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Section: Introduction

INTRO

We are conducting a survey to find out the Employment Insurance Coverage of people in different situations. (This information will help Human Resources and Skills Development make decisions about how employment insurance money should be spent to assist people.)

Your answers to this voluntary survey are important and will be kept confidential under the Statistics Act. (Your answers to this survey will NOT in any way affect your eligibility for Employment Insurance or the benefits you receive.)

Note:

Coverage statements are provided throughout the questionnaire with the exception of the Confirm Mother Status (MO), Confirm Type (TY), Last Work (LW) and Out of Scope (OS) modules. These modules confirm or update the respondent's situation which determines if the respondent is in-scope or not. Throughout the questionnaire, we will be using the abbreviations DK for "Don't Know" and RF for "Refused".

The past tense was used throughout this questionnaire for most questions because the reference period is in the past. In Job Information section (JB), the questions were asked in past tense unless the respondent confirmed their work status, then the questions were asked in present tense. In section called Work in Last Year (WY), some questions for regular population refer to the year before the survey reference month. For mothers, some questions refer to 12 months prior the birth/adoption of the child. In Employment Insurance section (EI), most questions for the regular population refer to the Labour Force Survey reference week. For mothers, most questions focus on the entire period since the birth or adoption of their child. In Parental Benefits section (PB), some questions were asked in past tense if the age of the child is greater than 10 months. Otherwise, the appropriate tense (present and future) was used.

During the development of the application variables are set, created and calculated. In order to instruct the programmer easily, certain variables are given shortened names. Here is the list of descriptions and their shortened names. REFMO - reference month, LWM/LWY - last worked month and year, if LWY is 1901 - LWY - Never worked, TYPE - type of respondent (1 to 5), WRK - whether worked reference week, COW - class of worker main job, ERNAME - employer name, RSWK - reason stopped working at last job, BYEAR - birth year of child, BMTH - birth month of child, SPPR - spouse present in household, MULTF - whether a multi or single case family, MULTINC - multiple household, LFS - labour force status, SALMIN - minimum salary per hour for respondent's province of residence, MOTHER - respondent identified as mother of a child aged 12 months or less, SRYR - survey year, LWP - last worked period, FAMSZ - family size, RELHD - relationship to head of household, RAGE - age of respondent, SALRYHR - salary per hour.

Section: Confirm Mother Status (MO)

MO_C01 If MOTHER=0 (Non-mother)(Go to TY_C01)

MO_Q01 According to our information, in (reference month) your youngest child was aged 12 months or less. Is this correct?

1 Yes

2 No.....(Go to MO_D04)
DK, RF.....(Go to MO_D04)

MO_Q02 Are you the mother of your child by birth or by adoption?

1 By birth 2 By adoption DK, RF

| MO_Q03 | Is it also correct that your child was born in (birth month), (birth year)? |
|----------|---|
| 1 | Yes(Go to MO_D04) |
| 2 | No |
| | DK, RF(Go to MO_D04) |
| MO_Q04M | What is your child's month of birth? |
| 01 | January |
| 02 | February |
| 03 | March |
| 04 | April |
| 05 | May |
| 06 | June |
| 07 | July |
| 08 | August |
| 09 | September |
| 10 | October |
| 11 | November |
| 12 | December |
| 12 | DK, RF(Go to MO D04) |
| | DK, KF(G0 t0 NO_D04) |
| MO_Q04Y | What is your child's year of birth? |
| | (4 spaces) [Min: 2004 Max: 2005] |
| | DK, RF(Go to MO_D04) |
| MO_D04 | If MO_Q01=2, MO_Q01=DK or MO_Q01=RF, then set MOTHER=0, |
| | Else if response in MO_Q04M and MO_Q04Y, then set MOTHER=1, |
| | BMTH=MO_Q04M, and BYEAR=MO_Q04Y, |
| | Else set MOTHER=1, BMTH=S_BMTH and BYEAR=S_BYEAR. |
| | LISE SECTION TIEN - 1, DIVITTI-O_DIVITTI AND DI EAR - O_DI EAR. |
| Note: | If MOTHER=0 and S_TYPE=5, then set OutType=1 and goto OS_R01. |
| Section: | Confirm Type (TY) |
| TY_C01 | If TYPE=1 (Unemployed or looking for work during the survey reference week) |
| | If TYPE=2 (Working less than 30 hours during the survey reference week)(Go to TY_0 |
| | If TYPE=3 (Not in the labour force and not looking for work during the survey |
| | reference week)(Go to TY_Q03) |
| | If TYPE=4 (Employed full-time during ref. week with a change in employment |
| | during the prev. 3 months)(Go to TY_Q04) |
| | If TYPE=5 (Mother with infant, who worked during reference week)(Go to TY_Q05) |
| ΓY_Q01 | According to our Labour Force Survey interview with you, you were |
| | without work and wanting to work during the (second or third week) of (reference month). Is this correct? |
| | Yes(Go to TY_D08) |
| 1 | Tes(G0 to TT D00) |
| 1 2 | |
| | No, respondent did work during reference week(Go to TY_D06) Respondent was not working and did not want to(Go to TY_D08) |

| TY_Q02 | According to our Labour Force Survey interview with you, you were working less than 30 hours during the (second or third week) of (reference month). Is this correct? |
|-------------|--|
| 1 2 3 | Yes |
| TY_Q03 | According to our Labour Force Survey interview with you, you were not working and not looking for work during the (second or third week) of (reference month). Is this correct? |
| 1 2 3 | Yes |
| TY_Q04 | According to our Labour Force Survey interview with you, you were employed during the (second or third week) of (reference month) but had a change in employment at some time during the last three months. Is this correct? |
| 1 2 3 | Yes |
| Default: | (Go to TY_Q08) |
| TY_Q05 | According to our Labour Force Survey interview with you, you were working during the (second or third week) of (reference month). Is this correct? |
| 1 2 | Yes No, not working that week DK, RF |
| Default: | (Go to TY_D08) |
| TY_D06 | If MOTHER=1 then set TYPE=5 and WRK=1. |
| TY_C06 | If MOTHER=1 (Go to TY_END) Else (Go to TY_Q06) |
| TY_Q06 | How many paid hours did you work in total during the (second or third week) of (reference month)? |
| | (2 spaces) [Min: 0 Max: 95] |
| | DK, RF(Go to TY_Q06A) |

| TY_C06A | If TY_Q06 is less than 30 |
|----------|---|
| TY_Q06A | Would you say that you worked less than 30 hours or more? |
| 1 2 | Less than 30 hours |
| TY_Q07 | Did you have a week without work (or pay) between (reference month - 2 months) and the end of the (second or third week) of (reference month)? |
| 1 2 | Yes No(Go to TY_END) DK, RF |
| Default: | (Go to TY_D08) |
| TY_Q08 | Did you actually look for work or want to work during the (second or third week) of (reference month)? |
| 1 2 | Yes No DK, RF |
| TY_D08 | If (TY_Q01=3, TY_Q01=DK or TY_Q01=RF) or (TY_Q05=2, TY_Q05=DK or TY_Q05=RF) or (TY_Q08=2, TY_Q08=DK or TY_Q08=RF) then set TYPE=3 and WRK=2, Else if TY_Q03=3 or TY_Q08=1 then set TYPE=1 and WRK=2, Else if TY_Q07=1, TY_Q07=DK or TY_Q07=RF then set TYPE=4 and WRK=1, Else if TY_Q06 is less than 30 or TY_Q06A=1 then set TYPE=2 and WRK=1, Else set TYPE=S_TYPE and WRK=S_WRK. |
| TY_END | End of Confirm Type module |
| Note: | (If TY_Q04=2 then set OutType=2) or (if TY_Q04=1 and TY_Q07=2 then set OutType=2) or ((if TY_Q01=2 or TY_Q03=2) and (TY_Q07=2 then set OutType=5)) or (if TY_Q02=3 and TY_Q07=2 then set OutType=3) and goto OS_R01. |
| Section: | Last Work (LW) |
| LW_D01 | Set LWY=S_LWY and LWM=S_LWM. |
| LW_C01A | If WRK=1 (Go to LW_D08) Else if LWY="1901" (Go to LW_Q01) Else if WRK=2 and S_WRK=1 (Go to LW_Q03) Else (Go to LW_Q02) |

| LW_Q01 | In that interview in (reference month) you indicated that you never worked. Is this correct? |
|--|--|
| 1 2 | Yes, never worked (Go to LW_D08) No, worked before (Go to LW_Q03) DK, RF (Go to LW_D08) |
| LW_Q02 | In that interview in (reference month) you indicated that you last worked in (last worked month), (last worked year). Is this correct? |
| 1 2 3 | Yes, the date is good |
| LW_Q03 | When did you last work? |
| 1 2 | Select to enter date Never worked |
| LW_Q03Y | In what year did you last work? |
| | (4 spaces) [Min: 1927 Max: 2005] |
| | DK, RF(Go to LW_Q04) |
| LW_Q03M | In what month did you last work? |
| 01 02 03 04 05 06 07 08 09 10 11 | January February March April May June July August September October November December DK, RF |
| LW_C04 | If response in LW_Q03Y and LW_Q03M |
| LW_Q04 | Was it within the last year? |
| 1 2 | Yes(Go to LW_D08) No DK, RF |

| | - |
|-----------|---|
| LW_Q05 | Was it within the last two years? |
| 1 2 | Yes No DK, RF |
| Default: | (Go to LW_D08) |
| LW_D06 | Set LWY=LW_Q03Y and LWM=LW_Q03M. |
| LW_D07 | Set MONTHS=(SRMTH, SRYR) minus (LWM, LWY). |
| LW_D08 | If WRK=1 set LWP=0, LWY=blank and LWM=blank, Else if LW_Q01=1 or LW_Q01=blank or LW_Q02=3 or LW_Q03=2 set LWP=4, LWY=1901 and LWM=01, Else if LW_Q04=1 or LW_Q03Y=SRYR set LWP=1, Else if LW_Q05=1 set LWP=2, Else if LW_Q05=2 or LW_Q05=blank set LWP=3, Else if MONTHS < 12 set LWP=1, Else if 11 < MONTHS < 24 set LWP= 2, Else set LWP=3. |
| Note: | These conditions are mutually exclusive: when one is met, skip to LW_D09. |
| LW_D09 | If LW_Q03=blank or LW_Q03Y=blank or LW_Q03M=blank set LWY=1900 and LWM=01. |
| LW_END | End of Last Work module |
| Note: | If MOTHER=0 and TYPE=3 and (LWP=3 or LWP=4), then Set OutType=4 and go to OS_R01, Else go to JB_C01. |
| Section: | Out of Scope (OS) |
| OS_R01 | Thank you for your cooperation and excuse us for disturbing you. |
| Section: | Job Information (JB) |
| JB_D01A | Create text variable called LWDATE using LWM and LWY set in LW module. If LWM=03 and LWY=2005 then LWDATE should read 'in March 2005'. |
| JB_C01 | If LWP=4 (Go to WY_C01) If S_ERNAME=not blank (Go to JB_Q01) Else (Go to JB_Q02) |
| JB_Q01 | At our last interview you indicated that you worked or last worked for (employer name). Is this correct? |
| 1 2 | Yes(Go to JB_C03A) No, did not work for that employer DK, RF |
| Coverage: | Respondents who ever worked and who reported their employer's name from the Labour Force Survey (LFS) |

