

Sample survey of the population  
and the labour market

## Microcensus 2019

and 2019 Labour Force Survey  
of the European Union



Muster

For information on the legal basis, the obligation to provide information and confidentiality (data protection) please refer to the explanations starting on page 65 of the questionnaire.

Thank you for your time!

<input type="text"/>	<input type="text"/>	<input type="text"/>
Auswahlbezirks-Nr.	Lfd. Nr. des Haushalts im Auswahlbezirk	Folge- bogen

## i General instructions for completion ...

Before you start completing the questionnaire please open the top flap and enter the names in the following order:

1. Adult in the household
2. Spouse or cohabiting partner of Person 1
3. Children
4. Relatives
5. Other people in the household

Please retain this order throughout the questionnaire.

**If possible, each person should answer the questions for him or herself.**

You will need to complete all questions in full, truthfully and within the deadlines set by the statistical offices of the Länder.

Information may however be provided on behalf of children, people in need of care or people with disabilities who are not able to answer the questions for themselves.

**We will guide you through the questionnaire.**

An arrow and a small numeral beside an answer box indicate which question you should answer next.

An arrow and the word "End" in small print indicate that no further questions need to be answered.

If there is no arrow beside an answer box, please answer the next question.

<b>47 Do you work full-time or part-time ?</b>										
Full-time .....	<input checked="" type="checkbox"/>	→50	<input type="checkbox"/>	→50	<input type="checkbox"/>	→50	<input type="checkbox"/>	→50	<input type="checkbox"/>	→50
Part-time .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Everyone working full-time is to skip questions 48 and 49 and continue with question 50. Those who work part-time continue with question 48.

Where a question is preceded by a phrase beginning with "If ..." the question is to be answered only by certain people.

<b>15 If you are married:</b>										
<b>Does your spouse live in this household ?</b>										
Yes, my spouse is number (see flap) .....	<input type="checkbox"/>	02	<input type="checkbox"/>	01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Question 15 is to be answered only by married people.

**Are there more than 5 people in the household ?**

Please contact the statistical office to request an extra questionnaire. The address is given on the front cover.

# Household and dwelling

**1 Are there any other households in your dwelling apart from your own, e.g. subtenants?**

**i Other households in your dwelling** consist of people with whom you do not live together or maintain a joint household.

Yes, number of other households .....   
No, no other households ..... 0

**2 How many people in total were living in your household on Wednesday last week?**

**i People who are temporarily away from home,** for instance for job or health reasons, are part of your household if that is where they usually live.

**Subtenants, visitors and domestic staff** are not household members.

Members of a flat-sharing community should usually be treated as separate households.

Number of people in your household (including yourself) .....

**3 Was your household interviewed for the microcensus last year?**

Yes ..... 1   
No ..... 8  → 7

**4 If your household was interviewed for the microcensus: Have any household members died in the last 12 months?**

Yes, number of those who died .....   
No, nobody died ..... 0

**5 If your household was interviewed for the microcensus: Have any household members moved away in the last 12 months?**

Yes, number of those who moved away .....   
No, nobody moved away ..... 0

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# People and dwelling

Person 1 | Person 2 | Person 3 | Person 4 | Person 5

If you have not completed the name flap yet:  
Please enter the names on the flap now.

**i** Please see the general information on p. 2

**6** If your household was interviewed for the microcensus:  
**Have you moved into this dwelling in the last 12 months?**

**i** For example, children born in the last 12 months moved in as well.

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**7** Do you occupy at least one more dwelling (room, accommodation, residential establishment)?

Please mark all relevant boxes.

Yes, I have at least one more dwelling in Germany .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, I have at least one more dwelling abroad .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, I do not have another dwelling. ....	8	<input type="checkbox"/> →9	<input type="checkbox"/> →9	<input type="checkbox"/> →9	<input type="checkbox"/> →9	<input type="checkbox"/> →9

**8** If you have at least one more dwelling:  
**Is the local dwelling your main residence?**

**i** If you have more than one dwelling, your main residence is the one where you usually live (centre of life, family home).

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**9** Please indicate your sex.

Male .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Female .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**10** When were you born?

	Person 1	Person 2	Person 3	Person 4	Person 5
Month .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Year .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

	Person 1	Person 2	Person 3	Person 4	Person 5
<b>11 What is your marital status ?</b>					
Single .....	1 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Married .....	2 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Widowed .....	3 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Divorced .....	4 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Registered life partnership (same-sex) .....	5 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Registered life partner (same-sex) has died .....	6 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Registered life partnership (same-sex) has been dissolved .....	7 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## People and household

**12 Please indicate:**

**Which group do you belong to?**

- One-person household .....  → 18
- Multi-person household .....

**13 Does your mother live in this household ?**

**i** This includes stepmothers, adoptive and foster mother

- Yes, my mother is number (see flap). .....
- No ..... 8

**14 Does your father live in this household ?**

**i** This includes stepfathers, adoptive and foster fathers.

- Yes, my father is number (see flap). .....
- No ..... 8

**15 If you are married:**

**Does your spouse live in this household ?**

- Yes, my spouse is number  
(see flap). .....  → 17
- No ..... 8

**16** If you are 16 years or older and not married or if you answered “No” to question 15:

**Are you the cohabiting partner of a household member?**

**i** This includes registered life partnerships.

Yes, my cohabiting partner is number  
(see flap) .....

No .....

	Person 1	Person 2	Person 3	Person 4	Person 5
Yes, my cohabiting partner is number (see flap) .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
No .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**17** What is your relationship to Person 1 ?

I am Person 1. ....

How are you related to Person 1:

... Wife, husband ..... 1

... Daughter, son  
(including children-in-law, stepchildren, adopted and  
foster children) ..... 2

... Grandchild, great-grandchild ..... 3

... Mother, father  
(including parents-in-law, stepparents, adoptive and  
foster parents) ..... 4

... Grandmother, grandfather ..... 5

... Sister, brother ..... 6

... Other relative by birth or marriage ..... 7

... Not related by birth or marriage ..... 8

	Person 1	Person 2	Person 3	Person 4	Person 5
I am Person 1. ....	<input type="checkbox"/>				
... Wife, husband ..... 1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Daughter, son (including children-in-law, stepchildren, adopted and foster children) ..... 2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Grandchild, great-grandchild ..... 3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Mother, father (including parents-in-law, stepparents, adoptive and foster parents) ..... 4		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Grandmother, grandfather ..... 5		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Sister, brother ..... 6		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Other relative by birth or marriage ..... 7		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Not related by birth or marriage ..... 8		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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# Your employment situation

Person 1 Person 2 Person 3 Person 4 Person 5

18 Please indicate:

Which age group do you belong to?

14 years or younger .....

→ 119  → 119  → 119  → 119  → 119

15 years or older .....

19 Regarding your current situation:

Which category best describes your situation?

**i** See also p 65: **i** "Caregiver Leave Act/Family Caregiver Leave Act".

Code from List 1 .....

List 1

Employee, public official (incl. temporary or professional soldier) ..... 01	Apprentice receiving apprenticeship pay ..... 04	Pupil, person in non-remunerated vocational training, student ..... 08
Self-employed person, freelancer ..... 14	Unpaid family worker in a family business ..... 05	Pensioner ..... 09
Person in employment on parental leave ..... 02	Person doing volunteer service (Federal Volunteer Service, voluntary social year) ..... 07	Unemployed ..... 10
Person in employment in partial retirement ..... 03	Person doing voluntary military service ..... 15	Housewife/househusband ..... 11
Person in employment released fully or partly from work under the Caregiver Leave Act ..... 16		Permanently unfit for work ..... 12
Person in employment released partly from work under the Family Caregiver Leave Act ..... 17		Other ..... 13

20 If you selected either of codes 08–13 in answer to question 19:

Do you earn money from a second job or from any other work?

Yes, from ...

Person 1 Person 2 Person 3 Person 4 Person 5

... a 450-euros job, mini-job (average maximum earnings of 450 euros per month) ..... 1

... a one-euro job (job done by people receiving unemployment benefit II) ..... 2

... short-term employment (a maximum of 3 months or 70 days worked per year) ..... 3

... self-employment or a freelance job ..... 4

... other paid work or work for payment in kind ..... 5

No ..... 8

21 If you selected either of codes 08–13 in answer to question 19:

Are you an unpaid family worker in a family business?

Yes ..... 1

No ..... 8

# Main job and second job in the last week

Person 1 | Person 2 | Person 3 | Person 4 | Person 5

## 22 Please indicate:

### Which group do you belong to?

Persons in employment (codes 01–05, 07 or 14–17 in answer to question 19) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Persons with a second job, doing paid work, or unpaid family workers ("Yes" to question 20 or "Yes" to question 21) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Persons not in employment ("No" to question 20 and "No" to question 21) .....	<input type="checkbox"/> → 87	<input type="checkbox"/> → 87	<input type="checkbox"/> → 87	<input type="checkbox"/> → 87	<input type="checkbox"/> → 87

## 23 Have you worked at least 1 hour last week in your main or second job?

Yes .....	1	<input type="checkbox"/> → 27	<input type="checkbox"/> → 27	<input type="checkbox"/> → 27	<input type="checkbox"/> → 27	<input type="checkbox"/> → 27
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 24 If you did not work either in your main job or second job last week:

### Why did you not work?

**i** See also p. 65: **2** "Partial retirement".

If there are several reasons, please enter the main one.

Code from List 2

Please enter the main reason. ....

<b>List 2</b>	Illness, accident (incl. spa treatment, rehabilitation) .....	01	Short-time work for technical or economic reasons .....	07
	Maternity leave .....	02	Compensation leave (within the framework of a working time account or an annualised hours contract) .....	08
	Partial retirement .....	11	General or vocational education, advanced training, school education .....	09
	Parental leave .....	03	Other reason, personal or family responsibilities ....	10
	Released from work under the Caregiver Leave Act .....	12		
	Holidays, special leave .....	04		
	Strike, lockout .....	05		
	Bad weather .....	06		

## 25 If you did not work last week:

### Indicate the total period of your absence from work.

3 months or less .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More than 3 months .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



**26** If you did not work last week:

**Are you still receiving more than half of your former income (continued payment of wage or salary, public benefits)?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Yes .....	1 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable because self-employed, freelancer .....	2 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable because unpaid family worker in a family business .....	3 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Information on your main job and second job

**27** Please indicate:

**Which group do you belong to?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Persons in employment, persons with a second job (even if away from job for up to 3 months) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Persons in employment, persons with a second job who have been away from their job for more than 3 months ...					
... due to illness/accident, maternity leave, partial retirement .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... due to other circumstances, while <b>receiving at least half</b> of the former income (e.g. parental leave, caregiver leave, family caregiver leave) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... due to other circumstances, while <b>receiving less than half</b> of the former income (e.g. parental leave, caregiver leave, family caregiver leave) .....	<input type="checkbox"/> → 90	<input type="checkbox"/> → 90	<input type="checkbox"/> → 90	<input type="checkbox"/> → 90	<input type="checkbox"/> → 90
Persons not in employment .....	<input type="checkbox"/> → 88	<input type="checkbox"/> → 88	<input type="checkbox"/> → 88	<input type="checkbox"/> → 88	<input type="checkbox"/> → 88

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**28 What is applicable to your current job?**

**i** If you have more than one job, your answers refer to the job in which you work the most hours (main job).

If you are away from your job, for example because of parental leave or time out, your answers refer to the job from which you are absent.

See also p. 65: **3** "Categorisation of job".

Code from List 3 .....

List 3				
<b>List 3</b>	<b>Self-employed person, freelancer</b>		<b>Public official, judge (not incl. candidates)</b>	
	without employees .....	01	in the ordinary service .....	03
	with employees .....	02	in the intermediate service .....	04
			in the higher intermediate service .....	05
	<b>Wage earner, homemaker (not incl. apprentices) or person with a second job</b>		in the higher service .....	06
	Semi-skilled or unskilled worker .....	07	<b>Apprentice, candidate public official, intern/trainee and the like</b>	
	Skilled worker, journeyman/woman .....	08	Apprentice receiving apprenticeship pay .....	22
	Foreman/woman, work team leader, group leader .....	09	Candidate public official	
	Master craftsman/woman, site foreman/woman (as wage earner) .....	10	in the ordinary service .....	23
			in the intermediate service .....	24
	<b>Salary earner (not incl. apprentices) or person with a second job</b>		in the higher intermediate service .....	25
	Exclusively performing administrative duties: e.g. messenger, cashier, typist .....	11	in the higher service .....	26
	Performing simple specialised duties: e.g. sales assistant, clerk, secretary .....	14	Intern, trainee (incl. paid practical training or internship) .....	27
	Performing complex specialised duties: e.g. nurse, technical assistant .....	15	<b>Other employee</b>	
	Master craftsman/woman, site foreman/woman (as salary earner) .....	16	Unpaid family worker in a family business .....	19
	Performing independent duties incl. (limited) responsibilities: e.g. project leader, ward doctor, executive officer ..	17	Temporary or professional soldier .....	20
	Performing executive duties incl. decision-making powers: e.g. chief physician, chief executive officer, head of department, director .....	18	Person doing voluntary military service .....	28
			Person doing volunteer service (Federal Volunteer Service, voluntary social year) ..	29
		Other employee with a small-scale job .....	30	

**29 If you are an apprentice receiving apprenticeship pay:**

**With whom did you conclude your apprenticeship contract?**

With an establishment (company, shop, office, hospital, public authority) .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
With an inter-company or external institution as vocational training provider, e.g. a vocational training centre for disabled young people (Berufsbildungswerk), educational centre (Bildungszentrum) .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 30 Are you in marginal employment ?

