



EVERYONE MATTERS

Malta Census

POPULATION AND HOUSING CENSUS

2021

Confidential when complete

WRITE IN BLOCK LETTERS

Reference Number**House No.****House Name**

Office Use Only

Contact Number 1**Entrance/Block** (e.g. Ent. A, Block 2)**Flat Number****Contact Number 2****Street Name****Contact Number 3****Locality****Postcode**

Dear Resident(s),

The national Census of Population and Housing will be held on Sunday 21 November 2021 and is the official counting process of every resident and dwelling in Malta and Gozo as of midnight of this day. The National Statistics Office will collect, analyse and publish all results related to the Census.

You are kindly requested to fill in this questionnaire and provide all information to the best of your knowledge. Participation in the Census is mandatory and this information is being requested in accordance with the Malta Census Act of 1948 and the Data Protection Act – Cap. 586 of the Laws of Malta implementing the General Data Protection Regulation (GDPR). The Office assures you that all data collected shall remain confidential and used for statistical purposes only. The Office is obliged to protect your identity and refrain from divulging any data to third parties, that might lead to the identification of persons or entities.

In case of difficulty, you may seek assistance from the Enumerator who shall be contacting you between 8 and 28 November 2021. You may also contact the Office on freephone 25997410 or send an email to census2021@gov.mt.

Thank you in advance for your co-operation.

Etienne Caruana

CENSUS OFFICER

Office Use Only

Locality Code

EA Code

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

 of


	NAME	ID CARD	SIGNATURE
ENUMERATOR	<input type="text"/>	<input type="text"/>	<input type="text"/>
NSO PERSONNEL	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you do not know how to answer or fill in the questionnaire,
kindly consult your Enumerator or contact us on:



FREEPHONE NUMBER
25997410

8th November 2021 to 28th November 2021
Monday to Sunday: 8:00am-10:00pm

EMAIL

census2021@gov.mt

WEB

www.census2021.gov.mt

Should this questionnaire not be collected by your Enumerator by

28th November 2021

You should contact us on the freephone or by email.

NOTES

How to complete the questionnaire

Who should be included in the questionnaire?

You should include the details of all persons who normally reside at this address, including those who may be on holiday or temporarily away due to work, study or medical reasons. Include also babies who were born before and up to midnight of 21st November 2021, even if they are still in hospital.

All persons must be enumerated where they normally reside. **This address need not necessarily be the same as the one on their identity card.**

A separate column in the questionnaire should be filled in for each dwelling member.

The information provided in respect of **all dwelling members** should be correct as at midnight of the Census Night, namely 21st November 2021.

A **dwelling** is defined as:

- One person living alone in a particular address, or
- A group of people (not necessarily related) living at the same address who share parts of the dwelling (such as a living room, sitting room or dining area) or split expenses.

What if there are more than five (5) residents in the dwelling?

If there are more than **five (5) persons** residing at this address, ask your Enumerator for another questionnaire or contact us.

What if I need help to fill in the questionnaire?

If you do not know how to answer or have not understood a particular question, contact us on freephone or by email for assistance. You may also consult your Enumerator to help you with any questions related to the Census and collect the complete questionnaire. Please co-operate fully with your Enumerator to contribute to the success of the 2021 Census. **Your Enumerator is identified through the Census ID card.**

What should I do after I complete the questionnaire?

Once the questionnaire is complete, you should keep it in a safe place and hand it to your Enumerator who will come and collect it between **Monday 8th November and Sunday 28th November 2021** during the times below:

Monday to Friday: 8:30am-8:30pm

Saturday and Sunday: 8:30am-12:00pm

Data Protection is guaranteed

The Census is being carried out in terms of the Census Act of 1948. The confidentiality of the information contained in this questionnaire is legally guaranteed by both this Act and the General Data Protection Regulation (GDPR). The National Statistics Office will use the information you provide for statistical purposes only.

POPULATION

SECTION

Read the NOTES on page 3, then **START FROM HERE**.

1 What is your name?

Insert the name of all the persons who usually live in this dwelling.

PERSON 1

Always write in CAPITALS.
Write in black or blue ink,
DO NOT use pencil.

2 What is your surname?

Insert the surname of all the persons who usually live in this dwelling.

Remember to write in CAPITALS.

3 Insert your Maltese Identity card number or Residence card number

- Include the card letter (e.g. M, G, L, H, A, etc.).
- For children, insert the Act of Birth if an identity card is not available.
- If you do not hold a national ID card, provide any other official identification number (e.g. passport number).

Don't forget the card letter. ↓

4 Insert your date of birth

DAY		MONTH		YEAR			
D	D	M	M	Y	Y	Y	Y
2	8	1	0	1	9	8	5

DAY		MONTH		YEAR			
D	D	M	M	Y	Y	Y	Y

5 Indicate your registered sex

(Mark one circle only)

Mark by drawing a cross
If you mark by mistake,
fill in the incorrect circle
and mark the correct one



If you are male, **go to question 7**

- Male → GO TO 7
 Female
 Other

- Male → GO TO 7
 Female
 Other

- Male → GO TO 7
 Female
 Other

- Male → GO TO 7
 Female
 Other

- Male → GO TO 7
 Female
 Other

6 If applicable, insert the date of your first live birth

Provide the date of birth of your **first live child**. If this does not apply to you, please mark **Not applicable**.

DAY		MONTH		YEAR			
D	D	M	M	Y	Y	Y	Y

Not applicable

DAY		MONTH		YEAR			
D	D	M	M	Y	Y	Y	Y

Not applicable

DAY		MONTH		YEAR			
D	D	M	M	Y	Y	Y	Y

Not applicable

DAY		MONTH		YEAR			
D	D	M	M	Y	Y	Y	Y

Not applicable

DAY		MONTH		YEAR			
D	D	M	M	Y	Y	Y	Y

Not applicable

7 Is the gender you identify with the same as your registered sex?

(Mark one circle only)

! Applicable only if you are sixteen (16) years old or over.

- Yes → GO TO 9
 No

- Yes → GO TO 9
 No

- Yes → GO TO 9
 No

- Yes → GO TO 9
 No

- Yes → GO TO 9
 No

8 Specify the gender you identify with

! Applicable only if you are sixteen (16) years old or over.

