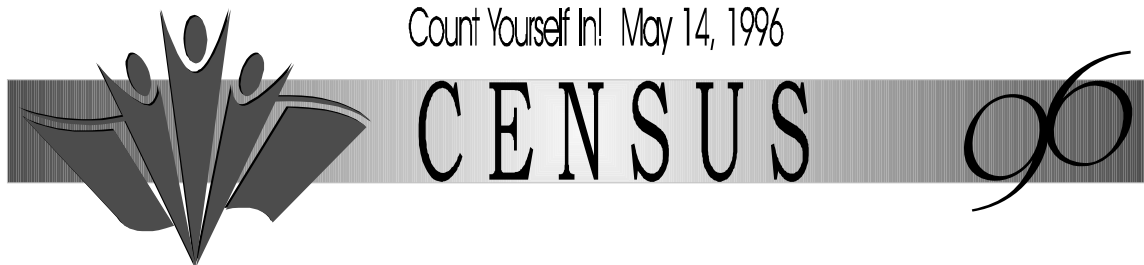


**Appendix P. 1996 Form 2B, Population Questionnaire**

**Ce questionnaire est disponible en français ☎ 800 670-3388**

OFFICE USE ONLY	Prov.	FED No.	EA No.	VN	CCD	<b>2B</b>	1.
	Hhld No.	Form type <b>3</b>	No. of persons	Questionnaire No.	TD		UD <input type="checkbox"/> 2
						Forms 3	2
						M <input type="checkbox"/> 1	
						DC <input type="checkbox"/> 3	
						TR <input type="checkbox"/> 5	
						Coll. <input type="checkbox"/>	



**A message about the census**

For over 300 years, the census has painted a picture of our people and the places in which we live. The information collected on May 14, 1996, will help all of us prepare for the future. The census provides information needed by community groups, businesses, and governments to develop plans for education and training, new products and services, housing for seniors, health care services, and many other programs that are important to all of us.

By law, Statistics Canada must take a census every five years, and every household must fill in a census form. And by law, no one, except employees of Statistics Canada, is allowed to see the personal information you provide.

Please fill in your census form and mail it back on May 14, 1996.

Thank you for your co-operation.

**Ivan P. Fellegi**  
Chief Statistician of Canada

This information is collected under the authority of the *Statistics Act*, R.S.C. 1985, c. S-19, and must be provided by law. **CONFIDENTIAL WHEN COMPLETED**

<p><b>STEP 1</b></p>	<b>Begin here by printing your address</b>			<p><b>Need Help?</b> <b>Please see the Guide</b> or call us free of charge: <b>1 800 670-3388</b></p> <p>TDD/TTY users call: <b>1 800 303-9633</b></p>
	No. and street or lot and concession	Apt. No.		
	City, town, village, Indian reserve	Province / territory		
	Postal code	Area code	Telephone number	





List below all persons who usually live here as of May 14, 1996, even if they are temporarily away on business, at school or on vacation.

**STEP 2**

Don't forget to include yourself!






- **Begin the list with** an adult followed, if applicable, by that person's spouse or common-law partner and by their children.
- Continue with all other persons who usually live here. Children should be listed immediately after their parent(s).

	Family name	Given name	Initial
Person 1			
Person 2			
Person 3			
Person 4			
Person 5			
Person 6			
Person 7			
Person 8			
Person 9			
Person 10			

If you need more space, use the "Comments" section on page 6.

**BE SURE TO INCLUDE**

- **everyone who usually lives here**, including newborn babies, room-mates, boarders and live-in employees;
- **sons or daughters who live somewhere else while attending school** but return to live here for part of the year;
- **children in joint custody** who live here most of the time (if they spend equal time with each parent, include them if they are staying here on May 14, 1996);
- persons from another country who live in Canada and have **work, student or Minister's permits, or persons claiming refugee status**, and family members living with them;
- persons who usually live here but are now in an **institution** (such as a home for the aged, a hospital or a prison), if they have been there **less than six months**;
- persons staying here on May 14, 1996, who have **no usual home elsewhere**.

 <b>STEP 3</b>	<p><b>Did you leave anyone out of Step 2 because you were not sure the person should be listed?</b></p> <p><i>For example:</i></p> <ul style="list-style-type: none"> <li>• other relatives living here;</li> <li>• a student away at school;</li> <li>• a lodger who has another home;</li> <li>• a person who has moved recently; or</li> <li>• a member of this household who is away in an institution.</li> </ul>	<p><b>00.</b></p> <p><input type="radio"/> No</p> <p><b>01</b> <input type="radio"/> Yes → Print the name of each person left out and the reason.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Name</td></tr> <tr><td style="padding: 2px;">Reason</td></tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Name</td></tr> <tr><td style="padding: 2px;">Reason</td></tr> </table> <p style="font-size: small;">If you need more space, use the "Comments" section on page 6.</p>	Name	Reason	Name	Reason
Name						
Reason						
Name						
Reason						
 <b>STEP 4</b>	<p><b>Are ALL PERSONS in this household:</b></p> <ul style="list-style-type: none"> <li>• government representatives of <b>another country</b> and their families;</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>• members of the Armed Forces of <b>another country</b> and their families;</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>• residents of <b>another country</b> visiting Canada, for example, on a business trip or on vacation?</li> </ul>	<p><input type="radio"/> No → <b>Continue with Step 5</b></p> <p><b>02</b> <input type="radio"/> Yes → Do not complete this questionnaire. Mail it in the enclosed postage-paid envelope.</p>				
 <b>STEP 5</b>	<p>If <b>ALL PERSONS</b> in this household are staying here temporarily <b>and have a usual home somewhere else in Canada</b>, enter the total number of persons in this box . . . . .</p>	<p><b>03</b> <input style="width: 40px; height: 20px;" type="text"/> → Do not complete this questionnaire. Mail it in the enclosed postage-paid envelope.</p>				
 <b>STEP 6</b>	<p><b>Does anyone in this household OPERATE an agricultural operation?</b></p> <p><i>Agricultural operations include: ranches, farms, feedlots, hobby farms, greenhouses, mushroom houses, nurseries, Christmas tree farms, fur farms, horse farms, game farms; beekeeping, sod, fruit and maple syrup operations, etc.</i></p>	<p><b>04</b> <input type="radio"/> No</p> <p><b>05</b> <input type="radio"/> Yes</p>				
 <b>STEP 7</b>	<p><b>In Question 1 on the next page, copy the names from Step 2.</b></p>	<p><b>HOUSEHOLDS WITH MORE THAN SIX PERSONS</b></p> <p>If there are more than six persons in this household, enter the first six on this questionnaire and continue on a second questionnaire. If you do not have a second questionnaire, note this in the "Comments" section on page 6. A Statistics Canada representative will contact you.</p>				

<p><b>1. NAME</b></p> <p>In the spaces provided, copy the names in the same order as in <b>Step 2</b>.</p> <p>Then answer the following questions for each person.</p>	<table border="1"> <tr> <th colspan="2">PERSON 1</th> </tr> <tr> <td colspan="2">Family name</td> </tr> <tr> <td>Given name</td> <td>Initial</td> </tr> </table>	PERSON 1		Family name		Given name	Initial	<table border="1"> <tr> <th colspan="2">PERSON 2</th> </tr> <tr> <td colspan="2">Family name</td> </tr> <tr> <td>Given name</td> <td>Initial</td> </tr> </table>	PERSON 2		Family name		Given name	Initial
PERSON 1														
Family name														
Given name	Initial													
PERSON 2														
Family name														
Given name	Initial													
<p><b>2. RELATIONSHIP TO PERSON 1</b></p> <p>For <b>each</b> person usually living here, describe his/her relationship to Person 1.</p> <p><i>Mark or specify one response only.</i></p> <p><i>Stepchildren, adopted children and children of a common-law partner should be considered sons and daughters.</i></p> <p><i>If none of the choices apply, use the "Other" box to indicate this person's relationship to Person 1.</i></p> <p><i>Examples of "Other" relationships to Person 1:</i></p> <ul style="list-style-type: none"> <li>• <i>cousin</i></li> <li>• <i>niece or nephew</i></li> <li>• <i>son's common-law partner (common-law daughter-in-law)</i></li> <li>• <i>lodger's husband, wife or common-law partner</i></li> <li>• <i>lodger's son or daughter</i></li> <li>• <i>room-mate's daughter or son</i></li> <li>• <i>employee</i></li> </ul>	<p><b>01.</b></p> <p>01 <input checked="" type="radio"/> PERSON 1</p>	<p><b>02.</b></p> <p>02 <input type="radio"/> Husband or wife of Person 1</p> <p>03 <input type="radio"/> Common-law partner of Person 1</p> <p>04 <input type="radio"/> Son or daughter of Person 1</p> <p>05 <input type="radio"/> Son-in-law or daughter-in-law of Person 1</p> <p>06 <input type="radio"/> Grandchild of Person 1</p> <p>07 <input type="radio"/> Father or mother of Person 1</p> <p>08 <input type="radio"/> Father-in-law or mother-in-law of Person 1</p> <p>09 <input type="radio"/> Grandparent of Person 1</p> <p>10 <input type="radio"/> Brother or sister of Person 1</p> <p>11 <input type="radio"/> Brother-in-law or sister-in-law of Person 1</p> <p>12 <input type="radio"/> Lodger or boarder</p> <p>13 <input type="radio"/> Room-mate</p> <p>Other – Specify</p> <p>14 <input type="text"/></p>												
<p><b>3. DATE OF BIRTH</b></p> <p>Enter <b>day, month</b> and <b>year</b>.</p> <p><i>Example:</i> If this person was born on the 23rd of February 1954, enter</p> <p style="text-align: center;">Day Month Year 23 02 1954</p> <p><i>If exact date is not known, enter best estimate.</i></p>	<p>Date of birth</p> <p style="text-align: center;">Day Month Year</p> <p>15 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 1 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>Date of birth</p> <p style="text-align: center;">Day Month Year</p> <p>15 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 1 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>												
<p><b>4. SEX</b></p>	<p>16 <input type="radio"/> Male 17 <input type="radio"/> Female</p>	<p>16 <input type="radio"/> Male 17 <input type="radio"/> Female</p>												
<p><b>5. MARITAL STATUS</b></p> <p><i>Mark one circle only.</i></p>	<p>18 <input type="radio"/> Legally married (and not separated)</p> <p>19 <input type="radio"/> Separated, but still legally married</p> <p>20 <input type="radio"/> Divorced</p> <p>21 <input type="radio"/> Widowed</p> <p>22 <input type="radio"/> Never married (single)</p>	<p>18 <input type="radio"/> Legally married (and not separated)</p> <p>19 <input type="radio"/> Separated, but still legally married</p> <p>20 <input type="radio"/> Divorced</p> <p>21 <input type="radio"/> Widowed</p> <p>22 <input type="radio"/> Never married (single)</p>												
<p><b>6.</b> Is this person living with a <b>common-law</b> partner?</p> <p><i>Common-law refers to two people who live together as husband and wife but who are not legally married to each other.</i></p>	<p>23 <input type="radio"/> Yes</p> <p>24 <input type="radio"/> No</p>	<p>23 <input type="radio"/> Yes</p> <p>24 <input type="radio"/> No</p>												

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

**03.**

02  Husband or wife of Person 1  
 03  Common-law partner of Person 1  
 04  Son or daughter of Person 1  
 05  Son-in-law or daughter-in-law of Person 1  
 06  Grandchild of Person 1  
 07  Father or mother of Person 1  
 08  Father-in-law or mother-in-law of Person 1  
 09  Grandparent of Person 1  
 10  Brother or sister of Person 1  
 11  Brother-in-law or sister-in-law of Person 1  
 12  Lodger or boarder  
 13  Room-mate  
 Other – Specify

14

**04.**

02  Husband or wife of Person 1  
 03  Common-law partner of Person 1  
 04  Son or daughter of Person 1  
 05  Son-in-law or daughter-in-law of Person 1  
 06  Grandchild of Person 1  
 07  Father or mother of Person 1  
 08  Father-in-law or mother-in-law of Person 1  
 09  Grandparent of Person 1  
 10  Brother or sister of Person 1  
 11  Brother-in-law or sister-in-law of Person 1  
 12  Lodger or boarder  
 13  Room-mate  
 Other – Specify

