

CAF FORM 2

AUTHORITY:

Section 2(c) of Commonwealth Act (CA) No. 591 authorizes the National Statistics Office to prepare for and undertake all censuses of population, agriculture, industry and commerce.

CONFIDENTIALITY:

Section 4 of CA No. 591 provides that all information furnished on this form are held STRICTLY CONFIDENTIAL.



Republic of the Philippines
NATIONAL STATISTICS OFFICE

2012 CENSUS OF AGRICULTURE AND FISHERIES

HOUSEHOLD ROSTER

2A

2

NSCB Approval No. NSO-1218-02
Expires on October 9, 2013

CERTIFICATION

I hereby certify that the data set forth herein were personally obtained/reviewed by me in accordance with the instructions given by the National Statistics Office.

ENUMERATOR

SIGNATURE OVER PRINTED NAME

TEAM SUPERVISOR

SIGNATURE OVER PRINTED NAME

DSO/SCO

SIGNATURE OVER PRINTED NAME

CO/RO/PO SUPERVISOR

SIGNATURE OVER PRINTED NAME

DATE ACCOMPLISHED

DATE REVIEWED

DATE REVIEWED

DATE REVIEWED

SECTION A – GEOGRAPHIC IDENTIFICATION

		BOOKLET	<input type="text"/>	OF	<input type="text"/>	BOOKLETS
PROVINCE	<input type="text"/>	<input type="text"/>	<input type="text"/>			
CITY/ MUNICIPALITY	<input type="text"/>	<input type="text"/>	<input type="text"/>			
BARANGAY	<input type="text"/>	<input type="text"/>	<input type="text"/>			
ENUMERATION AREA NO.	<input type="text"/>	<input type="text"/>	<input type="text"/>			
SEGMENT NUMBER	<input type="text"/>	<input type="text"/>	<input type="text"/>			

SECTION B – INTERVIEW RECORD

	VISIT 1	VISIT 2	VISIT 3
DATE OF VISIT MONTH : DAY	<input type="text"/>	<input type="text"/>	<input type="text"/>
INTERVIEW TIME BEGAN HOUR : MINUTE	<input type="text"/>	<input type="text"/>	<input type="text"/>
INTERVIEW TIME ENDED HOUR : MINUTE	<input type="text"/>	<input type="text"/>	<input type="text"/>
RESULT OF VISIT*	<input type="text"/>	<input type="text"/>	<input type="text"/>

*Result of Visit Codes

1 Interview completed	3 Refused	5 Household not around/No respondent
2 Interview partly completed	4 Postponed	6 Others, Specify _____

SUMMARY OF VISIT

TOTAL NUMBER OF VISITS	<input type="text"/>	RESULT OF FINAL VISIT*	<input type="text"/>	ENUMERATOR'S CODE	<input type="text"/>
NAME OF HOUSEHOLD HEAD	<input type="text"/>	TOTAL HOUSEHOLD MEMBERS	<input type="text"/>		
	LAST NAME	MALE HOUSEHOLD MEMBERS	<input type="text"/>		
	FIRST NAME	FEMALE HOUSEHOLD MEMBERS	<input type="text"/>		
ADDRESS	<input type="text"/>	LINE NUMBER OF RESPONDENT	<input type="text"/>		
	HOUSE NUMBER AND STREET OR SITIO/PUROK NAME				
NAME OF RESPONDENT	<input type="text"/>				

