



## Palestinian Central Bureau of Statistics

**Data Confidential in Accordance to General Statistical Law 2000**

Repetition	Quarter	Year
1	1 2 3 4	_____
2	1 2 3 4	_____
3	1 2 3 4	_____
4	1 2 3 4	_____
Interviewee Week	_____	Constant No
Round No.	□□	

Mark (x) in the box of the Repetition in which the household is interviewed  first  second  third  fourth

### Part I : Identification Information

<b>IDNUM</b>	□□□□	<b>REP</b>	□□	<b>IDSAM</b>	□□□□□□
<b>ID1</b>	<b>Locality code</b>	□□□□□□	<b>ID4</b>	<b>Number of HU in the Building</b>	□□□
<b>ID2</b>	<b>Enumeration Area</b>	□□□	<b>ID5</b>	<b>Number of household in HU</b>	□
<b>ID3</b>	<b>Building no</b>	□□□	<b>ID6</b>	<b>District code</b>	□□
<b>ID7</b>	<b>Type of locality</b>		<b>ID8</b>	<b>No. of HH in Enumeration Area</b>	□□
<b>ID9</b>	<b>Name of head of HH</b>				
<b>District</b>		<b>Locality</b>		<b>Street/Route</b>	

### Part II: Quality Control

Repetition	Date of interviewing			Final result	No. of visits	Name of interviewer	No. of interviewer	Editor code	Coder code	Data entry	Duration of interview per minute
	QC1			QC2	QC3		QC4	QC5	QC7		
	day	Month	Year	(1-9)	(1-3)		QC8				
1	□□	□□□□□□	□	□		□□□□	□□□□	□□□□	□□□□	□□□□	□□
2	□□	□□□□□□	□	□		□□□□	□□□□	□□□□	□□□□	□□□□	□□
3	□□	□□□□□□	□	□		□□□□	□□□□	□□□□	□□□□	□□□□	□□
4	□□	□□□□□□	□	□		□□□□	□□□□	□□□□	□□□□	□□□□	□□

<b>QC2</b>	<b>Final result</b>	1. Complete (Household not changed) 2. Complete (Household was changed) 3. Household traveled 4. Unit Not Found 5. Nobody at Home 6. Refused 7. Not inhabited unit 8. No information 9. Others/ Select.....
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Interviewer: Read all names of household members listed in the previous Repetition and ask the following questions	Repetition				
	First	Second	Third	Fourth	
RD1: Number of new household members					If the number is more than one, add the new names to the household roster
RD2: Number of household members who left the household due to death, migration or any other reason					If the number is more than one update the roster and delete the names of the leaving members
RD3: Number of household members less than 10 years					TEL: □□□□□□□□□□
RD4: Number of household members 10 years and over					E-MAIL:
RD5: Number of residence rooms					

HR0				HR0A	HR1	IDPER	IDK	HR2	HR3			HR4	HR5	HR6	HR7	HR8								
Office Use Only Person Change Status Code				Number of Person answering by Round <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Name	Id Number	Id Type 1.Palestinian 2.Palestinian hold another applection 3. Jerusalem Id 4. Israeli Id 5. Foreign Applection 6. Other	Sex 1.Male 2.Female	Date of Birth			Relationship to the Head of Household 1. head 2. spouse 3. son\daughter 4. father\mother 5. brother\ sister 6. Grand Father\ Mother 7. grand child 8. Son Wife\ Daughter 9. Husband 10. Other relative 10. Others	Refugee Status 1.Registered 2.Not Registered 3.Not Refugee	Interviewer: Write down changes of residency Status 1. Work 2. Studying 3. Marriage 4. Accompanying 5. Emigration 6. Death 7. Newborn 8. Others 9. Nothing	When was the Person Registered For the first time in the HH by the Repetition	Do you have any difficulties								
																vision	Hearing	Mobility and using finger	remembering and concentrating	Communication				
1	2	3	4						Day	Month	Year			1	2	3	4	1. No - no difficulty 2. Yes - some difficulty 3. Yes - a lot of difficulty 4. Can not at all 5- Don't know						
				01		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				02		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				03		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				04		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				05		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				06		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				07		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				08		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				09		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				10		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				11		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				12		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				13		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				14		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				15		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				16		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				17		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				18		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				19		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				20		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