| JB_Q02 | For whom were you working for at that time? | |
|-------------------|---|--------------------|
| 1 | Enter the employer's name | |
| 2 | Own business | (Go to JB_D03) |
| 3 | Family worker | (Go to JB_D03) |
| | DK, RF | |
| Coverage: | Respondents who ever worked and who did not report their employer's name from Survey (LFS) | m the Labour Force |
| JB_Q02N | For whom were you working at that time? | |
| | (50 spaces) DK, RF | |
| Coverage: | Respondents who ever worked and who did not report their employer's name from Survey (LFS) (excluding respondents who had their own business, are a family we reported "don't know" or "refused" in JB_Q02) | |
| JB_D03 | If JB_Q01=1 set COW=S_COW and ERNAME=S_ERNAME, Els set COW=1, ERNAME=JB_Q02N, Else if JB_Q02=2 set COW=2 ERNAME='your own business', Else if JB_Q02=3 set COW=3, E family business', Else if JB_Q02=blank set COW=1 and ERNAM recent employer'. | 2, RNAME='the |
| JB_C03A | If WRK=1 and COW > 1 | |
| JB_Q03 | Did you also work for pay at another job or business in (refe | rence month)? |
| 4 | Yes | |
| 1 | | (Co to ID C10) |
| 2 | No | |
| | DK, RF | (G0 t0 JB_C 10) |
| Coverage: | Respondents who worked in reference week as a non paid employee | |
| JB_Q04 | What is the name of this employer you also worked for? | |
| | INTERVIEWER: We are looking for a job which is paid by an empart a self-employed job | ployer only, not |
| | (50 spaces) DK, RF | |
| | Respondents who worked in reference week as a non paid employee and also w | orked for pay at |
| Coverage: | another job or business | |
| Ü | • | (Go to WY CO1) |
| Coverage: JB_C10 | If COW > 1Else if ERNAME=S_ERNAME | (Go to WY_C01) |

| JB_Q10 | What kind of business, industry or service (is/was) this? |
|--|--|
| | (30 spaces) DK, RF |
| Coverage: | Only paid employees who provided an employer name not available from the LFS continue with JB_Q10 to JB_Q12. This information is available from the LFS for respondents who confirmed the employer name carried from the LFS |
| JB_Q11 | What kind of work (are/were) you doing? |
| | (30 spaces) DK, RF |
| Coverage: | Only paid employees who provided an employer name not available from the LFS continue with JB_Q10 to JB_Q12. This information is available from the LFS for respondents who confirmed the employer name carried from the LFS |
| JB_Q12M | When did you start working for (employer name)? |
| 01 02 03 04 05 06 07 08 09 10 11 12 | January February March April May June July August September October November December DK, RF |
| JB_Q12Y | employer name carried from the LFS When did you start working for (employer name)? |
| | (4 spaces) [Min: 1927 Max: 2005] DK, RF |
| Coverage: | Only paid employees who provided an employer name not available from the LFS continue with JB_Q10 to JB_Q12. This information is available from the LFS for respondents who confirmed the employer name carried from the LFS |
| JB_C13 | If LFS=1 and ERNAME=S_ERNAME |

| JB_Q13 | In that job with (employer name), (are/were) you a union member? |
|--|--|
| 1 2 | Yes(Go to JB_Q15) No DK, RF |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employees |
| JB_Q14 | Are/were you covered by a union contract or collective agreement? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employee, and were not a union member |
| JB_Q15 | What is/was your usual (gross) rate of pay, before deductions? Do not include overtime, tips, commissions or bonuses |
| 1 2 3 | Enter salary \$ Minimum wage |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employees |
| JB_Q15A | What is/was your usual (gross) rate of pay, before deductions? Do not include overtime, tips, commissions or bonuses |
| | (9 spaces) [Min: .01 Max: 900000.00] DK, RF |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employees, and who were paid a salary other than minimum wage |
| JB_Q15B | Per (unit of measurement) |
| 01 02 03 04 05 06 07 | Hour Day Week Biweekly Twice per month Month Year DK, RF |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employees, and who were paid a salary other than minimum wage |

| JB_Q16 | Do/did you usually receive commissions, tips, or bonuses? |
|--|--|
| 1 2 | Yes No |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employees, and who did not declare in JB_Q15 that they were only paid commissions |
| JB_Q17A | What was your usual (gross) commissions/tips/bonus pay before deductions? |
| | INTERVIEWER: Enter amount in dollars only. If response is \$90,000 or more, enter 90000 |
| | (8 spaces) [Min: .01 Max: 90000.00] |
| | DK, RF(Go to JB_Q18) |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employees, and who received commissions |
| JB_Q17B | Per (unit of measurement) |
| 01 02 03 04 05 06 07 | Hour Day Week Biweekly Twice per month Month Year DK, RF |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employees, and who received commissions |
| JB_Q18 | On average, how many paid hours did you usually work per week in that job with (employer name)? (excluding overtime) |
| | <u>INTERVIEWER</u> : If the number of hours varies from week to week, give an average over four weeks |
| | (3 spaces) [Min: 1 Max: 99] DK, RF |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employees |

| JB_D18 | If JB_Q15=3 then set SALRYHR=0 Else if JB_Q15=2 then set SALRYHR=SALMIN, Else if JB_15B=1 then set SALRYHR =JB_Q15A, Else if JB_15B=2 then set SALRYHR=JB_Q15A/6, Else if JB_Q18 is blank or zero '0' then set SALRYHR to blank, Else if JB_15B=3 then set SALRYHR=JB_Q15A/JB_Q18), Else if JB_15B=4 then set SALRYHR=JB_Q15A/(2.16 * JB_Q15A/(2 * JB_Q18), Else if JB_15B=5 then set SALRYHR=JB_Q15A/(4.33 * JB_Q18), Else if JB_15B=7 then set SALRYHR=JB_Q15A/(52 * JB_Q18), Else set SALRYHR to 'blank'. |
|-----------------------|--|
| Note: | The variable SALRYHR will be used in the Job Search module (JS). |
| JB_Q19 | Is/was your job with (employer name) permanent? |
| | <u>INTERVIEWER</u> : Permanent means that at the time of hiring, the employer gave no indication that the job would only last for a fixed duration, until a given date or until the end of a project |
| 1 | Yes, permanent(Go to JB_Q21) |
| 2 | No, not permanent DK, RF(Go to JB_Q21) |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employees |
| JB_Q20 | In what way is/was your job not permanent. Was it? |
| 1 2 3 4 5 | Seasonal Temporary, term or contract job (non-seasonal) Casual Work done through a temporary help agency Other(Go to JB_S20) DK, RF |
| Default: | (Go to JB_Q21) |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employees, and who were not permanent employees |
| JB_S20 | (In what way is/was your job not permanent. Was it?) |
| | (80 spaces) |
| JB_Q21 | Were Employment Insurance premiums deducted from your wages or salary at that job with (employer name)? |
| | <u>INTERVIEWER</u> : Enter 'Yes' if there were deductions at the beginning of the calendar year, but are no longer deducted because the maximum deduction for the year has been reached |
| 1 | Yes(Go to WY_C01) |
| 2 | No DK, RF(Go to WY_C01) |
| Coverage: | Respondents who did not have the same employer as the LFS but were working as paid employees, and who were not permanent employees |

| JB_Q22 | Was this because? |
|--|---|
| 01 02 03 04 05 06 07 | your weekly hours or earnings are/were too low to be insured by EI you are/were self employed or working on a contract you are/were working for a family business your job is/was part of a government job creation program you work/worked outside Canada you are/were paid in cash other(Go to JB_S22) DK, RF |
| Default: | (Go to JB_D23) |
| Note: | Class of Worker (COW) value is reset if JB_Q22=2 (self-employed) or JB_Q22=3 (family worker). |
| Coverage: | Paid employees at last or current job who did not report having Employment Insurance premiums deducted from their wages or salary |
| JB_S22 | (Was this because?) |
| | (80 spaces) |
| JB_D23 | If JB_Q22=2 set COW=2, if JB_Q22=3 set COW=3. |
| Section: | Work in Last Year (WY) |
| WY_C01 | If LWP=4(Go to SW_C01A) |
| WY_D01B | Create variable called CHILB. CHILB=BMTH and BYEAR from MO section. For instance, if BMTH=3 and BYEAR=2005, then CHILB should read 'March 2005'. Create variable called CHILB11. CHILB11=CHILB less 11 months. For instance, if BMTH=3 and BYEAR=2005, then CHILB11 (CHILB - 11 months) should read 'April 2004'. |
| WY_Q01 | Between (reference month - 11 months) and (reference month), how many weeks did you work (including leave with pay)? |
| | (2 spaces) [Min: 0 Max: 52] DK, RF |
| Coverage: | Respondents who ever worked |
| WY_C02A | If MOTHER=1 (Go to WY_C02B) Else if WY_Q01=0 (Go to SW_C01A) Else (Go to WY_Q04) |
| WY_C02B | If WY_Q01=0 (Go to WY_Q03) Else if WY_Q01 > 40 (Go to WY_Q04) Else (Go to WY_Q02) |

| WY_Q02 | Did you work at a job or business or were you absent from a job during the 3 months prior to the birth/adoption of your child? |
|-----------|--|
| 1 | Yes, working or absent from work(Go to WY_Q04) |
| 2 | No, did not have a job or business DK, RF(Go to SW_C01A) |
| Coverage: | Mothers who have worked between 1 to 40 weeks during the year prior to the birth or adoption of their child |
| WY_Q03 | Why did you not work in the (year/3 months) prior to the birth/adoption of your child? |
| 1 | Took care of other children |
| 2 | Preferred to stay at home |
| 3 | Went to school or took training |
| 4 5 | Could not find suitable work Other(Go to WY S03) |
| 3 | DK, RF |
| Default: | (Go to WY_C04) |
| Coverage: | Mothers who did not have a job 3 months prior to the birth or adoption of their child (includes zero weeks and $WY_Q02 = 2$) |
| WY_S03 | (Why did you not work in the (year/3 months) prior to the birth/adoption of your child?) |
| | (80 spaces) |
| WY_C04 | If WY_Q01=0(Go to SW_C01A) Else(Go to WY_Q04) |
| WY_Q04 | Of the weeks you worked during the year prior to the birth/adoption of your child between (reference month - 11 months) and (reference month), did you work? |
| | INTERVIEWER: Full-time work is to be interpreted as 30 hours or more per week. If working at two jobs in a week, add hours from both jobs |
| 1 | All weeks full-time |
| 2 | Most weeks full-time and some weeks part-time (or half and half) |
| 3 | Most weeks part-time and some weeks full-time |
| 4 | All weeks part-time |
| Coverage: | Respondents who had at least one week of paid employment in the last year |
| WY_Q05 | During the weeks that you worked full-time, how many hours on average did you work per week? |
| | (3 spaces) [Min: 30 Max: 168] DK, RF |
| Coverage: | Respondents who worked at least some weeks full-time prior to the birth/adoption of their child |

| WY_C06 | If WY_Q04=1(Go to SW_C01A) | |
|--|--|--|
| WY_Q06 | During the weeks that you worked part-time, how many hours on average did you work per week? | |
| | (2 spaces) [Min: 1 Max: 30] DK, RF | |
| Coverage: | Respondents who worked at least some weeks part-time prior to the birth/adoption of their child | |
| Section: | Stopped Working (SW) | |
| SW_C01A | If LWP=0 or LWP > 2 or COW > 1(Go to BK_C01) | |
| SW_R01 | According to our information, you stopped working or had an interruption of work with (employer name) (last work date). | |
| SW_C01B | If RSWK=11 or RSWK=99 | |
| SW_Q01 | What was the main reason you stopped working at that job? | |
| 01 02 03 04 05 06 07 08 09 10 11 | Own illness or disability Caring for own children Caring for elder relative Pregnancy Other personal or family responsibilities Going to school Lost job, laid off or job ended Business sold or closed down Changed residence Dissatisfied with job Retired Other | |
| Default: | (Go to SW_D02) | |
| Coverage: | Paid employees who have worked in the past two years but did not work during reference week and who retired or for whom the information was not available from the LFS | |
| SW_S01 | (What was the main reason you stopped working at that job?) | |
| | (80 spaces) | |
| SW_D02 | Set RSWK=SW_Q01. | |
| SW_C02 | If SW_Q01=11 (Go to SW_Q02) Else if SW_Q01=7 (Go to SW_Q03) Else (Go to SW_C04) | |