14

**05.**

02  Husband or wife of Person 1  
 03  Common-law partner of Person 1  
 04  Son or daughter of Person 1  
 05  Son-in-law or daughter-in-law of Person 1  
 06  Grandchild of Person 1  
 07  Father or mother of Person 1  
 08  Father-in-law or mother-in-law of Person 1  
 09  Grandparent of Person 1  
 10  Brother or sister of Person 1  
 11  Brother-in-law or sister-in-law of Person 1  
 12  Lodger or boarder  
 13  Room-mate  
 Other – Specify

14

**06.**

02  Husband or wife of Person 1  
 03  Common-law partner of Person 1  
 04  Son or daughter of Person 1  
 05  Son-in-law or daughter-in-law of Person 1  
 06  Grandchild of Person 1  
 07  Father or mother of Person 1  
 08  Father-in-law or mother-in-law of Person 1  
 09  Grandparent of Person 1  
 10  Brother or sister of Person 1  
 11  Brother-in-law or sister-in-law of Person 1  
 12  Lodger or boarder  
 13  Room-mate  
 Other – Specify

14

Date of birth

Day Month Year

15    1

Date of birth

Day Month Year

15    1

Date of birth

Day Month Year

15    1

Date of birth

Day Month Year

15    1

16  Male 17  Female

16  Male 17  Female

16  Male 17  Female

16  Male 17  Female

18  Legally married (and not separated)  
 19  Separated, but still legally married  
 20  Divorced  
 21  Widowed  
 22  Never married (single)

18  Legally married (and not separated)  
 19  Separated, but still legally married  
 20  Divorced  
 21  Widowed  
 22  Never married (single)

18  Legally married (and not separated)  
 19  Separated, but still legally married  
 20  Divorced  
 21  Widowed  
 22  Never married (single)

18  Legally married (and not separated)  
 19  Separated, but still legally married  
 20  Divorced  
 21  Widowed  
 22  Never married (single)

23  Yes  
 24  No

23  Yes  
 24  No

23  Yes  
 24  No

23  Yes  
 24  No

<p><b>1. NAME</b></p> <p>In the spaces provided, copy the names in the same order as in <b>Step 2</b>.</p> <p>Then answer the following questions for each person.</p>	<b>PERSON 1</b>	<b>PERSON 2</b>
	Family name	Family name
	Given name                      Initial	Given name                      Initial

<b>ACTIVITY LIMITATIONS</b>	<b>07.</b>	<b>08.</b>
<p><b>7.</b> Is this person limited in the kind or amount of activity that he/she can do because of a long-term physical condition, mental condition or health problem:</p> <p>(a) at home?</p> <p>_____</p> <p>(b) at school or at work?</p> <p>_____</p> <p>(c) in other activities, for example, in transportation to or from work, or in leisure time activities?</p> <p>_____</p>	<p><b>01</b> <input type="radio"/> No, not limited</p> <p><b>02</b> <input type="radio"/> Yes, limited</p>	<p><b>01</b> <input type="radio"/> No, not limited</p> <p><b>02</b> <input type="radio"/> Yes, limited</p>
<p><b>8.</b> Does this person have any <b>long-term</b> disabilities or handicaps?</p>	<p><b>03</b> <input type="radio"/> No, not limited</p> <p><b>04</b> <input type="radio"/> Yes, limited</p> <p><b>05</b> <input type="radio"/> Not applicable</p>	<p><b>03</b> <input type="radio"/> No, not limited</p> <p><b>04</b> <input type="radio"/> Yes, limited</p> <p><b>05</b> <input type="radio"/> Not applicable</p>
<b>L A N G U A G E</b>	<p><b>06</b> <input type="radio"/> No, not limited</p> <p><b>07</b> <input type="radio"/> Yes, limited</p>	<p><b>06</b> <input type="radio"/> No, not limited</p> <p><b>07</b> <input type="radio"/> Yes, limited</p>
<p><b>9.</b> Can this person speak English or French well enough to conduct a conversation?</p> <p>■ <b>Mark one circle only.</b></p>	<p><b>08</b> <input type="radio"/> No</p> <p><b>09</b> <input type="radio"/> Yes</p>	<p><b>08</b> <input type="radio"/> No</p> <p><b>09</b> <input type="radio"/> Yes</p>
<p><b>10.</b> What language(s), <b>other than English or French</b>, can this person speak well enough to conduct a conversation?</p> <p>■</p>	<p><b>10</b> <input type="radio"/> English only</p> <p><b>11</b> <input type="radio"/> French only</p> <p><b>12</b> <input type="radio"/> Both English and French</p> <p><b>13</b> <input type="radio"/> Neither English nor French</p>	<p><b>10</b> <input type="radio"/> English only</p> <p><b>11</b> <input type="radio"/> French only</p> <p><b>12</b> <input type="radio"/> Both English and French</p> <p><b>13</b> <input type="radio"/> Neither English nor French</p>
<p><b>11.</b> What language does this person speak <b>most often</b> at home?</p> <p>■</p>	<p><b>14</b> <input type="radio"/> None</p> <p><b>OR</b></p> <p>Specify other language(s)</p> <p><b>15</b> <input type="text"/></p> <p><b>16</b> <input type="text"/></p> <p><b>17</b> <input type="text"/></p>	<p><b>14</b> <input type="radio"/> None</p> <p><b>OR</b></p> <p>Specify other language(s)</p> <p><b>15</b> <input type="text"/></p> <p><b>16</b> <input type="text"/></p> <p><b>17</b> <input type="text"/></p>
<p><b>12.</b> What is the language that this person <b>first learned</b> at home <b>in childhood</b> and <b>still understands</b>?</p> <p>■</p> <p><i>If this person no longer understands the first language learned, indicate the second language learned.</i></p>	<p><b>18</b> <input type="radio"/> English</p> <p><b>19</b> <input type="radio"/> French</p> <p>Other – Specify</p> <p><b>20</b> <input type="text"/></p>	<p><b>18</b> <input type="radio"/> English</p> <p><b>19</b> <input type="radio"/> French</p> <p>Other – Specify</p> <p><b>20</b> <input type="text"/></p>
	<p><b>21</b> <input type="radio"/> English</p> <p><b>22</b> <input type="radio"/> French</p> <p>Other – Specify</p> <p><b>23</b> <input type="text"/></p>	<p><b>21</b> <input type="radio"/> English</p> <p><b>22</b> <input type="radio"/> French</p> <p>Other – Specify</p> <p><b>23</b> <input type="text"/></p>

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

<b>09.</b>	<b>10.</b>	<b>11.</b>	<b>12.</b>
01 <input type="radio"/> No, not limited 02 <input type="radio"/> Yes, limited	01 <input type="radio"/> No, not limited 02 <input type="radio"/> Yes, limited	01 <input type="radio"/> No, not limited 02 <input type="radio"/> Yes, limited	01 <input type="radio"/> No, not limited 02 <input type="radio"/> Yes, limited
03 <input type="radio"/> No, not limited 04 <input type="radio"/> Yes, limited 05 <input type="radio"/> Not applicable	03 <input type="radio"/> No, not limited 04 <input type="radio"/> Yes, limited 05 <input type="radio"/> Not applicable	03 <input type="radio"/> No, not limited 04 <input type="radio"/> Yes, limited 05 <input type="radio"/> Not applicable	03 <input type="radio"/> No, not limited 04 <input type="radio"/> Yes, limited 05 <input type="radio"/> Not applicable
06 <input type="radio"/> No, not limited 07 <input type="radio"/> Yes, limited	06 <input type="radio"/> No, not limited 07 <input type="radio"/> Yes, limited	06 <input type="radio"/> No, not limited 07 <input type="radio"/> Yes, limited	06 <input type="radio"/> No, not limited 07 <input type="radio"/> Yes, limited
08 <input type="radio"/> No 09 <input type="radio"/> Yes	08 <input type="radio"/> No 09 <input type="radio"/> Yes	08 <input type="radio"/> No 09 <input type="radio"/> Yes	08 <input type="radio"/> No 09 <input type="radio"/> Yes
10 <input type="radio"/> English only 11 <input type="radio"/> French only 12 <input type="radio"/> Both English and French 13 <input type="radio"/> Neither English nor French	10 <input type="radio"/> English only 11 <input type="radio"/> French only 12 <input type="radio"/> Both English and French 13 <input type="radio"/> Neither English nor French	10 <input type="radio"/> English only 11 <input type="radio"/> French only 12 <input type="radio"/> Both English and French 13 <input type="radio"/> Neither English nor French	10 <input type="radio"/> English only 11 <input type="radio"/> French only 12 <input type="radio"/> Both English and French 13 <input type="radio"/> Neither English nor French
14 <input type="radio"/> None <b>OR</b> Specify other language(s)	14 <input type="radio"/> None <b>OR</b> Specify other language(s)	14 <input type="radio"/> None <b>OR</b> Specify other language(s)	14 <input type="radio"/> None <b>OR</b> Specify other language(s)
15 <input type="text"/>	15 <input type="text"/>	15 <input type="text"/>	15 <input type="text"/>
16 <input type="text"/>	16 <input type="text"/>	16 <input type="text"/>	16 <input type="text"/>
17 <input type="text"/>	17 <input type="text"/>	17 <input type="text"/>	17 <input type="text"/>
18 <input type="radio"/> English 19 <input type="radio"/> French Other – Specify	18 <input type="radio"/> English 19 <input type="radio"/> French Other – Specify	18 <input type="radio"/> English 19 <input type="radio"/> French Other – Specify	18 <input type="radio"/> English 19 <input type="radio"/> French Other – Specify
20 <input type="text"/>	20 <input type="text"/>	20 <input type="text"/>	20 <input type="text"/>
21 <input type="radio"/> English 22 <input type="radio"/> French Other – Specify	21 <input type="radio"/> English 22 <input type="radio"/> French Other – Specify	21 <input type="radio"/> English 22 <input type="radio"/> French Other – Specify	21 <input type="radio"/> English 22 <input type="radio"/> French Other – Specify
23 <input type="text"/>	23 <input type="text"/>	23 <input type="text"/>	23 <input type="text"/>

<p><b>1. NAME</b></p> <p>In the spaces provided, copy the names in the same order as in <b>Step 2</b>.</p> <p>Then answer the following questions for each person.</p>	<b>PERSON 1</b>	<b>PERSON 2</b>
	<p>Family name</p> <hr/> <p>Given name                      Initial</p>	<p>Family name</p> <hr/> <p>Given name                      Initial</p>

<b>SOCIO-CULTURAL INFORMATION</b>	<b>13.</b>	<b>14.</b>
<p><b>13.</b> Where was this person born?</p> <ul style="list-style-type: none"> <li>▪ <i>Mark or specify one response only, according to present boundaries.</i></li> </ul>	<p style="text-align: center;"><b>Born in Canada</b></p> <p>01 <input type="radio"/> Nfld.      07 <input type="radio"/> Man.</p> <p>02 <input type="radio"/> P.E.I.      08 <input type="radio"/> Sask.</p> <p>03 <input type="radio"/> N.S.      09 <input type="radio"/> Alta.</p> <p>04 <input type="radio"/> N.B.      10 <input type="radio"/> B.C.</p> <p>05 <input type="radio"/> Que.      11 <input type="radio"/> Yukon</p> <p>06 <input type="radio"/> Ont.      12 <input type="radio"/> N.W.T.</p> <p style="text-align: center;"><b>Born outside Canada</b></p> <p style="text-align: center;">Country – <i>Specify</i></p> <p>13 <input style="width: 100%;" type="text"/></p>	<p style="text-align: center;"><b>Born in Canada</b></p> <p>01 <input type="radio"/> Nfld.      07 <input type="radio"/> Man.</p> <p>02 <input type="radio"/> P.E.I.      08 <input type="radio"/> Sask.</p> <p>03 <input type="radio"/> N.S.      09 <input type="radio"/> Alta.</p> <p>04 <input type="radio"/> N.B.      10 <input type="radio"/> B.C.</p> <p>05 <input type="radio"/> Que.      11 <input type="radio"/> Yukon</p> <p>06 <input type="radio"/> Ont.      12 <input type="radio"/> N.W.T.</p> <p style="text-align: center;"><b>Born outside Canada</b></p> <p style="text-align: center;">Country – <i>Specify</i></p> <p>13 <input style="width: 100%;" type="text"/></p>
	<p><b>14.</b> Of what country is this person a citizen?</p> <ul style="list-style-type: none"> <li>▪ <i>Indicate more than one citizenship, if applicable.</i></li> </ul>	<p>14 <input type="radio"/> Canada, by birth</p> <p>15 <input type="radio"/> Canada, by naturalization</p> <p style="text-align: center;">Other country – <i>Specify</i></p> <p>16 <input style="width: 100%;" type="text"/></p>
<p><b>15.</b> Is this person now, or has this person ever been, a <b>landed immigrant</b>?</p> <ul style="list-style-type: none"> <li>▪ <i>A <b>landed immigrant</b> is a person who has been granted the right to live in Canada permanently by immigration authorities.</i></li> </ul>	<p>17 <input type="radio"/> No → <b>Go to Question 17</b></p> <p>18 <input type="radio"/> Yes</p>	<p>17 <input type="radio"/> No → <b>Go to Question 17</b></p> <p>18 <input type="radio"/> Yes</p>
<p><b>16.</b> In what year did this person first become a landed immigrant?</p> <p><i>If exact year is not known, enter best estimate.</i></p>	<p style="text-align: center;">Year</p> <p>20 <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/></p>	<p style="text-align: center;">Year</p> <p>20 <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/></p>
<p><b>17.</b> To which ethnic or cultural group(s) did this person's <b>ancestors</b> belong?</p> <ul style="list-style-type: none"> <li>▪ <i>For example, French, English, German, Scottish, Canadian, Italian, Irish, Chinese, Cree, Micmac, Métis, Inuit (Eskimo), Ukrainian, Dutch, East Indian, Polish, Portuguese, Jewish, Haitian, Jamaican, Vietnamese, Lebanese, Chilean, Somali, etc.</i></li> </ul>	<p style="text-align: center;"><i>Specify as many groups as applicable</i></p> <p>21 <input style="width: 100%;" type="text"/></p> <p>22 <input style="width: 100%;" type="text"/></p> <p>23 <input style="width: 100%;" type="text"/></p> <p>24 <input style="width: 100%;" type="text"/></p>	<p style="text-align: center;"><i>Specify as many groups as applicable</i></p> <p>21 <input style="width: 100%;" type="text"/></p> <p>22 <input style="width: 100%;" type="text"/></p> <p>23 <input style="width: 100%;" type="text"/></p> <p>24 <input style="width: 100%;" type="text"/></p>





PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

<p><b>15.</b></p> <p><b>Born in Canada</b></p> <p>01 <input type="radio"/> Nfld.    07 <input type="radio"/> Man.            02 <input type="radio"/> P.E.I.    08 <input type="radio"/> Sask.            03 <input type="radio"/> N.S.    09 <input type="radio"/> Alta.            04 <input type="radio"/> N.B.    10 <input type="radio"/> B.C.            05 <input type="radio"/> Que.    11 <input type="radio"/> Yukon            06 <input type="radio"/> Ont.    12 <input type="radio"/> N.W.T.</p> <p><b>Born outside Canada</b></p> <p>Country – <i>Specify</i></p> <p>13 <input type="text"/></p>	<p><b>16.</b></p> <p><b>Born in Canada</b></p> <p>01 <input type="radio"/> Nfld.    07 <input type="radio"/> Man.            02 <input type="radio"/> P.E.I.    08 <input type="radio"/> Sask.            03 <input type="radio"/> N.S.    09 <input type="radio"/> Alta.            04 <input type="radio"/> N.B.    10 <input type="radio"/> B.C.            05 <input type="radio"/> Que.    11 <input type="radio"/> Yukon            06 <input type="radio"/> Ont.    12 <input type="radio"/> N.W.T.</p> <p><b>Born outside Canada</b></p> <p>Country – <i>Specify</i></p> <p>13 <input type="text"/></p>	<p><b>17.</b></p> <p><b>Born in Canada</b></p> <p>01 <input type="radio"/> Nfld.    07 <input type="radio"/> Man.            02 <input type="radio"/> P.E.I.    08 <input type="radio"/> Sask.            03 <input type="radio"/> N.S.    09 <input type="radio"/> Alta.            04 <input type="radio"/> N.B.    10 <input type="radio"/> B.C.            05 <input type="radio"/> Que.    11 <input type="radio"/> Yukon            06 <input type="radio"/> Ont.    12 <input type="radio"/> N.W.T.</p> <p><b>Born outside Canada</b></p> <p>Country – <i>Specify</i></p> <p>13 <input type="text"/></p>	<p><b>18.</b></p> <p><b>Born in Canada</b></p> <p>01 <input type="radio"/> Nfld.    07 <input type="radio"/> Man.            02 <input type="radio"/> P.E.I.    08 <input type="radio"/> Sask.            03 <input type="radio"/> N.S.    09 <input type="radio"/> Alta.            04 <input type="radio"/> N.B.    10 <input type="radio"/> B.C.            05 <input type="radio"/> Que.    11 <input type="radio"/> Yukon            06 <input type="radio"/> Ont.    12 <input type="radio"/> N.W.T.</p> <p><b>Born outside Canada</b></p> <p>Country – <i>Specify</i></p> <p>13 <input type="text"/></p>
<p>14 <input type="radio"/> Canada, by birth</p> <p>15 <input type="radio"/> Canada, by naturalization</p> <p>Other country – <i>Specify</i></p> <p>16 <input type="text"/></p>	<p>14 <input type="radio"/> Canada, by birth</p> <p>15 <input type="radio"/> Canada, by naturalization</p> <p>Other country – <i>Specify</i></p> <p>16 <input type="text"/></p>	<p>14 <input type="radio"/> Canada, by birth</p> <p>15 <input type="radio"/> Canada, by naturalization</p> <p>Other country – <i>Specify</i></p> <p>16 <input type="text"/></p>	<p>14 <input type="radio"/> Canada, by birth</p> <p>15 <input type="radio"/> Canada, by naturalization</p> <p>Other country – <i>Specify</i></p> <p>16 <input type="text"/></p>
<p>17 <input type="radio"/> No → Go to Question 17</p> <p>18 <input type="radio"/> Yes</p>	<p>17 <input type="radio"/> No → Go to Question 17</p> <p>18 <input type="radio"/> Yes</p>	<p>17 <input type="radio"/> No → Go to Question 17</p> <p>18 <input type="radio"/> Yes</p>	<p>17 <input type="radio"/> No → Go to Question 17</p> <p>18 <input type="radio"/> Yes</p>
<p>Year</p> <p>20 <input type="text"/></p>	<p>Year</p> <p>20 <input type="text"/></p>	<p>Year</p> <p>20 <input type="text"/></p>	<p>Year</p> <p>20 <input type="text"/></p>
<p><i>Specify as many groups as applicable</i></p> <p>21 <input type="text"/></p> <p>22 <input type="text"/></p> <p>23 <input type="text"/></p> <p>24 <input type="text"/></p>	<p><i>Specify as many groups as applicable</i></p> <p>21 <input type="text"/></p> <p>22 <input type="text"/></p> <p>23 <input type="text"/></p> <p>24 <input type="text"/></p>	<p><i>Specify as many groups as applicable</i></p> <p>21 <input type="text"/></p> <p>22 <input type="text"/></p> <p>23 <input type="text"/></p> <p>24 <input type="text"/></p>	<p><i>Specify as many groups as applicable</i></p> <p>21 <input type="text"/></p> <p>22 <input type="text"/></p> <p>23 <input type="text"/></p> <p>24 <input type="text"/></p>

<b>1. NAME</b> In the spaces provided, copy the names in the same order as in <b>Step 2</b> .  Then answer the following questions for each person.	PERSON 1	PERSON 2
	Family name  Given name                      Initial	Family name  Given name                      Initial

<b>18.</b> Is this person an Aboriginal person, that is, ■ North American Indian, Métis or Inuit (Eskimo)?  <i>If "Yes", mark the circle(s) that best describe(s) this person now.</i>	<b>19.</b> 01 <input type="radio"/> No 02 <input type="radio"/> Yes, North American Indian 03 <input type="radio"/> Yes, Métis 04 <input type="radio"/> Yes, Inuit (Eskimo)  <b>Go to Question 20</b>	<b>20.</b> 01 <input type="radio"/> No 02 <input type="radio"/> Yes, North American Indian 03 <input type="radio"/> Yes, Métis 04 <input type="radio"/> Yes, Inuit (Eskimo)  <b>Go to Question 20</b>
<b>19.</b> Is this person: ■ <i>Mark or specify more than one, if applicable.</i>   <b>Note:</b> <i>This information is collected to support programs which promote equal opportunity for everyone to share in the social, cultural and economic life of Canada.</i>	05 <input type="radio"/> White 06 <input type="radio"/> Chinese 07 <input type="radio"/> South Asian (e.g., East Indian, Pakistani, Punjabi, Sri Lankan) 08 <input type="radio"/> Black (e.g., African, Haitian, Jamaican, Somali) 09 <input type="radio"/> Arab/West Asian (e.g., Armenian, Egyptian, Iranian, Lebanese, Moroccan) 10 <input type="radio"/> Filipino 11 <input type="radio"/> South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese) 12 <input type="radio"/> Latin American 13 <input type="radio"/> Japanese 14 <input type="radio"/> Korean Other – Specify 15 <input type="text"/>	05 <input type="radio"/> White 06 <input type="radio"/> Chinese 07 <input type="radio"/> South Asian (e.g., East Indian, Pakistani, Punjabi, Sri Lankan) 08 <input type="radio"/> Black (e.g., African, Haitian, Jamaican, Somali) 09 <input type="radio"/> Arab/West Asian (e.g., Armenian, Egyptian, Iranian, Lebanese, Moroccan) 10 <input type="radio"/> Filipino 11 <input type="radio"/> South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese) 12 <input type="radio"/> Latin American 13 <input type="radio"/> Japanese 14 <input type="radio"/> Korean Other – Specify 15 <input type="text"/>
<b>20.</b> Is this person a member of an Indian Band/First Nation?	16 <input type="radio"/> No 17 <input type="radio"/> Yes, member of an Indian Band/First Nation Specify Indian Band/First Nation (for example, Musqueam) 18 <input type="text"/>	16 <input type="radio"/> No 17 <input type="radio"/> Yes, member of an Indian Band/First Nation Specify Indian Band/First Nation (for example, Musqueam) 18 <input type="text"/>
<b>21.</b> Is this person a Treaty Indian or a Registered Indian as defined by the <i>Indian Act</i> of Canada?	19 <input type="radio"/> No 20 <input type="radio"/> Yes, Treaty Indian or Registered Indian	19 <input type="radio"/> No 20 <input type="radio"/> Yes, Treaty Indian or Registered Indian

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

**21.**

01  No

02  Yes, North American Indian

03  Yes, Métis

04  Yes, Inuit (Eskimo)

**Go to Question 20**

**22.**

01  No

02  Yes, North American Indian

03  Yes, Métis

04  Yes, Inuit (Eskimo)

**Go to Question 20**

**23.**

01  No

02  Yes, North American Indian

03  Yes, Métis

04  Yes, Inuit (Eskimo)

**Go to Question 20**

**24.**

01  No

02  Yes, North American Indian

03  Yes, Métis

04  Yes, Inuit (Eskimo)

**Go to Question 20**

05  White

06  Chinese

07  South Asian (e.g., East Indian, Pakistani, Punjabi, Sri Lankan)

08  Black (e.g., African, Haitian, Jamaican, Somali)

09  Arab/West Asian (e.g., Armenian, Egyptian, Iranian, Lebanese, Moroccan)

10  Filipino

11  South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)

12  Latin American

13  Japanese

14  Korean

Other – Specify

15

05  White

06  Chinese

07  South Asian (e.g., East Indian, Pakistani, Punjabi, Sri Lankan)

08  Black (e.g., African, Haitian, Jamaican, Somali)

09  Arab/West Asian (e.g., Armenian, Egyptian, Iranian, Lebanese, Moroccan)

10  Filipino

11  South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)

12  Latin American

13  Japanese

14  Korean

Other – Specify

15

05  White

06  Chinese

07  South Asian (e.g., East Indian, Pakistani, Punjabi, Sri Lankan)

08  Black (e.g., African, Haitian, Jamaican, Somali)

09  Arab/West Asian (e.g., Armenian, Egyptian, Iranian, Lebanese, Moroccan)

10  Filipino

11  South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)

12  Latin American

13  Japanese

14  Korean

Other – Specify

15

05  White

06  Chinese

07  South Asian (e.g., East Indian, Pakistani, Punjabi, Sri Lankan)

08  Black (e.g., African, Haitian, Jamaican, Somali)

09  Arab/West Asian (e.g., Armenian, Egyptian, Iranian, Lebanese, Moroccan)

10  Filipino

11  South East Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)

12  Latin American

13  Japanese

14  Korean

Other – Specify

15

16  No

17  Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

18

16  No

17  Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

18

16  No

17  Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

18

16  No

17  Yes, member of an Indian Band/First Nation

Specify Indian Band/First Nation (for example, Musqueam)