O Interviewer: Mark (x) in the circle if an extra questionnaire was completed for the household

**Part 4: Population 10 years and over**

**ROUND:**

District: _____		Locality: _____		Name of head of HH: _____		IDSAM: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Serial No: <input type="checkbox"/> <input type="checkbox"/>			Name: _____				
<b>Pr1:</b>	The Age at last Birthday	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Years				
<b>Pr2:</b>	Attendance in formal Education	<input type="checkbox"/>	1.Currently Attending 2. Attended and left 3. Attended and graduated 4. Never attended				
<b>Pr3:</b>	How many years have you completed successfully	<input type="checkbox"/> <input type="checkbox"/>					
<b>Pr4:</b>	Educational Attainment( higher Qualification )  <b>If the answer is one of the option (1-4), skip to Question Pr5</b>	<input type="checkbox"/> <input type="checkbox"/>	1. Illiterate 2.Can Read and Write 3. Elementary 4.Preparatory 5.Secondary 6.Associatte Diploma 7.BA\ BSc 8. Higher Diploma 9.Master Degree 10.Ph.D				
<b>Pr4a:</b>	Specialization of education	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
<b>Pr4b:</b>	Country of graduation	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
<b>Pr4c:</b>	Years of graduation	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
<b>Pr4d:</b>	Specialization of Secondary school (for who answered Pr4 number 6 and above)	<input type="checkbox"/> <input type="checkbox"/>					
<b>Pr4E:</b>	Graduation from a technical college ( Palestine technical college, Hisham Hijjawi, Palestine Polytechnic University) (for who replied on pr4 7 and more)	<input type="checkbox"/>	1. Yes 2.. No				
<b>Pr5:</b>	<b>Marital Status:</b> ask for Persons 14 years and above, Persons 10-13 years record for them (--)	<input type="checkbox"/>	1.Never Married 2. Engaged 3.Married 4. Divorced 5. Widowed 6. Separated				
<b>Pr6:</b>	Did attendance .... training course attendance during last 12 months (such as training course that managed by ministry of labour, Qalandia institute )- (must present certificate at the end of the training course)	<input type="checkbox"/>	1. Yes <b>(Skip to Pr7)</b> 2.No				
<b>Pr6a:</b>	Did attendance .... training course attendance (such as training course that managed by ministry of labour, Qalandia institute - (must present certificate at the end of the training course)	<input type="checkbox"/>	1. Yes 2.No <b>(Skip to Pr10)</b>				
<b>Pr7:</b>	Training Institution name	<input type="checkbox"/> <input type="checkbox"/>					
<b>Pr8:</b>	Specialization of training course	<input type="checkbox"/> <input type="checkbox"/>					
<b>Pr9:</b>	Training course period	<input type="checkbox"/> <input type="checkbox"/>	months				
<b>Pr10:</b>	Are you enrolled in non-professional training courses (except for the above) during the past 12 months (life skills, culture, awareness, literacy for adults)	<input type="checkbox"/>	1.Yes 2. No				
<b>PW01:</b>	Last week, did..... work for wage or salary ,or for other income in cash or in kind of job including casual activities even for one hour?	<input type="checkbox"/>	1.yes <b>( Skip to PW05)</b> 2.No-Disable\ Detained \ abroad <b>( Skip to PW25)</b> 3.No				
<b>PW02:</b>	Last week, did ... do any work even if only for one hour in family enterprise like: Animal Care, helping in the farm, sewing clothes, the orientation of the product partially or totally to the market	<input type="checkbox"/>	1. Yes <b>( Skip to PW05)</b> 2.No				
<b>PW03:</b>	Does ..... have any work or enterprise for which he\she was absent last week (Temporarily)? (and to which he/she will definitely return to work for wage or without wage)	<input type="checkbox"/>	1. Yes 2.No <b>( Skip to PW16)</b>				
<b>PW04:</b>	Why was..... absent from his\her job last week?	<input type="checkbox"/>	1.Vacatio 2.Ill \ injury 3.Maternity leave 4. Strike\ Closure 5.Temporary stoppage 6.Bad weather 7.Education/ Training 8.Family responsibilities 9.Other				
<b>PW04a:</b>	How many days, did .... Absent from work ?	days	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<b>PW05:</b>	How many hours, did .... usually work per week?	<input type="checkbox"/> <input type="checkbox"/>	<b>(main job)</b>				
<b>PW06:</b>	How many hours, did ..... actually work in all jobs last week?	<input type="checkbox"/> <input type="checkbox"/>	<b>IF the hours 35 or more Skip to PW08</b>				

