Labour Market Activity Survey (1990)

Confidential (when completed)

Authority — Statistics Act. Revised Statutes of Canada, 1905, Chapter 319.

		LABEL GOES HERE	COMPLETE FOR NEW HOUSEHOLD MEMBERS ON FO3A OR FO3C AND NEW ELIGIBLE HOUSEHOLD MEMBERS ON FO3B O 8	
			1 териото по	
		RECORD OF CALLS	AND APPOINTMENTS	
#	Date		Notes	
1				
2				
3				
4				
<u> </u>				
		COMPLETING	THE FORM 08	
	 Introduce the survey by saying: "Statistics Canada is doing this survey at the request of Employment and Immigration Canada. The purpose is to collect information about the patterns of work and the types of jobs held during 1990. All information will be kept strictly confidential as required by the Statistics Act." Proxy response can be accepted for the Form 08. However when the person responding for other household members is unsure of the answers to the questions, arrangements should be made to telephone at a convenient time when the correct information can be obtained, either directly from the person concerned, or from a knowledgeable and responsible household member. 			
	START TIME DATE D D M M Y Y			
10	. IN 1990, HO\	W MANY EMPLOYERS DID WORK FOR,	INCLUDING SELF-EMPLOYMENT?	
If 0 0 Go to 140				
I AM GOING TO ASK YOU ABOUT THE JOBS HELD IN 1990. IN THIS SURVEY, A JOB CHANGE IS A CHANGE IN BOTH <u>USUAL</u> DUTIES AND <u>USUAL</u> WAGE OR SALARY.				

No 7 Go to 17B Yes 1 Go to Item 11 in next available column Yes 1 Go to Item 18 for Job 11	JOB 1 3	JOB 1 4	JOB 1 5
Yes	10		
No	D D M M Y Y	D D M M Y Y	D D M M Y Y
No	No ⁶ Go to 21	· -	
- COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18 Confirmed Job	9 0	1 , 5	0.00
Confirmed Job 'O	D D M M Y Y Go to 23	D D M M Y Y Go to 23	
OR O	COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
OR O			
4 Go to 17A 5 Go to 17B 4 Go to 17A 5 Go to 17B 4 Go to 17A 5 Go to 17B Yes 6 Go to Item 11 in next available column No 7 Go to 17B Yes 7 Go to 17B Yes 6 Go to Item 11 in next available column No 7 Go to 17B Yes 1 Go to Item 11 in next available column Yes 2 Go to Item 12 in next available column Yes 3 Go to Item 13 for Job 11 No 2 Go to Item 18 for Job 11 No 2 Go to Item 18 for Job 11	Confirmed Job Confirmed Job	Confirmed Job ² OR Confirmed Job ³ Confirmed Job ³	Confirmed Job ² OR Confirmed Job ² OR
5 Go to Item 11 in next available column Yes 6 Go to Item 11 in next available column No 7 Go to 17B Yes 6 Go to Item 11 in next available column No 7 Go to 17B Yes 6 Go to Item 18 for Job 11 No 7 Go to 17B Yes 1 Go to Item 11 in next available column Yes 2 Go to Item 18 for Job 11 No 2 Go to Item 18 for Job 11	Enter code	Enter code	Enter code
No ⁷ Go to 17B No ⁸ Go to 17B No ⁸ Go to 17B No ⁹ Go to 17B No ¹ Go to 17B No ¹ Go to 17B No ² Go to 18 Item 18 for Job 11 No ² Go to 18 Item 18 for Job 11	=		
No ² Go to Item 18 for Job 11 No ² Go to Item 18 for Job 11 No ² Go to Item 18 for Job 11	Yes ⁶ Go to Item 11 in next available column No ⁷ Go to 17B		
		20	

<u> </u>	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	Yes ³ Go to 20	Yes ³ Go to 20
Year's)?	No ⁴ Go to 19	No ⁴ Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes ⁷ Qu to 20 No ⁸ Go to 22	Yes ⁷ ○ Qo to 20 No ⁸ ○ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y Go to 23	D D M M Y Y Go to 23
COMPLETE ITEMS 1	11 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
		100
12. WHAT KIND OF BUSINESS, INDUSTRY OR SERVICE WAS THIS?	Confirmed Job OR	Confirmed Job 1 OR
13. WHAT KIND OF WORK WAS DOING?	Oonfirmed Job ² OR	Confirmed Job ²
14. IN THIS WORK WHAT WERE'S MOST IMPORTANT ACTIVITIES OR DUTIES?	Confirmed Job ³	Confirmed Job ³
IMPORTANT ACTIVITIES OR DOTIES?	OR	OR
15. CLASS OF WORKER	Enter code	Fater code
16. INTERVIEWER CHECK ITEM:		
If code 1 (Paid Worker) in Item 15	⁴ ○ Go to 17A	⁴ Go to 17A
Otherwise	Go to 17B	°O to 17B
17A. IN 1990, DID HAVE ANY PROMOTIONS OR OTHER JOBS WITH (repeat name of employer in Item 11)?	Yes ⁶ Go to Item 11 in next available column No ⁷ Go to 17B	Yes ⁶ Go to Item 11 in next available column No ⁷ Go to 17B
17B. IN 1990, DID HAVE A JOB WITH ANY OTHER EMPLOYER?	Yes ¹ Go to Item 11 in next available column	Yes ¹ Go to Item 11 in next available column

JOB 1 3	JOB 1 4	JOB 1 5
Yes ³ Go to 20 No ⁴ Go to 19	Yes ³ Go to 20 No ⁴ Go to 19	Yes ³
D D M M Y Y	D D M M Y Y	D D M M Y Y
Yes ⁵ Go to 23 No ⁶ Go to 21 Yes ⁷ Go to 23	Yes ⁵ Go to 23 No ⁶ Go to 21 Yes ⁷ Go to 23	Yes ⁵ Go to 23 No ⁶ Go to 21 Yes ⁷ Go to 23
No ⁸ Go to 22	No ⁸ Go to 22	No ^B Go to 22
• COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
Confirmed Job 1	Confirmed Job 1 OR	Confirmed Job 1
Confirmed Job ²	Confirmed Job ²	Confirmed Job ²
Confirmed Job on OR	Confirmed Job SO	Confirmed Job °()
Enter code	Enter code	Enter code
⁴ ○ Go to 17A ⁵ ○ Go to 17B	⁴ ○ Go to 17A ⁵ ○ Go to 17B	⁴ Go to 17A ⁵ Go to 17B
Yes ⁶ Go to Item 11 in next available column No ⁷ Go to 17B	Yes ⁶ Go to Item 11 in next available column No ⁷ Go to 17B	Yes ⁶ Go to Item 18 for Job 11 No ⁷ Go to 17B
Yes ¹ Go to Item 11 in next available column	Yes ¹ Go to Item 11 in next available column No ² Go to Item 18 for Job 11	Yes ¹ Go to Item 18 for Job 11 No ² Go to Item 18 for Job 11
100.010.1		

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF	Yes ³ Go to 20	Yes ³ Go to 20
JANUARY 1990 (i.e., immediately after New Year's)?	No ⁴ Go to 19	No ⁴ Go to 19
10 W 1000 WUEN DID FIRST START		
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB	Yes ⁵ Go to 23	Yes °() Go to 23
OR BUSINESS?	No ⁶ Go to 21	No ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ ◯ Go to 23 No ⁶ ◯ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y Go to 23
COMPLETE ITEMS 1:	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
	WORK AT EACH JOB BEFORE 1990	
OO INTERVIEWED CLIEBY IN	1	T
23. INTERVIEWER CHECK ITEM:	10 0 0 0	10 0 10
If "Yes" marked in Item 18 Otherwise	Go to 24	Go to 24 2 Go to 25
Otherwise	Go to 25	G0 t0 25
24. WHEN BEFORE 1990 DID START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
25. INTERVIEWER CHECK ITEM:		
If code 1 (Paid Worker) in Item 15	³ Go to 26	³ Go to 26
Otherwise		⁴○ Go to 38
26. DID WORK FOR THIS EMPLOYER BEFORE 1990?	Yes ⁵ Go to 27 No ⁶ Go to 38	Yes ⁵ ◯ Go to 27 No ⁶ ◯ Go to 38
27. WHEN BEFORE 1990 DID LAST WORK FOR THIS EMPLOYER?	Before Jan. 1. 1989 ⁷ Go to 38	Before Jan. 1. 1989 (Go to 38
	OR	OR
		8 9 Go to 28
	D D M M Y Y	D D M M Y Y
28. AT THAT TIME, DID HAVE THE SAME JOB WITH THIS EMPLOYER (i.e., same as reported in Items 13 and 14)?	Yes ⁸ ◯ Go to 29 No ⁹ ◯ Go to 38	Yes ⁸ Go to 29 No ⁹ Go to 38
29. WHAT WAS THE MAIN REASON FOR THIS		
ABSENCE FROM (repeat date in Item 27) TO (repeat date in Item 19)?	Enter code	Enter code
30. INTERVIEWER CHECK ITEM:		
If Code 11 or 13 (fully paid vacation or fully paid vacation or fully paid vacation in the paid vacation or fully paid vacation in the paid vacation in the paid vacation or fully paid vacation.	10 0 4 55	10 0.4.55
paid education leave) in Item 29	'() Go to 55	(Go to 55 2 Go to 31
Otherwise	Go to 31	G0 10 31
31. DID RECEIVE ANY OF THE FOLLOWING KINDS OF FINANCIAL COM- PENSATION FOR THIS ABSENCE?		
For each type of compensation received, ask:		
HOW MANY WEEKS OF (repeat type of compensation) DID RECEIVE FOR THIS ABSENCE?	No. of No Yes weeks	No. of No Yes weeks
a) Unemployment Insurance?	⁰¹ ○	⁰¹ ○
b) Worker's Componention?	03	03 04 →
	05 06 →	05 06 -
c) Group Insurance?	07 08 →	07 08 →
d) Automobile Insurance?	09 10 →	09○ 10○ →
e) Full pay from this employer?	110 120	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
f) Partial pay from this employer?		
g) Any other financial compensation?	13○ 14○ →	13○ 14○ →