| SW_Q02 | Was your retirement from that job voluntary or involuntary? |
|--|---|
| 1 2 | Voluntary Involuntary DK, RF |
| Default: | (Go to SW_C04) |
| Coverage: | Paid employees who have worked in the past two years but did not work during reference week who reported that they retired from their last job (SW_Q01=11) |
| SW_Q03 | What was the specific reason for your job loss? |
| 01 02 03 04 05 06 07 | End of seasonal job End of temporary, term or contract job (non- seasonal) Casual job, no work available Company moved Company went out of business Business conditions (not enough work, drop in orders, retooling, etc.) Dismissal by employer (i.e. fired) Other |
| Default: | (Go to SW_Q04) |
| Coverage: | Paid employees who have worked in the past two years but did not work during reference week and who reported that they lost their job, were laid off or job ended |
| SW_S03 | (What was the specific reason for your job loss?) |
| | (80 spaces) |
| SW_C04 | If SW_Q02=2 or (RSWK=7 or RSWK=8 or RSWK=10 or RSWK=12)(Go to SW_Q04 Else(Go to SW_Q06) |
| SW_Q04 | Did you receive any advance formal notice from your employer that your work would stop, for example receive a letter, attend meetings, or receive announcements or did you know in advance that you would stop working at that job? |
| 1 2 | Yes No |
| Coverage: | Paid employees who either lost their job, were laid off, their job ended or retired involuntarily or left their job because they were dissatisfied |

| SW_Q05 | How long in advance did you get that notice or how long in advance did you know that you would leave or lose that job? |
|-------------|---|
| 1 2 | To enter how long in advance Knew it from the beginning(Go to SW_Q06) DK, RF(Go to SW_Q06) |
| Coverage: | Paid employees who retired involuntarily, who lost their job, were laid off, their job ended, who reported that their business closed, who left because they were dissatisfied with their job and received an advanced notice or knew in advance that they would stop working |
| SW_Q05A | Number of days, weeks or months |
| | INTERVIEWER: If found out the same day, the answer is 0 |
| | (4 spaces) [Min: 0 Max: 365] DK, RF |
| Coverage: | Paid employees who retired involuntarily, who lost their job, were laid off, their job ended, who reported that their business closed, who left because they were dissatisfied with their job and received an advanced notice or knew when they would stop working |
| SW_Q05B | Unit of time |
| 1 2 3 | Days Weeks Months DK, RF |
| Coverage: | Paid employees who retired involuntarily, who lost their job, were laid off, their job ended, who reported that their business closed, who left because they were dissatisfied with their job and received an advanced notice or knew when they would stop working |
| SW_Q06 | Did you receive a record of employment (ROE) for Employment Insurance purposes when you stopped working at your job for (employer name)? |
| 1 2 | Yes No DK, RF |
| Coverage: | Paid employees who have worked in the past two years |
| SW_C07 | If (RSWK=7 or RSWK=8 or RSWK=12) or SW_Q02=2(Go to SW_Q07) Else(Go to BK_C01) |

| SW_Q07 | When you stopped working for (employer name) (last work date), did you receive any of the following payments from your employer? |
|--|--|
| 01 02 03 04 05 06 07 | Severance pay or pay instead of vacation A pension pay-out Early retirement package Wages instead of notice (lump sum amount) Sick leave credits/payment for unused sick benefits Any other payments |
| Default: | (Go to SW_C08) |
| Coverage: | Paid employees who lost their job, were laid off, their job ended, their business closed or they retired involuntarily |
| SW_S07 | (When you stopped working for (employer name) (last work date), did you receive any of the following payments from your employer?) (80 spaces) |
| SW_C08 | If RSWK=7 or RSWK=8 |
| CW OOG | Did you expect to return to your job with (employer name) at that time? |
| SW_Q08 | blu you expect to return to your job with (employer name) at that time? |
| 1 2 | Yes No DK, RF |
| 1 | Yes No |
| 1 2 | Yes No DK, RF |
| 1 2 Coverage: | Yes No DK, RF Paid employees who lost their job, were laid off, their job ended or their business closed |
| 1 2 Coverage: Section: | Yes No DK, RF Paid employees who lost their job, were laid off, their job ended or their business closed Break from Working Since Birth/Adoption (BK) If TYPE=5 |
| 1 2 Coverage: Section: BK_C01 | Yes No DK, RF Paid employees who lost their job, were laid off, their job ended or their business closed Break from Working Since Birth/Adoption (BK) If TYPE=5 |
| 1 2 Coverage: Section: BK_C01 BK_Q01 | Yes No DK, RF Paid employees who lost their job, were laid off, their job ended or their business closed Break from Working Since Birth/Adoption (BK) If TYPE=5 |
| 1 2 Coverage: Section: BK_C01 BK_Q01 | Yes No DK, RF Paid employees who lost their job, were laid off, their job ended or their business closed Break from Working Since Birth/Adoption (BK) If TYPE=5 |

| BK_Q02 | Why did you decide not to take time off for the care of your child? | |
|--|---|--|
| 01 02 03 04 05 06 07 08 | Still planning to take time-off Could not afford to give up salary Afraid to lose job Employer would not let me take time off Family or friends took care of child Found acceptable daycare services Preferred to work Type of work allowed her to work and care for the baby Other | |
| Default: | (Go to EI_C01) | |
| Coverage: | Working mothers of a child aged 0 to 12 months who did not take a break from work during their pregnancy or since the birth or adoption of their child | |
| BK_S02 | (Why did you decide not to take time off for the care of your child?) | |
| | (80 spaces) | |
| Default: | (Go to EI_C01) | |
| BK_Q03 | When did this break from working start? | |
| | INTERVIEWER: If there were several breaks, choose the break closest to the birth/adoption of the child | |
| 1 2 | To enter the date Never worked before birth | |
| Coverage: | Working mothers of a child aged 0 to 12 months who took a break from work or were not working before their pregnancy or since the birth or adoption of their child | |
| BK_Q03M | What month did this break from working start? | |
| | (2 spaces) [Min: 1 Max: 12] | |
| | DK, RF(Go to BK_Q04) | |
| Coverage: | Working mothers of a child aged 0 to 12 months who took a break from work during their pregnancy or since the birth or adoption of their child | |
| BK_Q03Y | What year did this break from working start? | |
| | (4 spaces) [Min: 2003 Max: 2006] | |
| | DK, RF(Go to BK_Q04) | |
| Coverage: | Working mothers of a child aged 0 to 12 months who took a break from work during their pregnancy or since the birth or adoption of their child | |

| BK_Q04 | How long was this break from working, in terms of weeks? |
|-----------|--|
| 1 2 | To enter the number of weeks To enter the number of months |
| Coverage: | Working mothers of a child aged 0 to 12 months who took a break from work during their pregnancy or since the birth or adoption of their child |
| BK_Q04A | How long was this break from working, in terms of weeks? |
| | (3 spaces) [Min: 0 Max: 108] DK, RF |
| Default: | (Go to EI_C01) |
| Coverage: | Working mothers of a child aged 0 to 12 months who took a break from work during their pregnancy or since the birth or adoption of their child. Answered in weeks |
| BK_Q04B | How long was this break from working, in terms of months? |
| | (2 spaces) [Min: 0 Max: 24] DK, RF |
| Coverage: | Working mothers of a child aged 0 to 12 months who took a break from work during their pregnancy or since the birth or adoption of their child. Answered in months |
| Section: | Employment Insurance (EI) |
| EI_C01 | If MO_Q02=2 or LWP=4 |
| EI_C01A | If (LWM, LWY > BMTH, BYEAR) or LWP=3 or TYPE=5(Go to EI_Q01) Else(Go to EI_Q02) |
| Note: | Mothers whose last month worked comes after birth month or hasn't worked in last two years or a currently working mother. |
| EI_C01B | If WRK=1 or LWP=3 |
| Note: | Respondents who worked reference week or last worked more than two years ago. |

| EI_Q01 | Have you made any claims for Employment Insurance benefit pregnancy or since the birth of your child? | s during your |
|-----------|--|--------------------------|
| | <u>INTERVIEWER</u> : If received benefits since pregnancy due to a preanswer "Yes" | vious claim, |
| 1 2 | Yes NoDK, RF | |
| Coverage: | Mothers of a child aged 0 to 12 months whose last month worked comes after birth worked in last two years or a currently working mother. Exclude mothers who adopted the company of the co | n month or hasn't ted |
| EI_Q01A | Were any of these claims for maternity and/or parental benefit | ts? |
| 1 2 | Yes No DK, RF | |
| Default: | (Go to EI_Q04) | |
| Coverage: | Mothers of a child aged 0 to 12 months whose last worked month comes after birth worked in last two years or a currently working mother who made a claim for Emplobenefits during pregnancy or since the birth of their child. Exclude mothers who ad | oyment Insurance |
| EI_Q02 | Have you made any claims or applied for Employment Insural stopped working at your job with (employer name) (last worker since you stopped working (last work date)? | |
| | <u>INTERVIEWER</u> : If person received benefits since that time due to claim, answer 'Yes' | a previous |
| 1 2 | Yes | (Go to EI_Q04) |
| 2 | DK, RF | (Go to EI_C04) |
| Coverage: | Respondents who were not working during reference week but have worked at sor two years | ne time in the past |
| EI_C03 | If MOTHER=0 and LWP=1 | , |
| EI_Q03 | Have you made any claims or applied for Employment Insurar (reference month - 11 months) to (reference month)? | nce from |
| 1 2 | Yes NoDK, RF | (Go to EI_C15) |
| Coverage: | Respondents who either worked in the last 12 months or more than two years ago who worked during reference week, except mothers of a child 0 to 12 months | and respondents |
| EI_C04 | If WRK=1 | , |

| EI_Q04 | Have you received Employment Insurance benefits during your pregnancy or since the birth of your child or since you stopped working at your job with (employer name) (last worked date)? |
|-----------|--|
| 1 2 | Yes No |
| Coverage: | Respondents who did not work during reference week and who claimed Employment Insurance benefits since their last employment or in the past 12 months |
| EI_Q05 | Did you receive Employment Insurance benefits for the (second or third week) of (reference month), that is from the (first day of reference week) to the (second or third week) of (reference month) or do you still expect to receive benefits for that week? |
| | INTERVIEWER: If respondent does not know, ask if they have submitted a Card or Biweekly Activity Report to a Canada Employment Centre (CEC, EI office, EIC office) |
| 1 2 | Yes(Go to EI_Q07) No DK, RF |
| Coverage: | Respondents who worked during reference week and claimed Employment Insurance benefits in the past 12 months and respondents who received Employment Insurance benefits since they stopped working or since the birth of their child |
| EI_Q06 | Did you receive Employment Insurance benefits for any other week in (reference month)? |
| 1 | Yes |
| 2 | No |
| Coverage: | Respondents who did not receive Employment Insurance benefits during the reference week |
| EI_Q07 | What type of benefits did you receive that week? |
| 01 | Training |
| 02 | Regular |
| 03 | Maternity (only if female) |
| 04 05 | Parental Sickness |
| 06 | Fishing |
| 07 | Other(Go to EI_S07) DK, RF |
| Default: | (Go to EI_C08) |
| Coverage: | Respondents who received Employment Insurance benefits during reference month |
| EI_S07 | (What type of benefits did you receive that week?) |
| | (80 spaces) |

| EI_C08 | If MOTHER=1 |
|-----------------------|---|
| EI_Q08 | Have you received any other types of Employment Insurance benefits during your pregnancy or since the birth of your child? |
| 1 2 | Yes No |
| Coverage: | Mothers by birth of a child aged 0 to 12 months who received Employment Insurance benefits during reference week or reference month |
| EI_C09 | If MOTHER=1 and (EI_Q06=2 or EI_Q06=blank) |
| EI_Q09 | What type or types of Employment Insurance benefits have you received during your pregnancy or since the birth of your child? |
| 1 2 3 4 5 | Regular Maternity Parental Sickness Other |
| Default: | (Go to EI_Q10) |
| Coverage: | Mothers of a child aged 0 to 12 months who received Employment Insurance benefits during their pregnancy or since the birth of their child, but did not receive Employment Insurance benefits during reference month or did not respond to El_Q06 |
| EI_S09 | (What type or types of Employment Insurance benefits have you received during your pregnancy or since the birth of your child?) |
| | (80 spaces) |
| EI_Q10 | How many weeks of Employment Insurance benefits have you received during your pregnancy or since the birth of your child or since you last applied? |
| | (3 spaces) [Min: 1 Max: 158] DK, RF |
| Coverage: | Respondents who received Employment Insurance benefits in the reference month, or mothers who received benefits since they last worked |
| EI_C11 | If MOTHER=1 or EI_Q05=1 (Go to EI_Q11) Else (Go to EI_Q14) |

