



QUESTIONNAIRE OF LABOUR FORCE SURVEY 2024-25

Pakistan Bureau of Statistics
Ministry of Planning, Development and Special Initiatives
Government of Pakistan
May-2024



**GOVERNMENT OF PAKISTAN
PAKISTAN BUREAU OF STATISTICS
LABOUR FORCE SURVEY
(2024-25)**



Survey Period:				Month		Year		Quarter	
Section 1: Identification				Processing Code:					
1. Province:				8. Address:					
2. District:				9. Serial number of Household: →					
3. Tehsil/Taluka:				10. Name of head of Household:					
4. City/Town:				11. Father's Name:					
5. Mouza/Deh/Village:				12. Respondent's Name:					
6. Enumeration Block Code:									
		13. Respondent's Sex: 1= Male 2= Female →							
7. Locality:				14. Respondent's relation to head of household: 1 = Head of Household 2 = Other member of household (Relative/Non-relative) → 3 = Others (Relative/Non-relative)					
Section 2: Field Operations and Editing/Coding									
Enumerator/Inspector		Date		Name			Designation		
Enumerator									
Inspector									
Section 3: Checking at Headquarter									
Online Data Editor									

SECTION 4: HOUSEHOLD COMPOSITION AND DEMOGRAPHIC INFORMATION													
S. No	Name of household members who usually live here. Do not list guests, visitors, etc.	What is (Name) ... Relationship to head of the household?	Present status	Gender	How old was (Name) at (his/her) last birthday?	For all persons 10 years and over	For all persons 5 years and over						
							Literacy		Level of Education	Current Enrollment			
							Can..... read a simple statement with understanding in any language?	Can..... write a simple statement with understanding in any language?					
		1. Head of household 2. Spouse 3. Son/ daughter (unmarried) 4. Son/ daughter (married) 5. Father/ mother 6. Brother/ sister 7. Other relative 8. Servant 9. Non relative	1. Present 2. Temporarily absent	1. Male 2. Female 3. Trans-gender	Enter age in completed years	What is.... current marital status? 1. Never Married 2. Married 3. Widow/ Widower 4. Divorced	1. Yes 2. No	1. Yes 2. No	01.Never attended school 02. Nursery but below K.G. 03.K.G but below primary 04.Primary but below middle 05.Middle but below matric 06.Matric but below intermediate 07.Inter. but below degree 08.Degree in engineering 09.Degree in medicine (MBBS/BDS/ Pharm-D etc.) 10.Degree in computer 11.Degree in agriculture 12.Degree in other subjects (2 Years) 13. BS/BE (4 years) 14. M.A/M.Sc 15. M.Phil/MS 16. Ph.D	01.Currently not enrolled 02. Nursery 03. K.G 04. Primary 05.Middle 06. Matric 07.Intermediate 08.Graduation in engineering 09. Graduation in medicine (MBBS/BDS/Pharm-D etc.) 10.Graduation in computer 11.Graduation in agriculture 12.Graduation in other subjects (2 Years) 13.BS/BE (4 Years) 14.M.A/M.Sc 15.M.Phil/ MS 16.Ph.D.			
(4.1)	(4.2)	(4.3) Code	(4.4) Code	(4.5) Code	(4.6)	(4.7) Code	(4.8.1) Code	(4.8.2) Code	(4.9) Code	(4.10) Code			
1		1											
2													
3													