JOB 1 3	JOB 1 4	JOB 1 5
Yes ³ Go to 20	Yes ³ Go to 20	Yes ³ Go to 20
No ⁴ Go to 19	No ⁴ Go to 19	No ⁴ () Go to 19
D D M M Y Y	D D M M Y Y	D D M M Y Y
Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Ves ⁶ ◯ Go to 23 No ⁶ ◯ Go to 21
Ves ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22	Yes ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22
D D M M Y Y Go to 23	D D M M Y Y	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
	WORK AT EACH JOB BEFORE 1990	
¹	¹⊜ Go to 24 ²⊜ Go to 25	¹⊜ Go to 24 ²⊜ Go to 25
D D M M Y Y	D D M M Y Y	D D M M Y Y
³ Go to 26 ⁴ Go to 38	³○ Go to 26 ⁴○ Go to 38	³ ○ Go to 26 ⁴ ○ Go to 38
Yes $\stackrel{5}{\bigcirc}$ Go to 27 No $\stackrel{6}{\bigcirc}$ Go to 38	Yes ⁵ ◯ Go to 27 No ⁶ ◯ Go to 38	Yes ⁵ ◯ Go to 27 No ⁶ ◯ Go to 38
Before Jan. 1, 1989 ⁷ Go to 38	Before Jan. 1, 1989 ⁷ Go to 38	Before Jan. 1, 1989 ⁷ Go to 38
OR	OR	OR 8 9 Go to 28
Yes ⁸ ◯ Go to 29 No ⁹ ◯ Go to 38	Yes ⁸	Yes ⁸ ◯ Go to 29 No ⁹ ◯ Go to 38
Enter code	Enter code	Enter code
¹◯ Go to 55 ²◯ Go to 31	¹◯ Go to 55 ²◯ Go to 31	¹
No Yes No. of weeks 01	No Yes No. of weeks 01	No Yes No. of weeks 01
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF	Yes ³ Go to 20	Yes ³ Go to 20
JANUARY 1990 (i.e., immediately after New Year's)?	No ⁴ ◯ Go to 19	No ⁴ ◯ Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
21 I AST WEFK, DID STILL HAVE THIS JOB OR BUSINESS?	Veo ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22	Ves ⁷ Go to 23 No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y Go to 23	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
	WORK AT EACH JOB BEFORE 1990	
32. INTERVIEWER CHECK ITEM:		
If code 01, 09 or 10 (own illness, accident or pregnancy) in Item 29	. 1 Go to 55	1 Go to 55
Otherwise	² Go to 33	² Go to 33
33. DID LOOK FOR WORK AT ANY TIME DURING THIS ABSENCE?	Yes ³ Go to 34 No ⁴ Go to 35	Yes ³ Go to 34 No ⁴ Go to 35
34. WHAT DID DO TO FIND WORK DIBING THIS ARSENCE? (Mark all methode reported)	Enter code(s) and Go to 36	Enter code(s) and Go to 30
35. DID WANT A JOB AT ANY TIME DURING THIS ABSENCE?	Yes ⁵ ◯ Go to 36 No ⁶ ◯ Go to 55	Yes ⁵ ◯ Go to 36 No ⁶ ◯ Go to 55
36. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS ABSENCE?	Enter code	Enter code
37. INTERVIEWER CHECK ITEM:		
If code 1 (Paid Worker) in Item 15	⁷ Go to 56	⁷ Go to 56
If code 2 or code 6 in Item 15	1	8 Go to 124
Otherwise	⁹ ◯ Qo to 120	9 Qo to 120
38. INTERVIEWER CHECK ITEM:	Yes ¹ Go to 39	Yes ¹ Go to 39
Is this the first job at which this person worked in 1990?	No ² Go to 40	No ² Go to 40

JOB 1 3	JOB 1 4	JOB 1 5
Yes ³ Go to 20	Yes ³ Go to 20	Yes ³ Go to 20
No ⁴ Go to 19	No ⁴ O Go to 19	No ⁴ ☐ Go to 19
D D M M Y Y	D D M M Y Y	D D M M Y Y
Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22
D D M M Y Y Go to 23	D D M M Y Y Go to 23	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
	WORK AT EACH JOB BEFORE 1990	
¹ Go to 55 ² Go to 33	1 Go to 55 2 Go to 33	○ Go to 55 ² ○ Go to 33
Yes ³	Yes ³	Yes ³ Go to 34 No ⁴ Go to 35
Enter code(s) and Go to 36	Enter code(s) and Go to 36	Enter code(s) and Go to 36
Yes ⁵ ◯ Go to 36 No ⁶ ◯ Qo to 55	Yes ⁵	Yes ⁵ ◯ Go to 36
Enter code	Enter code	Enter code
⁷ Go to 56 ⁸ Go to 124 ⁹ Go to 120	⁷ ○ Go to 56 ⁶ ○ Go to 124 ⁹ ○ Go to 120	⁷
Yes ¹	Yes ¹ Go to 39	Yes ¹

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	Yes ³ Go to 20	Yes ³ Go to 20
Year's)?	No ⁴ Go to 19	No "O Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y Go to 23	D D M M Y Y
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
JOB SEARCH	ACTIVITIES BEFORE STARTING WORK	AT EACH JOB
39. PRIOR TO STARTING THIS JOB OR BUSINESS ON (repeat date in Item 19), SEEMS TO HAVE A PERIOD OF NOT WORKING AT ANY JOB. WHEN DID THIS	Go to 41	D D M M Y Y
PERIOD START?	OR	OR
	Never worked before ² Go to 49	Never worked before ³ Go to 49
40. IS THERE A PERIOD OF A WEEK OR MORE IMMEDIATELY PRIOR TO (repeat date in Item 19) DURING WHICH DID NOT WORK AT ANY JOB?	Yes ⁴ Go to 41 No ⁵ Go to 55	Yes ⁴ ◯ Go to 41 No ⁵ ◯ Go to 55
41. DID LOOK FOR WORK AT ANY TIME DURING THIS PERIOD?	Yes ⁶ Go to 42 No ⁷ Go to 45	Yes ⁶ ◯ Go to 42 No ⁷ ◯ Go to 45
42. WHAT DID DO TO FIND WORK DURING THIS PERIOD? (Mark all methods reported)	Enter code(s)	Enter code(s)
43. IN HOW MANY CONSECUTIVE WEEKS BEFORE THE START OF THIS JOB WAS LOOKING FOR WORK?	Weeks	Weeks
44. DID ANY OF THE FOLLOWING CAUSE DIFFICULTY WHEN LOOKING FOR WORK?	Yes No	Yes No
a) Not having enough information about available jobs		010 020
b) Not having the skills or experience for available jobs		03 04 0
c) Not having enough education for available jobs	05 08 ao to 40	05 06 06 06 06 06 16
d) Having a long-term physical condition, mental condition, or health problem	07 08 0	07 08 0
e) A shortage of jobs in the area	090 100	090 100
f) Anything else?	110 120	110 120
45. DID WANT A JOB AT ANY TIME DURING THIS PERIOD?	Yoo ¹	Voc ¹
46. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS PERIOD?	Enter code	Enter code
47. DID RECEIVE UNEMPLOYMENT INSURANCE BENEFITS DURING THIS PERIOD?	Yes ³ ○ No ⁴ ○	Yes ³ ○ No ⁴ ○

JOB 1 3	JOB 1 4	JOB 1 5
Yes ³ Go to 20	Yes ³ Go to 20	Yes ³ Go to 20
No ⁴ Go to 19	No ⁴ O Go to 19	No ⁴ ◯ Go to 19
D M M Y Y	D D M M Y Y	D D M M Y Y
Yes ⁵ ◯ Go to 23	Yes ⁵ Go to 23	Yes ⁵ Go to 23
No ⁶ Go to 21	No ⁶ Go to 21	No ⁶ Go to 21
Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22	Yes ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22
D D M M Y Y Go to 23	D D M M Y Y Go to 23	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
JOB SEARCH	ACTIVITIES BEFORE STARTING WORK	AT EACH JOB
D D M M Y Y Go to 41	D D M M Y Y Go to 41	D D M M Y Y Go to 41
OR	OR	OR
Never worked before ³ Go to 49	Never worked before ³ Go to 49	Never worked before ³ Go to 49
Yes ⁴ ◯ Go to 41	Yes ⁴ Go to 41	Yes ⁴ Go to 41
No ⁵ Go to 55	No ⁵ ◯ Go to 55	No ⁵ ◯ Go to 55
Yes ⁶ Go to 42	Yes ⁶ Go to 42	Yes ⁶ Go to 42
No (Go to 45	No (Go to 45	No (Go to 45
Enter code(s)	Enter code(s)	Enter code(s)
Weeks	Weeks	Weeks
Yes No 01	Yes No	Yes No
030 040	03 04	030 040
·		
05 O6 Go to 46	05 O 6 O Go to 46	06 to 46
07 08	07 08	07 08
090 100	090 100	090 100
110 120	110 120	110 120)
Yes ¹ Go to 46	Yes ¹ Go to 46	Yes ¹ Go to 46
No ² Go to 47	No ² O Go to 47	No ² Go to 47
Enter code	Enter code	Enter code
Yes ³ ○ No ⁴ ○	Yes ³ ○ No ⁴ ○	Yes ³ ○ No ⁴ ○

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR	Yes ³ () Go to 20	Yes ³ Go to 20
BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)?		10
rear sy:	No *C Go to 19	No *() Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	9 0	9 0
	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ Go to 23	Yes ⁵ Go to 23
ON BUSINESS:	No ⁶ Go to 21	No ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	√00 ⁷ Go to 23	Ves 7 Gn to 23
22. WHEN DID LAST WORK AT THIS JOB	No Go to 22	No Go to 22
OR BUSINESS?	D D M M Y Y	D D M M Y Y
COMPLETE ITEMS	11 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
)
(Col.'s 12 to 15) FOR WHOM DID WORK?		
JOB SEARCI	ACTIVITIES BEFORE STARTING WORK	AT EACH JOB
48. INTERVIEWER CHECK ITEM:		
If Code 1 (Paid Worker) in Item 15	5 Go to 56	⁵ Go to 56
If code 2 or code 6 in Item 15		6 Go to 124
Otherwise	7 Go to 120	7 Go to 120
	0 00 120	0 3 0 1
49. DID LOOK FOR WORK AT ANY TIME IN THE WEEKS JUST PRIOR TO (repeat	Yes ⁸ ◯ Go to 50	Yes ⁸ Go to 50
date in Item 19)?	No ⁹ Go to 53	No ⁹ Go to 53
50. WHAT DID DO TO FIND WORK DURING		
THIS PERIOD? (Mark all methods reported)	Enter code(s)	Enter code(s)
51. IN HOW MANY CONSECUTIVE WEEKS		
JUST BEFORE THE START OF THIS JOB WAS LOOKING FOR WORK?	Weeks	Weeks
52. DID ANY OF THE FOLLOWING CAUSE		
DIFFICULTY WHEN LOOKING FOR WORK?	Yes No	Yes No
a) Not having enough information about available lobs	010 020	010 020
b) Not having the skills or experience	03 04	03 04
for available jobs		
available jobs	05 06 Go to 5.4	05 06 Go to 54
 d) Having a long-term physical con- dition, mental condition, or health 	07 08	07 08
problem		1
e) A shortage of jobs in the area		09 10
f) Anything else?	110 120	110 120)
53. DID WANT A JOB AT ANY TIME	Yes ¹ Go to 54	Yes ¹ Go to 54
DURING THIS PERIOD?	No ² Go to 55	No ² Go to 55
54. WAS THERE ANY REASON COULD		
NOT TAKE A JOB DURING THIS PERIOD?	Enter code	Enter code
CO. INTERVENCE OFFICE TEST		
55. INTERVIEWER CHECK ITEM:	30 00 10 50	3 00 10 56
If code 1 (Paid Worker) in Item 15 If code 2 or code 6 in Item 15	1 0	Go to 56
If code 2 or code 6 in Item 15 Otherwise	"() Go to 124 5() Go to 120	⁴ () Go to 124 ⁵ () Go to 120
Otherwise		O GO 10 120
56. IN THE MONTHS THAT WORKED AT	Always the same ⁶ Go to 58	Always the same ⁶ Go to 58
THIS JOB IN 1990, DID HE/SHE ALWAYS WORK THE SAME NUMBER OF WEEKS, OR	7.0	70
DID IT VARY FROM MONTH TO MONTH?	Varied (Go to 57	Varied ' Go to 57
57. WAS THIS BECAUSE OF AN ON-CALL	Yes ⁸ ◯ Go to 99	Yes ⁸ Go to 99
ARRANGEMENT?	No ⁹ Go to 58	No ⁹