9 Which of the following best describes your sexual orientation?

(Mark one circle only)

! Applicable only if you are sixteen (16) years old or over.

- Straight/Heterosexual
 Gay or Lesbian
 Bisexual
 Other (Specify) ↓

- Straight/Heterosexual
 Gay or Lesbian
 Bisexual
 Other (Specify) ↓

- Straight/Heterosexual
 Gay or Lesbian
 Bisexual
 Other (Specify) ↓

- Straight/Heterosexual
 Gay or Lesbian
 Bisexual
 Other (Specify) ↓

- Straight/Heterosexual
 Gay or Lesbian
 Bisexual
 Other (Specify) ↓

10 Which is your country of birth?

(Mark one circle only)

- Malta
- United Kingdom
- Italy
- Germany
- Serbia
- Russia
- Canada
- United States
- Australia
- Philippines
- Other (Specify) ↴

- Malta
- United Kingdom
- Italy
- Germany
- Serbia
- Russia
- Canada
- United States
- Australia
- Philippines
- Other (Specify) ↴

- Malta
- United Kingdom
- Italy
- Germany
- Serbia
- Russia
- Canada
- United States
- Australia
- Philippines
- Other (Specify) ↴

- Malta
- United Kingdom
- Italy
- Germany
- Serbia
- Russia
- Canada
- United States
- Australia
- Philippines
- Other (Specify) ↴

- Malta
- United Kingdom
- Italy
- Germany
- Serbia
- Russia
- Canada
- United States
- Australia
- Philippines
- Other (Specify) ↴

11 What is your racial origin?

(Mark one circle only)

Indicate your race through **your parent/s**.

- Caucasian
- Asian
- African
- Arab
- Hispanic or Latino
- Other (Specify) ↴

More than one racial origin

- Caucasian
- Asian
- African
- Arab
- Hispanic or Latino
- Other (Specify) ↴

More than one racial origin

- Caucasian
- Asian
- African
- Arab
- Hispanic or Latino
- Other (Specify) ↴

More than one racial origin

- Caucasian
- Asian
- African
- Arab
- Hispanic or Latino
- Other (Specify) ↴

More than one racial origin

- Caucasian
- Asian
- African
- Arab
- Hispanic or Latino
- Other (Specify) ↴

More than one racial origin

12 Do you have Maltese citizenship?

(Mark one circle only)

- Yes
- No

- Yes
- No

- Yes
- No

- Yes
- No

- Yes
- No

13 Do you have any foreign citizenship?

(Mark one circle only)

- Yes
- No → GO TO 15

- Yes
- No → GO TO 15

- Yes
- No → GO TO 15

- Yes
- No → GO TO 15

- Yes
- No → GO TO 15

14 Which foreign citizenship do you have?

(Mark all that apply)

In this question a square is used, therefore you can choose/mark more than one option



- British
- Italian
- German
- Serbian
- Russian
- Canadian
- American
- Australian
- Philippine
- Other (Specify) ↴

- British
- Italian
- German
- Serbian
- Russian
- Canadian
- American
- Australian
- Philippine
- Other (Specify) ↴

- British
- Italian
- German
- Serbian
- Russian
- Canadian
- American
- Australian
- Philippine
- Other (Specify) ↴

- British
- Italian
- German
- Serbian
- Russian
- Canadian
- American
- Australian
- Philippine
- Other (Specify) ↴

- British
- Italian
- German
- Serbian
- Russian
- Canadian
- American
- Australian
- Philippine
- Other (Specify) ↴

15 Have you been living, or intend to live in Malta, for a period of at least twelve (12) months?

(Mark one circle only)

Information should be based on the **place where you regularly live**, regardless of temporary absences for purposes of recreation, work, school, etc.

- ₁ Yes, in this dwelling
- ₂ Yes, in another → GO TO 17 dwelling in Malta
- ₃ Yes, in an → GO TO 17 institution in Malta
- ₄ Yes, but I do → GO TO 18 not have a permanent address
- ₅ No, I live → GO TO 17 abroad

16 At present, is there another dwelling in which you regularly reside?

(Mark one circle only)

Indicate **Yes** if there is any other residence in which you regularly live. **Do not consider temporary residences** such as holiday dwellings.

- ₁ Yes
- ₂ No → GO TO 18

17 State the full address of your second dwelling in which you regularly reside (or country if residing abroad)

18 Where did you live one (1) year ago?

(Mark one circle only)

! Applicable only if you are one (1) year old or over.

Information should be based on **last year's place of usual residence** where you have regularly lived, regardless of temporary absences for purposes of recreation, work, school, etc.

- ₁ In this dwelling
- ₂ In another dwelling in the same locality in Malta
- ₃ In another dwelling in another locality in Malta/ in another country (Specify where) ↴

19 Have you ever resided abroad for a continuous period of at least twelve (12) months?

(Mark one circle only)

! Applicable only if you are one (1) year old or over.

- ₁ Yes
- ₂ No → GO TO 21

20 When was the year of your most recent arrival in Malta?

(Mark one circle only)

Insert the year in which you most recently arrived in Malta with **the intention of spending at least twelve (12) months**.

