



13438



CAYMAN ISLANDS Labour Force Survey Conducted in October, 2007



For optimum accuracy, please print carefully
and avoid contact with the edges of the box.
The following will serve as an example:

0 1 2 3 4 5 6 7 8 9

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

IMPORTANT!!! Shade the oval where applicable. Note that some questions have multiple answers

Block No. and Parcel No.

Enumeration Area

 -

Confidential IMPORTANT!!!

SAMPLE NO

USE ONLY 2B PENCIL

Address of Household: _____

Telephone number

 -

I hereby certify that the information contained on this form has been honestly completed to the best of my ability.

Interviewer No

INTERVIEWER'S SIGNATURE: _____

EDITOR/CODER'S NAME: _____

- Fully Completed
- Partially Completed
- Refusal
- Household NOT in Cayman Islands on Oct 6, 2007
- Unable to find address
- Vacant - not occupied
- Vacant - under construction
- Demolished / Derelict
- Temporary / Vacation residence
- No contact
- No contact -resident away temporarily
- Out of Scope

of households not previously in the registry

of people in this household

RECORD OF VISITS

| Date of Visit | Start Time | End Time | Comments |
|---|---|---|----------------------|
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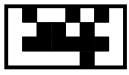
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Section 1- Demographic Characteristics

| PERSON # | 1.1 Have you / . . . been in the Cayman Islands for at least 6 months or is intending to stay for at least six (6) months? Yes1 No2 Not sure, immigration issues3 | 1.2 What is..... Relationship to Head? Head 1 Spouse/partner 2 Child 3 Son/daughter in law ... 4 Grand-child 5 Parent/parent-in-law ... 6 Grand parent 7 Brother/sister 8 Other relative 9 Live in domestic 10 Non-relative 11 | 1.3 Sex Male.....1 Female..2 | 1.4 Age (as at week ending Oct. 6, 2007) | 1.5 Caymanian Status: Is . . . ? Caymanian..... 1 Non-Caymanian with work permit 2 Non-Caymanian with NO work permit 3 Non-Caymanian with government contract work 4 Non-Caymanian permanent resident with rights to work 5 Non-Caymanian permanent resident WITHOUT rights to work 6 Asylum holder/seekers 7 Other 8 |
|----------|--|---|--|---|--|
| | If NO , STOP interview for that person | | If not stated then estimate age if you see the person. Otherwise ask the respondent to estimate use 97 for age over 96 | | |
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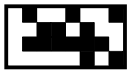
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Section 2- Educational Characteristics

| | | | | | | | | |
|--|--|---|--|--|--|--|--|--|
| P E R S O N # | 2.1 What is the highest <u>grade</u> that . . . <u>completed</u> ? | | | | 2.2 What is the <u>highest examination</u> . . . ever passed ? | | | |
| | 1 None 7 Primary Yr2 13 Middle - Yr8 19 Community College 2 Nursery 8 Primary Yr3 14 Middle - Yr9 20 College 3 Pre-school 9 Primary Yr4 15 High Sch - Yr10 21 University 4 Kindergarten 10 Primary Yr5 16 High Sch- Yr11 22 Other 5 Special Educ. 11 Primary Yr6 17 High Sch- Yr12 23 Don't Know 6 Primary Yr1 12 Middle - Yr7 18 Vocational | | | | None 1 CXC Basic 2 GCE"O" / CXC Gen Prof (1 or 2 subjects) 3 GCE"O" / CXC Gen Prof (3 or 4 subjects) 4 GCE"O" / CXC Gen Prof (5 over subjects) 5 GCE "A" / CAPE / HSC 1 or 2 6 GCE "A" / CAPE / HSC 3 & over 7 GCSE 8 IGCSE 9 Diploma or Equivalent Certificate 10 Associate Degree 11 Undergraduate Degree 12 Postgraduate Degree 13 Professional Qualifications 14 Other 15 | | | |
| | For Individuals less than 15 years old, Go to 6.1 | | | | | | | |
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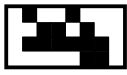