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)?	Yes ³	Yes ³ ◯ Go to 20
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y Go to 23	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
JOB SEARCH	ACTIVITIES BEFORE STARTING WORK	AT EACH JOB
48. INTERVIEWER CHECK ITEM: • If Gode 1 (Paid Worker) in Item 15	1	⁵ ⊖ ⊖ ພ ພ ວວ ⁶ ⊖ Go to 124 ⁷ ⊖ Go to 120
49. DID LOOK FOR WORK AT ANY TIME IN THE WEEKS JUST PRIOR TO (repeat date in Item 19)?	Yes ⁸ Go to 50 No ⁹ Go to 53	Yes ⁸ Go to 50 No ⁹ Go to 53
50. WHAT DID DO TO FIND WORK DURING THIS PERIOD? (Mark all methods reported)	Enter code(s)	Enter code(s)
51. IN HOW MANY CONSECUTIVE WEEKS JUST BEFORE THE START OF THIS JOB WAS LOOKING FOR WORK?	Weeks	Weeks
52. DID ANY OF THE FOLLOWING CAUSE DIFFICULTY WHEN LOOKING FOR WORK?	Yes No	Yes No
a) Not having enough information about available jobs	010 020	010 020
b) Not having the skills or experience for available jobs	03 04 0	03 04 0
c) Not having enough education for available jobs	05 06 Go to 54	05 06 Go to 54
d) Having a long-term physical con- dition, mental condition, or health problem)7	07 08 0 09 10
e) A shortage of jobs in the area f) Anything else?	110 120	110 120
53. DID WANT A JOB AT ANY TIME DURING THIS PERIOD?	Yes ¹ ◯ Go to 54 No ² ◯ Go to 55	Yes ¹ ◯ Go to 54 No ² ◯ Go to 55
54. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS PERIOD?	Enter code	Enter code
55. INTERVIEWER CHECK ITEM:		
If code 1 (Paid Worker) in Item 15	³ Go to 56	³ Go to 56
If codo 2 or codo 6 in Itom 15 Otherwise	⁴ Go to 121 ⁵ Go to 120	⁴
56. IN THE MONTHS THAT WORKED AT THIS JOB IN 1990, DID HE/SHE ALWAYS WORK THE SAME NUMBER OF WEEKS, OR DID IT VARY FROM MONTH TO MONTH?	Always the same ⁶ Go to 58 Varied ⁷ Go to 57	Always the same ⁶ Go to 58 Varied ⁷ Go to 57
57. WAS THIS BECAUSE OF AN ON-CALL ARRANGEMENT?	Yes ⁸ ◯ Go to 99 No ⁹ ◯ Go to 58	Yes ⁸ ◯ Go to 99 No ⁹ ◯ Go to 58

	,	
	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF	Yes ³ Go to 20	Yes ³ Go to 20
JANUARY 1990 (i.e., immediately after New Year's)?	No ⁴ Go to 19	No ⁴ ◯ Go to 19
·	~	
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
		V ² ○ 00 1- 22
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ Go to 23 No ⁶ Go to 21	Yes [®] Go to 23 No ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS	Yes ⁷ Go to 23	Yes ⁷ Go to 23
JOB OR BUSINESS?	No ⁸ Go to 22	No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	Go to 23	Go to 23
	D D M M Y Y	D D M M Y Y
	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID	 	
HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
	ABSENCES FROM EACH JOB IN 1990	
58. NOT COUNTING FULLY PAID VACATION		10
OR EDUCATION LEAVE, DID WORK CONTINUOUSLY AT THIS JOB FROM (beginning of language/reposet date in Item 19)	Yes 1 Go to 99	Yes ' Go to 99
(beginning of January/repeat date in Item 19) UNTIL (repeat date in Item 22/last week) WITH NO BREAKS OF A WEEK OR MORE?	No ² Go to 59	No *() Go to 59
59 AFTER (beginning of January/repeat date in		
Item 19), WHEN DID FIRST STOP WORKING AT THIS JOB?	D D M M Y Y	D D M M Y Y
60. WHAT WAS THE MAIN REASON FOR	Entor code	Enter code
STOPPING WORK?	Enter code	Carla Code
61. DID RECEIVE ANY OF THE FOLLOWING KINDS OF FINANCIAL COMPENSATION FOR THIS ABSENCE?		
For each type of compensation received, ask:		
HOW MANY WEEKS OF (repeat type of compensation) DID RECEIVE FOR THIS ABSENCE?	No. of No. of weeks	No. of No Yes weeks
a) Unemployment Insurance?	0¹○ 0²○ →	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$
b) Worker's Compensation?	03 04 →	
c) Group Insurance?	05	05
d) Automobile Insurance?	090 100	09○ 10○ →
e) Full pay from this employer?	110 120	$\begin{array}{c c} & & & & \\ & & \\ & & & \\ & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\$
f) Partial pay from this employer?	130 140 →	130 140 →
g) Any other financial compensation?		
62. INTERVIEWER CHECK ITEM:		
If code 01, 09 or 10 (own illness, accident or pregnancy) in Item 60	¹○ Go to 67	¹
Otherwise	² Go to 63	² Go to 63
63. DID LOOK FOR WORK AT ANY TIME	Yes ³ Go to 64	Yes ³ ◯ Go to 64
DURING THIS ABSENCE?	No ⁴ Go to 65	No ⁴ ◯ Go to 65
64. WHAT DID DO TO FIND WORK DURING THIS ARSENCE? (Mark all methods reported)	Enter code(s) and Qo to 66	Enter code(s) and Go to 66
65. DID WANT A JOB AT ANY TIME	Yes ⁵ ◯ Go to 66	Yes ⁵ ◯ Go to 66
DURING THIS ABSENCE?	No ⁶ ◯ Go to 67	No ⁶ ◯ Go to 67
66. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS	Enter code	Enter code

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF	Yes ³ Go to 20	Yes ³ Go to 20
JANUARY 1990 (i.e., immediately after New Year's)?	No ⁴ ◯ Go to 19	No ⁴ Go to 19
19. IN 1990, WHEN DID FIRST START		
WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20, LAST WEEK, DID WORK AT THIS JOB	Yes ⁵ () Go to 23	Yes ⁵ ◯ Go to 23
OR BUSINESS?	No ⁶ Go to 21	No ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS	Yes ⁷ Go to 23	Yes ⁷ Go to 23
JOB OR BUSINESS?	No ⁸ Go to 22	No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?		D D M M Y Y Go to 23
• COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
* COMPLETE TIEMS	THROUGH IT FOR ALL JOBS BEI ONE	001011 22:1100 172111 10
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
	ABSENCES FROM EACH JOB IN 1990	
SO NOT COUNTING FULLY DATE VIOLET	1	T
58. NOT COUNTING FULLY PAID VACATION OR EDUCATION LEAVE, DID WORK	Yes ¹ Go to 99	Yes ¹ Go to 99
CONTINUOUSLY AT THIS JOB FROM (beginning of January/repeat date in Item 19)	20	3 6
UNTIL (repeat date in Item 22/last week) WITH NO BREAKS OF A WEEK OR MORE?	No Go to 59	No *() Go to 59
WITH NO BILLAND OF A VEEK ON WORL.		
59. AFTER (beginning of January/repeat date in Item 19), WHEN DID FIRST STOP		
WORKING AT THIS JOB?	D D M M Y Y	D D M M Y Y
60. WHAT WAS THE MAIN REASON FOR STOPPING WORK?	Enter code	Enter code
61. DID RECEIVE ANY OF THE		
FOLLOWING KINDS OF FINANCIAL COMPENSATION FOR THIS ABSENCE?		
For each type of compensation received, ask:		
HOW MANY WEEKS OF (repeat type of		
compensation) DID RECEIVE FOR THIS ABSENCE?	No. of No Yes weeks	No. of weeks
a) Unemployment Insurance?		
b) Worker's Compensation?	03○ 04○ →	03 04
c) Group Insurance?	05○ 06○ →	05○ 06○ →
d) Automobile Insurance?	"° →	"() "() →
e) Full pay from this employer?	09 10 →	09○ 10○ →
f) Partial pay from this employer?	11○ 12○ →	11○ 12○ →
g) Any other financial compensation?	13○ 14○ →	13○ 14○ →
g, Any outs imancial compensation:	<u> </u>	
62. INTERVIEWER CHECK ITEM:		
 If COGE U1, U9 or 10 (own illness, accident or pregnancy) in Item 60	¹ Go to 67	¹ Go to 67
	² () Go to 63	² () Go to 63
Otherwise	<u> </u>	
63. DID LOOK FOR WORK AT ANY TIME DURING THIS ABSENCE?	Yes ³ ◯ Go to 64	Yes ³ ◯ Go to 64
	No ⁴ Go to 65	No ⁴ ◯ Go to 65
64. WHAT DID DO TO FIND WORK DURING		
THIC ADECNOC? (Mark all methods reported)	Enter code(s) and Go to 66	Enter code(s) and Go to 66
65. DID WANT A JOB AT ANY TIME	Yes ⁵ ◯ Go to 66	Yes ⁵ ◯ Go to 66
DURING THIS ABSENCE?	No ⁶ Go to 67	No ⁶ Go to 67
CO. WAS THERE AND PRODUCT	<u> </u>	<u> </u>
66. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS ABSENCE?	Enter code	Enter code

·	JOR 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	Yes ³ Go to 20	Yes ³ Go to 20
Year's)?	No. ⁴ ○ Go to 19	No ⁴ ○ Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y Go to 23	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST		
DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
	ABSENCES FROM EACH JOB IN 1990	
67. WHEN DID RETURN TO THIS JOB?	Has not yet returned ⁷ Go to 101	Has not yet returned ⁷ Go to 101
	D D M M Y Y	D D M M Y Y
68. NOT COUNTING FULLY PAID VACATION OR EDUCATION LEAVE, DID HAVE A SECOND BREAK OF A WEEK OR MORE FROM THIS JOB (I.E., SINCE (repeat date in Item 67))?	Yes ¹ Go to 69 No ² Go to 99	Yes ¹ Go to 69 No ² Go to 99
69. AFTER (repeat date in Item 67) WHEN DID NEXT STOP WORKING AT THIS JOB?	D D M M Y Y	D D M M Y Y
70. WHAT WAS THE MAIN REASON FOR STOPPING WORK?	Enter code	Enter code
71. DID RECEIVE ANY OF THE FOLLOWING KINDS OF FINANCIAL COMPENSATION FOR THIS ABSENCE? For each type of compensation received, ask:		
HOW MANY WEEKS OF (repeat type of compensation) DID RECEIVE FOR THIS ABSENCE?	No. of weeks	No. of Weeks
a) Unemployment Insurance?	03 04	$ \begin{array}{ccc} 01 & 02 & \longrightarrow \\ 03 & 04 & \longrightarrow \\ \end{array} $
c) Group Insurance?	05 06 ->	05○ 06○ →
d) Automobile Insurance?	07	07 08 →
e) Full pay from this employer?	110 120	08 10
f) Partial pay from this employer? g) Any other financial compensation?	130 140 →	130 140 →
72. INTERVIEWEH CHECK I EM:		
If code 01, 09 or 10 (own illness, accident or pregnancy) in Item 70	¹⊜ Go to 77	¹⊜ Go to 77
Otherwise	² Go to 73	² Go to 73
73. DID LOOK FOR WORK AT ANY TIME DURING THIS ABSENCE?	Yes ³	Yes ³
74. WHAT DID DO TO FIND WORK DURING THIS ABSENCE? (Mark all methods reported)	Enter code(s) and Go to 76	Enter code(s) and Go to 76
75. DID WANT A JOB AT ANY TIME DURING THIS ABSENCE?	Yes ⁵ ◯ Go to 76 No °◯ Go to 77	Yes ⁵ ◯ Go to 76 No °◯ Go to 77
76. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS ABSENCE?	Enter code	Enter code