18

19  No

20  Yes, Treaty Indian or Registered Indian

19  No

20  Yes, Treaty Indian or Registered Indian

19  No

20  Yes, Treaty Indian or Registered Indian

19  No

20  Yes, Treaty Indian or Registered Indian

<p><b>1. NAME</b></p> <p>In the spaces provided, copy the names in the same order as in <b>Step 2</b>.</p> <p>Then answer the following questions for each person.</p>	<b>PERSON 1</b>	<b>PERSON 2</b>							
	<table border="1"> <tr> <td colspan="2">Family name</td> </tr> <tr> <td>Given name</td> <td>Initial</td> </tr> </table>	Family name		Given name	Initial	<table border="1"> <tr> <td colspan="2">Family name</td> </tr> <tr> <td>Given name</td> <td>Initial</td> </tr> </table>	Family name		Given name
Family name									
Given name	Initial								
Family name									
Given name	Initial								

**Answer Questions 22 to 47 for each person aged 15 and over.**

M O B I L I T Y	25.	26.
<p><b>22.</b> Where did this person live <b>1 year ago</b>, that is, on May 14, 1995?</p> <p><i>Mark one circle only.</i></p> <p><b>Note:</b> Some large cities are made up of smaller cities or towns called municipalities. Where applicable, identify the municipality rather than the larger city, for example, Dorval rather than Montréal, Scarborough rather than Toronto, St. Albert rather than Edmonton, Saanich rather than Victoria.</p>	<p><b>01</b> <input type="radio"/> Lived at the <b>same</b> address as now</p> <p><b>02</b> <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p><b>03</b> <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p style="text-align: center;"><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p><b>04</b> → <input style="width: 100px;" type="text"/></p> <p>Province/territory</p> <p>→ <input style="width: 100px;" type="text"/></p> <p><b>05</b> <input type="radio"/> Lived <b>outside Canada</b></p> <p style="text-align: center;"><i>Specify name of country</i></p> <p><b>06</b> → <input style="width: 100px;" type="text"/></p>	<p><b>01</b> <input type="radio"/> Lived at the <b>same</b> address as now</p> <p><b>02</b> <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p><b>03</b> <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p style="text-align: center;"><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p><b>04</b> → <input style="width: 100px;" type="text"/></p> <p>Province/territory</p> <p>→ <input style="width: 100px;" type="text"/></p> <p><b>05</b> <input type="radio"/> Lived <b>outside Canada</b></p> <p style="text-align: center;"><i>Specify name of country</i></p> <p><b>06</b> → <input style="width: 100px;" type="text"/></p>
<p><b>23.</b> Where did this person live <b>5 years ago</b>, that is, on May 14, 1991?</p> <p><i>Mark one circle only.</i></p> <p><b>Note:</b> Some large cities are made up of smaller cities or towns called municipalities. Where applicable, identify the municipality rather than the larger city, for example, Dorval rather than Montréal, Scarborough rather than Toronto, St. Albert rather than Edmonton, Saanich rather than Victoria.</p>	<p><b>07</b> <input type="radio"/> Lived at the <b>same</b> address as now</p> <p><b>08</b> <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p><b>09</b> <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p style="text-align: center;"><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p><b>10</b> → <input style="width: 100px;" type="text"/></p> <p>Province/territory</p> <p>→ <input style="width: 100px;" type="text"/></p> <p><b>11</b> <input type="radio"/> Lived <b>outside Canada</b></p> <p style="text-align: center;"><i>Specify name of country</i></p> <p><b>12</b> → <input style="width: 100px;" type="text"/></p>	<p><b>07</b> <input type="radio"/> Lived at the <b>same</b> address as now</p> <p><b>08</b> <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p><b>09</b> <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p style="text-align: center;"><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p><b>10</b> → <input style="width: 100px;" type="text"/></p> <p>Province/territory</p> <p>→ <input style="width: 100px;" type="text"/></p> <p><b>11</b> <input type="radio"/> Lived <b>outside Canada</b></p> <p style="text-align: center;"><i>Specify name of country</i></p> <p><b>12</b> → <input style="width: 100px;" type="text"/></p>

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

**Answer Questions 22 to 47 for each person aged 15 and over.**

<p><b>27.</b></p> <p>01 <input type="radio"/> Lived at the <b>same</b> address as now</p> <p>02 <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p>03 <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>04 → <input type="text"/></p> <p>Province/territory</p> <p>→ <input type="text"/></p> <p>05 <input type="radio"/> Lived <b>outside Canada</b></p> <p><i>Specify name of country</i></p> <p>06 → <input type="text"/></p>	<p><b>28.</b></p> <p>01 <input type="radio"/> Lived at the <b>same</b> address as now</p> <p>02 <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p>03 <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>04 → <input type="text"/></p> <p>Province/territory</p> <p>→ <input type="text"/></p> <p>05 <input type="radio"/> Lived <b>outside Canada</b></p> <p><i>Specify name of country</i></p> <p>06 → <input type="text"/></p>	<p><b>29.</b></p> <p>01 <input type="radio"/> Lived at the <b>same</b> address as now</p> <p>02 <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p>03 <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>04 → <input type="text"/></p> <p>Province/territory</p> <p>→ <input type="text"/></p> <p>05 <input type="radio"/> Lived <b>outside Canada</b></p> <p><i>Specify name of country</i></p> <p>06 → <input type="text"/></p>	<p><b>30.</b></p> <p>01 <input type="radio"/> Lived at the <b>same</b> address as now</p> <p>02 <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p>03 <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>04 → <input type="text"/></p> <p>Province/territory</p> <p>→ <input type="text"/></p> <p>05 <input type="radio"/> Lived <b>outside Canada</b></p> <p><i>Specify name of country</i></p> <p>06 → <input type="text"/></p>
<p>07 <input type="radio"/> Lived at the <b>same</b> address as now</p> <p>08 <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p>09 <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>10 → <input type="text"/></p> <p>Province/territory</p> <p>→ <input type="text"/></p> <p>11 <input type="radio"/> Lived <b>outside Canada</b></p> <p><i>Specify name of country</i></p> <p>12 → <input type="text"/></p>	<p>07 <input type="radio"/> Lived at the <b>same</b> address as now</p> <p>08 <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p>09 <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>10 → <input type="text"/></p> <p>Province/territory</p> <p>→ <input type="text"/></p> <p>11 <input type="radio"/> Lived <b>outside Canada</b></p> <p><i>Specify name of country</i></p> <p>12 → <input type="text"/></p>	<p>07 <input type="radio"/> Lived at the <b>same</b> address as now</p> <p>08 <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p>09 <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>10 → <input type="text"/></p> <p>Province/territory</p> <p>→ <input type="text"/></p> <p>11 <input type="radio"/> Lived <b>outside Canada</b></p> <p><i>Specify name of country</i></p> <p>12 → <input type="text"/></p>	<p>07 <input type="radio"/> Lived at the <b>same</b> address as now</p> <p>08 <input type="radio"/> Lived at a <b>different</b> address in the <b>same</b> city, town, village, township, municipality or Indian reserve</p> <p>09 <input type="radio"/> Lived in a <b>different</b> city, town, village, township, municipality or Indian reserve <b>in Canada</b></p> <p><i>Specify below</i></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>10 → <input type="text"/></p> <p>Province/territory</p> <p>→ <input type="text"/></p> <p>11 <input type="radio"/> Lived <b>outside Canada</b></p> <p><i>Specify name of country</i></p> <p>12 → <input type="text"/></p>

PERSON 1		PERSON 2	
Family name		Family name	
Given name	Initial	Given name	Initial

Remember, these questions are only for persons aged 15 and over.			
EDUCATION		<b>31.</b>	<b>32.</b>
<b>24.</b> What is the <b>highest</b> grade (or year) of <b>secondary</b> (high school) or <b>elementary</b> school this person ever attended?  <i>Enter highest number (1 to 13) of grades or years, excluding kindergarten.</i>	<b>01</b> <input type="text"/> ◀ Number (1 to 13) of grades or years of secondary and/or elementary school  <b>OR</b> <b>02</b> <input type="radio"/> Never attended school or attended kindergarten only	<b>01</b> <input type="text"/> ◀ Number (1 to 13) of grades or years of secondary and/or elementary school  <b>OR</b> <b>02</b> <input type="radio"/> Never attended school or attended kindergarten only	
	<b>25.</b> How many years of education has this person completed at <b>university</b> ? <b>03</b> <input type="radio"/> None <b>04</b> <input type="radio"/> Less than 1 year (of completed courses) <b>05</b> <input type="text"/> ◀ Number of completed years at university	<b>03</b> <input type="radio"/> None <b>04</b> <input type="radio"/> Less than 1 year (of completed courses) <b>05</b> <input type="text"/> ◀ Number of completed years at university	<b>03</b> <input type="radio"/> None <b>04</b> <input type="radio"/> Less than 1 year (of completed courses) <b>05</b> <input type="text"/> ◀ Number of completed years at university
<b>26.</b> How many years of schooling has this person ever completed at an institution <b>other than</b> a university, a secondary (high) school or an elementary school?  <i>Include years of schooling at community colleges, technical institutes, CEGEPs (general and professional), private trade schools or private business colleges, diploma schools of nursing, etc.</i>	<b>06</b> <input type="radio"/> None <b>07</b> <input type="radio"/> Less than 1 year (of completed courses) <b>08</b> <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.	<b>06</b> <input type="radio"/> None <b>07</b> <input type="radio"/> Less than 1 year (of completed courses) <b>08</b> <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.	
	<b>27.</b> In the past <b>eight months</b> (that is, since last September), was this person attending a school, college or university?  <i>Include attendance at elementary or secondary schools, business or trade schools, community colleges, technical institutes, CEGEPs, etc., for courses which can be used as credits towards a certificate, diploma or degree.</i>  <i>Mark one circle only.</i>	<b>09</b> <input type="radio"/> No, did not attend in past eight months <b>10</b> <input type="radio"/> Yes, full time <b>11</b> <input type="radio"/> Yes, part time, day or evening	<b>09</b> <input type="radio"/> No, did not attend in past eight months <b>10</b> <input type="radio"/> Yes, full time <b>11</b> <input type="radio"/> Yes, part time, day or evening

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

**Remember, these questions are only for persons aged 15 and over.**

<p><b>33.</b></p> <p>01 <input type="text"/> ◀ Number (1 to 13) of grades or years of secondary and/or elementary school</p> <p>OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>	<p><b>34.</b></p> <p>01 <input type="text"/> ◀ Number (1 to 13) of grades or years of secondary and/or elementary school</p> <p>OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>	<p><b>35.</b></p> <p>01 <input type="text"/> ◀ Number (1 to 13) of grades or years of secondary and/or elementary school</p> <p>OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>	<p><b>36.</b></p> <p>01 <input type="text"/> ◀ Number (1 to 13) of grades or years of secondary and/or elementary school</p> <p>OR</p> <p>02 <input type="radio"/> Never attended school or attended kindergarten only</p>
<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> ◀ Number of completed years at university</p>	<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> ◀ Number of completed years at university</p>	<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> ◀ Number of completed years at university</p>	<p>03 <input type="radio"/> None</p> <p>04 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>05 <input type="text"/> ◀ Number of completed years at university</p>
<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>	<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>	<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>	<p>06 <input type="radio"/> None</p> <p>07 <input type="radio"/> Less than 1 year (of completed courses)</p> <p>08 <input type="text"/> ◀ Number of completed years at community colleges, trade schools, CEGEPs, etc.</p>
<p>09 <input type="radio"/> No, did not attend in past eight months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>	<p>09 <input type="radio"/> No, did not attend in past eight months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>	<p>09 <input type="radio"/> No, did not attend in past eight months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>	<p>09 <input type="radio"/> No, did not attend in past eight months</p> <p>10 <input type="radio"/> Yes, full time</p> <p>11 <input type="radio"/> Yes, part time, day or evening</p>

<p><b>1. NAME</b></p> <p>In the spaces provided, copy the names in the same order as in <b>Step 2</b>.</p> <p>Then answer the following questions for each person.</p>	<b>PERSON 1</b>	<b>PERSON 2</b>							
	<table border="1" style="width: 100%;"> <tr> <td colspan="2">Family name</td> </tr> <tr> <td>Given name</td> <td>Initial</td> </tr> </table>	Family name		Given name	Initial	<table border="1" style="width: 100%;"> <tr> <td colspan="2">Family name</td> </tr> <tr> <td>Given name</td> <td>Initial</td> </tr> </table>	Family name		Given name
Family name									
Given name	Initial								
Family name									
Given name	Initial								

