASK M) ... 1 No .. (SKIP TO N) . 0
M. Was this with your employer at the time?	19/ Yes ..... 1 No 0	38/ Yes ..... 1 No 0	57/ Yes ..... 1 No 0
N. Did anyone (else) encourage you to enroll in this training?	20/ Yes ... (ASK O) ... 1 No .. (SKIP TO P) . 0	39/ Yes ... (ASK O) ... 1 No .. (SKIP TO P) . 0	58/ Yes ... (ASK O) ... 1 No .. (SKIP TO P) . 0
O. Who encouraged you to enroll in this training? CODE ALL THAT APPLY. PROBE: Did anyone else enourage you to enroll in this training?	Friend ..... 01 21-22/ Relative ... 02 23-24/ Former employer .. 03 25-26/ Prospective employer .. 04 27-28/ Job counselor . 05 29-30/ Teacher .... 06 31-32/ Other (SPECIFY) . 07 33-34/ _____	Friend ..... 01 40-41/ Relative ... 02 42-43/ Former employer .. 03 44-45/ Prospective employer .. 04 46-47/ Job counselor . 05 48-49/ Teacher .... 06 50-51/ Other (SPECIFY) . 07 52-53/ _____	Friend ..... 01 59-60/ Relative ... 02 61-62/ Former employer .. 03 63-64/ Prospective employer .. 04 65-66/ Job counselor . 05 67-68/ Teacher .... 06 69-70/ Other (SPECIFY) . 07 71-72/ _____
P. What was your main reason for enrolling in training as a (JOB IN A)?	35/ Jobs are plentiful. 1 Pay is high ..... 2 Program sounded interesting ..... 3 Related to job at the time ..... 4 Other (SPECIFY) ... 5 _____	54/ Jobs are plentiful. 1 Pay is high ..... 2 Program sounded interesting ..... 3 Related to job at the time ..... 4 Other (SPECIFY) ... 5 _____	73/ Jobs are plentiful. 1 Pay is high ..... 2 Program sounded interesting ..... 3 Related to job at the time ..... 4 Other (SPECIFY) ... 5 _____

6. (continued)

	1st PROGRAM	2nd PROGRAM	3rd PROGRAM
Q. Where did you get the money to pay for this training? WRITE VERBATIM. CODE ALL THAT APPLY.			
	Employer lent it. 01 74-75/	..... 01 29-30/	..... 01 54-55/
	Employer gave it. 02 76-77/	..... 02 31-32/	..... 02 56-57/
	Friends, relatives gave it 03 78-79/	..... 03 33-34/	..... 03 58-59/
	Friends, relatives lent it ..... 04 10-11/ (BEGIN DECK 28)	..... 04 35-36/	..... 04 60-61/
	Lent by program . 05 12-13/	..... 05 37-38/	..... 05 62-63/
	Government grant. 06 14-15/	..... 06 39-40/	..... 06 64-65/
	Government loan . 07 16-17/	..... 07 41-42/	..... 07 66-67/
	Bank loan 08 18-19/	..... 08 43-44/	..... 08 68-69/
	Own money 09 20-21/	..... 09 45-46/	..... 09 70-71/
	No money needed . 10 22-23/	..... 10 47-48/	..... 10 72-73/
	OTHER (SPECIFY) 11 24-25/	OTHER (SPECIFY) 11 49-50/	OTHER (SPECIFY) 11 74-75/
R. IF MORE THAN ONE CODE CIRCLED, ASK: Which source of money was most important? ENTER CODE IN BOXES	|_|_| 26-27/	|_|_| 51-52/	|_|_| 76-77/
HAND CARD R			
S. Since (DATE OF LAST INTERVIEW) have you received for at least one month any kind of training from another of these sources?	28/	53/	78/
	Yes ..(GO BACK TO Q. 6A ABOVE).. 1	Yes ..(GO BACK TO Q. 6A ABOVE).. 1	Yes ..(GO TO A NEW QUEX Q. 6A) ... 1
	No ...(GO TO SECTION 10).. 0	No ...(GO TO SECTION 10).. 0	No ..(GO TO SECTION 10 0

SECTION 10: FERTILITY

1. INTERVIEWER: SEE **INFORMATION SHEET.** WAS R INTERVIEWED IN ROUND V--1983?

YES ..... (READ A AND B) 1 10/

NO ..... (READ A AND B) 0

A. In order to understand the behavior of young people today and to make adequate plans for schools, housing, hospitals, medical care, and other public services, information is needed on the number of children people plan to have, on medical problems associated with having babies, and on different family planning methods.

So, we are asking some questions on these topics again this year. We know that some of these questions may not apply to you, but we need to ask the same questions of all the young people we are interviewing to be sure we have complete information from all our respondents.

B. Our records from our last interview show that you had [(given birth to) (NUMBER OF CHILDREN FROM **INFORMATION SHEET** ITEM 9) children of your own as of (DATE OF LAST INTERVIEW). Is that correct?

Yes ..... (GO TO Q. 2) 1 11/

No ..... (ASK C) 0

C. How many children (had you given birth to/have you had) as of (DATE OF LAST INTERVIEW), not counting any babies who were dead at birth?

ENTER NUMBER OF CHILDREN: |_|_|_| 12-13/
AND CORRECT **INFO SHEET**
ITEM NUMBER 9.

---

2. INTERVIEWER: HAVE CHILDREN BEEN ENTERED ON **INFORMATION SHEET** ITEM 9?

YES ..... (ASK A) 1 14/

NO ..... (GO TO Q. 4) 0

A. I'd like to read (your/each) child's (name), sex, and birthdate from our last interview to check our records. Your (first/next) child is (READ NAME, SEX AND BIRTHDATE OF CHILD FROM **INFORMATION SHEET** ITEM 9). Is that correct?

Yes ... (GO ON TO NEXT CHILD,
THEN GO TO B) 1 15/

No ..(CORRECT **INFO SHEET** AS NECESSARY
AND THEN GO ON TO NEXT CHILD).. 0

B. INTERVIEWER: WHEN INFORMATION ABOUT ALL CHILDREN HAS BEEN VERIFIED OR CORRECTED, GO ON TO Q.3

INTERVIEWER: ASK Q.3 FOR EACH CHILD LISTED AT ITEM # 9 ON **INFORMATION SHEET.** BEGIN WITH FIRST CHILD. IF CHILD'S NAME IS NOT ON **INFO SHEET,** ASK FOR NAME AND ENTER IT ON **INFORMATION SHEET.**

3. Where does (NAME OF 1ST CHILD/NAME OF 2ND CHILD, ETC.) usually live?	FIRST CHILD 16-17/ ID: |__|__|	SECOND CHILD 24-25/ ID: |__|__|	THIRD CHILD 32-33/ ID: |__|__|
	NAME 18-19/	NAME 26-27/	NAME 34-35/
1) IN THIS HOUSEHOLD	01	01	01
NOT IN THIS HOUSEHOLD			
2) WITH (HIS/HER) (FATHER/MOTHER)	02	02	02
3) W/OTHER RELATIVES(S) (SPECIFY) _____	03	03	03
4) WITH FOSTER CARE	04	04	04
5) WITH ADOPTIVE PARENTS	05	05	05
6) LONG TERM CARE INSTITUTION	06	06	06
7) AWAY AT SCHOOL	07	07	07
8) DECEASED (ASK a)	08	(ASK a) 08	(ASK a) 08
9) OTHER (SPECIFY) _____	09	09	09
a. IF DECEASED, ASK: When did (CHILD) die?	MONTH |__|__| 20-21/ YEAR |__|__| 22-23/	MONTH |__|__| 28-29/ YEAR |__|__| 30-31/	MONTH |__|__| 36-37/ YEAR |__|__| 38-39/

INTERVIEWER: IF MORE THAN 3 CHILDREN, CONTINUE AT Q.3A. OTHERS GO TO Q.4

3A. Where does (NAME OF FOURTH CHILD, ETC) usually live?	FOURTH CHILD 40-41/ ID: |__|__|	FIFTH CHILD 48-49/ ID: |__|__|	SIXTH CHILD 56-57/ ID: |__|__|
	NAME 42-43/	NAME 50-51/	NAME 58-59/
1) IN THIS HOUSEHOLD	01	01	01
NOT IN THIS HOUSEHOLD			
2) WITH (HIS/HER) (FATHER/MOTHER)	02	02	02
3) W/OTHER RELATIVES(S) (SPECIFY) _____	03	03	03
4) WITH FOSTER CARE	04	04	04
5) WITH ADOPTIVE PARENTS	05	05	05
6) LONG TERM CARE INSTITUTION	06	06	06
7) AWAY AT SCHOOL	07	07	07
8) DECEASED (ASK a)	08	(ASK a) 08	(ASK a) 08
9) OTHER (SPECIFY) _____	09	09	09
a. IF DECEASED, ASK: When did (CHILD) die?	MONTH |__|__| 44-45/ YEAR |__|__| 46-47/	MONTH |__|__| 52-53/ YEAR |__|__| 54-55/	MONTH |__|__| 60-61/ YEAR |__|__| 62-63/

INTERVIEWER: IF MORE THAN 6 CHILDREN, CONTINUE AT Q.3B. OTHERS GO TO Q.4

3B. Where does (NAME OF SEVENTH CHILD, ETC) usually live?

	SEVENTH CHILD	EIGHTH CHILD
	64-65/	72-73/
	ID: |__|__|	ID: |__|__|
	NAME	NAME
	66-67/	74-75/
1) IN THIS HOUSEHOLD	01	01
NOT IN THIS HOUSEHOLD		
2) WITH (HIS/HER) (FATHER/MOTHER)	02	02
3) W/OTHER RELATIVES(S) (SPECIFY) _____	03	03
4) WITH FOSTER CARE	04	04
5) WITH ADOPTIVE PARENTS	05	05
6) LONG TERM CARE INSTITUTION	06	06
7) AWAY AT SCHOOL	07	07
8) DECEASED (ASK a)	08	(ASK a) 08
9) OTHER (SPECIFY) _____	09	09

a. IF DECEASED, ASK: When did (CHILD) die?

	SEVENTH CHILD	EIGHTH CHILD
MONTH	|__|__| 68-69/	|__|__| 76-77/
YEAR	|__|__| 70-71/	|__|__| 78-79/

GO TO Q.4

4. INTERVIEWER WHAT SEX IS THE RESPONDENT? BEGIN DECK 30

MALE 1 10/

FEMALE ..... (SKIP TO Q.26) 2

ASK MEN ONLY:

5. Please tell me if you have had any children since (DATE OF LAST INTERVIEW)?

Yes ..... (ASK A) 1 11/

No ..... (ASK B) 0

A. How many children have you had since (DATE OF LAST INTERVIEW), not counting any babies who were dead at birth?

ENTER NUMBER OF CHILDREN: |__|__| (GO TO Q.6) 12-13/

B. INTERVIEWER: HAS R EVER HAD ANY CHILDREN?

YES ..... (SKIP TO Q.10) 1 14/

NO ..... (SKIP TO Q.12) 0

	FIRST CHILD	SECOND CHILD	THIRD CHILD
6. Since (DATE OF LAST INTERVIEW), when was your (first, second, ETC.) child born?	ID: |___| 15-16/	ID: |___| 42-43/	ID: |___| 69-70/
INTERVIEWER: GIVE ID # CONSECUTIVE TO NUMBERS ON **INFORMATION SHEET.**	MO DA YR 17-22/	MO DA YR 44-49/	MO DA YR 71-76/
7. Was the baby a boy or a girl?	23/ Boy ..... 1 Girl 2	50/ Boy ..... 1 Girl 2	77/ Boy ..... 1 Girl ..... 2 BEGIN DECK 31
8. What did you name the baby?	NAME 24-35/	NAME 51-62/	NAME 10-21/
INTERVIEWER: ALSO ENTER NAME AND ID # ON **INFORMATION SHEET**			
9. Where does (CHILD) usually live?	36-37/	63-64/	22-23/
1) IN THIS HOUSEHOLD	 01	01	01
NOT IN THIS HOUSEHOLD			
2) WITH (HIS/HER) (FATHER/MOTHER)	 02	02	02
3) W/OTHER RELATIVES(S) (SPECIFY) _____	03	_____ 03	_____ 03
4) WITH FOSTER CARE	 04	04	04
5) WITH ADOPTIVE PARENTS	 05	05	05
6) LONG TERM CARE INSTITUTION	 06	06	06
7) AWAY AT SCHOOL	 07	07	07
8) DECEASED ..... (ASK A)	 08	(ASK A) .08	(ASK A) .08
9) OTHER (SPECIFY) ..... _____	09	_____ 09	_____ 09
A. IF DECEASED, ASK: When did (CHILD) die?	MONTH |___| 38-39/ YEAR |___| 40-41/	MONTH |___| 65-66/ YEAR |___| 67-68/	MONTH |___| 24-25/ YEAR |___| 26-27/

REPEAT QS. 6-9 FOR EACH LIVE BIRTH SINCE DATE OF LAST INTERVIEW, THEN GO TO Q. 10.

10. INTERVIEWER: DO ANY OF R'S OWN CHILDREN NOT LIVE IN THE HOUSEHOLD? (DO NOT COUNT DECEASED CHILDREN) (ARE THERE ANY CHILDREN LISTED ON THE **INFORMATION SHEET** WHO ARE NOT LISTED ON THE HOUSEHOLD ENUMERATION OF THE FACE SHEET)?

YES ..... (ASK A-F) 1 28/

NO ..... (GO TO Q.11) 0

A. INTERVIEWER: ENTER NAME OF OLDEST CHILD, NEXT OLDEST CHILD, ETC. NOT LIVING IN HOUSEHOLD HERE: (USE ANOTHER QUESTIONNAIRE IF MORE THAN 3 CHILDREN NOT IN HOUSEHOLD).

	FIRST CHILD NOT IN HH	SECOND CHILD	THIRD CHILD
	ID: |_|_|_| 29-30/	ID: |_|_|_| 36-37/	ID: |_|_|_| 43-44/
	NAME	NAME	NAME

B. INTERVIEWER: ASK C-F FOR EACH CHILD NOT IN THIS HOUSEHOLD. START WITH OLDEST CHILD.

C. INTERVIEWER: READ INTRODUCTORY STATEMENT FOR OLDEST CHILD ONLY:

Now I would like to ask you some questions about your child/children) who (is/are) not living in this household.

HAND CARD S	About how far from you does (CHILD'S NAME) live? Is it ...	31/ within 1 mile ..... 1 1-10 miles ..... 2 11-100 miles ..... 3 more than 100 miles.. 4	38/ ..... 1 ..... 2 ..... 3 4	45/ ..... 1 ..... 2 ..... 3 4
HAND CARD T	D. In the past 12 months [or since (CHILD) has not been living with you, whichever is most recent] about how often have you seen (CHILD)?	32/ almost every day .... 1 2-3 times a week .... 2 about once a week ... 3 1-2 times a month ... 4 once every 2 or 3 months..... 5 once in the past 12 months ..... 6 never ..(SKIP TO F).. 0	39/ ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6 ....(SKIP TO F)..... 0	46/ ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6 ....(SKIP TO F).... 0
	E. How long do these visits usually last? RECORD IN DAYS.	33-34/ less than 1 day.....00 |_|_|_| # DAYS	40-41/ less than 1 day.....00 |_|_|_| # DAYS	47-48/ less than 1 day ...00 |_|_|_| # DAYS
	F. INTERVIEWER: IS THERE A (2ND/ 3RD, ETC.) CHILD)?	35/ YES ...(RE-ASK C-F FOR NEXT OLDEST CHILD) ..... 1 NO ...(GO TO Q.11)... 0	42/ ..... 1 ....(GO TO Q.11).... 0	49/ (GO TO NEW QUEX, Q.10C) .... 1 ....(GO TO Q.11)... 0

11. INTERVIEWER DO ANY OF R'S OWN CHILDREN LIVE IN THIS HOUSEHOLD (ARE ANY CHILDREN LISTED ON THE INFORMATION SHEET AND ON THE HOUSEHOLD ENUMERATION OF THE **FACE SHEET**)?

YES ..... (GO TO A) 1 50/

NO ..... (GO TO Q.12) 0

A. INTERVIEWER: ENTER NAME OF OLDEST CHILD, NEXT OLDEST CHILD, ETC. LIVING IN THIS HOUSEHOLD HERE.

	FIRST CHILD IN HH	SECOND CHILD	THIRD CHILD
	ID: |__|__| 51-52/	ID: |__|__| 60-61/	ID: |__|__| 69-70/
	NAME	NAME	NAME

B. INTERVIEWER: ASK Q.C FOR EACH CHILD LIVING IN THIS HOUSEHOLD. START WITH OLDEST CHILD.

C.	Does (OLDEST CHILD/NEXT OLDEST CHILD)'s mother live in this household?	Yes (RE-ASK C FOR NEXT CHILD. SKIP TO Q.12) 53/ ..... 1 No ....(ASK D-H)..... 0	WHEN "YES" IS CODED 62/ ..... 1 No ...(ASK D-H)..... 0	FOR LAST CHILD, 71/ ..... 1 No ...(ASK D-H).... 0
D.	Is (CHILD)'s mother living?	54/ Yes ... (ASK E) ..... 1 No ..(ASK C FOR NEXT CHILD OR SKIP TO Q. 12) 0	63/ Yes ... (ASK E) .... 1 No ..(ASK C FOR NEXT CHILD OR SKIP TO Q.12) 0	72/ Yes ... (ASK E) ... 1 No ..(ASK C FOR NEXT CHILD OR SKIP TO Q.12) 0
E.	About how far from you does (CHILD'S) mother live? Is it . . . (HAND CARD S)	55/ within 1 mile ..... 1 1-10 miles ..... 2 11-100 miles ..... 3 more than 100 miles.. 4	64/ ..... 1 ..... 2 ..... 3 4	73/ ..... 1 ..... 2 ..... 3 4
F.	In the past 12 months (or since (CHILD) has been separated from (his/her) mother whichever is most recent) about how often has (CHILD) seen (his/her) mother? (HAND CARD T)	56/ almost every day .... 1 2-3 times a week .... 2 about once a week ... 3 1-2 times a month ... 4 once every 2 or 3 months..... 5 once in the past 12 months ..... 6 never (SKIP TO H).... 0	65/ ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6 ....(SKIP TO H)..... 0	74/ ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6 ...(SKIP TO H)..... 0
G.	How long do these visits usually last? RECORD IN DAYS.	57-58/ less than 1 day .... 00 |__|__| # DAYS	66-67/ less than 1 day ... 00 |__|__| # DAYS	75-76/ less than 1 day .. 00 |__|__| # DAYS
H.	INTERVIEWER: IS THERE A (2ND/3RD, ETC. CHILD LISTED?	YES ..(RE-ASK C-H FOR NEXT OLDEST CHILD) .... 1 NO ...(GO TO Q.12)... 0	59/ 68/ .....(C-H)..... 1 .....(Q.12)..... 0	77/ .....(C-H)..... 1 .....(Q.12)..... 0

. (continued)

FOURTH CHILD	FIFTH CHILD	SIXTH CHILD	SEVENTH CHILD	EIGHTH CHILD
ID: |_|_| 78-79/	ID: |_|_| 17-18/	ID: |_|_| 26-27/	ID: |_|_| 35-36/	ID: |_|_| 44-45/
NAME	NAME	NAME	NAME	NAME
BEGIN DECK 32				
10/	19/	28/	37/	46/
..... 1	 1	 1	 1	 1
...(ASK Q.D-H)... 0	No ....(ASK Q.D-H)... 0	No ....(ASK Q.D-H)... 0	No ...(ASK Q.D-H).... 0	No ...(ASK Q.D-H).... 0
11/	20/	29/	38/	47/
s ... (ASK E) 1	Yes ... (ASK E) 1	Yes ... (ASK E) 1	Yes ... (ASK E) 1	Yes ... (ASK E) 1
(ASK C FOR NEXT CHILD OR SKIP TO Q.12) 0	No (ASK C FOR NEXT CHILD OR SKIP TO Q.12) 0	No ..(ASK C FOR NEXT CHILD OR SKIP TO Q. 12) 0	No ..(ASK C FOR NEXT CHILD OR SKIP TO Q.12) 0	No ..(ASK C FOR NEXT CHILD OR SKIP TO Q.12) 0
12/	21/	30/	39/	48/
thin 1 mile 1	 1	 1	 1	 1
10 miles 2	 2	 2	 2	 2
-100 miles 3	 3	 3	 3	 3
e than 100 miles. 4	 4	 4	 4	 4
13/	22/	31/	40/	49/
most every day ... 1	 1	 1	 1	 1
5 times a week ... 2	 2	 2	 2	 2
out once a week .. 3	 3	 3	 3	 3
2 times a month .. 4	 4	 4	 4	 4
e every 2 or 3 months..... 5	 5	 5	 5	 5
e in the past 12 months 6	 6	 6	 6	 6
er (SKIP TO Q.H). 0	....(SKIP TO Q.H).... 0	...(SKIP TO Q.H)..... 0	...(SKIP TO Q.H)..... 0	...(SKIP TO Q.H)..... 0
14-15/	23-24/	32-33/	41-42/	50-51/
ss than 1 day ... 00	less than 1 day 00	less than 1 day 00	less than 1 day 00	less than 1 day 00
|_|_|_| # DAYS	|_|_|_| # DAYS	|_|_|_| # DAYS	|_|_|_| # DAYS	|_|_|_| # DAYS
5 (RE-ASK C-H FOR NEXT OLDEST CHILD 1 16/	25/	34/	43/	52/
	.....(C-H)..... 1	.....(C-H)..... 1	.....(C-H)..... 1	.....(Q.12)..... 1
..(GO TO Q.12)... 0	.....(Q.12)..... 0	.....(Q.12)..... 0	.....(Q.12)..... 0	.....(Q.12)..... 0

12. Altogether, how many (more) children do you expect to have?

(INCLUDE ANY CURRENT PREGNANCIES)

ENTER NUMBER OF CHILDREN: |__|__| 53-54/
OR
NONE ... (SKIP TO Q. 14) 00

---

13. In how many months or years do you expect to have your (first/next) child?

ENTER NUMBER OF MONTHS: |__|__| 55-56/
OR
NUMBER OF YEARS: |__|__| 57-58/

---

14. INTERVIEWER: HAS RESPONDENT HAD ANY CHILDREN SINCE DATE OF LAST INTERVIEW (IS Q. 5 CODED "YES") OR IS R EXPECTING A CHILD (IS NUMBER OF MONTHS IN Q. 13 LESS THAN "09")?