<b>PW07</b>	Why was the number of hours worked last week less than 35 hours?	<input type="checkbox"/>	1.Personal reasons (Illness, vacation,,) 2.No desire to work more 3.Strike 4.Closure 5. The nature of normal work hours 6.Could not find additional work 7.Other
<b>PW08</b>	Last week, did... work hours more than hours of usually work?	<input type="checkbox"/>	1.Yes 2.No <i>( Skip to PW10)</i>
<b>PW09</b>	How many additional hours...have worked last week?	<input type="checkbox"/> <input type="checkbox"/>	hours
<b>PW10</b>	Did... want to change his\her job Last week?	<input type="checkbox"/>	1.Yes 2.No <i>( Skip to PW12)</i>
<b>PW11</b>	Why did... want to change his\her job ?	<input type="checkbox"/>	1.Insufficient income 2.Occupation is not suitable 3.Bad work conditions 4.Place of work is far 5.Temporary/seasonal / casual 6.Other <i>For all answer Skip to PW13</i>
<b>PW12</b>	Why did not .... want to change his\her job?	<input type="checkbox"/>	1. Comfortable work 2.Studying, training 3.Housekeeping 4.Old, Illness 5.Lack of job opportunities 6.Other <i>For all answer Skip to PW27</i>
<b>PW13</b>	During the last four weeks, did ... look for another job/activity to replace your current one(s)?	<input type="checkbox"/>	1.Yes 2.No
<b>PW14</b>	During the last four weeks, did .... look for extra work ?	<input type="checkbox"/>	1.Yes 2.No
<b>PW15</b>	During the last four weeks, did ... look for extra hours in current job?	<input type="checkbox"/>	1.Yes 2.No <i>Skip to PW27</i>
<b>PW16</b>	In the last four weeks, did .... looking for a job or trying to start a business?	<input type="checkbox"/>	1.Yes 2.No <i>( Skip to PW18)</i>
<b>PW17</b>	In the last four weeks, what have done to look for work or to start a business? <b>Answer (1-11) skip to PW19</b> 1.Registered at employment office 2.Placed or answered job ads 3.Use internet 4.Checked with employers 5.Took a test or interview	<input type="checkbox"/> <input type="checkbox"/>	6.Asked friends, relatives, 7.Waited at work places 8. Looked finance for a business 9.Looked for a business 10.Applied for permit or license 11.Other 12. Did nothing
<b>PW18</b>	What was the main reason did not.... seek work or try to start a business in the last four weeks? 1.Waiting news from employer 2.Waiting season 3. Studying/ training 4. Personal/ Family responsibilities 5. Low wages 6.Illness\ injury\ disability 7.Waiting results from previous job\applications 8. Arrangement was taken to start self employment 9.Too young or too old to work	<input type="checkbox"/> <input type="checkbox"/>	10. Waiting for permit to work in Israel 11.Found\established a job which starts later 12. Lack of the necessary qualification, training or experience 13.Unable to find work 14.Retirement 15. The existence of revenue 16.No jobs available in the area 17.No need to work 18. The household do not permit to work 19. Other.....
<b>PW19</b>	Was .... available for work last week?	<input type="checkbox"/>	1.Yes 2.No <i>Cont Skip to PW22</i>
<b>PW20</b>	Was there any reason that prevented ..... from getting a job if he was offered on the last week? 1.No 2.Yes- Studying\ training 3.Yes-Family responsibilities 4.Yes-Illness\ injury \ disability 5.Yes-Retirement	<input type="checkbox"/> <input type="checkbox"/>	6.Yes-Old 7.Yes-Too young 8.Yes- Not willing to work 9.Yes-Seasonal / casual/ Temporary 10.Yes-Rest 11.Yes-Begging 12.Yes- Other
<b>PW21</b>	For how long had ..... been without work and trying to find a job or start a business?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Months
<b>PW22</b>	During the last 6 months, did .... do anything to look for work or to start a business?	<input type="checkbox"/>	1.Yes 2.No

<b>PW23</b>	Did....desire for work job in wage or profit during the next four weeks?	<input type="checkbox"/>	1. No 2. Yes-Wage employee 3. Yes-Self employed
<b>PW24</b>	In ..... opinion, what is the main reason could not find work?	<input type="checkbox"/>	1.Lack of education\ Experience\ Qualification 2.Lack of suitable job opportunities 3.High competition 4.Not interested for looking a work 5.Other....
<b>PW25</b>	Did....ever work for wage or salary ,or for other income in cash or in kind of job in the past (Including work on a special project or a project for family or for the family farm) <b>for at least two weeks regularly?</b>	<input type="checkbox"/>	1.Yes- during the previous 12 month 2.Yes-more than one year and less than 3 Years 3.No <b>Skip to PW27</b>
<b>PW26</b>	How long did .... stop work in the last job/activity	<input type="checkbox"/> <input type="checkbox"/>	Months
<b>PW27</b>	In the last four weeks, did ..... spend any time of unpaid activity? Such as: sewing raising animals , child care, food processing at home	<input type="checkbox"/>	1. Yes 2. No <b>persons who answered PW25 option(3) Skip to PW87, other skip to PW34</b>
<b>PW28</b>	What kind of the unpaid work ..... did? <b>Answer: 1. Yes 2. No</b>	<input type="checkbox"/>	1.Unpaid trainee work 2. Volunteer work 3. Own production (including subsistence work) 4. Unpaid service work in own household
<b>PW29</b>	Did..... received any wage in cash or in kind or income from these activities? <b>Answer: 1. Yes 2. No</b> <b>If the answer is one of the option (3,4) skip to PW32</b>	<input type="checkbox"/>	1.Unpaid trainee work 2. Volunteer work 3. Own production (including subsistence work) 4. Unpaid service work in own household
<b>PW30</b>	Did .... do this unpaid work for or through an organization? 1.Yes 2.No ( <b>skip to PW32</b> )	<input type="checkbox"/>	1.Unpaid trainee work 2. Volunteer work
<b>PW31</b>	What type of Industry (economic activity) does this company\ establishment work in?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> ..... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> .....	1.Unpaid trainee work 2. Volunteer work
<b>PW32</b>	What is\was his\her main occupation at this unpaid work?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> ..... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> ..... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> ..... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> .....	1.Unpaid trainee work 2.Volunteer work 3.Own production including subsistence work) 4. Unpaid service work in own household
<b>PW33</b>	How many hours do ..... usually work per week at this unpaid work?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1.Unpaid trainee work 2.Volunteer work 3.Own production including subsistence work 4. Unpaid service work in own household
<b>PW34</b>	Where did... work in the main currents\previous job?	<input type="checkbox"/>	1.In Same District in West Bank 2.In other District in West Bank 3.In same District in Gaza Strip 4.In other District in Gaza Strip 5.Israel and Settlements 6.Abroad
<b>PW35</b>	Does...work with permit or has any document to get to Israel or settlements? ( <b>main job</b> )	<input type="checkbox"/>	1.Work with permit 2.Work without permit 3.Israel identity\foreign passport\Jerusalem identity
<b>PW35_A</b>	What is the type of permit do you work ... .. in Israel or the settlements / border industrial zones?		1.Work permit 2. Commercial permit(for working for wage) 3.Commercial permit(for trade) <b>Skip to PW36</b>