Section 3 - Labour Force

To be completed for those age 15 and older.

| PERSON # | 3.1 Did . . . do any work in the Cayman Islands, for pay, profit or family gain during the week ending Oct. 6, 2007? Yes . . .1 No2 Include work for as little as ONE (1) hour Exclude work around or in own house & volunteer work. If YES, Go to 4.1 | 3.2 Did . . . have a job at which you / he/she did not work during the week ending Oct. 6, 2007? Yes . . .1 No2 If NO, Go to 3.4 | 3.3 What was the MAIN reason was absent from work during the week ending Oct 6, 2007? Vacation1 Seasonal inactivity2 Student / In Training ..3 Home / family duties ..4 Maternity Leave5 Paternity Leave6 Illness / Injury.....7 Other 8 GO TO 4.1 | 3.4 During the week ending Oct. 6, 2007 did . . . have a job to start in 4 weeks or less? Yes . . .1 No2 If YES, Go to 5A.1 | 3.5 What was the MAIN reason was not working during the week ending Oct 6, 2007? No work available1 Seasonal inactivity 2 Student / In training3 Home / family duties. ...4 Retired 5 Illness / Injury 6 Infirmity / Disabled 7 Waiting for work permit / application approval ... 8 Did not want to work .. 9 Other 10 | 3.6 Has been looking for work and available for work in the last 4 weeks? Yes . . .1 No2 Looking for work includes : - Checking newspaper - Submitted job application - Ask friends about vacancies - Check Internet for possible jobs If Yes, Go to 5A.1 If No, Go to 5B.1 | | |
|----------|--|---|---|--|---|---|---|---|
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Section 4 - Employment

To be completed by persons employed during the week ending Oct. 6,

| P E R S O N # | <p>4.1 Did ... have more than one job including business or contract work in the Cayman Islands during the week ending Oct. 6, 2007?</p> <p>Yes1 No2</p> <p>"Business" includes family business</p> | <p>4.2 How many years have ... been in the <u>main</u> job?</p> <p>Put 97 for less than 6 months</p> <p>Put "1" for 6 months to 1 year</p> <p>Put 99 for not stated</p> | <p>4.3 How many hours did ... work in his / her job(s) during week ending Oct. 6, 2007 ?</p> <p>If Total > or = 30, Go to 4.6</p> | <p>4.4 What was the <u>main</u> reason why WORKED LESS THAN 30 HOURS in your / his / her job(s) during the week ending Oct 6, 2007?</p> <p>Holiday / Vacation 1 Maternity / Paternity Leave ... 2 Illness / Injury 3 Only hours available 4 Job ended in ref. week 5 Student / In Training 6 Home / Family duties 7 No work available 8 Other 9</p> | <p>4.5 Did seek AND was he /she available to work additional hours during week ending Oct. 6, 2007?</p> <p>Yes1 No2</p> | |
|---------------------------------|--|---|--|---|---|---|
| | 01 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="text"/> | <p>Main Job Other Job(s) Total</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <p>If Total > or = 30, GOTO 4.6</p> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| | 02 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="text"/> | <p>Main Job Other Job(s) Total</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <p>If Total > or = 30, GOTO 4.6</p> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| | 03 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="text"/> | <p>Main Job Other Job(s) Total</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <p>If Total > or = 30, GOTO 4.6</p> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| | 04 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="text"/> | <p>Main Job Other Job(s) Total</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <p>If Total > or = 30, GOTO 4.6</p> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| | 05 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="text"/> | <p>Main Job Other Job(s) Total</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <p>If Total > or = 30, GOTO 4.6</p> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| | 06 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="text"/> | <p>Main Job Other Job(s) Total</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <p>If Total > or = 30, GOTO 4.6</p> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| | 07 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="text"/> | <p>Main Job Other Job(s) Total</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <p>If Total > or = 30, GOTO 4.6</p> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| | 08 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="text"/> | <p>Main Job Other Job(s) Total</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <p>If Total > or = 30, GOTO 4.6</p> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 8 <input type="radio"/> 3 <input type="radio"/> 6 <input type="radio"/> 9 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |





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Section 4 - Employment cont'd

To be completed by persons employed during the week ending Oct.6, 2007.

| P E R S O N # | 4.6 What category of worker is . . . in his / her <u>main</u> job ? | 4.7 How many employees at . . . place of work ? | 4.8 What is . . . occupation in his/ her <u>main</u> job ? | 4.9 What kind of business is carried on at . . . 's <u>main</u> job? |
|---------------------------------|--|--|--|--|
| | Employee (work for someone) - E 1 Self-employed, with NO employees SE 2 Self-employed, with employees SEE 3 Unpaid family business worker UFW 4 | 1-10 1 11-24 2 25-49 3 50 + 4 | <div style="border: 1px solid black; padding: 2px; display: inline-block;">Probe , get details</div> | <div style="border: 1px solid black; padding: 2px; display: inline-block;">Write kind of business & name of business</div> |
| 01 | <input type="radio"/> 1 E <input type="radio"/> 2 SE <input type="radio"/> 3 SEE <input type="radio"/> 4 UFW | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 02 | <input type="radio"/> 1 E <input type="radio"/> 2 SE <input type="radio"/> 3 SEE <input type="radio"/> 4 UFW | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 03 | <input type="radio"/> 1 E <input type="radio"/> 2 SE <input type="radio"/> 3 SEE <input type="radio"/> 4 UFW | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 04 | <input type="radio"/> 1 E <input type="radio"/> 2 SE <input type="radio"/> 3 SEE <input type="radio"/> 4 UFW | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 05 | <input type="radio"/> 1 E <input type="radio"/> 2 SE <input type="radio"/> 3 SEE <input type="radio"/> 4 UFW | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 06 | <input type="radio"/> 1 E <input type="radio"/> 2 SE <input type="radio"/> 3 SEE <input type="radio"/> 4 UFW | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 07 | <input type="radio"/> 1 E <input type="radio"/> 2 SE <input type="radio"/> 3 SEE <input type="radio"/> 4 UFW | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 08 | <input type="radio"/> 1 E <input type="radio"/> 2 SE <input type="radio"/> 3 SEE <input type="radio"/> 4 UFW | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | _____ _____ <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |



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Section 4 - Employment cont'd

To be completed by persons employed during the week ending Oct.6, 2007.