YES ..... (ASK A) 1 59/
NO ..... (GO TO Q. 15) 0

A. When your (partner/spouse) became pregnant with (MOST RECENT CHILD) were you and she trying to have a baby or trying not to have a baby? (CODE MALE'S INTENTION IF THERE WAS DISAGREEMENT BETWEEN MALE AND PARTNER.)

Trying to have a baby 1 60/
Trying not to have a baby 2
Neither 3

---

15. INTERVIEWER: SEE **INFORMATION SHEET** ITEM NUMBER 10. FOLLOW SKIP INSTRUCTIONS RECORDED THERE.

---

16. INTERVIEWER: HAS RESPONDENT EVER HAD ANY CHILDREN (SEE **INFO SHEET**, ITEM 9 AND Q.5) OR IS R EXPECTING A CHILD? (NUMBER OF MONTHS IN Q.13 LESS THAN '09'?)

YES ..... (SKIP TO Q.18) 1 61/
NO ..... (GO TO Q.17)..... 0

---

17. Have you ever had sexual intercourse?

Yes .....(GO TO Q.18)..... 1 62/
No ..... (SKIP TO Q.24) 0

---

18. How old were you when you first had sexual intercourse?

ENTER AGE |__|__| 63-64/

19. How many times did you have sexual intercourse in the past month?

ENTER NUMBER: |__|__| 65-66/

Never ..... (SKIP TO Q.24) 00

---

20. INTERVIEWER: IS PARTNER CURRENTLY PREGNANT? (IS Q.13 CODED LESS THAN 09 MONTHS?)

YES ..... (SKIP TO Q.24) 1 67/

NO ..... (ASK Q.21) 0

---

21. During the last month, have you or your partner used any form of birth control? By birth control we mean methods such as those listed on this card.

HAND CARD U

Yes .....(ASK 22)..... 1 68/

No .....(SKIP TO Q.24)..... 0

---

22. In the past month, how often have you or your partner used birth control. Would you say it was always, sometimes, or almost never?

always 1 69/

sometimes 2

almost never 3

---

23. Please look at this card. What methods have you or your partner used in the last month? Just tell me the number. CODE ALL THAT APPLY

HAND CARD U

1. Pill 01 70-71/
2. Condom, rubber 02 72-73/
3. Foam 03 74-75/
4. Jelly or cream alone 04 76-77/
5. Suppository or insert 05 78-79/

BEGIN DECK 33

6. Diaphragm with or without jelly or cream.. 06 10-11/
7. Douching after intercourse 07 12-13/
8. IUD, coil, loop 08 14-15/
9. Operation--Female sterilization, tubes tied 09 16-17/
10. Operation--Male sterilization, vasectomy.. 10 18-19/
11. Natural family planning, safe period by temperature of cervical mucus test 11 20-21/
12. Rhythm or safe period by calendar..... 12 22-23/
13. Withdrawal/pulling out 13 24-25/
14. Contraceptive sponge 14 26-27/
15. Other method (SPECIFY) _____ 15 28-29/

24. Did you ever have a course relating to sex education?

Yes ..... (ASK A)	1	30/
No ..... (SKIP TO C)	0	

A. Thinking about the 1st course you took, did that course include information about . . . CODE ALL THAT APPLY.

		Yes	No	Don't Know	
a.	female monthly menstrual cycle	1	0	8	31/
b.	different types of contraception methods	1	0	8	32/
c.	where to obtain contraception methods	1	0	8	33/
d.	beneficial or harmful effects of contraception	1	0	8	34/
e.	diseases that could result from sexual intercourse	1	0	8	35/

B. In what month and year did you take that course?

						36-39/

MONTH YEAR

C. When during the female monthly menstrual cycle is pregnancy most likely to occur?

HAND CARD V

right before the period begins	1	40/
during the period	2	
right after the period	3	
about 2 weeks after the period begins	4	
any time during the month	5	
don't know	8	

(GO TO Q.25)

25. INTERVIEWER: HAS R EVER HAD ANY CHILDREN?

YES ..... (RECORD CHECK MARK IN FERTILITY CIRCLE ON **CALENDAR** THEN GO TO A) 1

NO ..... (GO TO A) 0

A. INTERVIEWER: WAS ANYONE ELSE PRESENT, EXCLUDING YOUNG CHILDREN, WHEN YOU ASKED THE QUESTIONS IN SECTION 10?

YES 1 41/

NO 0

TELEPHONE INTERVIEW..... 2

SKIP TO SECTION 11

ASK FEMALES ONLY·

26. INTERVIEWER· SEE **INFORMATION SHEET** ITEM 9. DOES R HAVE CHILDREN FOR WHOM IMMUNIZATION ("SHOTS") INFORMATION IS NEEDED?

YES--"NEED" ..... (ASK A-C) 1 42/

NO--"OKAY"..... (GO TO Q.27) 0

A. Children are given a series of DPT shots (that is diphtheria, pertussis, tetanus) and oral polio vaccine during their first year of life. We would like to ask some questions about DPT shots for (CHILDREN LISTED ON **INFORMATION SHEET** FOR WHOM SHOT INFORMATION IS NEEDED).

INTERVIEWER: ENTER ID # AND NAME FOR EACH CHILD ON **INFORMATION SHEET** WITH "NEED" LISTED UNDER "SHOTS."

ASK B AND C FOR EACH CHILD ON **INFO SHEET** FOR WHOM IMMUNIZATION INFO IS MISSING.

BEGIN DECK 34

B. Has (OLDEST CHILD, NEXT OLDEST, ETC.) had . . .	1st CHILD 43-44/	2nd CHILD 50-51/	3rd CHILD 57-58/	4th CHILD 64-65/	5th CHILD 71-72/	6th CHILD 10-11/
ID # AND NAME	|_|_|	|_|_|	|_|_|	|_|_|	|_|_|	|_|_|
the first set of immunizations usually given when 2 months old?	45/	52/	59/	66/	73/	12/
Yes	1	 1	 1	 1	 1	 1
No	0	 0	 0	 0	 0	 0
the second set of immunizations usually given when 4 months old?	46/	53/	60/	67/	74/	13/
Yes	1	 1	 1	 1	 1	 1
No	0	 0	 0	 0	 0	 0
the third set of immunizations usually given when 6 months old?	47/	54/	61/	68/	75/	14/
Yes	1	 1	 1	 1	 1	 1
No	0	 0	 0	 0	 0	 0
C. INTERVIEWER: READ INTRODUCTORY STATEMENT ONLY FOR OLDEST CHILD. (Babies often get a measles shot when they are older, usually after their 1st birthday). Has (OLDEST CHILD, NEXT OLDEST, ETC.) had a measles shot?	48/	55/	62/	69/	76/	15/
Yes	1	 1	 1	 1	 1	 1
No	0	 0	 0	 0	 0	 0
D. INTERVIEWER: IS THERE ANOTHER CHILD FOR WHOM IMMUNIZATION INFORMATION IS MISSING?	49/	56/	63/	70/	77/	16/
YES ...(ASK B & C)....	1	 1	 1	 1	 1	(Q.27)..1
NO ....(GO TO Q.27)...	0	 0	 0	 0	 0	(Q.27)..0

27. INTERVIEWER: WAS RESPONDENT PREGNANT AT DATE OF LAST INTERVIEW? SEE **INFORMATION SHEET** ITEM 10.

YES ..... (SKIP TO Q.29A) 1 17/

NO ..... (ASK A) 0
MISSING .....(ASK A) 2

A. Have you been pregnant since (DATE OF LAST INTERVIEW)?

------> INTERVIEWER NOTE: INCLUDE CURRENT PREGNANCY.

Yes ..... (ASK B) 1 18/

No ..... (SKIP TO Q.40) 0

B. How many times? 19/

ENTER NUMBER: |__|

---

28. When did (that/the first) pregnancy begin? What month and year?

ENTER MONTH: |__|__| 20-21/

AND YEAR: |__|__| 22-23/

---

29. Did that pregnancy result in a live birth; in a miscarriage, stillbirth, or abortion; or are you still pregnant? CODE IN A BELOW.

------> INTERVIEWER NOTE: IF R WAS PREGNANT AT DATE OF LAST INTERVIEW, ASK:

A. According to our records, you were pregnant at the date of our last interview. Did that pregnancy result in a live birth; in a miscarriage, stillbirth, or abortion; or are you still pregnant? CODE BELOW.

Live birth ..... (Ask B-F) 1 24/
Miscarriage ..... (GO TO Q.30) 2
Stillbirth ..... (GO TO Q.30) 3
Abortion ..... (GO TO Q.30) 4
Still pregnant .... (SKIP TO Q.40A) 5

B. When was the baby born? |__|__|__|__|__|__| 25-30/
MO DA YR

C. Was the baby a boy or a girl?

Boy 1 31/

Girl 2

D. What did you name the baby? 32-46/

ENTER NAME: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

INTERVIEWER: GIVE ID NUMBER CONSECUTIVE TO NUMBERS ON **INFORMATION SHEET** AND ENTER NAME AND ID NUMBER ON **INFORMATION SHEET.**

ID NUMBER: |__|__| 47-48/

29. (continued)

E. Where does (CHILD) usually live?

1) IN THIS HOUSEHOLD 01 49-50/

NOT IN THIS HOUSEHOLD
2) WITH (HIS/HER) (FATHER/MOTHER) .. 02
3) W/OTHER RELATIVES(S) (SPECIFY) _____ 03
4) WITH FOSTER CARE 04
5) WITH ADOPTIVE PARENTS 05
6) LONG TERM CARE INSTITUTION 06
7) AWAY AT SCHOOL 07
8) DECEASED ..... (ASK a) 08
9) OTHER (SPECIFY) _____ _____ 09

a. IF DECEASED, ASK: When did (CHILD) die?

|__|__|__|__| 51-54/
MO YR

F. Were you pregnant another time after that pregnancy?

Yes ..... (SKIP TO Q.32) 1 55/
No ..... (SKIP TO Q.40) 0

---

30. When did that pregnancy end? |__|__|__|__|__|__| 56-61/
MO DA YR

---

31. How many months pregnant were you when that happened?

ENTER NUMBER OF MONTHS: |__|__| 62-63/

A. Were you pregnant another time after that pregnancy?

Yes ..... (GO TO Q.32) 1 64/
No .....(SKIP TO Q.40) 0

INTERVIEWER: IF R HAD MORE THAN ONE PREGNANCY SINCE DATE OF LAST INTERVIEW, GO TO Q.32. OTHERS SKIP TO Q.40.

32. When did the second pregnancy begin? What month and year?

ENTER MONTH: |__|__| 65-66/

AND YEAR: |__|__| 67-68/

---

33. Did that pregnancy result in a live birth; in a miscarriage, stillbirth, or abortion; or are you still pregnant?

Live birth ..... (ASK A-E) 1 69/
Miscarriage ..... (GO TO Q.34) 2
Stillbirth ..... (GO TO Q.34) 3
Abortion ..... (GO TO Q.34) 4
Still pregnant ... (SKIP TO Q.40A) 5

A. When was the baby born? |__|__|__|__|__|__| 70-75/
MO DA YR

B. Was the baby a boy or a girl?

Boy 1 76/
Girl 2

BEGIN DECK 35
10-24/

C. What did you name the baby? |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

INTERVIEWER: GIVE ID NUMBER CONSECUTIVE TO NUMBERS ON **INFORMATION SHEET** AND ENTER NAME AND ID NUMBER ON **INFORMATION SHEET.**

ID NUMBER: |__|__| 25-26/

D. Where does (CHILD) usually live?

1) IN THIS HOUSEHOLD 01 27-28/

NOT IN THIS HOUSEHOLD
2) WITH (HIS/HER) (FATHER) 02
3) W/OTHER RELATIVES(S) (SPECIFY) _____ 03
4) WITH FOSTER CARE 04
5) WITH ADOPTIVE PARENTS 05
6) LONG TERM CARE INSTITUTION 06
7) AWAY AT SCHOOL 07
8) DECEASED ..... (ASK a) 08
9) OTHER (SPECIFY) _____ _____ 09

a. IF DECEASED, ASK: When did (CHILD) die? |__|__|__|__| 29-32/
MO YR

E. Were you pregnant another time after that pregnancy?

Yes ..... (SKIP TO Q.36) 1 33/
No ..... (SKIP TO Q.40) 0

34. When did that pregnancy end? |__|__|__|__|__|__| 34-39/
MO DA YR

---

35. How many months pregnant were you when that happened?

ENTER NUMBER OF MONTHS: |__|__| 40-41/

A. Were you pregnant another time after that pregnancy?

Yes ..... (GO TO Q.36) 1 42/
No ..... (SKIP TO Q.40) 0

INTERVIEWER: IF R HAD MORE THAN TWO PREGNANCIES SINCE DATE OF INTERVIEW, GO TO Q.36. OTHERS SKIP TO Q.40.

---

36. When did the third pregnancy begin? What month and year?

ENTER MONTH: |__|__| 43-44/

AND YEAR: |__|__| 45-46/

---

37. Did that pregnancy result in a live birth; in a miscarriage, stillbirth, or abortion; or are you still pregnant?

Live birth ..... (ASK A-E) 1 47/
Miscarriage ..... (GO TO Q.38) 2
Stillbirth ..... (GO TO Q.38) 3
Abortion ..... (GO TO Q.38) 4
Still pregnant .... (SKIP TO Q.40A) 5

A. When was the baby born? |__|__|__|__|__|__| 48-53/
MO DA YR

B. Was the baby a boy or a girl?

Boy 1 54/
Girl 2

55-69/

C. What did you name the baby? |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

INTERVIEWER: GIVE ID NUMBER CONSECUTIVE TO NUMBERS ON **INFORMATION SHEET** AND ENTER NAME AND ID NUMBER ON **INFORMATION SHEET.**

ID NUMBER: | | | 70-71/

37. (continued)

D. Where does (CHILD) usually live?

1) IN THIS HOUSEHOLD 01 72-73/

NOT IN THIS HOUSEHOLD
2) WITH (HIS/HER) (FATHER/MOTHER) .. 02
3) W/OTHER RELATIVES(S)
(SPECIFY) _____ 03
4) WITH FOSTER CARE 04
5) WITH ADOPTIVE PARENTS 05
6) LONG TERM CARE
INSTITUTION 06
7) AWAY AT SCHOOL 07
8) DECEASED ..... (ASK a) 08
9) OTHER (SPECIFY) _____
_____ 09

a. IF DECEASED, ASK: When did (CHILD) die? |__|__|__|__| 74-77/
MO YR

E. Were you pregnant another time after that pregnancy?

Yes .... (USE ANOTHER QUESTIONNAIRE) 1 78/

No ..... (SKIP TO Q.40) 0

BEGIN DECK 36

---

38. When did that pregnancy end? |__|__|__|__|__|__| 10-15/
MO DA YR

---

39. How many months pregnant were you when that happened?

ENTER NUMBER OF MONTHS: |__|__| 16-17/

A. Were you pregnant another time after that pregnancy?

Yes .... (USE ANOTHER QUESTIONNAIRE) 1 18/

No 0

40. Are you pregnant now?

Yes ..... (ASK A) 1 19/

No ..... (GO TO Q.41) 0

Don't know .... (GO TO Q.41) 8

A. IF YES: When do you expect the baby to be born?

ENTER DATE HERE: |__|__|__|__|__|__| 20-25/
MO DA YR

IF R VOLUNTEERS THAT PREGNANCY WILL BE TERMINATED,

CHECK BOX HERE: |__| 26/

---

41. INTERVIEWER: HAS R HAD ANY PREGNANCIES SINCE DATE OF LAST INTERVIEW?

YES ..... (ASK A) 1 27/

NO ..... (SKIP TO Q.49A) 0

A. IF YES: WAS R PREGNANT AT DATE OF LAST INTERVIEW?
SEE **INFORMATION SHEET** ITEM 10.

YES ..... (ASK B) 1 28/

NO ..... (SKIP TO Q.42) 0

MISSING ... (SKIP TO Q.42) 2

B. INTERVIEWER: DID R HAVE MORE PREGNANCIES THAN THAT ONE SINCE THE DATE OF THE LAST INTERVIEW?

YES ..... (GO TO Q.42) 1 29/

NO ..... (SKIP TO Q.50) 0

PLEASE GO ON TO NEXT PAGE ---------->

PREGNANCY INTERVALS SINCE DATE OF LAST INTERVIEW

42. INTERVIEWER:
- IF R WAS NOT PREGNANT AT DATE OF LAST INTERVIEW, USE DATE OF LAST INTERVIEW AS BEGINNING 1ST INTERVAL DATE.
- IF R WAS PREGNANT AT DATE OF LAST INTERVIEW, USE DATE PREGNANCY ENDED (EITHER IN BIRTH OR LOSS) AS BEGINNING 1ST INTERVAL DATE.
- DETERMINE DATES FOR PREGNANCY INTERVALS BY REFERRING TO ENDING DATES OF LIVE BIRTHDATES AND PREGNANCY LOSS DATES IN QS. 29B, 30, 33A, 34, 37A, AND 38. RECORD DATES IN BOXES ON OPPOSITE PAGE.

---

43. Now I would like to ask you some questions about your (pregnancy/pregnancies) since the last time we talked with you.

HAND CARD W

Between (DATE) and (DATE), did you ever use any methods such as the ones listed on this card to keep from getting pregnant?

---

44. Had you stopped all methods before you became pregnant?

---

45. Was the reason you (were not/stopped) using any methods because you yourself wanted to become pregnant?

---

46. Just before you became pregnant the (first, second, third, ETC.) time, did you want to become pregnant when you did? IF "NO," PROBE: Did you want a(nother) baby but not at that time, or did you want (none/no more) at all?

---

47. And what about your husband or partner when you became pregnant the (first second, third, ETC.) time, did he want you to become pregnant when you did? IF "NO," PROBE: Did he want you to have a(nother) baby but not at that time, or did he want you to have (none/no more) at all?