| EI_Q11 | What was the amount of Employment Insurance benefits did you receive per week/(for the second or third week) of (reference month)? |
|-----------|--|
| | (3 spaces) [Min: 1 Max: 413] |
| | DK, RF (Go to EI_C13) |
| Coverage: | Respondents who received Employment Insurance benefits during reference week, this also includes mothers who have received Employment Insurance benefits during pregnancy or since birth of their child |
| EI_C12 | If FAMSZ=4 or FAMSZ=5 |
| EI_Q12 | Does this amount include any Employment Insurance family income supplements? |
| 1 2 | Yes No DK, RF |
| Note: | These supplements are given to lower income Employment Insurance beneficiaries with children. |
| Coverage: | Mothers of a child aged 0 to 12 months who received Employment Insurance benefits during their pregnancy or since the birth of their child. Also include respondents who received Employment Insurance benefits during reference week with a child between 1 and 18 years of age living in household |
| EI_C13 | If MOTHER=1 (Go to PB_D01) Else (Go to EI_Q13) |
| EI_Q13 | While you were receiving benefits, were you taking training or courses to which you were referred? |
| | <u>INTERVIEWER</u> : Sometimes people on EI claims are referred to a course or program of instruction that they can follow at the same time that they are receiving EI benefits |
| 1 2 | Yes No DK, RF |
| Default: | (Go to PB_D01) |
| Coverage: | Respondents who received Employment Insurance benefits during reference week |

| EI_Q14 | Why do you think you did not receive Employment Insurance benefits since the birth of your child for the (second or third week) of (reference month)? | |
|--|--|--|
| 01 02 03 04 05 06 07 08 09 | Still expecting benefit payment for that week Had employment that week Claim ran out Did not work enough hours or weeks to qualify Serving a waiting period Payments delayed due to severance or other payments Not available or not looking for work Quit voluntarily (or dismissed) Benefit payments withheld for other reason Other | |
| Default: | (Go to PB_D01) | |
| Note: | Other reasons for not getting Employment Insurance benefits while on claim are: refusing to take a suitable job, failure to send in biweekly activity report, etc. | |
| Coverage: | Respondents who did not receive Employment Insurance benefits during the reference week and mothers who did not receive Employment Insurance benefits during their pregnancy or since the birth of their child | |
| EI_S14 | (Why do you think you did not receive Employment Insurance benefits since the birth of your child or for (second or third week) of (reference month)?)(80 spaces) | |
| Default: | (Go to PB_D01) | |
| EI_C15 | If TYPE=5 and BK_Q01=2(Go to PB_D01) | |
| EI_Q15 | You were not working/you were working part-time/you were without a job or not at work, during the (second or third week) of (reference month) or you were experiencing a change in employment during the last three months and you did not claim or apply for Employment Insurance benefits. Was this because you thought you were not eligible?e) for Employment Insurance benefits in the (second or third week) of (reference month)? | |
| 1 2 | Yes No(Go to EI_Q17) DK, RF | |
| Coverage: | Respondents who did not claim, with the exception of those who never worked and mothers who did not take a break after the birth or adoption of their child | |

| EI_Q16 | What was the main reason you did not claim or apply for Employment Insurance benefits during this period? |
|--|---|
| 01 02 03 04 05 06 07 08 09 | Was working or expecting to return to work Did not want EI (benefits too low, too much trouble) Did not need EI (have other sources of income) Did not know enough about EI Never thought about it Student (incl. too young) Retired (incl. Pension, too old) Did not want to work Receiving other benefits (incl. disability, welfare) Other |
| Default: | (Go to PB_D01) |
| Coverage: | Respondents who did not claim Employment Insurance benefits since their last employment and mothers who did not claim benefits during their pregnancy or since the birth of their child and who think that they would be qualified for Employment Insurance benefits in the second or third week of the reference month |
| EI_S16 | (What was the main reason you did not claim or apply for Employment Insurance benefits during this period?) |
| | (80 spaces) |
| Default: | (Go to PB_D01) |
| EI_Q17 | Why did you think you would not qualify (or not be eligible) for Employment Insurance? |
| 01 02 03 04 05 06 07 08 09 | Working or expect to return to work Not paying El premiums (incl. Self-employed) Not enough hours to qualify Student (incl. too young) Not looking or available to work Received severance package Retired (incl. Pension, too old) Has not worked recently (eg. for 2 years) Quit voluntarily Other |
| Default: | (Go to PB_D01) |
| Coverage: | Respondents who did not claim Employment Insurance benefits since their last employment and mothers who did not claim benefits during their pregnancy or since the birth of their child and who think that they would not be qualified for Employment Insurance benefits in the second or third week of the reference month |
| EI_S17 | (Why did you think you were not eligible (or would not qualify) for Employment Insurance?) |
| | (80 spaces) |

| Section: | Parental Benefits (PB) |
|-----------|---|
| PB_D01 | Create and set variable called NELIGIB. NELIGIB=1 if EI_Q14=4 or EI_Q17=2 or EI_Q17=3 or EI_Q17=8. Create and set variable called PARBEN. PARBEN=1 if EI_Q07=4 or EI_Q09=3 is selected. |
| PB_C01 | If MOTHER=0 (Go to TB_C01) Else if SPPR=0 and (LWP=3 or LWP=4) (Go to TB_C01) Else if SPPR=0 and NELIGIB=1 (Go to TB_C01) Else if SPPR=1 and NELIGIB=1 (Go to PB_Q05) Else if SPPR=0 and PARBEN=1 (Go to TB_C01) Else if SPPR=1 and PARBEN=1 (Go to PB_Q05) Else if SPPR=1 and LWP=4 (Go to PB_Q05) Else (Go to PB_Q01) |
| PB_Q01 | Have you claimed Employment Insurance parental benefits since the birth/adoption of your child? |
| 1 2 | Yes No |
| Coverage: | Mothers who have not reported receiving parental benefits in the previous section but who may be eligible |
| PB_Q02 | Have you received parental benefits since the birth/adoption of your child? |
| 1 2 | Yes No DK, RF |
| Default: | (Go to PB_C05) |
| Coverage: | Mothers who have reported not receiving parental benefits in the previous section and have declared in PB_Q01 that they have claimed parental benefits since the birth or adoption of their child |
| PB_C03 | If CHILDAGE > 10(Go to PB_Q04) |
| PB_Q03 | Do you intend to claim or expect to receive Employment Insurance parental benefits before your child turns one year old? |
| 1 2 | Yes(Go to PB_C05) |
| - | DK, RF(Go to PB_C05) |
| Coverage: | Mothers who have reported not receiving parental benefits in the previous section but who may be eligible and whose child is 10 months old or less and did not declare in PB_Q01 that they claimed parental benefits |

| PB_Q04 | What is the main reason that you did not apply or are not applying for Employment Insurance parental benefits? |
|--|---|
| 01 02 03 04 05 06 07 08 09 | Work was not insurable/not paying EI premiums (include self-employed) Did not work enough hours or weeks to qualify Will not take time off work Receiving pay from work Cannot afford to live on EI Did not need EI Don't know about EI Spouse will claim (or receives parental benefits) Other |
| Default: | (Go to PB_C05) |
| Coverage: | Mothers who may be eligible for parental benefits but who do not intend to claim any parental benefits and their child was more than 10 months old |
| PB_S04 | (What is the main reason that you did not apply or are not applying for Employment Insurance parental benefits?) |
| | (80 spaces) |
| PB_C05 | SPPR = 1 (Go to PB_Q05) Else (Go to TB_C01) |
| PB_Q05 | Has your spouse claimed parental benefits since the birth/adoption of your child? |
| 1 2 3 | Yes, spouse claimed No, spouse has not claimed |
| Coverage: | Mothers with spouse present |
| PB_Q06 | Has your spouse received parental benefits yet? |
| 1 2 | Yes No DK, RF |
| Default: | (Go to PB_C09) |
| Coverage: | Mothers whose spouse claimed parental benefits |
| PB_C07 | If CHILDAGE > 10 |

| Does your spouse intend to claim or expect to receive parental benefits? |
|--|
| Yes(Go to PB_C09) |
| No DK, RF(Go to TB_C01) |
| Mothers whose spouse did not claim parental benefits and whose child is 10 months old or less |
| What is the main reason that your spouse is not applying for Employment Insurance parental benefits? |
| Spouse is not eligible for EI (not working, not paying premiums, self-employed) Easier for mother to take time off work (include spouse is working) Money related reasons Mother wants to stay home (include by choice, more practical, nursing) Spouse does not want to stay home |
| Did not know that he could claim EI Other(Go to PB_S08) DK, RF |
| (Go to TB_C01) |
| Mothers whose spouse has not claimed and does not intend to claim parental benefits and their child was more than 10 months old |
| (What is the main reason that your spouse is not applying for Employment Insurance parental benefits?) |
| (80 spaces) |
| If (PB_Q04 is greater than 2 or blank) and (PB_Q05 = 1 or PB_Q07 = 1)(Go to PB_Q Else if (PARBEN = 1 or PB_Q01 = 1 or PB_Q03 = 1) and (PB_Q05 = 1 or PB_Q07 = 1)(Go to PB_Q11) Else(Go to TB_C01) |
| Why has your spouse claimed or will your spouse claim instead of you? |
| Only one who qualifies for benefits Can take time off work easier Financially more advantageous Want to stay home with the child Other |
| , |
| (Go to TB_C01) |
| |
| (Go to TB_C01) Mothers who were eligible for parental benefits but did not claim and whose spouse claimed or |
| (Go to TB_C01) Mothers who were eligible for parental benefits but did not claim and whose spouse claimed or intends to claim parental benefits |
| |

| PB_Q11 | Why did/will both you and your spouse claim parental benefits? |
|------------------|--|
| 1 2 3 4 | Both wanted to take some time off Needed both parents at home To share the child care responsibilities Other(Go to PB_S11) DK, RF |
| Default: | (Go to PB_D12) |
| Coverage: | Mothers and spouse both claimed or intends to claim parental benefits |
| PB_S11 | (Why did/will both you and your spouse claim parental benefits?) |
| | (80 spaces) |
| Section: | Total Benefits (TB) |
| TB_C01 | If PB_Q05=1 or PB_Q07=1(Go to TB_D01) Else(Go to AP_C01) |
| TB_D01 | If EI_Q07=5 (sickness) or EI_Q09=4 (sickness) is selected, create and set MaxWeeks=64, else if EI_Q10 is blank set MaxWeeks=34, else set MaxWeeks=49, else go to TB_Q01. |
| TB_Q01 | How many weeks of parental benefits does your spouse intend to claim in total? |
| | (2 spaces) [Min: 0 Max: 35] DK, RF |
| Coverage: | Mothers whose spouse claimed or intends to claim parental benefits |
| TB_C02 | If EI_Q10=response and PB_Q06=1 |
| Note: | Response means, the question has a value other than "Don't know" or "Refused". |
| TB_Q02A | Has your spouse collected parental benefits at the same time as you? |
| 1 2 | Yes(Go to TB_C03A) |
| ۷ | DK, RF(Go to TB_C03A) |
| Coverage: | Mothers who received Employment Insurance and whose spouse received parental benefits |

| TB_Q02B | Does your spouse intend to collect parental benefits at the same time as you? |
|------------------|--|
| 1 2 | Yes No DK, RF |
| Coverage: | Mothers who received Employment Insurance with a spouse who expects to receive parental benefits |
| TB_C03A | If TB_Q01="RF" (Go to AP_C01) Else if TB_Q01="DK" (Go to TB_Q03) Else (Go to TB_C03B) |
| TB_C03B | If EI_Q10=response and EI_Q10 > MaxWeeks |
| TB_Q03 | (Do your spouse and yourself/does your spouse) intend to collect the total number of weeks of parental/maternity and parental benefits available? |
| 1 2 3 4 | Yes (Go to TB_C04A) Not sure (Go to TB_Q04) Benefits have expired (Go to TB_Q04) RF (Go to TB_Q04) |
| Default: | (Go to AP_C01) |
| Coverage: | Mothers who have spouse that claimed or intends to claim parental benefits and who have not already taken all weeks available |
| TB_C04A | If TB_Q03=2(Go to TB_Q04) |
| TB_Q04 | What is the main reason that (your spouse and yourself do not know if you will/your spouse does not know if he will) take the maximum number of weeks of maternity and parental/paternity leave available? |
| 1 2 3 4 | Financial reasons (incl. need the money) Work/Employer related reasons Prefer to work Other |
| Default: | (Go to AP_C01) |
| Coverage: | Mothers who are sharing the parental benefits with their spouse but who jointly do not intend to take the maximum numbers of weeks available |