**i** See also p. S. 65: **4** "Marginal employment"

Yes, in ...

... a 450-euros job, mini-job (average maximum earnings of 450 euros per month) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... a one-euro job (job done by people receiving unemployment benefit II) .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... short-term employment (a maximum of 3 months or 70 days worked per year) .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 31 How often do you work in your job ?

Regularly .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irregularly, occasionally .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On a seasonal basis .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 32 What do you mainly do in your job ?

Code from List 4 .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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<b>List 4</b>	<b>Setting up, monitoring machinery</b>	<b>Marketing, PR</b>
	Setting up, controlling, monitoring, maintaining machinery, technical installations, devices ..... 01	Advertising, marketing, public relations (PR) ..... 10
	<b>Cultivating, extracting, manufacturing</b>	<b>Management</b>
	Cultivating, breeding, nurturing, harvesting, fishing ..... 02	Management, leadership and executive functions ..... 11
	Mining, exploiting, extracting raw materials ..... 03	<b>Personal services</b>
	Manufacturing, handling and processing, constructing, finishing, installing, assembling ..... 04	Catering, accommodating, preparing food ..... 12
	<b>Trading, repairing</b>	Applying and/or interpreting laws, rules, and regulations; issuing certificates ..... 13
	Purchasing, selling, brokering, taking payment ..... 05	Educating, instructing, teaching ..... 14
	Repairing, renovating, restoring, mending ..... 06	Providing advice and/or information ..... 15
	<b>Office, technical office, IT, research</b>	Providing health or social support, long-term care, medical or cosmetic treatment ..... 16
	Performing paperwork, calculations, IT activities, accounting, drawing/drafting ..... 07	Working in the arts, journalism or entertainment ..... 17
	Measuring, checking, testing, monitoring according to predefined methods ..... 08	<b>Other services</b>
	Research and development ..... 21	Driving vehicles, packing, loading, sorting, delivering ..... 18
	Constructing, designing products, preparing, plans, programs and procedures ..... 09	Cleaning, removing waste, recycling ..... 19
		Securing, protecting, guarding, supervising, regulating traffic ..... 20

**33 What activities does your paid work usually consist of?**

Please mark all relevant boxes.

Giving guidance to staff .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervising staff .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distributing work .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Checking the work performed .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None of the activities mentioned above .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable, because either self-employed or unpaid family worker in a family business .....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Occupation and establishment

**34 Please enter the title of your occupation and the field in which you work.**

**i The occupational title and field of work**

are, for instance, shop assistant in food retailing, teacher at grammar school, official in the ordinary, intermediate, higher intermediate or higher customs service, engineer in civil engineering, artisanal glass-blower.

The occupation you currently practise may differ from the occupation you were originally trained in.

Person 1 Occupational title and field of work	Person 2 Occupational title and field of work	Person 3 Occupational title and field of work	Person 4 Occupational title and field of work	Person 5 Occupational title and field of work
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

**35 What kind of training is usually required for your current job?**

**i The training usually required**

may differ from your highest educational qualification.

No vocational training (unskilled work) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completed vocational training without additional qualification .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completed vocational training with additional qualification .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Higher education:						
Course of study with a standard period of less than 4 years (Bachelor's, Diplom degree from a college of public administration) .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Course of study with a standard period of at least 4 years (Diplom degree, Master's, state examination e.g. for the teaching profession) .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable because apprentice .....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**36 Do you mainly perform executive or supervisory duties in your job?**

Yes, executive duties (incl. the authority to take staff, budget and strategy decisions) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, supervisory duties (guiding and supervising staff, distributing work and checking the outcome) .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**37 Have you changed your job in the last 12 months?**

**i This includes** a change of job within the establishment.

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**38 Has your occupation changed in the last 12 months?**

**i This includes** a change of occupation without retraining.

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**39 Enter the branch of activity of the establishment (location you work in.**

**i If the establishment has several locations,** please enter the main activity of the location, not of the whole enterprise.

**If you are a temporary employee,** please enter the branch of activity in which you are currently employed.

Please state the branch of activity as accurately as possible  
For example:

- food retailing (not: trade)
- machine tool industry (not: factory)
- facility management, caretaker services, business consultancy (not: services)
- software development (not: IT)

See also p. 65: **5** "Establishment (location)".

Person 1 Branch of activity	Person 2 Branch of activity	Person 3 Branch of activity	Person 4 Branch of activity	Person 5 Branch of activity
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

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**40 Please enter the name and the address of the establishment you work in.**

**i The name and address of the establishment** will only be used to identify its branch of activity, but will not be stored.

**41 Are you employed in the public service?**

**i The public service comprises** the federal, Land and municipal authorities, public schools, the Federal Employment Agency, the social security institutions, the police and the Federal Armed Forces.

**Employees and officials in successor companies** of Deutsche Post, Bundesbahn/Reichsbahn as well as church employees are not employed in the public service.

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**42 How many people are employed in the establishment (location) you work in ?**

Up to 10 people <i>Please enter the exact number of people.</i> .....		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11 to 20 people .....	11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 to 50 people .....	12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50 to 250 people .....	13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
250 to 500 people .....	15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
500 people or more .....	14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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## Location of place of work

Person 1 | Person 2 | Person 3 | Person 4 | Person 5

### 43 Is your place of work located here in the municipality where you live?

**i** If you work at different places, your place of work is the location from where your work is organised.

Yes ..... 1  → 47  → 47  → 47  → 47  → 47  
 No ..... 8

### 44 Is your place of work located in Germany?

Yes, in ... Code from List 5 .....       
 No, my place of work is not in Germany. .... 88  → 46  → 46  → 46  → 46  → 46

#### List 5

Baden-Württemberg ..... 08	Hessen ..... 06	Sachsen ..... 14
Bayern ..... 09	Mecklenburg-Vorpommern ..... 13	Sachsen-Anhalt ..... 15
Berlin ..... 11	Niedersachsen ..... 03	Schleswig-Holstein ..... 01
Brandenburg ..... 12	Nordrhein-Westfalen ..... 05	Thüringen ..... 16
Bremen ..... 04	Rheinland-Pfalz ..... 07	
Hamburg ..... 02	Saarland ..... 10	

### 45 If your place of work is located in Germany: In which administrative district, rural district or urban district (town not attached to an administrative district) do you work?

**i** If a rural district and urban district have the same name, please add "LK" to the name of the rural district and "KS" to that of the "urban district".

Person 1 administrative district, rural district, urban district	Person 2 administrative district, rural district, urban district	Person 3 administrative district, rural district, urban district	Person 4 administrative district, rural district, urban district	Person 5 administrative district, rural district, urban district
<input type="text"/> ..... ..... ..... .....	<input type="text"/> ..... ..... ..... .....	<input type="text"/> ..... ..... ..... .....	<input type="text"/> ..... ..... ..... .....	<input type="text"/> ..... ..... ..... .....
↳ 47	↳ 47	↳ 47	↳ 47	↳ 47

**46** If your place of work is not located in Germany:  
**In which country, in which region do you work ?**

**i** If you work at different places,  
 your place of work is the location from where your  
 work is organised.

	Person 1	Person 2	Person 3	Person 4	Person 5
Code from List 6 .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

List 6	Europe		Europe		Africa	
	Albania .....	ALB	Norway .....	NOR	Morocco .....	MAR
Andorra .....	ADO	Austria .....		Egypt, Algeria, Libya, Tunisia .....	YYG	
Belarus .....	BLR	Upper Austria .....	AT1	Rest of Africa .....	YYH	
Belgium .....		Salzburg .....	AT2			
Liège .....	BE1	Tyrol .....	AT3			
Rest of Belgium .....	BE9	Vorarlberg .....	AT4	<b>America</b>		
Bosnia and Herzegovina .....	BIH	Rest of Austria .....	AT9	United States .....	USA	
Bulgaria .....	BGR	Poland .....		Canada .....	CAN	
Denmark .....	DNK	Zachodniopomorskie .....	PL1	Central America and Caribbean .....	YYL	
Estonia .....	EST	Dolnoslaskie .....	PL2	South America .....	YYJ	
Finland .....	FIN	Lubuskie .....	PL3			
France .....		Rest of Poland .....	PL9	<b>Middle East</b>		
Alsace .....	FR1	Portugal .....	PRT	Iraq .....	IRQ	
Lorraine .....	FR2	Romania .....	ROU	Iran .....	IRN	
Rest of France .....	FR9	Russian Federation .....	RUS	Kazakhstan .....	KAZ	
Greece .....	GRC	San Marino .....	SMR	Rest of Middle East .....	YYP	
Ireland .....	IRL	Sweden .....	SWE			
Iceland .....	ISL	Switzerland .....	CHE	<b>South and South East Asia</b>		
Italy .....	ITA	Serbia .....	SRB	Afghanistan .....	AFG	
Kosovo .....	XXK	Slovakia .....	SVK	Viet Nam .....	VNM	
Croatia .....	HRV	Slovenia .....	SVN	Rest of South and South East Asia .....	YYR	
Latvia .....	LVA	Spain .....	ESP			
Liechtenstein .....	LIE	Czech Republic .....		<b>East Asia</b>		
Lithuania .....	LTU	Jihozapad .....	CZ1	China .....	CHN	
Luxembourg .....	LUX	Severozapad .....	CZ2	Japan, Taiwan, South Korea, North Korea, Mongolia .....	YYS	
Malta .....	MLT	Severovychod .....	CZ3			
Macedonia .....	MKD	Rest of Czech Republic .....	CZ9	<b>Rest of the world</b> .....	YYF	
Moldova .....	MDA	Turkey .....	TUR			
Monaco .....	MCO	Ukraine .....	UKR			
Montenegro .....	MNE	Hungary .....	HUN			
Netherlands .....		Vatican City .....	VAT			
Drenthe .....	NL1	United Kingdom .....	GBR			
Gelderland .....	NL2	Cyprus .....	CYP			
Groningen .....	NL3					
Limburg .....	NL4					
Overijssel .....	NL5					
Rest of Netherlands .....	NL9					



## Scope and scale of work

Person 1 Person 2 Person 3 Person 4 Person 5.

### 47 Do you work full-time or part-time?

**i** If you have more than one job, your answers refer to the job in which you work the most hours (main job).

If you are away from your job, for example because of parental leave or time out, your answers refer to the job from which you are absent. .

Full-time .....	1	<input type="checkbox"/> →50	<input type="checkbox"/> →50	<input type="checkbox"/> →50	<input type="checkbox"/> →50	<input type="checkbox"/> →50
Part-time .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 48 If you work part-time:

#### Why do you work part-time?

If there are several reasons, please indicate the main one.

Could not find full-time work .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School education, studies, other education or advanced training .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Illness, accident, disability .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Looking after children .....	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Looking after people in need of care .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Looking after people with disabilities .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other personal or family responsibilities .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other reason .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 49 If you work part-time because you are looking after children, people in need of care or people with disabilities:

#### Has the availability of care facilities for children or people in need of care had any influence on the fact that you work part-time?

Please mark all relevant boxes.

Yes, because adequate care facilities ...

... for children are not available, are too expensive, do not cover the care hours needed. ....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... for people in need of care are not available, are too expensive. ....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... for people with disabilities are not available, are too expensive. ....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 50 If you are an employee:

#### Do you have a working contract with a company that has placed you in a temporary assignment?

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**51 If you are an employee or public official:  
Do you have a fixed-term working contract?**

**i** An apprenticeship or training contract is considered as a fixed-term contract.

Yes, fixed-term contract .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, open-ended contract .....	8	<input type="checkbox"/> →55	<input type="checkbox"/> →55	<input type="checkbox"/> →55	<input type="checkbox"/> →55	<input type="checkbox"/> →55

**52 If you have a fixed-term contract or are in fixed-term employment:  
Why are you in fixed-term employment?**

*If there are several reasons, please indicate the main one.*

Could not find a permanent job .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do not want a permanent job .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contract for probationary period .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Apprentice receiving apprenticeship pay .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other kind of training (e.g. legal/teaching/medical internship, other practical training) .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other main reason .....	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**53 If you have a fixed-term contract or are in fixed-term employment:  
How long is the total contract period or period of employment?**

**i** If it is a short-term contract for 1, 2 or 3 weeks, please round up to a month.

Up to and including 36 months: <i>Please enter the exact number of months.</i> .....		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
More than 36 months .....	37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**54 If you are self-employed, a freelancer or an unpaid family worker:  
When did you start your current job?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Month .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Year .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**55 If you are an employee or public official:  
Since when have you been employed with your current employer?**

**i** If you are a temporary employee, please enter the date when you started working for the temporary employment agency.