---

48. INTERVIEWER: IS THERE ANOTHER PREGNANCY INTERVAL?

1ST PREGNANCY INTERVAL Between	2ND INTERVAL Between	3RD INTERVAL Between	4TH INTERVAL Between
DATE |_____|	|_____|	|_____|	|_____|
and	and	and	and
DATE |_____|	|_____|	|_____|	|_____|
30/	36/	42/	48/
Yes ... 1 (Q.44)	... 1 (Q.44)	... 1 (Q.44)	... 1 (Q.44)
No ... 0 (Q.45)	... 0 (Q.45)	... 0 (Q.45)	... 0 (Q.45)
31/	37/	43/	49/
Yes ... 1 (Q.45)	... 1 (Q.45)	... 1 (Q.45)	... 1 (Q.45)
No ... 0 (Q.46)	... 0 (Q.46)	... 0 (Q.46)	... 0 (Q.46)
32/	38/	44/	50/
Yes ... 1 (Q.47)	... 1 (Q.47)	... 1 (Q.47)	... 1 (Q.47)
No ... 0 (Q.46)	... 0 (Q.46)	... 0 (Q.46)	... 0 (Q.46)
33/	39/	45/	51/
Yes..... 1	... 1	... 1	... 1
Didn't matter... 2	... 2	... 2	... 2
No--not at that time..... 3 (Q.47)	... 3 (Q.47)	... 3 (Q.47)	... 3 (Q.47)
No--(none/no more) at all.. 4	... 4	... 4	... 4
34/	40/	46/	52/
Yes 1	... 1	... 1	... 1
Didn't matter... 2	... 2	... 2	... 2
No--not at that time 3 (Q.48)	... 3 (Q.48)	... 3 (Q.48)	... 3 (Q.48)
No--(none/no more at all... 4	... 4	... 4	... 4
Don't know..... 8	... 8	... 8	... 8
35/	41/	47/	53/
Yes ..... 1 (REPEAT QS.43-48)	... 1 (REPEAT QS.43-48)	... 1 (REPEAT QS.43-48)	... 1 (Q.49)
No 0 (Q.49)	... 0 (Q.49)	... 0 (Q.49)	... 0 (Q.49)

49. INTERVIEWER: HAS R HAD ANY PREGNANCIES SINCE DATE OF LAST INTERVIEW?

YES ..... (SKIP TO C) 1 54/

NO ..... (ASK A) 0

A. INTERVIEWER: HAS R EVER HAD ANY LIVE BIRTHS? (SEE **INFO SHEET**, ITEM 9)

YES ..... (ASK B) 1 55/

NO ..... (SKIP TO Q.94) 0

B. INTERVIEWER: DO WE NEED TO ASK FEEDING QUESTIONS FOR ANY CHILDREN LISTED ON THE **INFORMATION SHEET**, ITEM 9?

YES ..... (SKIP TO Q.81) 1 56/

NO ..... (SKIP TO Q.92) 0

C. INTERVIEWER: IS R CURRENTLY PREGNANT? (Q.40 IS CODED "1"--YES).

YES ..... (ANSWER D) 1 57/

NO ..... (GO TO Q.50) 0

D. INTERVIEWER: HAS R HAD OTHER PREGNANCIES SINCE DATE OF LAST INTERVIEW BESIDES THIS CURRENT PREGNANCY?

YES ..... (GO TO Q.50) 1 58/

NO ..... (ANSWER E) 0

E. INTERVIEWER: SEE **INFORMATION SHEET** ITEM 9. ARE QS.83, 85 OR 87 LISTED UNDER "FEEDING QUESTIONS"?

YES ..... (SKIP TO Q.81) 1 59/

NO ..... (SKIP TO Q.91) 0

	1ST PREGNANCY SINCE DATE OF LAST INTERVIEW		2ND PREGNANCY SINCE DATE OF LAST INTERVIEW	
50. Now I'd like to ask you some questions about your (pregnancy/pregnancies) since (DATE OF LAST INTERVIEW). --->INTERVIEWER NOTE: FILL IN DATES OF PREGNANCIES SINCE DATE OF LAST INTERVIEW (Qs.28, 32, 36) DO NOT INCLUDE CURRENT PREGNANCY. IF MORE THAN 2 PREGNANCIES, USE ANOTHER QUESTIONNAIRE.	DATE BEGAN: |_|_|_|_| MO YR _____ (NAME)	60-63/	DATE BEGAN: |_|_|_|_| MO YR _____ (NAME)	72-75/
51. (First/Next), during your pregnancy (with CHILD/that began DATE), did you make any visits to a doctor or nurse for prenatal care, that is to be examined or talk about your pregnancy?	Yes (ASK A)..... 1 No (GO TO 52).... 0	64/	Yes (ASK A)..... 1 No (GO TO 52)..... 0	76/
A. IF YES, ASK: When did you first visit a doctor or nurse for prenatal care, during which month of your pregnancy? ENTER MONTH NUMBER	|_|_| MONTH	65-66/	|_|_| MONTH BEGIN DECK 37	77-78/
52. Did you drink any alcoholic beverages, including beer, wine, or liquor, during the 12 months before [(1ST CHILD/2ND CHILD) was born/your pregnancy loss]?	Yes (ASK A)..... 1 No (GO TO 53).... 0	67/	Yes (ASK A)..... 1 No (GO TO 53)..... 0	10/
A. How often did you usually drink alcoholic beverages during (your/that) pregnancy? Did you drink . . . (READ CATEGORIES) . . . CODE ONE ONLY HAND CARD X	Everyday.....07 Nearly everyday..06 3 or 4 days a week.....05 1 or 2 days a week.....04 3 or 4 days a month.....03 About once a month.....02 Less than once a month...01 Never 00	68-69/	Everyday.....07 Nearly everyday ..06 3 or 4 days a week.....05 1 or 2 days a week.....04 3 or 4 days a month.....03 About once a month.....02 Less than once a month....01 Never 00	11-12/
53. Did you smoke tobacco cigarettes at all during the 12 months before [(1ST CHILD/2ND CHILD) was born/your pregnancy loss]?	Yes (ASK A) ..... 1 No (GO TO 54).... 0	70/	Yes (ASK A)..... 1 No (GO TO 54)..... 0	13/
A. On the average, how many cigarettes did you smoke during (your/that) pregnancy? Did you smoke 2 or more packs a day? Did you smoke 1 pack or more but less than 2 packs a day, or less than 1 pack a day? (IF VOLUNTEERED)	2 or more packs a day..... 3 1 or more but less than 2.... 2 Less than 1 pack a day..... 1 Did not smoke during that period..... 0	71/	2 or more packs a day..... 3 1 or more but less than 2 .... 2 Less than 1 pack a day..... 1 Did not smoke during that period..... 0	14/

	1ST PREGNANCY SINCE DATE OF LAST INTERVIEW		2ND PREGNANCY SINCE DATE OF LAST INTERVIEW	
54. During that pregnancy, did you have any x-rays taken, even dental x-rays?	Yes (ASK A)..... 1 No (GO TO 55).... 0	15/	Yes (ASK A)..... 1 No (GO TO 55)..... 0	59/
A. IF YES, ASK: What kind of x-rays were they? RECORD VERBATIM AND CODE ALL THAT APPLY?	_____		_____	
	DENTAL X-RAYS.... 1	16/	DENTAL X-RAYS..... 1	60/
	CHEST X-RAYS..... 2	17/	CHEST X-RAYS..... 2	61/
	PELVIS..... 3	18/	PELVIS..... 3	62/
	OTHER (SPECIFY)		OTHER (SPECIFY)	
	_____ 4	19/	_____ 4	63/
55. Ultrasound or sonogram is a way of taking a picture of the baby through sound waves while the baby is still in the womb. Did you have this test when you were pregnant [with (1ST CHILD/2ND CHILD)]? (DO NOT PROBE A "DON'T KNOW" RESPONSE)	Yes (ASK A-D).... 1 No (GO TO 56).... 0 Don't Know (GO TO 56)..... 8	20/	Yes (ASK A-D)..... 1 No (GO TO 56)..... 0 Don't Know .. (GO TO 56)..... 8	64/
A. IF YES, ASK: On this card are some reasons ultrasound is used. Could you tell me why ultrasound was used during your pregnancy [with (1ST CHILD/2ND CHILD)]? CODE ALL THAT APPLY HARD CARD Y	To see if there were twins.....01	21-22/	To see if there were twins.....01	65-66/
	To find out the due date.....02	23-24/	To find out the... due date.....02	67-68/
	To prepare for a procedure called amnio-centesis.....03	25-26/	To prepare for a procedure called amnio-centesis.....03	69-70/
	To look for defects in the baby 04	27-28/	To look for defects in the baby 04	71-72/
	To find out if the baby was still alive....05	29-30/	To find out if the baby was still alive.....05	73-74/
	To find out if the baby was growing normally 06	31-32/	To find out if the baby was growing normally 06	75-76/
	To find out what position the baby was in....07	33-34/	To find out what.. position the baby was in.....07	77-78/
	Other (SPECIFY)		Other (SPECIFY)	
			BEGIN DECK 38	
	_____		_____	
	_____ 08	35-36/	_____ 08	10-11/
	Don't know.....98	37-38/	Don't know.....98	12-13/
B. How many times were sonograms done during (your/that) pregnancy?	|__|__| NUMBER OF TIMES	39-40/	|__|__| NUMBER OF TIMES	14-15/
C. How many months pregnant were you when it was performed? CODE ALL THAT APPLY.	2nd month 02	41-42/	2nd month 02	16-17/
	3rd month 03	43-44/	3rd month 03	18-19/
	4th month 04	45-46/	4th month 04	20-21/
	5th month 05	47-48/	5th month 05	22-23/
	6th month 06	49-50/	6th month 06	24-25/
	7th month 07	51-52/	7th month 07	26-27/
	8th month 08	53-54/	8th month 08	28-29/
	9th month 09	55-56/	9th month 09	30-31/
	Don't know 98	57-58	Don't know 98	32-33/

55. (continued)	1ST PREGNANCY SINCE DATE OF LAST INTERVIEW		2ND PREGNANCY SINCE DATE OF LAST INTERVIEW	
D. Here is a card that shows you the different things that doctors can find out from sonograms. Please tell me all the things the doctor found out from your sonogram(s). CODE ALL THAT APPLY. (HAND CARD Z)	Twins were present.....01	34-35/	Twins were present.....01	64-65/
	Twins were not present....02	36-37/	Twins were not present.....02	66-67/
	Baby's due date..03	38-39/	Baby's due date...03	68-69/
	Birth defect was present....04	40-41/	Birth defect was present.....04	70-71/
	Birth defect was not present....05	42-43/	Birth defect was not present.....05	72-73/
	Baby was alive...06	44-45/	Baby was alive....06	74-75/
	Baby was growing normally.....07	46-47/	Baby was growing normally.....07	76-77/
	Baby was not growing normally.....08	48-49/	Baby was not growing normally.....08	78-79/
	What position baby was in....09	50-51/	What position baby was in.....09	BEGIN DECK 39 10-11/
	Other (SPECIFY) _____ _____ 10	52-53/	Other (SPECIFY) _____ _____ 10	12-13/
	Don't know.....98	54-55/	Don't know.....98	14-15/
56. Amniocentesis is a procedure during which a long needle is used to collect some of the fluid that surrounds the baby while it is in the womb. Was amniocentesis done while you were pregnant [with (1ST CHILD/2ND CHILD)]?	Yes (ASK A-D).... 1	56/	Yes (ASK A-D)..... 1	16/
	No (GO TO 57).... 0		No (GO TO 57)..... 0	
A. IF YES, ASK: On this card are some reasons amniocentesis is used. Could you tell me why amniocentesis was used during your pregnancy [with (1ST CHILD/2ND CHILD)]? CODE ALL THAT APPLY (HAND CARD AA)	To look for a genetic or birth defect, like Down's Syndrome, Tay-Sachs, neural tube defect, or sex-linked disease..... 1	57/	To look for a genetic or birth defect, like Down's Syndrome, Tay-Sachs, neural tube defect, or sex-linked disease..... 1	17/
	To find out how far along the baby was..... 2	58/	To find out how... far along the baby was..... 2	18/
	To find out if the baby's lungs were mature..... 3	59/	To find out if the baby's lungs were mature..... 3	19/
	Other (SPECIFY) _____ _____ 4	60/	Other (SPECIFY) _____ _____ 4	20/
	Don't know 8	61/	Don't know 8	21/
B. How many times was amniocentesis done during (your/that) pregnancy?	|__|__| NUMBER OF TIMES	62-63/	|__|__| NUMBER OF TIMES	22-23/

56. (continued)

	1ST PREGNANCY SINCE DATE OF LAST INTERVIEW		2ND PREGNANCY SINCE DATE OF LAST INTERVIEW	
C. How many months pregnant were you when it was performed? CODE ALL THAT APPLY.	3rd month 03	24-25/	3rd month 03	45-46/
	4th month 04	26-27/	4th month 04	47-48/
	5th month 05	28-29/	5th month 05	49-50/
	6th month 06	30-31/	6th month 06	51-52/
	7th month 07	32-33/	7th month 07	53-54/
	8th month 08	34-35/	8th month 08	55-56/
	9th month 09	36-37/	9th month 09	57-58/
D. Here is a card that shows you the different things that doctors can find out from amniocentesis. Please tell me all the things the doctor found out when you had amniocentesis during (your/that) pregnancy. CODE ALL THAT APPLY	Baby's lungs were mature..... 1	38/	Baby's lungs were mature..... 1	59/
HAND CARD BB	Baby's lungs were not mature 2	39/	Baby's lungs were not mature 2	60/
	Genetic or birth defect was present..... 3	40/	Genetic or birth defect was present..... 3	61/
	Genetic or birth defect was not present..... 4	41/	Genetic or birth defect was not present..... 4	62/
	Baby was normal 5	42/	Baby was normal 5	63/
	Other (SPECIFY) _____ _____ 6	43/	Other (SPECIFY) _____ _____ 6	64/
	Don't know 8	44/	Don't know 8	65/

	1ST PREGNANCY SINCE DATE OF LAST INTERVIEW				2ND PREGNANCY SINCE DATE OF LAST INTERVIEW			
								BEGIN DECK 40
57. A. During (your/that) pregnancy, did you . . . (CODE YES OR NO FOR EACH ITEM) . . .	Yes	No	N/A		Yes	No	N/A	
Take a vitamin/mineral supplement?	1	0		66/	1	0		10/
Cut down on the amount of calories in the food you ate?	1	0		67/	1	0		11/
Cut down on the amount of salt you used?	1	0		68/	1	0		12/
Use diuretics (fluid or water pills) to help eliminate water?	1	0		69/	1	0		13/
Reduce or stop your smoking?	1	0	4	70/	1	0	4	14/
Reduce or stop your alcohol intake?	1	0	4	71/	1	0	4	15/
B. INTERVIEWER: FOR EACH YES IN A, ASK: Did you (REPEAT ITEM IN A) based on a doctor's or nurse's suggestion? CODE IN APPROPRIATE ITEMS BELOW.								
Take a vitamin/mineral supplement	1	0		72/	1	0		16/
Cut down on the amount of calories in the food you ate	1	0		73/	1	0		17/
Cut down on the amount of salt you used	1	0		74/	1	0		18/
Use diuretics (fluid or water pills) to help eliminate water	1	0		75/	1	0		19/
Reduce or stop your smoking	1	0		76/	1	0		20/
Reduce or stop your alcohol intake	1	0		77/	1	0		21/
58. INTERVIEWER: DID THIS PREGNANCY END IN A LIVE BIRTH?	YES (GO TO 59)... 1 NO (ASK A)..... 0			78/	YES (GO TO 59).... 1 NO (ASK A)..... 0			22/
A. INTERVIEWER: IS THERE ANOTHER PREGNANCY AFTER DATE OF LAST INTERVIEW?	YES (GO BACK TO Q.51).... 1 NO (SKIP TO 81).. 0			79/	YES (GO TO NEW QUEX, Q.51)..... 1 NO (SKIP TO 81)... 0			23/
59. Based on either your last menstrual period date or your doctor's or clinic's information, was (1ST CHILD/ 2ND CHILD) born within a week of the expected (due) date?	Yes (GO TO 60)... 1 No (ASK A & B)... 0			80/	Yes (GO TO 60).... 1 No (ASK A & B).... 0			24/

59. (continued)	1ST PREGNANCY SINCE DATE OF LAST INTERVIEW		2ND PREGNANCY SINCE DATE OF LAST INTERVIEW	
A. Was the baby born early or late?	Early.(GO TO B).. 1 Late..(GO TO B).. 2	25/	Early..(GO TO B).. 1 Late...(GO TO B).. 2	42/
B. How many weeks was the baby (early/late)?	|__|__| NUMBER OF WEEKS:	26-27/	|__|__| NUMBER OF WEEKS:	43-44/
60. Was a cesarean section done? IF NECESSARY, PROBE: Was the baby delivered by an incision in your abdomen?	Yes ..(ASK A).... 1 No ..(GO TO 61).. 0	28/	Yes ...(ASK A).... 1 No ...(GO TO 61).. 0	45/
A. IF YES, ASK: Was this your first cesarean section, or did you have one before?	First cesarean section ..... 1 Had cesarean(s) before 0	29/	First cesarean section ..... 1 Had cesarean(s) before 0	46/
61. A. What was your weight just before you delivered?	|__|__|__|__| WEIGHT AT TIME OF DELIVERY	30-32/	|__|__|__|__| WEIGHT AT TIME OF DELIVERY	47-49/
B. What was your weight just before you became pregnant with (1ST CHILD/ 2ND CHILD)?	|__|__|__|__| WEIGHT BEFORE PREGNANCY	33-35/	|__|__|__|__| WEIGHT BEFORE PREGNANCY	50-52/
C. INTERVIEWER: SUBTRACT B FROM A TO GET NUMBER OF POUNDS GAINED DURING PREGNANCY.	|__|__|__| ENTER NUMBER OF POUNDS GAINED	36-37/	|__|__|__| ENTER NUMBER OF POUNDS GAINED	53-54/
D. Does that mean you gained (NUMBER IN C) pounds during your pregnancy?	Yes (GO TO 62)... 1 No (ASK R HOW MANY POUNDS SHE GAINED DURING PREG-NANCY. RE-CORD IN C. ADJUST A AND B WITH R ACCORDINGLY... 0	38/	Yes (GO TO 62).... 1 No (ASK R HOW MANY POUNDS SHE GAINED DURING PREG-NANCY. RE-CORD IN C. ADJUST A AND B WITH R ACCORDINGLY.... 0	55/
62. What was (1ST/CHILD/2ND CHILD)'s length at birth?	|__|__| NUMBER OF INCHES	39-40/	|__|__| NUMBER OF INCHES	56-57/
A. INTERVIEWER: DID R INDICATE THAT THE LENGTH OF THE BABY WAS AN ESTIMATE?	YES ..... 1 NO 0	41/	YES ..... 1 NO 0	58/

PLEASE GO ON TO NEXT PAGE ---------->>

	1ST PREGNANCY SINCE DATE OF LAST INTERVIEW		2ND PREGNANCY SINCE DATE OF LAST INTERVIEW	
63. How long did you stay in the hospital?	|__|__| NUMBER OF DAYS Did not stay in the hospital.....00	59-60/	|__|__| NUMBER OF DAYS Did not stay in... the hospital.....00	18-19/
A. How long did your baby stay in the hospital?	|__|__| NUMBER OF DAYS Baby did not stay in hospital.....00	61-62/	|__|__| NUMBER OF DAYS Baby did not stay in hospital.....00	20-21/
64. In (1ST CHILD/2ND CHILD)'s first year, did you take (him/her) to a clinic, hospital, or doctor because (he/she) was sick or injured?	Yes..(GO TO 65).. 1 No.(SKIP TO 76).. 0	63/	Yes..(GO TO 65)... 1 No..(SKIP TO 76).. 0	22/
65. A. When you took (1ST CHILD/2ND CHILD) to a clinic, hospital, or doctor the first time because (he/she) was sick or injured, what was the nature of (his/her) illness or injury? RECORD VERBATIM. IF MORE THAN ONE MENTIONED, PROBE: What was the main illness or injury?	_____		_____	
INTERVIEWER: ENTER CODE FROM B (BELOW) FOR MAIN ILLNESS OR INJURY. CODE OTHER ILLNESSES OR INJURIES MENTIONED IN B BELOW.	|__|__| A. CODE	64-65/	|__|__| A. CODE	23-24/
B. Please look at this card and tell me which of these symptoms or conditions occurred with the (ILLNESS/INJURY). CODE ALL THAT APPLY. DO NOT RECODE MAIN ILLNESS OR INJURY RECORDED IN A ABOVE. HAND CARD CC	B. Fever..... 01 Cold.....02 Sore throat.....03 Pneumonia.....04 Ear infection....05 Vomitting or diarrhea....06 Rash.....07 Accident or poisoning.....08 Convulsions.....09 Other (SPECIFY) _____ _____ 10	66-67/ 68-69/ 70-71/ 72-73/ 74-75/ 76-77/ 78-79/ BEGIN DECK 41 10-11/ 12-13/ 14-15/	B. ..... 01 .....02 .....03 .....04 .....05 .....06 .....07 .....08 .....09 _____ _____ 10	25-26/ 27-28/ 29-30/ 31-32/ 33-34/ 35-36/ 37-38/ 39-40/ 41-42/ 43-44/
66. How many months old was (1ST CHILD/2ND CHILD) when you took (him/her) to a clinic, hospital, or doctor the first time for this (ILLNESS/INJURY)?	|__|__| NUMBER OF MONTHS	16-17/	|__|__| NUMBER OF MONTHS	45-46/

---> INTERVIEWER NOTE: 1 DAY TO 4 WEEKS = 01 MONTH.
MORE THAN 4 WEEKS--DIVIDE BY 4 AND ROUND UP.
EX: 36 WEEKS = 09 MONTHS

	1ST PREGNANCY SINCE DATE OF LAST INTERVIEW		2ND PREGNANCY SINCE DATE OF LAST INTERVIEW	
67. In (1ST CHILD/2ND CHILD)'s first year, altogether how many visits were made to a clinic, hospital, or doctor because (he/she) had (ILLNESS OR INJURY NAMED IN Q.65A)?	Once (GO TO 68)..01		Once (GO TO 68)...01	
	OR	47-48/	OR	72-73/
	|__|__| NUMBER OF TIMES (ASK A)		|__|__| NUMBER OF TIMES (ASK A)	
A. In (1ST CHILD/2ND CHILD)'s first year, how many months old was (he/she) the last time you took (him/her) to a clinic or doctor for (ILLNESS/INJURY FROM Q.65A)?	|__|__| NUMBER OF MONTHS	49-50/	|__|__| NUMBER OF MONTHS	74-75/
			BEGIN DECK 42	
68. Please look at this card. In (1ST CHILD/2ND CHILD)'s first year, when you took (him/her) to a clinic, hospital or doctor because (he/she) had (ILLNESS/INJURY FROM Q.65A), where did you take (him/her? CODE ALL THAT APPLY				
HAND CARD DD	Private doctor's office.....01	51-52/	01	10-11/
	Public clinic....02	53-54/	02	12-13/
	Private clinic...03	55-56/	03	14-15/
	Health Maintenance Organization (HMO)...04	57-58/	04	16-17/
	Hospital clinic, walk-in clinic.....05	59-60/	05	18-19/
	Community health center.....06	61-62/	06	20-21/
	Emergency room out-patient....07	63-64/	07	22-23/
	Other (SPECIFY) _____		_____	
	_____ 08	65-66/	_____ 08	24-25/
	Hospital admission.....09	67-68/	09	26-27/
69. INTERVIEWER: WAS HOSPITAL ADMISSION (09) CODED IN Q.68?	YES.(ASK A & B).. 1 NO..(GO TO Q.70). 0	69/	...(ASK A & B).... 1 ...(GO TO Q.70)... 0	28/
A. When (1ST CHILD/2ND CHILD) was admitted to the hospital, was surgery necessary?	Yes ..... 1 No 0	70/	..... 1 0	29/
B. Did you have to take time off from work?	Yes ..... 1 No ..... 0 Not working..... 2	71/	..... 1 ..... 0 2	30/