SECTION 4: HOUSEHOLD COMPOSITION AND DEMOGRAPHIC INFORMATION													
For all persons 10 years and over						For all persons							
Technical/Vocational Training						Migration							
Has..... ever completed/currently receiving any technical, vocational and educational training/courses such as auto or engine mechanics, carpentry, typing, computer, tailoring etc.		If YES in Q.4.11 describe the type and duration of training		Provider of Training/ Courses		How long has (Name) been living in this district?		Previous district/ country of residence before moving here.		Previous residence was located in...		Main reason for migration.	
		Type of Training	Duration of training (in weeks)	Provider of Training/ Courses									
		(Detail of Type of Training given in Annex-C Manual of Instructions)		1. Govt./ Public Technical/ Vocational Institute 2. Private Technical/ Vocational Institute 3. Informal apprentice		1. Since birth (Go to next person) 2. Less than one year 3. 1 years 4. 2 years 5. 3 years 6. 4 years 7. 5-10 years 8. 11 years & over		(Give name of the district. If abroad give name of the country and Skip to Col. 4.18) (Annex-D (District code) & E (Country code) Manual of Instructions)		1.Rural 2.Urban		01. Job transfer 02. Found a job 03. Searching for a job 04. Searching for a better agriculture land 05. Education 06. Business 07. Health 08. Marriage 09. With parents 10. With spouse 11. With son/ daughter 12. Change of residence 13. Returned to his home 14. Security/ Law & order situation 15. Natural disaster 16. Floods 17. Other (Specify)	
(4.11) Code		(4.12) Code	(4.13) (No. of Weeks)	(4.14) Code		(4.15) Code		(4.16) Code		(4.17) Code		(4.18) Code	

SECTION-5: CURRENT ACTIVITY OF ALL HOUSEHOLD MEMBERS (10 Years of Age and Over)										
Transfer all person's serial numbers 10 years of age & over as per Col. 4.1 & 4.6	Did.... do any work for pay/wage (Cash/Kind), for someone else during last week, at least for one hour on any day? 1. Yes (Skip to Col. 5.11) 2. No	Did Run / do any kind of business, farming or other activity to generate income in last week? 1. Yes (Skip to Col. 5.9) 2. No	Did...help to work for family gain in a family business or family farm during last week? 1. Yes (Skip to Col.5.9) 2. No	Even though (you/NAME) did not work last week did (you/he/she) have a paid job or a business/ agriculture/ Poultry/ Livestock/Fishery farm? 1. Yes 2. No (Skip to Col. 5.8)	Why did ... not work last week? 1. Waiting to start new job or business (Skip to 5.8) 2. Illness or injury 3. Shift work, flexi time 4. Holiday, ramzan, vacation or leave 5. Maternity /parental leave 6. Off-season inactivity 7. Long term disability 8. Strike or lockout 9. Due to bad weather 10. Due to mechanical or electrical breakdown/ problem in transport 11. Due to shortage of raw materials or fuel 12. Educational and training leave 13. Reductions in economic activity such as: lower production due to less demand; or shortage of irrigation water; or load shedding (gas or electricity) 14. Other personal reasons, e.g. religious or social activities or attended political gathering 15. Other involuntary reasons Violence/harassment at work place, Security/law and order situation, etc.) (Specify)	When will (you/Name) return to the same job/ business/own enterprise 1. Within three months including the time already spent in absence (Skip to Col.5.11) 2. After three months 3. Not sure to return				
P.S.N.	(5.1) Code	(5.2) Code	(5.3) Code	(5.4) Code	(5.5) Code	(5.6) Code				

SECTION-5: CURRENT ACTIVITY OF ALL HOUSEHOLD MEMBERS (10 Years of Age and Over)

Transfer all persons' serial numbers 10 years of age & over as per Col. 4.1 & 4.6 having code 1 under column 5.1 or 5.2 or 5.3 or code 2 under Col. 5.4 or code 1 under 5.5 or code 1 or 2 or 3 under Col 5.6	Do/Does you/ Name continue to receive an income from (you/his/her job/ business/ own agriculture farm during the absence? 1.Yes (Skip to Col 5.11). 2. No	Last week did (you/name) do any work in ...? 1. Farming (Skip to 5.10) 2. Rearing farm animals (Skip to 5.10) 3. Fishing or fish farming (Skip to 5.10) 4. None of the above (Skip to Col 9.1)	Was this work that you mentioned in...? 1. Farming 2.Rearing farm animals 3.Fishing or fish farming 4 Another type of job or business (Skip to Col. 5.11)	Thinking about the work in (farming, rearing animals and/or fishing) (do/does) are the products intended? 1. Only for sale 2. Mainly for sale 3.Mainly for family use (Skip to 9.1) 4. Only for family use (Skip to 9.1)	(Do/does) (you/he/she) work...as? 1. Employer 2. Independent worker without employee 3. Employee 4. Contributing family worker 5. Paid apprentice, internee 6. Dependent Contractor	What was.....main occupation, e.g. what was the nature of work thatdid? <i>(i) Main refers to the work that spent most of the time of the week. If same number of hours used in more than one work consider the one where s/he earns the most money.</i> <i>ii) Please give full description alongwith 4-digits code for main occupation as per detail given in Annex-A Manual of Instructions.</i>
P.S.N.	(5.7) Code	(5.8) Code	(5.9) Code	(5.10) Code	(5.11) Code	(5.12) Code