| PERSON # | 4.10 How much was your / . . . earnings from your/ his/ her MAIN job for September 2007? | 4.11 How much was your / . . . earnings from your/ his/ her OTHER job(s) for September 2007? |
|----------|---|---|
| | | Refer to FLASH CARD for earnings range |
| 01 | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 Not Stated | <input type="radio"/> 1 <input type="radio"/> 6 <input type="radio"/> 2 <input type="radio"/> 7 <input type="radio"/> 3 <input type="radio"/> 8 Not Stated <input type="radio"/> 4 <input type="radio"/> 9 Not applicable <input type="radio"/> 5 |
| 02 | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 Not Stated | <input type="radio"/> 1 <input type="radio"/> 6 <input type="radio"/> 2 <input type="radio"/> 7 <input type="radio"/> 3 <input type="radio"/> 8 Not Stated <input type="radio"/> 4 <input type="radio"/> 9 Not applicable <input type="radio"/> 5 |
| 03 | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 Not Stated | <input type="radio"/> 1 <input type="radio"/> 6 <input type="radio"/> 2 <input type="radio"/> 7 <input type="radio"/> 3 <input type="radio"/> 8 Not Stated <input type="radio"/> 4 <input type="radio"/> 9 Not applicable <input type="radio"/> 5 |
| 04 | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 Not Stated | <input type="radio"/> 1 <input type="radio"/> 6 <input type="radio"/> 2 <input type="radio"/> 7 <input type="radio"/> 3 <input type="radio"/> 8 Not Stated <input type="radio"/> 4 <input type="radio"/> 9 Not applicable <input type="radio"/> 5 |
| 05 | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 Not Stated | <input type="radio"/> 1 <input type="radio"/> 6 <input type="radio"/> 2 <input type="radio"/> 7 <input type="radio"/> 3 <input type="radio"/> 8 Not Stated <input type="radio"/> 4 <input type="radio"/> 9 Not applicable <input type="radio"/> 5 |
| 06 | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 Not Stated | <input type="radio"/> 1 <input type="radio"/> 6 <input type="radio"/> 2 <input type="radio"/> 7 <input type="radio"/> 3 <input type="radio"/> 8 Not Stated <input type="radio"/> 4 <input type="radio"/> 9 Not applicable <input type="radio"/> 5 |
| 07 | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 Not Stated | <input type="radio"/> 1 <input type="radio"/> 6 <input type="radio"/> 2 <input type="radio"/> 7 <input type="radio"/> 3 <input type="radio"/> 8 Not Stated <input type="radio"/> 4 <input type="radio"/> 9 Not applicable <input type="radio"/> 5 |
| 08 | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 Not Stated | <input type="radio"/> 1 <input type="radio"/> 6 <input type="radio"/> 2 <input type="radio"/> 7 <input type="radio"/> 3 <input type="radio"/> 8 Not Stated <input type="radio"/> 4 <input type="radio"/> 9 Not applicable <input type="radio"/> 5 |



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Section 5A - Unemployment

For UNEMPLOYED persons who were part of the LABOUR FORCE during week ending Oct. 6, 2007.

| P E R S O N # | 5A.1 How long has ... been without work? | 5A.2 Have you / ... ever had a job before? | 5A.3 What kind of work was ... doing in his/ her last job? |
|---------------------------------|--|--|---|
| | | 1 < 3 (months)1 3 < 6 (months)2 6 < 12 (months) ...3 12 + (months)4 | Yes1 No2 <div style="border: 1px solid black; padding: 2px; display: inline-block;">If NO, Go to 5A.5</div> |
| 01 | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> |
| 02 | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> |
| 03 | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> |
| 04 | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> |
| 05 | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> |
| 06 | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> |
| 07 | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> |
| 08 | <input type="radio"/> 1 <input type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> |



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Section 5A - Unemployment cont'd

For UNEMPLOYED persons who were a part of the LABOUR FORCE during week ending Oct. 6, 2007.

P
E
R
S
O
N
#

5A.4
What kind of business was carried on where . . . last worked?

Write kind of business & name of business

5A.5
What was main means of financial support during the week ending Oct. 6, 2007?

- Parents 1
- Spouse 2
- Other relatives & friends 3
- Savings / investments 4
- Social Services 5
- Pension / veteran / seaman 6
- Other 7

5A.6
What kind of work was . . . looking for ?

Probe , get details

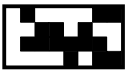
Go to 6.1

| | | | |
|----|--|---|--|
| 01 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 02 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 03 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 04 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 05 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 06 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 07 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |
| 08 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 7 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 <input type="radio"/> 6 | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px auto;"></div> |



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Section 5B - Unemployment



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For persons NOT EMPLOYED i.e. NOT IN THE LABOUR FORCE during week ending Oct. 6, 2007.

PERSON #

5B.1
What was the **main** reason was not seeking work and/or not being available for work during the past 4 weeks ?

- In School 1
- Home / family duties 2
- Retired / Elderly 3
- Infirmity / Disabled 4
- Temporary Illness 5
- Did not want work 6
- Not eligible or waiting for work permit / application approval 7
- Pregnancy 8
- Caring for Someone 9
- Don't Know 10
- Other 11

5B.2
What was **main** means of financial support during the week ending Oct. 6, 2007 ?