- ₁ 1979 or earlier
- ₂ 1980 or later (Specify year) ↴

- ₁ Yes, in this dwelling
- ₂ Yes, in another → GO TO 17 dwelling in Malta
- ₃ Yes, in an → GO TO 17 institution in Malta
- ₄ Yes, but I do → GO TO 18 not have a permanent address
- ₅ No, I live → GO TO 17 abroad

- ₁ Yes
- ₂ No → GO TO 18

- ₁ In this dwelling
- ₂ In another dwelling in the same locality in Malta
- ₃ In another dwelling in another locality in Malta/ in another country (Specify where) ↴

- ₁ Yes
- ₂ No → GO TO 21

- ₁ 1979 or earlier
- ₂ 1980 or later (Specify year) ↴

- ₁ Yes, in this dwelling
- ₂ Yes, in another → GO TO 17 dwelling in Malta
- ₃ Yes, in an → GO TO 17 institution in Malta
- ₄ Yes, but I do → GO TO 18 not have a permanent address
- ₅ No, I live → GO TO 17 abroad

- ₁ Yes
- ₂ No → GO TO 18

- ₁ In this dwelling
- ₂ In another dwelling in the same locality in Malta
- ₃ In another dwelling in another locality in Malta/ in another country (Specify where) ↴

- ₁ Yes
- ₂ No → GO TO 21

- ₁ 1979 or earlier
- ₂ 1980 or later (Specify year) ↴

- ₁ Yes, in this dwelling
- ₂ Yes, in another → GO TO 17 dwelling in Malta
- ₃ Yes, in an → GO TO 17 institution in Malta
- ₄ Yes, but I do → GO TO 18 not have a permanent address
- ₅ No, I live → GO TO 17 abroad

- ₁ Yes
- ₂ No → GO TO 18

- ₁ In this dwelling
- ₂ In another dwelling in the same locality in Malta
- ₃ In another dwelling in another locality in Malta/ in another country (Specify where) ↴

- ₁ Yes
- ₂ No → GO TO 21

- ₁ 1979 or earlier
- ₂ 1980 or later (Specify year) ↴

- ₁ Yes, in this dwelling
- ₂ Yes, in another → GO TO 17 dwelling in Malta
- ₃ Yes, in an → GO TO 17 institution in Malta
- ₄ Yes, but I do → GO TO 18 not have a permanent address
- ₅ No, I live → GO TO 17 abroad

- ₁ Yes
- ₂ No → GO TO 18

- ₁ In this dwelling
- ₂ In another dwelling in the same locality in Malta
- ₃ In another dwelling in another locality in Malta/ in another country (Specify where) ↴

- ₁ Yes
- ₂ No → GO TO 21

- ₁ 1979 or earlier
- ₂ 1980 or later (Specify year) ↴

21 Do any of the following individuals live in this dwelling with you?

(Mark one circle only for each)

Cohabiting partners refer to a marriage-like relationship between two individuals which is not legally registered as a marriage or civil union.

Read the example below carefully:

PERSON 1	PERSON 2	PERSON 3
Joe	Mary	James
<p>A. Your wife/husband (including partner in a civil union)</p> <p><input checked="" type="radio"/> Yes (Specify number and name)</p> <p>Person Number: 2, Person's Name: Mary</p> <p><input type="radio"/> No</p> <p>B. Your cohabiting partner (not bound by marriage or civil union)</p> <p><input type="radio"/> Yes (Specify number and name)</p> <p><input checked="" type="radio"/> No</p> <p>C. Your parent (including adoptive and step)</p> <p><input type="radio"/> Yes (Specify number and name)</p> <p><input checked="" type="radio"/> No</p> <p>D. Your other parent (including adoptive and step)</p> <p><input type="radio"/> Yes (Specify number and name)</p> <p><input checked="" type="radio"/> No</p>	<p>A. Your wife/husband (including partner in a civil union)</p> <p><input checked="" type="radio"/> Yes (Specify number and name)</p> <p>Person Number: 1, Person's Name: Joe</p> <p><input type="radio"/> No</p> <p>B. Your cohabiting partner (not bound by marriage or civil union)</p> <p><input type="radio"/> Yes (Specify number and name)</p> <p><input checked="" type="radio"/> No</p> <p>C. Your parent (including adoptive and step)</p> <p><input type="radio"/> Yes (Specify number and name)</p> <p><input checked="" type="radio"/> No</p> <p>D. Your other parent (including adoptive and step)</p> <p><input type="radio"/> Yes (Specify number and name)</p> <p><input checked="" type="radio"/> No</p>	<p>A. Your wife/husband (including partner in a civil union)</p> <p><input type="radio"/> Yes (Specify number and name)</p> <p><input checked="" type="radio"/> No</p> <p>B. Your cohabiting partner (not bound by marriage or civil union)</p> <p><input type="radio"/> Yes (Specify number and name)</p> <p><input checked="" type="radio"/> No</p> <p>C. Your parent (including adoptive and step)</p> <p><input checked="" type="radio"/> Yes (Specify number and name)</p> <p>Person Number: 2, Person's Name: Mary</p> <p><input type="radio"/> No</p> <p>D. Your other parent (including adoptive and step)</p> <p><input checked="" type="radio"/> Yes (Specify number and name)</p> <p>Person Number: 1, Person's Name: Joe</p> <p><input type="radio"/> No</p>

The example illustrates:

- Joe's wife is person number 2 (Mary)
- Mary's husband is person number 1 (Joe)
- James's parents are person number 2 (Mary) and person number 1 (Joe)

A. Your wife/husband
(including partner in a civil union)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

B. Your cohabiting partner
(not bound by marriage or civil union)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

C. Your parent
(including adoptive and step)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

D. Your other parent
(including adoptive and step)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

A. Your wife/husband
(including partner in a civil union)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

B. Your cohabiting partner
(not bound by marriage or civil union)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

C. Your parent
(including adoptive and step)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

D. Your other parent
(including adoptive and step)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

A. Your wife/husband
(including partner in a civil union)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

B. Your cohabiting partner
(not bound by marriage or civil union)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

C. Your parent
(including adoptive and step)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

D. Your other parent
(including adoptive and step)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

A. Your wife/husband
(including partner in a civil union)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

B. Your cohabiting partner
(not bound by marriage or civil union)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

C. Your parent
(including adoptive and step)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

D. Your other parent
(including adoptive and step)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

A. Your wife/husband
(including partner in a civil union)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

B. Your cohabiting partner
(not bound by marriage or civil union)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

C. Your parent
(including adoptive and step)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

D. Your other parent
(including adoptive and step)

Yes (Specify number and name)

Person Number	Person's Name
---------------	---------------

No

22 What is your legal marital status?

(Mark one circle only)

- Provide the marital status as **legally recognised** in official documents.
- If a person is informally separated from spouse, and no legal procedures of separation have commenced, then the most recent legally recognised marital status should be **Married**.

! Applicable only if you are sixteen (16) years old or over.