**Remember, these questions are only for persons aged 15 and over.**

<p><b>28.</b> What certificates, diplomas or degrees has this person ever obtained?</p> <ul style="list-style-type: none"> <li>■ Include all qualifications obtained from <b>secondary (high) schools, or trade schools and other postsecondary educational institutions.</b></li> </ul> <p><i>Mark as many circles as applicable.</i></p>	<p style="background-color: #cccccc; padding: 2px;"><b>37.</b></p> <p>01 <input type="radio"/> None → <b>Go to Question 30</b></p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma <b>below</b> bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma <b>above</b> bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p>	<p style="background-color: #cccccc; padding: 2px;"><b>38.</b></p> <p>01 <input type="radio"/> None → <b>Go to Question 30</b></p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma <b>below</b> bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma <b>above</b> bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p>
<p><b>29.</b> What was the major field of study or training of this person's <b>highest</b> degree, certificate or diploma (<b>excluding</b> secondary or high school graduation certificates)?</p> <p><i>For example, accounting, carpentry, civil engineering, history, legal secretary, welding.</i></p>	<p>Major field of study or training</p> <p>11 <input type="text"/></p> <p style="text-align: center;"><b>OR</b></p> <p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>	<p>Major field of study or training</p> <p>11 <input type="text"/></p> <p style="text-align: center;"><b>OR</b></p> <p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>



PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

**Remember, these questions are only for persons aged 15 and over.**

<p><b>39.</b></p> <p>01 <input type="radio"/> None → <b>Go to Question 30</b></p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma <b>below</b> bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma <b>above</b> bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p>	<p><b>40.</b></p> <p>01 <input type="radio"/> None → <b>Go to Question 30</b></p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma <b>below</b> bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma <b>above</b> bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p>	<p><b>41.</b></p> <p>01 <input type="radio"/> None → <b>Go to Question 30</b></p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma <b>below</b> bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma <b>above</b> bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p>	<p><b>42.</b></p> <p>01 <input type="radio"/> None → <b>Go to Question 30</b></p> <p>02 <input type="radio"/> Secondary (high) school graduation certificate or equivalent</p> <p>03 <input type="radio"/> Trades certificate or diploma</p> <p>04 <input type="radio"/> Other non-university certificate or diploma (obtained at community college, CEGEP, technical institute, etc.)</p> <p>05 <input type="radio"/> University certificate or diploma <b>below</b> bachelor level</p> <p>06 <input type="radio"/> Bachelor's degree(s) (e.g., B.A., B.Sc., LL.B.)</p> <p>07 <input type="radio"/> University certificate or diploma <b>above</b> bachelor level</p> <p>08 <input type="radio"/> Master's degree(s) (e.g., M.A., M.Sc., M.Ed.)</p> <p>09 <input type="radio"/> Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)</p> <p>10 <input type="radio"/> Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)</p>
<p>Major field of study or training</p> <p>11 <input type="text"/></p> <p>OR</p> <p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>	<p>Major field of study or training</p> <p>11 <input type="text"/></p> <p>OR</p> <p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>	<p>Major field of study or training</p> <p>11 <input type="text"/></p> <p>OR</p> <p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>	<p>Major field of study or training</p> <p>11 <input type="text"/></p> <p>OR</p> <p>12 <input type="radio"/> This person's highest qualification is a secondary (high) school graduation certificate</p>

<p><b>1. NAME</b></p> <p>In the spaces provided, copy the names in the same order as in <b>Step 2</b>.</p> <p>Then answer the following questions for each person.</p>	PERSON 1	PERSON 2
	Family name	Family name
	Given name                      Initial	Given name                      Initial

Remember, these questions are only for persons aged 15 and over.

HOUSEHOLD ACTIVITIES	43.	44.
<p><b>Note:</b> <i>Last week</i> refers to Sunday, May 5 to Saturday, May 11, 1996.</p> <p>In Question 30, where activities overlap, report the same hours in more than one part.</p> <p><b>30. Last week</b>, how many hours did this person spend doing the following activities?</p> <p>■ spend doing the following activities?</p> <p>(a) Doing <b>unpaid</b> housework, yard work or home maintenance for members of this household, or others.</p> <p style="padding-left: 20px;"><i>Some examples include: preparing meals, doing laundry, household planning, shopping and cutting the grass.</i></p>	<p>01 <input type="radio"/> None</p> <p>02 <input type="radio"/> Less than 5 hours</p> <p>03 <input type="radio"/> 5 to 14 hours</p> <p>04 <input type="radio"/> 15 to 29 hours</p> <p>05 <input type="radio"/> 30 to 59 hours</p> <p>06 <input type="radio"/> 60 hours or more</p>	<p>01 <input type="radio"/> None</p> <p>02 <input type="radio"/> Less than 5 hours</p> <p>03 <input type="radio"/> 5 to 14 hours</p> <p>04 <input type="radio"/> 15 to 29 hours</p> <p>05 <input type="radio"/> 30 to 59 hours</p> <p>06 <input type="radio"/> 60 hours or more</p>
<p>(b) Looking after one or more of this person's own children, or the children of others, <b>without pay</b>.</p> <p style="padding-left: 20px;"><i>Some examples include: bathing or playing with young children, driving children to sports activities or helping them with homework, and talking with teens about their problems.</i></p>	<p>07 <input type="radio"/> None</p> <p>08 <input type="radio"/> Less than 5 hours</p> <p>09 <input type="radio"/> 5 to 14 hours</p> <p>10 <input type="radio"/> 15 to 29 hours</p> <p>11 <input type="radio"/> 30 to 59 hours</p> <p>12 <input type="radio"/> 60 hours or more</p>	<p>07 <input type="radio"/> None</p> <p>08 <input type="radio"/> Less than 5 hours</p> <p>09 <input type="radio"/> 5 to 14 hours</p> <p>10 <input type="radio"/> 15 to 29 hours</p> <p>11 <input type="radio"/> 30 to 59 hours</p> <p>12 <input type="radio"/> 60 hours or more</p>
<p>(c) Providing <b>unpaid</b> care or assistance to one or more seniors.</p> <p style="padding-left: 20px;"><i>Some examples include: providing personal care to a senior family member, visiting seniors, talking with them on the telephone, and helping them with shopping, banking or with taking medication.</i></p>	<p>13 <input type="radio"/> None</p> <p>14 <input type="radio"/> Less than 5 hours</p> <p>15 <input type="radio"/> 5 to 9 hours</p> <p>16 <input type="radio"/> 10 hours or more</p>	<p>13 <input type="radio"/> None</p> <p>14 <input type="radio"/> Less than 5 hours</p> <p>15 <input type="radio"/> 5 to 9 hours</p> <p>16 <input type="radio"/> 10 hours or more</p>
<p><b>LABOUR MARKET ACTIVITIES</b></p> <p><b>31. Last week</b>, how many hours did this person spend working for pay or in self-employment?</p> <p><i>Include:</i></p> <ul style="list-style-type: none"> <li>• working directly towards the operation of a family farm or business without formal pay arrangements (e.g., assisting in seeding, doing accounts);</li> <li>• working in his/her own business, farm or professional practice, alone or in partnership;</li> <li>• working for wages, salary, tips or commission.</li> </ul>	<p>17 <input type="radio"/> None → Continue with the next question</p> <p style="text-align: center;"><b>OR</b></p> <p>18 <input style="width: 40px; height: 20px;" type="text"/> ← Number of hours (to the nearest hour)</p> <p style="text-align: right;">→ Go to Question 37</p>	<p>17 <input type="radio"/> None → Continue with the next question</p> <p style="text-align: center;"><b>OR</b></p> <p>18 <input style="width: 40px; height: 20px;" type="text"/> ← Number of hours (to the nearest hour)</p> <p style="text-align: right;">→ Go to Question 37</p>

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

**Remember, these questions are only for persons aged 15 and over.**

<p><b>45.</b></p> <p>01 <input type="radio"/> None                      02 <input type="radio"/> Less than 5 hours                      03 <input type="radio"/> 5 to 14 hours                      04 <input type="radio"/> 15 to 29 hours                      05 <input type="radio"/> 30 to 59 hours                      06 <input type="radio"/> 60 hours or more</p>	<p><b>46.</b></p> <p>01 <input type="radio"/> None                      02 <input type="radio"/> Less than 5 hours                      03 <input type="radio"/> 5 to 14 hours                      04 <input type="radio"/> 15 to 29 hours                      05 <input type="radio"/> 30 to 59 hours                      06 <input type="radio"/> 60 hours or more</p>	<p><b>47.</b></p> <p>01 <input type="radio"/> None                      02 <input type="radio"/> Less than 5 hours                      03 <input type="radio"/> 5 to 14 hours                      04 <input type="radio"/> 15 to 29 hours                      05 <input type="radio"/> 30 to 59 hours                      06 <input type="radio"/> 60 hours or more</p>	<p><b>48.</b></p> <p>01 <input type="radio"/> None                      02 <input type="radio"/> Less than 5 hours                      03 <input type="radio"/> 5 to 14 hours                      04 <input type="radio"/> 15 to 29 hours                      05 <input type="radio"/> 30 to 59 hours                      06 <input type="radio"/> 60 hours or more</p>
<p>07 <input type="radio"/> None                      08 <input type="radio"/> Less than 5 hours                      09 <input type="radio"/> 5 to 14 hours                      10 <input type="radio"/> 15 to 29 hours                      11 <input type="radio"/> 30 to 59 hours                      12 <input type="radio"/> 60 hours or more</p>	<p>07 <input type="radio"/> None                      08 <input type="radio"/> Less than 5 hours                      09 <input type="radio"/> 5 to 14 hours                      10 <input type="radio"/> 15 to 29 hours                      11 <input type="radio"/> 30 to 59 hours                      12 <input type="radio"/> 60 hours or more</p>	<p>07 <input type="radio"/> None                      08 <input type="radio"/> Less than 5 hours                      09 <input type="radio"/> 5 to 14 hours                      10 <input type="radio"/> 15 to 29 hours                      11 <input type="radio"/> 30 to 59 hours                      12 <input type="radio"/> 60 hours or more</p>	<p>07 <input type="radio"/> None                      08 <input type="radio"/> Less than 5 hours                      09 <input type="radio"/> 5 to 14 hours                      10 <input type="radio"/> 15 to 29 hours                      11 <input type="radio"/> 30 to 59 hours                      12 <input type="radio"/> 60 hours or more</p>
<p>13 <input type="radio"/> None                      14 <input type="radio"/> Less than 5 hours                      15 <input type="radio"/> 5 to 9 hours                      16 <input type="radio"/> 10 hours or more</p>	<p>13 <input type="radio"/> None                      14 <input type="radio"/> Less than 5 hours                      15 <input type="radio"/> 5 to 9 hours                      16 <input type="radio"/> 10 hours or more</p>	<p>13 <input type="radio"/> None                      14 <input type="radio"/> Less than 5 hours                      15 <input type="radio"/> 5 to 9 hours                      16 <input type="radio"/> 10 hours or more</p>	<p>13 <input type="radio"/> None                      14 <input type="radio"/> Less than 5 hours                      15 <input type="radio"/> 5 to 9 hours                      16 <input type="radio"/> 10 hours or more</p>
<p>17 <input type="radio"/> None → Continue with the next question                      OR                      18 <input type="text"/> ← Number of hours (to the nearest hour)                      → Go to Question 37</p>	<p>17 <input type="radio"/> None → Continue with the next question                      OR                      18 <input type="text"/> ← Number of hours (to the nearest hour)                      → Go to Question 37</p>	<p>17 <input type="radio"/> None → Continue with the next question                      OR                      18 <input type="text"/> ← Number of hours (to the nearest hour)                      → Go to Question 37</p>	<p>17 <input type="radio"/> None → Continue with the next question                      OR                      18 <input type="text"/> ← Number of hours (to the nearest hour)                      → Go to Question 37</p>

<p><b>1. NAME</b></p> <p>In the spaces provided, copy the names in the same order as in <b>Step 2</b>.</p> <p>Then answer the following questions for each person.</p>	<b>PERSON 1</b>	<b>PERSON 2</b>
	Family name	Family name
	Given name                      Initial	Given name                      Initial