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)?	Yes ³ Go to 20	Yes ³ Go to 20 No ⁴ Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22	Yes ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y Go to 23	D D M M V V Go to 23
COMPLETE ITEMS 1:	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
	ABSENCES FROM EACH JOB IN 1990	
67. WHEN DID RETURN TO THIS JOB?	Has not yet returned ⁷ Go to 101 OR Go to 68	Has not yet returned ⁷ Go to 101 OR D D M M Y Y
68. NOT COUNTING FULLY PAID VACATION OR EDUCATION LEAVE, DID HAVE A SECOND BREAK OF A WEEK OR MORE FROM THIS JOB (I.E., SINCE (repeat date in Item 67))?	D D M M Y Y Yes ¹ Go to 69 No ² Go to 99	P D M M Y Y Yes ¹ Go to 69 No ² Go to 99
69. AFTER (repeat date in Item 67) WHEN DID NEXT STOP WORKING AT THIS JOB?	D D M M Y Y	D D M M Y Y
70. WHAT WAS THE MAIN REASON FOR STOPPING WORK?	Enter code	Enter code
71. DID RECEIVE ANY OF THE FOLLOWING KINDS OF FINANCIAL COMPENSATION FOR THIS ABSENCE? For each type of compensation received, ask: HOW MANY WEEKS OF (repeat type of compensation) DID RECEIVE FOR THIS	No. of	No. of
ABSENCE? a) Unemployment Insurance? b) Worker's Compensation? c) Group Insurance? d) Automobile Insurance?	03\(\) 04\(\) \rightarrow \(\) 05\(\) 06\(\) \rightarrow \(\) 08\(No Yes weeks 01
e) Full pay from this employer?	110 120	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
Provided HTML 172. INTERVIEWER CHECK ITEM: If code 01, 09 or 10 (own illness, accident or pregnancy) in Item 70	¹	¹◯ Go to 77 ²◯ Go to 73
73. DID LOOK FOR WORK AT ANY TIME DURING THIS ABSENCE?	Yes ³	Yes ³ Go to 74 No ⁴ Go to 75
74. WHAT DID DO TO FIND WORK DURING THIS ABSENCE? (Mark all methods reported)	Enter code(s) and Go to 76	Enter code(s) and Go to 76
75. DID WANT A JOB AT ANY TIME DURING THIS ABSENCE?	Yes ⁵ ◯ Go to 76 No ⁶ ◯ Go to 77	Yes ⁵ ◯ Go to 76 No ⁶ ◯ Go to 77
76. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS ABSENCE?	Enter code	Enter code

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	Yes ³ Go to 20	Yes ³ Go to 20
Year's)?	No ⁴ Go to 19	No ⁴ Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes ⁷	Yes ⁷
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
	ABSENCES FROM EACH JOB IN 1990	
77. WHEN DID RETURN TO THIS JOB?	Has not yet returned ⁷ Go to 101	Has not yet returned ⁷ Go to 101
	D D M M Y Y	D D M M Y Y
78. NOT COUNTING FULLY PAID VACATION OR EDUCATION LEAVE, DID HAVE A THIRD BREAK OF A WEEK OR MORE FROM THIS JOB (IE., SINCE (repeat date in Item 77))?	Yes ¹	Yes ¹
79. AFTER (repeat date in Item 77) WHEN DID NEXT STOP WORKING AT THIS JOB?	D D M M Y Y	D D M M Y Y
80. WHAT WAS THE MAIN REASON FOR STOPPING WORK?	Enter code	Enter code
81. DID RECEIVE ANY OF THE FOLLOWING KINDS OF FINANCIAL COMPENSATION FOR THIS ABSENCE? For each type of compensation received, ask:		
HOW MANY WEEKS OF (repeat type of compensation) DID RECEIVE FOR THIS ABSENCE?	No. of weeks 01	No Yes Weeks
a) Unemployment Insurance? b) Worker's Compensation? c) Group Insurance?	05 06 →	05 06 06 06 06 06 06 06 06 06 06 06 06 06
d) Automobile Insurance?	07	07
e) rull pay from this employer?	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	11 12 →
g) Any other financial compensation?	13○ 14○ →	13○ 14○ →
02. INTERVIEWER CHECK ITEM:		
If code 01, 09 or 10 (own illness, accident or pregnancy) in Item 80 Otherwise	¹	¹ Go to 87 ² Go to 83
83. DID LOOK FOR WORK AT ANY TIME DURING THIS ABSENCE?	Yes ³	Yes ³ ◯ Go to 84
84. WHAT DID DO TO FIND WORK DURING THIS ABSENCE? (Mark all methods reported)	Enter code(s) and Go to 86	Enter code(s) and Go to 86
85. DID WANT A JOB AT ANY TIME DURING THIS ABSENCE?	Yes ⁵ ◯ Go to 86 No ⁶ ◯ Go to 87	Yes ⁵ ◯ Go to 86 No ⁶ ◯ Go to 87
86. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS ABSENCE?	Enter code	Enter code

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR	Yes ³ Go to 20	Yes ³ Go to 20
BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	Yes	10
Year's)?	No ⁴ Go to 19	No ⁴ () Go to 19
19. IN 1990, WHEN DID FIRST START		
WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
, , , , , , , , , , , , , , , , , , ,	5.0	5 0 4 00
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁶ Go to 23	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
AND THE PROPERTY OF THE PROPER	No Go to 21	
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Voc ' ◯ Go to 23 No ⁸ ◯ Go to 22	Yes [′] ◯ Go to 23 No ⁸ ◯ Go to 22
22. WHEN DID LAST WORK AT THIS JOB	10 0 00 022	
OR BUSINESS?	D D M M Y Y	D D M M Y Y
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST		
DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
	ABSENCES FROM EACH JOB IN 1990	
TT WUELDING DETURN TO THE LODG	700010	70 0-4-101
77. WHEN DID RETURN TO THIS JOB?	Has not yet returned (Go to 101	Has not yet returned (Go to 101
	UK .	ON .
	D D M M Y Y	D D M M Y Y
78. NOT COUNTING FULLY PAID VACATION		
OR EDUCATION LEAVE, DID HAVE A THIRD BREAK OF A WEEK OR MORE	Yes ¹ Go to 79	Yes ¹ Go to 79
FROM THIS JOB (IE., SINCE (repeat date in Item 77))?	No ² Go to 99	No ² Go to 99
79. AFTER (repeat date in Item 77) WHEN		
DID NEXT STOP WORKING AT THIS JOB?	D D M M Y Y	D D M M Y Y
80. WHAT WAS THE MAIN REASON FOR		
STOPPING WORK?	Enter code	Enter code
81. DID RECEIVE ANY OF THE FOLLOWING KINDS OF FINANCIAL		
COMPENSATION FOR THIS ABSENCE? For each type of compensation received, ask:		
HOW MANY WEEKS OF (repeat type of compensation) DID RECEIVE FOR THIS	No. of	No. of
ABSENCE?	No Yes weeks 01 02 → Weeks	No Yes weeks $\begin{array}{ccc} & & & & & & & & & & & & & & & & & & & $
a) Unemployment Insurance? b) Worker's Compensation?	03 04 1	03 04 ->
c) Group Insurance?	050 060	05 06 ->
d) Automobile Insurance?	07○ 08○ →	07
e) Full pay from this employer?	110 120	110 120 -
f) Partial pay from this employer?	130 140	130 140 →
g) Any other financial compensation? 82. INTERVIEWER CHECK ITEM:		
If code 01, 09 or 10 (own illness, accident)		
or pregnancy) in Item 80	1 Go to 87	1 Go to 87
Otherwise	² () Go to 83	€ Go to 83
83. DID LOOK FOR WORK AT ANY TIME DURING THIS ABSENCE?	Yes ³ Go to 84	Yes ³ Go to 84
	No ⁴ Go to 85	No ⁴ Go to 85
84. WHAT DID DO TO FIND WORK DURING THIS ABSENCE? (Mark all	Enter code(s) and Go to	Enter code(s) and Go to
methods reported)		86
85. DID WANT A JOB AT ANY TIME DURING THIS ABSENCE?	Yes ⁵ Go to 86	Yes ⁵ ◯ Go to 86
	No ⁶ ◯ Go to 87	No ⁵ ◯ Go to 87
86. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS		
ABSENCE?	Enter code	Enter code

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	Yes ³ Go to 20	Yes ³ Go to 20
Year's)?	No ⁴ Go to 19	No * Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Vec ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
	ABSENCES FROM EACH JOB IN 1990	
87. WHEN DID RETURN TO THIS JOB?	Has not yet returned ⁷ Go to 101	Has not yet returned ⁷ Go to 101
	D D M M Y Y	D D M M Y Y
88. NOT COUNTING FULLY PAID VACATION OR EDUCATION LEAVE, DID HAVE A FOURTH BREAK OF A WEEK OR MORE FROM THIS JOB (I.E., SINCE (repeat date in Item 87))?	Yes ¹ ◯ Go to 89 No ² ◯ Go to 99	Yes ¹
89. AFTER (repeat date in Item 87) WHEN DID NEXT STOP WORKING AT THIS JOB?	D D M M Y Y	D D M M Y Y
90. WHAT WAS THE MAIN REASON FOR STOPPING WORK?	Enter code	Enter code
91. DID RECEIVE ANY OF THE FOLLOWING KINDS OF FINANCIAL COMPENSATION FOR THIS ABSENCE?		
For each type of compensation received, ask: HOW MANY WEEKS OF (repeat type of		
compensation) DID RECEIVE FOR THIS ABSENCE?	No. of weeks	No. of weeks 01
a) Unemployment Insurance?	03 04	03 04 ->
c) Group Insurance?	05 06 →	05 06 →
d) Automobile Insurance?	07	07
e) Full pay from this employer?	110 120 	110 120 →
g) Any other financial compensation?	13○ 14○ →	13○ 14○ →
92. INTERVIEWER CHECK ITEM:		
If code 01, 09 or 10 (own illness, accident or pregnancy) in Item 90 Otherwise	¹○ Go to 97 ²○ Go to 93	¹
93. DID LOOK FOR WORK AT ANY TIME DURING THIS ABSENCE?	Yes ³ Go to 94 No ⁴ Go to 95	Yes ³ ◯ Go to 94 No ⁴ ◯ Go to 95
94. WHAT DID DO TO FIND WORK DURING THIS ABSENCE? (Mark all methods reported)	Enter code(s) and Go to 96	Enter code(s) and Go to 96
95. DID WANT A JOB AT ANY TIME DURING THIS ABSENCE?	Yes ⁵ ◯ Go to 96 No [©] ◯ Go to 97	Yes ⁵ ◯ Go to 96 No ⁶ ◯ Go to 97
96. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS ABSENCE?	Enter code	Enter code

JOB 1 3	JOB 1 4	JOB 1 5
Yes ³ Go to 20	Yes ³ Go to 20	Yes ³ Go to 20
No ⁴ ◯ Go to 19	No ⁴ Go to 19	No Go to 19
D D M M Y Y	D D M M Y Y	D D M M Y Y
Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷
D D M M Y Y Go to 23	D D M M Y Y Go to 23	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
	ABSENCES FROM EACH JOB IN 1990	
Has not yet returned ⁷ Go to 101	Has not yet returned ⁷ Go to 101	Has not yet returned ⁷ Go to 101
D D M M Y Y	D D M M Y Y	D D M M Y Y Go to 88
	D W W W Y	U U WI WI I
Yes $^1\bigcirc$ Go to 89 No $^2\bigcirc$ Go to 99	Yes ¹	Yes ¹ Go to 89 No ² Go to 99
D D M M Y Y	D D M M Y Y	D D M M Y Y
Enter code	Enter code	Enter code
No Yes No. of weeks 01	No Yes No. of weeks 01 02	No Yes Weeks 01 02
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$
1 Go to 97 2 Go to 93	¹○ Go to 97 ²○ Go to 93	¹
Yes ³	Yes ³ ◯ Go to 94 No ⁴ ◯ Go to 95	Yes ³
Enter code(s) and Go to 96	Enter code(s) and Go to 96	Enter code(s) and Go to 96
Yes ⁵ ◯ Go to 96 No ⁶ ◯ Go to 97	Yes ⁵ Go to 96 No ⁶ Go to 97	Yes ⁵ Go to 96 No ⁶ Go to 97
Enter code	Enter code	Enter code

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF	Yes ³ Go to 20	Yes ³ Go to 20
JANUARY 1990 (i.e., immediately after New Year's)?	No ⁴ ◯ Go to 19	No ⁴ Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Voo ⁷ ◯ Go to Ω3 No ⁸ ◯ Go to 22	Vec ⁷ Go to 23 No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y Go to 23	D D M M Y Y
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO 'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
	ABSENCES FROM EACH JOB IN 1990	
97. WHEN DID RETURN TO THIS JOB?	Has not yet returned ⁷ Go to 101	Has not yet returned ⁷ Go to 101
	OR	OR
	D D M M Y Y Go to 98	D D M M Y Y Go to 98
98. NOT COUNTING FULLY PAID VACATION OR EDUCATION LEAVE, DID HAVE ANY OTHER BREAKS OF A WEEK OR MORE FROM THIS JOB (I.E., SINCE (repeat date in Item 97))?	Yes ¹ O	Yes ¹ No ²
99. INTERVIEWER CHECK ITEM: • If date entered in Item 22 (i.e., Job ended)	³ Go to 100	³ ○ Go to 100
Otherwise (Item 22 is blank)	⁴ Go to 101	⁴ ◯ Go to 101
100. WHAT WAS THE MAIN REASON LEFT THAT JOB ON (repeat date in Item 22)?	Enter code	Enter code
JO	B CHARACTERISTICS FOR PAID WORKE	RS
101. HOW MANY WEEKS PER MONTH DID USUALLY WORK AT THIS JOB?	Weeks	Weeks
102. IN THOSE WEEKS, HOW MANY PAID DAYS PER WEEK DID HE/SHE USUALLY WORK?	Daye	Days
103. ON THOSE DAYS, HOW MANY PAID HOURS PER DAY DID HE/SHE USUALLY WORK?	Hours	. Hours
104. HOW MANY ADDITIONAL HOURS PER MONTH, IF ANY, WOULD HAVE PREFERRED TO WORK AT THIS JOB?	Hours Hours	Hours # 0 0 Go to 106
	ff 0 0 Go to 106	ff 0 Go to 106
105. WHAT WERE THE REASONS DID NOT WORK THESE ADDITIONAL HOURS AT THIS JOB? (Mark all reasons reported)	Enter code(s)	Enter code(s)

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)?	Yes ³	Yes ³ Go to 20 No ⁴ Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Voo ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22	Voo ⁷ ◯ Co to 29 No ⁸ ◯ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y Go to 23	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
JO	B CHARACTERISTICS FOR PAID WORKE	ERS
106. AT THIS JOB WAS PAID BY THE HOUR?	Yes ¹ O No ² O	Yes ¹ O
107. AT THIS JOB WHAT WAS 'S USUAL WAGE OR SALARY BEFORE TAXES AND OTHER DEDUCTIONS FROM THIS EMPLOYER?	\$	\$
108. IN 1990, WHAT WERE 'S TOTAL EARNINGS AT THIS JOB?	\$	\$
109. IN 1990, DID RECEIVE ANY COMMISSIONS, TIPS, BONUSES, OR PAID OVERTIME FROM THIS JOB?	Yes ¹	Yes ¹
110. WERE THESE COMMISSIONS, TIPS, BONUSES, OR PAID OVERTIME INCLUDED IN THE WAGE OR SALARY YOU JUST REPORTED?	Yes ³	Yes ³
111. IN 1990, WHAT WERE'S TOTAL EARNINGS FROM THESE COMMISSIONS, TIPS, BONUSES OR PAID OVERTIME?	\$	\$
112. IN THIS JOB WAS A MEMBER OF A UNION OR OTHER GROUP WHICH BARGAINS COLLECTIVELY WITH THIS EMPLOYER?	Yes ¹ Go to 114 No ² Go to 113	Yes ¹
113. ALTHOUGH WAS NOT A MEMBER OF A UNION, WERE HIS/HER WAGES COVERED BY A COLLECTIVE AGREE- MENT NEGOTIATED BY A UNION OR OTHER GROUP?	Yes ³○ No ⁴○	Yes ³ No ⁴

		F
JOB 1 3	JOB 1 4	JOB 1 5
Yes ³ Go to 20	Yes ³ Go to 20	Yes ³ Go to 20
No ⁴ Go to 19	No. 40 05 to 10	No ⁴ ◯ Go to 19
	No *O Go to 19	NO 0 40 to 19
1 9 0	9 0	9 0
D D M M Y Y	D D M M Y Y	D D M M Y Y
Yes ⁵ Go to 23	Yes ⁵ Go to 23	Yes ⁵ Go to 23
No ⁶ Go to 21	No ⁶ Go to 21	No ⁶ Go to 21
Ves. ⁷ Go to 23	Yes ⁷ Go to 23	Yes ⁷ Go to 23
No ⁸ Go to 22	No ⁸ Go to 22	No ⁸ Go to 22
D D M M Y Y Go to 23	D D M M Y Y Go to 23	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
Jı	OB CHARACTERISTICS FOR PAID WORK	ERS
Yes ¹	Yes ¹	Yes ¹
No ²	No ² ⊖	No ²
\$	\$	\$
1 Hourly	10 110	10
120	1 Hourly	1 Hourly
² Daily	Daily	² Daily
³ ○ Weekly	³ Weekly	³ Weekly
© Every two weeks Go to109	Every two weeks Go to109	Every two weeks Go to109
⁵ Twice a month	⁵ Twice a month	⁵ O Twice a month
⁶ O Monthly	⁶ Monthly	⁶ Monthly
⁷ O Yearly	⁷ Yearly	⁷ O Yearly
Other (Please specify and Go to 108)	Other (Please specify and Go to 108)	Other (Please specify and Go to 108)
		h
\$	\$	\$
Yes ¹ Go to 110	Yes ¹ Go to 110	Yes ¹ Go to 110
No ² Go to 112	No ² Go to 112	No ² Go to 112
Yes ³ Go to 112	Yes ³ Go to 112	Yes ³ Go to 112
No ⁴ Go to 111	Yes ⁴ Go to 112 No ⁴ Go to 111	Yes ⁴ Go to 112 No ⁴ Go to 111
		100 0 00 00 111
\$	\$	s
Yes ¹ Go to 114	Yes ¹ Go to 114	Yes ¹ Go to 114
No ² Go to 113	Yes Go to 114 No ² Go to 113	No ² Go to 113
140 0 00 10 113	140 G0 t0 113	NO GO 113
Yes ³	Yes ³	Yes ³
No ⁴ ○	No ⁴ O	No ⁴ O
l		0

	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF	Yes ³ Go to 20	Yes ³ Go to 20
JANUARY 1990 (i.e., immediately after New Year's)?	No ⁴ Go to 19	No ⁴ Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ Go to 23 No ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y Go to 23	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
JO	B CHARACTERISTICS FOR PAID WORKE	RS
114. WAS COVERED BY A PENSION PLAN CONNECTED WITH THIS JOB? (Do not count CPP/QPP, deferred profit sharing plans or personal savings plans for retirement.)	Yes ⁵ No ⁶	Yes ⁵ O No ⁶ O
115. WERE UNEMPLOYMENT INSURANCE PREMIUMS DEDUCTED FROM'S WAGES/SALARY AT THIS JOB?	Yes ⁷ Go to 117 No ⁸ Go to 116	Yes ⁷ ◯ Go to 117 No ⁸ ◯ Go to 116
116. WAS THIS:	Yes No	Yes No
a) because worked for his/her spouse?	01 02	01 02 02
b) because was a dependant of his/her employer?	03 04	03 04
c) because and his/her spouse own more than 40% of the shares of the business?	05 06 0	050 060
d) because 's weekly hours or earnings at this job were too low to be insured by Unemployment Insurance?	07 08 0	07 08 0
e) because's job was part of a government job creation program?	090 100	09 10
f) because of some other reason? (please specify)	110 120	110 120
117. ABOUT HOW MANY PERSONS WERE EMPLOYED AT THE LOCATION WHERE WORKED FOR THIS EMPLOYER?	¹ 19 or less ² 20 to 99 3 100 to 499 ⁴ 500 or over	1 19 or less 2 20 to 99 3 100 to 499 4 500 or over
118. DID THIS EMPLOYER OPERATE AT MORE THAN ONE LOCATION IN CANADA?	Yes ⁵ Go to 119 No ⁶ Go to Item 18 for next job; Don't ⁷ If "none", Go to 126 know	Yes ⁵ Go to 119 No ⁶ Go to Item 18 for next job; Don't 7 If "none", Go to 126 know
119. IN TOTAL ABOUT HOW MANY PERSONS WERE EMPLOYED AT ALL LOCATIONS IN CANADA?	1 19 or less 2 20 to 99 3 100 to 499 4 500 or over 5 Don't know Go to Item 18 for next job; If "none", Go to 126	1 19 or less 2 20 to 99 3 100 to 499 4 500 or over 5 Don't know 1 9 or less Go to Item 18 for next job; If "none", Go to 126