	1ST PREGNANCY SINCE DATE OF LAST INTERVIEW		2ND PREGNANCY SINCE DATE OF LAST INTERVIEW	
70. In (1ST CHILD/2ND CHILD)'s first year, did you take (him/her) to a clinic, hospital, or doctor because (he/she) was sick or injured with a different illness or injury than the one we have just talked about?	Yes (GO TO Q.71)... 1 No (SKIP TO Q.76).. 0	31/	...(GO TO Q.71)... 1 ..(SKIP TO Q.76).. 0	60/
71. A. What was the nature of this other illness or injury? RECORD VERBATIM. IF MORE THAN ONE MENTIONED, PROBE: What was the main illness or injury?	_____		_____	
INTERVIEWER: ENTER CODE FROM B (BELOW) FOR MAIN ILLNESS OR INJURY. CODE OTHER ILLNESSES OR INJURIES MENTIONED IN B BELOW.	|__|__| CODE	32-33/	|__|__| CODE	61-62/
B. Please look at this card and tell me which of these symptoms or conditions occurred with the (ILLNESS/INJURY). CODE ALL THAT APPLY. DO NOT RECODE MAIN ILLNESS OR INJURY RECORDED ABOVE.	B. Fever..... 01	34-35/	B. 01	63-64/
	Cold.....02	36-37/	02	65-66/
	Sore throat.....03	38-39/	03	67-68/
	Pneumonia.....04	40-41/	04	69-70/
	Ear infection....05	42-43/	05	71-72/
	Vomitting or diarrhea....06	44-45/	06	73-74/
	Rash.....07	46-47/	07	75-76/
				BEGIN DECK 43
	Accident or poisoning.....08	48-49/	08	10-11/
	Convulsions.....09	50-51/	09	12-13/
	Other (SPECIFY)			
	_____		_____	
	_____ 10	52-53/	_____ 10	14-15/
72. How many months old was (1ST CHILD/2ND CHILD) when you took (him/her) to a clinic, hospital, or doctor the first time for this (ILLNESS/INJURY)?	|__|__| NUMBER OF MONTHS	54-55/	|__|__| NUMBER OF MONTHS	16-17/
73. In (1ST CHILD/2ND CHILD)'s first year, altogether how many visits were made to a clinic, hospital, or doctor because (he/she) had (ILLNESS OR INJURY NAMED IN Q.71A)?	Once (GO TO 74)..01 OR |__|__| NUMBER OF TIMES (ASK A)	56-57/	Once (GO TO 74)...01 OR |__|__| NUMBER OF TIMES (ASK A)	18-19/
A. In (1ST CHILD/2ND CHILD)'s first year, how many months old was (he/she) the last time you took (him/her) to a clinic or doctor for (ILLNESS/INJURY FROM Q.71A)?	|__|__| NUMBER OF MONTHS	58-59/	|__|__| NUMBER OF MONTHS	20-21/

HAND CARD CC

	1ST PREGNANCY SINCE DATE OF LAST INTERVIEW		2ND PREGNANCY SINCE DATE OF LAST INTERVIEW	
74. Please look at this card. Where did you take (1ST CHILD/2ND CHILD) when (he/she) was sick or injured? CODE ALL THAT APPLY HAND CARD DD	Private doctor's office.....01	22-23/	01	44-45/
	Public clinic....02	24-25/	02	46-47/
	Private clinic...03	26-27/	03	48-49/
	Health Maintenance Organization (HMO)...04	28-29/	04	50-51/
	Hospital clinic, walk-in clinic.....05	30-31/	05	52-53/
	Community health center.....06	32-33/	06	54-55/
	Emergency room out-patient....07	34-35/	07	56-57/
	Other (SPECIFY) _____ _____ 08	36-37/	_____ _____ 08	58-59/
	Hospital admission.....09	38-39/	09	60-61/
75. INTERVIEWER: WAS HOSPITAL ADMISSION (09) CODED IN Q.74?	YES (ASK A & B).. 1 NO (GO TO Q.76).. 0	40/	...(ASK A & B).... 1 ...(GO TO Q.76)... 0	62/
A. When (1ST CHILD/2ND CHILD) was admitted to the hospital, was surgery necessary?	Yes ..... 1 No 0	41/	..... 1 0	63/
B. Did you have to take time off from work?	Yes ..... 1 No ..... 0 Not working..... 2	42/	..... 1 ..... 0 2	64/
76. In (1ST CHILD, 2ND CHILD)'s first year, did you take (him/her) to a clinic or a doctor for well baby care when (he/she) was not sick?	Yes (GO TO Q.77). 1 No (SKIP TO Q.79) 0	43/	...(GO TO Q.77)... 1 ..(SKIP TO Q.79).. 0	65/

77. How many months old was (1ST CHILD, 2ND CHILD) when you took (him/her) to a clinic or doctor for well baby care when (he/she) was not sick the first time? . . . How old was (he/she) the next time?

------> INTERVIEWER NOTE: CONTINUE TO ASK UNTIL THE LAST TIME IS CODED. THEN GO TO Q.78.

1ST PREGNANCY SINCE DATE OF LAST INTERVIEW			2ND PREGNANCY SINCE DATE OF LAST INTERVIEW		
MONTH (Q.77)	PLACE (Q.78)		MONTH (Q.77)	PLACE (Q.78)	
					BEGIN DECK 45
01	|__|__|	66-69/	01	|__|__|	10-13/
02	|__|__|	70-73/	02	|__|__|	14-17/
03	|__|__|	74-77/	03	|__|__|	18-21/
		BEGIN DECK 44			
04	|__|__|	10-13/	04	|__|__|	22-25/
05	|__|__|	14-17/	05	|__|__|	26-29/
06	|__|__|	18-21/	06	|__|__|	30-33/
07	|__|__|	22-25/	07	|__|__|	34-37/
08	|__|__|	26-29/	08	|__|__|	38-41/
09	|__|__|	30-33/	09	|__|__|	42-45/
10	|__|__|	34-37/	10	|__|__|	46-49/
11	|__|__|	38-41/	11	|__|__|	50-53/
12	|__|__|	42-45/	12	|__|__|	54-57/
Don't know (SKIP TO Q.79)...98		46-47/	..(SKIP TO Q.79)..98		58-59/

78. When you took (1ST CHILD, 2ND CHILD) for well baby care when (he/she) was (1ST MONTH NAMED IN Q.77/2ND MONTH NAMED), where did you take (him/her)? Was it a . . . READ CATEGORIES AS NECESSARY AND ENTER CODE NEXT TO MONTH IN Q.77 ABOVE.

HAND CARD EE

CARD EE

01 Private doctor's office
02 Public clinic
03 Private clinic
04 Health Maintenance Organization (HMO)
05 Hospital clinic, walk-in clinic
06 Community health center
07 Emergency room out-patient
08 Other (SPECIFY) _____

79. Children are given a series of DPT shots and oral polio vaccine during the first year of life. During which months did (1ST CHILD/2ND CHILD) have those immunizations? CODE ALL THAT APPLY

1st month 01	48-49/		01	60-61/
2nd month 02	50-51/		02	62-63/
3rd month 03	52-53/		03	64-65/
4th month 04	54-55/		04	66-67/
5th month 05	56-57/		05	68-69/
6th month 06	58-59/		06	70-71/
7th month 07	60-61/		07	72-73/
8th month 08	62-63/		08	74-75/
9th month 09	64-65/		09	76-77/
10th month 10	66-67/		10	78-79/
				BEGIN DECK 46
11th month 11	68-69/		11	10-11/
12th month 12	70-71/		12	12-13/
None 00	72-73/		00	14-15/
Don't know (ASK A) 98	74-75/		.... (ASK A) 98	16-17/

	1ST PREGNANCY SINCE DATE OF LAST INTERVIEW		2ND PREGNANCY SINCE DATE OF LAST INTERVIEW	
79. (continued)				
A. IF DON'T KNOW, ASK: Even if you can't remember the exact time, do you remember if your child had . . . (CODE YES OR NO FOR EACH ITEM) . . .				
The first set of immunizations?	Yes ..... 1 No 0	18/	..... 1 0	25/
The second set of immunizations?	Yes ..... 1 No 0	19/	..... 1 0	26/
The third set of immunizations?	Yes ..... 1 No 0	20/	..... 1 0	27/
80. Babies often get a measles shot when they are a little older. Has (1ST CHILD/2ND CHILD) had a measles shot?	Yes (ASK A) ..... 1 No (ASK B) ..... 0 Don't know (ASK B)..... 8	21/	.... (ASK A) ..... 1 .... (ASK B) ..... 0 .... (ASK B) 8	28/
A. About how many months old was (he/she) at the time of the measles shot?	|__|__| NUMBER OF MONTHS Don't know.....98	22-23/	|__|__| NUMBER OF MONTHS 98	29-30/
B. INTERVIEWER: IS THERE ANOTHER PREGNANCY?	YES (GO BACK TO Q.51) ..... 1 NO (SKIP TO 81).. 0	24/	YES (GO TO NEW QUESTIONNAIRE Q.51).. 1 NO (SKIP TO 81)... 0	31/

81. INTERVIEWER: DO WE NEED TO ASK FEEDING QUESTIONS FOR ANY CHILDREN LISTED ON THE **INFORMATION SHEET** ITEM 9 (ARE QS.83, 85 OR 87 LISTED UNDER "FEEDING QUESTIONS")?

YES ..... (READ A) 1 32/

NO ..... (ASK B) 0

A. NOTE THE FOLLOWING INSTRUCTIONS BEFORE BEGINNING THE FEEDING QUESTIONS:

- ENTER NAME AND ID NUMBER FOR EACH CHILD LISTED ON **INFORMATION SHEET** FOR WHOM WE NEED TO ASK FEEDING QUESTIONS ON TOP OF COLUMNS FOR QS. 82-89.
- FOLLOW SKIP PATTERN INDICATED ON **INFORMATION SHEET** FOR EACH CHILD FOR WHOM WE NEED TO ASK FEEDING QUESTIONS.
- THEN ASK FEEDING QUESTIONS FOR EACH CHILD BORN SINCE DATE OF LAST INTERVIEW. (SEE QS. 29D, 33C, AND 37C).

B. WAS THERE A LIVE BIRTH SINCE DATE OF LAST INTERVIEW?

YES ..... (RECORD IN Q.82 AND ASK QS.83-90) 1

NO ..... (SKIP TO Q.91) 0

2. INTERVIEWER: SEE **INFORMATION SHEET**, ITEM # 9. ENTER NAME AND ID NUMBER FOR EACH CHILD NEEDING FEEDING QUESTIONS. START WITH OLDEST CHILD FIRST.

	1ST CHILD NEEDING FEEDING QS.	2ND CHILD	3RD CHILD
	ID: | | | 33-34/ NAME	ID: | | | 51-52/ NAME	ID: | | | 69-70/ NAME
3. How much did (NAME OF 1ST CHILD, ETC.) weigh at birth?	ENTER POUNDS: | | | 35-36/ AND OUNCES: ___ 37-38/ OR DON'T KNOW (ASK A)... 9898	| | | 53-54/ | | | 55-56/ (ASK A)... 9898	| | | 71-72/ | | | 73-74/ (ASK A) ... 9898
A. IF Q. 83 IS DON'T KNOW, ASK A: Did (he/she) weigh more than 5 1/2 pounds or less?	More..... 1 39/ Less..... 2 DON'T KNOW 8	..... 1 57/ 2 8	..... 1 75/ 2 8
BREAST FEEDING: 4. When (CHILD) was an infant, did you breast feed (him/her) at all?	40/ Yes....(GO TO Q. 85)..... 1 No....(SKIP TO Q. 86).... 0	58/ ..(Q. 85).. 1 ..(Q. 86).. 0	76/ ..(Q. 85).. 1 ..(Q. 86).. 0
5. How many weeks old was (he/she) when you quit breast feeding (him/her altogether?	ENTER NUMBER OF WEEKS OLD: | | | 41-42/ OR ENTER NUMBER OF MONTHS OLD: AND USE THIRD BOX FOR 43-45/ 1/2 MONTH (.5): | | | . | | Still breastfeeding ..... 000 OR DON'T KNOW..... 998	| | | 59-60/ 61-63/ | | | . | | 000 998	BEGIN DECK 47 | | | 10-11/ 12-14/ | | | . | | 000 998
FORMULA FEEDING: 6. How many weeks old was (CHILD) when you began feeding (him/her) formula on a daily basis?	ENTER NUMBER OF WEEKS OLD: | | | 46-47/ OR ENTER NUMBER OF MONTHS OLD: AND USE THIRD BOX FOR 48-50/ 1/2 MONTH (.5): | | | . | | OR From birth..... 000 OR (Do/Did not formula feed (Skip to Q.88) ..... 995 OR DON'T KNOW 998	| | | 64-65/ 66-68/ | | | . | | ..... 000 (Q. 88)... 995 998	| | | 15-16/ 17-19/ | | | . | | ..... 000 (Q. 88)..... 995 998

	1ST CHILD	2ND CHILD	3RD CHILD
7. How many weeks old was (CHILD) when you stopped feeding (him/her) formula on a daily basis?	ENTER NUMBER OF WEEKS OLD: | | | 20-21/ OR ENTER NUMBER OF MONTHS OLD: AND USE THIRD BOX FOR 1/2 MONTH (.5): | | | . | | 22-24/ OR Still feeding formula ..... 000 OR DON'T KNOW 998	| | | 36-37/ | | | . | | 38-40/ 000 998	| | | 52-53/ | | | . | | 54-56/ 000 998
COW'S MILK: 8. How many weeks old was (CHILD) when (he/she) began drinking cow's milk on a daily basis?	ENTER NUMBER OF WEEKS OLD: | | | 25-26/ OR ENTER NUMBER OF MONTHS OLD: AND USE THIRD BOX FOR 1/2 MONTH (.5): | | | . | | 27-29/ OR From birth..... 000 OR Has not begun yet..... 995 OR DON'T KNOW..... 998	| | | 41-42/ | | | . | | 43-45/ ..... 000 ..... 995 998	| | | 57-58/ | | | . | | 59-61/ ..... 000 ..... 995 998
SOLID FOOD: 9. INTERVIEWER: READ INTRODUCTORY STATEMENT ONLY FOR FIRST CHILD: (Now we would like you to think about solid food. Solid food is any food other than milk or formula, like cereal or fruit whether it is commercially prepared, like Gerbers, or prepared at home). How many weeks old was (CHILD) when (he/she) first ate solid food on a daily basis?	ENTER NUMBER OF WEEKS OLD: | | | 30-31/ OR ENTER NUMBER OF MONTHS OLD: AND USE THIRD BOX FOR 1/2 MONTH (.5): | | | . | | 32-34/ From birth..... 000 OR Has not begun yet..... 995 OR DON'T KNOW..... 998	| | | 46-47/ | | | . | | 48-50/ ..... 000 ..... 995 998	| | | 62-63/ | | | . | | 64-66/ ..... 000 ..... 995 998
0. INTERVIEWER: DOES RESPONDENT HAVE ANOTHER CHILD FOR WHOM WE NEED TO ASK FEEDING QUESTIONS?	35/ YES.....(ASK A)..... 1 NO.....(GO TO Q. 91)..... 0	51/ ...(ASK A)..... 1 ....(Q. 91).... 0	67/ ....(NEW QUEX)... 1 .....(Q. 91)..... 0

A. Now I would like to ask about (NAME OF NEXT CHILD) REPEAT QS. 83-90 FOR NEXT CHILD.

91. INTERVIEWER: HAS R EVER HAD ANY LIVE BIRTHS?

YES ..... (GO TO Q.92) 1 68/

NO ..... (SKIP TO Q.94) 0

92. INTERVIEWER: DO ANY OF R'S OWN CHILDREN NOT LIVE IN THE HOUSEHOLD? (DO NOT COUNT DECEASED CHILDREN) (ARE ANY CHILDREN LISTED ON THE **INFORMATION SHEET** WHO ARE NOT LISTED ON THE HOUSEHOLD ENUMERATION OF THE **FACE SHEET**?

YES ..... (ASK A-F) 1 69/

NO ..... (GO TO Q.93) 0

A. INTERVIEWER: ENTER NAME OF OLDEST CHILD, NEXT OLDEST CHILD, ETC. NOT LIVING IN HOUSEHOLD HERE: (USE ANOTHER QUESTIONNAIRE IF MORE THAN 3 CHILDREN NOT IN HOUSEHOLD.

	FIRST CHILD NOT IN HH	SECOND CHILD	THIRD CHILD
	ID: |_|_| 70-71/	ID: |_|_| 77-78/	ID: |_|_| 15-16/
	NAME	NAME	NAME
B. INTERVIEWER: ASK C-F FOR EACH CHILD NOT IN THIS HOUSEHOLD. START WITH OLDEST CHILD.			
C. INTERVIEWER: READ INTRODUCTORY STATEMENT FOR OLDEST CHILD ONLY: Now I would like to ask you some questions about your (child/children) who (is/are) not living in this household.		BEGIN DECK 48	
HAND CARD FF — About how far from you does (CHILD'S NAME) live? Is it ...	72/ within 1 mile ..... 1 1-10 miles ..... 2 11-100 miles ..... 3 more than 100 miles.. 4	10/ ..... 1 ..... 2 ..... 3 4	17/ ..... 1 ..... 2 ..... 3 4
HAND CARD GG — D. In the past 12 months (or since (CHILD) has not been living with you, whichever is most recent) about how often have you seen (CHILD)?	73/ almost every day .... 1 2-3 times a week .... 2 about once a week ... 3 1-2 times a month ... 4 once every 2 or 3 months..... 5 once in the past 12 months ..... 6 never ..(SKIP TO F).. 0	11/ ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6 ....(SKIP TO F)..... 0	18/ ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6 ....(SKIP TO F).... 0
E. How long do these visits usually last? RECORD IN DAYS.	74-75/ less than 1 day.....00 |_|_| # DAYS	12-13/ less than 1 day.....00 |_|_| # DAYS	19-20/ less than 1 day ...00 |_|_| # DAYS
F. INTERVIEWER: IS THERE A (2ND/3RD, ETC.) CHILD)?	76/ YES ...(RE-ASK C-F FOR NEXT OLDEST CHILD) ..... 1 NO ...(GO TO Q.93)... 0	14/ ..... 1 ....(GO TO Q.93).... 0	21/ (GO TO NEW QUEX, Q.92C) .... 1 ....(GO TO Q.93)... 0

93. INTERVIEWER: DO ANY OF R'S OWN CHILDREN LIVE IN THIS HOUSEHOLD (ARE ANY CHILDREN LISTED ON THE **INFORMATION SHEET** AND ON THE HOUSEHOLD ENUMERATION OF THE **FACE SHEET**?