- Parents 1
- Spouse / Partner 2
- Other relatives & friends 3
- Savings / investments 4
- Social Services 5
- Pension / veteran / seaman 6
- Other 7

| | | | | | | |
|----|-------------------------|-------------------------|--------------------------|-------------------------|-------------------------|-------------------------|
| 01 | <input type="radio"/> 1 | <input type="radio"/> 5 | <input type="radio"/> 9 | <input type="radio"/> 1 | <input type="radio"/> 4 | <input type="radio"/> 7 |
| | <input type="radio"/> 2 | <input type="radio"/> 6 | <input type="radio"/> 10 | <input type="radio"/> 2 | <input type="radio"/> 5 | |
| | <input type="radio"/> 3 | <input type="radio"/> 7 | <input type="radio"/> 11 | <input type="radio"/> 3 | <input type="radio"/> 6 | |
| | <input type="radio"/> 4 | <input type="radio"/> 8 | | | | |
| 02 | <input type="radio"/> 1 | <input type="radio"/> 5 | <input type="radio"/> 9 | <input type="radio"/> 1 | <input type="radio"/> 4 | <input type="radio"/> 7 |
| | <input type="radio"/> 2 | <input type="radio"/> 6 | <input type="radio"/> 10 | <input type="radio"/> 2 | <input type="radio"/> 5 | |
| | <input type="radio"/> 3 | <input type="radio"/> 7 | <input type="radio"/> 11 | <input type="radio"/> 3 | <input type="radio"/> 6 | |
| | <input type="radio"/> 4 | <input type="radio"/> 8 | | | | |
| 03 | <input type="radio"/> 1 | <input type="radio"/> 5 | <input type="radio"/> 9 | <input type="radio"/> 1 | <input type="radio"/> 4 | <input type="radio"/> 7 |
| | <input type="radio"/> 2 | <input type="radio"/> 6 | <input type="radio"/> 10 | <input type="radio"/> 2 | <input type="radio"/> 5 | |
| | <input type="radio"/> 3 | <input type="radio"/> 7 | <input type="radio"/> 11 | <input type="radio"/> 3 | <input type="radio"/> 6 | |
| | <input type="radio"/> 4 | <input type="radio"/> 8 | | | | |
| 04 | <input type="radio"/> 1 | <input type="radio"/> 5 | <input type="radio"/> 9 | <input type="radio"/> 1 | <input type="radio"/> 4 | <input type="radio"/> 7 |
| | <input type="radio"/> 2 | <input type="radio"/> 6 | <input type="radio"/> 10 | <input type="radio"/> 2 | <input type="radio"/> 5 | |
| | <input type="radio"/> 3 | <input type="radio"/> 7 | <input type="radio"/> 11 | <input type="radio"/> 3 | <input type="radio"/> 6 | |
| | <input type="radio"/> 4 | <input type="radio"/> 8 | | | | |
| 05 | <input type="radio"/> 1 | <input type="radio"/> 5 | <input type="radio"/> 9 | <input type="radio"/> 1 | <input type="radio"/> 4 | <input type="radio"/> 7 |
| | <input type="radio"/> 2 | <input type="radio"/> 6 | <input type="radio"/> 10 | <input type="radio"/> 2 | <input type="radio"/> 5 | |
| | <input type="radio"/> 3 | <input type="radio"/> 7 | <input type="radio"/> 11 | <input type="radio"/> 3 | <input type="radio"/> 6 | |
| | <input type="radio"/> 4 | <input type="radio"/> 8 | | | | |
| 06 | <input type="radio"/> 1 | <input type="radio"/> 5 | <input type="radio"/> 9 | <input type="radio"/> 1 | <input type="radio"/> 4 | <input type="radio"/> 7 |
| | <input type="radio"/> 2 | <input type="radio"/> 6 | <input type="radio"/> 10 | <input type="radio"/> 2 | <input type="radio"/> 5 | |
| | <input type="radio"/> 3 | <input type="radio"/> 7 | <input type="radio"/> 11 | <input type="radio"/> 3 | <input type="radio"/> 6 | |
| | <input type="radio"/> 4 | <input type="radio"/> 8 | | | | |
| 07 | <input type="radio"/> 1 | <input type="radio"/> 5 | <input type="radio"/> 9 | <input type="radio"/> 1 | <input type="radio"/> 4 | <input type="radio"/> 7 |
| | <input type="radio"/> 2 | <input type="radio"/> 6 | <input type="radio"/> 10 | <input type="radio"/> 2 | <input type="radio"/> 5 | |
| | <input type="radio"/> 3 | <input type="radio"/> 7 | <input type="radio"/> 11 | <input type="radio"/> 3 | <input type="radio"/> 6 | |
| | <input type="radio"/> 4 | <input type="radio"/> 8 | | | | |
| 08 | <input type="radio"/> 1 | <input type="radio"/> 5 | <input type="radio"/> 9 | <input type="radio"/> 1 | <input type="radio"/> 4 | <input type="radio"/> 7 |
| | <input type="radio"/> 2 | <input type="radio"/> 6 | <input type="radio"/> 10 | <input type="radio"/> 2 | <input type="radio"/> 5 | |
| | <input type="radio"/> 3 | <input type="radio"/> 7 | <input type="radio"/> 11 | <input type="radio"/> 3 | <input type="radio"/> 6 | |
| | <input type="radio"/> 4 | <input type="radio"/> 8 | | | | |