JOB 1 3	JOB 1 4	JOB 1 5	
Yes ³ Go to 20	Yes ³ Go to 20	Yes ³ Go to 20	
No. 4 Go to 19	No ⁴ ◯ Go to 19	No ⁴ Go to 19	
D D M M Y Y	D D M M Y Y	D D M M Y Y	
Yes ⁵ ◯ Go to 23	Yes ⁵ Go to 23	Yes ⁵ ◯ Go to 23	
No ⁶ Go to 21	No ⁶ Go to 21	No ⁶ Go to 21	
Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22	
D D M M Y Y	D D M M Y Y Go to 23	D D M M Y Y Go to 23	
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18	
JO	DB CHARACTERISTICS FOR PAID WORKE	rs	
Yes ⁵ ◯	Yes ⁵	Yes ⁵ ()	
No ⁶ ○	No ⁶	No ⁶ O	
7.0			
Yes ⁷ Go to 117	Yes ⁷ Go to 117	Yes ⁷ Go to 117	
No ⁸ Go to 116	No ⁸ Go to 116	No ⁸ Go to 116	
Yes No	Yes No	Yes No	
01 02 02	010 020	010 020	
03 04	030 040	03 04 0	
05 08	05 06	05 06 0	
07	07 08 0	07 080	
090 100	09 10	09 10	
110 120	110 120	110 120	
1 19 or less	10 19 or less	10 19 or less	
20 to 99	20 to 99	² O 20 to 99	
100 to 499	100 to 499	100 to 499	
500 or over	500 or over	500 or over	
Yes ⁵ Go to 119 No ⁶ Go to Item 18 for next job; Don't ⁷ If "none", Go to 126 know	Yes ⁵ Go to 119 No ⁶ Go to Item 18 for next job, Don't ⁷ ∬ If "none", Go to 126 know	Yes ⁵ Go to 119 No ⁶ Go to Item 126 know	
10 19 or loss	10 10 or loss	10 10 or loss	
10 19 or less 2 20 to 99	1) 19 or less 2) 20 to 99	1 19 or less 2 20 to 99	
Go to Item 18 for next job;	Go to Item 18 for next job;	3 100 to 499 Go to Item 126	
If "none", Go to 126	100 to 499 If "none", Go to 126	4 500 or over	
5 Don't know	5 Don't know	5 Dan't know	
Don't know _/	Uson t know _/	Uon t know _/	

***************************************	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)?	Yes ³	Yes ³
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ Go to 23	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
JOB CH.	ARACTERISTICS FOR SELF-EMPLOYED V	VORKERS
120. IN THE MONTHS THAT WORKED AT THIS BUSINESS, HOW MANY WEEKS PER MONTH DID HE/SHE USUALLY WORK AT IT?	Weeks	Weeks
121. IN THOSE WEEKS, HOW MANY DAYS PER WEEK DID HEISHE USUALLY WORK?	Days	Days
122. ON THOSE DAYS, HOW MANY HOURS PER DAY DID HE/SHE USUALLY WORK?	. Hours	. Hours
123. FROM (beginning of January/repeat date in Item 19) TO (repeat date in Item 22/last week), IN WHICH MONTHS DID WORK AT THIS BUSINESS FOR THE WHOLE MONTH AND IN WHICH MONTHS DID HE/SHE WORK AT THIS BUSINESS FOR PART OF THE MONTH?	Whole month J. F. M. A. M. J. J. A. S. O. N. D. 01 02 03 04 05 06 07 08 09 10 11 12	Whole month J. F. M. A. M. J. J. A. S. O. N. D. 01 02 03 04 05 06 07 08 09 10 11 12
	Part month J F M A M J J A S O N D 13 14 15 16 17 18 19 20 21 22 23 24	Part month J F M A M J J A S O N D 13 14 15 16 17 18 19 20 21 22 23 24
124. INTERVIEWER CHECK ITEM:		
• If date entered in Item 22	1 ao to 125	1 ao to 125
Otherwise (Item 22 is blank)	² Go to Item 18 for next job; If "none", go to 126	² Go to Item 18 for next job; If "none", go to 126
125. WHAT WAS THE MAIN REASON LEFT THAT BUSINESS ON (repeat date in Item 22)?	Enter code and	Enter code and

Enter code and Go to Item 18 for next job; If "none", go to 126 Enter code and Go to Item 18 for next job; If "none", go to 126

JOB 1 3	JOB 1 4	JOB 1 5
Yes ³ Go to 20	Yes ³ Go to 20	Yes ³ Go to 20
No ⁴ Go to 19	No. ⁴ Go to 19	No ⁴ Go to 19
D D M M Y Y	D D M M Y Y	D D M M Y Y
Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷
D D M M Y Y Go to 23	D D M M Y Y	D D M M Y Y
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18
JOB CHA	ARACTERISTICS FOR SELF-EMPLOYED V	VORKERS
Weeks	Weeks	Weeks
Days	Days	Days
. Hours	. Hours	Hours
Whole month J R M A M J J A S O N D 01 02 03 04 05 06 07 08 09 10 11 12	Whole month J F M A M J J A S O N D 01 02 03 04 05 06 07 08 09 10 11 12	Whole month J. F. M. A. M. J. J. A. S. C. N. D. 01 02 03 04 05 06 07 08 09 10 11 12
Part month J F M A M J J A S O N D 13 14 15 16 17 18 19 20 21 22 23 24	Part month J F M A M J J A S O N D 13 14 15 16 17 18 19 20 21 22 23 24	Part month J F M A M J J A S O N D 13 14 15 16 17 18 19 20 21 22 23 24
¹ Go to 125	¹ Go to 125	¹ Go to 125
Go to Item 18 for next job; If "none", go to 126	Go to Item 18 for next job; If "none", go to 126	² Go to Item 126
Enter code and Go to Item 18 for next job;	Enter code and	Enter code and

	JOB [1	1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	Yes ³ Go to 20		Yes ³ Go to 20
Year's)?	No ⁴ Go to 19		No ⁴ Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M	9 0 M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ ◯ Go to 23		Yes ⁵ Go to 23 No ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes ⁷ Go to 23 No ⁸ Go to 22		Yes ⁷ Go to 23 No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M	Go to 23	D D M M Y Y
COMPLETE ITEMS 1	1 THROUGH 17 FOR	ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HEISHE WORK?			
(Col.'s 12 to 15) FOR WHOM DID WORK?			
JOB SEARCH	ACTIVITIES AFTER I	AST DATE WORKE	O IN THE YEAR
126. INTERVIEWER CHECK ITEM:	· · · · · · · · · · · · · · · · · · ·	132. IN WHICH MONTI	IS DID WANT A JOB?
If "Year" in Item 22 is 90 for every job Enter mo work	st recent month at which sed at a job or business from	J F M 01 02 03	A M J J A S O N D 04 05 06 07 08 09 10 11 12
Item 22	and Go to 127.	0000	00000000
Otherwise ⁶ Go	to 135	THIS PERIOD?	REASON COULD NOT TAKE A JOB DURING
127. DID LOOK FOR WORK AT ANY TIME F Item 126) UNTIL THE END OF DECEMBER		Enter code	
Yes ⁷ Go to 128	No ⁸ Go to 131	134. DID RECEIVE TIME DURING THI	UNEMPLOYMENT INSURANCE BENEFITS AT ANY S PERIOD?
128. IN WHICH MONTH(S) DID LOOK FOR V	VORK?	Yes 🗇	No °
J F M A M J J A 01 02 03 04 05 06 07 08	S O N D 09 10 11 12	135. IN 1990, WAS WORKED?	SATISFIED WITH THE NUMBER OF WEEKS
129. WHAT DID DO TO FIND WORK DURING		Yes ³ ◯ Go to	137 No ⁴◯ Go to 136
methods reported)	·	136. IN 1990, DID WEEKS?	WANT TO WORK MORE WEEKS OR FEWER
Enter	code(s)	5 More weeks	
130. DID ANY OF THE FOLLOWING CAUSE LOOKING FOR WORK?	DIFFICULTY WHEN	⁶ Fewer week	3
Yes	No	137. IN 1990, DID FOLLOWING SOU	RECEIVE INCOME FROM ANY OF THE
a) Not having enough information about available)	7 OLLOWING SOO	Yes No
jobs	°2O	a) Family Allowar	nce Benefits°1 0
b) Not having the skills or experience for available jobs 03	04	b) Pension incom	e ⁰³ O
c) Not having enough edu- cation for available jobs	08 Go to		pensation ⁰⁵ 06
d) Having a long-term physical	133	d) Unemployment Benefits	Insurance
condition, mental condition, or health problem	J8()	138. IN 1990, DID OR WELFARE BEN	RECEIVE INCOME FROM SOCIAL ASSISTANCE JEFITS?
e) A shortage of jobs in the area ⁰⁹	''O	Yes ¹ Go to	139 No ² Go to 152
f) Anything else?	¹² O J	139. IN WHICH MONTH	I(S) DID RECEIVE THIS INCOME?
131. DID WANT A JOB AT ANY TIME DURIN	G THIS PERIOD?	∫ J F M 01 02 03	A M J J A S O N D Go to 04 05 06 07 08 09 10 11 12 152
Yes ¹ Go to 132	No ² Go to 134	1000	

JOB 1 3	JOB [1 4	JOB 1 5	
Yes ³ Go to 20 No ⁴ Go to 19	Yes ³ Go to 20 No ⁴ Go to 19		Yes ³ Go to 20	
	7.60 () 40.670			
D D M M Y Y	D D M	9 1 0 M Y Y	D D M M Y Y]
Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ Go to 23 No ⁶ Go to 21		Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	
Voo ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22	Yes ⁷		Voc ⁷	
D D M M Y Y	D D M M	Go to 23	D D M M Y Y	to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR	ALL JOBS BEFORE	COMPLETING ITEM 18	
JOB SEARCH A	CTIVITIES FOR THOS	SE PERSONS WITH N	IO JOBS IN 1990	
140. HAS EVER WORKED AT A JOB OR BUS MONTHS OR LONGER?	SINESS FOR SIX	148. IN 1990, DID ANY LOOKING FOR W	OF THE FOLLOWING PREVENT F	ROM
Yes ¹O	No ²		Yes	No
141. DID WANT A JOB AT ANY TIME DURIN Yes 1 Go to 142	G 1990? No ² Go to 149	a) Not having eno about available	ough information of jobs	02
142. IN WHICH MONTH(S) DID WANT A JOB		skills or experience for	04	
J F M A M J J A O O O O O O O	J F M A M J J A S O N D		ugh education for	06
143. IN 1990, DID LOOK FOR WORK AT ANY				
Yes ³ Go to 144	No ⁴ Go to 148	d) Having a long-t- condition, ment health problem	erm physical tal condition, or	080
144. IN WHICH MONTH(S) DID LOOK FOR W		09	10	
All months in 1990 OR			obs in the area	O
J F M A M J J A 01 02 03 04 05 06 07 08			hat type of work or choose	120
145. IN 1990, WHAT DID DO TO FIND WORK	? (Mark all methods	g) Anything else?		140
reported) Enter of	code(s)	149. IN 1990, DID F FOLLOWING SOUF	RECEIVE INCOME FROM ANY OF THE RCES?	
148. WAS THERE ANY REASON COULD NOT	TAKE A JOB DURING		Yes	No oo -
Enter code		a) Family Allowan	ce Benefits	⁰² O
147. DID ANY OF THE FOLLOWING CAUSE E LOOKING FOR WORK?	DIFFICULTY WHEN	b) Pension Income	•	°4\()
a) Not having enough information	Yes No	c) Worker's Comp	ensation ⁰⁵	⁰⁶
about available jobsb) Not having the skills or experience	. 0 0	d) Unemployment	Insurance Benefits 07	08
for available jobs c) Not having enough education for	03 04 Go to		ECEIVE ANY INCOME FROM SOCIAL VELFARE BENEFITS?	
available jobs	Go to 149	Yes ¹ ⊖ Go to .	51 No ² G	o to 152
condition, mental condition, or health problem	.°′\ °°\		9) DID RECEIVE THIS INCOME?	
e) A shortage of jobs in the area		J F M A 01 02 03 04	4 05 06 07 08 09 10	N D 11 12