If you are on secondment or loan, enter the date when you started working for the establishment from which you have been seconded or hired out.

Month .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Year .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**56** If you started working in your current dependent employment in the last 12 months:

**Was the employment office (job centre) involved in your job search at any time?**

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**57** How many hours a week do you usually work, including regular extra hours and stand-by duty?

**i** See also p 66: **6** "Stand-by duty".

Number of hours Round up or down to the nearest hour. ....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
---	----------------------	----------------------	----------------------	----------------------	----------------------

**58** How many hours did you actually work last week?

**i** **The number of hours actually worked** may differ from the hours usually worked because of overtime, holidays, extra shifts, public holidays, illness and the like.

**The number of hours actually worked** includes continuing and advanced training, stand-by duty, work done at home provided that it is a normal part of your job, such as for teachers.

Number of hours Round up or down to the nearest hour. ....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Did not work in the last week. ....	00	<input type="checkbox"/> → 61	<input type="checkbox"/> → 61	<input type="checkbox"/> → 61	<input type="checkbox"/> → 61	<input type="checkbox"/> → 61

**59** If you are an employee or public official:  
**Did you work additional hours in the last week, that is, hours in excess of your contractual working time?**

**i** **If no contractual working time is agreed,** please enter the hours worked in addition to your usual working time.

Please enter all additional hours and round up or down to the nearest hour.

Yes, ...						
... hours compensated by flexible working time or time off (e.g. working time account). ....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... hours remunerated in addition to your salary/wage (paid overtime). ....		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
... hours not additionally remunerated and not compensated (unpaid overtime). ....		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
No, did not work any additional hours. ....	00	<input type="checkbox"/> → 61	<input type="checkbox"/> → 61	<input type="checkbox"/> → 61	<input type="checkbox"/> → 61	<input type="checkbox"/> → 61

**60** If you worked more hours than usual in the last week:

**Were they mainly ... ?**

... hours worked to accumulate credit hours or to reduce debit hours (see question 59) .....	1	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62
... paid or unpaid overtime (see question 59) .....	2	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62
... other hours .....	4	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62	<input type="checkbox"/> → 62

**61** If you worked fewer hours than usual or not at all in the last week:

**Why did you work less or not at all ?**

Code from List 7

Please enter the main reason. ....

**List 7**

Illness, accident .....	01	Short-time work .....	12
Spa treatment, rehabilitation .....	02	Public holiday .....	19
Industrial safety provisions, incl. maternity leave ....	03	Start of job in the last week .....	13
Parental leave .....	04	End of job in the last week .....	14
Fully or partly released from work under the Caregiver Leave Act .....	20	Compensation for additional hours worked (e.g. flexitime) .....	15
Partly released from work under the Family Caregiver Leave Act .....	21	Attendance of school, training or advanced training outside the establishment .....	16
Holidays, special leave .....	06	Personal or family responsibilities or other personal reasons .....	17
Leave of absence (public service) .....	05	Absent from job due to partial retirement .....	08
Strike, lockout .....	10	Other reason .....	18
Bad weather .....	11		

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## Working hours in the last 4 week

Person 1 | Person 2 | Person 3 | Person 4 | Person 5

### 62 Have you worked on at least one Saturday in the last 4 weeks ?

Yes, ...

... on every Saturday ..... 1

... on at least two Saturdays ..... 2

... on one Saturday ..... 3

No ..... 8

### 63 Have you worked on at least one Sunday in the last 4 weeks ?

Yes, ...

... on every Sunday ..... 1

... on least two Sundays ..... 2

... on one Sunday ..... 3

No ..... 8

### 64 Have you worked on at least one public holiday in the last 4 weeks ?

Yes, ...

... on every public holiday ..... 1

... on at least two public holidays ..... 2

... on one public holiday ..... 3

No ..... 8

### 65 Have you worked in the evening between 18:00 and 23:00 on at least one working day in the last 4 weeks ?

Yes, ...

... on every day worked ..... 1

... on at least half of the days worked ..... 2

... on fewer than half of the days worked ..... 3

No ..... 8

### 66 Have you worked in the night between 23:00 and 06:00 on at least one working day in the last 4 weeks ?

Yes, ...

... on every day worked ..... 1

... on at least half of the days worked ..... 2

... on fewer than half of the days worked ..... 3

No ..... 8

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**67 Have you done shift work in the last 4 weeks ?**

Yes, ...

... on every day worked .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... on at least half of the days worked .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... on fewer than half of the days worked .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------	---	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

**68 Have you worked at home in your job on at least one day in the last 4 weeks ?**

**i Working at home means, for instance,**  
**i** – work done at home in agreement with the employer (e.g. telework, home office)  
 – preparation times of teachers  
 – preparation times of field staff

See also p. 66: **7** “Working at home“.

Yes, ...

... on every day worked .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... on at least half of the days worked .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... on fewer than half of the days worked .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------	---	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

**Second or additional job**

**69 Do you currently have at least one additional second job ?**

**i Even jobs that take just one hour a week**  
**i** are considered to be additional jobs.

**Typical additional jobs are:**  
 for example, cleaning, private tutoring, distributing leaflets and holiday jobs.

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------	---	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

No .....	8	<input type="checkbox"/> → 79	<input type="checkbox"/> → 79	<input type="checkbox"/> → 79	<input type="checkbox"/> → 79	<input type="checkbox"/> → 79
----------	---	-------------------------------	-------------------------------	-------------------------------	-------------------------------	-------------------------------

**70 Are you in marginal employment in your additional job ?**

**i** If you have more than one additional job, please answer the following questions for the additional job in which you work the most hours.

See also p. 65: **4** "Marginal employment".

Yes, in ...

... a 450-euros job, mini-job (average maximum earnings of 450 euros per month) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... short-term employment (a maximum of 3 months or 70 days worked per year) .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------	---	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

**71 How often do you work in your additional job ?**

Regularly .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irregularly, occasionally .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On a seasonal basis .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**72 In your additional job, are you ... ?**

**i** See also p. 65: **3** "Categorisation of job".

... self-employed, a freelancer without employees .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... self-employed, a freelancer with employees .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... an unpaid family worker in a family business .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... a public official, judge .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... a salary earner/non-manual worker .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... a wage earner/manual worker, home worker .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**73 Please enter the title of your occupation and the field in which you work in your additional job.**

**i** The occupational title and field of work are e.g. babysitter in a private household, newspaper carrier in delivery team, cleaner in a private household, cleaning job as glass and window cleaner, sales assistant for cosmetics, security guard in property protection.

Person 1 Occupational title and field of work	Person 2 Occupational title and field of work	Person 3 Occupational title and field of work	Person 4 Occupational title and field of work	Person 5 Occupational title and field of work
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

**74 What kind of training is usually required for your additional job ?**

**i** The training usually required may differ from your highest educational qualification.

No vocational training (unskilled work) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completed vocational training without additional qualification .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completed vocational training with additional qualification .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Higher education:						
Course of study with a standard period of less than 4 years (Bachelor's, Diplom degree from a college of public administration) .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Course of study with a standard period of at least 4 years (Diplom degree, Master's, state examination e.g. for the teaching profession) .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**75 Do you mainly perform executive or supervisory duties in your additional job ?**

Yes, executive duties (incl. the authority to take staff, budget and strategy decisions) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, supervisory duties (guiding and supervising staff, distributing work and checking the outcome) .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**76 Enter the branch of activity of the establishment (location) in which you work in your additional job.**

**i** If the establishment has several locations, please enter the branch of activity of the location, not of the whole enterprise.

**If you are a temporary employee,** please enter the branch of activity in which you are currently employed in your additional job.

Please state the branch of activity as accurately as possible:

- food retailing (not: trade)
- machine tool industry (not: factory)
- facility management, caretaker services, business consultancy (not: services)
- software development (not: IT)

See also p. 65: **5** "Establishment (location)".

Person 1 Branch of activity	Person 2 Branch of activity	Person 3 Branch of activity	Person 4 Branch of activity	Person 5 Branch of activity
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....



**77 How many hours a week do you usually work on average in your additional job?**

Average number of hours  
Round up or down to the nearest hour. ....

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------

**78 How many hours did you actually work in your additional job in the last week?**

Number of hours  
Round up or down to the nearest hour. ....

Did not work in my additional job in the last week ..... 0

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Amount of desired working hours**

**79 Would you like to increase your normal weekly working hours, with a corresponding increase in earnings?**

**i** The weekly working hours include the main job and second or additional jobs.

Yes, exclusively by working more hours in the current job(s) ..... 3  
 Yes, exclusively by starting an additional job ..... 1  
 Yes, exclusively by moving to a job with more working hours ..... 2  
 Yes, but without tying myself down to one of the above options ..... 4  
 No ..... 8

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> → 83	<input type="checkbox"/> → 83	<input type="checkbox"/> → 83	<input type="checkbox"/> → 83	<input type="checkbox"/> → 83

**80 If you would like to increase your weekly working hours: Would you be able to start working more hours within 2 weeks?**

Yes ..... 1  
 No ..... 8

<input type="checkbox"/> → 82	<input type="checkbox"/> → 82	<input type="checkbox"/> → 82	<input type="checkbox"/> → 82	<input type="checkbox"/> → 82
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**81 If you could not start working more hours within 2 weeks: Why would you not be able to start working more hours within 2 weeks?**

If there are several reasons, please indicate the main one.

Illness or inability to work ..... 1  
 Education, advanced training ..... 2  
 Notice periods in the current job ..... 3  
 Personal or family reasons ..... 4  
 Other reason ..... 5

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**82 If you would like to increase your weekly working hours:  
How many hours a week would you like to work ?**

**i** The weekly working hours include the main job and second or additional jobs.

Number of hours  
Round up or down to the nearest hour. ....

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
↳85	↳85	↳85	↳85	↳85

**83 Would you like to reduce your normal weekly working hours, with a corresponding loss in earnings ?**

Yes ..... 1  
No ..... 8

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
↳85	↳85	↳85	↳85	↳85

**84 If you would like to reduce your weekly working hours:  
How many hours a week would you like to work ?**

Number of hours  
Round up or down to the nearest hour. ....

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------

**Search for work by persons in employment, persons with a second job**

**85 Have you looked for different or additional work in the last 4 weeks ?**

**i** Looking for work includes any search for paid work, also for second or mini-jobs, for self-employed or freelance activities, or for small-scale activities.

**Forms of search include,** for instance, looking through job offers in newspapers or on the internet, searching for job vacancies on notice boards, asking acquaintances and relatives

Yes ..... 1  
No ..... 8

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
↳118	↳118	↳118	↳118	↳118

**86 If you looked for different or additional work:  
Why did you look for a job ?**

If there are several reasons, please indicate the main one.

Near end of the current job ..... 1  
Current job of a transitional nature ..... 2  
Seeking additional work ..... 3  
Seeking work with more working hours ..... 4  
Seeking work with less working hours ..... 5  
Seeking better working conditions ..... 6  
Other reason ..... 7

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Former employment of persons not in employment

Person 1 Person 2 Person 3 Person 4 Person 5

87 Please indicate:

**Which group do you belong to?**

Persons in employment, persons with a second job, ...

... looking for work ("Yes" to question 85) .....

→ 107  → 107  → 107  → 107  → 107

... not looking for work ("No" to question 85) .....

→ 118  → 118  → 118  → 118  → 118

Persons not in employment ("No" to question 20 and "No" to question 21) .....

88 Have you ever worked for pay?

**i Casual jobs or holiday jobs**  
do not count

**Former family workers**  
answer with "Yes".

Yes .....

1

No .....

8  → 98  → 98  → 98  → 98  → 98

89 Why did you leave your last job?

*If there are several reasons, please indicate the main one.*

Dismissal .....

01

End of a fixed-term working contract .....

02

Own resignation .....

03

Retirement ...

... in accordance with early retirement scheme, following unemployment .....

04

... for health reasons .....

05

... for reasons of age or other reasons .....

06

Compulsory military/civilian service .....

07

To look after children .....

12

To look after people in need of care .....

11

To look after people with disabilities .....

13

Other personal or family responsibilities .....

08

Education (also studies) .....

09

Other reason .....

10

90 When did you leave your last job or interrupt it for a longer period?

Person 1

Person 2

Person 3

Person 4

Person 5

Month .....

Year .....

**91 In your last employment, did you work as a/an ... ?**

**i** **Casual jobs or holiday jobs**  
do not count.

See also p. 65: **3** "Categorisation of job".