<b>PW35_B</b>	For how many months has...been continuously employed in Israel or the settlements?	<input type="text"/> <input type="text"/> <input type="text"/> in months
<b>PW35_C</b>	What is the duration of... current work permit in months?	<input type="text"/> <input type="text"/> in months
<b>PW35_D</b>	Does...pay a fee to a broker for the permit?	1. Yes 2.No <b>Skip to PW36</b>
<b>PW35_E</b>	What is the total fee paid for the permit in NIS?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> in NIS <b>Skip to PW36</b>
<b>PW35_F</b>	For how many months has...been continuously employed in Israel or the settlements?	<input type="text"/> <input type="text"/> <input type="text"/> in months
<b>PW36</b>	For whom did ... work in the main current\previous work? ( <b>main job</b> )	.....
<b>PW37</b>	What type of Industry (economic activity) does this company\ establishment work in? ( <b>main job</b> )	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<b>PW38</b>	What are the main duties and activities that... does At this work? ( <b>main job</b> )	.....
<b>PW39</b>	What is\was his\her main occupation at this work? ( <b>main job</b> )	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

**The persons who answered PW25 option (1-2) Skip to PW87**

<b>PW40</b>	What is\was his\her employment status? ( <b>main job</b> )	<input type="checkbox"/> 1.Wage Employee <b>Skip to PW41</b> 2.Employer ( <i>Inside Establishment</i> ) 3.Employer ( <i>outsideEstablishment</i> ) <b>continue</b> 4.Self Employed ( <i>Inside Establishment</i> ) 5.Self Employed ( <i>outsideEstablishment</i> ) 6.Unpaid Family member <b>Skip to PW50</b> 7.Paid trainee <b>Skip to PW41</b>
<b>PW40.a</b>	For those answered PW40-2-5 What is the legal status/organization of the enterprise where you work? <b>Skip to PW50</b>	<input type="checkbox"/> 1.Individual business/partnership with members of household 2.Partnership with other 3.Other..... Specify
<b>PW41</b>	Is ..... employed on the business in a written contract ? ( <b>main job</b> )	<input type="checkbox"/> 1.Yes- written for limited period 2.Yes- written for unlimited period <b>Skip to PW42</b> 3. Yes-Verbal agreement 4.No <b>Skip to PW42</b>
<b>PW41.a</b>	How long in total is ..... current agreement? (Main Job)	<input type="checkbox"/> 1.Contract/daily agreement 2.less than one month 3.from one to less than 3 months 4.from 3 to less than 6 months 5. From 6 to less than 12 months 6. From 12 to less than 24 months 7. Tow years or more
<b>PW41.b</b>	Are your job temporary/fixed term	<input type="checkbox"/> 1.Yes 2.No
<b>PW42</b>	Does the employer contribution to the pension fund / end of services benefits? ( <b>main job</b> )	<input type="checkbox"/> 1.Yes 2.No 3.Don't Know
<b>PW43</b>	Does the employer give paid annual leave or payment for leave not taken? ( <b>main job</b> )	<input type="checkbox"/> 1.Yes 2.No 3.Don't Know
<b>PW44</b>	Does the employer give paid sick leave in case of illness or injury? ( <b>main job</b> )	<input type="checkbox"/> 1.Yes 2.No 3.Don't Know
<b>PW45</b>	Does the employer give paid maternity leave? ( <b>main job</b> )	<input type="checkbox"/> 1.Yes 2.No 3.Don't Know 4. Not apply
<b>PW46</b>	Did ... receive training courses during the first period at work? ( <b>main job</b> )	<input type="checkbox"/> 1.Yes 2.No 3.New employee (didn't finish three months)
<b>PW47</b>	Is the work conditions ... characterized of the following? 1.Yes 2. No	<input type="checkbox"/> 1. Provide free private health insurance/partially <input type="checkbox"/> 2. Provide free public health insurance. <input type="checkbox"/> 3.Provide insurance against injuries
<b>PW48</b>	Do..... receive wage with a pay slip? ( <b>main job</b> )	<input type="checkbox"/> 1.Yes 2.No 3.Don't Know
<b>PW49</b>	Does ..... 's employer deduct income tax from your wage or salary? ( <b>main job</b> )	<input type="checkbox"/> 1.Yes 2.No 3.Don't Know

