

APPENDIX III. QUESTIONNAIRE AND FLASH CARDS

O M B No. 68-R1600, Approval Expires March 31, 1974

| NOTICE - All information which would permit identification of the individual will be held in strict confidence, will be used only by persons engaged in and for the purposes of the survey, and will not be disclosed or released to others for any purposes | | | | 1. Book _____ of _____ books | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------------------|--------------|---|--|--|------|----------------|-------------|---------------------|--|--------------|--------------|--|--|--------------|--------------|--|--|--------------|--------------|--|--|--------------|--------------|--|--|--------------|--------------|--|--|--------------|--------------|--|--|--------------|--------------|--|
| FORM HIS-1 (1973) U.S. DEPARTMENT OF COMMERCE SOCIAL AND ECONOMIC STATISTICS ADMINISTRATION BUREAU OF THE CENSUS ACTING AS COLLECTING AGENCY FOR THE U.S. PUBLIC HEALTH SERVICE U.S. HEALTH INTERVIEW SURVEY | 2. D C C number | 3. Sample | 4. Segment type Area Permit Address Special place | 5. Control number <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border-right: 1px solid black;">PSU</td> <td style="width: 33%; border-right: 1px solid black;">Segment</td> <td style="width: 33%;">Serial</td> </tr> </table> | | | PSU | Segment | Serial | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PSU | Segment | Serial | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6a. What is your exact address? (Include House No., Apt. No., or other identification and ZIP code) | | | | Listing Sheet No. _____ Sheet No. _____ Line No. _____ | 18. Noninterview reason TYPE A 1. Refusal - Describe in a footnote 2. No one at home - repeated calls 3. Temporarily absent 4. Other - Specify _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City _____ State _____ ZIP code _____ | | | | TYPE B 1. Vacant - nonseasonal 2. Vacant - seasonal 3. Usual residence elsewhere 4. Armed Forces 5. Other - Specify _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. What is your mailing address and ZIP code? Same as 6a | | | | TYPE C 1. Unused line of listing sheet 2. Demolished 3. Merged 4. Outside segment 5. Built after April 1, 1970 6. Other - Specify _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City _____ State _____ ZIP code _____ | | | | 19. Record of calls <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th>Date</th> <th>Beginning time</th> <th>Ending time</th> <th>Comp</th> </tr> </thead> <tbody> <tr><td> </td><td>a.m. p.m.</td><td>a.m. p.m.</td><td> </td></tr> <tr><td> </td><td>a.m. p.m.</td><td>a.m. p.m.</td><td> </td></tr> <tr><td> </td><td>a.m. p.m.</td><td>a.m. p.m.</td><td> </td></tr> <tr><td> </td><td>a.m. p.m.</td><td>a.m. p.m.</td><td> </td></tr> <tr><td> </td><td>a.m. p.m.</td><td>a.m. p.m.</td><td> </td></tr> <tr><td> </td><td>a.m. p.m.</td><td>a.m. p.m.</td><td> </td></tr> <tr><td> </td><td>a.m. p.m.</td><td>a.m. p.m.</td><td> </td></tr> </tbody> </table> | | Date | Beginning time | Ending time | Comp | | a.m. p.m. | a.m. p.m. | | | a.m. p.m. | a.m. p.m. | | | a.m. p.m. | a.m. p.m. | | | a.m. p.m. | a.m. p.m. | | | a.m. p.m. | a.m. p.m. | | | a.m. p.m. | a.m. p.m. | | | a.m. p.m. | a.m. p.m. | |
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| | a.m. p.m. | a.m. p.m. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| c. Special place name _____ Sample unit number _____ Type code _____ | | | | 20. List column numbers of family members requiring telephone or personal callbacks for Condition Supplements _____ NONE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. Year built Ask _____ Do NOT Ask _____ When was this structure originally built? Before 4-1-70 (Continue interview) After 4-1-70 (Go to Q. 9c, complete if required and end interview) | | | | 21. Record of additional personal calls <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th>Date</th> <th>Beginning time</th> <th>Ending time</th> <th>Col. Nos. completed</th> </tr> </thead> <tbody> <tr><td> </td><td>a.m. p.m.</td><td>a.m. p.m.</td><td> </td></tr> <tr><td> </td><td>a.m. p.m.</td><td>a.m. p.m.</td><td> </td></tr> <tr><td> </td><td>a.m. p.m.</td><td>a.m. p.m.</td><td> </td></tr> <tr><td> </td><td>a.m. p.m.</td><td>a.m. p.m.</td><td> </td></tr> </tbody> </table> | | Date | Beginning time | Ending time | Col. Nos. completed | | a.m. p.m. | a.m. p.m. | | | a.m. p.m. | a.m. p.m. | | | a.m. p.m. | a.m. p.m. | | | a.m. p.m. | a.m. p.m. | | | | | | | | | | | | | |
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| | a.m. p.m. | a.m. p.m. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | a.m. p.m. | a.m. p.m. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | a.m. p.m. | a.m. p.m. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8. Type of living quarters _____ 1. Housing unit 2. OTHER unit | | | | 22a. Number of telephone calls _____ b. Total telephone interview time _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9. Area segments ONLY a. Are there any occupied or vacant living quarters besides your own in this building? Y (fill Table X) N b. Are there any occupied or vacant living quarters besides your own on this floor? Y (fill Table X) N c. Is there any other building on this property for people to live in - either occupied or vacant? Y (fill Table X) N d. None | | | | GO TO PROBE PAGE 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10. Land use 2. RURAL 1. URBAN (13) --- Regular units and Special Place units coded 85-88 in 6c, go to Q. 11. --- Special Place units not coded 85-88 in 6c, go to Q. 13 | | | | 11. Do you own or rent this place? Owned Rented Rented for free | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12a. You told me your living quarters are (owned/rented/rented for free). Does the place you (own/rent/rented for free) have 10 acres or more? 1. Y (b) 2. N (c) | | | | 12b. During the past 12 months did sales of crops, livestock, and other farm products from this place amount to \$50 or more? 2. Y (13) 4. N (13) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12c. During the past 12 months did sales of crops, livestock, and other farm products from this place amount to \$250 or more? 3. Y 5. N | | | | 13. How many rooms are in this -- (Unit)? Count the kitchen but not the bathroom Total rooms _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14. How many bedrooms are in this -- (Unit)? If "None" describe in footnotes Number of bedrooms _____ | | | | 15. What is the telephone number here? Area code Number 16. Was this interview observed? 1. Y 2. N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17. Interviewer's name _____ Code _____ | | | | NOTE: Before leaving household, check that item 20 has an entry. Determine the best time for callbacks for Condition Supplements. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FOOTNOTES | | | | 22a. Number of telephone calls _____ b. Total telephone interview time _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| E | | If this questionnaire is for an extra unit, enter Control Number of original sample unit _____ | | | If in AREA SEGMENT, also enter for FIRST unit listed on property _____ | | LISTING SHEET | | |
|--|--|---|--|--|--|--|---------------|--|--|
| | | | | | | | Sheet number | Line number | |
| TABLE X - LIVING QUARTERS DETERMINATIONS AT LISTED ADDRESS | | | | | | | | | |
| Line No. | LOCATION OF UNIT | <ul style="list-style-type: none"> If listed, enter sheet and line number, STOP Table X, and continue interview for original sample unit. If unlisted, go to 4. | <ul style="list-style-type: none"> If outside AREA SEGMENT boundary; mark box below, STOP Table X, and go to Household Page, item 9, or Probe page, question 1 (as applicable). | Are these (specify location) quarters for more than one group of people? If "Yes," list one line for each group | USE OR CHARACTERISTICS | | | | CLASSIFICATION N - Not a separate unit - Add occupants to this questionnaire. (Complete a separate questionnaire if this unit is listed on a separate sheet.) HU } Separate unit - interview on a separate questionnaire OT } |
| | Where are these quarters located? Enter exact description of location, e.g., basement, 2nd floor, rear. | | | | OCCUPIED Do the occupants of these (specify location) quarters live and eat with any other group of people? | ALL QUARTERS Do these quarters in (specify location) have | | Direct access from the outside or through a common hall? | |
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | |
| 1 | | S ____ L ____ | <input type="checkbox"/> Outside segment boundary | Yes No | Yes - Go to 9 and circle N No | Yes No | Yes No | N HU OT | |
| 2 | | S ____ L ____ | <input type="checkbox"/> Outside segment boundary | Yes No | Yes - Go to 9 and circle N No | Yes No | Yes No | N HU OT | |
| 3 | | S ____ L ____ | <input type="checkbox"/> Outside segment boundary | Yes No | Yes - Go to 9 and circle N No | Yes No | Yes No | N HU OT | |

NOTE: Be sure to continue interview for original sample unit.

FOOTNOTES