YES ..... (GO TO A) 1 22/

NO ..... (GO TO Q.94) 0

A. INTERVIEWER: ENTER NAME OF OLDEST CHILD, NEXT OLDEST CHILD, ETC. LIVING IN THIS HOUSEHOLD HERE.

	FIRST CHILD IN HH	SECOND CHILD	THIRD CHILD
	ID: |_|_|_| 23-24/	ID: |_|_|_| 32-33/	ID: |_|_|_| 41-42/
	NAME	NAME	NAME

B. INTERVIEWER: ASK Q.C FOR EACH CHILD LIVING IN THIS HOUSEHOLD. START WITH OLDEST CHILD.

C.	Does (OLDEST CHILD/NEXT OLDEST CHILD)'s father live in this household?	Yes (RE-ASK C FOR NEXT CHILD. WHEN "YES" IS CODED FOR LAST CHILD, SKIP TO Q.94) 25/ ..... 1 No ....(ASK D-H)..... 0	34/ ..... 1 No ...(ASK D-H)..... 0	43/ ..... 1 No ...(ASK D-H).... 0
D.	Is (CHILD)'s father living?	26/ Yes ... (ASK E) ..... 1 No ..(ASK C FOR NEXT CHILD OR SKIP TO Q. 94) 0	35/ Yes ... (ASK E) .... 1 No ..(ASK C FOR NEXT CHILD OR SKIP TO Q.94) 0	44/ Yes ... (ASK E) ... 1 No ..(ASK C FOR NEXT CHILD OR SKIP TO Q.94) 0
E.	About how far from you does (CHILD'S) father live? Is it . . . (HAND CARD FF)	27/ within 1 mile ..... 1 1-10 miles ..... 2 11-100 miles ..... 3 more than 100 miles.. 4	36/ ..... 1 ..... 2 ..... 3 4	45/ ..... 1 ..... 2 ..... 3 4
F.	In the past 12 months (or since (CHILD) has been separated from (his/her) father whichever is most recent) about how often has (CHILD) seen (his/her) father? (HAND CARD GG)	28/ almost every day .... 1 2-3 times a week .... 2 about once a week ... 3 1-2 times a month ... 4 once every 2 or 3 months..... 5 once in the past 12 months ..... 6 never (SKIP TO H).... 0	37/ ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6 ....(SKIP TO H)..... 0	46/ ..... 1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6 ...(SKIP TO H)..... 0
G.	How long do these visits usually last? RECORD IN DAYS.	29-30/ less than 1 day .... 00 |_|_|_| # DAYS	38-39/ less than 1 day ... 00 |_|_|_| # DAYS	47-48/ less than 1 day .. 00 |_|_|_| # DAYS
H.	INTERVIEWER: IS THERE A (2ND/3RD, ETC. CHILD LISTED?	YES ..(RE-ASK C-H FOR NEXT OLDEST CHILD) .... 1 31/ NO ...(GO TO Q.94)... 0	40/ .....(C-H)..... 1 .....(Q.94)..... 0	49/ .....(C-H)..... 1 .....(Q.94)..... 0

(continued)

FOURTH CHILD	FIFTH CHILD	SIXTH CHILD	SEVENTH CHILD	EIGHTH CHILD
): |_|_| 50-51/	ID: |_|_| 59-60/	ID: |_|_| 68-69/	ID: |_|_| 77-78/	ID: |_|_| 16-17/
NAME	NAME	NAME	NAME	NAME
52/	61/	70/	79/	18/
..... 1	 1	 1	 1	 1
...(ASK Q.D-H)... 0	No ....(ASK Q.D-H)... 0	No ....(ASK Q.D-H)... 0	No ...(ASK Q.D-H).... 0	No ...(ASK Q.D-H).... 0
			BEGIN DECK 49	
53/	62/	71/	10/	19/
... (ASK E) 1	Yes ... (ASK E) 1	Yes ... (ASK E) 1	Yes ... (ASK E) 1	Yes ... (ASK E) 1
(ASK C FOR NEXT CHILD OR SKIP TO Q.94) 0	No (ASK C FOR NEXT CHILD OR SKIP TO Q.94) 0	No ..(ASK C FOR NEXT CHILD OR SKIP TO Q.94) 0	No ..(ASK C FOR NEXT CHILD OR SKIP TO Q.94) 0	No ..(ASK C FOR NEXT CHILD OR SKIP TO Q.94) 0
54/	63/	72/	11/	20/
ıin 1 mile 1	 1	 1	 1	 1
) miles 2	 2	 2	 2	 2
100 miles 3	 3	 3	 3	 3
ə than 100 miles. 4	 4	 4	 4	 4
55/	64/	73/	12/	21/
ɔst every day ... 1	 1	 1	 1	 1
times a week ... 2	 2	 2	 2	 2
ɹt once a week .. 3	 3	 3	 3	 3
times a month .. 4	 4	 4	 4	 4
ə every 2 or 3 ɔnths..... 5	 5	 5	 5	 5
ə in the past 2 months 6	 6	 6	 6	 6
ər (SKIP TO Q.H). 0	....(SKIP TO Q.H).... 0	...(SKIP TO Q.H)..... 0	...(SKIP TO Q.H)..... 0	...(SKIP TO Q.H)..... 0
56-57/	65-66/	74-75/	13-14/	22-23/
ɜ than 1 day ... 00	less than 1 day 00	less than 1 day 00	less than 1 day 00	less than 1 day 00
|_|_|_| # DAYS	|_|_|_| # DAYS	|_|_|_| # DAYS	|_|_|_| # DAYS	|_|_|_| # DAYS
(RE-ASK D-H FOR NEXT OLD-EST CHILD 1 58/	67/	76/	15/	24/
	.....(C-H)..... 1	.....(C-H)..... 1	.....(C-H)..... 1	.....(Q.94)..... 1
..(GO TO Q.94)... 0	.....(Q.94)..... 0	.....(Q.94)..... 0	.....(Q.94)..... 0	.....(Q.94)..... 0

94. Altogether, how many (more) children do you expect to have?
IF R IS PREGNANT, ADD: Please include your current pregnancy.

ENTER NUMBER OF CHILDREN: |__|__| 25-26/

OR

NONE ... (SKIP TO Q.96) 00

---

95. In how many months or years do you expect to have your (first/next) child?

ENTER # MONTHS: |__|__| 27-28/

OR

OF YEARS: |__|__| 29-30/

---

96. How old were you when you had your first menstrual period?

AGE: |__|__| (GO TO A) 31-32/

OR

NEVER HAD PERIOD (SKIP TO Q.97) 00

A. INTERVIEWER: USE BIRTHDATE ON **INFORMATION SHEET** TO COMPUTE YEAR OF FIRST MENSTRUAL PERIOD. (ADD AGE FROM Q.96 ABOVE TO BIRTHDATE)

ENTER YEAR: 19 |__|__| (ASK B) 33-34/

B. That means you had your first period in (YEAR FROM A). Is that correct?

Yes ..... (ASK C) 1

No .... (CORRECT YEAR AND ASK C) 0

C. In what month in (YEAR FROM A) did you have your first period?

ENTER MONTH: |__|__| 35-36/

OR

Don't Know 98

---

97. INTERVIEWER: HAS R EVER HAD ANY PREGNANCIES? (SEE **INFORMATION SHEET** ITEM # 9 AND QS.27 AND 27A).

YES ..... (SKIP TO Q.98A) 1 37/

NO .....(GO TO Q.98)..... 0

98. Have you ever had sexual intercourse?

Yes .....(ASK A)..... 1 38/
No ..... (SKIP TO Q.104) 0

A. How old were you the first time you had sexual intercourse?

AGE: |__|__| (GO TO B) 39-40/

B. INTERVIEWER: USE BIRTHDATE ON **INFORMATION SHEET** TO COMPUTE YEAR OF FIRST SEXUAL INTERCOURSE. (ADD AGE FROM Q.98 ABOVE TO BIRTHDATE).

ENTER YEAR: 19 |__|__| (ASK C) 41-42/

C. That means you had sexual intercourse for the first time in (YEAR FROM B). Is that correct?

Yes ..... (ASK D) 1

No ... (CORRECT YEAR AND ASK D) 0

D. In what month in (YEAR FROM B) did you have sexual intercourse for the first time?

ENTER MONTH: |__|__| 43-44/

OR

Don't Know 98

---

99. How many times did you have sexual intercourse in the past month?

ENTER NUMBER: |__|__| 45-46/

None 00

---

100. INTERVIEWER: IS R CURRENTLY PREGNANT? (IS Q.40 CODED YES?)

YES ..... (SKIP TO Q.104) 1 47/

NO ..... (ASK Q.101) 0

---

101. During the last month, have you used any form of birth control? By birth control we mean methods such as those listed on this card.

HAND CARD HH

Yes 1 48/

No .....(SKIP TO Q.104)..... 0

---

102. In the past month, how often have you or your partner used birth control. Would you say it was always, sometimes, or almost never?

always 1 49/

sometimes 2

almost never 3

103. Please look at this card. What methods have you used in the last month? Just tell me the number. CODE ALL THAT APPLY

HAND CARD HH

1.	Pill	01	50-51/
2.	Condom, rubber	02	52-53/
3.	Foam	03	54-55/
4.	Jelly or cream alone	04	56-57/
5.	Suppository or insert	05	58-59/
6.	Diaphragm with or without jelly or cream	06	60-61/
7.	Douching after intercourse	07	62-63/
8.	IUD, coil, loop	08	64-65/
9.	Operation--Female sterilization, tubes tied	09	66-67/
10.	Operation--Male sterilization, vasectomy	10	68-69/
11.	Natural family planning, safe period by temperature of cervical mucus test	11	70-71/
12.	Rhythm or safe period by calendar	12	72-73/
13.	Withdrawal/pulling out	13	74-75/
14.	Contraceptive sponge	14	76-77/
15.	Other method (SPECIFY) _____	15	78-79/

---

104. Did you ever have a course relating to sex education? BEGIN DECK 50

Yes ..... (GO TO Q.105)	1	10/
No ..... (SKIP TO Q.107)	0	

---

105. Thinking about the 1st course you took, did that course include information about . . . CODE ALL THAT APPLY

		Yes	No	Don't Know	
a.	female monthly menstrual cycle	1	0	8	11/
b.	different types of contraception methods	1	0	8	12/
c.	where to obtain contraception methods	1	0	8	13/
d.	beneficial or harmful effects of contraception	1	0	8	14/
e.	diseases that could result from sexual intercourse	1	0	8	15/

---

106. In what month and year did you take that course?

|_|_|_|_|_|
MONTH YEAR

16-19/

107. When during the female monthly menstrual cycle is pregnancy most likely to occur? 20/

HAND CARD II

1. right before the period begins 1
2. during the period 2
3. right after the period 3
4. about 2 weeks after the period begins 4
5. any time during the month 5
6. don't know 8

---

108. INTERVIEWER: HAS R EVER HAD ANY CHILDREN?

YES ... (RECORD CHECK MARK IN FERTILITY CIRCLE ON **CALENDAR.** THEN GO TO Q.109) 1

NO ..... (GO TO Q.109) 0

---

109. Now please fill out this card and seal it in this envelope. Thank you.

HAND SELF-ADMINISTERED CARD

---

110. INTERVIEWER: WAS ANYONE ELSE PRESENT, EXCLUDING YOUNG CHILDREN, WHEN YOU ASKED THE QUESTIONS IN SECTION 10? 58/

YES 1

NO 0

TELEPHONE INTERVIEW 2

SECTION 11: CHILDCARE

1. INTERVIEWER: ARE ANY OF RESPONDENT'S OWN, ADOPTED, OR STEP-CHILDREN NOW LISTED ON THE HOUSEHOLD ENUMERATION ON THE **FACE SHEET**?

YES 1 10/

NO ..... (**SKIP TO SECTION 12**) 0

---

2. INTERVIEWER: IS R CURRENTLY ENROLLED IN A REGULAR SCHOOL?

(IS SECTION 3, Q. 1B CODED "YES"?)

YES 1 11/

NO 0

---

3. INTERVIEWER: IS R CURRENTLY ENROLLED IN A TRAINING PROGRAM (IS SECTION 8, Q. 11 CODED "YES" OR SECTION 9, Q. 3C OR 6D "STILL ENROLLED")?

YES 1 12/

NO 0

---

4. INTERVIEWER: IS R CURRENTLY EMPLOYED
OR
IS R ON ACTIVE DUTY (SEE **CALENDAR**, ROWS A & B)?

YES ..... (ASK A) 1 13/

NO ..... (GO TO Q. 5) 0

A. You told me earlier that you are working. At what time of the day did you usually begin and end work at your principal job most days last week? (IF R DID NOT WORK LAST WEEK, ASK FOR TIMES FOR THE MOST RECENT WEEK R WAS WORKING.)

INTERVIEWER RECORD:

Time usually began: _____ AM / MIDNIGHT PM / NOON (CIRCLE ONE) 14-17/

Time usually ended: _____ AM / MIDNIGHT PM / NOON (CIRCLE ONE) 18-21/

B. Do you usually work the same or fixed shift, or does your shift rotate (for example from days to evenings or nights)?

same or fixed shift 1 22/

shift rotates 2

5. INTERVIEWER: DOES R HAVE A SPOUSE OR PARTNER CURRENTLY LISTED ON THE HOUSEHOLD ENUMERATION ON THE **FACE SHEET**?

YES ..... (ASK A) 1 23/

NO ..... (SKIP TO Q.11) 0

A. Did your (husband/wife/partner) do any work for pay in the last 4 weeks?

Yes ..... (GO TO Q.6) 1 24/

No ..... (SKIP TO Q.11) 0

---

6. At what time of the day did your (husband/wife/partner) usually begin and end work at (his/her) principal job most days last week? (IF SPOUSE OR PARTNER DID NOT WORK LAST WEEK, ASK FOR TIME FOR THE MOST RECENT WEEK SPOUSE OR PARTNER WAS WORKING).

INTERVIEWER RECORD:

Time usually began _____ AM / MIDNIGHT PM / NOON (CIRCLE ONE) 25-28/

Time usually ended _____ AM / MIDNIGHT PM / NOON (CIRCLE ONE) 29-32/

---

7. Does your (husband/wife/partner) usually work the same or fixed shift, or does (his/her) shift rotate (for example from days to evenings or nights)?

same or fixed shift 1 33/

shift rotates 2

---

8. Does your (husband/wife/partner) work any hours when you are not working?

Yes ..... (GO TO Q.9) 1 34/

No ..... (SKIP TO Q.11) 0

9. In the past 4 weeks, who provided the most care for (YOUNGEST CHILD) during those hours when you were not working but your (husband/wife/partner) was? RECORD VERBATIM AND CODE ONE ONLY.

a. RESPONDENT 01 35-36/

b. CHILD'S BROTHER/SISTER 02

c. CHILD'S GRANDMOTHER 03

d. CHILD'S GRANDFATHER 04

e. OTHER RELATIVE OF CHILD 05

f. NON-RELATIVE OF CHILD 06

g. SPOUSE/PARTNER WORKS ONLY WHEN CHILD IS IN ELEMENTARY SCHOOL AND CARES FOR CHILD AFTER SCHOOL 07

h. SPOUSE/PARTNER WATCHES CHILD AT WORK.... 08

i. SPOUSE/PARTNER WORKS AT HOME..... 09

j. CHILD CARES FOR SELF..... 10

(1) INTERVIEWER: IS 07-10 CODED FOR CARE PROVIDER?

YES ..... (SKIP TO Q.11) 1 37/

NO ..... (GO TO Q.10) 0

10. Where was this care usually provided? RECORD VERBATIM AND CODE ONLY ONE.

a. CHILD'S HOME 1 38/

b. OTHER PRIVATE HOME 2

c. NURSERY, PRESCHOOL, OR KINDERGARTEN 3

d. DAY/GROUP CARE CENTER AT SPOUSE'S WORK PLACE 4

e. DAY/GROUP CARE CENTER NOT AT SPOUSE'S WORK PLACE 5

f. OTHER ARRANGEMENTS (SPECIFY) .. 6

(GO TO Q.11)

11. INTERVIEWER: IS ANY "YES" CODED IN Q. 2, Q. 3, OR Q. 4?

YES ..... [GO TO Q. 12 AND ASK ABOUT CHILDCARE WHILE R IS (IN SCHOOL/IN TRAINING/WORKING)].. 1 39/

NO ..... (SKIP TO Q. 24) 0

---

12. Parents use different types of childcare such as a day care center or care provided by a relative while they are (in school/in training/working) and the child is not in regular school.

In the past 4 weeks (or in the most recent month that you have worked), how many different types of childcare arrangements did you use for (YOUNGEST CHILD) while you were (in school/in training/working) and (he/she) was not in elementary school (or higher).

1 type 1 40/

2 types 2

3 types or more 3

Does not apply (SKIP TO Q.24).. 4

13. INTERVIEWER: IF MORE THAN ONE TYPE OF CHILDCARE IS CODED IN Q. 12, FIRST ASK QS. 13-18 FOR PRINCIPAL CARE PROVIDER.

In the past 4 weeks, or in the most recent month that you have worked, (who/who else) provided most of the care for (YOUNGEST CHILD) while you were (in school/training/working) and (he/she) was not in school? RECORD VERBATIM AND CODE ONLY ONE PER COLUMN.

	Principal Care Provider		Secondary Care Provider	
a. CHILD'S OTHER PARENT/STEP-PARENT	01	41-42/	01	44-45/
b. CHILD'S BROTHER/SISTER	02		02	
c. CHILD'S GRANDMOTHER	03		03	
d. CHILD'S GRANDFATHER	04		04	
e. OTHER RELATIVE OF CHILD	05		05	
f. RESPONDENT'S PARTNER	11		11	
g. NON-RELATIVE OF CHILD	06		06	
h. R (GOES TO SCHOOL/IS IN TRAINING/ WORKS) ONLY WHEN CHILD IS IN ELEMENTARY SCHOOL AND CARES FOR CHILD AFTER SCHOOL	07		07	
i. R WATCHES CHILD AT (SCHOOL/ TRAINING/WORK)	08		08	
j. R (GOES TO SCHOOL/TRAINS/WORKS) AT HOME	09		09	
k. CHILD CARES FOR SELF	10		10	

(1) INTERVIEWER:

IS 07-10 CODED FOR PRINCIPAL CARE PROVIDER?	IS 07-10 CODED FOR SECONDARY CARE PROVIDER?
YES .. (SKIP TO Q. 15) ..1 43/	YES .(SKIP TO Q. 15). 1 46/
NO ... (GO TO Q. 14) 0	NO ..(GO TO Q. 14) .. 0

14. Where was this care usually provided? RECORD VERBATIM AND CODE ONLY ONE PER COLUMN.

	Principal Care Provider	Secondary Care Provider
a. CHILD'S HOME	1 47/	1 48/
b. OTHER PRIVATE HOME	2	2
c. NURSERY, PRESCHOOL, OR KINDERGARTEN	3	3
d. DAY/GROUP CARE CENTER AT R'S WORKPLACE	4	4
e. DAY/GROUP CARE CENTER NOT AT R'S WORKPLACE	5	5
f. OTHER ARRANGEMENTS (SPECIFY) _____	6	6

15. How many hours per week was this care usually provided for (YOUNGEST CHILD)? Include care-time only while you were (in school/in training/working).

	Principal Care Provider	Secondary Care Provider
ENTER # OF HOURS PER WEEK:	|__|__| 49-50/	|__|__| 51-52/

16. Between what hours of the day was this care usually provided while you were (in school/in training/working)?

Principal Care Provider

INTERVIEWER RECORD:

Time usually began: _____ AM / MIDNIGHT PM / NOON (CIRCLE ONE) 53-56/

Time usually ended: _____ AM / MIDNIGHT PM / NOON (CIRCLE ONE) 57-60/

OR IF R CAN'T ANSWER BECAUSE HOURS VARY TOO MUCH, CHECK BOX: |___| 61/

Secondary Care Provider

INTERVIEWER RECORD:

Time usually began: _____ AM / MIDNIGHT PM / NOON (CIRCLE ONE) 62-65/

Time usually ended: _____ AM / MIDNIGHT PM / NOON (CIRCLE ONE) 66-69/

OR IF R CAN'T ANSWER BECAUSE HOURS VARY TOO MUCH, CHECK BOX: |___| 70/

17. INTERVIEWER: IS Q.13 CODED 03, 04, 05, OR 06?

YES ..... (GO TO Q.18) 1 71/

NO ..... (SKIP TO Q.19) 0

---

18. Did you or someone else in your family usually pay for this (PRINCIPAL/ SECONDARY) care either in cash or in a noncash arrangement such as providing meals, transportation, or exchanging other services?

	Principal Care Provider		Secondary Care Provider	
A. No	0	72/	0 (GO TO Q.20)	73/
Yes-SPECIFY--->				
Cash payment only	1		1	
Both cash and noncash	2		2	
Noncash arrangement only	3		3 (GO TO Q.20)	

---

19. INTERVIEWER: DOES R USE MORE THAN ONE TYPE OF CHILDCARE (IS CODE "2" OR "3" CODED IN Q. 12)?

YES ... (RE-ASK QS. 13-18 FOR SECONDARY CARE) 1 74/

NO .... (GO TO Q. 20) 0

---

20. INTERVIEWER: IS GRANDMOTHER CODED FOR PRINCIPAL OR SECONDARY CARE PROVIDER (Q.13 IS CODED 03)?

YES ..... (ASK Q.21) 1 75/

NO ..... (SKIP TO Q.24) 0

---> INTERVIEWER NOTE: IF GRANDMOTHER IS CODED FOR BOTH PRINCIPAL AND SECONDARY CARE, ASK ABOUT PRINCIPAL GRANDMOTHER IN QS.21-23.

---

21. Has (YOUNGEST CHILD'S) grandmother worked in the last 4 weeks?

Yes ..... (ASK Q.22) 1 76/

No .....(SKIP TO Q.24) 0

22. At what time of day did (YOUNGEST CHILD'S) grandmother usually begin and end work at her principal job most days last week? (IF GRANDMOTHER DID NOT WORK LAST WEEK, ASK FOR TIMES FOR THE MOST RECENT WEEK GRANDMOTHER WAS WORKING).

INTERVIEWER RECORD:

Time usually began: _____ AM / MIDNIGHT PM / NOON (CIRCLE ONE) 10-13/

Time usually ended: _____ AM / MIDNIGHT PM / NOON (CIRCLE ONE) 14-17/

---

23. Does (YOUNGEST CHILD'S) grandmother usually work the same or fixed shift, or does her shift rotate (for example from days to evenings or nights)?

same or fixed shift 1 18/

shift rotates 2

---

24. INTERVIEWER: IS RESPONDENT MALE OR FEMALE?

Male ..(**SKIP TO SECTION 12**)... 1 19/

Female .. (GO TO Q.25) 2

---

25. INTERVIEWER: IS R CURRENTLY IN REGULAR SCHOOL (THIS SECTION, Q.2 CODED "1")?

YES ..... (ASK A) 1 20/

NO ..... (ASK B) 0

A. If you could find (additional) satisfactory childcare at a reasonable cost, would you go to school more hours?

Yes ..... (GO TO Q.26) 1 21/

No ..... (GO TO Q.26) 0

B. If you could find (additional) satisfactory childcare at a reasonable cost, would you be going to school?

Yes 1 22/

No 0

26. INTERVIEWER: IS R IN A TRAINING PROGRAM (THIS SECTION, Q. 3 CODED "YES")?

YES ..... (ASK A) 1 23/

NO ..... (ASK B) 0

A. If you could find (additional) satisfactory childcare at a reasonable cost, would you spend more hours in job training?