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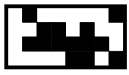


Section 6 - Expenses & Remittances

To be answered by ALL

| PERSON # | <p>6.1 How many personal trips have you/ made abroad from the Cayman Islands aduring the last 12 months ?</p> <p>If NONE, write zero (0) & GO TO 6.5</p> | <p>6.2 What is the TOTAL Estimated cost in CI\$ of personal travel abroad (not including money spent on gifts & personal effects abroad) during the last 12 months?</p> | <p>6.3 What is the TOTAL estimated cost in CI\$ (spent abroad) for gifts & personal effects BROUGHT TO CAYMAN during the last 12 months ?</p> | <p>6.4 What is the TOTAL estimated cost in CI\$ for gifts & personal effects purchased in Cayman and taken ABROAD during the last 12 months?</p> | <p>6.5 During the past 12 months, did . . . SEND any money abroad?</p> <p>Yes1 No2</p> <p>If NO, Go to 6.8</p> |
|----------|--|--|---|--|---|
| 01 | <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 02 | <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 03 | <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 04 | <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 05 | <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 06 | <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 07 | <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 08 | <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="text"/> , <input type="text"/> | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |





Section 6 - Expenses & Remittances cont'd

To be answered by ALL

| P E R S O N # | 6.6 What is the TOTAL estimated amount (in CI\$) . . . SENT abroad during the past 12 months? under \$6,000 1 \$6,000 - \$11,999 2 \$12,000 - \$23,999 3 \$24,000 - \$41,999 4 \$42,000 + 5 | 6.7 How was this money SENT abroad? Wire transfer / Cable 1 Western Union/Money Express etc 2 Draft / money order 3 Post Office 4 Sent via an individual 5 | 6.8 During the past 12 months, did . . . RECEIVE any money FROM abroad? Yes 1 No 2 | 6.9 What is the TOTAL estimated amount (in CI\$) received FROM abroad during the past 12 months? under \$6,000 1 \$6,000 - \$11,999 2 \$12,000 - \$23,999 3 \$24,000 - \$41,999 4 \$42,000 + 5 | 6.10 How was this money RECEIVED FROM ABROAD? Wire transfer / Cable 1 Western Union / Money Express etc 2 Draft / money order 3 Post Office 4 Sent via an individual 5 |
|---------------------------------|--|--|---|---|--|
| | | Multiple answers allowed | If NO, & below 15 years, END INTERVIEW | | Multiple answers allowed |
| 01 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 |
| 02 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 |
| 03 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 |
| 04 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 |
| 05 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 |
| 06 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 |
| 07 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 |
| 08 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 | <input type="radio"/> 1 <input type="radio"/> 4 <input type="radio"/> 2 <input type="radio"/> 5 <input type="radio"/> 3 |