**Remember, these questions are only for persons aged 15 and over.**

<p><b>32. Last week</b>, was this person on temporary lay-off or absent from his/her job or business?</p> <p><i>Mark one circle only.</i></p>	<p><b>49.</b></p> <p>01 <input type="radio"/> No</p> <p>02 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>03 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>	<p><b>50.</b></p> <p>01 <input type="radio"/> No</p> <p>02 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>03 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>
<p><b>33. Last week</b>, did this person have definite arrangements to start a new job within the next four weeks?</p>	<p>04 <input type="radio"/> No</p> <p>05 <input type="radio"/> Yes</p>	<p>04 <input type="radio"/> No</p> <p>05 <input type="radio"/> Yes</p>
<p><b>34.</b> Did this person look for paid work <b>during the past four weeks</b>?</p> <p><i>For example, did this person contact a Canada Employment Centre, check with employers, place or answer newspaper ads?</i></p> <p><i>Mark one circle only.</i></p>	<p>06 <input type="radio"/> No → <b>Go to Question 36</b></p> <p>07 <input type="radio"/> Yes, looked for full-time work</p> <p>08 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>	<p>06 <input type="radio"/> No → <b>Go to Question 36</b></p> <p>07 <input type="radio"/> Yes, looked for full-time work</p> <p>08 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>
<p><b>35.</b> Could this person have started a job <b>last week</b> had one been available?</p> <p><i>Mark one circle only.</i></p>	<p>09 <input type="radio"/> Yes, could have started a job</p> <p>10 <input type="radio"/> No, already had a job</p> <p>11 <input type="radio"/> No, because of temporary illness or disability</p> <p>12 <input type="radio"/> No, because of personal or family responsibilities</p> <p>13 <input type="radio"/> No, going to school</p> <p>14 <input type="radio"/> No, other reasons</p>	<p>09 <input type="radio"/> Yes, could have started a job</p> <p>10 <input type="radio"/> No, already had a job</p> <p>11 <input type="radio"/> No, because of temporary illness or disability</p> <p>12 <input type="radio"/> No, because of personal or family responsibilities</p> <p>13 <input type="radio"/> No, going to school</p> <p>14 <input type="radio"/> No, other reasons</p>
<p><b>36.</b> When did this person <b>last work for pay or in self-employment</b>, even for a few days?</p> <p><i>Mark one circle only.</i></p>	<p>15 <input type="radio"/> In 1996      ▶ <b>Continue with the next question</b></p> <p>16 <input type="radio"/> In 1995      ▶ <b>Continue with the next question</b></p> <p>17 <input type="radio"/> Before 1995      ▶ <b>Go to Question 47</b></p> <p>18 <input type="radio"/> Never              ▶ <b>Go to Question 47</b></p>	<p>15 <input type="radio"/> In 1996      ▶ <b>Continue with the next question</b></p> <p>16 <input type="radio"/> In 1995      ▶ <b>Continue with the next question</b></p> <p>17 <input type="radio"/> Before 1995      ▶ <b>Go to Question 47</b></p> <p>18 <input type="radio"/> Never              ▶ <b>Go to Question 47</b></p>

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

Remember, these questions are only for persons aged 15 and over.			
<p><b>51.</b></p> <p>01 <input type="radio"/> No</p> <p>02 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>03 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>	<p><b>52.</b></p> <p>01 <input type="radio"/> No</p> <p>02 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>03 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>	<p><b>53.</b></p> <p>01 <input type="radio"/> No</p> <p>02 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>03 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>	<p><b>54.</b></p> <p>01 <input type="radio"/> No</p> <p>02 <input type="radio"/> Yes, on temporary lay-off from a job to which this person expects to return</p> <p>03 <input type="radio"/> Yes, on vacation, ill, on strike or locked out, or absent for other reasons</p>
<p>04 <input type="radio"/> No</p> <p>05 <input type="radio"/> Yes</p>	<p>04 <input type="radio"/> No</p> <p>05 <input type="radio"/> Yes</p>	<p>04 <input type="radio"/> No</p> <p>05 <input type="radio"/> Yes</p>	<p>04 <input type="radio"/> No</p> <p>05 <input type="radio"/> Yes</p>
<p>06 <input type="radio"/> No → <b>Go to Question 36</b></p> <p>07 <input type="radio"/> Yes, looked for full-time work</p> <p>08 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>	<p>06 <input type="radio"/> No → <b>Go to Question 36</b></p> <p>07 <input type="radio"/> Yes, looked for full-time work</p> <p>08 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>	<p>06 <input type="radio"/> No → <b>Go to Question 36</b></p> <p>07 <input type="radio"/> Yes, looked for full-time work</p> <p>08 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>	<p>06 <input type="radio"/> No → <b>Go to Question 36</b></p> <p>07 <input type="radio"/> Yes, looked for full-time work</p> <p>08 <input type="radio"/> Yes, looked for part-time work (less than 30 hours per week)</p>
<p>09 <input type="radio"/> Yes, could have started a job</p> <p>10 <input type="radio"/> No, already had a job</p> <p>11 <input type="radio"/> No, because of temporary illness or disability</p> <p>12 <input type="radio"/> No, because of personal or family responsibilities</p> <p>13 <input type="radio"/> No, going to school</p> <p>14 <input type="radio"/> No, other reasons</p>	<p>09 <input type="radio"/> Yes, could have started a job</p> <p>10 <input type="radio"/> No, already had a job</p> <p>11 <input type="radio"/> No, because of temporary illness or disability</p> <p>12 <input type="radio"/> No, because of personal or family responsibilities</p> <p>13 <input type="radio"/> No, going to school</p> <p>14 <input type="radio"/> No, other reasons</p>	<p>09 <input type="radio"/> Yes, could have started a job</p> <p>10 <input type="radio"/> No, already had a job</p> <p>11 <input type="radio"/> No, because of temporary illness or disability</p> <p>12 <input type="radio"/> No, because of personal or family responsibilities</p> <p>13 <input type="radio"/> No, going to school</p> <p>14 <input type="radio"/> No, other reasons</p>	<p>09 <input type="radio"/> Yes, could have started a job</p> <p>10 <input type="radio"/> No, already had a job</p> <p>11 <input type="radio"/> No, because of temporary illness or disability</p> <p>12 <input type="radio"/> No, because of personal or family responsibilities</p> <p>13 <input type="radio"/> No, going to school</p> <p>14 <input type="radio"/> No, other reasons</p>
<p>15 <input type="radio"/> In 1996 → <b>Continue with the next question</b></p> <p>16 <input type="radio"/> In 1995 → <b>Continue with the next question</b></p> <p>17 <input type="radio"/> Before 1995 → <b>Go to Question 47</b></p> <p>18 <input type="radio"/> Never → <b>Go to Question 47</b></p>	<p>15 <input type="radio"/> In 1996 → <b>Continue with the next question</b></p> <p>16 <input type="radio"/> In 1995 → <b>Continue with the next question</b></p> <p>17 <input type="radio"/> Before 1995 → <b>Go to Question 47</b></p> <p>18 <input type="radio"/> Never → <b>Go to Question 47</b></p>	<p>15 <input type="radio"/> In 1996 → <b>Continue with the next question</b></p> <p>16 <input type="radio"/> In 1995 → <b>Continue with the next question</b></p> <p>17 <input type="radio"/> Before 1995 → <b>Go to Question 47</b></p> <p>18 <input type="radio"/> Never → <b>Go to Question 47</b></p>	<p>15 <input type="radio"/> In 1996 → <b>Continue with the next question</b></p> <p>16 <input type="radio"/> In 1995 → <b>Continue with the next question</b></p> <p>17 <input type="radio"/> Before 1995 → <b>Go to Question 47</b></p> <p>18 <input type="radio"/> Never → <b>Go to Question 47</b></p>

<p><b>1. NAME</b></p> <p>In the spaces provided, copy the names in the same order as in <b>Step 2</b>.</p> <p>Then answer the following questions for each person.</p>	<b>PERSON 1</b>	<b>PERSON 2</b>							
	<table border="1"> <tr> <td colspan="2">Family name</td> </tr> <tr> <td>Given name</td> <td>Initial</td> </tr> </table>	Family name		Given name	Initial	<table border="1"> <tr> <td colspan="2">Family name</td> </tr> <tr> <td>Given name</td> <td>Initial</td> </tr> </table>	Family name		Given name
Family name									
Given name	Initial								
Family name									
Given name	Initial								

**Remember, these questions are only for persons aged 15 and over.**

<p><b>Note:</b></p> <p><b>Questions 37 to 44 refer to this person's job or business last week.</b> If this person held no job last week, answer for the job of longest duration since January 1, 1995. If this person held more than one job last week, answer for the job at which he/she worked <b>the most hours</b>.</p>	<b>55.</b>	<b>56.</b>	
	<p>37. For whom did this person work?</p>	<p>Name of firm, government agency, etc.</p> <p>01 <input type="text"/></p> <p>02 <input type="text"/></p>	<p>Name of firm, government agency, etc.</p> <p>01 <input type="text"/></p> <p>02 <input type="text"/></p>
	<p>38. What kind of business, industry or service was this?</p> <p><i>Give full description. For example, wheat farm, trapping, road maintenance, retail shoe store, secondary school, temporary help agency, municipal police.</i></p>	<p>Kind of business, industry or service</p> <p>03 <input type="text"/></p> <p>04 <input type="text"/></p>	<p>Kind of business, industry or service</p> <p>03 <input type="text"/></p> <p>04 <input type="text"/></p>
	<p>39. What kind of work was this person doing?</p> <p><i>For example, janitor, medical lab technician, accounting clerk, manager of civil engineering department, secondary school teacher, supervisor of data entry unit, fishing guide. (If in the Armed Forces, give rank.)</i></p>	<p>Kind of work</p> <p>05 <input type="text"/></p>	<p>Kind of work</p> <p>05 <input type="text"/></p>
	<p>40. In this work, what were this person's most important duties or activities?</p> <p><i>For example, cleaning buildings, analysing blood samples, verifying invoices, coordinating civil engineering projects, teaching mathematics, organizing work schedules and monitoring data entry systems, guiding fishing parties.</i></p>	<p>Most important duties or activities</p> <p>06 <input type="text"/></p>	<p>Most important duties or activities</p> <p>06 <input type="text"/></p>

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

**Remember, these questions are only for persons aged 15 and over.**

<p><b>57.</b></p> <p>Name of firm, government agency, etc.</p> <p>01 <input type="text"/></p> <p>Section, plant, department, branch or division</p> <p>02 <input type="text"/></p> <p>Kind of business, industry or service</p> <p>03 <input type="text"/></p> <p>04 <input type="text"/></p> <p>Kind of work</p> <p>05 <input type="text"/></p> <p>Most important duties or activities</p> <p>06 <input type="text"/></p>	<p><b>58.</b></p> <p>Name of firm, government agency, etc.</p> <p>01 <input type="text"/></p> <p>Section, plant, department, branch or division</p> <p>02 <input type="text"/></p> <p>Kind of business, industry or service</p> <p>03 <input type="text"/></p> <p>04 <input type="text"/></p> <p>Kind of work</p> <p>05 <input type="text"/></p> <p>Most important duties or activities</p> <p>06 <input type="text"/></p>	<p><b>59.</b></p> <p>Name of firm, government agency, etc.</p> <p>01 <input type="text"/></p> <p>Section, plant, department, branch or division</p> <p>02 <input type="text"/></p> <p>Kind of business, industry or service</p> <p>03 <input type="text"/></p> <p>04 <input type="text"/></p> <p>Kind of work</p> <p>05 <input type="text"/></p> <p>Most important duties or activities</p> <p>06 <input type="text"/></p>	<p><b>60.</b></p> <p>Name of firm, government agency, etc.</p> <p>01 <input type="text"/></p> <p>Section, plant, department, branch or division</p> <p>02 <input type="text"/></p> <p>Kind of business, industry or service</p> <p>03 <input type="text"/></p> <p>04 <input type="text"/></p> <p>Kind of work</p> <p>05 <input type="text"/></p> <p>Most important duties or activities</p> <p>06 <input type="text"/></p>
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<p><b>1. NAME</b></p> <p>In the spaces provided, copy the names in the same order as in <b>Step 2</b>.</p> <p>Then answer the following questions for each person.</p>	<b>PERSON 1</b>		<b>PERSON 2</b>	
	Family name		Family name	
	Given name	Initial	Given name	Initial