Yes ..... (GO TO Q.27) 1 24/

No ..... (GO TO Q.27) 0

B. If you could find (additional) satisfactory childcare at a reasonable cost, would you be in a job training program?

Yes 1 25/

No 0

---

27. INTERVIEWER: IS R CURRENTLY EMPLOYED OR IN ACTIVE FORCES (THIS SECTION, Q.4 CODED "YES")?

YES ..... (ASK A) 1 26/

NO ..... (GO TO Q.28) 0

A. If you could find (additional) satisfactory childcare at a reasonable cost, would you work more hours?

Yes .. **(SKIP TO SECTION 12)** .. 1 27/

No ... **(SKIP TO SECTION 12)** .. 0

---

28. INTERVIEWER: IS R CURRENTLY UNEMPLOYED AND LOOKING FOR WORK (SECTION 5, Q. 14 CODED 2-9)?

YES ..... (ASK A) 1 28/

NO ..... (ASK B) 0

A If you could find (additional) satisfactory childcare at a reasonable cost, would you be looking for more hours of work than you're currently looking for?

Yes ..... (GO TO Q.29) 1 29/

No ..... (GO TO Q.29) 0

B. If you could find (additional) satisfactory childcare at a reasonable cost, would you be looking for work?

Yes 1 30/

No 0

---

29. Have you had to turn down a job offer in the last 4 weeks because of difficulties in arranging for childcare for any of your (child/children)?

Yes 1 31/

No 0

SECTION 12: ON HEALTH

1. INTERVIEWER: ARE Q. 20 AND Q. 24, SECTION 5 BOTH BLANK?

OR WAS R ON ACTIVE DUTY IN THE ACTIVE FORCES LAST WEEK: (SEE ROW A ON **CALENDAR**).

YES ..... (GO TO Q. 2) 1 32/

NO ..... (ASK A) 0

A. IF NO: Would your health keep you from working on a job for pay now?

Yes ..... (GO TO Q. 4) 1 33/

No 0

---

2. A. (Are you/Would you be) limited in the kind of work you (could) do on a job for pay because of your health?

Yes 1 34/

No 0

B. (Are you/Would you be) limited in the amount of work you (could) do because of your health?

Yes 1 35/

No 0

---

3. INTERVIEWER: SEE QS. 2A & 2B. IS ANY "YES" ANSWER CODED IN THESE QUESTIONS?

YES 1 36/

NO ..... (**SKIP TO SECTION 13**) 0

---

4. Since what month and year have you had this limitation?

ENTER MONTH: |_|_|_| 37-38/

AND

YEAR: 19 |_|_|_| 39-40/

OR

IF VOLUNTEERED: All my life..... 0000

SECTION 13: ALCOHOL USE

1. Next I'd like to ask you some questions about drinking alcoholic beverages, including beer, wine, and liquor. Have you ever had a drink of an alcoholic beverage?

Yes	1	41/
No ..... (SKIP TO Q.15)	0	

---

2. Have you had any alcoholic beverages, including beer, wine, or liquor, during the last 30 days?

Yes ..... (GO TO Q.3).....	1	42/
No ..... (ASK A AND B)	0	

A. Has drinking ever interfered with your school work?

Yes	1	43/
No	0	

B. Has drinking ever interfered with your work on a job?

Yes	1	44/
No	0	

SKIP TO Q.15

---

3. How often have you had 6 or more drinks on one occasion during the last 30 days? Would you say it was .... (READ CATEGORIES) .....?

HAND CARD JJ

10 or more times	6	45/
8 or 9 times	5	
6 or 7 times	4	
4 or 5 times	3	
2 or 3 times	2	
Once	1	
Never	0	

4. During the last 30 days, on how many days did you drink any alcoholic beverages, including beer, wine, or liquor?

ENTER # OF DAYS: |__|__| 46-47/

5. Of the (NUMBER OF DAYS IN Q. 4) days you mentioned, on how many of those days did you have only 1 drink? On how many of those days did you have only 2 drinks? (REPEAT QUESTION FOR ALL CATEGORIES AS NECESSARY)

HAND CARD KK

. . .only 1 drink?	ENTER # OF DAYS:	|__|__|	48-49/
. . .only 2 drinks?	ENTER # OF DAYS:	|__|__|	50-51/
. . .only 3 drinks?	ENTER # OF DAYS:	|__|__|	52-53/
. . .only 4 drinks?	ENTER # OF DAYS:	|__|__|	54-55/
. . .only 5 drinks?	ENTER # OF DAYS:	|__|__|	56-57/
. . .6 or more drinks?	ENTER # OF DAYS:	|__|__|	58-59/
	+		
TOTAL # OF DAYS =		|__|__|	60-61/

A. INTERVIEWER: DOES TOTAL # OF DAYS OF Q. 5 = # OF DAYS IN Q. 4?

YES..... 1

NO...(RECHECK Q.4 AND Q.5 WITH R).... 0

6. How often in the last 30 days did you go to bars, taverns, or cocktail lounges? Did you go ... (READ CATEGORIES) ...? (INTERVIEWER: DO NOT INCLUDE RESTAURANTS)

HAND CARD LL

Almost every day	5	62/
Several times a week	4	
Once or twice a week	3	
2-3 times during the month	2	
Once this month	1	
Never	0	

7. During the last 30 days, on how many days have you had a hangover that interfered with your activities the next day?

ENTER # OF DAYS: |__|__|__| 63-64/

Never 00

Next, I'd like some information about drinking alcoholic beverages, including beer, wine, and liquor, during the past week.

8. During the last seven days ending with yesterday, on how many days did you drink alcoholic beverages? 65-66/

1 day 01
2 days 02
3 days 03
4 days 04
5 days 05
6 days 06
7 days 07
None .....(SKIP TO Q. 12)..... 00

---

9. During the last seven days, how many cans or bottles of beer did you have? 67-68/

ENTER NUMBER OF CANS OR BOTTLES: |__|__|

None 00

---

10. During the last seven days, how many glasses of wine did you have? 69-70/

ENTER NUMBER OF GLASSES: |__|__|

None 00

---

11. During the last seven days, how many drinks did you have containing liquor, such as whiskey, vodka, gin, brandy, etc.? 71-72/

ENTER NUMBER OR DRINKS: |__|__|

None 00

12. A. Has drinking ever interfered with your school work? 73/

Yes 1
No 0

B. Has drinking ever interfered with your work on a job? 74/

Yes 1
No 0

3. Now I would like to ask you some questions about experiences that many people have had with drinking. During the past year . . .

		YES	NO	
A.	Have you felt aggressive or cross while drinking?	1	0	75/
B.	Have you gotten into a heated argument while drinking?	1	0	76/
C.	Have you gotten into a fight while drinking?	1	0	77/
D.	Have you deliberately tried to cut down or quit drinking, but didn't manage to do so?	1	0	78/
E.	Were you afraid you might be an alcoholic or that you might become one?	1	0	79/
F.	Once you started drinking, was it difficult for you to stop before you became completely intoxicated?	1	BEGIN DECK 53 0	10/
G.	Have you awakened the next day not being able to remember things you had done while drinking?	1	0	11/
H.	Have you often taken a drink the first thing when you got up in the morning?	1	0	12/
I.	Have your hands shaken a lot the morning after drinking?	1	0	13/
J.	Have you sometimes gotten high or tight when drinking by yourself?	1	0	14/
K.	Have you sometimes kept on drinking after promising yourself not to?	1	0	15/

---

4. INTERVIEWER: HAS R WORKED IN THE PAST YEAR (HAVE LINES BEEN DRAWN IN ROWS A OR B OF THE **CALENDAR**)?

Yes ..... (ASK A-E) 1 16/

No ..... (GO TO Q.15) 0

A.	Have you stayed away from work because of a hangover?	1	0	17/
B.	Have you gotten high or tight when on the job?	1	0	18/
C.	Have you lost a job, or nearly lost one, because of drinking?	1	0	19/
D.	Has drinking led to your quitting a job?	1	0	20/
E.	Has drinking hurt your chances for promotion or raises or a better job?	1	0	21/

---

5. INTERVIEWER: WAS ANYONE ELSE PRESENT OTHER THAN SMALL CHILDREN WHEN YOU ASKED THE QUESTIONS IN SECTION 13?

YES 1 22/

NO 0

PHONE INTERVIEW 2

PLEASE GO ON TO NEXT PAGE ---------->

SECTION 14 - DRUGS

In this section, we would like to ask about your experiences, if any, smoking cigarettes and using marijuana and other drugs. Currently, there is little accurate information on the actual experiences of people your age. Remember, as is true with all portions of this interview, the answers you give will remain strictly confidential and will not be associated with your name in any way.

READ AS APPROPRIATE: We also have a legal Certificate of Confidentiality that protects you. Authorities cannot gain access to your replies.

---

1. About how old were you when you first tried a cigarette?

ENTER AGE IN YEARS |__|__| 23-24/

OR

I never tried a cigarette ... (SKIP TO Q.4) ... 00

---

2. When was the most recent time you had a cigarette? Was it . . .
(READ CATEGORIES BELOW AND CODE ONE ONLY)

Within the past 30 days ..... (GO TO Q.3) 1 25/

More than 30 days ago but within the past six months ... (SKIP TO Q.4) .. 2

Six months to a year ago ..... (SKIP TO Q.4) .. 3

More than a year ago ..... (SKIP TO Q.4) .. 4

---

3. During the past 30 days, how many cigarettes or packs of cigarettes have you smoked per day? Give me the average number per day. Was it . . .
(READ CATEGORIES AND CODE ONE ONLY).

Less than one cigarette per day 1 26/

One to five cigarettes per day 2

About 1/2 pack per day ..(6-15 cigarettes) 3

About one pack per day ..(16-25 cigarettes) ... 4

About one and one-half packs per day (26-35 cigarettes)..... 5

Two packs or more per day (over 35 cigarettes). 6

---

4. In your lifetime, on how many occasions have you ever used marijuana or hashish?
(PROBE: Just your best estimate)

HAND CARD MM

1,000 or more occasions 5 27/

100-999 occasions 4

40-99 occasions 3

10-39 occasions 2

1-9 occasions 1

Never used .....(SKIP TO Q.10)..... 0

5. When did you use marijuana or hashish for the first time? In what month and year?

MONTH: |__|__| 28-29/

AND

YEAR: 19 |__|__| 30-31/

IF DON'T KNOW, ASK: How old were you then?

ENTER AGE |__|__| 32-33/

---

6. And when was the most recent time you used marijuana or hashish? In what month and year was that?

MONTH: |__|__| 34-35/

AND

YEAR: 19 |__|__| 36-37/

INTERVIEWER: IF CURRENT MONTH OR LAST MONTH IS ENTERED, ASK Q.7. OTHERWISE, SKIP TO Q.8.

---

7. During the past 30 days, on how many occasions have you used marijuana or hashish?

HAND CARD NN

40 or more occasions	6	38/
20-39 occasions	5	
10-19 occasions	4	
6-9 occasions	3	
3-5 occasions	2	
1-2 occasions	1	
None	0	

SKIP TO Q.9

---

8. INTERVIEWER: HAS RESPONDENT USED MARIJUANA OR HASH SINCE JANUARY 1, 1979? (SEE DATE ENTERED AT Q.6, ABOVE).

YES	1	39/
NO ..... (SKIP TO Q.10)	0	

---

9. Thinking about your use of marijuana or hashish from (January 1, 1979/MONTH AND YEAR RECORDED AT Q.5, IF LATER THAN JANUARY 1, 1979) until the present, please tell me in which months you used marijuana or hashish. Let me show you this time grid.

40/

A. INTERVIEWER: SHOW R TIME GRID ON OPPOSITE PAGE. DRAW ARROWS ON GRID NEXT TO MONTHS AND YEARS RESPONDENT USED MARIJUANA OR HASHISH. ------> THEN ANSWER Q.9B.

9. (continued)

---------->

	Jan.	1	41/
	Feb.	2	42/
	March	3	43/
	April	4	44/
	May	5	45/
	June	6	46/
1979	July	1	47/
	Aug.	2	48/
	Sept.	3	49/
	Oct.	4	50/
	Nov.	5	51/
	Dec.	6	52/
	Jan.	1	53/
	Feb.	2	54/
	March	3	55/
	April	4	56/
	May	5	57/
	June	6	58/
1980	July	1	59/
	Aug.	2	60/
	Sept.	3	61/
	Oct.	4	62/
	Nov.	5	63/
	Dec.	6	64/
	Jan.	1	65/
	Feb.	2	66/
	March	3	67/
	April	4	68/
	May	5	69/
	June	6	70/
1981	July	1	71/
	Aug.	2	72/
	Sept.	3	73/
	Oct.	4	74/
	Nov.	5	75/
	Dec.	6	76/ BEGIN DECK 54
	Jan.	1	10/
	Feb.	2	11/
	March	3	12/
	April	4	13/
	May	5	14/
1982	June	6	15/
	July	1	16/
	Aug.	2	17/
	Sept.	3	18/
	Oct.	4	19/
	Nov.	5	20/
	Dec.	6	21/
	Jan.	1	22/
	Feb.	2	23/
	March	3	24/
	April	4	25/
	May	5	26/
1983	June	6	27/
	July	1	28/
	Aug.	2	29/
	Sept.	3	30/
	Oct.	4	31/
	Nov.	5	32/
	Dec.	6	33/
	Jan.	1	34/
	Feb.	2	35/
	March	3	36/
1984	April	4	37/
	May	5	38/
	June	6	39/
	July	1	40/

9B. INTERVIEWER: ANY USE IN PAST 12 MONTHS? (REFER TO GRID. EXCLUDING CURRENT MONTH, COUNT BACKWARDS 12 MONTHS.)

-----> YES 1 41/

NO 0

GO TO Q.10 NEXT PAGE

10. Please look at this card. Have you ever used any of these drugs on your own, without a doctor telling you to take them, to get high or enjoy the feeling? These include . . . (READ EACH MAIN CATEGORY, a-i BELOW, AND CODE "YES" OR "NO")

HAND CARD OO

ASK B-D, FOR EACH "YES" AT Q.10.
B. In your lifetime, on how many occasions have you ever used (DRUG USED AT Q.10) (on your own without a doctor telling you to take it)?

HAND CARD PP

ASK C FOR EACH DRUG USED AT Q.10
C. How old were you the first time you used (DRUG USED AT Q.10) (on your own, without a doctor telling you to take it)?

	YES	NO	1,000+ occasions	100-999	40-99	10-39	1-9		AGE	
a. Amphetamines or Stimulants on your own, like Uppers, Speed, Bennies, Diet pills	1	0	42/	5	4	3	2	1	43/	|__|__| 44-45/
b. Barbiturates or Sedatives on your own, like Downers, Reds, Yellows, Quaaludes, Seconal	1	0	46/	5	4	3	2	1	47/	|__|__| 48-49/
c. Tranquilizers on your own, like Librium, Valium	1	0	50/	5	4	3	2	1	51/	|__|__| 52-53/
d. Psychedelics like LSD, PCP, Mescaline, Peyote, Angel dust	1	0	54/	5	4	3	2	1	55/	|__|__| 56-57/
e. Cocaine	1	0	58/	5	4	3	2	1	59/	|__|__| 60-61/
f. Heroin	1	0	62/	5	4	3	2	1	63/	|__|__| 64-65/
g. Other Narcotics on your own like Codeine, Demerol, Morphine, Methadone, Darvon, Opium	1	0	66/	5	4	3	2	1	67/	|__|__| 68-69/
h. Inhalants like glue, aerosols, or poppers	1	0	70/	5	4	3	2	1	71/	|__|__| 72-73/
i. OTHER (SPECIFY) _____	1	0	74/	5	4	3	2	1	75/	|__|__| 76-77/

10A. INTERVIEWER: DID RESPONDENT ANSWER "YES" FOR ANY DRUG ABOVE?

YES ..... [FOR EACH "YES," ASK B-D (AND E, IF INDICATED) FOR FIRST DRUG BEFORE ASKING ABOUT NEXT DRUG, IF ANY] ... 1

NO ..... (SKIP TO Q.11) 0

78/

ASK D FOR EACH DRUG USED AT Q.10.

D. When was the most recent time you used (DRUG USED AT Q.10) (on your own, without a doctor telling you to take it)? Was it ...
(READ CATEGORIES AND CODE ONE ONLY)

INTERVIEWER: FOR ANY DRUG USED WITHIN PAST 30 DAYS, ALSO ASK E.

BEGIN DECK 55

ASK E FOR ANY DRUG USED WITHIN THE PAST 30 DAY (ANY CODE "1" AT D).

E. During the past 30 days, on how many occasions have you used (DRUG CODED "1" AT D) (on your own, without a doctor telling you to take it)?

HAND CARD QQ

	Within the past 30 days	More than 30 days ago but within past six months	Six months to a year ago	More than a year ago		40 or more occasions	20-39	10-19	6-9	3-5	1-2	
a.	1	2	3	4	10/	6	5	4	3	2	1	11/
b.	1	2	3	4	12/	6	5	4	3	2	1	13/
c.	1	2	3	4	14/	6	5	4	3	2	1	15/
d.	1	2	3	4	16/	6	5	4	3	2	1	17/
e.	1	2	3	4	18/	6	5	4	3	2	1	19/
f.	1	2	3	4	20/	6	5	4	3	2	1	21/
g.	1	2	3	4	22/	6	5	4	3	2	1	23/
h.	1	2	3	4	24/	6	5	4	3	2	1	25/
i.	1	2	3	4	26/	6	5	4	3	2	1	27/

11. INTERVIEWER: HAS R USED MARIJUANA OR HASHISH IN THE PAST 12 MONTHS ("YES" AT Q.9B)? OR HAS R USED OTHER DRUGS IN PAST 12 MONTHS? (ANY CODES 1-3 AT Q.10D)?

YES ..... (GO TO Q.12) 1 28/

NO ..... (SKIP TO Q.14) 0

12. INTERVIEWER: HAVE YOU DRAWN ANY LINES ON ROWS A OR B OF THE **CALENDAR**?

YES ..... (GO TO Q.12A) 1 29/

NO ..... (SKIP TO Q.14) 0

12A. INTERVIEWER: REFER TO **CALENDAR**, ROWS A AND B. DETERMINE THE NATURE OF R'S MOST RECENT ACTIVITY.
WAS IT A CIVILIAN JOB? (IF SO, SUBSTITUTE NAME OF MOST RECENT EMPLOYER AT Q.13, BELOW)
OR
WAS IT ACTIVE DUTY IN ACTIVE FORCES? (IF SO, SUBSTITUTE "THE MILITARY" AT Q.13, BELOW)

13. At your job with (READ NAME OF MOST RECENT JOB/OR "THE MILITARY," FROM Q.12A ABOVE) since (READ DATE OF LAST INTERVIEW OR, DATE JOB/MILITARY BEGAN, IF MORE RECENT) did you use or feel high from any of the following during work time or on breaks?

ASK B FOR EACH "YES" AT A.
B. How often did you use or feel high from (DRUG USED AT A) during work time or on breaks? Was it . . . (HAND CARD AND CODE REPLY).

HAND CARD RR

Yes .....(ASK A) 1 30/

No ....(SKIP TO Q.14)..... 0

IF YES:

A. Tell me which ones . . .
CODE ALL THAT APPLY: THEN ASK B.

HAND CARD SS	Once a month or less	2-3 days per month	1-2 days per week	3-4 days per week	Almost every day
Marijuana or Hashish..... 01 31-32/	1	2	3	4	5 33/
Amphetamines or Stimulants on your own, like Uppers, Speed, Bennies, Diet pills..... 02 34-35/	1	2	3	4	5 36/
Barbiturates or Sedatives on your own, like Downers, Reds, Yellows, Quaaludes, Seconal..... 03 37-38/	1	2	3	4	5 39/
Tranquilizers, on your own like Librium, Valium, ... 04 40-41/	1	2	3	4	5 42/
Psychedelics, like LSD, PCP, Mescaline, Peyote, Angel Dust... 05 43-44/	1	2	3	4	5 45/
Cocaine..... 06 46-47/	1	2	3	4	5 48/
Heroin..... 07 49-50/	1	2	3	4	5 51/
Other Narcotics on your own like Codeine, Demerol, Morphine, Methadone, Darvon, Opium 08 52-53/	1	2	3	4	5 54/
Inhalants like glue, aerosols, or poppers 09 55-56/	1	2	3	4	5 57/

PLEASE GO ON TO NEXT PAGE ---------->

14. Please look at this card. Have you ever used any of these drugs prescribed for you by a doctor?

HAND CARD TT

Yes .....(ASK A)..... 1 58/

No ..(SKIP TO SECTION 15).... 0

A. IF YES, ASK: Tell me which ones . . . CODE ALL THAT APPLY.

a. Amphetamines or Stimulants.....1 59/
like Dexedrine, Benzedrine, Biphetamine

b. Barbiturates or Sedatives.....2 61/
like Seconal, Tuinal, Quaaludes

c. Tranquilizers 3 63/
like Librium, Valium

INTERVIEWER: ASK B (AND C, IF INDICATED) FOR FIRST DRUG USED. THEN ASK ABOUT NEXT DRUG, IF ANY.