Section 7 - Small Business

To be completed for those age 15 and older.

| PERSON # | 7.1 Do you own or operate a small business? Yes1 No2 | 7.2 What is the main activity of your business? | 7.3 How long (in years OR months) has this business been in operation? | 7.4 From where does the business operate? At Home 1 On a construction site 2 A fixed factory 3 A fixed office 4 A fixed shop 5 In a market place 6 Roadside 7 As a mobile vendor 8 On an empty / private lot .. 9 Other 10 |
|----------|--|--|--|---|
| | <p>If NO & NOT head of household, END INTERVIEW</p> <p>If NO & head of household Go to 8.1</p> | | <p>Enter EITHER years or months</p> <p>Put 99 in years for not stated</p> | |
| 01 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> | <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Years OR <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Months | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 |
| 02 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> | <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Years OR <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Months | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 |
| 03 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> | <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Years OR <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Months | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 |
| 04 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> | <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Years OR <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Months | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 |
| 05 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> | <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Years OR <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Months | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 |
| 06 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> | <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Years OR <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Months | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 |
| 07 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> | <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Years OR <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Months | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 |
| 08 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No | <hr/> <hr/> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> | <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Years OR <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Months | <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 4 <input type="radio"/> 8 |





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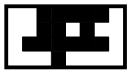
Section 7 - Small Business

For ALL SELF EMPLOYED PERSONS

| PERSON # | 7.5 What was the total estimated expenditure (in CI\$) in the past 12 months for your / ... business? | 7.6 What was the estimated total income (in CI\$) in the past 12 months earned by your / .. business? | 7.7 Did the business undertake work on a sub-contracting basis ? |
|----------|--|---|---|
| | 0 - 24001 2401 - 48002 4801 - 60003 6001 +4 | 0 - 24001 2401 - 48002 4801 - 60003 6001 +4 | Yes1 No2 <div style="border: 1px solid black; padding: 5px; text-align: center;"> If NOT head of household, END INTERVIEW </div> |
| 01 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 02 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 03 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 04 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 05 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 06 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 07 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |
| 08 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 | <input type="radio"/> 1 Yes <input type="radio"/> 2 No |



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Section 8 - Dwelling Characteristics

For HEAD OF HOUSEHOLD

QUESTIONS ON THIS PAGE TO BE ASKED LAST IN THE INTERVIEW.
Report answers for the dwelling that your household occupied on June 30, 2007

8.1 Did at least ONE member of this household live in Cayman Islands as at June 30, 2007 ?

- 1 Yes
- 2 No

If NO, End INTERVIEW

8.2 The dwelling you occupied on or before June 30, 2007 was ...

Select ONLY ONE

- 1 Detached house
- 2 Part of a private house
- 3 Apartment
- 4 Condominium / townhouse
- 5 One-room / studio
- 6 Combined business / dwelling
- 7 Trailer Home
- 8 Boat
- 9 Other (give details) _____

8.3 Is this accommodation . .

Read & Select ONLY ONE

- 1 Owned with mortgage
- 2 Owned without mortgage
- 3 Rented - Furnished (GO TO Q 8.5a)
- 4 Rented - Unfurnished (GO TO Q 8.5a)
- 5 Leased to own (GO TO Q 8.5a)
- 6 Provided rent-free
- 7 Other (specify) _____

8.4 How much do you think it would have cost to rent (not including utilities) a similar accommodation per month ? . . .

CI\$,

8.5.a How much rent do you / does . . . pay for this accommodation per month?

CI\$,

8.5.b If rent includes utilities and /or cable, please specify what is included

- 1 Electricity
- 2 Water
- 3 Cable

Multiple answers allowed

THANK YOU

END OF INTERVIEW