Code from List 8 .....

<b>List 8</b>	Self-employed person, a freelancer: without employees ..... 01	Apprentice receiving apprenticeship pay ..... 13
	with employees ..... 02	Candidate public official ..... 14
	Unpaid family worker in a family business ..... 03	Intern, trainee (incl. paid practical training or internship) ..... 15
	Public official, judge (not incl. candidates) ..... 04	Temporary or professional soldier ..... 09
	Salary earner/non-manual worker (not incl. apprentices) ..... 05	Person doing compulsory military/civilian service ..... 10
	Wage earner/manual worker, homemaker (not incl. apprentices) ..... 06	Person doing voluntary military service ..... 16
		Person doing volunteer service (Federal Volunteer Service, voluntary social year). ..... 17

**92 If your last employment was as an apprentice receiving apprenticeship pay:**

**With whom did you conclude your apprenticeship contract?**

With an establishment (company, shop, office, hospital, public authority) ..... 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
With an inter-company or external institution as vocational training provider, e.g. a vocational training centre for disabled young people (Berufsbildungswerk), educational centre (Bildungszentrum) ..... 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**93 Please enter the title of your last occupation and the field in which you worked in your last job.**

**i** **The occupational title and field of work are,**  
for instance, shop assistant in food retailing, teacher at  
grammar school, official in the ordinary, intermediate,  
higher intermediate or higher customs service, engineer  
in civil engineering, artisanal glass-blower.

The last occupation you practised may differ from the  
occupation you were originally trained in.

Person 1 Occupational title and field of work	Person 2 Occupational title and field of work	Person 3 Occupational title and field of work	Person 4 Occupational title and field of work	Person 5 Occupational title and field of work
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

**94 What kind of training was usually required for your last job?**

**i** The training usually required may differ from your highest educational qualification.

No vocational training (unskilled work) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completed vocational training without additional qualification .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completed vocational training with additional qualification .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Higher education:						
Course of study with a standard period of less than 4 years (Bachelor's, Diplom degree from a college of public administration) .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Course of study with a standard period of at least 4 years (Diplom degree, Master's, state examination e.g. for the teaching profession) .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable because apprentice in the last employment .....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**95 Did you mainly perform executive or supervisory duties in that job?**

Yes, executive duties (incl. the authority to take staff, budget and strategy decisions) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, supervisory duties (guiding and supervising staff, distributing work and checking the outcome) .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**96 Enter the branch of activity of the last establishment (location) you worked in.**

**i** If the establishment has several locations, please enter the main activity of the location, not of the whole enterprise.

If you were a temporary employee, please enter the branch of activity of your last employment.

Please state the branch of activity as accurately as possible:

For example:

- food retailing (not: trade)
- machine tool industry (not: factory)
- facility management, caretaker services, business consultancy (not: services)
- software development (not: IT)

See also p. 65: **5** "Establishment (location)".

Person 1 Branch of activity	Person 2 Branch of activity	Person 3 Branch of activity	Person 4 Branch of activity	Person 5 Branch of activity
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

**97 Was your last employment in the public service ?**

**i The public service comprises** the federal, Land and municipal authorities, public schools, the Federal Employment Agency, the social security institutions, the police and the Federal Armed Forces.

**Employees and officials in successor companies** of Deutsche Post, Bundesbahn/Reichsbahn as well as church employees are not employed in the public service.

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Search for work by persons not in employment**

**98 Have you looked for paid work in the last 4 weeks ?**

**i Looking for work includes** any search for paid work, also for second or mini-jobs, for self-employed or freelance activities, or for small-scale activities.

**Forms of search include,** for instance, looking through job offers in newspapers or on the internet, searching for job vacancies on notice boards, asking acquaintances and relatives.

Yes .....	1	<input type="checkbox"/> → 102	<input type="checkbox"/> → 102	<input type="checkbox"/> → 102	<input type="checkbox"/> → 102	<input type="checkbox"/> → 102
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**99 If you did not look for paid work:**

**Why did you not look for a paid job?**

*If there are several reasons, please indicate the main one.*

Search for work completed successfully .....	01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Awaiting re-employment (following temporary lay-off) .....	02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Illness, accident, temporary disability .....	03	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103
Permanently reduced earning capacity or permanent disability .....	04	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103
To look after children .....	11	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101
To look after people in need of care .....	12	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101
To look after people with disabilities .....	05	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101	<input type="checkbox"/> → 101
Other personal or family responsibilities .....	06	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103
School or vocational education, studies .....	07	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103
In retirement .....	08	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103
No jobs available in the labour market .....	09	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103
Other reason .....	10	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103

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**100** If you completed your search for work successfully or are awaiting re-employment:

**When will you start the new job ?**

Within the next 3 months .....	1	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112
In more than 3 months' time .....	2	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112

**101** If you did not look for work because you are looking after children, people in need of care or people with disabilities:

**Has the availability of care facilities for children or people in need of care had any influence on the fact that you did not look for paid work ?**

*Please mark all relevant boxes.*

Yes, because adequate care facilities ...

... for children are not available, are too expensive, do not cover the care hours needed. ....	1	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103
... for people in need of care are not available, are too expensive .....	2	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103
... for people with disabilities are not available, are too expensive .....	3	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103

No .....	8	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103	<input type="checkbox"/> → 103
----------	---	--------------------------------	--------------------------------	--------------------------------	--------------------------------	--------------------------------

**102** If you looked for paid work:

**Why did you look for a paid job ?**

*If there are several reasons, please indicate the main one.*

Dismissal .....	1	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107
Own resignation .....	2	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107
Voluntarily away from job .....	3	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107
Retirement .....	4	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107
Entering the labour market (for the first time) .....	7	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107
Other reason .....	5	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107	<input type="checkbox"/> → 107

**103** If you did not look for paid work and are neither about to start a new job nor awaiting re-employment:

**Would you nevertheless like to work ?**

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118

**104** If you would like to work:

**If a paid job had been available last week, could you have started it until the end of next week ?**

Yes .....	1	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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**105** If you could not start work immediately:  
**Why would you not be able to start a new job within 2 weeks?**

*If there are several reasons, please indicate the main one.*

	Person 1	Person 2	Person 3	Person 4	Person 5
Illness or inability to work ..... 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Education, advanced training, studies ..... 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal or family reasons ..... 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other reason ..... 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Search for work or change of job

**106** Please indicate:  
**Which group do you belong to?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Currently not looking for work as about to start a new job or awaiting re-employment (codes 01, 02 under question 99). ....	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112	<input type="checkbox"/> → 112
Currently not looking for work due to other reasons (codes 03–12 under question 99). ....	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118
Looking for work (“Yes” to question 85 or “Yes” to question 98). ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**107** Are/were you looking for work mainly as a/an ...?

	Person 1	Person 2	Person 3	Person 4	Person 5
... self-employed person or freelancer ..... 1	<input type="checkbox"/> → 109	<input type="checkbox"/> → 109	<input type="checkbox"/> → 109	<input type="checkbox"/> → 109	<input type="checkbox"/> → 109
... employee or public official ..... 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**108** If you are looking for work mainly as an employee:  
**Are you looking for a full-time or part-time job?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Only a full-time job ..... 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preferably a full-time job, but would also work part-time ..... 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Only a part-time job ..... 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preferably a part-time job, but would also work full-time ..... 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Either a full-time or a part-time job ..... 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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**109** If you are looking for work as an employee, self-employed person or freelancer:

**Have you made any effort to find (different) work in the last 4 weeks ?**

Please mark all relevant boxes.

	Person 1	Person 2	Person 3	Person 4	Person 5
Yes, by contacting the employment agency (job centre) or other employment authority ..... 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, by contacting private employment organisations ..... 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, by placing job wanted advertisements ..... 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, by responding to job offers ..... 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, by sending off unsolicited applications ..... 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, by asking friends, relatives, acquaintances ..... 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, by looking through job offers ..... 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, by taking tests, interviews, exams ..... 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, by taking other action ..... 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No ..... 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**110** Have you made any effort to start work as a self-employed person or freelancer in the last 4 weeks ?

Please mark all relevant boxes.

	Person 1	Person 2	Person 3	Person 4	Person 5
Yes, by searching for premises, offices, equipment ..... 1	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114
Yes, by applying for licences, concessions or financial resources ..... 2	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114
Yes, by taking other action ..... 3	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114
No ..... 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**111** If you answered "No" to questions 109 and 110, Why have you not made any effort in the last 4 weeks ?

voluntary

	Person 1	Person 2	Person 3	Person 4	Person 5
Search for work completed, ...					
... starting job within the next 3 months. .... 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... starting job in more than 3 months' time. .... 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waiting for search results. .... 4	<input type="checkbox"/> → 113	<input type="checkbox"/> → 113	<input type="checkbox"/> → 113	<input type="checkbox"/> → 113	<input type="checkbox"/> → 113
Search not yet started. .... 3	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114
No response ..... 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**112** If you are about to start a new job or awaiting re-employment: Will you be ... ?

voluntary

	Person 1	Person 2	Person 3	Person 4	Person 5
... self-employed/a freelancer ..... 1	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114
... employed full-time ..... 2	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114
... employed part-time ..... 3	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114	<input type="checkbox"/> → 114
No response ..... 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**113** If you are waiting for the results of your search:

**Are you currently waiting for the ... ?**

Please mark all relevant boxes.

voluntary

... response from the employment agency (job centre) or other employment authority .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... result of a selection procedure in the public service .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... response to a job application .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... results of other action .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No response .....	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**114** Which group did you belong to directly before you started to look for work ?

Persons in employment, also apprentices .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Persons in full-time education or advanced training such as students or pupils .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housewives/househusbands .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Persons doing compulsory military/civilian service .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (e.g. retired persons) .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**115** How long have you looked/did you look for (other) work ?

Less than 1 month .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1 to less than 3 months .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 to less than 6 months .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 to less than 12 months .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1 to less than 1 ½ years .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1 ½ to less than 2 years .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 to less than 4 years .....	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 years or more .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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**116** If a paid job had been available last week, could you have started it until the end of next week ?

Yes .....	1	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118	<input type="checkbox"/> → 118
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**117** If you could not start work immediately:

**Why would you not be able to start a new job within 2 weeks ?**

If there are several reasons, please indicate the main one.

Illness or inability to work .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Education, advanced training, studies .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notice periods in the current job .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal or family reasons .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other reason .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**118 Were you registered with the employment agency (job centre) or other employment authority last week?**

Yes, as unemployed .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, only as looking for work .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Children in day care

**119 Do any children aged 14 or under live in your household?**

**i** **If children aged 14 or under**  
live in your household, please answer the following questions for each child.

Yes .....	1	<input type="checkbox"/>
No .....	8	<input type="checkbox"/> → 123

**120 Has the child been in any kind of day care in the last 12 months?**

**i** **This includes**  
all kinds of day care for children, namely care services offered by public, private or church institutions and regular care provided, for instance, by relatives, friends, neighbours or babysitters, irrespective of the cost of the care.

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/> → 123	<input type="checkbox"/> → 123	<input type="checkbox"/> → 123	<input type="checkbox"/> → 123

**121 Has the child been in any kind of day care in the last 4 weeks?**

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, due to holidays, illness, etc. ....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, for other reasons .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**122 What kind of day care has the child received?**

*Please indicate all relevant types of day care which the child usually receives at least once a week or which the child last received.*

Day care centre (kindergarten, crèche) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional child minder .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Au-pair, babysitter .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preschool institution (pre-primary education) .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care services for pupils before and/or after school (offered by school or other facility) .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relatives, friends, neighbours .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## School or university attendance

Person 1 | Person 2 | Person 3 | Person 4 | Person 5

### 123 Have you been a pupil, apprentice or student in the last 12 months ?

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/> → 129	<input type="checkbox"/> → 129	<input type="checkbox"/> → 129	<input type="checkbox"/> → 129	<input type="checkbox"/> → 129

### 124 Have you been a pupil, apprentice or student in the last 4 weeks ?

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, because I switched to another school, higher education institution or apprenticeship, because of university vacation, school holidays, practical training phase in an establishment, studies at a higher education institution or school abroad, illness, maternity leave .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, for other reasons .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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**125 Which type of school/higher education institution do/did you attended?**

Code from list 9 .....