SECTION-5: CURRENT ACTIVITY OF ALL HOUSEHOLD MEMBERS (10 Years of Age and Over)																	
Transfer all persons' serial numbers 10 years of age & over as per Col. 4.1 & 4.6 having Code 1 or 2 or 3 or 4 or 5 or 6 under Column 5.11.	What was the nature of work done by the establishment such as shop, business, farm, service establishment (fixed or mobile), office/institution where. ...worked? <i>Note:- Please give full description alongwith 4-digits code for main industry as per detail given in Annex-B Manual of Instructions.</i>					How do/does you/he/she performed activity 1. Physical/ Manual 2. Through Internet / Online 3. Both In case of code 2 or 3 select one option: 01. Selling goods (Amazon, Daraz, Pakwheels, Alibaba, homemade snacks etc.) 02. Taxi Services (inDrive, Yango, Careem, Bykea etc.) 03. Delivery services (Food panda, Panda Mart, Daraz Express, Bykea, etc.) 04. Freelancing Activities (Software developers, Data analysis, Web or logo designers, graphic design etc.) 05. Medical/Health Care (eShifa, Teleclinics, Sehat Kahani etc.) 06. Teaching (Tuition, Teaching, Quraan etc.) 07. Renting Services (Airbnb, Booking.com etc.) 08. On location Services (cleaning, plumbing, etc.) 09. Other Activities (YouTube, TikTok, Vlog etc.) 10. Any other (Specify)		In this job, (are/is) (you/he/she) working in..... 01. Federal Govt. (Skip to 5.20) 02. Provincial Govt. (Skip to 5.20) 03. Local body Govt. (Skip to 5.20) 04. Public enterprise (Corporation by act of national or provincial assembly) (Skip to 5.20) 05. Public limited company (Skip to 5.20) 06. Private limited company (Skip to 5.20) 07. An international organization or a foreign embassy (Skip to 5.20) 08. An NGO, non-profit institution (Skip to 5.20) 09. Agriculture /Poultry/ Livestock/Fishery/ Forestry farm 10. A Private business (non-agriculture) 11. Other (Specify)		Is (your/ Name's) business registered in the (CRO, SECP etc.)? 1. Yes 2. No 3. Don't know		What kind of accounts or records does the (business/ Farm) keep? 1. A complete set of written accounts for tax purposes 2. Simplified written accounts not for tax purposes 3. Informal records of orders, sales, purchases 4. No records are kept 5. Don't, Know		How many persons are engaged in the enterprise (including working proprietors, unpaid family workers, paid employees)? (Give approximate number of persons)		Does the business hire any paid employees on a regular basis (who work at least one month on continue basis)? 1. Yes 2. No	
P.S.N.	(5.13) Code					(5.14) Code		(5.15) Code		(5.16) Code		(5.17) Code		(5.18) (Number of Persons)		(5.19) Code	