| TB_S04 | (What is the main reason that (your spouse and yourself do not know if you will/your spouse does not know if he will) take the maximum number of weeks of maternity and parental/paternity leave available?) |
|------------------|--|
| | (80 spaces) |
| Section: | Additional Payments (AP) |
| AP_C01 | If (BK_Q01=1 or BK_Q01=3) or (MOTHER=1 and TYPE < 5 and LWP < 3)(Go to AP_Q Else(Go to IN_R01) |
| AP_Q01 | Did you receive employer payments or private insurance payments or other benefits for the weeks you took off work during your pregnancy or to take care of your child? |
| | INTERVIEWER: If these payments are about to start, answer "Yes" |
| 1 2 | Yes No(Go to IN_R01) DK, RF(Go to IN_R01) |
| Coverage: | Mothers who are working or who have worked in the past two years, with a period not at work since pregnancy or adoption of their child |
| AP_Q02 | What was the source of these payments or benefits? |
| 1 2 3 4 | Employer Group insurance Worker's compensation Other(Go to AP_S02) DK, RF |
| Default: | (Go to AP_C03) |
| Coverage: | Mothers who are working or who have worked in the past two years, with a period not at work since pregnancy or adoption who received additional payments since the birth or adoption of their child |
| AP_S02 | (What was the source of these payments or benefits?) |
| | (80 spaces) |
| AP_C03 | If (MOTHER=1 and EI_Q04=1) or PB_Q02=1(Go to AP_Q03) Else(Go to AP_Q04A) |

| AP_Q03 | Were any of these payments paid to complement Employment Insurance benefits, during the weeks parental benefits were paid? |
|-------------|--|
| 1 2 | Yes No DK, RF |
| Note: | Sometimes referred to as top-up payments, these are amounts which, when added to Employment Insurance benefits, bring payments up to a certain percentage of the previous earnings. |
| Coverage: | Mothers who are working or who have worked in the past two years, with a period not at work since pregnancy or adoption who received Employment Insurance or parental benefits and additional payments from their employers or other sources |
| AP_Q04A | How much were these payments? |
| | (4 spaces) [Min: 0 Max: 9000] |
| | DK, RF(Go to AP_Q05) |
| Coverage: | Mothers who are working or who have worked in the past two years, with a period not at work since pregnancy or adoption who received additional payments |
| AP_Q04B | Per (unit of measurement) |
| 1 2 3 | Week Every two weeks Month DK, RF |
| Coverage: | Mothers who are working or who have worked in the past two years, with a period not at work since pregnancy or adoption who received additional payments |
| AP_Q05 | For how many weeks did you receive these payments since your pregnancy/adoption? |
| | (2 spaces) [Min: 0 Max: 52] DK, RF |
| Coverage: | Mothers who are working or who have worked in the past two years, with a period not at work since pregnancy or adoption who received additional payments |
| Section: | Income and Hardship (IN) |
| IN_R01 | The next set of questions relate to income and expenses. |
| IN_C01 | If RELHD=3 and RAGE < 30(Go to IN_Q01) Else(Go to IN_C02) |

| IN_Q01 | Do you rely on your parents for most of your day-to-day financial needs, for things like housing and food? |
|-----------|---|
| 1 2 | Yes(Go to JS_C01) No DK, RF |
| Coverage: | All respondents who are sons and daughters aged less then 30 years |
| IN_C02 | If WRK=1 and COW=1(Go to IN_Q03A) Else(Go to IN_Q02) |
| IN_Q02 | Did you receive any wages or salary from employment in (reference month)? |
| 1 2 | Yes No DK, RF |
| Note: | The purpose of these questions is to determine the sources of livelihood people have. Therefore, foreign employment should also be counted. Include earnings received during sickness or maternity leave. |
| Coverage: | All respondents who were not paid employees and were not working during the reference week, except sons and daughters who rely on their parents |
| IN_Q03A | Did you receive income or funds from self-employment in (reference month)? |
| 1 2 | Yes No DK, RF |
| Coverage: | All respondents, except sons and daughters aged less than 30 who rely on their parents |
| IN_Q03B | Did you receive income or funds from alimony, student loans, scholarships in (reference month)? |
| 1 2 | Yes No DK, RF |
| Coverage: | All respondents, except sons and daughters aged less than 30 who rely on their parents |
| IN_C03C | If RELHD=3 and RAGE < 30 |

| IN_Q03C | Did you receive income or funds from Child Tax benefit or Child Benefit supplement (federal or provincial) in (reference month)? |
|-------------|--|
| | <u>INTERVIEWER</u> : The monthly child tax benefit is sometimes referred to as "family allowances" or "baby bonus" |
| 1 2 | Yes No DK, RF |
| Coverage: | All respondents in households with children less than 18 years old except sons and daughters aged less than 30 who rely on their parents |
| IN_Q03D | Did you receive income or funds from withdrawals from a Registered Retirement Savings Plan (RRSP, RRIF) in (reference month)? |
| 1 2 3 | Yes No Had no retirement savings plans DK, RF |
| Coverage: | All respondents, except sons and daughters aged less than 30 who rely on their parents |
| IN_Q03E | Did you receive income or funds from Worker's Compensation benefits (or disability pensions) in (reference month)? |
| 1 2 | Yes No DK, RF |
| Coverage: | All respondents, except sons and daughters aged less than 30 who rely on their parents |
| IN_C03F | If RAGE > 49 |
| IN_Q03F | Did you receive income or funds from Employer pensions (or survivors' pensions) in (reference month)? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents aged 50 years or older |
| IN_C03G | If RAGE > 59 |

| IN_Q03G | Did you receive income or funds from "Canada Pension Plan/Quebec Pension Plan" or Old Age Security benefits in (reference month)? |
|-------------|---|
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents aged 60 years or older |
| IN_C04 | If SPPR=1 and (MULTF=blank or MULTINC=1) (Go to IN_Q04) If SPPR=0 and (MULTF=blank or MULTINC=1) (Go to IN_C06) Else (Go to IN_Q11) |
| IN_Q04 | Has your spouse received income from employment in (reference month)? |
| | INTERVIEWER: Include self-employment earnings and wages or salary from paid employment |
| 1 2 3 | Yes, from his/her full-time job Yes, from his/her part-time job No DK, RF |
| Note: | This information is only available for one household member in multiple respondents' households. |
| Coverage: | Respondents with spouse, except sons and daughters who rely on their parents |
| IN_D05 | If IN_Q04=4 set SPPR=0. |
| IN_C05 | If RAGE > 49 and SPPR=1 (Go to IN_Q05) Else (Go to IN_C06) |
| IN_Q05 | Did your spouse receive income from a pension? |
| 1 2 | Yes No DK, RF |
| Default: | (Go to IN_Q06) |
| Note: | This information is only available for one household member in multiple respondents' households. |
| Coverage: | Respondent with a spouse, who is 50 years or older present in the household |
| IN_C06 | If FAMSZ > 1 |

| IN_Q06 | Did another member of your household receive Employment Insurance benefits? |
|-----------|---|
| | INTERVIEWER: When we mention 'household' in these questions, we mean 'economic family', a group of persons living together in one dwelling and joined by relationships of blood, marriage, common law relationships or adoption |
| 1 2 | Yes No DK, RF |
| Note: | This information is only available for one household member in multiple respondents' households. |
| Coverage: | All respondents in a household with more than one person, except sons and daughters aged less than 30 who rely on their parents |
| IN_Q07 | Have you or any members of your household received social assistance payments in (reference month)? |
| 1 2 | Yes(Go to IN_Q08) No DK, RF |
| Default: | (Go to IN_Q10) |
| Coverage: | All respondents, except sons and daughters aged less than 30 |
| IN_Q08 | What was the amount you or your household received in social assistance payments? |
| | (7 spaces) [Min: 10.00 Max: 5000.00] DK, RF |
| Coverage: | Respondents who were social assistance recipients in reference month, except sons and daughters aged less than 30 who rely on their parents |
| IN_Q09 | For how many months have you or your household been receiving social assistance payments? |
| | (3 spaces) [Min: 0 Max: 720] DK, RF |
| Coverage: | Respondents who were social assistance recipients in reference month, except sons and daughters aged less than 30 who rely on their parents |
| IN_Q10 | Did you or your family get some financial assistance from friends or relatives? |
| 1 2 | Yes No DK, RF |
| Coverage: | All respondents, except sons and daughters aged less than 30 who rely on their parents |

| IN_Q11 | Did you do any odd jobs, for example for friends or relatives, to supplement your income? |
|-------------|---|
| 1 2 | Yes No DK, RF |
| Coverage: | All respondents, except sons and daughters aged less than 30 who rely on their parents |
| IN_C12 | If TYPE=4 or AP_Q03=1 |
| IN_Q12 | Did you or someone in your household have to use up some of your savings or cash in your investments to meet your household expenses in (reference month)? |
| | <u>INTERVIEWER</u> : Regular household expenditures are those that are necessary for daily living such as food, heating, rental or mortgage payments, transportation to school or work, some clothing, taxes, etc. |
| 1 2 3 | Yes No Had no savings DK, RF |
| Coverage: | Respondents who were not employed full-time during reference week. Exclude mothers who received payments to complement Employment Insurance benefits and sons and daughters aged less than 30 who rely on their parents |
| IN_Q13 | Did you have to sell a house, a car, a boat or other possessions to meet your regular household expenses? |
| 1 2 | Yes No DK, RF |
| Note: | This information is only available for one household member in multiple respondents' households. |
| Coverage: | Respondents who were not employed full-time during reference week. Exclude mothers who received payments to complement Employment Insurance benefits and sons and daughters aged less than 30 who rely on their parents |
| IN_Q14 | Did you have to borrow from a bank or financial institution to meet your regular household expenses? (Include a second mortgage) |
| 1 | Yes |
| 2 3 | No Could not get any loans DK, RF |
| Note: | This information is only available for one household member in multiple respondents' households. |
| Coverage: | Respondents who were not employed full-time during reference week. Exclude mothers who received payments to complement Employment Insurance benefits and sons and daughters aged less than 30 who rely on their parents |

| | Release Questioniane |
|--|---|
| IN_Q15 | Did you need to increase your reliance on credit to meet your regular household expenses in (reference month)? (i.e. credit card, line of credit) |
| | INTERVIEWER: Exclude purchases of gifts or holiday items |
| 1 2 3 | Yes No Did not have credit DK, RF |
| Note: | This information is only available for one household member in multiple respondents' households. |
| Coverage: | Respondents who were not employed full-time during reference week. Exclude mothers who received payments to complement Employment Insurance benefits and sons and daughters aged less than 30 who rely on their parents |
| IN_Q16 | What was the main source of money (or funds) used to meet your household expenses in (reference month)? |
| | INTERVIEWER: If respondent answers "no income", please probe to find out who pays for household expenses (lodging and food) and what the source of funds is |
| 01 02 03 04 05 06 07 08 09 10 11 12 13 | Wages or self-employment earnings of spouse or partner or other family member Own wages or salary Own self-employment income Employment Insurance benefits of self Employment Insurance benefits of another household member Social assistance Disability insurance/Workers' Compensation Pensions or CPP/QPP of self or spouse Alimony, student loans, scholarships Financial assistance from friends or relatives Income from investments, interest, dividends, rentals Savings Loan/credit Other |
| Default: | (Go to IN_Q17) |
| Coverage: | All respondents, except sons and daughters aged less than 30 who rely on their parents |
| IN_S16 | (What was the main source of money (or funds) used to meet your household expenses in (reference month)?) |
| | (80 spaces) |

| IN_Q17 | In (reference month), would you say that your household income from all sources? |
|-----------------------|--|
| 1 2 3 4 5 | Met all your regular expenses and financial commitments Met most but not all Met some |
| Default: | (Go to JS_C01) |
| Coverage: | All respondents, except sons and daughters aged less than 30 who rely on their parents |
| IN_Q18A | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you cut expenses, reduce spending? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents |
| IN_Q18B | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you get a job/start a new career/start a business? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents |
| IN_Q18C | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did your family member increase hours of work? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents |
| IN_C18D | If IN_Q10=1 |

| IN_Q18D | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you get help from family or friends? |
|-----------|--|
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents, and except respondents who stated in IN_Q10 that they received financial help from friends and family |
| IN_Q18E | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you move (to a cheaper home) or share accommodations (with relatives)? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents |
| IN_Q18F | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you delay or consolidate debts and payments? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents |
| IN_C18G | If IN_Q14=1 or IN_Q15=1(Go to IN_C18H) Else(Go to IN_Q18G) |
| IN_Q18G | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you borrow money, take out loan, go into debt, use credit, stop paying bills? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents, and except respondents who stated in IN_Q14 or IN_Q15 that they had to borrow from a bank or financial institution or increased their reliance on credit |

| IN_C18H | If IN_Q12=1 |
|-----------|--|
| IN_Q18H | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you cash in savings and investments? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents, and except respondents who stated in IN_Q12 that they had to cash in savings or investments |
| IN_C18I | If IN_Q13=1 |
| IN_Q18I | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you sell property or belongings? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents, and except respondents who stated in IN_Q13 that they had to sell a property or belongings |
| IN_C18J | If IN_Q07=1 |
| IN_Q18J | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you apply for social assistance? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents, and except respondents who stated in IN_Q07 that they or someone in their household received social assistance |

| IN_Q18K | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you use food banks, soup kitchens? |
|-----------|--|
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents |
| IN_Q18L | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you apply for student loan, go back to school? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents |
| IN_Q18M | What did you do or plan to do, to make up for the shortfall in your income (relative to your expenses) in (reference month)? Did you take a pension, CPP/QPP? |
| 1 2 | Yes No DK, RF |
| Coverage: | Respondents who stated that their household income only met some, met very little or did not meet any of their regular household expenditures, except sons and daughters aged less than 30 who rely on their parents |
| Section: | Job Search (JS) |
| JS_C01 | If TYPE=1 or EI_Q07=2 or ((MOTHER=0 and (EI_Q05=1 or EI_Q06=1))(Go to JS_R01) Else(Go to PR_C01) |
| Note: | Only unemployed respondents and Employment Insurance recipients are asked job search questions. |
| JS_R01 | The following questions are about job search activities. |
| JS_Q01 | During the (second or third week) of (reference month), did you do anything to find work or find a new job? |
| 1 2 | Yes(Go to JS_Q02) No DK, RF |
| Default: | (Go to JS_Q06) |
| Coverage: | Unemployed respondents and those who received Employment Insurance benefits in the reference month, except mothers |

| JS_Q02 | What is the most important thing that you did that week to find work or find a new job? |
|--|--|
| 01 02 03 04 05 06 07 08 | Employment agency (public or private) Contacted employers directly (resume, visit, call, interview) Looked at job ads Contacted union Internet access or kiosk Organization/networking community Checked with friends or relatives Placed or answered job ads Other |
| Default: | (Go to JS_Q03) |
| Coverage: | Unemployed respondents and those not working during the reference week and who received Employment Insurance benefits in the reference month, except mothers and who indicated some job search |
| JS_S02 | (What is the most important thing that you did that week to find work or find a new job?) |
| | (80 spaces) |
| JS_Q03 | During the (second or third week) of (reference month), about how many hours did you spend on activities related to looking for work? (Include time spent looking at job ads, making telephone calls, writing letters, filling applications, taking job search seminars, attending interviews, etc.) |
| | INTERVIEWER: If above 60 hours, enter 61 |
| | (2 spaces) [Min: 0 Max: 61] DK, RF |
| Coverage: | Unemployed respondents and those not working during the reference week and who received Employment Insurance benefits in the reference month, except mothers and who indicated some job search |
| JS_Q04 | During that week of job search, about how much did it cost you to look for work? (Include expenses such as phone bills, stationery and photocopying, ads, stamps, employment agencies, travel costs, work shops and childcare.) |
| | (4 spaces) [Min: 0 Max: 9999] DK, RF |
| Coverage: | Unemployed respondents and those not working during the reference week and who received Employment Insurance benefits in the reference month, except mothers and who indicated some job search |

| JS_Q05A | Did you look for work - outside your community (city, town or village)? (More than 60 km) |
|-----------|--|
| 1 2 | Yes(Go to JS_Q05B) No DK, RF |
| Default: | (Go to JS_Q06) |
| Coverage: | Unemployed respondents and those not working during the reference week and who received Employment Insurance benefits in the reference month, except mothers and who indicated some job search |
| JS_Q05B | Did you look for work - outside the province? |
| 1 2 | Yes No DK, RF |
| Coverage: | Unemployed respondents and those not working during the reference week and who received Employment Insurance benefits in the reference month, except mothers and who did look outside their community |
| JS_Q06 | At the moment, are you working at a job or business? |
| 1 2 | Yes |
| Coverage: | Unemployed respondents and those who received Employment Insurance benefits in the reference month, except mothers |
| JS_C07 | If SALRYHR=blank |
| Note: | Only paid employees who reported wage rates above a minimum wage are asked the following questions. |
| JS_R07 | The amount of pay is sometimes important when deciding to accept a new job. Imagine that you were offered a similar job to the one you had with (employer name) but at a lower wage. (Assume that this similar job offers the same hours and benefits.) Would you accept such a job if the wages were? |
| JS_C07A | If SALMIN <= 0.75 * SALARYHR(Go to JS_Q07A) Else(Go to JS_C07B) |

| JS_Q07A | Would you accept such a job if the wages were 75% of the previous wages you received? |
|-----------|---|
| 1 2 | Yes |
| | RF(Go to JS_Q08) |
| Coverage: | Unemployed respondents and those who received Employment Insurance benefits during the reference month whose wages from their last job as a paid employee were greater than the provincial minimum wage, except mothers not looking for work and others who were working at the time of the interview |
| JS_C07B | If SALMIN <= 0.85 * SALARYHR |
| JS_Q07B | Would you accept such a job if the wages were 85% of the previous wages you received? |
| 1 2 | Yes(Go to JS_Q08) No DK, RF |
| Coverage: | Unemployed respondents and those who received Employment Insurance benefits during the reference month whose wages from their last job as a paid employee were greater than the provincial minimum wage and who would not accept a job where the wages were less or equal to 75% of that last job, except mothers not looking for work and others who were working at the time of the interview |
| JS_C07C | If SALMIN <= 0.90 * SALARYHR |
| JS_Q07C | Would you accept such a job if the wages were 90% of the previous wages you received? |
| 1 2 | Yes(Go to JS_Q08) No DK, RF |
| Coverage: | Unemployed respondents and those who received Employment Insurance benefits during the reference month whose wages from their last job as a paid employee were greater than the provincial minimum wage and who would not accept a job where the wages were less or equal to 85% of that last job, except mothers not looking for work and others who were working at the time of the interview |
| JS_C07D | If SALMIN <= 0.95 * SALRYHR |

| JS_Q07D | Would you accept such a job if the wages were 95% of the previous wages you received? |
|------------------|---|
| 1 2 | Yes(Go to JS_Q08) No DK, RF |
| Coverage: | Unemployed respondents and those who received Employment Insurance benefits during the reference month whose wages from their last job as a paid employee were greater than the provincial minimum wage and who would not accept a job where the wages were less or equal to 90% of that last job, except mothers not looking for work and others who were working at the time of the interview |
| JS_Q07E | Would you accept such a job if the wages were the same as the previous wage you received? |
| 1 2 | Yes No DK, RF |
| Coverage: | Unemployed respondents and those who received Employment Insurance benefits during the reference month whose wages from their last job as a paid employee were greater than the provincial minimum wage and who would not accept a job where the wages were less or equal to 95% of that last job, except mothers not looking for work and others who were working at the time of the interview |
| JS_Q08 | Would you like to work if a suitable job were offered in the next three months |
| 1 2 | Yes(Go to JS_Q09) No DK, RF |
| Default: | (Go to PR_C01) |
| Coverage: | Unemployed respondents and those not working during the reference week and not working at the time of the interview, except mothers |
| JS_Q09 | In the next three months, what are your chances of finding an acceptable job? |
| 1 2 3 4 | Not very good Good Very good(Go to PR_C01) You already have a job to start within 3 months(Go to PR_C01) DK, RF |
| Coverage: | Unemployed respondents and those who received Employment Insurance benefits in the reference month and who would like to work if a suitable job was offered in the next 3 months, except mothers and others who were working at the time of the interview |

| JS_Q10 | At this time, what would help you most to find a job? |
|--|--|
| 01 | Skills training |
| 02 | More education (academic) |
| 03 | Child care assistance |
| 04 | Work experience |
| 05 | Job finding clubs |
| 06 | Resume writing skills |
| 07 | Moving to another city/region |
| 08 | Help in starting a business/entrepreneurship training |
| 09 | Transportation |
| 10 | Contacts or networking |
| 11 | Better health/younger/older |
| 12 | More jobs/work available |
| 13 | Other(Go to JS_S10) |
| 10 | DK, RF |
| Default: | (Go to PR_C01) |
| Coverage: | Unemployed respondents and those who received Employment Insurance benefits in the reference |
| Goverage. | month and who would like to work if a suitable job was offered in the next 3 months but whose |
| | chances of finding such job were not very good, except mothers and others who were working at the time of the interview. Category 12 was added during processing |
| JS_S10 | (At this time, what other thing would help you most to find a job?) |
| | (80 spaces) |
| Section: | Plans to Return to Work (PR) |
| PR C01 | If MOTHER=0 or LWP=4 or JS_Q06=1(Go to WA_C01A) |
| 111_001 | Else if JS_Q06=2 or JS_Q06='DK' or JS_Q06='RF'(Go to WA_C07A) |
| | Else(Go to PR_R01) |
| | |
| PR_R01 | The following questions concern your plan to return to work after the birth or adoption of your child. |
| PR_Q01 | At the moment, are you working at a job or business? |
| 1 | Yes(Go to WA_C01A) |
| 1 2 | No |
| 2 | |
| | DK, RF |
| Coverage: | Mothers of a child aged 0 to 12 months who are not currently working but have worked in the past |
| - - - | The state of the s |
| PR_C02 | If TYPE=5(Go to WA_C01A) |
| 502 | Else if LWP=3(Go to VX_G0174) |
| | Else (Go to PR Q02) |
| | (35 to 1 N_qc2) |

| PR_Q02 | Have you performed any work for pay since the birth/adoption of your child? |
|-----------|--|
| 1 2 | Yes(Go to WA_C01A) No DK, RF |
| Coverage: | Mothers who have worked in the past two years and who are not currently working |
| PR_C03 | If COW=1 |
| PR_Q03 | At the time you left your last job, did you have an agreement with your employer that you could return to work there? |
| 1 2 | Yes No DK, RF |
| Coverage: | Mothers who have worked in a paid job in the past two years, but have not worked for pay since the birth or adoption of their child |
| PR_Q04 | Are you planning to go back to work? |
| 1 2 | Yes No(Go to PR_Q12) DK, RF(Go to PR_Q12) |
| Coverage: | Mothers who have worked in the past, but have not worked for pay since the birth or adoption of their child |
| PR_Q05 | In how many months do you plan to return to work? |
| | INTERVIEWER: Enter '0' if less than a month |
| | (2 spaces) [Min: 0 Max: 60] |
| | DK, RF(Go to PR_Q06) |
| Coverage: | Mothers who have worked in the past, but have not worked for pay since the birth or adoption of their child and who are planning to return to work |
| PR_C06 | If PR_Q05 is > 18 (Go to PR_Q12) Else if LWP=3 (Go to PR_Q11) Else (Go to PR_Q06) |