**Remember, these questions are only for persons aged 15 and over.**

<p><b>41.</b> In this job or business, was this person mainly:</p> <p><i>Mark one circle only.</i></p>	<p><b>61.</b></p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? → <b>Go to Question 43</b></p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? → <b>Go to Question 43</b></p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p>	<p><b>62.</b></p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? → <b>Go to Question 43</b></p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? → <b>Go to Question 43</b></p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p>
<p><b>42.</b> If self-employed, was this person's farm or business incorporated?</p> <p>■ <input type="checkbox"/> No</p> <p>■ <input type="checkbox"/> Yes</p>	<p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p>	<p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p>
<p><b>43.</b> At what address did this person <b>usually</b> work?</p> <p><i>Example:</i></p> <p style="text-align: center;">365 Laurier Ave. West</p> <p>Number _____ ↑</p> <p>Name _____ ↑</p> <p>Type _____ ↑</p> <p>Direction _____ ↑</p> <p><i>If direction (e.g., North, South, East or West) is a part of the street address, please include it.</i></p> <p><i>If street address is unknown, specify the building or nearest street intersection.</i></p> <p><b>Note:</b> Some large cities are made up of smaller cities or towns called municipalities. Where applicable, identify the municipality rather than the larger city, for example, Dorval rather than Montréal, Scarborough rather than Toronto, St. Albert rather than Edmonton, Saanich rather than Victoria.</p>	<p>07 <input type="radio"/> Worked at home (including farms) → <b>Go to Question 45</b></p> <p>08 <input type="radio"/> Worked outside Canada → <b>Go to Question 45</b></p> <p>09 <input type="radio"/> No fixed workplace address → <b>Go to Question 44</b></p> <p>10 <input type="radio"/> Worked at the address specified below: <b>Specify complete address</b></p> <p>Street address (see example)</p> <p>11 → <input style="width: 100%;" type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 → <input style="width: 100%;" type="text"/></p> <p>Province/territory</p> <p>→ <input style="width: 100%;" type="text"/></p> <p>Postal code</p> <p>13 → <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/></p>	<p>07 <input type="radio"/> Worked at home (including farms) → <b>Go to Question 45</b></p> <p>08 <input type="radio"/> Worked outside Canada → <b>Go to Question 45</b></p> <p>09 <input type="radio"/> No fixed workplace address → <b>Go to Question 44</b></p> <p>10 <input type="radio"/> Worked at the address specified below: <b>Specify complete address</b></p> <p>Street address (see example)</p> <p>11 → <input style="width: 100%;" type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 → <input style="width: 100%;" type="text"/></p> <p>Province/territory</p> <p>→ <input style="width: 100%;" type="text"/></p> <p>Postal code</p> <p>13 → <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/></p>



PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

**Remember, these questions are only for persons aged 15 and over.**

<p><b>63.</b></p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? → <b>Go to Question 43</b></p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? → <b>Go to Question 43</b></p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p> <p>07 <input type="radio"/> Worked at home (including farms) <b>Go to Question 45</b></p> <p>08 <input type="radio"/> Worked outside Canada <b>Go to Question 45</b></p> <p>09 <input type="radio"/> No fixed workplace address <b>Go to Question 44</b></p> <p>10 <input type="radio"/> Worked at the address specified below: <b>Specify complete address</b></p> <p>Street address (see example)</p> <p>11 <input type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input type="text"/></p> <p>Province/territory</p> <p><input type="text"/></p> <p>Postal code</p> <p>13 <input type="text"/> <input type="text"/></p>	<p><b>64.</b></p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? → <b>Go to Question 43</b></p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? → <b>Go to Question 43</b></p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p> <p>07 <input type="radio"/> Worked at home (including farms) <b>Go to Question 45</b></p> <p>08 <input type="radio"/> Worked outside Canada <b>Go to Question 45</b></p> <p>09 <input type="radio"/> No fixed workplace address <b>Go to Question 44</b></p> <p>10 <input type="radio"/> Worked at the address specified below: <b>Specify complete address</b></p> <p>Street address (see example)</p> <p>11 <input type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input type="text"/></p> <p>Province/territory</p> <p><input type="text"/></p> <p>Postal code</p> <p>13 <input type="text"/> <input type="text"/></p>	<p><b>65.</b></p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? → <b>Go to Question 43</b></p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? → <b>Go to Question 43</b></p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p> <p>07 <input type="radio"/> Worked at home (including farms) <b>Go to Question 45</b></p> <p>08 <input type="radio"/> Worked outside Canada <b>Go to Question 45</b></p> <p>09 <input type="radio"/> No fixed workplace address <b>Go to Question 44</b></p> <p>10 <input type="radio"/> Worked at the address specified below: <b>Specify complete address</b></p> <p>Street address (see example)</p> <p>11 <input type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input type="text"/></p> <p>Province/territory</p> <p><input type="text"/></p> <p>Postal code</p> <p>13 <input type="text"/> <input type="text"/></p>	<p><b>66.</b></p> <p>01 <input type="radio"/> working for wages, salary, tips or commission? → <b>Go to Question 43</b></p> <p>02 <input type="radio"/> working without pay for his/her spouse or another relative in a family farm or business? → <b>Go to Question 43</b></p> <p>03 <input type="radio"/> self-employed without paid help (alone or in partnership)?</p> <p>04 <input type="radio"/> self-employed with paid help (alone or in partnership)?</p> <p>05 <input type="radio"/> No</p> <p>06 <input type="radio"/> Yes</p> <p>07 <input type="radio"/> Worked at home (including farms) <b>Go to Question 45</b></p> <p>08 <input type="radio"/> Worked outside Canada <b>Go to Question 45</b></p> <p>09 <input type="radio"/> No fixed workplace address <b>Go to Question 44</b></p> <p>10 <input type="radio"/> Worked at the address specified below: <b>Specify complete address</b></p> <p>Street address (see example)</p> <p>11 <input type="text"/></p> <p>City, town, village, township, municipality or Indian reserve</p> <p>12 <input type="text"/></p> <p>Province/territory</p> <p><input type="text"/></p> <p>Postal code</p> <p>13 <input type="text"/> <input type="text"/></p>
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<p><b>1. NAME</b></p> <p>In the spaces provided, copy the names in the same order as in <b>Step 2</b>.</p> <p>Then answer the following questions for each person.</p>	<b>PERSON 1</b>		<b>PERSON 2</b>	
	Family name		Family name	
	Given name	Initial	Given name	Initial

**Remember, these questions are only for persons aged 15 and over.**

<p><b>44.</b> How did this person <b>usually</b> get to work?</p> <p><i>If this person used more than one method of transportation, mark the one used for most of the travel distance.</i></p>	<b>67.</b>	<b>68.</b>
	<p><b>01</b> <input type="radio"/> Car, truck or van – as driver</p> <p><b>02</b> <input type="radio"/> Car, truck or van – as passenger</p> <p><b>03</b> <input type="radio"/> Public transit (e.g. bus, street car, subway, light rail transit, commuter train, ferry)</p> <p><b>04</b> <input type="radio"/> Walked to work</p> <p><b>05</b> <input type="radio"/> Bicycle</p> <p><b>06</b> <input type="radio"/> Motorcycle</p> <p><b>07</b> <input type="radio"/> Taxicab</p> <p><b>08</b> <input type="radio"/> Other method</p>	<p><b>01</b> <input type="radio"/> Car, truck or van – as driver</p> <p><b>02</b> <input type="radio"/> Car, truck or van – as passenger</p> <p><b>03</b> <input type="radio"/> Public transit (e.g. bus, street car, subway, light rail transit, commuter train, ferry)</p> <p><b>04</b> <input type="radio"/> Walked to work</p> <p><b>05</b> <input type="radio"/> Bicycle</p> <p><b>06</b> <input type="radio"/> Motorcycle</p> <p><b>07</b> <input type="radio"/> Taxicab</p> <p><b>08</b> <input type="radio"/> Other method</p>
	<p><b>45.</b> In how many <b>weeks</b> did this person work in <b>1995</b>?</p> <p><i>Include those weeks in which this person:</i></p> <ul style="list-style-type: none"> <li>• was on vacation or sick leave with pay;</li> <li>• worked full time or part time;</li> <li>• worked for wages, salary, tips or commission;</li> <li>• was self-employed;</li> <li>• worked directly towards the operation of a family farm or business without formal pay arrangements.</li> </ul>	<p><b>09</b> <input type="radio"/> None → Go to Question 47</p> <p style="text-align: center;"><b>OR</b></p> <p><b>10</b> <input type="text"/> ← Number of weeks</p>
<p><b>46.</b> During <b>most</b> of those weeks, did this person work <b>full time</b> or <b>part time</b>?</p> <p><i>Mark one circle only.</i></p>	<p><b>11</b> <input type="radio"/> Full time (30 hours or more per week)</p> <p><b>12</b> <input type="radio"/> Part time (less than 30 hours per week)</p>	<p><b>11</b> <input type="radio"/> Full time (30 hours or more per week)</p> <p><b>12</b> <input type="radio"/> Part time (less than 30 hours per week)</p>

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

**Remember, these questions are only for persons aged 15 and over.**

<p><b>69.</b></p> <p>01 <input type="radio"/> Car, truck or van – as driver</p> <p>02 <input type="radio"/> Car, truck or van – as passenger</p> <p>03 <input type="radio"/> Public transit (e.g. bus, street car, subway, light rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>	<p><b>70.</b></p> <p>01 <input type="radio"/> Car, truck or van – as driver</p> <p>02 <input type="radio"/> Car, truck or van – as passenger</p> <p>03 <input type="radio"/> Public transit (e.g. bus, street car, subway, light rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>	<p><b>71.</b></p> <p>01 <input type="radio"/> Car, truck or van – as driver</p> <p>02 <input type="radio"/> Car, truck or van – as passenger</p> <p>03 <input type="radio"/> Public transit (e.g. bus, street car, subway, light rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>	<p><b>72.</b></p> <p>01 <input type="radio"/> Car, truck or van – as driver</p> <p>02 <input type="radio"/> Car, truck or van – as passenger</p> <p>03 <input type="radio"/> Public transit (e.g. bus, street car, subway, light rail transit, commuter train, ferry)</p> <p>04 <input type="radio"/> Walked to work</p> <p>05 <input type="radio"/> Bicycle</p> <p>06 <input type="radio"/> Motorcycle</p> <p>07 <input type="radio"/> Taxicab</p> <p>08 <input type="radio"/> Other method</p>
<p>09 <input type="radio"/> None → Go to Question 47</p> <p style="text-align: center;"><b>OR</b></p> <p>10 <input type="text"/> ◀ Number of weeks</p>	<p>09 <input type="radio"/> None → Go to Question 47</p> <p style="text-align: center;"><b>OR</b></p> <p>10 <input type="text"/> ◀ Number of weeks</p>	<p>09 <input type="radio"/> None → Go to Question 47</p> <p style="text-align: center;"><b>OR</b></p> <p>10 <input type="text"/> ◀ Number of weeks</p>	<p>09 <input type="radio"/> None → Go to Question 47</p> <p style="text-align: center;"><b>OR</b></p> <p>10 <input type="text"/> ◀ Number of weeks</p>
<p>11 <input type="radio"/> Full time (30 hours or more per week)</p> <p>12 <input type="radio"/> Part time (less than 30 hours per week)</p>	<p>11 <input type="radio"/> Full time (30 hours or more per week)</p> <p>12 <input type="radio"/> Part time (less than 30 hours per week)</p>	<p>11 <input type="radio"/> Full time (30 hours or more per week)</p> <p>12 <input type="radio"/> Part time (less than 30 hours per week)</p>	<p>11 <input type="radio"/> Full time (30 hours or more per week)</p> <p>12 <input type="radio"/> Part time (less than 30 hours per week)</p>

<p><b>1. NAME</b></p> <p>In the spaces provided, copy the names in the same order as in <b>Step 2</b>.</p> <p>Then answer the following questions for each person.</p>	PERSON 1	PERSON 2
	Family name	Family name
	Given name                      Initial	Given name                      Initial


  