SECTION-5: CURRENT ACTIVITY OF ALL HOUSEHOLD MEMBERS (10 Years of Age and Over)							
Transfer all persons' serial numbers 10 years of age & over as per Col. 4.1 & 4.6 having Code 1 or 2 or 3 or 4 or 5 or 6 under Column 5.11.	Are/is (you/he/she) member of Bar Association, Teacher Association, Chamber of commerce Association, trade union or other worker organization/ Union/Association?		Where did.... carry out the work? (Read all the options to the respondent).		What was the location of work place?	How much time it takes to reach your work place	In actual, how many hours didwork in your/his/her main job/business/ agriculture farm last week?
P.S.N.	(5.20) Code		(5.21) Code		(5.22) Code	(5.23) Code	(5.24) Actual Hours

SECTION-5: CURRENT ACTIVITY OF ALL HOUSEHOLD MEMBERS (10 Years of Age and Over) Col.5.26 to 5.37 should be asked from all persons reporting subsidiary job/work (Income generating activity) i.e. code 1 in Col. 5.25). If the person is engaged in more than one job/work (income generating activity) then Col. 5.26 to Col. 5.37 should be filled for the one in which the person spent more hours.

Transfer all persons' serial numbers 10 years of age & over as per Col. 4.1 & 4.6 having Code 1 or 2 or 3 or 4 or 5 or 6 under Column 5.11.	Last week did (you/NAME) have more than one job or income generating activity?	(Do/does) (you/he/she) work...as?	What was..... was..... What subsidiary occupation e.g. what was the nature of works thatdid?	What was the nature of work done by the establishment such as shop, business, farm, service establishment (fixed or mobile), office/institution where... worked?	How do/does you/he/she performed activity	In this job, (are/is) (you/he/she) working in.....
	1. Yes 2. No (Skip to Col. 5.37)	1. Employer 2. Independent worker without employee 3. Employee 4. Contributing family worker 5. Paid apprentice, internee 6. Dependent Contractor	i) If a person is engaged in more than one subsidiary occupations: then consider the one in which the person spent more hours ii) Please give full description alongwith 4-digits code for subsidiary industry as per detail given in Annex-A Manual of Instructions.	ii) Please give full description alongwith 4-digits code for subsidiary industry as per detail given in Annex-B Manual of Instructions.	1. Physical/ Manual 2. Through Internet / Online 3. Both In case of code 2 or 3 select one option: 01. Selling goods (Amazon, Daraz, Pakwheels, Alibaba, homemade snacks etc.) 02. Taxi Services (inDrive, Yango, Careem, Bykea etc.) 03. Delivery services (Food panda, Panda Mart, Daraz Express, Bykea, etc.) 04. Freelancing Activities (Software developers, Data analysis, Web or logo designers, graphic design etc.) 05. Medical/Health Care (eShifa, Teleclinics, Sehat Kahani etc.) 06. Teaching (Tuition, Teaching, Quraan etc.) 07. Renting Services (Airbnb, Booking.com etc.) 08. On location Services (cleaning, plumbing, etc.) 09. Other Activities (YouTube, TikTok, Vlog etc.) 10. Any other (Specify)	01. Federal Govt. (Skip to 5.35) 02. Provincial Govt. (Skip to 5.35) 03. Local body Govt. (Skip to 5.35) 04. Public enterprise (Corporation by act of national or provincial assembly) (Skip to 5.35) 05. Public limited company (Skip to 5.35) 06. Private limited company (Skip to 5.35) 07. An international organization or a foreign embassy (Skip to 5.35) 08. An NGO, non-profit institution (Skip to 5.35) 09. Agriculture /Poultry/ Livestock/Fishery/ Forestry farm 10. A Private business (non-agriculture) 11. Other (Specify
	P.S.N.	(5.25) Code	(5.26) Code	(5.27) Code	(5.28) Code	(5.29) Code

SECTION-5: CURRENT ACTIVITY OF ALL HOUSEHOLD MEMBERS (10 Years of Age and Over) Col.5.26 to 5.37 should be asked from all persons reporting subsidiary occupation (i.e. code 1 in Col.5.25). If the person is engaged in more than one subsidiary occupation then Col. 5.26 to Col. 5.37 should be filled for the one in which the person spent more hours.