<b>List 9</b>	<b>Schools of general education</b>		<b>Vocational schools</b>	
	Primary school .....	01	Pre-vocational training year .....	16
	Orientation stage in grades 5/6 (e.g. at primary or secondary schools, diagnostic stage) .....	02	Basic vocational training year .....	17
	Special school, special needs school, special needs assistance .....	03	Vocational school (dual system) .....	18
	School offering several courses of education .....	04	Full-time vocational school providing a vocational qualification .....	19
	Secondary general school, evening secondary general school .....	05	Training centres/schools for health-care service occupations and social occupations: <b>one year</b> (e.g. auxiliary nurse, geriatric care assistant, paramedic) .....	20
	Intermediate school, evening intermediate school ..	06	<b>two years</b> (e.g. masseur/masseuse, balneotherapist, pharmaceutical laboratory assistant, podiatrist) .....	21
	Comprehensive school .....	07	<b>three years</b> (e.g. physiotherapy, healthcare and nursing care, medical laboratory assistant, geriatric care) .....	29
	Waldorf school .....	08	Training centres/schools for educators .....	30
	Grammar school .....	09	Master craftsman training programme at trade and technical schools .....	31
	Vocational grammar school, also grammar school specialising in economics or technical subjects .....	10	Trade and technical school e.g. for technicians, business economists .....	22
	Evening grammar school, adult education college ..	11	Specialised academy (in Bayern only) .....	23
	<b>Vocational schools offering a general school certificate</b>		<b>Higher education institutions/Vocational academy</b>	
	Vocational school offering an intermediate school certificate (e.g. full-time vocational school) .....	12	Vocational academy .....	24
	Vocational school offering an entrance qualification for higher education institutions:		College of public administration .....	25
	Specialised upper secondary school .....	13	University of applied sciences, Cooperative State University (Baden-Württemberg and Thüringen) .....	26
	Full-time vocational school .....	14	University (including: college of art and music, college of education, college of theology) .....	27
	Two-year full-time vocational school .....	15	Doctoral studies .....	28

**126 If you are/were enrolled in a master craftsman training programme at a trade and technical school (Codes 01–09 or 11 from List 9):**

**Which are the highest grades you attended?**

Grades 1 to 4 .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grades 5 to 9/10 .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Upper secondary grades in grammar school .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**127** If you attend/attended a university or university of applied sciences  
(Codes 24-27 from List 9, p. 37):

**What course of study did you take ?**

Bachelor's .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Master's .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diplom degree or comparable course of study .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**128** If you are/were enrolled in a master craftsman training programme  
at a trade and technical school  
(Code 31 from List 9, p. 37):

**What is the field of this master craftsman  
training programme ?**

**i** **Master craftsman training programmes,**  
at trade and technical schools in fields such as carpentry,  
hairdressing, electrical engineering, housekeeping, plumbing,  
heating installation and the like.

Person 1 field	Person 2 field	Person 3 field	Person 4 field	Person 5 field
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

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## Educational attainment

Person 1 Person 2 Person 3 Person 4 Person 5

129 Please indicate:

**Which age group do you belong to?**

14 years or younger. ....	<input type="checkbox"/> → 150	<input type="checkbox"/> → 150	<input type="checkbox"/> → 150	<input type="checkbox"/> → 150	<input type="checkbox"/> → 150
15 years or older. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

130 Do you hold a general school certificate?

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No/Not yet .....	8	<input type="checkbox"/> → 134	<input type="checkbox"/> → 134	<input type="checkbox"/> → 134	<input type="checkbox"/> → 134	<input type="checkbox"/> → 134

131 If you hold a general school certificate:

**Which is the highest qualification you have obtained?**

*Please classify qualifications obtained abroad to their German equivalents.*

School certificate obtained after no more than 7 years of school attendance .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secondary general school certificate (also former school type starting with grade 1). ....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School of general education in the GDR:						
school certificate obtained after grade 8 or 9 .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
school certificate obtained after grade 10 .....	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intermediate school certificate, certificate obtained after grade 10 or equivalent .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entrance qualification for universities of applied sciences .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Higher education entrance qualification (general or subject-restricted) .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

132 If you hold a general school certificate:

**Did you obtain your general school certificate in Germany or abroad?**

In Germany .....	1	<input type="checkbox"/> → 134	<input type="checkbox"/> → 134	<input type="checkbox"/> → 134	<input type="checkbox"/> → 134	<input type="checkbox"/> → 134
Abroad .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

133 If you obtained your general school certificate abroad:

**How long did you attend school?**

Number of years in school Years, rounded up or down. ....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
--	----------------------	----------------------	----------------------	----------------------	----------------------

**134 Have you completed vocational training or do you hold a degree from a university or university of applied sciences?**

**i** On-the-job training and internships of at least 12 months are also regarded as vocational training.

Yes ..... 1

No/Not yet ..... 8  → 142  → 142  → 142  → 142  → 142

**135 If you have completed vocational training or hold a degree from a university or :**

**Which is the highest qualification you have obtained?**

Please classify qualifications obtained abroad to their German equivalents.

Code from List 10 .....

List 10 Vocational training completed	
On-the-job training ..... 01	Educators ..... 17
Internship ..... 19	Master craftsman's qualification ..... 08
Pre-vocational training year ..... 02	Technician's qualification or equivalent trade and technical school certificate ..... 18
Apprenticeship, vocational training in the dual system ..... 03	Specialised and engineering schools of the GDP ..... 09
Certificate qualifying for an occupation obtained at a full-time vocational school or a secondary school offering general as well as vocational education to pupils aged 16 to 19 ..... 04	Specialised academy (in Bayern only) ..... 10
Preparatory training for the intermediate service in public administration ..... 05	<b>Higher education institutions/ Vocational academy</b>
Training centres/schools for health-care service occupations and social occupations:	Diplom degree, Bachelor's, Master's, state examination e.g. for the teaching profession:
<b>one year</b> (e.g. auxiliary nurse, geriatric care assistant, paramedic) ..... 06	Vocational academy ..... 11
<b>two years</b> (e.g. masseur/masseuse, balneotherapist, pharmaceutical laboratory assistant, podiatrist) ..... 07	College of public administration ..... 12
<b>three years</b> (e.g. physiotherapy, healthcare and nursing care, medical laboratory assistant, geriatric care) ..... 16	University of applied sciences (also: college of engineering), Cooperative State University (Baden-Württemberg and Thüringen) ..... 13
	University (also: college of art and music, college of education, college of theology) ..... 14
	Doctor's degree ..... 15

**136 If you hold a degree from a university or university of applied sciences**

(Codes 11 to 14 from List 10):

**Have you worked towards your doctor's degree with a supervisor in the last 12 months?**

Yes ..... 1

No ..... 8



**137** If you have completed vocational training or hold a degree from a university or university of applied sciences:  
**In what (main) field did you obtain your highest vocational training qualification or degree from a university or university of applied sciences?**

**i** **Fields of vocational training are**  
 e.g. care for the elderly, floristry, bricklayer, mechatronics technician, industrial clerk, care assistant.

**Fields of study are**  
 e.g. mechanical engineering, production engineering, agricultural science, teacher training course (grammar school).

Person 1 (Main)field	Person 2 (Main)field	Person 3 (Main)field	Person 4 (Main)field	Person 5 (Main)field
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

**138** If you have completed vocational training or hold a degree from a university or university of applied sciences:  
**In what year did you obtain your highest vocational qualification or your degree from a university or university of applied sciences?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Year .....	.....	.....	.....	.....	.....

**139** If you have completed vocational training or hold a degree from a university or university of applied sciences:  
**Did you obtain your highest vocational qualification or degree from a university or university of applied sciences in Germany or abroad?**

	Person 1	Person 2	Person 3	Person 4	Person 5
In Germany .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Abroad .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**140** If you hold a degree from a university or university of applied sciences:  
**What is the highest degree you have obtained?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Bachelor's .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Master's .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diplom degree, state examination e.g. for the teaching profession, artistic and comparable degrees .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**141** If you hold a degree from a university or university of applied sciences:

**Have you also completed at least one course of vocational training?**

Please classify qualifications obtained abroad to their German equivalents.

**i** On-the-job training and internships of at least 12 months are also regarded as vocational training

Please do not enter further academic degrees from universities or universities of applied sciences (e.g. Bachelor's, Master's)

Yes, code from List 11 .....

No .....

List 11 Vocational training completed	
On-the-job training ..... 01	Educators ..... 12
Internship ..... 14	Master craftsman's qualification ..... 08
Pre-vocational training year ..... 02	Technician's qualification or equivalent trade and technical school certificate ..... 13
Apprenticeship, vocational training in the dual system ..... 03	Specialised and engineering schools of the GDR ..... 09
Certificate qualifying for an occupation obtained at a full-time vocational school or a secondary school offering general as well as vocational education to pupils aged 16 to 19 ..... 04	Specialised academy (in Bayern only) ..... 10
Preparatory training for the intermediate service in public administration ..... 05	
Training centres/schools for health-care service occupations and social occupations:	
<b>one year</b> (e.g. auxiliary nurse, geriatric care assistant, paramedic) ..... 06	
<b>two years</b> (e.g. masseur/masseuse, balneotherapist, pharmaceutical laboratory assistant, podiatrist) ..... 07	
<b>three years</b> (e.g. physiotherapy, healthcare and nursing care, medical laboratory assistant, geriatric care) ..... 11	

**142** If you have neither completed vocational training nor hold a degree a university or university of applied sciences and have at most completed on-the-job training, an internship or a pre-vocational training year:

**In what year did you obtain your highest qualification at a school of general education?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Year .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
No general school certificate (yet) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Continuing general and vocational training

Person 1 | Person 2 | Person 3 | Person 4 | Person 5

**143 Have you attended one (or several) continuing general or vocational training programmes in the last 12 months ?**

**i** **Forms of continuing training are**  
e.g. courses, seminars, conferences, private tuition, study circles, e-learning activities.

**Continuing vocational training includes**  
retraining, career advancement courses, courses preparing for new tasks in the job, advanced training (e.g. in computers, management, rhetoric).

**General courses normally serve**  
a private purpose and are taken to obtain or improve skills or knowledge (e.g. in music, sports, parenting, health, arts, politics, technical matters, cooking).

Yes ..... 1

No ..... 8  → 150  → 150  → 150  → 150  → 150

**144 What has been the purpose of your continuing training in the last 12 months ?**

Vocational ..... 1

Private ..... 2

Both vocational and private ..... 3

**145 How many hours (in total) did you spend on continuing training activities in the last 12 months (not incl. time for preparation and follow-up) ?**

**i** Hours lasting 60 minutes, not lessons

	Person 1	Person 2	Person 3	Person 4	Person 5
Number of hours Round up or down to the nearest hour. ....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Person 1 | Person 2 | Person 3 | Person 4 | Person 5

**146 Have you participated in continuing general or vocational training also in the last 4 weeks ?**

Yes ..... 1

No ..... 8  → 149  → 149  → 149  → 149  → 149

**147 If you participated in continuing general or vocational training in the last 4 weeks:**

**What was the purpose of your continuing training in the last 4 weeks ?**

Mainly vocational ..... 1

Mainly private ..... 2

148 If you participated in continuing general or vocational training in the last 4 weeks:

**How many hours (in total) did you spend on continuing training activities in the last 4 weeks (not incl. time for preparation and follow-up)?**

**i** Hours lasting 60 minutes, not lessons

	Person 1	Person 2	Person 3	Person 4	Person 5
Number of hours <i>Round up or down to the nearest hour</i> .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

149 What was your latest continuing training activity about?

**i** Continuing training may  
e.g. deal with word processing, pottery, insolvency law, German as a foreign language, rhetoric, tax law, private music lessons, sailing certificate, financial investments.

Person 1 Subject of continuing training	Person 2 Subject of continuing training	Person 3 Subject of continuing training	Person 4 Subject of continuing training	Person 5 Subject of continuing training
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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# Citizenship and duration of residence

Person 1 Person 2 Person 3 Person 4 Person 5

## 150 Were you born in Germany (today's borders)?

Yes ..... 1  → 154  → 154  → 154  → 154  → 154  
 No ..... 8

## 151 If you were not born in Germany (today's borders): In which country (today's borders) were you born?

Code from List 12 .....

List 12

### Europe

Albania ..... ALB  
 Andorra ..... ADO  
 Belarus ..... BLR  
 Belgium ..... BEL  
 Bosnia and Herzegovina ..... BIH  
 Bulgaria ..... BGR  
 Denmark ..... DNK  
 Estonia ..... EST  
 Finland ..... FIN  
 France ..... FRA  
 Greece ..... GRC  
 Ireland ..... IRL  
 Iceland ..... ISL  
 Italy ..... ITA  
 Kosovo ..... XXK  
 Croatia ..... HRV  
 Latvia ..... LVA  
 Liechtenstein ..... LIE  
 Lithuania ..... LTU  
 Luxembourg ..... LUX  
 Malta ..... MLT  
 Macedonia ..... MKD  
 Moldova ..... MDA  
 Monaco ..... MCO  
 Montenegro ..... MNE  
 Netherlands ..... NLD  
 Norway ..... NOR  
 Austria ..... AUT  
 Poland ..... POL  
 Portugal ..... PRT  
 Romania ..... ROU  
 Russian Federation ..... RUS

### Europe

San Marino ..... SMR  
 Sweden ..... SWE  
 Switzerland ..... CHE  
 Serbia ..... SRB  
 Slovakia ..... SVK  
 Slovenia ..... SVN  
 Spain ..... ESP  
 Czech Republic ..... CZE  
 Turkey ..... TUR  
 Ukraine ..... UKR  
 Hungary ..... HUN  
 Vatican City ..... VAT  
 United Kingdom ..... GBR  
 Cyprus ..... CYP

### Africa

Morocco ..... MAR  
 Egypt, Algeria,  
 Libya, Tunisia ..... YYG  
 Ghana ..... GHA  
 Nigeria ..... NGA  
 Rest of Africa ..... YYH

### America

United States ..... USA  
 Canada ..... CAN  
 Central America and  
 Caribbean ..... YYL  
 Brazil ..... BRA  
 Rest of South America ..... YYM

### Middle East

Armenia, Azerbaijan,  
 Georgia ..... YYN

### Middle East

Kazakhstan ..... KAZ  
 Kyrgyzstan, Tajikistan,  
 Turkmenistan, Uzbekistan ..... YYO  
 Iran ..... IRN  
 Iraq ..... IRQ  
 Israel ..... ISR  
 Jordan ..... JOR  
 Lebanon ..... LBN  
 Syria ..... SYR  
 Rest of Middle East  
 (e.g. Kuwait,  
 Oman, Saudi Arabia) ..... YYP

### South and South East Asia

Afghanistan ..... AFG  
 India ..... IND  
 Indonesia ..... IDN  
 Pakistan ..... PAK  
 Philippines ..... PHL  
 Sri Lanka ..... LKA  
 Thailand ..... THA  
 Viet Nam ..... VNM  
 Rest of South and South  
 East Asia (e.g.  
 Bangladesh, Laos, Nepal) ..... YYR

### East Asia

China ..... CHN  
 Japan ..... JPN  
 South Korea ..... KOR  
 Mongolia, North Korea,  
 Taiwan ..... YYS

### Rest of the world

..... YYF

**152** If you were not born in Germany (today's borders) :  
**When did you (first) move to Germany ?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Year .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**153** If you were not born in Germany (today's borders):  
**What was the (main) reason for moving to Germany ?**

*If there are several reasons, please indicate the main one.*

	Person 1	Person 2	Person 3	Person 4	Person 5
Employment: job found before moving to Germany ..... 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment: <b>no</b> job found before moving to Germany ..... 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic studies or other education, advanced training ..... 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moved to Germany with a family member or following a family member (family reunification) ..... 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marriage/partnership with a person living in Germany (family formation) ..... 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flight, persecution, expulsion, asylum ..... 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Free movement within the EU: wished to settle in Germany ..... 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other reason ..... 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**154** Regarding question 154, one person may answer it on behalf of all individuals sharing a household in the dwelling. All other persons of that household please continue with question 155.

**Which language is mainly spoken in your household ?**

	Person 1
German ..... 01	<input type="checkbox"/>
Not German but ...	
... Arabic ..... 02	<input type="checkbox"/>
... English ..... 03	<input type="checkbox"/>
... French ..... 04	<input type="checkbox"/>
... Italian ..... 05	<input type="checkbox"/>
... Polish ..... 06	<input type="checkbox"/>
... Russian ..... 07	<input type="checkbox"/>
... Spanish ..... 08	<input type="checkbox"/>
... Turkish ..... 09	<input type="checkbox"/>
... another European language ..... 10	<input type="checkbox"/>
... another African language ..... 11	<input type="checkbox"/>
... another Asian language ..... 12	<input type="checkbox"/>
... another language ..... 13	<input type="checkbox"/>

**155 Have you ever interrupted your stay in Germany and lived abroad for at least 1 year?**

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/> → 157	<input type="checkbox"/> → 157	<input type="checkbox"/> → 157	<input type="checkbox"/> → 157	<input type="checkbox"/> → 157

**156 If you interrupted your stay in Germany and lived abroad for at least 1 year:  
When did you return to the current territory of Germany after your latest absence?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Year .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**157 Was your mother born in Germany (today's borders)?**

**i** This includes stepmothers, adoptive and foster mothers.

Yes .....	1	<input type="checkbox"/> → 159	<input type="checkbox"/> → 159	<input type="checkbox"/> → 159	<input type="checkbox"/> → 159	<input type="checkbox"/> → 159
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I don't know. ....	7	<input type="checkbox"/> → 159	<input type="checkbox"/> → 159	<input type="checkbox"/> → 159	<input type="checkbox"/> → 159	<input type="checkbox"/> → 159

**158 In which country (today's borders) was your mother born?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Code from List 12, p.45 .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
I don't know. ....	777 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**159 Was your father born in Germany (today's borders)?**

**i** This includes stepfathers, adoptive and foster fathers.

Yes .....	1	<input type="checkbox"/> → 161	<input type="checkbox"/> → 161	<input type="checkbox"/> → 161	<input type="checkbox"/> → 161	<input type="checkbox"/> → 161
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I don't know. ....	7	<input type="checkbox"/> → 161	<input type="checkbox"/> → 161	<input type="checkbox"/> → 161	<input type="checkbox"/> → 161	<input type="checkbox"/> → 161

**160 In which country (today's borders) was your father born?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Code from List 12, p.45 .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
I don't know. ....	777 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**161 Do you have German citizenship ?**

Yes, German citizenship only .....	1	<input type="checkbox"/> → 163	<input type="checkbox"/> → 163	<input type="checkbox"/> → 163	<input type="checkbox"/> → 163	<input type="checkbox"/> → 163
Yes, German citizenship and citizenship of at least one foreign country .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**162 If you have citizenship of at least one foreign country  
Of which country/countries do you have citizenship ?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Citizenship of country no. 1 Code from List 13 .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Citizenship of country no. 2 Code from List 13 .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**List 13**

**Europe**

- Albania ..... ALB
- Andorra ..... ADO
- Belarus ..... BLR
- Belgium ..... BEL
- Bosnia and Herzegovina ..... BIH
- Bulgaria ..... BGR
- Denmark ..... DNK
- Estonia ..... EST
- Finland ..... FIN
- France ..... FRA
- Greece ..... GRC
- Ireland ..... IRL
- Iceland ..... ISL
- Italy ..... ITA
- Kosovo ..... XXK
- Croatia ..... HRV
- Latvia ..... LVA
- Liechtenstein ..... LIE
- Lithuania ..... LTU
- Luxembourg ..... LUX
- Malta ..... MLT
- Macedonia ..... MKD
- Moldova ..... MDA
- Monaco ..... MCO
- Montenegro ..... MNE
- Netherlands ..... NLD
- Norway ..... NOR
- Austria ..... AUT
- Poland ..... POL
- Portugal ..... PRT
- Romania ..... ROU
- Russian Federation ..... RUS

**Europe**

- San Marino ..... SMR
- Sweden ..... SWE
- Switzerland ..... CHE
- Serbia ..... SRB
- Slovakia ..... SVK
- Slovenia ..... SVN
- Spain ..... ESP
- Czech Republic ..... CZE
- Turkey ..... TUR
- Ukraine ..... UKR
- Hungary ..... HUN
- Vatican City ..... VAT
- United Kingdom ..... GBR
- Cyprus ..... CYP

**Africa**

- Morocco ..... MAR
- Egypt, Algeria,  
Libya, Tunisia ..... YYG
- Ghana ..... GHA
- Nigeria ..... NGA
- Rest of Africa ..... YYH

**America**

- United States ..... USA
- Canada ..... CAN
- Central America and  
Caribbean ..... YYL
- Brazil ..... BRA
- Rest of South America ..... YYM

**Middle East**

- Armenia, Azerbaijan,  
Georgia ..... YYN
- Kazakhstan ..... KAZ

**Middle East**

- Kyrgyzstan, Tajikistan,  
Turkmenistan, Uzbekistan ..... YYO
- Iran ..... IRN
- Iraq ..... IRQ
- Israel ..... ISR
- Jordan ..... JOR
- Lebanon ..... LBN
- Syria ..... SYR
- Rest of Middle East,  
(e.g. Kuwait,  
Oman, Saudi Arabia) ..... YYP

**South and South East Asia**

- Afghanistan ..... AFG
- India ..... IND
- Indonesia ..... IDN
- Pakistan ..... PAK
- Philippines ..... PHL
- Sri Lanka ..... LKA
- Thailand ..... THA
- Viet Nam ..... VNM
- Rest of South and South  
East Asia (e.g.  
Bangladesh, Laos, Nepal) ..... YYR

**East Asia**

- China ..... CHN
- Japan ..... JPN
- South Korea ..... KOR
- Mongolia, North Korea,  
Taiwan ..... YYS

**Übrige Schlüssel**

- Rest of the world ..... YYF
- Stateless ..... YYZ



**163** If you have German citizenship:  
**Are you a German citizen ... ?**

**i** See also p. 66: **B** "Citizenship".

... by birth .....	1	<input type="checkbox"/> → 166	<input type="checkbox"/> → 166	<input type="checkbox"/> → 166	<input type="checkbox"/> → 166	<input type="checkbox"/> → 166
... as a non-naturalised (ethnic) German repatriate .....	2	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176
... as a naturalised (ethnic) German repatriate .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... by naturalisation .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... by adoption by German parent(s) .....	5	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176
Not applicable because I don't have German citizenship. ....		<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176

**164** If you have been naturalised:  
**When were you naturalised ?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Year .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**165** If you have been naturalised:  
**Of what country were you a citizen before your naturalisation ?**

**i** Answers to question 165 may also be

- Yugoslavia, Serbia and Montenegro ..... YUG
- Soviet Union ..... SUN
- Czechoslovakia ..... CSK

	Person 1	Person 2	Person 3	Person 4	Person 5
Code from List 13, p. 48 .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	↳ 176	↳ 176	↳ 176	↳ 176	↳ 176

Muster

166 Please indicate:

**Which group do you belong to?**

**i** This includes stepmothers, adoptive and foster mothers.

Your mother lives in this household. ....	1	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171
Your mother does not live in this household or is deceased. ....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

167 If your mother does not live in this household:

**Has your mother moved to Germany (today's borders)?**

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/> → 169	<input type="checkbox"/> → 169	<input type="checkbox"/> → 169	<input type="checkbox"/> → 169	<input type="checkbox"/> → 169
I don't know. ....	7	<input type="checkbox"/> → 169	<input type="checkbox"/> → 169	<input type="checkbox"/> → 169	<input type="checkbox"/> → 169	<input type="checkbox"/> → 169

168 If your mother moved to Germany (today's borders):

**When did she (first) move to Germany (today's borders)?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Year .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
I don't know. ....	7777 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

169 Does/did she have German citizenship?

**i** Please consider only the current or last citizenship (for deceased persons).

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171
I don't know. ....	7	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171	<input type="checkbox"/> → 171

170 If she has/had German citizenship:

**Is/was she a German citizen ... ?**

... by birth .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... as a non-naturalised (ethnic) German repatriate .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... as a naturalised (ethnic) German repatriate .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... by naturalisation .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... by adoption by German parent(s) .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I don't know. ....	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Muster

171 Please indicate:

**Which group do you belong to?**

**i** This includes stepfathers, adoptive and foster fathers.

Your father lives in this household. ....	1	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176
Your father does not live in this household or is deceased. ....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

172 If your father does not live in this household:

**Has your father moved to Germany (today's borders)?**

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/> → 174	<input type="checkbox"/> → 174	<input type="checkbox"/> → 174	<input type="checkbox"/> → 174	<input type="checkbox"/> → 174
I don't know. ....	7	<input type="checkbox"/> → 174	<input type="checkbox"/> → 174	<input type="checkbox"/> → 174	<input type="checkbox"/> → 174	<input type="checkbox"/> → 174

173 If your father moved to Germany (today's borders):

**When did he (first) move to Germany (today's borders)?**

	Person 1	Person 2	Person 3	Person 4	Person 5
Year .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
I don't know. ....	<input type="checkbox"/> 7777	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

174 Does/did he have German citizenship?

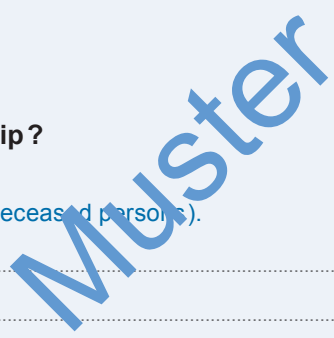
**i** Please consider only the current or last citizenship (for deceased persons).

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176
I don't know. ....	7	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176	<input type="checkbox"/> → 176

175 If he has/had German citizenship:

**Is/was he a German citizen ... ?**

... by birth .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... as a non-naturalised (ethnic) German repatriate .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... as a naturalised (ethnic) German repatriate .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... by naturalisation .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... by adoption by German parent(s) .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I don't know. ....	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## 176 Do you receive at least one statutory or public pension ?

**i Children entitled to a pension**  
 may receive one or several pensions of their own.  
 In that case please indicate the pension(s) that apply  
 for each child.

See also p. 66: **9** "Statutory or public pensions".

Please mark all relevant boxes for each person.

Yes, ...

... a pension from the German Federal Pension Insurance (formerly BfA, LVA) or German Pension Insurance Miners, Railway and Maritime:						
own pension .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
widow/widower's pension .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
orphan's pension .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... a public pension:						
own pension .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
widow/widower's pension .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
orphan's pension .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... a war pension:						
own pension .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
widow/widower's pension .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
orphan's pension .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... a pension from an accident insurance fund:						
own pension .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
widow/widower's pension .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
orphan's pension .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... a pension from abroad:						
own pension .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
widow/widower's pension .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
orphan's pension .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... other statutory or public pension:						
own pension .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
widow/widower's pension .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
orphan's pension .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, I do not receive any statutory or public pensions. ....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 177 Do you receive any other public payments ?

**i** Children's allowance is as a rule paid only to a parent or the legal guardian.

See also p. 66: **10** "Public payments".

Please mark all relevant boxes for each person.

Yes ...

... unemployment benefit I .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Hartz IV (unemployment benefit II, social benefit) .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... public assistance (not Hartz IV), e.g. basic security in old age and in cases of reduced earning capacity integration assistance, care assistance, continuous subsistence payments .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... housing allowance .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... parental allowance .....	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... home childcare allowance .....	11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... long-term care allowance, long-term care benefits in kind .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... children's allowance .....	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... supplementary children's allowance .....	10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... other public payments, e.g. (upgrading) training assistance ( (Meister-)BAföG), scholarship, asylum seeker allowance, sickness pay, allowance for foster children, transitional allowance for medical rehabilitation, loan in accordance with the Caregiver Leave Act or the Family Caregiver Leave Act .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, I do not receive any of the above public payments. ....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 178 Do you receive any (further) income ?

**i** See also p. 66: **11** "Income".

Please mark all relevant boxes for each person.

Yes ...

... wage, salary from employment, second and additional jobs, income from self-employment .....	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... company pension (including early retirement payments) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... benefits of a private pension insurance/life assurance .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... life interest retained for older people (e.g. right of residence, payments in kind) .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... interest, own property .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... from letting .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... private financial support, maintenance payments .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... from other sources of income .....	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, I do not have any (further) income of my own. ....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**179 Which category represents your personal net income (total of all income sources) of last month?**

**i Personal net income**

- Income from:
- employment
  - + earnings from second and additional jobs
  - + pension benefits
  - + other public payments  
(e.g. heating and housing benefits, housing allowance, children's allowance, long-term care allowance),
  - + further income and receipts  
(e.g. property and entrepreneurial income)
  - minus statutory taxes
  - minus social security contributions  
(also basic amounts payable to private health insurance and the like).

See also p. 66: **12** "Net income".

For each person with a personal income:

Code from List 14 .....

No personal income ..... 90

**List 14**

less than 150 euros ..... 01	2900 to less than 3200 euros ..... 14
150 to less than 300 euros ..... 02	3200 to less than 3600 euros ..... 15
300 to less than 500 euros ..... 03	3600 to less than 4000 euros ..... 16
500 to less than 700 euros ..... 04	4000 to less than 4500 euros ..... 17
700 to less than 900 euros ..... 05	4500 to less than 5000 euros ..... 18
900 to less than 1100 euros ..... 06	5000 to less than 5500 euros ..... 19
1100 to less than 1300 euros ..... 07	5500 to less than 6000 euros ..... 20
1300 to less than 1500 euros ..... 08	6000 to less than 7500 euros ..... 21
1500 to less than 1700 euros ..... 09	7500 to less than 10000 euros ..... 22
1700 to less than 2000 euros ..... 10	10000 to less than 18000 euros ..... 23
2000 to less than 2300 euros ..... 11	18000 euros or over ..... 24
2300 to less than 2600 euros ..... 12	
2600 to less than 2900 euros ..... 13	Farmer (main job) ..... 50

**180 What was the total net income of your household last month?**

**i The net income of the household**

is the sum of the net incomes of all people in the household.

Code from List 14 .....

**181 What is your average monthly net wage/salary?**

**i Additional earnings**  
such as vacation bonuses, 13th month's salary or performance bonuses have to be considered pro rata (sum divided by 12).

**People on parental leave**  
should refer to the period before they received parental allowance.

**If you have several jobs,**  
your answer should refer to the first-mentioned main job (see question 30).

See also p. 67: **13** "Net salary, wage".

Code from List 14, p. 54 .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Not applicable, because either self-employed or unpaid family worker in a family business .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable, because not in employment .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**182 Which are your main sources of livelihood?**

**i** See also p. 67: **14** "Main sources of livelihood".

For each person: code from List 15 .....

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------

<b>List 15</b>	Own employment .....	1	Parental allowance .....	9
	Unemployment benefit I .....	2	Income of the parents, also of partners or spouses or other relatives .....	4
	Hartz IV benefits (unemployment benefit II, social benefit) .....	7	Other financial support, e.g. training assistance (BAföG), early retirement payments, grants, long-term care insurance benefits, benefits for asylum seekers, allowances for foster children, sickness pay, loan in accordance with the Caregiver Leave Act or the Family Caregiver Leave Act .....	8
	Public assistance (not Hartz IV), e.g. basic security in old age and in case of reduced earning capacity, integration assistance, care assistance, continuous subsistence payments .....	6		
	Pension .....	3		
	Own property, savings, interest, letting, life interest retained for older people, life assurance, specific pensions fund (Versorgungswerk) .....	5		

## 183 Do you receive a (full) old-age pension ?

**i Insured receive a full old-age pension** at the end of their working life. Full pensioners may obtain an additional income of up to 450 euros per month before reaching standard retirement age. Higher earnings reduce the amount of the pension payment; the insured will then receive only a partial pension instead of the full pension.

Starting in 2012, the standard retirement age is gradually being raised from 65 to 67 years.

Notwithstanding this rule, a full pension may be received at the age of 63 if the insured has 45 qualifying years and meets certain criteria.

Yes .....	1	<input type="checkbox"/> → 185	<input type="checkbox"/> → 185	<input type="checkbox"/> → 185	<input type="checkbox"/> → 185	<input type="checkbox"/> → 185
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 184 If you do not receive a (full) old-age pension:

### Were you insured in a statutory pension insurance scheme in the last week ?

**i You have statutory pension insurance** if you are insured with the German Federal Pension Insurance (Deutsche Rentenversicherung Bund, formerly BfA, LVA) and the German Pension Insurance Miners, Railway and Maritime (Deutsche Rentenversicherung Knappschaft-Bahn-See). This also includes old-age pensions paid by agricultural pension funds.

Please also indicate that you have statutory pension insurance if you are insured with the statutory pension insurance of a foreign country (e. g. people who live in Germany but are employed subject to social insurance contributions in a neighbouring country).

**This does not refer**

to company old-age pension schemes, public officials' pension scheme, occupational pension schemes and private old-age pension schemes (e.g. state-sponsored private pension plan according to "Riester", life assurance and the like).

See also p. 67: **15** "Statutory pension insurance".

Yes ...					
... compulsorily insured .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... voluntarily insured .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



**185 Are you covered by health insurance ?**

**i This does not refer**  
to private supplementary insurance for additional coverage.

Yes ...

... by statutory health insurance						
Compulsory insurance for myself .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Voluntary insurance for myself .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family member's insurance .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... by private health insurance						
Insurance for myself .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family member's insurance .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, not covered by health insurance .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**186 If you are covered by health insurance:**

**With which health insurance fund/company are you insured ?**

**i This does not refer**  
to private supplementary insurance for additional coverage.

Statutory health insurance ...

... Local Health Insurance Fund (AOK) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Substitute Fund (Barmer GEK, DAK, TK) Kaufmännische Krankenkasse (KKH), Hanseatische Krankenkasse (HEK), Handelskrankenkasse (hkk) .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Company Health Insurance Fund (BKK) .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Guild Health Insurance Fund (IKK) .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Miners, Rail and Maritime Insurance Institution (KBS) .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... Agricultural Health Insurance Fund (e.g. LKK) .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Private health insurance .....	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foreign health insurance policy .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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**187 Do you have supplementary health insurance for additional coverage?**

**i Supplementary health insurance** can be obtained from both private and statutory (health) insurance funds/companies.

Please mark all relevant categories of additional coverage.

Yes, health insurance for travel abroad .....	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, for dental treatment, dental prostheses, implants or orthodontic treatment .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, for loss of earnings due to illness (sick pay or daily sickness allowance) .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, for one-bed or two-bed hospital room, hospital treatment by chief physician .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, for hospital stays (daily hospitalisation benefit) .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, for other coverage .....	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**188 If you are covered by statutory health insurance: Have you chosen an optional tariff from your health insurance fund/company?**

Please mark all relevant optional tariffs.

Yes, the "special forms of health care" tariff (family-physician tariff, integrated health care structured treatment programmes/DMP) .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, the "deductible insurance policy" (the insured pays a deductible for medical expenses) .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, the "pharmaceuticals for special therapies" tariff (coverage of out-patient medical treatment that is usually not covered) .....	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, another optional tariff (e.g. non-use of services, refund of expenses, individual entitlement to sick pay, limited coverage combined with a partial refund of expenses) .....	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**189 Are you entitled to other health care benefits?**

**i This applies** if you are entitled to e.g. free statutory medical care for soldiers etc., medical assistance for public officials, integration assistance for disabled people and assistance for nursing care.

It also applies if you are entitled to basic security in old age or in cases of reduced earning capacity, continuous subsistence payments and benefits for asylum seekers.

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# Questions about impairments

Person 1 | Person 2 | Person 3 | Person 4 | Person 5

## 190 Do you have an officially recognised disability?

voluntary

**i A disability can be certified**  
by a severely disabled person's pass, a seriously injured or war disabled person's pass, a pension award letter, an administrative or judicial ruling or a notice issued by a (war) pensions office.

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/> → 192	<input type="checkbox"/> → 192	<input type="checkbox"/> → 192	<input type="checkbox"/> → 192	<input type="checkbox"/> → 192
No response .....	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 191 If your disability was officially recognised: What is the officially recognised degree of disability?

voluntary

less than 30 .....	01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30 to less than 40 .....	02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40 to less than 50 .....	03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50 to less than 60 .....	04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60 to less than 70 .....	05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
70 to less than 80 .....	06	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
80 to less than 90 .....	07	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
90 to less than 100 .....	08	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
100 .....	09	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do not know/No response .....	99	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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# Labour force participation 12 months ago

Person 1 Person 2 Person 3 Person 4 Person 5

**192 Regarding your situation as it was exactly 12 months earlier:  
Which category best describes it?**

Employee, public official, apprentice .....	01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-employed person, freelancer without employees .....	02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-employed person, freelancer with employees .....	03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unpaid family worker in a family business .....	04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Person doing voluntary military service .....	13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Person doing volunteer service (e.g. Federal Volunteer Service, voluntary social year) .....	06	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pupil, student .....	07	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194
Permanently unfit for work .....	08	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194
Retired, in early retirement .....	14	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194
Unemployed .....	10	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194
Housewife/househusband .....	11	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194
Other situation (also children who have not started school yet) .....	12	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194	<input type="checkbox"/> → 194

**193 If you selected either of codes 01–04, 06 or 13  
in answer to question 192:**

**Enter the branch of activity of the establishment  
(location) you worked in 12 months ago.**

**i** **If your enterprise has several locations,**  
please enter the branch of activity of the location,  
not of the whole enterprise.

**If you have been in temporary employment (for a  
temporary work agency):**  
please enter the branch of activity you worked in  
12 months ago.

Please state the branch of activity as accurately as possible:

For example:

- food retailing (not: trade)
- machine tool industry (not: factory)
- facility management, caretaker services,  
business consultancy (not: services)
- software development (not: IT)

See also p. 65: **5** “Establishment (location)”.

Person 1 Branch of activity	Person 2 Branch of activity	Person 3 Branch of activity	Person 4 Branch of activity	Person 5 Branch of activity
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....



197 If your place of residence was abroad exactly 12 months ago:

In which country, in which region was your place of residence located at that time?