<p style="text-align: center; font-weight: bold;">INCOME IN 1995</p> <p><b>47.</b> During the year ending December 31, 1995, did this person receive any income from the sources listed below?</p> <ul style="list-style-type: none"> <li>▪ <b>Answer "Yes" or "No" for all sources.</b></li> <li>▪ <b>If "Yes", also enter the amount; in case of a loss, also mark "Loss".</b></li> <li>▪ <b>Do not include Child Tax Benefit.</b></li> </ul> <p><b>PAID EMPLOYMENT:</b></p> <p>(a) <b>Total wages and salaries, including commissions, bonuses, tips, etc., before any deductions</b></p> <p><b>SELF-EMPLOYMENT:</b></p> <p>(b) <b>Net farm income</b> (gross receipts minus expenses), including grants and subsidies under farm-support programs, marketing board payments, gross insurance proceeds</p> <p>(c) <b>Net non-farm income from unincorporated business, professional practice, etc.</b> (gross receipts minus expenses)</p> <p><b>INCOME FROM GOVERNMENT:</b></p> <p>(d) <b>Old Age Security Pension, Guaranteed Income Supplement and Spouse's Allowance</b> from federal government only (provincial income supplements should be reported in (g))</p> <p>(e) Benefits from <b>Canada or Quebec Pension Plan</b></p> <p>(f) Benefits from <b>Unemployment Insurance</b> (total benefits before tax deductions)</p> <p>(g) <b>Other income from government sources</b>, such as provincial income supplements and grants, refunds of GST, provincial tax credits, workers' compensation veterans' pensions, welfare payments (Do not include Child Tax Benefit.)</p> <p><b>OTHER INCOME:</b></p> <p>(h) <b>Dividends, interest</b> on bonds, deposits and savings certificates and <b>other investment income</b>, such as net rents from real estate, interest from mortgages</p> <p>(i) <b>Retirement pensions, superannuation and annuities</b>, including those from RRSPs and RRFIs</p> <p>(j) <b>Other money income</b>, such as alimony, child support, scholarships</p> <p style="text-align: center; font-weight: bold;">TOTAL INCOME FROM ALL OF THE ABOVE SOURCES</p>	Remember,	
	73.	74.
	01 <input type="radio"/> Yes ▶      Dollars      Cents	01 <input type="radio"/> Yes ▶      Dollars      Cents
	02 <input type="radio"/> No	02 <input type="radio"/> No
	03 <input type="radio"/> Yes ▶	03 <input type="radio"/> Yes ▶
	05 <input type="radio"/> No                      04 <input type="radio"/> Loss	05 <input type="radio"/> No                      04 <input type="radio"/> Loss
	06 <input type="radio"/> Yes ▶	06 <input type="radio"/> Yes ▶
	08 <input type="radio"/> No                      07 <input type="radio"/> Loss	08 <input type="radio"/> No                      07 <input type="radio"/> Loss
	09 <input type="radio"/> Yes ▶	09 <input type="radio"/> Yes ▶
	10 <input type="radio"/> No	10 <input type="radio"/> No
	11 <input type="radio"/> Yes ▶	11 <input type="radio"/> Yes ▶
	12 <input type="radio"/> No	12 <input type="radio"/> No
	13 <input type="radio"/> Yes ▶	13 <input type="radio"/> Yes ▶
	14 <input type="radio"/> No	14 <input type="radio"/> No
	15 <input type="radio"/> Yes ▶	15 <input type="radio"/> Yes ▶
	16 <input type="radio"/> No	16 <input type="radio"/> No
	17 <input type="radio"/> Yes ▶	17 <input type="radio"/> Yes ▶
	19 <input type="radio"/> No                      18 <input type="radio"/> L o	19 <input type="radio"/> No                      18 <input type="radio"/> L o
	20 <input type="radio"/> Yes ▶	20 <input type="radio"/> Yes ▶
	21 <input type="radio"/> No	21 <input type="radio"/> No
	22 <input type="radio"/> Yes ▶	22 <input type="radio"/> Yes ▶
	23 <input type="radio"/> No	23 <input type="radio"/> No
	24 <input type="radio"/> Yes ▶	24 <input type="radio"/> Yes ▶
	26 <input type="radio"/> No                      25 <input type="radio"/> Loss	26 <input type="radio"/> No                      25 <input type="radio"/> Loss

PERSON 3		PERSON 4		PERSON 5		PERSON 6	
Family name		Family name		Family name		Family name	
Given name	Initial	Given name	Initial	Given name	Initial	Given name	Initial

**this questions are only for persons aged 15 and over.**

75.	76.	77.	78.
01 <input type="radio"/> Yes ▶ Dollars Cents 02 <input type="radio"/> No	01 <input type="radio"/> Yes ▶ Dollars Cents 02 <input type="radio"/> No	01 <input type="radio"/> Yes ▶ Dollars Cents 02 <input type="radio"/> No	01 <input type="radio"/> Yes ▶ Dollars Cents 02 <input type="radio"/> No
03 <input type="radio"/> Yes ▶ 05 <input type="radio"/> No      04 <input type="radio"/> Loss	03 <input type="radio"/> Yes ▶ 05 <input type="radio"/> No      04 <input type="radio"/> Loss	03 <input type="radio"/> Yes ▶ 05 <input type="radio"/> No      04 <input type="radio"/> Loss	03 <input type="radio"/> Yes ▶ 05 <input type="radio"/> No      04 <input type="radio"/> Loss
06 <input type="radio"/> Yes ▶ 08 <input type="radio"/> No      07 <input type="radio"/> Loss	06 <input type="radio"/> Yes ▶ 08 <input type="radio"/> No      07 <input type="radio"/> Loss	06 <input type="radio"/> Yes ▶ 08 <input type="radio"/> No      07 <input type="radio"/> Loss	06 <input type="radio"/> Yes ▶ 08 <input type="radio"/> No      07 <input type="radio"/> Loss
09 <input type="radio"/> Yes ▶ 10 <input type="radio"/> No	09 <input type="radio"/> Yes ▶ 10 <input type="radio"/> No	09 <input type="radio"/> Yes ▶ 10 <input type="radio"/> No	09 <input type="radio"/> Yes ▶ 10 <input type="radio"/> No
11 <input type="radio"/> Yes ▶ 12 <input type="radio"/> No	11 <input type="radio"/> Yes ▶ 12 <input type="radio"/> No	11 <input type="radio"/> Yes ▶ 12 <input type="radio"/> No	11 <input type="radio"/> Yes ▶ 12 <input type="radio"/> No
13 <input type="radio"/> Yes ▶ 14 <input type="radio"/> No	13 <input type="radio"/> Yes ▶ 14 <input type="radio"/> No	13 <input type="radio"/> Yes ▶ 14 <input type="radio"/> No	13 <input type="radio"/> Yes ▶ 14 <input type="radio"/> No
15 <input type="radio"/> Yes ▶ 16 <input type="radio"/> No	15 <input type="radio"/> Yes ▶ 16 <input type="radio"/> No	15 <input type="radio"/> Yes ▶ 16 <input type="radio"/> No	15 <input type="radio"/> Yes ▶ 16 <input type="radio"/> No
17 <input type="radio"/> Yes ▶ 19 <input type="radio"/> No      18 <input type="radio"/> L o	17 <input type="radio"/> Yes ▶ 19 <input type="radio"/> No      18 <input type="radio"/> L o	17 <input type="radio"/> Yes ▶ 19 <input type="radio"/> No      18 <input type="radio"/> L o	17 <input type="radio"/> Yes ▶ 19 <input type="radio"/> No      18 <input type="radio"/> L o
20 <input type="radio"/> Yes ▶ 21 <input type="radio"/> No	20 <input type="radio"/> Yes ▶ 21 <input type="radio"/> No	20 <input type="radio"/> Yes ▶ 21 <input type="radio"/> No	20 <input type="radio"/> Yes ▶ 21 <input type="radio"/> No
22 <input type="radio"/> Yes ▶ 23 <input type="radio"/> No	22 <input type="radio"/> Yes ▶ 23 <input type="radio"/> No	22 <input type="radio"/> Yes ▶ 23 <input type="radio"/> No	22 <input type="radio"/> Yes ▶ 23 <input type="radio"/> No
24 <input type="radio"/> Yes ▶ 26 <input type="radio"/> No      25 <input type="radio"/> Loss	24 <input type="radio"/> Yes ▶ 26 <input type="radio"/> No      25 <input type="radio"/> Loss	24 <input type="radio"/> Yes ▶ 26 <input type="radio"/> No      25 <input type="radio"/> Loss	24 <input type="radio"/> Yes ▶ 26 <input type="radio"/> No      25 <input type="radio"/> Loss

 <b>Answer Questions H1 to H8 about this dwelling.</b>	
<b>STEP 8</b>	<p>A <b>dwelling</b> is a separate set of living quarters with a <b>private entrance</b> from the outside or from a common hallway or stairway inside the building. This entrance should not be through someone else's living quarters.</p>
<b>H1. Who pays the rent or mortgage, taxes, electricity, etc., for this dwelling?</b> <p><i>If more than one person contributes to such payments, mark as many circles as apply.</i></p>	<p style="text-align: center;"><b>79.</b></p> <p>01 <input type="radio"/> Person 1  02 <input type="radio"/> Person 2  03 <input type="radio"/> Person 3  04 <input type="radio"/> Person 4  05 <input type="radio"/> Person 5  06 <input type="radio"/> Person 6  07 <input type="radio"/> A person who is listed on another questionnaire for this dwelling  08 <input type="radio"/> A person who does not live here</p>
<b>H2. Is this dwelling:</b> <p><i>Mark one circle only.</i></p>	<p>10 <input type="radio"/> owned by you or a member of this household (even if it is still being paid for)?  11 <input type="radio"/> rented (even if no cash rent is paid)?</p>
<b>H3. (a) How many rooms are there in this dwelling?</b> <p><i>Include kitchen, bedrooms, finished rooms in attic or basement, etc.</i></p> <p><i>Do not count bathrooms, halls, vestibules and rooms used solely for business purposes.</i></p>	<p>12 <input type="text"/> ◀ Number of rooms</p>
<b>(b) How many of these rooms are bedrooms?</b>	<p>13 <input type="text"/> ◀ Number of bedrooms</p>
<b>H4. When was this dwelling originally built?</b> <p><i>Mark the period in which the building was completed, not the time of any later remodelling, additions or conversions. If year is not known, give best estimate.</i></p>	<p>14 <input type="radio"/> 1920 or before      19 <input type="radio"/> 1981-1985  15 <input type="radio"/> 1921-1945          20 <input type="radio"/> 1986-1990  16 <input type="radio"/> 1946-1960          21 <input type="radio"/> 1991-1995  17 <input type="radio"/> 1961-1970          22 <input type="radio"/> 1996  18 <input type="radio"/> 1971-1980</p>
<b>H5. Is this dwelling in need of any repairs?</b> <p><i>Do not include desirable remodelling or additions.</i></p>	<p>23 <input type="radio"/> No, only <b>regular maintenance</b> is needed (painting, furnace cleaning, etc.)  24 <input type="radio"/> Yes, <b>minor repairs</b> are needed (missing or loose floor tiles, bricks or shingles, defective steps, railing or siding, etc.)  25 <input type="radio"/> Yes, <b>major repairs</b> are needed (defective plumbing or electrical wiring, structural repairs to walls, floors or ceilings, etc.)</p>

Answer Questions **H6 to H8** for only the dwelling that you **now occupy**, even if you own or rent more than one dwelling. If the exact amount is not known, please give best estimate.

**Note:** If you are a farm operator living on the farm you operate, mark here ..... **80.** 01  and go to Step 9.

---

**H6. For this dwelling, what are the YEARLY payments (last 12 months) for:**

(a) electricity? 02  None  
 03  Included in rent or other payments OR 04 

Dollars	Cents

 per year

---

(b) oil, gas, coal, wood or other fuels? 05  None  
 06  Included in rent or other payments OR 07 

Dollars	Cents

 per year

---

(c) water and other municipal services? 08  None  
 09  Included in rent or other payments OR 10 

Dollars	Cents

 per year

---

**H7. For RENTERS only:**

What is the **monthly rent** paid for this dwelling? 11  Rented without payment of cash rent OR 12 

Dollars	Cents

 per month

---

**H8. For OWNERS only, answer parts (a) through (f):**

(a) What are the total regular **monthly** mortgage or loan payments for this dwelling? 13  None Go to part (c) OR 14 

Dollars	Cents

 per month

---

(b) Are the property taxes (municipal and school) included in the amount shown in part (a)? 15  Yes → Go to part (d)  
 16  No

---

(c) What are the estimated **yearly** property taxes (municipal and school) for this dwelling? 17  None OR 18 

Dollars	Cents

 per year

---

(d) If you were to sell this dwelling now, for how much would you expect to sell it? 19 

Dollars

---

(e) Is this dwelling part of a registered condominium? 20  Yes → Continue with part (f)  
 21  No → Go to Step 9


---

(f) What are the **monthly** condominium fees? 22  None OR 23 

Dollars	Cents

 per month

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 **You have now completed your questionnaire. Please mail it today.**  
**Thank you for your co-operation.**

**STEP 9** If you have any comments, please enter them on the back cover.

