



# Individual questionnaire

IQ

District   Comm/Munic   Town/Village     EA      
 Building    Dwelling     Household  Person

First name -----

Surname -----

**1. Sex**

Male  1  
 Female  2

**2. Date of birth**     
 Day Month Year

**3. Place of birth**

In Albania  1  
 Town/Village ----- Di   
 Abroad  2  
 Country -----

**4. Where were you residing on 1 April 1989**  
*(Only for persons born before 1 April 1989)*

In Albania  1  
 Town/Village ----- Di   
 Abroad  2  
 Country -----

**5. Where were you residing one year ago**  
*(only for persons 1 year and above)*

In Albania  1  
 Town/Village ----- Di   
 Abroad  2  
 Country -----

**6. Place of presence at census moment**

At the same place where you reside  1  
 Elsewhere in Albania  2  
 Town/Village ----- Di   
 Abroad  3  
 Country -----

*If in another place or abroad, the reason for your absence:*

Studies  1  
 Work  2  
 In an institutional household  3  
 Other/Not known  4

**7. What is your marital status?**

Single  1  
 Married  2  
 Widowed  3  
 Divorced  4

Month and year of last marriage      
 Month Year

**Questions 8-10 only for persons 6 years and above**

**8. Do you know how to write and read?**

Yes  1  
 No  2

**9. How many year of school have you successfully completed?**

**10. What is the highest diploma obtained?**

No diploma  1  
 4 years school (elementary)  2  
 8 years school (lower secondary)  3  
 Upper secondary - Vocational (2 years)  4  
 Upper secondary General (4 years)  5  
 Upper secondary Technical (4 years)  6  
 University  7  
 Post-University  8

*If you have a university degree, specify it*

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**Only for women 15 years and over**

**11. Number of children**

How many children have you born?   
*(including those no longer living)*  
 How many of them are still alive?

**Only for persons 15 years old and above**

**12. What is your present economic status?**

- Employed  1
- Unemployed
  - Unemployed, looking for a new job  2
  - Unemployed, looking for the first job  3
- Housekeeper  4
- Student  5
- Retired  6
- In compulsory military service  7
- Not employed, not looking for a job  8
- Other inactive (handicapped, etc.)  9

**13. Whatever the answer given above in question 12: how many hours (in paid employment) did you work last week?**

**14. Means of transportation you use most to travel to work or school**

- Bus  1
- Minibus  2
- Car  3
- Motorcycle  4
- Bicycle  5
- By foot  6
- Other  7

**Questions 15-22 to be answered only by employed persons (Q12=1)**

**15. What is your status in employment:**

- Employee  1
- Employer  2
- Own account worker  3
- Contributing family worker  4

**16. Branch of industry of place of work**

Name and place of work

-----

District   Commune/Municipality

***Describe in detail the economic activity at your place of work***

-----  
NACE

**17. Type of your place of work**

- Fixed premises outside home  1
- Home (not a farm)  2
- Farm  3
- Not a fixed place of work  4

**18. Occupation: give the title and description of your job**

Title -----

Description -----

-----  
ISCO-88

**19. Do you have a:**

- Permanent job  1
- Temporary job  2
- Occasional job  3
- Seasonal job  4

**20. How many hours do you usually work in a week?**

**21. How often do you return to your permanent residence?**

- Each day  1
- Not each day, but at least weekly  2
- Less than once a week  3

**22. Do you have another job, apart from the one you described above?**

- Yes  1
- No  2

***If yes, write title and job description:***

Title -----

Description -----

-----  
ISCO-88

Census 2001

1001/2001

District

Comm/Munic

Town/Village

EA

Building

Dwelling

Household Number

(0 if no households in this dwelling)

**BUILDING**

*Complete the building questions only for the first or only dwelling in the building*

**1. Type of building**

- Single dwelling  1
- Multiple dwellings  2
- Partially other purposes  3
- For collective household  4
- Other (specify)  5

Stop questionnaire

**2. Building character**

- Plastered with roof  1
- Plastered with terrace  2
- Not plastered with roof  3
- Not plastered with terrace  4

**3. Main material used for construction**

- Pre-fabricated  1
- Bricks, stones  2
- Wood  3
- Other  4

**4. Has building an elevator?**

- Yes  1
- No  2

**5. Time of construction**

- Before 1945  1
- 1945-1960  2
- 1961-1980  3
- 1981-1990  4
- After 1990  5
- After 1990, year

**6. Number of floors, including ground floor**

- 1 floor  1
- 2 floors  2
- 3-5 floors  3
- 6-10 floors  4
- More than 10 floors  5

**7. Number of dwellings in the building**

- 1 dwelling  1
- 2 dwellings  2
- 3-4 dwellings  3
- 5-8 dwellings  4
- 9-15 dwellings  5
- More than 16 dwellings  6

**DWELLING**

**Address:**

- Quarter -----
- Street -----
- Building No. -----
- Entrance No. -----
- Apt No. -----

**1. Households in the dwelling**

Is the dwelling inhabited?

- No  2 → End of dwelling questions
- Yes  1 ↓

*Complete the other dwelling questions only for the first or only household in the dwelling.*

How many households live in this dwelling?