Transfer all persons' serial numbers 10 years of age & over as per Col. 4.1 & 4.6 having code 1 or 2 under column 5.25	Is (your/ Name's) business registered in the (CRO, SECP etc.)? 1. Yes 2. No 3. Don't know	What kind of accounts or records does the (business/ Farm) keep? 1. A complete set of written accounts for tax purposes 2. Simplified written accounts not for tax purposes 3. Informal records of orders, sales, purchases 4. No records are kept 5. Don't, Know	How many persons are engaged in the enterprise (including working proprietors, unpaid family workers,, paid employees) (Give approximate numbers of persons)	Does the business hire any paid employees on a regular basis? 1. Yes 2. No	In total, how many hours didwork in your/his/her job or income generating activity last week?	In addition to main & secondary job /Business did..... perform other job/ Business? 1. Yes 2. No	What was the nature of main activity did one year ago? 1. Same job 2. Other job in same enterprise 3. Employee in other enterprise 4. Independent worker in the same kind of activity 5. Independent worker in other kind of activity 6. Not working 7. Don't know
P.S.N.	(5.31) Code	(5.32) Code	(5.33) (Number of Person)	(5.34) Code	(5.35) (Total Hours)	(5.36) Code	(5.37) Code

SECTION-6: UNDEREMPLOYMENT

Transfer all persons' serial numbers 10 years of age & over as per Col. 4.1 & 4.6 having code 1 to 6 under column 5.11	If total of Col. 5.24 and 5.35 is less than 35, then why did... work less than 35 hours during last week? 01. Normally works the same number of hours 02. Illness or injury 03. Long term disability 04. Strike or lockout 05. Holiday, Ramadan, vacation or leave of absence 06. Off-season inactivity 07. Due to bad weather 08. Due to mechanical or electrical breakdown 09. Due to shortage of raw materials or fuel 10. Educational and training leave 11. Maternity or parental leave 12. Other reasons i.e. reductions in economic activity such as: lower production due to less demand; or shortage of irrigation water; or load shedding (gas or electricity) (Specify). 13. Other voluntary or personal reasons, e.g. religious or social activities or attended political gathering (Specify). 14. Other involuntary reasons such as unable to find/get more hours of work due to law and order situation etc. (Specify)	For all employed persons having code 1 to 6 in Col 5.11					
		Would (you/NAME) want to work more hours per week than usually worked, provided the extra hours are paid?	During the last four weeks did..... Look for any additional work?	Could ... start working more hours within next two weeks?	(Do/Does (you/ NAME) want to change (your/his/her) current employment situation?	What is the main reason why (you/NAME) want(s) to change (your/his/her) employment situation?	
	1. Yes 2. No	1. Yes 2. No	1. Yes 2. No	1. Yes 2. NO (Skip to Section-7)	1. Present job is temporary 2. To have a better paid job 3. To have more business 4. To work more hours 5. To work fewer hours 6. To better match skills 7. To work closer to home 8. To improve other working conditions 9. Present work is unpaid 10. Other (Specify)		
P.S.N.	(6.1) Code	(6.2) Code	(6.3) Code	(6.4) Code	(6.5) Code	(6.6) Code	

SECTION- 7: FOR PAID EMPLOYEES																				SELF EMPLOYED									
For persons who were given code 3 or 5 in Col 5.11																				For self-employed (persons with code 1 or 2 or 6 in Col. 5.11).									
Transfer all person's serial numbers 10 years of age & over as per Col.4.1 & 4.6 having code 1,2 3 or 5 or 6 as per Col.5.11	What was the status of job's written contract/ agreement between the employee and the employer? 1. Permanent/ pensionable Job 2. Less than 3 months 3. 3 months to less than 12 Months 4. 12 Months to less than 24 Months 5. 2 years to less than 3 year 6. 3 years or more 7. Without contract/ agreement	At.....main work, what is the periodicity of payment? 1. Daily 2. Weekly 3. Fortnightly (Skip Col.7.4) to 4. Monthly (Skip to Col.7.4) 5. Other periodicity (Specify) 6. Piece rate basis for service performed 7. Other (Specify)	How much net money didearn from the main work last week? Cash Rs. Kind (including free or subsidized housing, food, transport etc. give market value) in Rs. (For any entry Skip to Col. 7.5)	How much net money did.....earn from the main work last month? Cash Rs. Kind (including free or subsidized housing, food, transport etc. give market value) in Rs.	How much net money did.... receive last year in bonuses (i.e. amount in addition to his usual pay, remuneration etc)? (whether annually, quarterly or adhoc basis, calculate for the year) Rs. None	Whether the employer contributes on the behalf of (the name) to... 1.Old age pensions 2.Family support in case death of bread winner 3.Fee Re-imbursement/ educational stipend for children 4.Disability insurance/ social insurance 5.Medical facilities 6.Marriage Grant 7.Child Stipend 8.None (More than one options are acceptable)	Does (Name) get paid annual leave? 1. Yes 2. No 3.Don't Know	Would (You/ Name) get paid sick leave in case of illness or injury? 1. Yes 2. No 3.Don't Know	How much net money did... earn during last year from own business/ agriculture farm? (In Rs)																				
										(7.3)			(7.4)			(7.5)			(7.6) Code								(7.7) Code	(7.8) Code	(7.9) Amount
										(7.3.1) Cash	(7.3.2) Kind	(7.3.3) Total	(7.4.1) Cash	(7.4.2) Kind	(7.4.3) Total	(7.5.1) Cash	(7.5.2) Kind	(7.5.3) Total	1	2	3	4	5	6	7	8			

SECTION- 8: OCCUPATIONAL INJURIES/DISEASES (All Employed Persons)											
Transfer all persons' serial numbers 10 years of age & over as per Col. 4.1 & 4.6 having code 1-6 under column 5.11	In the past 12 months, did..... suffer from any occupational injury/ disease?	In case of more than one injury/disease i.e. code 2 in Col.8.1, then Col.8.2 should be repeated for each of the separate occupational injury/disease noted in Col. 8.1									
		What was the main cause of the injury/disease?	How many days has... been away from work or unable to work because of this injury/disease in the last 12 months?	Did ... return to the same job/activity that were doing at the time of the accident/disease?	Did...receive medical attention for the injury/ disease from a health care professional in the 48 hours following the injury/disease.	Did ... receive any injury compensation in cash/ in kind from the employer, accident compensation, a social security scheme?					
P.S.N.	(8.1) Code	(8.2) (Injury/disease)			(8.3) Code	(8.4) Code	(8.5) Code	(8.6) Code			
		(8.2.1) 1 st	(8.2.2) 2 nd	(8.2.3) 3 rd							

SECTION 9: UNEMPLOYMENT

Transfer all person's serial numbers 10 years of age & over as per Col. 4.1 & 4.6 having code 4 in Col. 5.8 or code 3 or 4 in Col. 5.10	Was (Name) looking for work during the last four week? (as employee, employer or independent worker to establish his/her own business) 1. Yes 2. No (Skip to Col. 9.4)	What steps did (Name) take during the last four weeks to look for work? (More than one options are acceptable) 01. Applied to prospective employer 02. Take a Test or interview 03. Post/Update resume on professional/ social networking sites 04. Checked at work sites, farms, factories, markets, etc. 05. Applied for permit or license to set up own enterprise such as a shop, business, farm, or service establishment (fixed or mobile) 06. Looked for land, building, machinery or equipment for setting up own enterprise such as shop, business, farm, service establishment (fixed or mobile) 07. Sought assistance from friends or relatives 08. Placed or answered advertisements 09. Registered with Government employment agency 10. Registered with private employment agency 11. Arranged for financial resources 12. Applied for loan/credit 13. Other (Specify)	How long has (Name) been looking for work? 1. Less than 1 month 2. One month to less than 3 months 3. Three months to less than 6 months 4. Six months to less than 12 months 5. One year or more (For having any option skip to Col. 9.6)	At present, does (Name) want to work for pay or start a business? 1. Yes 2. No (Skip to Col. 9.9)	What is the main reason why (Name) did not try to find a paid job or start a business in the last 4 weeks? 01. Already has a job or business to start in the near future 02. Awaiting to be recalled from a previous job 03. Waiting for results from a previous search 04. Waiting for the season to start 05. Tired of looking, no jobs in the area 06. No jobs matching his/her skills, lacks experience 07. Considered too be young/too be old by employers 08. Family does not approve 09. Busy studying or doing apprentice work 10. Busy with household or family responsibilities 11. Busy farming or fishing for household use 12. With a disability, injury or illness 13. Has other sources of income 14. Other (Specify) ____												
P.S.N.	(9.1) Code	(9.2) Code													(9.3) Code	(9.4) Code	(9.5) Code
		01	02	03	04	05	06	07	08	09	10	11	12	13			

