



POPULATION AND HOUSING CENSUS



## TO BE FILLED IN FOR PERSONS AGED 15 YEARS AND OVER LIVING ABROAD

| TO BE FILLED IN FOR PERSONS AGED 15 YEARS AND OVER LIVING ABROAD   |   |  |  |  |  |
|--|---|--|--|--|--|
| County  Municipality/City/Commune  Component locality/Village  Street.  No.  Block.  Entrance.  Floor.  Apartment.  District  FOLDER  NUMBER  Number of the LC form within the folder (to be taken from the LC form corresponding to the dwelling the person belongs to)  Number of the G form of the dwelling  Person's order number in the G or PPI form  DATA PROVISION  IS COMPULSORY  All persons shall be required to data, in accordance with Art. Fernment Ordinance No 36/200 conducting of the 2011 Popular Housing Census.  Refusal to provide data shall be a contravention and shall be provided the data of the dwelling the person belongs to)  Number of the G form of the dwelling  Person's order number in the G or PPI form  SURNAME AND FIRST NAME  (the initial of the father's first name or of the mother's first name (if the father is unknown) shall also be written) | vely sta- provide of Gov- on the tion and deemed nishable Decision tion and |  |  |  |  |
| 1 PERSONAL NUMERIC CODE  |   |  |  |  |  |
| 2 INDICATE THE COUNTRY WHERE THE PERSON LIVES  |   |  |  |  |  |
| 3 WHEN DID THE PERSON LEAVE THE ENUMERATION LOCALITY TO GO ABROAD?   |   |  |  |  |  |
| 1  | 2 – 3 years ago   |  |  |  |  |
| 4 DOES THE PERSON LIVING ABROAD WORK THERE?  |   |  |  |  |  |
| 1 O YES  |   |  |  |  |  |
| 2 NO → go directly to question 6   |   |  |  |  |  |

| 5 FIELI<br>1 (2 (3 (4 (5 (5 (6 (6 (6 (6 (6 (6 (6 (6 (6 (6 (6 (6 (6                | D THE PERSON WORKS IN  Agriculture Industry Construction Restaurants, bars Hotels                            | 6<br>7<br>8<br>9<br>10                         | 00000    | Transport Computers/Informatics Household services Health Another field |  |  |
|---|--|--|----------|---|--|--|
| 6 DOES THE PERSON SEND MONEY TO THE HOUSEHOLD MEMBERS?  1 ○ YES 2 ○ NO → end form |  |  |          |   |  |  |
| MEN   | OFTEN DOES THE PERSON LIVING AN IBERS?  Monthly Every 3 months Every 6 months                                | 4<br>5<br>6                                    | END<br>O | MONEY TO THE HOUSEHOLD  Yearly Occasionally I don't know                |  |  |
| Completed, Checked,   |  |  |          |   |  |  |
| Surname and first name of the enumerator  |  | Surname and first name of the chief enumerator |          |   |  |  |
| Signatu   | Signature  |  |          |   |  |  |
|   |  |  |          |   |  |  |
|   | I confirm that all data recorded on this form is in accordance with the information given by the respondent, |  |          |   |  |  |
| Signature of the household head, more specifically of the person who pro-         |  |  |          |   |  |  |
| vided the information   |  |  |          |   |  |  |
|   | Thank you for your answers.  |  |          |   |  |  |
| Form completion date October 2011   |  |  |          |   |  |  |