Single (never married or annulled marriage and not remarried)

Married or in a civil union, with a person of the opposite sex

Married or in a civil union, with a person of the same sex

Separated, formerly in an opposite-sex marriage or civil union

Separated, formerly in a same-sex marriage or civil union

Widowed (not remarried)

Divorced (not remarried)

Single (never married or annulled marriage and not remarried)

Married or in a civil union, with a person of the opposite sex

Married or in a civil union, with a person of the same sex

Separated, formerly in an opposite-sex marriage or civil union

Separated, formerly in a same-sex marriage or civil union

Widowed (not remarried)

Divorced (not remarried)

Single (never married or annulled marriage and not remarried)

Married or in a civil union, with a person of the opposite sex

Married or in a civil union, with a person of the same sex

Separated, formerly in an opposite-sex marriage or civil union

Separated, formerly in a same-sex marriage or civil union

Widowed (not remarried)

Divorced (not remarried)

Single (never married or annulled marriage and not remarried)

Married or in a civil union, with a person of the opposite sex

Married or in a civil union, with a person of the same sex

Separated, formerly in an opposite-sex marriage or civil union

Separated, formerly in a same-sex marriage or civil union

Widowed (not remarried)

Divorced (not remarried)

Single (never married or annulled marriage and not remarried)

Married or in a civil union, with a person of the opposite sex

Married or in a civil union, with a person of the same sex

Separated, formerly in an opposite-sex marriage or civil union

Separated, formerly in a same-sex marriage or civil union

Widowed (not remarried)

Divorced (not remarried)

23 Do you have any long-term illness, disease and/or chronic condition (e.g. asthma, diabetes, heart disease, etc.)?
(Mark one circle only)
Consider any illness or condition which has lasted, or is expected to last, for six (6) months or more.

! Applicable only if you are five (5) years old or over.

<input type="radio"/> ₁ Yes <input type="radio"/> ₂ No	<input type="radio"/> ₁ Yes <input type="radio"/> ₂ No	<input type="radio"/> ₁ Yes <input type="radio"/> ₂ No	<input type="radio"/> ₁ Yes <input type="radio"/> ₂ No	<input type="radio"/> ₁ Yes <input type="radio"/> ₂ No
---	---	---	---	---

24 Do you have any of the following difficulties?
(Mark one circle only)
Consider difficulties which have been limiting you for at least the past six (6) months, or which are expected to continue for six (6) months or more.

! Applicable only if you are five (5) years old or over.

- A. Difficulty to see, even if wearing glasses**
- B. Difficulty to hear, even if using a hearing aid**
- C. Difficulty to walk or going up steps**
- D. Difficulty to remember or concentrate**
- E. Difficulty with self-care, such as washing all over or dressing**
- F. Difficulty to communicate (to understand or to be understood) when using usual (customary) language**

<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot see at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot see at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot see at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot see at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot see at all
<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot hear at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot hear at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot hear at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot hear at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot hear at all
<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot walk at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot walk at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot walk at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot walk at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot walk at all
<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot do at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot do at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot do at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot do at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot do at all
<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot do at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot do at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot do at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot do at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot do at all
<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot communicate at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot communicate at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot communicate at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot communicate at all	<input type="radio"/> ₁ No difficulty <input type="radio"/> ₂ Yes, some difficulty <input type="radio"/> ₃ Yes, a lot of difficulty <input type="radio"/> ₄ Cannot communicate at all

25 What is the main language that you grew up speaking from early childhood?
(Mark one circle only)

! Applicable only if you are five (5) years old or over.

<input type="radio"/> ₁ Maltese <input type="radio"/> ₂ English <input type="radio"/> ₃ Italian <input type="radio"/> ₄ German <input type="radio"/> ₅ French <input type="radio"/> ₆ Arabic <input type="radio"/> ₇ Other (Specify) <input type="text"/>	<input type="radio"/> ₁ Maltese <input type="radio"/> ₂ English <input type="radio"/> ₃ Italian <input type="radio"/> ₄ German <input type="radio"/> ₅ French <input type="radio"/> ₆ Arabic <input type="radio"/> ₇ Other (Specify) <input type="text"/>	<input type="radio"/> ₁ Maltese <input type="radio"/> ₂ English <input type="radio"/> ₃ Italian <input type="radio"/> ₄ German <input type="radio"/> ₅ French <input type="radio"/> ₆ Arabic <input type="radio"/> ₇ Other (Specify) <input type="text"/>	<input type="radio"/> ₁ Maltese <input type="radio"/> ₂ English <input type="radio"/> ₃ Italian <input type="radio"/> ₄ German <input type="radio"/> ₅ French <input type="radio"/> ₆ Arabic <input type="radio"/> ₇ Other (Specify) <input type="text"/>	<input type="radio"/> ₁ Maltese <input type="radio"/> ₂ English <input type="radio"/> ₃ Italian <input type="radio"/> ₄ German <input type="radio"/> ₅ French <input type="radio"/> ₆ Arabic <input type="radio"/> ₇ Other (Specify) <input type="text"/>
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26 From where are you receiving your main formal education?

(Mark one circle only)



Applicable only if you are aged between five (5) and fifteen (15) years.

- ₁ Public/State school
- ₂ Church school
- ₃ Private school
- ₄ Home schooling by a professional
- ₅ Other (Specify) ↴

- ₆ No formal education received

- ₁ Public/State school
- ₂ Church school
- ₃ Private school
- ₄ Home schooling by a professional
- ₅ Other (Specify) ↴

- ₆ No formal education received

- ₁ Public/State school
- ₂ Church school
- ₃ Private school
- ₄ Home schooling by a professional
- ₅ Other (Specify) ↴

- ₆ No formal education received

- ₁ Public/State school
- ₂ Church school
- ₃ Private school
- ₄ Home schooling by a professional
- ₅ Other (Specify) ↴

- ₆ No formal education received

- ₁ Public/State school
- ₂ Church school
- ₃ Private school
- ₄ Home schooling by a professional
- ₅ Other (Specify) ↴

- ₆ No formal education received

27 Are you able to read and write a short, simple sentence in any language?

(Mark one circle only)



Applicable only if you are ten (10) years old or over.

- ₁ Yes
- ₂ No

- ₁ Yes
- ₂ No

- ₁ Yes
- ₂ No

- ₁ Yes
- ₂ No

- ₁ Yes
- ₂ No



STOP IF YOU ARE AGED FOURTEEN (14) OR LESS. CONTINUE ONLY IF YOU ARE AGED FIFTEEN (15) OR MORE.



STOP IF YOU ARE AGED FOURTEEN (14) OR LESS. CONTINUE ONLY IF YOU ARE AGED FIFTEEN (15) OR MORE.

28 What religion, religious denomination or body do you belong to/identify yourself with?

(Mark one circle only)

- ₁ Roman Catholic
- ₂ Orthodox
- ₃ Church of England
- ₄ Protestant
- ₅ Islam
- ₆ Judaism
- ₇ Buddhism
- ₈ Hinduism
- ₉ Other (Specify) ↴

- ₁₀ No religious affiliation

- ₁ Roman Catholic
- ₂ Orthodox
- ₃ Church of England
- ₄ Protestant
- ₅ Islam
- ₆ Judaism
- ₇ Buddhism
- ₈ Hinduism
- ₉ Other (Specify) ↴

- ₁₀ No religious affiliation

- ₁ Roman Catholic
- ₂ Orthodox
- ₃ Church of England
- ₄ Protestant
- ₅ Islam
- ₆ Judaism
- ₇ Buddhism
- ₈ Hinduism
- ₉ Other (Specify) ↴

- ₁₀ No religious affiliation

- ₁ Roman Catholic
- ₂ Orthodox
- ₃ Church of England
- ₄ Protestant
- ₅ Islam
- ₆ Judaism
- ₇ Buddhism
- ₈ Hinduism
- ₉ Other (Specify) ↴

- ₁₀ No religious affiliation

- ₁ Roman Catholic
- ₂ Orthodox
- ₃ Church of England
- ₄ Protestant
- ₅ Islam
- ₆ Judaism
- ₇ Buddhism
- ₈ Hinduism
- ₉ Other (Specify) ↴

- ₁₀ No religious affiliation

Continue on next page ↴

29 What is the highest qualification (or education) that you have successfully attained?

(Mark one circle only)

- Option 2** Include Primary level Years 1-6 and Standard 1-7.
- Option 3** Include certification from Secondary Trade Schools.
- Option 4** Include ALP certification at Level 2 or 3 with 1 subject only.
- Option 5** Include ALP certification at Level 2 or 3 with 2 subjects or more.
- Option 6** Include certification from ITS Apprenticeship programmes.
- Option 7** Include certification from vocational (i.e. MCAST or ITS) Foundation Courses.
- Option 8** Include certification from courses such as; MCAST BTEC First Diploma, ITS Diploma, Journeyman's Certificate Craft Level, City and Guilds Part 2 and Wireman/Masons License.
- Option 9** Include intermediate or advanced level qualifications, or equivalent.
- Option 10** Include certification from vocational courses (excluding MCAST and ITS courses) obtained in the years pre-2000, such as; Fellenberg, Technical Institute, Prevocational School, Dockyard School and Secretarial School and Ordinary Technician Diploma.
- Option 11** Include vocational certification of Advanced/National Diplomas from MCAST, ITS, BTEC or other vocational institutes.
- Option 12** Include general certification like Diploma in Business or Certificate in Management or similar.
- Option 13** Include certification from Undergraduate diploma courses with duration of less than 2 years.
- Option 14** Include certification from Undergraduate diploma courses with duration of 2 years or more, such as; Higher National Diploma, Higher/Advanced Technician Diploma, International Advanced Diploma, BTEC Higher National Diploma.
- Option 15** Include similar certification, such as; First Degree, Post-Graduate Diploma or Post-graduate Certificate.
- Option 16** Include certification for courses such as; Doctor of Laws ACCA, Accountancy, Medicine and Dentistry.
- Option 17** Include certification of completed doctoral level courses.
- Option 18** Provide specification of course not allocated from the above options with the official name and duration (if possible).

- ₁ No schooling or Pre-primary level
- ₂ Primary level, Special schools or Resource Centres
- ₃ Secondary level, City and Guilds Basic/Part 1 - **MQF/EQF 2**
- ₄ SSC&P/SEC/GCE/'O'-levels, Vocational Course with **1 subject only - MQF/EQF 2**
- ₅ SSC&P/SEC/GCE/'O'-levels, Vocational Course with **2 subjects or more - MQF/EQF 3**
- ₆ Introductory or Basic Skills Certificate/Award **MQF/EQF 1 or 2**
- ₇ Foundation Certificate **MQF/EQF 2**
- ₈ First Diploma/Certificate **MQF/EQF 3**
- ₉ Intermediates, 'A'-levels, Matriculation Certificate, QSI, IB/EB Diploma, Liceo Scientifico/Classico **MQF/EQF 4**
- ₁₀ Trade Schools qualifications **Pre-2000** or City and Guilds Part 3, Journeyman's Certificate Technical Level **excluding MCAST and ITS - MQF/EQF 4**
- ₁₁ National/Extended/Advanced Vocational Diploma - **MQF/EQF 4**
- ₁₂ Diploma/ International General Diploma/ Certificate - **MQF/EQF 4**
- ₁₃ Undergraduate Diploma **(less than 2 years) MQF/EQF 5**
- ₁₄ Undergraduate Diploma/ HND **(2 years or more) - MQF/EQF 5**
- ₁₅ Bachelors level Degree or equivalent - **MQF/EQF 6**
- ₁₆ Masters Level Degree or equivalent, Post-Graduate Degree, Long first degrees **MQF/EQF 7**
- ₁₇ Doctoral Degree (PhD) - **MQF/EQF 8**
- ₁₈ Other (Specify)

- ₁ No schooling or Pre-primary level
- ₂ Primary level, Special schools or Resource Centres
- ₃ Secondary level, City and Guilds Basic/Part 1 - **MQF/EQF 2**
- ₄ SSC&P/SEC/GCE/'O'-levels, Vocational Course with **1 subject only - MQF/EQF 2**
- ₅ SSC&P/SEC/GCE/'O'-levels, Vocational Course with **2 subjects or more - MQF/EQF 3**
- ₆ Introductory or Basic Skills Certificate/Award **MQF/EQF 1 or 2**
- ₇ Foundation Certificate **MQF/EQF 2**
- ₈ First Diploma/Certificate **MQF/EQF 3**
- ₉ Intermediates, 'A'-levels, Matriculation Certificate, QSI, IB/EB Diploma, Liceo Scientifico/Classico **MQF/EQF 4**
- ₁₀ Trade Schools qualifications **Pre-2000** or City and Guilds Part 3, Journeyman's Certificate Technical Level **excluding MCAST and ITS - MQF/EQF 4**
- ₁₁ National/Extended/Advanced Vocational Diploma - **MQF/EQF 4**
- ₁₂ Diploma/ International General Diploma/ Certificate - **MQF/EQF 4**
- ₁₃ Undergraduate Diploma **(less than 2 years) MQF/EQF 5**
- ₁₄ Undergraduate Diploma/ HND **(2 years or more) - MQF/EQF 5**
- ₁₅ Bachelors level Degree or equivalent - **MQF/EQF 6**
- ₁₆ Masters Level Degree or equivalent, Post-Graduate Degree, Long first degrees **MQF/EQF 7**
- ₁₇ Doctoral Degree (PhD) - **MQF/EQF 8**
- ₁₈ Other (Specify)

- ₁ No schooling or Pre-primary level
- ₂ Primary level, Special schools or Resource Centres
- ₃ Secondary level, City and Guilds Basic/Part 1 - **MQF/EQF 2**
- ₄ SSC&P/SEC/GCE/'O'-levels, Vocational Course with **1 subject only - MQF/EQF 2**
- ₅ SSC&P/SEC/GCE/'O'-levels, Vocational Course with **2 subjects or more - MQF/EQF 3**
- ₆ Introductory or Basic Skills Certificate/Award **MQF/EQF 1 or 2**
- ₇ Foundation Certificate **MQF/EQF 2**
- ₈ First Diploma/Certificate **MQF/EQF 3**
- ₉ Intermediates, 'A'-levels, Matriculation Certificate, QSI, IB/EB Diploma, Liceo Scientifico/Classico **MQF/EQF 4**
- ₁₀ Trade Schools qualifications **Pre-2000** or City and Guilds Part 3, Journeyman's Certificate Technical Level **excluding MCAST and ITS - MQF/EQF 4**
- ₁₁ National/Extended/Advanced Vocational Diploma - **MQF/EQF 4**
- ₁₂ Diploma/ International General Diploma/ Certificate - **MQF/EQF 4**
- ₁₃ Undergraduate Diploma **(less than 2 years) MQF/EQF 5**
- ₁₄ Undergraduate Diploma/ HND **(2 years or more) - MQF/EQF 5**
- ₁₅ Bachelors level Degree or equivalent - **MQF/EQF 6**
- ₁₆ Masters Level Degree or equivalent, Post-Graduate Degree, Long first degrees **MQF/EQF 7**
- ₁₇ Doctoral Degree (PhD) - **MQF/EQF 8**
- ₁₈ Other (Specify)

- ₁ No schooling or Pre-primary level
- ₂ Primary level, Special schools or Resource Centres
- ₃ Secondary level, City and Guilds Basic/Part 1 - **MQF/EQF 2**
- ₄ SSC&P/SEC/GCE/'O'-levels, Vocational Course with **1 subject only - MQF/EQF 2**
- ₅ SSC&P/SEC/GCE/'O'-levels, Vocational Course with **2 subjects or more - MQF/EQF 3**
- ₆ Introductory or Basic Skills Certificate/Award **MQF/EQF 1 or 2**
- ₇ Foundation Certificate **MQF/EQF 2**
- ₈ First Diploma/Certificate **MQF/EQF 3**
- ₉ Intermediates, 'A'-levels, Matriculation Certificate, QSI, IB/EB Diploma, Liceo Scientifico/Classico **MQF/EQF 4**
- ₁₀ Trade Schools qualifications **Pre-2000** or City and Guilds Part 3, Journeyman's Certificate Technical Level **excluding MCAST and ITS - MQF/EQF 4**
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- ₁₂ Diploma/ International General Diploma/ Certificate - **MQF/EQF 4**
- ₁₃ Undergraduate Diploma **(less than 2 years) MQF/EQF 5**
- ₁₄ Undergraduate Diploma/ HND **(2 years or more) - MQF/EQF 5**
- ₁₅ Bachelors level Degree or equivalent - **MQF/EQF 6**
- ₁₆ Masters Level Degree or equivalent, Post-Graduate Degree, Long first degrees **MQF/EQF 7**
- ₁₇ Doctoral Degree (PhD) - **MQF/EQF 8**
- ₁₈ Other (Specify)

- ₁ No schooling or Pre-primary level
- ₂ Primary level, Special schools or Resource Centres
- ₃ Secondary level, City and Guilds Basic/Part 1 - **MQF/EQF 2**
- ₄ SSC&P/SEC/GCE/'O'-levels, Vocational Course with **1 subject only - MQF/EQF 2**
- ₅ SSC&P/SEC/GCE/'O'-levels, Vocational Course with **2 subjects or more - MQF/EQF 3**
- ₆ Introductory or Basic Skills Certificate/Award **MQF/EQF 1 or 2**
- ₇ Foundation Certificate **MQF/EQF 2**
- ₈ First Diploma/Certificate **MQF/EQF 3**
- ₉ Intermediates, 'A'-levels, Matriculation Certificate, QSI, IB/EB Diploma, Liceo Scientifico/Classico **MQF/EQF 4**
- ₁₀ Trade Schools qualifications **Pre-2000** or City and Guilds Part 3, Journeyman's Certificate Technical Level **excluding MCAST and ITS - MQF/EQF 4**
- ₁₁ National/Extended/Advanced Vocational Diploma - **MQF/EQF 4**
- ₁₂ Diploma/ International General Diploma/ Certificate - **MQF/EQF 4**
- ₁₃ Undergraduate Diploma **(less than 2 years) MQF/EQF 5**
- ₁₄ Undergraduate Diploma/ HND **(2 years or more) - MQF/EQF 5**
- ₁₅ Bachelors level Degree or equivalent - **MQF/EQF 6**
- ₁₆ Masters Level Degree or equivalent, Post-Graduate Degree, Long first degrees **MQF/EQF 7**
- ₁₇ Doctoral Degree (PhD) - **MQF/EQF 8**
- ₁₈ Other (Specify)

30 What was your labour status between 15 and 21 November 2021?
 (Mark one circle only)

Employees, self-employed, unpaid family workers, paid apprenticeship or traineeship should be included with **Employed**.