SECTION 9: UNEMPLOYMENT							
Transfer all person's serial numbers 10 years of age & over as per Col. 4.1 & 4.6 having code 1-5 in Col. 9.3 1 or code 2 in Col 9.4	Could (you/NAME) start working within the next two weeks 1. Yes 2. No (Skip to 9.9)	What type of work would (Name) prefer to do? 1. Full-time job in the public sector/ Govt. 2. Full-time job in the private sector/ business 3. Part-time paid job 4. Self-employment in own business 5. Other work (Short-term work, casual, daily work) 6. Any type of work	Where would (Name) be willing to work? 1. Within this household only (Skip Col. 9.10) 2. Within this village/ town/city only (Skip Col. 9.10) 3. Anywhere in this district only (Skip Col. 9.10) 4. Anywhere in Pakistan only (Skip Col. 9.10) 5. Abroad (Skip Col. 9.10)	Why is (Name) not available to start working within the next two weeks? 01. Illness 02. Will take a job within a month 03. Temporarily laid off 04. Apprentice and not willing to work 05. Agricultural landlord/ property owner and not willing to work 06. Too young to work 07. Student and not willing to work 08. Unable to work/ handicapped 09. Housekeeping and not willing to work 10. Retired and not willing to work 11. Too old to work 12. Family does not allow to work 13. Other reason <div style="position: absolute; left: 680px; top: 350px;"> (Skip to Col 9.17) </div>	Have/Has (you/ NAME) ever had a paid job or another income-generating activity, even if for a short period? 1. Yes 2. No (Skip to Col. 9.17)		
P.S.N.	(9.6) Code	(9.7) Code	(9.8) Code	(9.9) Code	(9.10) Code		

SECTION 9: UNEMPLOYMENT												
Transfer all person's serial numbers 10 years of age & over as per Col. 4.1 & 4.6 having code 1 in Col. 9.10	How long ago was it that last stop working? 1. Less than one month ago 2. 1 To less than 3 months ago 3. 3 To less than 6 months ago 4. 6 To less than 12 months ago 5. 1 To less than 3 years ago 6. 3 To less than 5 years ago 7. 5 To less than 8 years ago 8. 8 years and more ago 9. Don't know		What was main occupation, in other words, what was the nature of work... previously did? <i>Please give full description alongwith 4-digits code for main occupation as per detail given in Annex-A Manual of Instructions.</i>					What was the nature of work done by the enterprise such as shop, business, farm, service establishment (fixed or mobile), office/institution where.....previously worked? <i>Please give full description alongwith 4-digits code for main industry as per detail given in Annex-B Manual of Instructions</i>				
	(9.11)		(9.12)					(9.13)				
	Code		Code					Code				

