

4B

POPULATION CENSUS QUESTIONS

GENERAL INSTRUCTIONS: 1. WRITE THE ANSWER/DETAILED DESCRIPTION ON THE LINES PROVIDED.
 2. WRITE THE NUMBER OR CODE CORRESPONDING TO THE ANSWER IN THE BOX/ES.
 3. REFER TO THE CODES FOR ITEM P2 AT THE BOTTOM OF THIS PAGE; THE CODE BOOK FOR THE CODES IN ITEM P9.

FOR ALL PERSONS

LINE NUMBER

Name	Residence Status	Sex	Date of Birth	Age	Birth Registration		Marital Status	Religious Affiliation
P1	P2	P3	P4	P5	P6	P7	P8	P9
Who are the persons residing in this institutional living quarter (ILQ) as of May 1, 2020?	What is ___'s position or residence status in this ILQ?	Is ___ male or female? 1 Male 2 Female	In what month and year was ___ born? Month (MM) Year (YYYY)	What is ___'s age as of his/her last birthday?	Was ___'s birth registered with the Local Civil Registry Office? 1 Yes 2 No 3 Don't know	Has ___ ever had a copy of his/her birth certificate? 1 Yes 2 No 3 Don't know	Is ___ single, married, common law/live-in, widowed, or divorced/separated/annulled? 1 Single 2 Married 3 Common-law/Live-in 4 Widowed 5 Divorced/Separated/Annulled 6 Unknown FOR CHILDREN "0" TO "9" YEARS OLD, WRITE CODE "1" (SINGLE) IN THE BOX.	What is ___'s religious affiliation?

1	LAST NAME	SPECIFY	MM					SPECIFY
	FIRST NAME		YYYY					
2	LAST NAME	SPECIFY	MM					SPECIFY
	FIRST NAME		YYYY					
3	LAST NAME	SPECIFY	MM					SPECIFY
	FIRST NAME		YYYY					
4	LAST NAME	SPECIFY	MM					SPECIFY
	FIRST NAME		YYYY					
5	LAST NAME	SPECIFY	MM					SPECIFY
	FIRST NAME		YYYY					
6	LAST NAME	SPECIFY	MM					SPECIFY
	FIRST NAME		YYYY					
7	LAST NAME	SPECIFY	MM					SPECIFY
	FIRST NAME		YYYY					
8	LAST NAME	SPECIFY	MM					SPECIFY
	FIRST NAME		YYYY					

INDICATOR FOR ADDITIONAL BOOKLET

CODES FOR ITEM P2 - RESIDENCE STATUS

ARE THERE MORE THAN EIGHT (8) MEMBERS IN THIS INSTITUTIONAL LIVING QUARTER?

- 1 Yes, USE ADDITIONAL BOOKLET.
- 2 No

- 01 Manager, director, person-in-charge
- 02 Staff member/employee, including physician and nurse
- 03 Officer/enlisted man, trainee
- 04 Officer/crew member in a merchant vessel
- 05 Priest, seminarian, nun, postulant
- 06 Lodger or boarder
- 07 Patient in hospital, sanitarium, and others
- 08 Ward in home for the aged, orphanage, welfare institution, and others.
- 09 Prisoner/detainee
- 10 Others, SPECIFY _____

POPULATION CENSUS QUESTIONS

4C

GENERAL INSTRUCTIONS: 1. WRITE THE ANSWER/DETAILED DESCRIPTION ON THE LINES PROVIDED.
 2. WRITE THE NUMBER OR CODE CORRESPONDING TO THE ANSWER IN THE BOX/ES.
 3. REFER TO THE CODE BOOK FOR THE CODES IN ITEMS P11 AND P12.