		JOB 1	1				JOB 1	2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF	30	o to 20			Y	es ³ ()	Go to 20	
JANUARY 1990 (i.e., immediately after New Year's)?	4.0	o to 19			N	40	Go to 19	
9. IN 1990, WHEN DID FIRST START			·					
WORKING AT THIS JOB OR BUSINESS?	D 1	о м м	9 0 Y Y			D	D M I	9 0 M Y Y
10. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ ◯ G	o to 23			Y	es ⁵	Go to 23	
	<u>_</u>	o to 21			N		Go to 21	
1. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	80	o to 23			N	8 -	Go to 23 Go to 22	
2. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?			Go to	23				Go to 23
COMPLETE ITEMS 11	THROUGH 17		L JOBS I	BEFORE	COMP		ITEM 18	
1. (Co. 11) THINKING BACK TO'S FIRST					<u> </u>			
DAY OF WORK IN 1990. FOR WHOM DID HE/SHE WORK?								
(Col.'s 12 to 15) FOR WHOM DID WORK?								
201	HOOL ATTEN	DANCE	AND OTH	ED TDAI	NING			
152. AT ANY TIME IN 1990, DID ATTEND A S		·				DADT-TIM	IE STIIDEN	
	Go to 155	IE ON UNI	VERSIII A	A FULL-	INIE ON	ran I-IIIv	IL GIODLI	•••
153. IN 1990, IN WHICH MONTH(S) DID ATTE		COLLEGE	OR LINIVER	A 2A VTIS	FILL	ME STUD	ENT?	
³ None	,							
OR								
J F M A	M J	J	Α	s	0	N	D	
01 02 03 04	05 06	07 ()	08	09	10	11 ()	12 ()	
154. IN 1990, IN WHICH MONTH(S) DID ATTE	ND A SCHOOL, C	OLLEGE	OR UNIVER	SITY AS A	PART-T	IME STUD	ENT?	
⁴ O None								
OR								
J F M A 01 02 03 04	M J 05 06	J 07	A 08	S 09	O 10	N 11	D 12	
0 0 0 0	0 0		0	0	0	0	0	
155. IN 1990, DID VISIT A CANADA EMPLOYI		R A CANA	DA EMPLO	MENT CE	NTRE F	OR STUDE	NTS?	
Yes ⁵ Go to 156 No ⁶								
156. DURING'S VISIT(S) TO THE CANADA EM	IPLOYMENT CEN	IRE:	Vaa			No		Don't know
a) did get any information from job boar	rds, printed mater	rlats.	Yes			No		
computers, or electronic equipment?			01			02		03
b) did get any information from the staff of the Employment Centre?						05		06
 c) did have an interview with a staff me qualifications, his/her skills or available jo 						080		09
d) did get sent to a job interview with a						110		12
e) did get a job as a result of contacting Centre?	the Canada Em	oloyment	13			14		15
Out 1			🔾			\sim		$\overline{}$

JOB 1 3	JOB 1 4	JOB 1 5			
Yes ³ Go to 20	Yes ³ Go to 20	Yes ³ Go to 20			
No ⁴ Go to 19	No ⁴ Go to 19	No ⁴ ◯ Go to 19			
D D M M Y Y	D D M M Y Y	D D M M Y Y			
Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ Go to 23 No ⁶ Go to 21			
Ves. ⁷ Go to 23 No. ⁸ Go to 22	Ves. ⁷ Go to 23 No. ⁸ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22			
D D M M Y Y	D D M M Y Y Go to 23	D D M M Y Y			
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18			
SC	I HOOL ATTENDANCE AND OTHER TRAIN	ING			
158. IN WHICH PROGRAM(S) DID PARTICIPA					
The in which heatham(e) bib I amile a	When did start participating in this program?	When did stop participating in this program?			
a) The Job Entry/Re-Entry program		M M Y Y OR 02 still participating			
b) The Job Development program		M M Y Y OR 04 still participating			
c) The Skill Investment program	05 M M Y Y	M M Y Y OR ⁰⁶ Still participating			
d) The Skill Shortages program	07 M M Y Y	M M Y Y OR ⁰⁸ still participating			
e) The Challenge 90 program	0°9	M M Y Y			
f) The Community Futures program		OR 12 still participating			
g) Other (please specify)	130 M M Y Y	M M Y Y OR 14 still participating			
	-	Go to 163			
150. IN 1000, DID TAKE ANY TRAINING WHICH LACTED MORE THAN 25 HOURS TO LEARN A NEW JOB RELATED SKILL OR GET A NEW JOB?					
Yes					
160. WAS THIS THAINING FULL-TIME OR PART-TI	160. WAS THIS THAINING FULL-TIME OR PART-TIME?				
Full-Time ³ Part-time ⁴ Both ⁵					
161. IN WHICH MONTH(S) DID TAKE THIS TRAINING?					
J F M A M 01 02 03 04 05	J J A S O				
01 02 03 04 05	06 07 08 09 10 O O O O				
162. DID RECEIVE ANY ALLOWANCES WHILE FROM HOME OR FOR TRAINING?	TAKING THIS TRAINING SUCH AS ALLOWANCES	FOR DEPENDENT CARE, FOR LIVING AWAY			
Ves 1 No 2					

	JOB [1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	Yes ³ Go to 20		Yes ³ Go to 20
Year's)?	No ⁴◯ Go to 19		No ⁴ Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M	9 i 0 M Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ ◯ Go to 23		Yes ⁵ Go to 23 No ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Yes ⁷ Go to 23 No ⁸ Go to 22		Yes ⁷ () Go to 23 No ⁸ () Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M	Go to 23	D D M M Y Y
COMPLETE ITEMS 1	1 THROUGH 17 FOR	ALL JOBS BEFORE	COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?			
(Col.'s 12 to 15) FOR WHOM DID WORK?			
THE IMPACT THAT CHRO FIRST, I WOULD LIKE TO ASK YO	OU ABOUT's ABI	EMS HAVE ON EMP LITY TO DO CERTA	TH AND LOYMENT OPPORTUNITIES. IN ACTIVITIES, EVEN WHEN USING CTED TO LAST SIX MONTHS OR MORE.
163. DOES HAVE ANY TROUBLE SAID IN A GROUP CONVERSATI THREE OTHER PEOPLE (WITH A NORMALLY USED)?	ION WITH AT LEAST		ON TIME, THAT IS, MORE THAN 20 MINUTES?
TO DO TH	MPLETELY UNABLE	¹	IS COMPLETELY UNABLE TO DO THIS?
² ○ No 3○ Yes, 4○ No, a	completely unable ble		No 3 Yes, completely unable 4 No, able
164. DOES HAVE ANY TROUBLE NEWSPRINT (WITH GLASSES IF		BEND	N STANDING, DOES HAVE ANY TROUBLE ING DOWN AND PICKING UP AN OBJECT FROM FLOOR (FOR EXAMPLE, A SHOE)?
5 Yes IS COI TO DO THI	MPLETELY UNABLE S?	⁵	IS COMPLETELY UNABLE TO
7 Yes, 6	completely unable ble	60	DO THIS? Yes, completely unable
165. DOES HAVE ANY TROUBLE UNDERSTOOD?	SPEAKING AND BEING		No, able
	MPLETELY UNABLE S?	171. DOES FINGE	HAVE ANY TROUBLE USING HIS/HER ERS TO GRASP OR HANDLE?
3 ∨ ∨oo, a 4 No, al	oomplotoly unablo ble	1 res	TO DO THIS?
166. DOES HAVE ANY TROUBLE YARDS/400 METRES WITHOUT F CITY BLOCKS)?			Yes, completely unable No, able
50	MPLETELY UNABLE S?		HAVE ANY TROUBLE REACHING IN ANY TION (FOR EXAMPLE: ABOVE HIS/HER HEAD)?
	completely unable ble	⁵ ○ Yes —	is COMPLETELY UNABLE TO DO THIS?
167. DOES HAVE ANY TROUBLE DOWN A FLIGHT OF STAIRS (AF	BOUT 12 STEPS)?	" O !	⁷ O Yes, completely unable ⁸ O No, able
² O No TO DO THI	completely unable	REME OR LE EXPEI	TIME TO TIME, EVERYONE HAS TROUBLE MBERING THE NAME OF A FAMILIAR PERSON, ARNING SOMETHING NEW, OR THEY RIENCE MOMENTS OF CONFUSION. HOWEVER, HAVE ANY ONGOING PROBLEMS WITH
168. DOES HAVE ANY TROUBLE OF 10 POUNDS FOR 30 FEET/S METRES (EXAMPLE: CARRYING	KILOGRAMS FOR 10		ER ABILITY TO REMEMBER OR LEARN?
6 No 70 DO THI	MPLETELY UNABLE S? completely unable	²○ 1	чо
₩ ⁸ No, at Go to 169	ble		

JOB 1 3	JOB [1 4	JOB 1 5
Yes ³ Go to 20	Yes ³ Go to 20		Yes ³ Go to 20
No ⁴ Go to 19	No ⁴ Go to 19		No ⁴ Go to 19
D D M M Y Y	D D M	9 0 M Y Y	D D M M Y Y
Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ Go to 23 No ⁶ Go to 21		Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21
Yes ⁷ Go to 23 No ⁸ Go to 22	Yes 7 Go to 23 No 8 Go to 22		Yes ⁷
D D M M Y Y	D D M M	Go to 23	D D M M Y Y
COMPLETE ITEMS 1			
	 		
174. BECAUSE OF A LONG-TERM PHYSICAL CO PROBLEM, THAT IS, ONE THAT IS EXPECTE OR MORE, IS LIMITED IN THE KIND OR HEISHE CAN DO	ED TO LAST 6 MONTHS		CONDITION BEGIN TO LIMIT THE KIND OR IK HE/SHE COULD DO AT A JOB OR BUSINESS?
Yes	No Not applicable	Was always limited	10
	020	Before 1989	² ()
	05		30
c) at work?	08	During 1989	°() → Month
d) in other activities such as. travel, sports, or leisure?		During 1990	¹⊖ → Month
175. BECAUSE OF A LONG-TERM EMOTIONAL, P NERVOUS, OR MENTAL HEALTH CONDITION		During 1991	⁵ ○ → Month
IS LIMITED IN THE KIND OR AMOUNT O HE/SHE CAN DO		178. <u>INTERVIEWER CH</u>	ECK ITEM:
Yes	No Not applicable		thecked in the shaded 163 through 175 6 Go to 179
a) at home? 01	20		
b) at school?	05		⁷ O Go to 194
c) at work?	¹⁷ O ⁰⁸ O	170. <u>INTERVIEWER CHE</u>	<u>ick item:</u>
d) In other activities such as, travel, sports, or leisure?	°		1990 (ie. all five job Go to 180
176. INTERVIEWER CHECK ITEM:		• If all jobs in 199	
If "Yes" is checked in Item 174 d) or 175 d)	¹ Go to 177		(ie., date in Item 22 for Dec. 24, 1990)
Otherwise	² Go to 178	Otherwise	³ Go to 189