| PR_Q06 | Are you planning to return to work for the same employer or the same business you had before the birth/adoption of your child? |
|----------------------------------|--|
| 1 2 | Yes(Go to PR_C08) |
| ۷ | DK, RF(Go to PR_Q09) |
| Coverage: | Mothers who have worked in the past two years, but have not worked for pay since the birth or adoption of their child and who are planning to return to work in less than 18 months or are not sure when they plan to return to work |
| PR_Q07 | Why are you not returning to work for the same employer or the same business? |
| 01 02 03 04 05 06 | Employer has let me go Employer stopped operations Prefer another employer or job Changing place of residence Want different work conditions |
| Default: | (Go to PR_Q09) |
| Coverage: | Mothers who have worked in the past two years, but have not worked for pay since the birth or adoption of their child and who are planning to return to work in less than 18 months or are not sure when they plan to return to work, but are not planning on returning to work for the same employer or business as before the birth or adoption of their child |
| PR_S07 | (Why are you not returning to work for the same employer or the same business?) |
| | (80 spaces) |
| Default: | (Go to PR_Q09) |
| PR_C08 | If COW=1 |
| PR_Q08 | Are you planning to go back to the same job or position with that employer? |
| | INTERVIEWER: Same job means that the type of work, duties and wage rate have not significantly changed. If job no longer exists, mark "No" |
| 1 2 | Yes No DK, RF |
| Coverage: | Mothers who have worked for pay in the past two years, but have not worked for pay since the birth or adoption of their child and who are planning to return to work in less than 18 months or are not sure when they plan to return to work, but are planning on returning to work for the same employer or business as before the birth or adoption of their child |

| PR_Q09 | Are you planning to return to the same working conditions that you had before the birth/adoption of your child? (for example, schedule, hours, working environment) |
|-----------|---|
| 1 | Yes(Go to PR_Q11) |
| 2 | No DK, RF(Go to PR_Q11) |
| Coverage: | Mothers who have worked in the past two years, but have not worked for pay since the birth or adoption of their child and who are planning to return to work in less than 18 months or are not sure when they plan to return to work (and have not already said that they wanted different working conditions) |
| PR_Q10 | What difference are you looking for/will there be in the working conditions? |
| 1 | Working less hours |
| 2 | Different schedule (shift) |
| 3 | Other(Go to PR_S10) DK, RF |
| Default: | (Go to PR_Q11) |
| Coverage: | Mothers who have worked in the past two years, but have not worked for pay since the birth or adoption of their child and who are planning to return to work in less than 18 months or are not sure when they plan to return to work, but are not planning on returning to the same working conditions as before the birth or adoption of their child |
| PR_S10 | (What difference are you looking for/will there be in the working conditions?) |
| | (80 spaces) |
| PR_Q11 | Who will take care of your child when you return to work? |
| 01 | Private babysitter |
| 02 | Private nursery or daycare |
| 03 | Public nursery or daycare (at reduced cost) |
| 04 | Friend or relative will take care of child |
| 05 | Employer based daycare |
| 06 | Share child care with husband |
| 07 | Other(Go to PR_S11) DK, RF |
| Default: | (Go to PR_Q12) |
| Coverage: | Mothers who have worked in the past, but have not worked for pay since the birth or adoption of their child and who are planning to return to work in less than 18 months or are not sure when they plan to return to work |
| PR_S11 | (Who will take care of your child when you return to work?) |
| | (80 spaces) |

| PR_Q12 | What is the reason that you are not (planning to return to work/returning to work for several months/returning to work now)? |
|--|--|
| | INTERVIEWER: Same job means that the type of work, duties and wage rate have not significantly changed. If job no longer exists, mark "No" |
| 01 02 03 04 05 06 07 | Prefer to take care of my child (until school age) Paid to take leave Mothers should stay home with their child Cannot find or afford babysitting or daycare Cannot find a suitable job Will go to school or take training Other |
| Default: | (Go to PR_D13A) |
| Coverage: | Mothers who have worked in the past, but have not worked for pay since the birth or adoption of their child |
| PR_\$12 | (What is the reason that you are not (planning to return to work/returning to work for several months/returning to work now)?) |
| | (80 spaces) |
| PR_D13A | If EI_Q07=5 or EI_Q09=4 (Mark All) is selected (sickness benefits) set MaxWeeks=64, Else if EI_Q10 is blank set MaxWeeks=34, Else set MaxWeeks=49. |
| PR_C13 | If PB_Q05=1 or PB_Q07=1 or EI_Q04 > 1 or PR_Q05 > 10(Go to WA_C01A) Else if EI_Q10=response and EI_Q10 > MaxWeeks(Go to WA_C01A) Else |
| PR_Q13 | Do you intend to take the maximum number of weeks of maternity and parental/parental leave available to you? |
| 1 2 3 4 | Yes (Go to PR_Q14) Not sure (Go to PR_Q14) Benefits have expired (Go to PR_Q14) DK (Go to PR_Q14) RF |
| Default: | (Go to WA_C01A) |
| Coverage: | Mothers who received maternity and parental benefits |

| PR_Q14 | What is the main reason that you do not intend to/are not sure if you will take the maximum number of weeks of maternity and parental/parental leave available to you? |
|------------------|---|
| 1 2 3 4 | Financial reasons (incl. need the money) Work/employer related reasons Prefer to work Other(Go to PR_S14) DK, RF |
| Default: | (Go to WA_C01A) |
| Coverage: | Mothers who do not intend to take or are not sure if they will take the maximum number of weeks of maternity or parental leave available |
| PR_S14 | (What is the main reason that you do not intend to/are not sure if you will take the maximum number of weeks of maternity and parental/parental leave available to you?) |
| | (80 spaces) |
| Section: | Work After Birth/Adoption (WA) |
| WA_C01A | If MOTHER=0 (Go to CI_C01) Else if TYPE=5 and (BK_Q01=2 or BK_Q01=3) (Go to CI_C01) Else if TYPE=5 and (BK_Q01=1 or BK_Q01=blank) (Go to WA_Q01) Else if JS_Q06=1 or PR_Q01=1 or PR_Q02=1 (Go to WA_C01B) Else (on leave did not work since birth) (Go to CI_C01) |
| WA_C01B | If LWM, LWY <= BMTH, BYEAR(Go to WA_C07) Else(Go to WA_Q01) |
| WA_Q01 | Were you working for (employer name) before the birth/adoption of your child? |
| 1 2 | Yes(Go to WA_Q08M) No DK, RF |
| Coverage: | Working mothers who took a break for the birth or adoption of their child or whose last work date is after the birth or adoption of their child |
| WA_Q02 | For whom were you working for at that time? |
| 1 2 3 | Enter the employer's name |
| Default: | (Go to WA_Q03) |
| Coverage: | Working mothers who took a break for the birth or adoption of their child or whose last work date is after the birth or adoption of their child and who did not return to the same employer |

| WA_Q02N | (For whom were you working for at that time?) |
|-------------|--|
| | (50 spaces) DK, RF |
| Coverage: | Working mothers who took a break for the birth or adoption of their child or whose last work date is after the birth or adoption of their child and who did not return to the same employer. Excludes respondents who owned a business or worked for the family business |
| WA_Q03 | What kind of business, industry or service was this? |
| | (30 spaces) DK, RF |
| Coverage: | Working mothers who took a break for the birth or adoption of their child or whose last work date is after the birth or adoption of their child and who did not return to the same employer. Excludes respondents who owned a business or worked for the family business |
| WA_Q04 | What kind of work were you doing? |
| | (30 spaces) DK, RF |
| Coverage: | Working mothers who took a break for the birth or adoption of their child or whose last work date is after the birth or adoption of their child and who did not return to the same employer. Excludes respondents who owned a business or worked for the family business |
| WA_C05 | If WA_Q02=1 |
| WA_Q05 | In that job with employer, were you a union member or covered by a union contract or collective agreement? |
| 1 | Yes |
| 2 | No DK, RF |
| Coverage: | Working mothers who took a break for the birth or adoption of their child or whose last work date is after the birth or adoption of their child and who did not return to the same employer |
| WA_Q06 | What was your usual (gross) rate of pay, before deductions? Do not include overtime, tips, commissions or bonuses. |
| 1 2 3 | Enter salary \$ |
| Default: | (Go to WA_C07) |
| Coverage: | Working mothers who took a break for the birth or adoption of their child or whose last work date is after the birth or adoption of their child and who did not return to the same employer |

| WA_Q06A | Enter the salary |
|----------------------------------|--|
| | (9 spaces) [Min: .00 Max: 900000.00] DK, RF |
| Coverage: | Working mothers (exclude minimum wage and commission only earners) who took a break for the birth or adoption of their child or whose last work date is after the birth or adoption of their child and who did not return to the same employer |
| WA_Q06B | Per (unit of measurement) |
| 01 03 04 05 06 07 | Hour Week Biweekly Twice per month Month Year DK, RF |
| Coverage: | Working mothers (exclude minimum wage and commission only earners) who took a break for the birth or adoption of their child or whose last work date is after the birth or adoption of their child and who did not return to the same employer |
| WA_C07 | If WA_Q02=1 (Go to WA_Q07) Else if WA_Q02 > 1 (Go to WA_Q08M) Else if COW=1 (Go to WA_Q07) Else (Go to WA_Q08M) |
| WA_Q07 | At the time you stopped working for the birth/adoption of your child, did you have an agreement with your employer that you could return to work there? |
| 1 2 | Yes No DK, RF |
| Coverage: | Working mothers who took a break for the birth or adoption of their child or whose last work date is after the birth or adoption of their child and who did not return to the same employer |

| WA_Q08M | When did you first return to work for pay after the birth/adoption of your child in (birth month)? |
|-----------|--|
| 01 | January |
| 02 | February |
| 03 | March |
| 04 | April |
| 05 | May |
| 06 | June |
| | |
| 07 | July |
| 08 | August |
| 09 | September |
| 10 | October |
| 11 | November |
| 12 | December |
| | DK, RF(Go to WA_Q09) |
| Coverage: | Working mothers who took a break for the birth or adoption of their child |
| WA_Q08Y | When did you first return to work for pay after the birth/adoption of your child in (birth year)? |
| | (4 spaces) [Min: 2000 Max: 2006] DK, RF |
| Coverage: | Working mothers who took a break for the birth or adoption of their child |
| WA_Q09 | Why did you return to work at that time? |
| 01 | El benefits ended |
| 02 | Other benefits or leave from work ran out |
| 03 | Needed the money |
| 04 | Employer required that I return |
| 05 | Worried about promotions |
| | Preferred to work |
| 06 | Other(Go to WA_S09) |
| 07 | DK, RF |
| Default: | (Go to WA_C10) |
| Coverage: | Working mothers who took a break for the birth or adoption of their child |
| WA_S09 | (Why did you return to work at that time?) |
| | (80 spaces) |
| WA_C10 | If WA_Q01=1 or WA_Q01=blank (Go to WA_Q12) Else if WA_Q01=2 (Go to WA_Q11) Else (Go to WA_Q10) |

| WA_Q10 | Did you return to work for the same employer or business as before the birth/adoption of your child? |
|-----------------------|--|
| 1 | Yes(Go to WA_Q12) |
| 2 | No DK, RF(Go to WA_Q12) |
| Coverage: | Working mothers who took a break for the birth or adoption of their child but skipped WA_Q01 |
| WA_Q11 | Why did you not return to work for the same employer or business as before the birth/adoption of your child? |
| 1 2 3 4 5 | Wanted different work conditions |
| | DK, RF |
| Default: | (Go to WA_Q13) |
| Coverage: | Working mothers who took a break for the birth or adoption of their child who did not return to the same employer |
| WA_S11 | (Why did you not return to work for the same employer or business as before the birth/adoption of your child?) |
| | (80 spaces) |
| Default: | (Go to WA_Q13) |
| WA_Q12 | Did you go back to the same job or position you had before? |
| | INTERVIEWER: "Same job" means that the type of work, duties and wage rate have not changed significantly |
| 1 2 | Yes No DK, RF |
| Coverage: | Working mothers who took a break for the birth or adoption of their child and who returned to work for the same employer |
| WA_Q13 | Did you return to work with the same working conditions (for example: schedule, hours, work environment)? |
| 1 | Yes(Go to WA_Q15) |
| 2 | No DK, RF(Go to WA_Q15) |
| Coverage: | Working mothers who took a break for the birth or adoption of their child and who did not return to work for the same employer |