<b>PW50</b>	What is the sector of the organization in which it works ... currently? ( <b>main job</b> )	<input type="checkbox"/> <input type="checkbox"/>	1. National Government 2. Foreign government 3. Local Authority 4. International institution 5. UNRWA 6. Nonprofit Organization 7. Private Sector 8. Private enterprise 9. Private household 10. Other Other (specify)	} <b>Skip to PW54</b>  } <b>Skip to PW51</b> } <b>Skip to PW53</b>
<b>PW51</b>	Does the business or farm registered in tax administration? ( <b>main job</b> )	<input type="checkbox"/>	1. Yes 2. No 3. Don't Know	
<b>PW52</b>	Does the business or farm keep a complete record of accounts? ( <b>main job</b> )	<input type="checkbox"/>	1. Yes 2. No 3. Don't Know	
<b>PW53</b>	Where is the product being produced marketed ?( <b>main job</b> )	<input type="checkbox"/>	1. Market 2. Both (Market and household)	
<b>PW53.a</b>	Which of the following types of pay (do/does) ..... receive for this work?  1. Yes 2. No 3. Don't Know 4. Not apply		1. A wage / salary 2. Payment by piece of work completed 3. Commissions 4. Tips 5. Fee for services provided 6. Payment with meals or accommodation 7. Payment in products 8. cash 9. other cash payment (SPECIFY): _____	
<b>PW54</b>	How many persons, including ..... usually, work at the place of work? ( <b>main job</b> )	<input type="checkbox"/>	1. Only one 2. 2—4 3. 5—9 4. 10—19 5. 20+	
<b>PW55</b>	What is the actual number of workers with ... in the current work? ( <b>main job</b> )	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>PW56</b>	Is .... affiliated to any of the workers/Vocational union? ( <b>main job</b> )	<input type="checkbox"/>	1. Yes 2. No	
<b>PW57</b>	Did ... occupation suit with educational qualification? ( <b>main job</b> ) <b>For persons who hold educational qualification associated diploma and above only if other chose the 3<sup>rd</sup> option</b>	<input type="checkbox"/>	1. Yes 2. No 3. Not applicable	
<b>PW58</b>	Did .... exposed to injury during the last 12 months? ( <b>main job</b> )	<input type="checkbox"/>	1. Yes 2. No	<b>Skip to PW61</b>
<b>PW59</b>	Did ..... absent from work due to this injury? ( <b>main job</b> )	<input type="checkbox"/>	1. Yes 2. No	<b>Skip to PW61</b>
<b>PW60</b>	Did the absent period was paid by the employer? ( <b>main job</b> ) <b>Ask only who answered PW40 option (1)</b>	<input type="checkbox"/>	1. Yes 2. No	
<b>PW61</b>	Does..... have any other jobs last week? ( <b>secondary job</b> )	<input type="checkbox"/>	1. Yes 2. No	<i>Skip to PW81</i>
<b>PW62</b>	How many hours, did ..... actually work last week? ( <b>secondary job</b> )	<input type="checkbox"/> <input type="checkbox"/>		
<b>PW63</b>	Where did... work in the currently secondary job?	<input type="checkbox"/>	1. In Same District in West Bank 2. In other District in West Bank 3. In same District in Gaza Strip 4. In other District in Gaza Strip 5. Israel and Settlements 6. Abroad	
<b>PW64</b>	Does...work with permit or has any document to get to Israel or settlements?	<input type="checkbox"/>	1. Work with permit 2. Work without permit 3. Israel identity\foreign passport\Jerusalem identity	
<b>PW65</b>	For whom did ... work in the main current\previous work? ( <b>secondary job</b> )		.....	