LINE NUMBER

FOR ALL PERSONS		FOR ALL PERSONS 5 YEARS OLD AND OVER																	
Citizenship		Ethnicity	Functional Difficulty				Highest Grade/ Year Completed												
P10	P11	P12	P13				P17												
Is _____ a citizen of the Philippines? 1 YES, Filipino citizen 2 YES, Filipino with dual citizenship 3 NO IF CODE "1", GO TO ITEM P12.	What country/other country is _____ a citizen of? _____ _____ _____	What is _____'s ethnicity by descent/blood relation/consanguinity? Is he/she a/an _____? MENTION THE PREDOMINANT/COMMON INDIGENOUS PEOPLES (IP) OR NON-IP GROUPS IN THE AREA.	The following questions ask about difficulties a person may have doing certain activities because of a HEALTH PROBLEM. Does _____ have any difficulty/problem...? <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:12.5%; text-align: center;">a</th> <th style="width:12.5%; text-align: center;">b</th> <th style="width:12.5%; text-align: center;">c</th> <th style="width:12.5%; text-align: center;">d</th> <th style="width:12.5%; text-align: center;">e</th> <th style="width:12.5%; text-align: center;">f</th> </tr> <tr> <td style="font-size: small;">Seeing, even if wearing glasses</td> <td style="font-size: small;">Hearing, even if using hearing aid</td> <td style="font-size: small;">Walking or climbing steps</td> <td style="font-size: small;">Remembering or concentrating</td> <td style="font-size: small;">(With self-care such as) washing all over or dressing</td> <td style="font-size: small;">Communicating using his/her usual (customary) language</td> </tr> </table>				a	b	c	d	e	f	Seeing, even if wearing glasses	Hearing, even if using hearing aid	Walking or climbing steps	Remembering or concentrating	(With self-care such as) washing all over or dressing	Communicating using his/her usual (customary) language	What is the highest grade/year completed by _____? _____ _____ _____ REFER TO THE CODES ON PAGE 4D, EXCEPT FOR SPECIFIC COURSES.
a	b	c	d	e	f														
Seeing, even if wearing glasses	Hearing, even if using hearing aid	Walking or climbing steps	Remembering or concentrating	(With self-care such as) washing all over or dressing	Communicating using his/her usual (customary) language														
MENTION THESE CATEGORIES: 1 – NO, no difficulty 2 – YES, some difficulty 3 – YES, a lot of difficulty 4 – Cannot do it at all																			
1	_____ SPECIFY <input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>											
2	_____ SPECIFY <input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>											
3	_____ SPECIFY <input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>											
4	_____ SPECIFY <input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>											
5	_____ SPECIFY <input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>											
6	_____ SPECIFY <input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>											
7	_____ SPECIFY <input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>											
8	_____ SPECIFY <input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ SPECIFY <input type="checkbox"/>											

REMARKS

4D**INSTITUTIONAL POPULATION DEFINITION**

Institutional population comprises of persons who are found living in institutional living quarters (ILQ). They may have their own families or households elsewhere but at the time of the census, they are committed or confined in institutions, or they live in ILQs and are usually subject to a common authority or management, or are bound by either a common public objective or a common personal interest.

CODES FOR THE TYPE OF INSTITUTIONAL LIVING QUARTER

01 Hotel, motel, lodging house, dormitory, and others	06 Military camp and station
02 Hospital and nurses' home	07 Logging, mining, and construction/public works camp
03 Welfare institution	08 Oceangoing and interisland/coastal vessel
04 Corrective and penal institution	09 Refugee camp
05 Convent, nunnery, seminary, and boarding school	10 Other, SPECIFY, _____

CODES FOR ITEM P17 - HIGHEST GRADE/YEAR COMPLETED

00000 No grade completed

K TO 12 PROGRAM**PRESCHOOL**

01000 Kindergarten

ELEMENTARY

11100 Grade 1
12100 Grade 2
13100 Grade 3
14100 Grade 4
15100 Grade 5
16100 Grade 6 graduate

JUNIOR HIGH SCHOOL

24100 Grade 7
24200 Grade 8
24300 Grade 9
24400 Grade 10 graduate

SENIOR HIGH SCHOOL

IF GRADE 11 COMPLETER
OR GRADE 12 GRADUATE,
SPECIFY GRADE LEVEL
AND TRACK/STRAND

OLD CURRICULUM**PRESCHOOL**

02000 Preschool

ELEMENTARY

11000 Grade 1
12000 Grade 2
13000 Grade 3
14000 Grade 4
15000 Grade 5
16000 Grade 6
17000 Grade 6 graduate
18000 Grade 7 graduate

HIGH SCHOOL

21000 1st Year
22000 2nd Year
23000 3rd Year
24000 4th Year
25000 High school graduate

**INCLUSIVE/
SPECIAL NEEDS
EDUCATION PROGRAM**

10002 Elementary
24002 High School

**CONTINUING/
SECOND-CHANCE
EDUCATION PROGRAM**

10003 Elementary
24003 High School

POST SECONDARY

48880 Post secondary
undergraduate
IF GRADUATE
OF POST SECONDARY,
SPECIFY COURSE.

**SHORT-CYCLE TERTIARY
EDUCATION PROGRAM**

58880 Short-cycle tertiary
undergraduate
IF GRADUATE
OF SHORT-CYCLE
TERTIARY,
SPECIFY COURSE.

COLLEGE

68100 1st Year
68200 2nd Year
68300 3rd Year
68400 4th Year
68500 5th Year
68600 6th Year
IF COLLEGE GRADUATE,
SPECIFY COURSE.

POST BACCALAUREATE

78880 Master's degree undergraduate
IF GRADUATE OF MASTER'S DEGREE,
SPECIFY COURSE.
88880 Doctorate degree undergraduate
IF GRADUATE OF DOCTORAL DEGREE,
SPECIFY COURSE.

REMARKS