ASK B FOR EACH "YES AT Q.14A.

B. When was the most recent time you used (DRUG USED AT Q.14) prescribed for you by a doctor? Was it . . .
(READ CATEGORIES AND CODE ONE ONLY)

INTERVIEWER: FOR ANY DRUG USED WITHIN THE PAST 30 DAYS, ALSO ASK C.

Within the past 30 days	More than 30 days ago but within past six months	Six months to a year ago	More than a year ago	
1	2	3	4	60/
1	2	3	4	62/
1	2	3	4	64/

INTERVIEWER: ASK C FOR ANY DRUG USED WITHIN THE PAST 30 DAYS (ANY CODE "1" AT B).

C. During the past 30 days, on how many occasions have you used (DRUG CODED "1" AT B) prescribed for you by a doctor?

HAND CARD UU

40 or more occasions	20-39	10-19	6-9	3-5	1-2	
6	5	4	3	2	1	65/
6	5	4	3	2	1	66/
6	5	4	3	2	1	67/

GO TO SECTION 15

SECTION 15: ON ASSETS AND INCOME

1. Now I would like to ask you some questions about your income in 1983.

A. During 1983, did you receive any income from service in the military?

Yes ..... (ASK B) 1 68/
No ..... (GO TO Q. 2) 0

B. IF YES: And how much total income did you receive during 1983 from the military before taxes and other deductions? Please include money received from special pays, allowances, and bonuses.

$ |_|_|_|_| , |_|_|_|_| .00 69-74/

BEGIN DECK 56

---

2. IF R EARNED ANY MONEY FROM THE MILITARY IN 1983, READ A. OTHERWISE, GO TO B.

A. Not counting any money you received from your military service ...

B. During 1983, how much did you receive from wages, salary, commissions, or tips from all (other) jobs, before deductions for taxes or anything else?

$ |_|_|_|_| , |_|_|_|_| .00 10-15/

OR

NONE 000000

---

3. (Excluding any income you already have mentioned) During 1983, did you receive any money in income . . .

A. from your own farm?

Yes 1 16/
No 0

B. from your own nonfarm business, partnership or professional practice?

Yes 1 17/
No 0

INTERVIEWER: IF A OR B IS CODED "YES," ASK C. OTHERWISE, GO TO Q. 4.

C. IF YES TO A OR B: How much did you receive after expenses?

$ |_|_|_|_| , |_|_|_|_| .00 18-23/

OR

NONE 000000

OR

DON'T KNOW 999998

4. During 1983, did you receive any unemployment compensation?

Yes ..... (ASK A-C) 1 24/

No ..... (GO TO Q. 5) 0

IF YES, ASK A-C:

A. SHOW R **CALENDAR.** ASK: In which months of 1983 did you receive unemployment compensation? CODE ALL THAT APPLY.

JANUARY	01	25-26/
FEBRUARY	02	27-28/
MARCH	03	29-30/
APRIL	04	31-32/
MAY	05	33-34/
JUNE	06	35-36/
JULY	07	37-38/
AUGUST	08	39-40/
SEPTEMBER	09	41-42/
OCTOBER	10	43-44/
NOVEMBER	11	45-46/
DECEMBER	12	47-48/

B. How many weeks in 1983 did you receive unemployment compensation?

ENTER NUMBER OF WEEKS: |__|__| 49-50/

C. How much did you receive per week on the average?

$ |__| , |__|__|__| .00 51-54/

---

5. INTERVIEWER: IS R CURRENTLY MARRIED AND IS R'S SPOUSE LISTED ON THE HOUSEHOLD ENUMERATION?

YES ..... (GO TO Q. 6) 1 55/

NO ..... (SKIP TO Q. 10) 0

---

6. IF R IS CURRENTLY MARRIED AND R'S SPOUSE IS LISTED ON THE HOUSEHOLD ENUMERATION, ASK:

A. During 1983, did your (husband/wife) receive any income from service (he/she) performed in the military?

Yes ..... (ASK B) 1 56/

No ..... (GO TO Q. 7) 0

B. IF YES: And how much total income did your (husband/wife) receive during 1983 from the military before taxes and other deductions? Please include money received from special pays, allowances, and bonuses.

$ |__|__|__|__| , |__|__|__|__| .00 57-62/

7. IF SPOUSE EARNED ANY MONEY FROM THE MILITARY IN 1983, READ A. OTHERWISE, GO TO B.

A. Not counting any money your (husband/wife) received from (his/her) military service ...

B. During 1983, how much did your (husband/wife) receive from wages, salary, commissions, or tips from all (other) jobs, before deductions for taxes or anything else?

$ |_|_|_|_| , |_|_|_|_| .00 63-68/

OR

NONE 000000

OR

DON'T KNOW 999998

---

8. [Now, please exclude any income you already have mentioned earned by your (husband/wife)]. (In addition to the income you received from your farm or your business, partnership, or professional practice,) During 1983, did your (husband/wife) receive any money in income ...

A. from (his/her) own farm?

Yes 1 69/
No 0
DON'T KNOW 8

B. from (his/her) own nonfarm business, partnership, or professional practice?

Yes 1 70/
No 0
DON'T KNOW 8

INTERVIEWER: IF A OR B IS CODED "YES," ASK C. OTHERWISE, GO TO Q. 9.

C. IF YES TO A OR B: How much did (he/she) receive after expenses?

$ |_|_|_|_| , |_|_|_|_| .00 71-76/

OR

NONE 000000

OR

DON'T KNOW 999998

---

9. During 1983, did your (husband/wife) receive any unemployment compensation?

Yes ..... (ASK A-C) 1 77/
No ..... (GO TO Q. 10) 0

9. (Continued)

IF YES, ASK A-C:

A. SHOW R **CALENDAR** AND ASK: In which months of 1983 did your (husband/wife) receive unemployment compensation? CODE ALL THAT APPLY.

JANUARY	01	10-11/
FEBRUARY	02	12-13/
MARCH	03	14-15/
APRIL	04	16-17/
MAY	05	18-19/
JUNE	06	20-21/
JULY	07	22-23/
AUGUST	08	24-25/
SEPTEMBER	09	26-27/
OCTOBER	10	28-29/
NOVEMBER	11	30-31/
DECEMBER	12	32-33/

B. During how many weeks in 1983 did your (husband/wife) receive unemployment compensation?

ENTER NUMBER OF WEEKS: |__|__|__| 34-35/

OR

DON'T KNOW 98

C. How much did (he/she) receive per week on the average?

$ |__|__|, |__|__|__|__| .00 36-39/

OR

DON'T KNOW 9998

---

10. INTERVIEWER: HAS R EVER BEEN MARRIED, SEPARATED, DIVORCED, OR WIDOWED? (SEE SECTION 2, Q.2 AND **INFORMATION SHEET**)?

YES ..... (ASK A) 1 40/
NO ..... (GO TO Q. 11) 0

A. During 1983, did you [or your (husband/wife)] receive any money from someone living outside this household for alimony?

Yes ..... (ASK B) 1 41/
No ..... (GO TO C) 0

B. How much did you [or your (husband/wife)] receive for alimony during 1983?

$ |__|__|__|__|, |__|__|__|__| .00 42-47/

C. During 1983, did you [or your (husband/wife)] pay any money to anyone for alimony?

Yes ..... (ASK D) 1 48/
No ..... (GO TO Q. 11) 0

D. How much did you [or your (husband/wife)] pay in 1983 for alimony?

$ |__|__|__|__|, |__|__|__|__| .00 49-54/

------> INTERVIEWER NOTE: IN QS.11-21, REFER TO R'S SPOUSE ONLY IF R IS CURRENTLY MARRIED AND SPOUSE IS LISTED ON **HOUSEHOLD ENUMERATION.**

11. INTERVIEWER: HAS R EVER (HAD/GIVEN BIRTH TO) A CHILD (SEE **CALENDAR.** IS CHECK MARK RECORDED IN FERTILITY CIRCLE?)

YES ..... (ASK A)..... 1 55/
NO ..... (GO TO Q. 12)..... 0

A. During 1983, did you [or your (husband/wife)] receive any money from someone living outside this household for child support?

Yes ..... (ASK B) 1 56/
No ..... (GO TO Q. 12) 0

B. How much did you [or your (husband/wife)] receive for child support during 1983?

$ |_|_|_|_| , |_|_|_|_| .00 57-62/

---

12. During 1983, did you [or your (husband/wife)] pay any money to anyone for child support for any child not living in this household?

Yes ..... (ASK A) 1 63/
No ..... (GO TO Q. 13)..... 0

A. How much did you [or your (husband/wife)] pay for child support during 1983?

$ |_|_|_|_| , |_|_|_|_| .00 64-69/

---

13. INTERVIEWER: IF ANYONE OTHER THAN R'S SPOUSE AND CHILDREN IS LISTED IN HOUSEHOLD ENUMERATION, READ A BELOW. OTHERWISE, GO TO B.

A. For these next few questions, we are interested in different kinds of payments that might have been made directly to you [or your (husband/wife)]. For these questions, please do not include any payments that were made to your parents or to other members of your family, even if the payments were used to help pay for your support.

B. During 1983, did you [or your (husband/wife)] receive any payments from Aid to Families with Dependent Children--AFDC?

Yes ..... (ASK C & D) 1 70/
No ..... (GO TO Q. 14) 0

IF YES, ASK C & D:

C. In which months of 1983 did you [or your (husband/wife)] receive AFDC payments? CODE ALL THAT APPLY. BEGIN DECK 58

JANUARY 01 10-11/
FEBRUARY 02 12-13/
MARCH 03 14-15/
APRIL 04 16-17/
MAY 05 18-19/
JUNE 06 20-21/
JULY 07 22-23/
AUGUST 08 24-25/
SEPTEMBER 09 26-27/
OCTOBER 10 28-29/
NOVEMBER 11 30-31/
DECEMBER 12 32-33/

D. During 1983, how much did you [or your (husband/wife)] receive per month on the average from AFDC?

$ |_|_| , |_|_|_|_| 00 34-37/

OR

DON'T KNOW 9998

14. During 1983, did you [or your (husband/wife)] receive any food stamps under the government's Food Stamp Plan?

Yes ..... (ASK A & B)	1	38/
No ..... (GO TO Q. 15)	0	

IF YES, ASK A & B:

A. In which months of 1983 did you [or your (husband/wife)] receive food stamps? CODE ALL THAT APPLY.

JANUARY	01	39-40/
FEBRUARY	02	41-42/
MARCH	03	43-44/
APRIL	04	45-46/
MAY	05	47-48/
JUNE	06	49-50/
JULY	07	51-52/
AUGUST	08	53-54/
SEPTEMBER	09	55-56/
OCTOBER	10	57-58/
NOVEMBER	11	59-60/
DECEMBER	12	61-62/

B. How many dollars worth of food stamps did you [or your (husband/wife)] receive during (MOST RECENT MONTH CODED IN A)?

$ |__|__| , |__|__|__|__| .00 63-66/

---

15. [Besides the (AFDC) (and) (food stamps),] During 1983, did you [or your (husband/wife)] receive any Supplemental Security Income?

Yes ..... (ASK A & B)	1	67/
No ..... (GO TO Q. 16)	0	

IF YES, ASK A & B:

A. In which months of 1983 did you [or your (husband/wife)] receive any Supplemental Security Income? CODE ALL THAT APPLY. BEGIN DECK 59

JANUARY	01	10-11/
FEBRUARY	02	12-13/
MARCH	03	14-15/
APRIL	04	16-17/
MAY	05	18-19/
JUNE	06	20-21/
JULY	07	22-23/
AUGUST	08	24-25/
SEPTEMBER	09	26-27/
OCTOBER	10	28-29/
NOVEMBER	11	30-31/
DECEMBER	12	32-33/

B. And how much did you [or your (husband/wife)] receive per month, on the average, during 1983?

$ |__|__| , |__|__|__|__| .00 34-37/

OR

DON'T KNOW 9998

16. [Besides the things you've already told me about, such as (AFDC,) (food stamps,) and (Supplemental Security Income,)] Did you [or your (husband/wife)] receive any public assistance or welfare payments from the local, state, or federal government?

Yes ..... (ASK A & B)	1	38/
No ..... (GO TO Q. 17)	0	

IF YES, ASK A & B:

A. In which months of 1983 did you [or your (husband/wife)] receive these payments? CODE ALL THAT APPLY.

JANUARY	01	39-40/
FEBRUARY	02	41-42/
MARCH	03	43-44/
APRIL	04	45-46/
MAY	05	47-48/
JUNE	06	49-50/
JULY	07	51-52/
AUGUST	08	53-54/
SEPTEMBER	09	55-56/
OCTOBER	10	57-58/
NOVEMBER	11	59-60/
DECEMBER	12	61-62/

B. And how much did you [or your (husband/wife)] receive per month, on the average, during 1983?

$ |__|__| , |__|__|__|__| . 00 63-66/

OR

DON'T KNOW 9998

---

17. A. During 1983, did you [or your (husband/wife)] receive any educational benefits for veterans under the G.I. Bill or V.E.A.P.?

Yes	1	67/
No	0	

B. During 1983, did you [or your (husband/wife)] receive any (other kinds of) scholarships, fellowships, or grants?

Yes	1	68/
No	0	

C. INTERVIEWER: IS ANY "YES" CODED IN Q. 17 A OR B?

YES ..... (GO TO Q. 18)	1	69/
NO ..... (SKIP TO Q. 19)	0	

IF NOT CURRENTLY MARRIED, CIRCLE CODE "1" IN Q. 18 WITHOUT ASKING.

OTHERWISE, ASK Q. 18.

18. Who received these benefits--you, your (husband/wife), or both of you?

Respondent only ..... (ASK A, COLUMN 1 ONLY) 1 70/

Respondent's spouse only . (ASK A, COLUMN 2 ONLY) 2

Respondent and spouse .... (ASK A, COLUMNS 1 & 2) 3

COLUMN 1 FOR RESPONDENT

A. What was the total dollar value of the assistance you received from these sources during 1983?

$ |_|_|_| , |_|_|_|_| .00

OR 71-75/

DON'T KNOW 99998

COLUMN 2 FOR R'S SPOUSE

What was the total dollar value of the assistance your (husband/wife) received from these sources during 1983?

BEGIN DECK 60

$ |_|_|_| , |_|_|_|_| .00

OR 10-14/

DON'T KNOW 99998

---

19. During 1983, did you [or your (husband/wife)] receive any (other) veterans benefits, worker's compensation, or disability payments?

Yes ..... (ASK A) 1 15/

No ..... (GO TO Q. 20) 0

A. IF YES: What was the total amount of these other veterans benefits, worker's compensation, or disability payments you [or your (husband/wife)] received during 1983?

$ |_|_|_| , |_|_|_|_| .00 16-20/

---

20. [(Besides any alimony and child support) (and) (besides any scholarship, fellowship, or grant) you have already told me about,] During 1983 ...

A. IF R LIVES IN DU: did you [or your (husband/wife)] regularly receive any money from persons living outside this household?

Yes ..... (ASK D) 1 21/

No ..... (GO TO Q. 21) 0

B. IF R LIVES IN A DORM, FRATERNITY, SORORITY, OR JAIL: did you [or your (husband/wife)] regularly receive any money from persons living outside your home in (CITY OF PERMANENT RESIDENCE)?

Yes ..... (ASK D) 1 22/

No ..... (GO TO Q. 21) 0

C. CONTINUED ON TOP OF FOLLOWING PAGE.

20. (Continued)

C. IF R LIVES IN MILITARY BARRACK, ABOARD SHIP, OR IN BACHELOR ENLISTED OR OFFICER QUARTERS:

did you regularly receive any money from any person?

Yes ..... (ASK D) 1 23/

No ..... (GO TO Q. 21) 0

IF YES TO A, B, OR C, ASK D.
D. How much did you receive from this source during 1983?

$ |_|_|_|_| , |_|_|_|_| .00 24-29/

OR

DON'T KNOW 999998

---

21. (Aside from the things you have already told me about,) During 1983, did you [or your (husband/wife)] receive any money, even if only a small amount, from any other source such as the ones on this card? For example: things like interest on savings, payments from Social Security, net rental income, or any other regular or periodic sources of income.

Yes ..... (ASK A) 1 30/

HAND CARD VV

No ..... (GO TO Q. 22) 0

A. IF YES: Altogether, how much did you [or your (husband/wife)] receive from these sources of income?

$ |_|_|_| , |_|_|_|_| .00 31-35/

OR

DON'T KNOW 99998

---

22. INTERVIEWER: DID YOU DO THE HOUSEHOLD ENUMERATION WITH A ...

▶ VERSION A (YELLOW).. **[SKIP TO Q. 33 (p.182)]** 1 36/

▶ VERSION B (TAN)..... **[SKIP TO Q. 33 (p.182)]** 2

VERSION C (LIME GREEN)..... 3

---

23. INTERVIEWER: **IF VERSION C,** DOES RESPONDENT LIVE WITH ANY RELATIVE OTHER THAN RESPONDENT'S SPOUSE AND CHILDREN?

YES ..... (GO TO Q. 24) 1 37/

NO ..... (SKIP TO Q. 29) 0

24. The next few questions are about the income received during 1983 by the other persons who live here who are related to you--that is,... (READ NAMES OF ALL PERSONS IN HOUSEHOLD WHO ARE RELATED TO RESPONDENT OTHER THAN R's SPOUSE AND CHILDREN.)

During 1983, did any of these persons receive (READ ITEMS). CODE "YES" OR "NO" FOR EACH ITEM.

	YES	NO	DON'T KNOW	
A. payments from Aid to families with Dependent Children? Please include any payments which these persons may have received to help pay for your (or your husband's/wife's) support.	1	0	8	38/
B. Supplemental Security Income, or any other public assistance or welfare from the local, state, or federal government?	1	0	8	39/
C. unemployment compensation or worker's compensation?	1	0	8	40/
D. Veterans Benefits?	1	0	8	41/

25. INTERVIEWER: IS ANY ITEM IN Q. 24 CODED YES (1)?

YES ..... (GO TO Q. 26) 1 42/

NO ..... (SKIP TO Q. 27) 0

IF YES TO Q. 25, ASK:

26. What was the total income received by (READ NAMES OF ADULTS WHO ARE RELATED TO R OTHER THAN R'S SPOUSE AND CHILDREN) from (READ ALL SOURCES CODED "YES" ABOVE IN Q. 24) during 1983 - before taxes and other deductions?

$ |_|_|_|_| , |_|_|_|_| .00 43-48/

OR

DON'T KNOW 999998

27. And did any of these persons receive in 1983 ... (READ ITEMS)...?
CODE "YES" OR "NO" FOR EACH:

	YES	NO	DON'T KNOW	
A. income from a full or part-time job?	1	0	8	49/
B. net income from their own farm?	1	0	8	50/
C. net income from their own non-farm business, partnership or professional practice?	1	0	8	51/
D. income from Social Security or pensions?	1	0	8	52/
E. income from any other regular or periodic sources?	1	0	8	53/

28. INTERVIEWER: IS ANY ITEM IN Q. 27 CODED YES (1)?

YES ..... (ASK A) 1 54/

NO ..... (GO TO Q. 29) 0

IF YES TO Q. 28, ASK A:

A. What was the total income received by (READ NAMES OF ADULTS WHO ARE RELATED TO R OTHER THAN R'S SPOUSE AND CHILDREN) from (READ ALL SOURCES CODED "YES" ABOVE IN Q. 27) during 1983 - before taxes and other deductions?

$ |_|_|_|_| , |_|_|_|_| .00 55-60/

OR

DON'T KNOW 999998

29. INTERVIEWER: DOES RESPONDENT CURRENTLY LIVE WITH A PARTNER OF THE OPPOSITE SEX (Q. 7B ON HOUSEHOLD ENUMERATION CODED "YES")?

YES ..... (ASK Q. 30) 1 61/

NO ..... (SKIP TO Q. 33) 0

30. During 1983, did ..(READ NAME OF PARTNER ON HH ENUMERATION) ..receive (READ CATEGORIES) ...? CODE "YES" OR "NO" FOR EACH ITEM.

	YES	NO	DON'T KNOW	
A. income from a full or part-time job?	1	0	8	62/
B. net income from (his/her) own farm?	1	0	8	63/
C. net income from (his/her) own nonfarm businsess partnership or professional practice?	1	0	8	64/
D. payments from Aid to Families with Dependent Children?	1	0	8	65/
E. Supplemental Security Income, or any other public assistance or welfare from the local, state, or federal government?	1	0	8	66/
F. unemployment compensation or worker's compensation?	1	0	8	67/
G. income from Social Security or pensions?	1	0	8	68/
H. income from any other regular or periodic sources?	1	0	8	69/

31. INTERVIEWER: IS ANY ITEM IN Q. 30 CODED "YES" (1)?

YES ..... (ASK Q. 32) 1 70/

NO ..... (SKIP TO Q. 33) 0

IF YES TO Q. 31, ASK:

32. Counting the income from all of these sources--that is,..(READ ALL SOURCES CODED "YES" ABOVE IN Q. 30) what was the total income received by (PARTNER) during 1983--before taxes and other deductions?

$ |_|_|_|_| , |_|_|_|_| .00 71-76/

OR

DON'T KNOW 999998

-------> INTERVIEWER NOTE: IN QS.33-41, REFER TO R'S SPOUSE ONLY IF R IS CURRENTLY MARRIED AND SPOUSE IS LISTED ON **HOUSEHOLD ENUMERATION.**

33. During 1983, did anyone [other than your (husband/wife)] pay at least half of your living expenses?

Yes 1 10/

No ..... (GO TO Q. 34) 0

A. INTERVIEWER: IS R LIVING IN A MILITARY BARRACK, ABOARD SHIP, OR IN BACHELOR ENLISTED OR OFFICER QUARTERS?

YES ..... (GO TO C) 1 11/

NO 0

B. Does this person live [here in this household/in your home at (CITY OF PERMANENT RESIDENCE)]?

Yes ..... (GO TO Q. 34) 1 12/

No 0

C. What is this person's relationship to you?

RELATIONSHIP TO RESPONDENT: _____ |_|_|_| OFFICE USE 13-14/

D. During 1983, what was the total income of (SOURCE OF SUPPORT) and all family members living with (him/her) before taxes or other deductions?

$ |_|_|_|_| , |_|_|_|_| .00 15-20/

OR

DON'T KNOW 999998

---

34. Do you [or your (husband/wife)] pay at least half of the living expenses of any other person [including your (child/children) but] not counting (yourself/yourselves)?

Yes ..... (ASK A) 1 21/

No ..... (SKIP TO Q. 40) 0

A. IF YES: Not counting (yourself/yourselves), how many persons are dependent upon you [or your (husband/wife)] for at least one-half of their support?

NUMBER OF DEPENDENTS: |_|_|_| 22-23/

---

35. INTERVIEWER: DID YOU DO A HOUSEHOLD ENUMERATION WITH . . .

VERSION B (TAN)..... 1 24/

VERSION A (YELLOW)
OR C (LIME GREEN) ..... (SKIP TO Q.38) 0

36. INTERVIEWER: IS R LIVING IN A MILITARY BARRACK, ABOARD SHIP, OR IN BACHELOR ENLISTED OR OFFICER QUARTERS?

YES ..... (ANSWER A) 1 25/

NO ..... (GO TO Q. 37) 0

A. IF YES, INTERVIEWER: IS R CURRENTLY MARRIED?

YES 1 26/

NO ..... (SKIP TO Q. 39) 0

---

37. Do any of these dependents live somewhere other than at your home in (CITY OF PERMANENT RESIDENCE)?

Yes ..... (SKIP TO Q. 39) 1 27/

No ..... (SKIP TO Q. 40) 0

---

38. Do any of these dependents live somewhere other than here at home with you?

Yes 1 28/

No ..... (SKIP TO Q. 40) 0

---

39. INTERVIEWER: HOW MANY DEPENDENTS ARE ENTERED AT Q.34A?

ONE ..... (ASK A) 1

MORE THAN ONE ... (ASK B) 2

A. IF ONE, ASK:

Is this dependent your own (or your husband's/wife's) child?

Yes ...(GO TO Q.40)... 1 29/

No ....(GO TO Q.40)... 0

B. IF MORE THAN ONE, ASK:

How many of these dependents are your own (or your husband's/wife's) children?

ENTER NUMBER: | | | 30-31/

IF R LIVES IN A HOUSE OR APARTMENT, ASK Q. 40; OTHERWISE, SKIP TO SECTION 16.

40. Is this (house/apartment) owned or being bought in your name [or in your (husband's/wife's) name]?

Yes ..... **(SKIP TO SECTION 16)** 1 32/

No ..... (GO TO Q. 41) 0

---

41. A. During any part of 1983, did you live in public housing?

Yes 1 33/

No 0

B. During any part of 1983, did you (IF R LIVES WITH RELATIVES: and your family) receive a rent subsidy or pay a lower rent because the federal, state or local government was paying part of the cost?

Yes 1 34/

No 0

SECTION 16: ON ASPIRATIONS AND EXPECTATIONS

1. And now we have a question about the future. What would you like to be doing when you are 35 years old? RECORD VERBATIM AND CODE ONE ONLY.

_____

_____

_____

CODE SMALLEST NUMBER MENTIONED			
	WORKING ... (GO TO Q. 3)	1	35/
	OR		
	MARRIED, OR KEEPING A HOUSE, OR RAISING A FAMILY .... (ASK Q. 2)	2	
	OR		
	OTHER .... (GO TO Q. 3)	4	
	OR		
	DON'T KNOW .. (GO TO Q. 3)	8	

IF CODE 2 IN Q. 1, ASK Q. 2:

2. Would you like to be working in addition to (being married/keeping house/raising a family)?

Yes	1	36/
No	0	

3. INTERVIEWER:

RECORD TIME ENDED _____ AM / PM 37-40/

SECTION 17: LOCATING INFORMATION

INTERVIEWER: PLEASE PRINT CLEARLY. VERIFY SPELLING.

That's all the survey questions I have, but (as you know) we would like to keep in touch with you. So, let me be certain that we have your correct name, address, and phone number.

1. A. **Am I correct that your full name is** (READ NAME FROM **FACE SHEET**)? **Let me confirm the spelling.**

BEGIN LOCATOR DECK 01

INTERVIEWER: IF CORRECT, CHECK BOX AT RIGHT ..... |___| 10/
OTHERWISE, ENTER FULL NAME OF PERSON BELOW. PUT COMMA AFTER LAST NAME.

11-40/

|_____|

(LAST), (FIRST) (MIDDLE)

B. **And the street address where you are presently living is . . .** (READ STREET ADDRESS FROM FACE SHEET)? **Is that right?**

INTERVIEWER: IF CORRECT, CHECK BOX AT RIGHT ..... |___| 41/
OTHERWISE, ENTER FULL STREET ADDRESS BELOW.

42-71/

|_____|

(STREET ADDRESS)

BEGIN LOCATOR DECK 02

10-39/

|_____|

(STREET ADDRESS - CONTINUED)

C. **And your city, state, and zip code are . . .** (READ FROM **FACE SHEET**) **Is that correct?**

INTERVIEWER: IF CORRECT, CHECK BOX AT RIGHT ..... |___| 40/
OTHERWISE, ENTER FULL INFORMATION BELOW.

|_____| 41-60/
(CITY)

61-62/

|_____| |_____| 63-67/
(STATE) (ZIP)

NOTE: IF ANY CHANGES, ALSO ASK FOR COUNTY: _____

68/

NOTE: IF R LIVES OUTSIDE THE USA, RECORD COUNTRY: _____

(continued, next page)

1. (Continued)

D. **Finally, we have your telephone number as** (READ PHONE FROM **FACE SHEET**)? **Is that correct?**

INTERVIEWER: IF CORRECT, CHECK BOX AT RIGHT ..... |___| 69/
OTHERWISE, ENTER PHONE BELOW.

|___|___|___| (AREA CODE) |___|___|___|___|___|___|___| (PHONE NUMBER) 70-79/

OR BEGIN LOCATOR DECK 03

No phone ..... (SKIP TO Q.2) 0 10/
Refused 7

E. IF RESPONDENT HAS NEW PHONE: **In whose name is the phone listed?**

RESPONDENT'S NAME ... (SKIP TO Q.2) 1 11/
Other ..... (SPECIFY BELOW) 2

12-41/

|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___| (LAST), (FIRST) (MIDDLE)

GO TO Q.2

FOR OFFICE USE ONLY:

GEO CODE: |___|___|___|___|___| 42-46/ PSU: |___|___|___| 47-49/ MLA: |___| 50/

2. INTERVIEWER:

--IF R IS LIVING IN DORMITORY, FRATERNITY, SORORITY, HOSPITAL, OR OTHER TEMPORARY IQ:
OBTAIN NAME AND RELATIONSHIP OF HOUSEHOLDER AT PERMANENT HOME ADDRESS.
RECORD NAME, RELATIONSHIP, ADDRESS, AND TELEPHONE INFORMATION IN A-C BELOW.

--IF THE ABOVE IS NOT APPLICABLE AND R IS MARRIED, LIVING APART FROM SPOUSE:
RECORD SPOUSE'S NAME, ADDRESS, AND TELEPHONE INFORMATION IN A-C BELOW.

--OTHERWISE: GO TO Q. 3

A. NAME:

51-80/

(LAST), (FIRST) (MIDDLE)

BEGIN LOCATOR DECK 04

RELATIONSHIP TO R: _____ 10-11/

ADDRESS:

12-41/

(STREET ADDRESS) (APT. #)

42-66/ 67-71/

(CITY) (STATE) (ZIP)

BEGIN LOCATOR DECK 05

10-29/

(COUNTRY IF NOT U.S.)

B. **And what is (his/her) telephone number?**

____ / ____ - ____ 30-39/
(AREA CODE) (PHONE NUMBER)

No phone .....(SKIP TO Q.3)..... 0 40/
Refused 7

C. IF PERSON HAS PHONE: **In whose name is the phone listed?**

Name recorded above ..(SKIP TO Q.3).. 1 41/
Other (SPECIFY BELOW) 2

42-71/

(LAST), (FIRST) (MIDDLE)

3. **Thinking of all the people you know, either around here or elsewhere, who would be the one person you keep in touch with who would be most likely to know where you are?** ENTER FULL NAME OF PERSON BELOW AND ASK A-D.

BEGIN LOCATOR DECK 06

10-39/

(LAST), (FIRST) (MIDDLE)

A. What is (PERSON'S) relationship to you? _____ 40-41/

B. Where does (PERSON) live?

42-71/

(STREET ADDRESS) (APT. #)

BEGIN LOCATOR DECK 07

10-34/ 35-39/

(CITY) (STATE) (ZIP)

C. What is (PERSON'S) telephone number?

(AREA CODE) / (PHONE NUMBER) - 40-49/

No phone .....(SKIP TO Q.4)..... 0 50/

Refused 7

D. IF (PERSON) HAS PHONE: **In whose name is the phone listed?**

(PERSON'S) name ..(SKIP TO Q.4). 1 51/

Other (SPECIFY BELOW) 2

BEGIN LOCATOR DECK 08

10-39/

(LAST), (FIRST) (MIDDLE)

4. INTERVIEWER: HAS CURRENT LOCATING INFORMATION BEEN COLLECTED FOR BOTH PARENTS?

YES .....(SKIP TO Q.6)..... 1 40/

NO .....(ASK A)..... 0

I'd also like the name, address, and telephone number of (each of your parents/your father/your mother).

INTERVIEWER: COLLECT FATHER'S LOCATING INFORMATION IF NOT YET COLLECTED.

A. **Is your father currently living?**

Yes .....(ASK B)..... 1 41/

No .....(SKIP TO Q.5)..... 0

B. **What is your father's full name?** ENTER FULL NAME AND ASK a-c.

42-71/

(LAST), (FIRST) (MIDDLE)

BEGIN LOCATOR DECK 09

a. **Where does he live?**

10-39/

(STREET ADDRESS) (APT. #)

40-64/ 65-69/

(CITY) (STATE) (ZIP)

b. **What is his telephone number?**

(AREA CODE) / (PHONE NUMBER) - 70-79/

BEGIN LOCATOR DECK 10

No phone .....(SKIP TO Q.5)..... 0 10/

Refused 7

c. IF FATHER HAS PHONE: **In whose name is the phone listed?**

Father's name .....(SKIP TO Q.5)..... 1 11/

Other .....(SPECIFY BELOW) ... 2

12-41/

(LAST), (FIRST) (MIDDLE)

5. INTERVIEWER: COLLECT MOTHER'S LOCATING INFORMATION IF NOT ALREADY COLLECTED:

A. **Is your mother currently living?**

Yes .....(ASK B) 1 42/

No .....(SKIP TO Q.6) 0

B. **What is your mother's full name?** ENTER FULL NAME BELOW AND ASK a-c.

43-72/

(LAST), (FIRST) (MIDDLE)

a. **Where does she live?**

Same address as father ..... (GO TO Q.6) 1 73/

Other (SPECIFY BELOW) 2

BEGIN LOCATOR DECK 11

10-39/

(STREET ADDRESS) (APT. #)

40-64/ 65-69/

(CITY) (STATE) (ZIP)

b. **What is her telephone number?**

(AREA CODE) / (PHONE NUMBER) - 70-79/

BEGIN LOCATOR DECK 12

No phone .....(SKIP TO Q.6)..... 0 10/

Refused 7

c. IF MOTHER HAS PHONE: **In whose name is the phone listed?**

Mother's name .....(SKIP TO Q.6)..... 1 11/

Father's name .....(SKIP TO Q.6)..... 2

Other (SPECIFY BELOW) 3

12-41/

(LAST), (FIRST) (MIDDLE)

6. **Which of your other relatives are you in touch with most frequently?** PROBE FOR TWO RELATIVES. ENTER FULL NAMES BELOW AND ASK a-d FOR EACH.

FIRST RELATIVE'S NAME:

42-71/

(LAST), (FIRST) (MIDDLE)

a. **What is (RELATIVE'S) relationship to you?** _____ 72-73/

b. **Where does (RELATIVE) live?** BEGIN LOCATOR DECK 13

10-39/

(STREET ADDRESS) (APT. #)

40-64/ 65-69/

(CITY) (STATE) (ZIP)

c. **What is (RELATIVE'S) telephone number?**

____ / ____ - ____ 70-79/

(AREA CODE) (PHONE NUMBER) BEGIN LOCATOR DECK 14

No phone ..(SKIP TO 2ND RELATIVE Q.7)... 0 10/
Refused 7

d. IF RELATIVE HAS PHONE: **In whose name is the phone listed?**

(RELATIVE'S) name ....(GO TO Q.7)..... 1 11/
Other (SPECIFY BELOW) 2

12-41/

(LAST), (FIRST) (MIDDLE)

---

7. SECOND RELATIVE'S NAME

42-71/

(LAST), (FIRST) (MIDDLE)

a. **What is (RELATIVE'S) relationship to you?** _____ 72-73/

b. **Where does (RELATIVE) live?** BEGIN LOCATOR DECK 15

10-39/

(STREET ADDRESS) (APT. #)

40-64/ 65-69/

(CITY) (STATE) (ZIP)

c. **What is (RELATIVE'S) telephone number?**

____ / ____ - ____ 70-79/

(AREA CODE) (PHONE NUMBER) BEGIN LOCATOR DECK 16

No phone .....(SKIP TO Q.8)..... 0 10/
Refused 7

d. IF RELATIVE HAS PHONE: **In whose name is the phone listed?**

(RELATIVE'S) name ...(GO TO Q.8)..... 1 11/
Other (SPECIFY BELOW) 2

12-41/

(LAST), (FIRST) (MIDDLE)

8. **Which of your friends do you visit or talk with most frequently?** PROBE FOR TWO FRIENDS. ENTER FULL NAMES BELOW AND ASK a-c FOR EACH.

FIRST FRIEND'S NAME:

42-71/

(LAST), (FIRST) (MIDDLE)

a. **Where does (FRIEND) live?** BEGIN LOCATOR DECK 17

10-39/

(STREET ADDRESS) (APT. #)

40-64/ 65-69/

(CITY) (STATE) (ZIP)

b. **What is (FRIEND'S) telephone number?**

| | | | / | | | | - | | | | |

70-79/

(AREA CODE) (PHONE NUMBER) BEGIN LOCATOR DECK 18

No phone ...(SKIP TO 2ND FRIEND Q.9).. 0 10/

Refused 7

c. IF FRIEND HAS PHONE: **In whose name is the phone listed?**

(FRIEND'S) name .....(GO TO Q.9).... 1 11/

Other (SPECIFY BELOW) 2

12-41/

(LAST), (FIRST) (MIDDLE)

---

9. SECOND FRIEND'S NAME

42-71/

(LAST), (FIRST) (MIDDLE)

a. **Where does (FRIEND) live?** BEGIN LOCATOR DECK 19

10-39/

(STREET ADDRESS) (APT. #)

40-64/ 65-69/

(CITY) (STATE) (ZIP)

b. **What is (FRIEND'S) telephone number?**

| | | | / | | | | - | | | | |

70-79/

(AREA CODE) (PHONE NUMBER) BEGIN LOCATOR DECK 20

No phone .....(SKIP TO Q.10)..... 0 10/

Refused 7

c. IF FRIEND HAS PHONE: **In whose name is the phone listed?**

(FRIEND'S) name ..(GO TO Q.10).. 1 11/

Other (SPECIFY BELOW) 2

12-41/

(LAST), (FIRST) (MIDDLE)

10. **When you are not spending your spare time at home, where do you usually go?** PROBE FOR NAME, ADDRESS, AND PHONE NUMBER OF PLACE SUCH AS NEIGHBORHOOD GATHERING PLACE, ETC.

Person is already listed in Qs. 1-9 ..... (GO TO Q.11) 1 42/
Other (SPECIFY BELOW) 2

43-72/

(NAME OF PLACE--"HANGOUT") BEGIN LOCATOR DECK 21

10-39/

(KIND OF PLACE)

40-69/

(STREET ADDRESS) (APT. #)

BEGIN LOCATOR DECK 22 10-34/ 35-39/

(CITY) (STATE) (ZIP)

(AREA CODE) / (PHONE NUMBER) - 40-49/

11. **Do you have a nickname or some name other than your legal one by which most of your friends, neighbors, or relatives know you?**

Yes ..... (ASK A) 1 50/
No .....(GO TO Q.12)..... 0

A. IF YES: **What is it?**

51-70/

(NICKNAME)

12. FOR MARRIED WOMEN: **What is your maiden name?** BEGIN LOCATOR DECK 23

10-29/

(MAIDEN NAME)

13. **Do you expect to move at any time in the next year?**

Yes ..... (ASK A & B) 1 30/
No ..... (GO TO Q.14) 0

IF YES:

A. **Approximately when do you think that will happen?** PROBE FOR MONTH AND YEAR.

31-34/

(MONTH) (YEAR)

B. **Where do you expect to move?**
PROBE FOR DETAILS, SPECIFIC ADDRESS IF POSSIBLE.

35-64/

(STREET ADDRESS) (APT. #)

BEGIN LOCATOR DECK 24
10-34/ 35-39/

(CITY) (STATE) (ZIP)

14. NOW PAY RESPONDENT AND HAVE HIM/HER SIGN THE RECEIPT.

---

15. IF CURRENT MAILING ADDRESS IS NOT A REGULAR STREET ADDRESS OR IF DU IS DIFFICULT TO LOCATE, GIVE DU DESCRIPTION AND DIRECTIONS HERE:

40/

---

16. OTHER COMMENTS ON LOCATING R:

41/

INTERVIEWER REMARKS

INTERVIEWER: Complete these remarks as soon as you have finished the questionnaire.

1. Length of the interview: (Section 1, p. 1 to Section 16) | | | | MINUTES 41-43/

2. Date of interview: | | | | | 8 | 4 | MONTH DAY YEAR 44-49/

3. Race of Respondent: 50/

White 1
Black 2
Other 3

4. Sex of respondent: 51/

Male 1
Female 2

5. In what language was this interview conducted? 52/

English 1
Spanish 2
Other (SPECIFY)
_____ 3

6. In general, what was the respondent's attitude toward the interview? 53/

Friendly and interested 1
Cooperative but not particularly interested 2
Impatient and restless 3
Hostile 4

7. In general, was the respondent's understanding of the questions ... 54/

Good? 1
Fair? 2
Poor? 3

8. Was anyone else present other than small children during any portion of the youth's interview?

Yes .....(ANSWER A)....	1	55/
No .....(GO TO Q. 9)...	0	
TELEPHONE INTERVIEW ...(GO TO Q.9)...	8	

A. IF YES: Who was present? CODE ALL THAT APPLY?

R's parent(s)	1	56/
Other members(s) of R's household	2	57/
R's friend(s)	3	58/
Other (SPECIFY) _____	4	59/

---

9. List questions that confused, angered, or caused discomfort to the respondent or questions that you feel the respondent did not answer truthfully. EXPLAIN.

None 0 60/

	Section		Question	
A.	_____	61-62/	_____	63-65/
B.	_____	66-67/	_____	68-70/
C.	_____	71-72/	_____	73-75/

76/

Describe Problem: _____

_____

---

10. List questions with skip errors, questions that were confusing to you, or questions that otherwise didn't work. EXPLAIN.

BEGIN DECK 62

None 0 10/

or

	Section		Question	
A.	_____	11-12/	_____	13-15/
B.	_____	16-17/	_____	18-20/
C.	_____	21-22/	_____	23-25/

26/

Describe Problem: _____

_____

11. INTERVIEWER: TRANSFER HERE THE LAST LINE OF THE RECORD OF CALLS.

Try #	Day #	Date Month	Date Day	Time	Type P = 1 Tel = 2	Outcome Code
27-28/	29-30/	31-32/	33-34/	35-38/	39/	40-41/
_____	_____	_____	_____	A / P	_____	_____

12. Please record your interview ID #: |__|__|__|__|__|__| 42-47/

13. Please sign your name here: _____

14. Please affix label with your supervisor's name and ID # here:

OFFICE USE ONLY

CODER ID # |__|__|__| 48-50/

KEY PUNCH ID # |__|__|__| 51-53/