C 1 L I N E N U M B E R	FOR ALL PERSONS				FOR ALL PERSONS 5 YEARS OLD AND OVER	FOR ALL PERSONS 10 YEARS OLD AND OVER	AGRICULTURE		
							FOR ALL PERSONS 10 YEARS OLD AND OVER	FOR ALL PERSONS 15 YEARS OLD AND OVER	
	C2 Who are the members of this household as of (MENTION THE DATE OF VISIT)? LIST THE PERSONS OR HOUSEHOLD MEMBERS IN THIS ORDER: • Head • Spouse of the head • Never-married children of head/spouse from oldest to youngest • Ever-married children of head/spouse and their families from oldest to the youngest • Other relative • Nonrelative	C3 What is ____'s relationship to the household head? WRITE THE RESPONSE ON THE LINE PROVIDED AND WRITE IN THE BOXES THE APPLICABLE CODE LISTED IN PAGE 2D	C4 Is ____ male or female? 1 Male 2 Female L WRITE X IN THE BOX	C5 What is ____'s age as of his/her last birthday? WRITE THE AGE IN THE BOXES PROVIDED	C6 What is the highest grade/year completed by ____? IF GRADUATE IN POST SECONDARY OR COLLEGE, SPECIFY THE COURSE. WRITE THE RESPONSE ON THE LINE PROVIDED AND WRITE IN THE BOXES THE APPLICABLE CODE LISTED IN PAGE 2D	C7 From January to December 2012, what was ____'s usual activity/occupation? L WRITE THE SPECIFIC ACTIVITY/OCCUPATION ON THE LINE PROVIDED. LEAVE THE CODE BOXES BLANK	From January to December 2012,...		
						C8 Was ____ engaged in an agricultural activity? 1 in own holding, 2 other's holding, 3 both in own and other's holding, or 4 not engaged? WRITE X IN THE BOX GO TO COLUMN 11 IF THE BOX FOR CODE 4 IS MARKED WITH X	C9 Did ____ operate a crop farm, livestock/poultry farm or other farms, or was a hired manager of an agricultural farm? 1 Yes 2 No, GO TO COLUMN 11 WRITE X IN THE BOX	C10 Was ____ operating this farm/holding: 1 on his/her own account, 2 as a hired manager of another household's farm, and/or 3 as a hired manager of an agricultural establishment? WRITE X IN THE BOX MULTIPLE ANSWERS ARE ALLOWED	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
01		<input type="text"/> <input type="text"/>	<input type="checkbox"/> 1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> 1 <input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 1
	LAST NAME		<input type="checkbox"/> 2				<input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 2	<input type="checkbox"/> 2
	FIRST NAME	SPECIFY			SPECIFY	SPECIFY			<input type="checkbox"/> 3
02		<input type="text"/> <input type="text"/>	<input type="checkbox"/> 1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> 1 <input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 1
	LAST NAME		<input type="checkbox"/> 2				<input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 2	<input type="checkbox"/> 2
	FIRST NAME	SPECIFY			SPECIFY	SPECIFY			<input type="checkbox"/> 3
03		<input type="text"/> <input type="text"/>	<input type="checkbox"/> 1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> 1 <input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 1
	LAST NAME		<input type="checkbox"/> 2				<input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 2	<input type="checkbox"/> 2
	FIRST NAME	SPECIFY			SPECIFY	SPECIFY			<input type="checkbox"/> 3
04		<input type="text"/> <input type="text"/>	<input type="checkbox"/> 1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> 1 <input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 1
	LAST NAME		<input type="checkbox"/> 2	L			<input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 2	<input type="checkbox"/> 2
	FIRST NAME	SPECIFY			SPECIFY	SPECIFY			<input type="checkbox"/> 3
05		<input type="text"/> <input type="text"/>	<input type="checkbox"/> 1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> 1 <input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 1
	LAST NAME		<input type="checkbox"/> 2				<input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 2	<input type="checkbox"/> 2
	FIRST NAME	SPECIFY			SPECIFY	SPECIFY			<input type="checkbox"/> 3
06		<input type="text"/> <input type="text"/>	<input type="checkbox"/> 1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> 1 <input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 1
	LAST NAME		<input type="checkbox"/> 2				<input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 2	<input type="checkbox"/> 2
	FIRST NAME	SPECIFY			SPECIFY	SPECIFY			<input type="checkbox"/> 3
07		<input type="text"/> <input type="text"/>	<input type="checkbox"/> 1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> 1 <input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 1
	LAST NAME		<input type="checkbox"/> 2				<input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 2	<input type="checkbox"/> 2
	FIRST NAME	SPECIFY			SPECIFY	SPECIFY			<input type="checkbox"/> 3
08		<input type="text"/> <input type="text"/>	<input type="checkbox"/> 1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> 1 <input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 1
	LAST NAME		<input type="checkbox"/> 2				<input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 2	<input type="checkbox"/> 2
	FIRST NAME	SPECIFY			SPECIFY	SPECIFY			<input type="checkbox"/> 3

ARE THERE MORE THAN EIGHT (8) MEMBERS IN THIS HOUSEHOLD?
 (INCLUDE PERSONS SUCH AS SMALL CHILDREN, INFANTS, AND/OR OVERSEAS WORKERS WHO WERE NOT YET LISTED)

☐ 1 Yes, USE ADDITIONAL CAF FORM 2
 ☐ 2 No

SECTION C – CHARACTERISTICS OF HOUSEHOLD MEMBERS

2C

LINE NUMBER	AQUACULTURE		FISHERIES				C17 OPERATOR IN THE HOUSEHOLD
	FOR ALL PERSONS 10 YEARS OLD AND OVER	FOR ALL PERSONS 15 YEARS OLD AND OVER	FOR ALL PERSONS 10 YEARS OLD AND OVER	FOR ALL PERSONS 15 YEARS OLD AND OVER			
	From January to December 2012, ...		From January to December 2012, ...				
	C11 Was ____ engaged in an aquacultural activity: 1 in own aquafarm, 2 other's aquafarm, 3 both in own and other's aquafarm, or 4 not engaged? L WRITE X IN THE BOX GO TO COLUMN 14 IF BOX FOR CODE 4 IS MARKED WITH X	C12 Did ____ operate a fishpond, fish cage, fish pen, fish tank, seaweed farm or other aquafarm, or was a hired manager of an aquafarm? 1 Yes 2 No, GO TO COLUMN 14 WRITE X IN THE BOX	C13 Was ____ operating this aquafarm: 1 on his/her own account, 2 as a hired manager of another household's aquafarm, and/or 3 as a hired manager of an aquacultural establishment? WRITE X IN THE BOX MULTIPLE ANSWERS ARE ALLOWED	C14 Was ____ engaged in a fishing activity: 1 in own fishing operation, 2 other's fishing activity, 3 both in own and other's fishing activity, or 4 not engaged? WRITE X IN THE BOX GO TO COLUMN 17 IF BOX FOR CODE 4 IS MARKED WITH X	C15 Did ____ operate a fishing activity such as catching/gathering fish, crabs, shrimps, mussels and other aquatic plants/ animals, or was a hired manager of a fishing activity? 1 Yes 2 No, GO TO COLUMN 17 WRITE X IN THE BOX	C16 Was ____ operating this fishing activity: 1 on his/her own account, 2 as a hired manager of another household's fishing operation, and/or 3 as a hired manager of a fishing establishment? WRITE X IN THE BOX MULTIPLE ANSWERS ARE ALLOWED	
(11)	(12)	(13)	(14)	(15)	(16)	(17)	
01	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/>
02	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/>
03	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/>
04	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/>
05	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/>
06	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/>
07	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/>
08	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4 L	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/>