<b>PW66</b>	What type of Industry (economic activity) does this company\ establishment work in? ( <b>secondary job</b> )	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>PW67</b>	What are the main duties and activities that... does At this work? ( <b>secondary job</b> )	.....
<b>PW68</b>	What is\was his\her main occupation at this work? ( <b>secondary job</b> )	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>PW69</b>	What is\was his\her employment status? ( <b>secondary job</b> )	<input type="checkbox"/> 1.Wage Employee <b>Skip to PW70</b> 2.Employer ( <i>Inside Establishment</i> ) 3.Employer ( <i>outsideEstablishment</i> ) <b>continue</b> 4.Self Employed ( <i>Inside Establishment</i> ) 5.Self Employed ( <i>outsideEstablishment</i> ) 6.Unpaid Family member <b>Skip to PW77</b>
<b>PW69.a</b>	For those answered PW69-2-5 What is the legal status/organization of the enterprise where you work? <b>Skip to PW77</b>	<input type="checkbox"/> 1.Individual business/partnership with members of household 2.Partnership with other 3.Other..... Specify
<b>PW70</b>	Are ..... employed on the business in a written contract ? ( <b>secondary job</b> )	<input type="checkbox"/> 1.Yes- written for limited period <input type="checkbox"/> 2.Yes- written for unlimited period <b>Skip to PW71</b> 3.Yes- Verbal agreement 4.No <b>Skip to PW71</b>
<b>PW70.a</b>	How long in total is ..... current agreement? (Second Job)	<input type="checkbox"/> 1.Contract/daily agreement 2.less than one month 3.from one to less than 3 months 4.from 3 to less than 6 months 5. From 6 to less than 12 months 6. From 12 to less than 24 months 7. Tow years or more
<b>PW71</b>	Does the employer contributions to the pension fund / end of services benefits? ( <b>secondary job</b> )	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No <input type="checkbox"/> 3.Don't Know
<b>PW72</b>	Does the employer get paid annual leave or payment for leave not taken? ( <b>secondary job</b> )	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No <input type="checkbox"/> 3.Don't Know
<b>PW73</b>	Does the employer get paid sick leave in case of illness or injury? ( <b>secondary job</b> )	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No <input type="checkbox"/> 3.Don't Know
<b>PW74</b>	Does the employer get paid maternity leave? ( <b>secondary job</b> )	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No <input type="checkbox"/> 3.Don't Know <input type="checkbox"/> 4.Not apply
<b>PW75</b>	Do..... receive wage with a pay slip? ( <b>secondary job</b> )	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No <input type="checkbox"/> 3.Don't Know
<b>PW76</b>	Does ..... 's employer deduct income tax from your wage or salary? ( <b>secondary job</b> )	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No <input type="checkbox"/> 3.Don't Know
<b>PW77</b>	What is the sector of the organization in which it works ... currently? ( <b>secondary job</b> )	<input type="checkbox"/> <input type="checkbox"/> 1. National Government <input type="checkbox"/> <input type="checkbox"/> 2.Foreign government <input type="checkbox"/> <input type="checkbox"/> 3. Local Authority <input type="checkbox"/> <input type="checkbox"/> 4. International institution <input type="checkbox"/> <input type="checkbox"/> 5. UNRWA <input type="checkbox"/> <input type="checkbox"/> 6.. Nonprofit Organization <input type="checkbox"/> <input type="checkbox"/> 7. Private Sector <b>Skip to PW78</b> <input type="checkbox"/> <input type="checkbox"/> 8. Private enterprise <b>Skip to PW78</b> <input type="checkbox"/> <input type="checkbox"/> 9. Private household <b>Skip to PW80</b> <input type="checkbox"/> <input type="checkbox"/> 10. Other (specify) <b>Skip to PW80</b>
<b>PW78</b>	Does the business or farm registered in tax administration? ( <b>secondary job</b> )	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No      3.Don't Know
<b>PW79</b>	Does the business or farm keep a complete record of accounts? ( <b>secondary job</b> )	<input type="checkbox"/> 1.Yes <input type="checkbox"/> 2.No <input type="checkbox"/> 3.Don't Know

<b>PW79.a</b>	Which of the following types of pay (do/does) ..... receive for this work?		1.A wage / salary 2. Payment by piece of work completed 3.Commissions 4. Tips 5. Fee for services services provided 6. Payment with meals or accommodation 7.Payment in products 8.cash 9. other cash payment (SPECIFY):_____
<b>PW80</b>	How many persons, including ..... usually, work at the place of work? (secondary job)	<input type="checkbox"/>	1. Only one 2. 2--4 3. 5--9 4. 10--19 5. 20+
<b>Only for those who answered PW40 option (1) if PW40 option (2-5) skip to PW86, if PW40 option (6-7) skip to pw87 ( In main job)</b>			
<b>PW81</b>	What is the nature of currently Job? (main job)	<input type="checkbox"/>	1.Full-time\ Regular 2.Part-time 3. Temporary\ casual \ Seasonal
<b>PW82</b>	How long is he\she at this work? (main job)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<b>Months</b>
<b>PW83</b>	How many days did ..work for wage last month? (main job)	<input type="checkbox"/> <input type="checkbox"/>	<b>Days</b>
<b>PW84</b>	Since ..... worked for wage what was the amount for it?  - <b>Period:</b> 1. Daily 2. Weekly 3. Monthly  - <b>Amount he\she received:</b>  - <b>Currency:</b> 1. Shiekeel 2. Jordanian Dinar 3. Dollar	<input type="checkbox"/>  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	
<b>PW85</b>	Would you say the monthly amount was in the range ... ?	<input type="checkbox"/>	1 . Less than 500 Shiekeel 2. 500-999 Shiekeel 3. 1000-1499 Shiekeel 4. 1500-1999 Shiekeel 5. 2000-2499 Shiekeel 6. 2500-2999 Shiekeel 7. 3000-3499 Shiekeel 8. 3500-3999 Shiekeel 9. 4000 Shiekeel or more
<b>PW86</b>	<b>Only (employer, self employed ) and who answered the PW40 option (2-5)</b>  How much was ..... net earnings from main job after deducting all expenses last month?  <b>Currency:</b> 1. Shiekeel 2. Jordanian Dinar 3. Dollar	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/>	
<b>Questions from PW86.a- PW86.d only for those who answered PW40 options (2-5)</b>			
<b>PW86.a</b>	<b>In the last 12 months, did most of (business) income from one client?</b>	<input type="checkbox"/>	1.Yes <b>Skip to PW86.d</b> 2.No
<b>PW86.b</b>	<b>Do you get customers, clients or buyers through someone else, for example from another company, intermediary or person?</b>	<input type="checkbox"/>	1. Yes all of them 2. Yes most of them 3. Yes some of them 4. NO } <b>Skip to PW86.d</b>
<b>PW86.c</b>	<b>In this job (do you/does NAME) ....?</b>	<input type="checkbox"/>	1.Make products or provide services for only one company 2.Sell products or services from only one company 3.Work with materials or equipment provided by just one company 4. No one of the above →Skip to PW87

PW86.d	<b>Does that company, intermediary or person sets...?</b> <b>The answer</b> <b>1.Yes 2.No</b>	1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/> 6. <input type="checkbox"/>	1. The price of the products or services offered 2. The minimum amount of sales or work to complete 3. The places, routes or areas where to do the work 4. How to organize the work 5. The suppliers to use 6. Provides the place or equipment to use
PW87	Place of birth .....	<input type="checkbox"/>	1. Inside Palestine 2. Outside Palestine <b>skip to ICTP03</b>
PW88	Name of Governorate of birth.....	<input type="checkbox"/> <input type="checkbox"/>	

ICTP03	<b>During the last 3 months, did you use a computer (desktop, laptop, tablet) ?</b> <b>1.Yes</b> <b>2.No (If the answer for all branches of 1-3 is No, go to PR03)</b>	A. <input type="checkbox"/> B. <input type="checkbox"/> C. <input type="checkbox"/>	A. Desktop B. Laptop C. Tablet
ICTP04	<b>During the last 3 months, did you used the Internet from any location ?</b>	<input type="checkbox"/>	1. Yes 2. No
ICTP05	<b>During the last 3 months, did you own a mobile phone?</b> <b>1.Yes 2.No</b>	A. <input type="checkbox"/> B. <input type="checkbox"/>	A. Mobile phone, Basic phone B. Smart Phone