	JOB	1 1	JOB 1 2	
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)?	Yes ³ Go to 20		Yes ³	
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M	9 1 0 M Y Y	D D M M Y Y	
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ Go to 23 No ⁶ Go to 21		Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	
21. LAST WEEK. DID STILL HAVE THIS JOB OR BUSINESS?	Voo ⁷		Voc. ⁷	
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	M M O O	Go to 23	D D M M Y Y	
COMPLETE ITEMS 1	1 THROUGH 17 FOR	ALL JOBS BEFORE	COMPLETING ITEM 18	
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK? (Col.'s 12 to 15) FOR WHOM DID WORK?				
THESE QUESTIONS ARE FOR PERSONS WHO WERE NOT WORKING AT A JOB OR BUSINESS AT THE END OF 1990				
180. DOES'S CONDITION OR HEALTH PRO		184. DOES 'S CO FOR WORK?	NDITION AFFECT HIS/HER ABILITY TO LOOK	
Yes ¹	No ² Go to 182	Yes ⁶	No ⁷	
181. WHEN DID 'S CONDITION BEGIN TO (PREVENT HIM/HER FROM WORKING AT A BUSINESS?			'S CONDITION OR HEALTH PROBLEM, DO DLLOWING MAKE IT DIFFICULT FOR HIM/HER ?	
Has always been prevented from working		a) Physical acc	Yes No	
Before 1989 ⁴			ial aids, equipment or	
During 1989	194		transportation	
During 1990 Mon		186. DOES THINI IN THE NEXT SI	K HE/SHE WILL LOOK FOR WORK AT ANY TIME X MONTHS?	
During 1001 ⁷ ○ → Mon	th L	Yes ¹	No ⁴ Go to 194	
182. IS LIMITED IN THE KIND OR AMOUNT COULD DO AT A JOB OR BUSINESS BECA CONDITION?		187. WHAT ARE' SIX MONTHS? A	S CHANCES OF GETTING A JOB IN THE NEXT RE THEY	
Yes °()	No *() Go to 194	³ Excellent?	Go to	
183. WHEN DID'S CONDITION BEGIN TO L OR AMOUNT OF WORK HE/SHE COULD D BUSINESS?		⁴◯ Good?	194	
Was always limited 1		⁵ Fair?	Go to 188	
Before 1989 ⁴		°() Poor?	J	
During 1989 $^3\bigcirc\longrightarrow$ Mon		188. ARE'S CHAI OF HIS/HER COI	NCES OF GETTING A JOB FAIR/POOR BECAUSE NDITION?	
During 1991 ⁵ ○ → Mon		Yes ⁷ Go	o to 194	

JOB 1 3	JOB [1 4	JOB 1 5		
Yes ³ Go to 20 No ⁴ Go to 19	Yes ${}^3\bigcirc$ Go to 20		Yes ³ Go to 20		
D D M M Y Y	D D M	9 1 0 M Y Y	D D M M Y Y		
Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ Go to 23		Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21		
Yes ⁷	Yes ⁷		Yes ⁷ ◯ 90 to 20 No ⁸ ◯ 90 to 22		
D D M M Y Y Go to 23	D D M M	Go to 23	D D M M Y Y Go to 23		
COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18					
THESE QUESTIONS ARE FOR PERSONS WHO WERE WORKING AT A JOB OR BUSINESS AT THE END OF 1990					
189. YOU HAVE INDICATED THAT WORKE OR BUSINESS DURING 1990, YOU HAVE A THAT HAS SOME LIMITATION IN THE HE/SHE IS ABLE TO DO. I WOULD NOW L ABOUT HOW 'S LIMITATION AFFECTS TO WORK.	LISO TOLD ME ACTIVITIES IKE TO ASK YOU		DITION NOW HAS MAKE IT HIM/HER TO CHANGE JOBS OR GET		
IS LIMITED IN THE KIND OR AMOUNT CAN DO BECAUSE OF HIS/HER CONDITIO PROBLEM?			.'S MOST RECENT JOB, WOULD DESCRIBE		
190. WHEN DID'S CONDITION BEGIN TO L. AMOUNT OF WORK HE/SHE COULD DO A' BUSINESS?		1 Excellent? 2 Good?	Go to 194		
Was always limited ³ Before 1989 ⁴ During 1989 ⁵ → Mo	nth I	³ Fair? ⁴ Poor?	Go to 193		
During 1990 $^{6}\bigcirc\longrightarrow$ Mo	nth	193. IS'S JOB SE CONDITION? Yes ⁵	CURITY FAIR/POOR BECAUSE OF HIS/HER No ⁶		

	JOB [1 1 JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	Yes ³ Go to 20	Yes ³ Go to 20
Year's)?	No ⁴ ⊖ Go to 19	No ⁴ Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M	9 0 M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ ◯ Go to 23	6.0
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Voo ⁷ Go to 23 No ⁸ Go to 22	8 0
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M	Go to 23
• COMPLETE ITEMS 1	1 THROUGH 17 FOR	ALL JOBS BEFORE COMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO 'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
	QUESTIONS ON	SPECIAL TOPICS
194. INTERVIEWER CHECK ITEM:		196. ARE THERE ANY OTHER GROUPS FROM WHICH 'S PARENTS
If * in Item 30 on F03A for this person (i.e., longitudinal respondent)	¹() Go to 202	OR GRANDPARENTS DESCENDED?
Otherwise	² () Go to 195	Yes ¹ O No ² O
195. FROM WHICH OF THE FOLLOWING GROU	IPS DID'S PARENTS	Please specify
OR GRAND-PARENTS DESCEND? (Mark all r	esponses reported) Yes No	
a) Chinese	01 - 02 -	197. BY VIRTUE OF HIS/HER RACE OR COLOUR, IS IN A VISIBLE
b) Japanese	04	MINORITY IN CANADA? (Include auch groups as Dlacks, Ohiness, West Asians, etc.)
c) Korean	05	Yes ³ Go to 198 No ⁴ Go to 199
d) Filipino		198. TO WHICH VISIBLE MINORITY DOES BELONG?
e) East Indian (from India, Pakistan, Bangladesh, East Africa, Guyana, etc.)	100	
f) Black (from Africa, the Caribbean, Haiti, the U.S.A., Canada, etc.)	110 120	199. WHAT LANGUAGE DID FIRST SPEAK IN CHILDHOOD?
g) North American Indian	.13	b) French ²
h) Metis	. 15 16	c) Other (please specify)°
i) Inuit (Eskimo)	. 17 18	
j) Arab (from Egypt, Jordan, Lebanon, Iraq, etc.)	. 19 20	200. IN WHAT COUNTRY WAS BORN?
k) West Asian (from Syria, Turkey, Afghanistan, Armenia, Iran, etc.)	.21 22	a) Canada
South East Asian (from Burma, Cambodia/Kampuchea, Laos, Thailand, Vietnam, etc.)	23 24	c) Italy Go to 201 d) U.S.A. e) Other (please specify)5
m) North-African (from Egypt, Morocco, Algeria, Tunisia, etc.)	25 26	
n) Latin American (from Mexico, Central America, or South America)	. 27 28	201. IN WHAT YEAR DID FIRST IMMIGRATE TO CANADA?
o) British (from England, Scotland, Ireland, etc.)	•	Year
p) French	. 31 32	OR Go to 207
q) Any other European groups	.33	
r) Canadian	. 35 36	Never immigrated (Canadian citizen by birth)

JOB 1 3	JOB 1 4	JOB 1 5		
Yes ³ Go to 20	Yes ³ Go to 20	Yes ³ Go to 20		
No ⁴ Go to 19	No ⁴ Go to 19	No ⁴ ◯ Go to 19		
D D M M Y Y		D D M M Y Y		
Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ Go to 23 No ⁶ Go to 21		
Voc. ⁷ ○ Go to 23 No ⁸ ○ Go to 22	Voc. ⁷ Go to 23 No. ⁸ Go to 22	Voc. ⁷ Go to 23 No. ⁸ Go to 22		
D D M M Y Y	D D M M Y Y Go to 23	D D M M Y Y Go to 23		
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18		
202 INTERWENT Has this person moved since	leet voorte interview?			
202. INTERVIEWER: Has this person moved since last year's interview?				
Yes	¹○ Go to 203 No ²○ Go to	207		
203. WHAT IS'S CURRENT ADDRESS?				
STREET AND NO./LOT AND CONCESSION				
CITY, TOWN, VILLAGE, MUNICIPALITY				
PROVINCE OR TERRITORY				
POSTAL CODE				
204. ON WHAT DATE DID MOVE INTO THIS DWELLING?				
D D M M Y Y				
205. WHAT WAS THE REASON FOR THIS MOVE? (Mark only one)				
a) Transferred by employer				
	b) To accept a job/work	²O		
	c) To look for a job/work	³O		
	d) Spouse/parent moved			
e) To go to school				
f) To live with, or close to, family/friend				
,	g) Retirement ⁷			
1	n) Other	°		
206. HAS MOVED MORE THAN ONCE IN THE PAST 12 MONTHS?				
	es ¹() No ²()			
•	···· 0			

	JOB 1 1	JOB 1 2		
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	Yes ³ Go to 20	Yes ³ Go to 20		
Year's)?	No ⁴ Go to 19	No ⁴ Go to 19		
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y		
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes ⁵ Go to 23 No ⁶ Go to 21	Yes ⁵ Go to 23 No ⁶ Go to 21		
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	Ves. ⁷ Go to 23 No. ⁸ Go to 22	Ves. ⁷ Go to 23 No. ⁸ Go to 22		
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D D M M Y Y	D D M M Y Y Go to 23		
COMPLETE ITEMS	11 THROUGH 17 FOR ALL JOBS BEFORE	COMPLETING ITEM 18		
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990. FOR WHOM DID HE/SHE WORK?				
(Col.'s 12 to 15) FOR WHOM DID WORK				
207. INTERVIEWER: Was this interview conduct Yes 2 No 3	ted mainly by telephone?			
208. HRD PAGE-LINE NO. OF INFORMATION	SOURCE			
HRD page-line number				
209. FINISH TIME				
210. INTERVIEWER: Read and complete the fo	lowing section only for the head of each economic famil	y in the household (as identified on the label).		
	o study the work patterns of Canadians. We will need to	recontact your household in a year from now to		
obtain additional information about jobs held during 1991. In case your family moves before next January, we would like the name and address of a friend, relative or neighbour whom we could contact to obtain your family's new address or telephone number. I want to emphasize that we will contact this person only if your family has moved and then only to obtain your new address or telephone number.				
The state of the s				
	Rofuced			
NAMI				
				
Given	Name			
Cuma				
ADDRESS				
Stree Let ar Conc	and No./ d sssion			
City, Village Munic	,			
Provir Territe				
TELEPHONE				
(Area Code)				
THANK YOU VERY MUCH FOR YOUR ASSISTANCE ON THIS PROJECT				

JOB 1 3	JOB 1 4	JOB 1 5	
Yes ³ Go to 20 No ⁴ Go to 19	Yes ³	Yes ³ Go to 20 No ⁴ Go to 19	
D D M M Y Y	D D M M Y Y	D D M M Y Y	
Yes ⁶ Go to 23 No ⁶ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	Yes ⁵ ◯ Go to 23 No ⁶ ◯ Go to 21	
Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ Go to 23 No ⁸ Go to 22	Yes ⁷ ◯ Go to 23 No ⁸ ◯ Go to 22	
D D M M Y Y Go to 23	D D M M Y Y Go to 23	D D M M Y Y	
COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18			