J

TOTAL NUMBER OF OPERATORS IN THE HOUSEHOLD
 (COUNT ALL THE BOXES MARKED WITH X IN COLUMN 17)

C18 (TO)

☐

C3 – Relationship to the Household Head (Column 3)

01 – Head
 02 – Spouse
 03 – Son
 04 – Daughter

21 – Stepson
 22 – Stepdaughter
 23 – Son-in-law
 24 – Daughter-in-law

31 – Grandson
 32 – Granddaughter
 33 – Father
 34 – Mother

41 – Brother
 42 – Sister
 43 – Uncle
 44 – Aunt

55 – Nephew
 56 – Niece
 57 – Other relative
 58 – Nonrelative

65 – Boarder
 66 – Domestic helper

C6 – Highest Grade/Year Completed (Column 6)

000 – No grade completed
 010 – Preschool

ELEMENTARY

210 – Grade 1
 220 – Grade 2
 230 – Grade 3
 240 – Grade 4
 250 – Grade 5
 260 – Grade 6
 280 – Elementary graduate

HIGH SCHOOL

310 – 1st Year
 320 – 2nd Year
 330 – 3rd Year
 340 – 4th Year
 350 – High school graduate

POST SECONDARY*

410 – 1st Year
 420 – 2nd Year
 430 – 3rd Year
 * Specify course if graduate in postsecondary.

COLLEGE*

810 – 1st Year
 820 – 2nd Year
 830 – 3rd Year
 840 – 4th Year
 850 – 5th Year
 860 – 6th Year
 *Specify course if graduate in college.

POSTGRADUATE

900 – Postbaccalaureate

C8 – Engaged in Own and Other's Holding (Column 8)

1 – Own holding
 2 – Other's holding
 3 – Both in own and other's holding
 4 – Not engaged

C11 – Engaged in Own and Other's Aquafarm (Column 11)

1 – Own aquafarm
 2 – Other's aquafarm
 3 – Both in own and other's aquafarm
 4 – Not engaged

C14 – Engaged in Own and Other's Fishing Activity (Column 14)

1 – Own fishing activity
 2 – Other's fishing activity
 3 – Both in own and other's fishing activity
 4 – Not engaged

C10 – Type of Agricultural Operator (Column 10)

1 – On his/her own account
 2 – As a hired manager of another household's farm
 3 – As a hired manager of an agricultural establishment

C13 – Type of Aquacultural Operator (Column 13)

1 – On his/her own account
 2 – As a hired manager of another household's aquafarm
 3 – As a hired manager of an aquacultural establishment

C16 – Type of Fishing Operator (Column 16)

1 – On his/her own account
 2 – As a hired manager of another household's fishing operation
 3 – As a hired manager of a fishing establishment

DEFINITION OF OPERATORS**AGRICULTURAL OPERATOR**

A person who takes the technical and administrative responsibility of managing a holding. He/she is responsible for making the decisions of the operation, including the management and supervision of hired labor. The operator may work alone or with members of his/her household, or may employ others to work. He/she may or may not be the owner of the land. A person may be an agricultural operator regardless of size of land tilled or number of animals raised.

AQUACULTURAL OPERATOR

A person who takes the technical and administrative responsibility of managing the day-to-day operation of an aquafarm. The aquacultural operator is responsible for making major decisions including the management and supervision of hired workers in his/her aquafarm. He/she may do the farming (culturing) of aquatic products himself/herself or with the members of his/her household or may employ others to do the job for him/her. An aquacultural operator may or may not be the owner of the aquafarm.

FISHING OPERATOR

A person who takes the technical and administrative responsibility of managing the day-to-day fishing operation. He/she is responsible for making decisions, including the management and supervision of hired workers in his/her fishing operation. He/she may do the catching of aquatic products alone or with the members of his/her household. He/she may not do the catching or gathering of aquatic products but may employ others to do the job for him/her. He/she may or may not be the owner of the fishing boat and/or fishing gear.

REMARKS