**2. Rooms (excluding kitchen, hallway, etc.)**

- Total number of rooms
- Work rooms only

**3. Kitchen**

Does the dwelling have a room only for cooking?

- Yes  1
- No  2

**4. Inhabited surface**

What is the inhabited surface?

- Less than 40 m<sup>2</sup>  1
- 40-69 m<sup>2</sup>  2
- 70-99 m<sup>2</sup>  3
- 100-130 m<sup>2</sup>  4
- More than 130 m<sup>2</sup>  5

**5. Water supply**

Water supply to the dwelling

- Inside the dwelling  1
- Outside the dwelling  2
- Well or water tank  3
- Not supplied with water  4

**6. Toilet facility**

Does the dwelling have:

- One W.C. inside  1
- Two or more W.C.'s inside  2
- W.C. outside, with piping  3
- W.C. outside, no piping  4
- No W.C.  5

**7. Principal heating**

Does the dwelling have:

- Central heating  1
- Individual heating  2
- No form of heating  3

**1** Members of the household that are present, or absent for less than 1 year

Nr	Name	Surname	Fathers name	
	02	03	04	
01				L
02				L
03				L
04				L
05				L
06				L
07				L
08				L
09				L
10				L

**2** Members of the household that are absent for more than 1 year (abroad)

Nr	Name	Surname	Fathers name	
	02	03	04	
01				L
02				L
03				L
04				L
05				L

**3** Temporarily present persons at the time of the enumeration

Nr	Name	Surname	Fathers name	
	02	03	04	
01				L
02				L
03				L
04				L
05				L

Household number

Date of birth dd-mm-yyyy	Sex Male Female	Relationship with the head of household	Family nucleus	Town/Village registration office	Citizenship X = foreign
05	06	07	08	09	10
<input type="text"/>	<input type="text"/> 1 <input type="text"/> 2	<input type="text"/>	<input type="text"/>		<input type="text"/>
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Date of birth dd-mm-yyyy	Sex Male Female	Relationship with the head of household	Town/Village registration office	Country
05	06	07	09	10
<input type="text"/>	<input type="text"/> 1 <input type="text"/> 2	<input type="text"/>		
<input type="text"/>	<input type="text"/> 1 <input type="text"/> 2	<input type="text"/>		
<input type="text"/>	<input type="text"/> 1 <input type="text"/> 2	<input type="text"/>		
<input type="text"/>	<input type="text"/> 1 <input type="text"/> 2	<input type="text"/>		
<input type="text"/>	<input type="text"/> 1 <input type="text"/> 2	<input type="text"/>		

Codes 07 - Relationship with head of household

Date of birth dd-mm-yyyy	Sex Male Female
05	06
<input type="text"/>	<input type="text"/> 1 <input type="text"/> 2
<input type="text"/>	<input type="text"/> 1 <input type="text"/> 2
<input type="text"/>	<input type="text"/> 1 <input type="text"/> 2
<input type="text"/>	<input type="text"/> 1 <input type="text"/> 2
<input type="text"/>	<input type="text"/> 1 <input type="text"/> 2

- 01 - Head of household
- 02 - Husband or wife
- 03 - Factual partner of head (not actually married)
- 04 - Natural-born son or daughter
- 05 - Adopted/Steep son or daughter
- 06 - Father or mother
- 07 - Father-in-law or mother-in-law
- 08 - Brother or sister
- 09 - Brother-in-law or sister-in-law
- 10 - Son-in-law or daughter-in-law
- 11 - Nephew or niece
- 12 - Uncle or aunt
- 13 - Other form of relative
- 14 - No family relation

Town/Village registration office	Citizenship X = foreign
09	10
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
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Household number

*This part has to be filled in for each household living in the dwelling*

**1. Ownership of the dwelling**

Are you:

- Owner of the dwelling  1 \_\_\_\_\_
- Renting the dwelling  2 \_\_\_\_\_
- Other  3 \_\_\_\_\_

*If the answer is 2 or 3, who is the owner of your dwelling?*

- Another person or family  1
- Private building enterprise  2
- Old-regime owners  3
- Public housing entity  4
- Other  5

**2. Which material do you use for heating**

*If your household uses one of these, mark them (several options are possible)*

- Wood  1
- Electricity  2
- Gas  3
- Oil, petrol, etc.  4
- Coal  5
- None  6

**3. Agricultural land**

Do you own agricultural land?

- No  2 \_\_\_\_\_
- Yes  1 \_\_\_\_\_

Where is that land situated?

District   Com/Munic

Cultivated by:

- Yourself (with household members)  1
- By others  2
- Not cultivated  3

**4. Household equipment**

Do you have:

- |                           | Yes                        | No                         |
|---------------------------|----------------------------|----------------------------|
| a. TV                     | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| b. Parabolic antenna      | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| c. Refrigerator           | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| d. Washing machine        | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| e. Electric cooking stove | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| f. Gas cooking stove      | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| g. Microwave oven         | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| h. Airconditioner         | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| i. Computer               | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| j. Car                    | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |