

APPENDIX III. QUESTIONNAIRE AND FLASH CARDS

O.M.B. No. 68-R1600; Approval Expires March 31, 1976

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.

FORM HIS-1 (1975)
(2-4-75)

U.S. DEPARTMENT OF COMMERCE
SOCIAL AND ECONOMIC STATISTICS
ADMINISTRATION
BUREAU OF THE CENSUS
ACTING AS COLLECTING AGENT FOR THE
U.S. PUBLIC HEALTH SERVICE

U.S. HEALTH INTERVIEW SURVEY

1. Book _____ of _____ books

2. R.O. number 3. Sample 4. Segment type

Area
 Permit
 Address
 Cen-Sup
 Special place

5. Control number

PSU	Segment	Serial
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6a. What is your exact address? (Include House No., Apt. No., or other identification and ZIP code)

Listing Sheet
Sheet No. _____
Line No. _____

City _____ State _____ ZIP code _____

b. Is this your mailing address? Same as 6a
Mark box or specify if different. Include ZIP code.

City _____ State _____ ZIP code _____

c. Special place name _____ Sample unit number _____ Type code _____

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 9c, complete if required and end interview)

8. Type of living quarters → 1 Housing unit 2 OTHER unit

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 11.
— Special Place units not coded 85-88 in 6c, go to 13.

11. Do you own or rent this place? Own Rent Rent for free

12a. Does this place you (own/rent/rent for free) have 10 acres or more? 1 Y (12b) 2 N (12c)

b. During the past 12 months did sales of crops, livestock, and other farm products from this place amount to \$50 or more? 1 Y (13) 2 N (13)

c. During the past 12 months did sales of crops, livestock, and other farm products from this place amount to \$250 or more? 1 Y 2 N

13. How many rooms are in this ---? Rooms 14. How many bedrooms are in this ---? Bedrooms
Count the kitchen but not the bathroom. If "None" describe in footnotes.

15. What is the telephone number here? Area code/Number
2 None

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 sample persons.

FOOTNOTES

18. Noninterview reason

TYPE A

1 Refusal - Describe in a footnote } Fill Items 1-6a, 7-10, 12a-c as applicable, 16-19

2 No one at home - repeated calls

3 Temporarily absent - Footnote

4 Other (Specify) →

TYPE B

1 Vacant - nonseasonal } Fill Items 1-6a, 7-10, 12a-c as applicable, 16-19

2 Vacant - seasonal

3 Usual residence elsewhere

4 Armed Forces

5 Other (Specify) →

TYPE C

1 Unused line of listing sheet } Fill Items 1-6a, 6c if required, 9c if marked, 16-19

2 Demolished

3 Merged

4 Outside segment

5 Built after April 1, 1970

6 Other (Specify) →

19. Record of calls

Month	Date	Beginning time	Ending time	Comp.
1		a.m. p.m.	a.m. p.m.	
2		a.m. p.m.	a.m. p.m.	
3		a.m. p.m.	a.m. p.m.	
4		a.m. p.m.	a.m. p.m.	
5		a.m. p.m.	a.m. p.m.	
6		a.m. p.m.	a.m. p.m.	
7		a.m. p.m.	a.m. p.m.	
8		a.m. p.m.	a.m. p.m.	

20. List column numbers of sample persons requiring callbacks.

None

21. Record of telephone calls

Month	Date	Beginning time	Ending time	Col. Nos. completed
1		a.m. p.m.	a.m. p.m.	
2		a.m. p.m.	a.m. p.m.	
3		a.m. p.m.	a.m. p.m.	

22. Enter reason for noninterviews for sample persons.

1 Refusal (Specify) →

2 No one at home - repeated calls

3 Temporarily absent (Specify) →

4 Other (Specify) →

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," fill one line for each group.	USE OR CHARACTERISTICS				CLASSIFICATION N - Not a separate unit - Add occupants to this questionnaire. (Complete a separate questionnaire for each unrelated person or family group.) HU } Separate unit - OT } interview on a separate questionnaire.
	Where are these quarters located? Enter exact description or location, e.g., basement, 2nd floor, rear.				OCCUPIED	ALL QUARTERS		CLASSIFICATION	
(1)	(2)	(3)	(4)	(5)	Do the occupants of these (specify location) quarters live and eat with any other group of people?	Do these quarters in (specify location) have:	Direct access from the outside or through a common hall?	Complete kitchen facilities for this unit only?	(9)
1		S ____ L ____	<input type="checkbox"/> Outside segment boundary	Yes No	Yes - Go to 9 and circle N No	Yes 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	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	Yes No	N HU OT
NOTE: Be sure to continue interview for original sample unit.									
FOOTNOTES									