



QUESTIONNAIRE

Decree on establishing selected statistical surveys "Official gazete rs", no. 117/2008.

Data provided in this questionnaire are intended for statistical purposes only

2

Municipality

Enumeration area

Dwelling

Household

Person



38. SOURCE OF LIVELIHOOD DURING THE LAST YEAR

(tick at most two answers)

- | | |
|---|--|
| Salary or other work-based remuneration.....1 | Loans/Savings.....6 |
| Pensions.....2 | Other sources of income (unemployment benefits, alimonies, etc.).....7 |
| Property (house, apartment, land rental, etc.).....3 | Periodical assistance to other persons.....8 |
| Social allowances (child allowances, benefits and relief, etc.).....4 | Without income.....9 |
| Scholarships.....5 | |

39. IS THE PERSON DEPENDANT

Yes.....1

No.....2 → 40

Information on the supporter (tick only one)

- | |
|--|
| Engaged in an agricultural occupation.....1 |
| Engaged in a non-agricultural occupation.....2 |
| Retired or with other personal income.....3 |
| Employed/reside abroad.....4 |
| Legal entity.....5 |

Answer to questions 40 and 41 are to be provided only by persons working/attaining school, i.e. persons that have ticked in question 25 answer from 1 to 7, and 1 in question 28.

40. HOW OFTEN DOES THE PERSON RETURN TO THE PLACE OF RESIDENCE

- | |
|--|
| Work/attain school in the place of residence.....1 |
| Every day.....2 |
| Once a week.....3 |
| Not so often.....4 |

41. TRANSPORT MEANS

(tick at most two answers)

- | | |
|------------------------------------|--------------------------|
| Passenger car.....1 | Tram, trolleybuses.....5 |
| Urban transportation (buses).....2 | Bicycles.....6 |
| Interurban buses.....3 | Motorcycles.....7 |
| Train.....4 | On foot.....8 |
| | Other.....9 |

DISABILITY

42. DO YOU EXPERIENCE RESTRICTION IN DAILY ACTIVITIES FUNCTIONING AT HOME/AT SCHOOL/AT WORK DUE TO SOME LIMITATION/IMPAIRMENT/DISABILITY

(answer not compulsory)

Yes.....1

No.....2

Refuse to answer.....3

43

a) Difficulties are related to

(tick one or more)

- | | |
|--|---|
| Moving about (walking, stairs, et.).....1 | 1 |
| Independence in clothing/eating/personal hygiene.....2 | 2 |
| Sight, even if wearing glasses.....3 | 3 |
| Hearing, even if wearing hearing device.....4 | 4 |
| Memory/concentration/learning, etc.....5 | 5 |
| Communication, being understood/understanding others/psychological, mental, emotional problems.....6 | 6 |

b) Do you use one of the followings aids

(tick one or more)

- | |
|--|
| Electric-motor driven chair.....1 |
| Mechanical wheelchair.....2 |
| Crutches.....3 |
| Walker.....4 |
| Prosthesis and other orthopedic aids.....5 |
| None of the above mentioned.....6 |

43. WHO HAS PROVIDED INFORMATION

- | |
|-------------------------------|
| Reference person.....1 |
| Member of the household.....2 |
| Other.....3 |

TO BE FILLED IN BY STATISTICS

Sequence number of the family

Status of the member of the family

1. NAME

SURENAME

2. SEX

Male.....1

Female.....2

3. DATE OF BIRTH (URNC)

(day) (month) (year) (other 6 numbers from URNC)

4. IS THE PERSON RESIDENT IN THE PLACE OF ENUMERATION

Yes.....1 → 5

No.....2 → 6

5. IS THE PERSON PRESENT AT THE PLACE OF RESIDENCE AT THE MOMENT OF THE CENSUS

Yes.....1 → 10

No.....2 → 6

6. REASON OF ABSENCE/PRESENCE (copy from column 7 of the List 1, or column 2 of the List 2)

7. DURATION OF ABSENCE/PRESENCE

Less than a year (number of months)

1 year and over (number of years)

8. HOW LONG DOES THE PERSON INTEND TO BE ABSENT/PRESENT

Less than a month.....1

1 month or over, but less than a year (enter the number of months) (enter the number of months)

1 year and over.....2

9. PLACE WHERE THE ABSENT PERSON IS/PLACE OF USUAL RESIDENCE OF THE TEMPORARY PRESENT PERSON

Locality - settlement

Municipality - foreign country

10. PLACE OF BIRTH

Locality - settlement

Municipality - foreign country

11. PLACE OF RESIDENCE OF THE MOTHER AT THE DATE OF BIRTH OF THE PERSON

Locality - settlement

Municipality - foreign country

12. WAS THE PERSON INTERNALLY DISPLACED FROM THE AP OF KOSOVO AND METOHIJA AFTER MARCH 24, 1999

Yes.....1 No.....2

13. HAS THE PERSON MOVED TO THE CURRENT PLACE OF RESIDENCE FROM ANOTHER ONE IN THE REPUBLIC OF THE SERBIA

Yes.....1 No.....2 → 14

a) From where

Locality - settlement

Municipality

b) Year of migration

14. HAS THE PERSON EVER LIVED OUTSIDE THE REPUBLIC OF SERBIA CONTINUOUSLY FOR A YEAR AND OVER

Yes.....1

No.....2

Person abroad.....3 → 15

a) Year of migration/return to Serbia

b) State from which the person emigrated/in which the person lived

c) Main reasons of migration

Job.....1

Family reasons.....2

Education.....3

Forced migration.....4

Readmission Agreement.....5

Other.....6