SECTION 9: UNEMPLOYMENT						
Transfer all person's serial numbers 10 years of age & over as per Col. 4.1 & 4.6 having code 06-09 in Col. 9.9 or code 1 or 2 in Col 9.10	(Do/does) (you/he/she) worked...as ? 1. Employer 2. Independent worker without employee 3. Employee 4. Contributing family worker 5. Paid apprentice, internee 6. Dependent contractor	For how many years has....been doing this sort of work? 1. Less than one year 2. One year but less than five years 3. Five years but less than ten years 4. Ten years or more	What was the main reason for leaving the last job/business? (Read all the options to the respondent) 01. Dismissed or made redundant 02. A job of limited duration has ended 03. Personal or family responsibilities 04. Own illness or disability 05. Education or training 06. Early retirement 07. Normal retirement 08. Could not do the job 09. Did not like the job 10. Did not like the employer 11. The pay was too low 12. Not consistent with qualification 13. Violence/harassment at work place, Security/law & order situation. 14. Other (Specify)	Did (Name) receive any of the following benefits from any organization? 1. Old age benefit 2. Disability benefit 3. Unemployment benefit 4. Child Stipend 5. BISP 6. Sehat Card 7. Other (Specify) 8. None (Skip to Section-10)		
P.S.N.	(9.14) Code	(9.15) Code	(9.16) Code	(9.17) Code		

SECTION 10: ALL PERSONS 10 YEARS OF AGE AND OVER (Transfer all persons whose age is 10 years & over as per Col. 4.6)			
Person Sl. No.		Name:	
			No. of Hours
10.1	Last week, did (you/NAME) you work or help in agricultural operations, such as ploughing, sowing, transplanting rice, picking cotton, collection of vegetables & fruit, harvesting crops, weeding field	1. Yes (Ask No. of Hours) 2. No (Skip to Q 10.2)	
10.2	Last week, did (you/NAME) you work or help in livestock operations feeding and milking animals, churning milk, grassing, collection of cow dung and preparing dung cakes?	1. Yes (Ask No. of Hours) 2. No (Skip to Q 10.3)	
10.3	Last week, did (you/NAME) you work or help poultry raising, such as feeding poultry birds, collection & packing of eggs, giving injections or medicine to birds and preparation of feeds?	1. Yes (Ask No. of Hours) 2. No (Skip to Q 10.4)	
10.4	Last week, did (you/NAME) you gather wild food such as [mushrooms, berries, herbs...]?	3. Yes (Ask No. of Hours) 4. No (Skip to Q 10.5)	
10.5	Last week, did (you/NAME) go Fishing or hunting?	1. Yes (Ask No. of Hours) 2. No (Skip to Q 10.6)	
10.6	Last week, did (you/NAME) prepare preserved food or drinks for storage such as [flour, dried fish, butter, cheese...]?	1. Yes (Ask No. of Hours) 2. No (Skip to Q 10.7)	
10.7	Last week, did (you/NAME) do any construction work to build, renovate or extend the family home or help a family member with similar work	1. Yes (Ask No. of Hours) 2. No (Skip to Q 10.8)	
10.8	Last week, did (you/NAME) spend any time making goods for use by your household or family such as [mats, baskets, furniture, clothing,..]	1. Yes (Ask No. of Hours) 2. No (Skip to Q 10.9)	
10.9	Last week, did (you/NAME) fetch water from natural or public sources for use by your household or family	1. Yes (Ask No. of Hours) 2. No (Skip to Q 10.10)	
10.10	Last week, did (you/NAME) collect any firewood [or other natural products] for use as fuel by your household or family?	1. Yes (Ask No. of Hours) 2. No (Skip to Q 10.11)	
10.11	Last week, did (you/NAME) spend time in caring for children or health care of ill/aged persons?	1. Yes (Ask No. of Hours) 2. No (Skip to Q 10.12)	

10.12	Last week, did (you/NAME) spend time in helping children do homework or other educating activities?	1.Yes (Ask No. of Hours) 2. No (Skip to Q 10.13)	
10.13	Last week, did (you/NAME) spend time in cleaning and arranging the house, washing, cooking, mending or pressing clothes?	1.Yes (Ask No. of Hours) 2. No (Skip to Q 10.14)	
10.14	Last week, did (you/NAME) spend time in other services activities.	1.Yes (Ask No. of Hours) 2. No (Go to next person)	