	Person 1	Person 2	Person 3	Person 4	Person 5
Code from List 17 .....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

List 17

<b>Europe</b>		<b>Europe</b>		<b>Middle East</b>	
Albania .....	ALB	San Marino .....	SMR	Kazakhstan .....	KAZ
Andorra .....	ADO	Sweden .....	SWE	Kyrgyzstan, Tajikistan, Turkmenistan, Uzbekistan .....	YYO
Belarus .....	BLR	Switzerland .....	CHE	Iran .....	IRN
Belgium .....	BEL	Serbia .....	SRB	Iraq .....	IRQ
Bosnia and Herzegovina .....	BIH	Slovakia .....	SVK	Israel .....	ISR
Bulgaria .....	BGR	Slovenia .....	SVN	Jordan .....	JOR
Denmark .....	DNK	Spain .....	ESP	Lebanon .....	LBN
Estonia .....	EST	Czech Republic .....	CZE	Syria .....	SYR
Finland .....	FIN	Turkey .....	TUR	Rest of Middle East (e.g. Kuwait, Oman, Saudi Arabia) .....	YYP
France .....	FRA	Ukraine .....	UKR		
Greece .....	GRC	Hungary .....	HUN	<b>South and South East Asia</b>	
Ireland .....	IRL	Vatican City .....	VAT	Afghanistan .....	AFG
Iceland .....	ISL	United Kingdom .....	GBR	India .....	IND
Italy .....	ITA	Cyprus .....	CYP	Indonesia .....	IDN
Kosovo .....	XXK			Pakistan .....	PAK
Croatia .....	HRV	<b>Africa</b>		Philippines .....	PHL
Latvia .....	LVA	Morocco .....	MAR	Sri Lanka .....	LKA
Liechtenstein .....	LIE	Egypt, Algeria, Libya, Tunisia .....	YYG	Thailand .....	THA
Lithuania .....	LTU	Ghana .....	GHA	Viet Nam .....	VNM
Luxembourg .....	LUX	Niger .....	NGA	Rest of South and South East Asia (e.g. Bangladesh, Laos, Nepal) .....	YYR
Malta .....	MLT	Rest of Africa .....	YYH		
Macedonia .....	MKD	<b>America</b>		<b>East Asia</b>	
Moldova .....	MDA	United States .....	USA	China .....	CHN
Monaco .....	MCO	Canada .....	CAN	Japan .....	JPN
Montenegro .....	MNE	Central America and Caribbean .....	YYL	South Korea .....	KOR
Netherlands .....	NLD	Brazil .....	BRA	Mongolia, North Korea, Taiwan .....	YYS
Norway .....	NOR	Rest of South America .....	YYM		
Austria .....	AUT	<b>Middle East</b>		<b>Rest of the world</b> .....	YYF
Poland .....	POL	Armenia, Azerbaijan, Georgia .....	YYN		
Portugal .....	PRT				
Romania .....	ROU				
Russian Federation .....	RUS				

**198** Regarding question 198, one person may answer them on behalf of all individuals sharing a household in the dwelling.

**Does the household in which you live have internet access ?**

**i** This means that any person in the household can, if required, access the internet **at home**.  
The internet may also be accessed through mobile devices.

Yes .....	1	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>

Person 1	Person 2	Person 3	Person 4	Person 5
----------	----------	----------	----------	----------

**199** Have you used the internet in the last 3 months ?

**i** It includes internet use for both private and professional purposes at home, at work or elsewhere.

Yes .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No .....	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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## Participation in the survey

Person 1 | Person 2 | Person 3 | Person 4 | Person 5

200 If you are 15 years or older:

Have you yourself answered the questions relating to you?

voluntary

**i** I have answered the questions myself

may also mean that you have checked the answers relating to you and corrected them where necessary.

Yes, I have answered the questions myself .....	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, the answers have been given by another person .....	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No response .....	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

201 When was the questionnaire filled in completely?

Please enter the date. ....

<input type="text"/>	<input type="text"/>	<input type="text"/>
DD	MM	YYYY

You have reached the end of the questionnaire.  
Thank you for your time.

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## Additional explanations

### 1 Caregiver Leave Act/Family Caregiver Leave Act

Employees have the right to be temporarily released from work to look after close relatives at home. They may choose between two release options:

Under the Caregiver Leave Act, employees may be released from work on a full-time or part-time basis for a maximum of six months to look after a close relative in need of care.

Under the Family Caregiver Leave Act, employees in establishments with a regular workforce of 25 employees or more (not including apprentices) are entitled to family caregiver leave. This means that they may reduce their weekly working time to as little as 15 hours for a maximum of 24 months if they look after a close relative in need of care at home or elsewhere.

### 2 Partial retirement

The Act on Facilitating a Smooth Transition to Retirement provides the framework conditions for partial retirement agreements between employers and employees. The employment office promotes part-time work arrangements for employees who reduce their working hours to half of the regular working time when they are 55 years old or older. It is left to the contracting parties to decide on the distribution of working time, e.g. a reduction to half of the weekly working hours or a full-time work phase followed by a release phase. The main condition is that, on an average basis, the overall working hours must be cut to half over a period of up to three years. This period can be extended to a maximum of ten years, where permissible under the relevant collective agreement. The partial retirement agreement must last at least until the employee has reached retirement age.

### 3 Zuordnung der Tätigkeit

If you are self-employed and only employ unpaid family workers (no wage or salary), please mark the category “self-employed without employees”. Those who work freelance or on a contract basis are considered as self-employed, including people who provide tuition, give private lessons or babysit.

If you work without pay in a business owned by a family member or relative, you are an unpaid family worker. If you receive pay for your work, you are either a wage earner/manual worker or a salary earner/non-manual worker.

The category of wage earners/manual workers comprises skilled workers as well as semi-skilled and unskilled workers.

Public officials include officials employed by the Protestant Church and the Roman Catholic Church. “Insurance officers” and “bank officers” should classify themselves as salary earners/non-manual workers.

If you are employed in the public service, please apply the Federal Public Officials Career Ordinance to the career structure applicable in your Land or municipality. To this end, please consult the table below to assign yourself to the

relevant service class (ordinary, intermediate, higher intermediate or higher service):

Federation/Länder	Career structure			
Federation, Brandenburg, Saarland	Ordinary service	Intermediate service	Higher intermediate service	Higher service
Baden-Württemberg, Hessen, Thüringen	-	Intermediate service	Higher intermediate service	Higher service
	Service category 1		Service category 2	
Berlin, Bremen, Hamburg, Mecklenburg-Vorpommern, Niedersachsen, Nordrhein-Westfalen, Sachsen-Anhalt, Schleswig-Holstein	First entry-level post	Second entry-level post	First entry-level post	Second entry-level post
Sachsen	Entry level 1	Entry level 2	Entry level 1	Entry level 2
Rheinland-Pfalz	First entry-level post	Second entry-level post	Third entry-level post	Fourth entry-level post
Bayern	Service structure			
	First qualification level	Second qualification level	Third qualification level	Fourth qualification level

If you are an intern, a (paid) trainee or a volunteer in the Federal Volunteer Service in your additional job (question 72), please indicate ‘salary earner/non-manual worker’.

### 4 Marginal employment

In the case of marginal employment, that is, a 450-euros job (also referred to as mini-job; with a pay of up to 450 euros per month on a yearly average basis), the employer pays flat-rate contributions to pension and health insurance and a lump sum tax rate. If an employee has several mini-jobs or the total remuneration exceeds the threshold of 450 euros per month on a yearly average basis, the entire amount of pay is subject to progressive social security contributions and regular taxation.

A job is also considered to be marginal employment if it is limited to a maximum of three months or 70 days worked per year.

People in a one-euro job continue to receive unemployment benefit II plus an additional expenses allowance of usually 1 to 2 euros per hour worked.

### 5 Establishment (location)

An establishment is the location where you work (e.g. a shop, freelancer’s office, agricultural holding, location of an enterprise, body governed by public law, etc.). A location (e.g. a specific establishment of an enterprise) may comprise several separate work places (such as a production site, a warehouse and an administrative building all on the business premises). The people working at those work places belong to one and the same establishment.

The people working in an establishment include part-time workers, apprentices, working proprietors and unpaid family workers.

Please give an exact description, for example:

- machine tool industry (not: Factory)
- food retailing (not: trade)

## 6 Stand-by duty

The whole period of stand-by duty is to be included in the weekly working hours. Stand-by duty means that an employee has to be on stand-by at a place specified by the employer to perform work if necessary.

This is to be distinguished from on-call duty. On-call duty means that the employee is free to decide where to stay. The employee is required to start work within reasonable time if the need arises. In this case, only the actual hours worked and the travelling time count as working time.

## 7 Working at home

"Work at home" is done, for example, by self-employed persons in artistic or professional activities who work wholly or partly in a part of their living accommodation that has been set aside for the purpose (e.g. an artist's studio).

Employees work at home if they carry out all or some of their work at home such as

- employees who work at home using a computer (PC) provided by their employer,
- homeworkers,
- travelling salespersons who prepare for appointments with clients and
- teachers who prepare lessons or correct exams at home as part of their job.

However, it is not considered "work at home" if – for personal reasons or due to time constraints – employees work at home during their leisure time without compensation. In contrast to that, doctors or tax consultants, for instance, do not work at home if their practice or office is adjacent to their living accommodation but contains a separate entrance. The same applies to farmers who work in their fields, stables or in other buildings that are not part of their living accommodation.

Doctors or tax consultants do not work at home if their practice or office is adjacent to their living accommodation but contains a separate entrance. The same applies to farmers who work in their fields, stables or in other buildings that are not part of their living accommodation.

## 8 Citizenship

"Naturalised (ethnic) German repatriates" are people who have been granted German citizenship on the grounds of their eligibility for naturalisation as people having the status of a German.

If you have received a certificate in accordance with Section 7 of the Nationality Act for people having the status of a German, please mark "as a non-naturalised (ethnic) German repatriate."

## 9 Statutory or public pensions

Please indicate all statutory or public pensions here, even if they are not your main source of livelihood, and distinguish by your own pensions if you are the person insured and by widow's/orphan's pensions and the like.

Those who have paid insurance contributions draw their own pensions. Only public officials and people who fall under Article 131 of the Basic Law receive pensions from public funds. Children may draw their own (half) orphan's pension. Such a pension is not regarded as part of the pension drawn by the surviving parent.

## 10 Public payments

Generally, children's allowance and supplementary children's allowance may be paid to only one person in the household. Business startup grants have to be classified to other public payments ("6").

Only people who have filed an application to this end may receive housing allowance. Recipients of specific social benefits (e.g. unemployment benefit II, social benefit, basic security in old age and in cases of reduced earning capacity) and the members of their community in need do not receive housing allowance. The respective social benefits account for reasonable housing costs in these cases.

## 11 Income

Benefits paid by pension funds for specific liberal professions such as doctors or pharmacists have to be indicated under code "4".

Children may have their own private income, e.g. from their own property. Therefore, such income has to be indicated in the child's column.

Private financial support ("6") may e.g. be payments made by parents to their children who live elsewhere to study at university.

## 12 Net income

Please state the sum of all types of income for each household member here – also for children – and for the household. State the net income, less wage tax, church tax, social security contributions, basic amounts payable to private health insurance, and the like. Benefits paid to encourage capital formation have to be added to the net income as well as advances, rent for company-owned housing and similar amounts. Income in kind (e.g. foodstuffs, free coal for miners) has to be considered, too. If you are a self-employed farmer (main job), you do not have to enter your income (code "50").

Major sources of income are:

- wage or salary,
- ex-gratia payment (13th month's salary), bonus payments, share in profits,
- entrepreneurial income,
- children's allowance and supplementary children's allowance,
- unemployment benefit I (ALG I),
- Hartz IV (unemployment benefit II (ALG II), social benefit, also heating and housing benefits),
- interest received, dividends, other property income,
- the income types mentioned in questions 176 to 178.

Long-term care benefits in kind (provided by care homes and home care services) are not to be included here.

### **13 Net salary, wage**

Enter the average (net) amount paid to you each month for your work (if you have several jobs, for the main job with the longest working hours), minus wage tax, church tax, social security contributions, basic amounts payable to private health insurance, and the like. Please include additional pay for overtime, shift work, business trips, employer's meal subsidies, and the like. Annual payments (e.g. vacation bonus, 13th month's salary, performance bonuses, bonus payments, share in profits) have to be added to the monthly income pro rata. People with one-euro jobs enter the amount they are paid in addition to unemployment benefit.

If you started a new job or reduced/increased your working hours last year, please consider the net earnings paid to you last month.

### **14 Main sources of livelihood**

If you are in employment, this does not have to be your main source of livelihood (e.g. the living expenses of apprentices are often paid by their parents). If you pay your living expenses mainly from what you earn in marginal employment, please enter employment. Pensioners who are still in employment may live mainly on what they earn or on their pension, depending on the amount of benefits they receive.

Regular payments of life assurance companies (including benefits paid by pension funds of specific liberal professions such as doctors or pharmacists) are regarded as maintenance payments from own property.

### **15 Statutory pension insurance**

Statutory pension insurance is compulsory mainly for wage earners/manual workers, salary earners/non-manual workers and certain self-employed persons (e.g. homeworkers with no more than two assistants from outside their family). Public officials and comparable salary earners (employees of health insurance institutions with public official status), self-employed persons (with few exceptions) and unpaid family workers without a working contract are exempted from compulsory pension insurance.

Contributions are paid for unemployed persons who receive unemployment benefit I. They are therefore regarded as liable to compulsory statutory pension insurance. With effect from 1 January 2011 contributions are no longer paid for unemployed persons receiving unemployment benefit II (Hartz IV). They are not liable to compulsory insurance.