- ₁ Employed
 - ₂ Unemployed
 - ₃ Student and/or person having an unpaid working experience
 - ₄ Retired
 - ₅ Cannot work due to illness or disability
 - ₆ Taking care of the house and/or family
 - ₇ Other (Specify) ↴
-

- ₁ Employed
 - ₂ Unemployed
 - ₃ Student and/or person having an unpaid working experience
 - ₄ Retired
 - ₅ Cannot work due to illness or disability
 - ₆ Taking care of the house and/or family
 - ₇ Other (Specify) ↴
-

- ₁ Employed
 - ₂ Unemployed
 - ₃ Student and/or person having an unpaid working experience
 - ₄ Retired
 - ₅ Cannot work due to illness or disability
 - ₆ Taking care of the house and/or family
 - ₇ Other (Specify) ↴
-

- ₁ Employed
 - ₂ Unemployed
 - ₃ Student and/or person having an unpaid working experience
 - ₄ Retired
 - ₅ Cannot work due to illness or disability
 - ₆ Taking care of the house and/or family
 - ₇ Other (Specify) ↴
-

- ₁ Employed
 - ₂ Unemployed
 - ₃ Student and/or person having an unpaid working experience
 - ₄ Retired
 - ₅ Cannot work due to illness or disability
 - ₆ Taking care of the house and/or family
 - ₇ Other (Specify) ↴
-

31 Did you work for at least one (1) hour for monetary compensation (salary) or compensation in kind, or for profit between 15 and 21 November 2021?
 (Mark one circle only)

- If you are employed but were on holiday, sick leave, receiving education or training, maternity or paternity leave during this week, please mark **Yes**. Unpaid family workers should be included with those who answer **Yes**.
- If you were taking care of the house and/or family, please mark **No**.

- ₁ Yes → GO TO 36
- ₂ No

- ₁ Yes → GO TO 36
- ₂ No

- ₁ Yes → GO TO 36
- ₂ No

- ₁ Yes → GO TO 36
- ₂ No

- ₁ Yes → GO TO 36
- ₂ No

32 What is the reason for not working between 15 and 21 November 2021?
 (Mark one circle only)

- If you do not work but take care of the house and/or family, are a pensioner, student, unemployed, etc., please mark **Do not have job**.
- If you were absent from work due to illness, leave, training, suspension, etc., please mark **Temporarily absent from work**.

- ₁ Do not have job
- ₂ Will start a new job after 21st November 2021
↳ GO TO 35
- ₃ Temporarily absent from work
↳ GO TO 36

- ₁ Do not have job
- ₂ Will start a new job after 21st November 2021
↳ GO TO 35
- ₃ Temporarily absent from work
↳ GO TO 36

- ₁ Do not have job
- ₂ Will start a new job after 21st November 2021
↳ GO TO 35
- ₃ Temporarily absent from work
↳ GO TO 36

- ₁ Do not have job
- ₂ Will start a new job after 21st November 2021
↳ GO TO 35
- ₃ Temporarily absent from work
↳ GO TO 36

- ₁ Do not have job
- ₂ Will start a new job after 21st November 2021
↳ GO TO 35
- ₃ Temporarily absent from work
↳ GO TO 36

33 Have you been seeking employment during the last four (4) weeks?
 (Mark one circle only)

- ₁ Yes
- ₂ No → GO TO 35

- ₁ Yes
- ₂ No → GO TO 35

- ₁ Yes
- ₂ No → GO TO 35

- ₁ Yes
- ₂ No → GO TO 35

- ₁ Yes
- ₂ No → GO TO 35

34 If work becomes available, would you be ready to start working within the next two (2) weeks?
 (Mark one circle only)

- ₁ Yes
- ₂ No

- ₁ Yes
- ₂ No

- ₁ Yes
- ₂ No

- ₁ Yes
- ₂ No

- ₁ Yes
- ₂ No

35 Have you ever worked for monetary compensation (salary) or compensation in kind, or for profit, for a period of at least three (3) months?
 (Mark one circle only)

- ₁ Yes → Go to Dwelling section - Page 22
- ₂ No → Go to Dwelling section - Page 22

- ₁ Yes → STOP 🛑
- ₂ No → STOP 🛑

- ₁ Yes → STOP 🛑
- ₂ No → STOP 🛑

- ₁ Yes → STOP 🛑
- ₂ No → STOP 🛑

- ₁ Yes → STOP 🛑
- ₂ No → STOP 🛑



PERSON 2

PERSON 3

PERSON 4

PERSON 5

Always write in CAPITALS.
Write in black or blue ink,
DO NOT use pencil.

Always write in CAPITALS.
Write in black or blue ink,
DO NOT use pencil.

Always write in CAPITALS.
Write in black or blue ink,
DO NOT use pencil.

Always write in CAPITALS.
Write in black or blue ink,
DO NOT use pencil.

36 What is your status in employment in your current main job?

(Mark one circle only)

- Employee
- Self-employed (with employees)
- Self-employed (without employees)
- Unpaid family worker
- Other (Specify) ↴

- Employee
- Self-employed (with employees)
- Self-employed (without employees)
- Unpaid family worker
- Other (Specify) ↴

- Employee
- Self-employed (with employees)
- Self-employed (without employees)
- Unpaid family worker
- Other (Specify) ↴

- Employee
- Self-employed (with employees)
- Self-employed (without employees)
- Unpaid family worker
- Other (Specify) ↴

- Employee
- Self-employed (with employees)
- Self-employed (without employees)
- Unpaid family worker
- Other (Specify) ↴

37 Insert your current main job title

E.g. Primary teacher, carpenter, clerk, etc.

38 Describe your current main job

E.g. Teaching in a primary school, making furniture, work in an office, etc.

39 State the name of the place of work of your current main job

(Mark one circle only)

Please provide full name of company or place of work (do not use abbreviations).

- Specify company name ↴

- No name

- Specify company name ↴

- No name

- Specify company name ↴

- No name

- Specify company name ↴

- No name

- Specify company name ↴

- No name

40 What does the organisation you work for in your current main job mainly do?

E.g. Primary school, manufacturing of kitchens, accountancy firm, etc.

41 State the locality of the place of work of your current main job

(Mark one circle only)

- Specify the locality of the fixed address where you report to work.
- If you do not report daily to a fixed address, you should mark **No fixed place of work**.
- If you work **both from home and from the office**, indicate the place where you **mostly work at**.

- Specify locality ↴

- Work from home
- No fixed place of work
- Work abroad

- Specify locality ↴

- Work from home
- No fixed place of work
- Work abroad

- Specify locality ↴

- Work from home
- No fixed place of work
- Work abroad

- Specify locality ↴

- Work from home
- No fixed place of work
- Work abroad

- Specify locality ↴

- Work from home
- No fixed place of work
- Work abroad



DWELLING

SECTION

1 What type of dwelling do you live in?

(Mark one circle only)

- ₁ Terraced house/Townhouse
₂ Semi/Fully-detached house (including villa, bungalow, converted farmhouse, etc.)
₃ Maisonette/Ground floor tenement
₄ Flat/Apartment/Penthouse
₅ Suite of rooms forming part of a housing unit
₆ Semi/Fully-detached farmhouse (unconverted)
₇ Garage
₈ Other (Specify) ↓

- ₉ I am homeless → STOP 🛑

2 How many dwellings are there in your building?

(Mark one circle only)

Include all dwellings found in the same building.

E.g. In case of a terraced house or semi-detached residence, one should mark '1'. In case of a maisonette and two (2) flats in the same building, one should mark '3 to 9'.

- ₁ 1
₂ 2
₃ 3 - 9
₄ 10 or more

3 In which period was the dwelling constructed?

(Mark one circle only)

In case the dwelling has undergone **major reconstruction** (including but not limited to building of walls and rooms) since it was originally built, then the period of the latest reconstruction must be chosen.

- ₁ 1918 or earlier
₂ 1919-1945
₃ 1946-1960
₄ 1961-1980
₅ 1981-2000
₆ 2001-2010
₇ 2011-2015
₈ 2016 or later

4 What is the state of repair of this dwelling?

(Mark one circle only)

- ₁ Good state
₂ Needs minor repairs
₃ Needs moderate repairs
₄ Needs serious repairs
₅ Dilapidated (cannot be repaired)

5 How many rooms does this dwelling consist of (excluding rooms used for business purposes)?

- **Include** normal bedrooms, dining rooms, living rooms, habitable rooms in cellar/basement, kitchens, study rooms.
- **Do not include** kitchenettes, verandas, corridors, washrooms, bathrooms, boxrooms, garages, cellars, and halls.
- **Combined/open plan** rooms should be **counted separately** as two (2) or three (3) rooms accordingly.

6 Apart from these rooms, are there any rooms that are used solely for business purposes?

(Mark all that apply)

- ₁ Yes, rented out to non-dwelling members, including tourists (Specify number of rooms) →
- ₂ Yes, other business purposes (Specify number of rooms) →
- ₃ No

7 Is this dwelling ...? (Mark one circle only)

- ₁ Owned freehold → GO TO 11
- ₂ Owned with ground rent

Specify amount of ground rent paid annually ↓

€

- ₃ Rented unfurnished

Specify amount of rent paid annually ↓

€

Number of persons this rent covers

- ₄ Rented furnished

Specify amount of rent paid annually ↓

€

Number of persons this rent covers

- ₅ Held by emphyteusis (notarial contract)

Specify amount of emphyteusis paid annually ↓

€

- ₆ Used free of charge → GO TO 11

8 To whom do you pay the rent or emphyteusis?

(Mark one circle only)

- ₁ Government
₂ Private landlord
₃ Church

9 Indicate the period when the rental/emphyteusis contract/agreement was signed/reached

(Mark one circle only)

- ₁ 1945 or earlier
₂ 1946-1995
₃ 1996-2005
₄ 2006-2015
₅ 2016 or later
₆ Do not have a fixed contract → GO TO 11

10 Indicate the length of the rental/emphyteusis contract/agreement

(Mark one circle only)

Total duration of contract/agreement needs to be provided and **not** the remainder of the contract.

- ₁ Less than a year
₂ 1 year or more but less than 2 years
₃ 2 years or more but less than 3 years
₄ 3 years or more

11 Which of the following facilities are available in this dwelling?

(Mark all that apply)

- ₁ Air conditioning
₂ Central heating (fixed installations)
₃ Photovoltaic (PV) panels
₄ Solar water heater
₅ Well
₆ Water reverse osmosis system
₇ Internet connection (excl. mobile internet)

12 Does any dwelling member own another dwelling which is used for at least one (1) month annually (not for business purposes)?

(Mark one circle only)

- ₁ Yes
₂ No → STOP 🛑

13 In which locality or country (if abroad) is this dwelling situated?

(Mark all that apply)

- ₁ Birkirkara
₂ Birżebbuġa
₃ Hal Qormi
₄ Marsaskala (including St. Thomas Bay, etc)
₅ Mellieħa (including Għadira and Armier, etc)
₆ Mosta
₇ Naxxar (including Baħar iċ-Ċagħaq and Salina, etc)
₈ St. Julian's (including Paceville, etc)
₉ St. Paul's Bay (including Buġibba, Qawra and Xemxija, etc)
₁₀ Tas-Sliema
₁₁ Xgħajra
₁₂ Żebbuġ, Gozo (including Marsalforn, etc)
₁₃ Another locality/country (Specify) ↓