| WA_Q14 | What difference (did you want/was there) in your working conditions? |
|--|---|
| 1 2 3 | Less weekly hours Different schedule (shift) Other(Go to WA_S14) DK, RF |
| Default: | (Go to WA_Q15) |
| Coverage: | Working mothers who took a break for the birth or adoption of their child but who did not return to work with the same working conditions |
| WA_S14 | (What difference (did you want/was there) in your working conditions?) |
| | (80 spaces) |
| WA_Q15 | Who took care of your child when you returned to work? |
| 01 02 03 04 05 06 07 08 | Worked and took care of child |
| Default: | (Go to WA_Q16A) |
| Coverage: | Working mothers who took a break for the birth or adoption of their child |
| WA_S15 | (Who took care of your child when you returned to work?) |
| | (80 spaces) |
| WA_Q16A | What was the cost of this childcare for your youngest child? |
| | (8 spaces) [Min: .00 Max: 10000.00] |
| | DK, RF(Go to WA_Q17TX) |
| Coverage: | Working mothers who took a break since the birth or adoption of their child and who had someone other than themselves or their spouse take care of their child when they returned to work |
| WA_Q16B | Per (unit of measurement) |
| 1 2 3 | Week Month Other(Go to WA_S16B) DK, RF |
| Default: | (Go to WA_Q17TX) |
| Coverage: | Working mothers who took a break since the birth or adoption of their child and who had someone other than themselves or their spouse take care of their child when they returned to work |

| WA_S16B | (What was the cost of this childcare for your youngest child?) |
|----------------------------------|--|
| | (80 spaces) |
| WA_Q17TX | For how many of your children do you use this childcare provider? |
| | (2 spaces) [Min: 0 Max: 10] DK, RF |
| Coverage: | Working mothers who took a break since the birth or adoption of their child and who had someone other than themselves or their spouse take care of their child when they returned to work |
| Section: | Changes in Income After Birth/Adoption (CI) |
| CI_C01 | If MOTHER=1 (Go to CI_R01) Else (Go to SD_Q01) |
| CI_R01 | We would like to have an indication of the change in income you experienced after the ^BirthAdoption of your child. |
| CI_Q01 | In the month before the birth/adoption of your child, was your total household income from all sources? |
| | INTERVIEWER: Include income from all household members before income tax deductions |
| 01 02 03 04 05 06 | Less than \$1,600 (less than \$20,000 per annum) \$1,600 to less than \$2,500 (\$20,000 - \$30,000 per annum) \$2,500 to less than \$3,300 (\$30,000 - \$40,000 per annum) \$3,300 to less than \$5,000 (\$40,000 - \$60,000 per annum) \$5,000 to less than \$6,700 (\$60,000 - \$80,000 per annum) \$6,700 or more (\$80,000 or more per annum) DK, RF |
| Coverage: | Mothers of a child aged 0 to 12 months |
| CI_Q02 | In the month after the birth/adoption of your child, did your total household income decrease, increase or stay the same? |
| | INTERVIEWER: Include income from all household members before income tax deductions |
| 1 2 3 | Decrease Increase Stay the same |
| Coverage: | Mothers of a child aged 0 to 12 months |

| CI_Q03 | By how much money per month did your household income decrease/increase after the birth/adoption of your child? |
|-------------|---|
| | (5 spaces) [Min: 0 Max: 10000] DK, RF |
| Coverage: | Mothers reporting a change in their household income after the birth/adoption of their child |
| Section: | Socio-Demographics (SD) |
| SD_Q01 | What is the language you first learned at home in childhood (mother tongue)? |
| 1 2 3 | English French Other DK, RF |
| Coverage: | All respondents |
| SD_Q02 | Were you born in Canada? |
| 1 2 | Yes No(Go to SD_Q03) DK, RF |
| Default: | (Go to SD_Q05) |
| Coverage: | All respondents |
| SD_Q03 | When did you arrive in Canada? |
| | INTERVIEWER: This refers to the first trip to Canada as a landed immigrant or refugee |
| 1 2 | To enter the year (Go to SD_Q03Y) Never immigrated, Canadian by birth DK, RF |
| Default: | (Go to SD_Q05) |
| Coverage: | Respondents not born in Canada |
| SD_Q03Y | When did you arrive in Canada? |
| | (4 spaces) [Min: 1900 Max: 2005] DK, RF |
| Coverage: | Respondents not born in Canada |

| SD_Q04 | In which country were you born? |
|-----------|--|
| | INTERVIEWER: If person is not willing to provide the name of a Country, ask for the Continent: |
| | North America, South America, Europe, Africa, North-East Asia, South Asia (e.g. India), South-East Asia, Australia, Middle-East |
| | (30 spaces) DK, RF |
| Coverage: | Respondents who were not born in Canada (based on SD_Q02 or SD_Q03) |
| SD_Q05 | Now we have come to the end of the interview. Thank you very much for your participation in this survey. Do you have any comments you would like to give us concerning this project? |
| 1 2 | Yes(Go to SD_S05) No DK, RF |
| Default: | (Go to SD_END) |
| Coverage: | All respondents |
| SD_S05 | (Now we have come to the end of the interview. Thank you very much for your participation in this survey. Do you have any comments you would like to give us concerning this project?) |
| | (100 spaces) |
| Coverage: | All respondents who have comments |
| SD_END | End of Socio-demographics module |

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| MO_C01 1 | PR_Q10 | |
| MO D04 2 | PR_Q11 | |
| MO_Q01 1 | PR_Q12 | |
| MO_Q021 | PR_Q13 | |
| MO_Q032 | PR_Q14 | |
| MO_Q04M2 | PR R01 | |
| MO_Q04Y 2 | PR S07 | |
| 0 | PR S10 | |
| OS R016 | PR_S11 | |
| P | PR_S12 | |
| PB C0126 | PR S14 | |
| PB C03 | S | - |
| PB C0527 | SD_END | 60 |
| PB C0727 | SD_Q01 | |
| PB_C0928 | | |
| 1 D COZ 40 | | 29 |
| - | SD_Q02 | |
| PB_D0126 | SD_Q02 | 59 |
| PB_D01 | SD_Q02SD_Q03SD_Q03Y | 59 59 |
| PB_D01 | SD_Q02SD_Q03SD_Q03YSD_Q04 | 59 59 60 |
| PB_D01 26 PB_Q01 26 PB_Q02 26 PB_Q03 26 | SD_Q02 | 59 59 60 60 |
| PB_D01 26 PB_Q01 26 PB_Q02 26 PB_Q03 26 PB_Q04 27 | SD_Q02 | 59 59 60 60 |
| PB_D01 26 PB_Q01 26 PB_Q02 26 PB_Q03 26 PB_Q04 27 PB_Q05 27 | SD_Q02 SD_Q03 SD_Q03Y SD_Q04 SD_Q05 SD_S05 SW_C01A | 59 59 60 60 60 14 |
| PB_D01 26 PB_Q01 26 PB_Q02 26 PB_Q03 26 PB_Q04 27 PB_Q05 27 PB_Q06 27 | SD_Q02 SD_Q03 SD_Q03Y SD_Q04 SD_Q05 SD_S05 SW_C01A SW_C01B | 59 59 60 60 60 14 14 |
| PB_D01 26 PB_Q01 26 PB_Q02 26 PB_Q03 26 PB_Q04 27 PB_Q05 27 PB_Q06 27 PB_Q07 28 | SD_Q02 SD_Q03 SD_Q03Y SD_Q04 SD_Q05 SD_S05 SW_C01A SW_C01B SW_C02 | 59 59 60 60 60 14 14 14 |
| PB_D01 26 PB_Q01 26 PB_Q02 26 PB_Q03 26 PB_Q04 27 PB_Q05 27 PB_Q06 27 PB_Q07 28 PB_Q08 28 | SD_Q02 SD_Q03 SD_Q03Y SD_Q04 SD_Q05 SD_S05 SW_C01A SW_C01B SW_C02 SW_C04 | 59 59 60 60 14 14 14 15 |
| PB_D01 26 PB_Q01 26 PB_Q02 26 PB_Q03 26 PB_Q04 27 PB_Q05 27 PB_Q06 27 PB_Q07 28 PB_Q08 28 PB_Q10 28 | SD_Q02 SD_Q03 SD_Q03Y SD_Q04 SD_Q05 SD_S05 SW_C01A SW_C01B SW_C02 SW_C04 SW_C07 | 59 59 60 60 14 14 14 15 16 |
| PB_D01 26 PB_Q01 26 PB_Q02 26 PB_Q03 26 PB_Q04 27 PB_Q05 27 PB_Q06 27 PB_Q07 28 PB_Q08 28 PB_Q10 28 PB_Q11 29 | SD_Q02 SD_Q03 SD_Q03Y SD_Q04 SD_Q05 SD_S05 SW_C01A SW_C01B SW_C02 SW_C04 SW_C07 SW_C08 | 59 59 60 60 14 14 15 16 17 |
| PB_D01 26 PB_Q01 26 PB_Q02 26 PB_Q03 26 PB_Q04 27 PB_Q05 27 PB_Q06 27 PB_Q07 28 PB_Q08 28 PB_Q10 28 PB_Q11 29 PB_S04 27 | SD_Q02 SD_Q03 SD_Q03Y SD_Q04 SD_Q05 SD_S05 SW_C01A SW_C01B SW_C02 SW_C04 SW_C07 SW_C08 SW_D02 | 59 60 60 14 14 15 16 17 |
| PB_D01 26 PB_Q01 26 PB_Q02 26 PB_Q03 26 PB_Q04 27 PB_Q05 27 PB_Q06 27 PB_Q07 28 PB_Q08 28 PB_Q10 28 PB_Q11 29 | SD_Q02 SD_Q03 SD_Q03Y SD_Q04 SD_Q05 SD_S05 SW_C01A SW_C01B SW_C02 SW_C04 SW_C07 SW_C08 | 59 60 60 14 14 15 16 17 14 |

| SW_Q0315 | WA_C055 | 53 |
|-----------|-----------|----|
| SW_Q0415 | WA C07 | |
| SW_Q0516 | WA C10 | 55 |
| SW_Q05A16 | WA_Q015 | 52 |
| SW_Q05B16 | WA_Q025 | |
| SW_Q0616 | WA_Q02N | |
| SW_Q0717 | WA_Q035 | |
| SW_Q0817 | WA_Q045 | |
| SW R0114 | WA_Q055 | |
| SW_S0114 | WA Q06 | |
| SW_S0315 | WA_Q06A | |
| SW_S07 17 | WA_Q06B5 | |
| T | WA_Q075 | |
| TB_C0129 | WA_Q08M | |
| TB C0229 | WA_Q08Y | |
| TB_C03A30 | WA_Q095 | |
| TB_C03B30 | WA_Q105 | 56 |
| TB_C04A30 | WA_Q115 | |
| TB_D0129 | WA_Q125 | |
| TB_Q0129 | WA_Q135 | |
| TB_Q02A29 | WA_Q145 | |
| TB_Q02B30 | WA_Q155 | 57 |
| TB_Q0330 | WA_Q16A | |
| TB_Q0430 | WA_Q16B | |
| TB_S0431 | WA_Q17TX5 | |
| TY_C012 | WA_S095 | |
| TY_C063 | WA_S115 | 56 |
| TY_C06A4 | WA_S145 | 57 |
| TY_D06 3 | WA_S155 | 57 |
| TY_D08 4 | WA_S16B | 58 |
| TY_END4 | WY_C01 1 | 12 |
| TY_Q012 | WY_C02A | 12 |
| TY_Q02 3 | WY_C02B1 | 12 |
| TY_Q03 3 | WY_C04 | 13 |
| TY_Q043 | WY_C061 | 14 |
| TY_Q05 3 | WY_D01B | 12 |
| TY_Q063 | WY_Q011 | 12 |
| TY_Q06A4 | WY_Q021 | 13 |
| TY_Q074 | WY_Q031 | 13 |
| TY_Q084 | WY_Q041 | |
| W | WY_Q051 | 13 |
| WA_C01A52 | WY_Q061 | 14 |
| WA_C01B52 | WY_S031 | 13 |