



Republic of North Macedonia  
State Statistical Office

LFS-D

Article 26 of the Law on State Statistics "Official Gazette of the Republic of Macedonia" No. 54/97, 21/07, 51/11, 104/13, 42/14, 192/15, 27/16, 83/18 and 220/18 and the Programme for Statistical Surveys 2018-2022, "Official Gazette of the Republic of Macedonia" No. 22/18 and 224/18.

Serial number of the household

## LABOUR FORCE SURVEY, 2020

### HOUSEHOLD QUESTIONNAIRE

All data comprising this form are personal data, protected with the Law on State Statistics and shall be used for statistical purposes only

#### Identification data (references)

Form code .....

Telephone number of the household .....

mobile phone .....

Reference number of the municipality .....

Settlement .....

Ordinal number of the enumeration district in the municipality .....

Region  Contingent  Stratum

Interview week .....

Quarter .....

Number of the interviewer

Visits to the household			Household is interviewed
date	month	year	1. Yes 2. No → 5

**1. Household data**

Person No:	Name, Father's name, Family name	Sex	Date of birth				Marital status	Relation-ship to the head of the household	Family relationship in the household			Flow	Citizenship (if answer is code 2 or 3, write the country on the line)	Were you born in Macedonia?	Where were you born?	Year since which you have been residing in the Republic of Macedonia	Presence in the household	Is the person aged from 15 to 79?
		1 - m 2 - f	day	month	year	other 6 digits of the registration number			1. Yes → 17 2. No	spouse / partner	father			mother				
1	2	3	4	5	6	6a	7	8	9	10	11	12	13	14	15	16	17	18
01		<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"/>
02		<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"/>
03		<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"/>
04		<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"/>
05		<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"/>
06		<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"/>
07		<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"/>
08		<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"/>
09		<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"/>
10		<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"/>
11		<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"/>
12		<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"/>
13		<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"/>
14		<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"/>
15		<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"/>

**Marital status**

- 0. Child up to 15 years
- 1. Not married
- 2. Married
- 3. Widow (er)
- 4. Divorced
- 5. Live together (not in legal marriage)

**Relationship to the head of the household**

- 1. Head of the household
- 2. Spouse, partner
- 3. Son, daughter / son, daughter of partner
- 4. Son-in-law, daughter-in-law
- 5. Father of head of the household
- 6. Mother of head of the household
- 7. Grandfather, grandmother
- 8. Brother, sister
- 9. Other relationship
- 10. There is no relationship

**Family relationship in the household**

Write the ordinal number of the person from the first column (ordinal number of the person)

**Flow of interviewing**

- 1. First time
- 2. Continue
- 3. Not in household
- 4. Return in household
- 5. Refuse
- 6. Deceased

**Citizenship**

- 1. Republic of Macedonia
- 2. Dual (Republic of Macedonia and other country)
- 3. Other country
- 4. Without citizenship

**How long have you been a resident of this country**

Answered only by persons who answered the citizenship question with code 2 (and were born abroad) or code 3

**Presence in the household**

- 1. Present, permanent residence/dwelling
- 2. Present, temporary residence/dwelling
- 3. Temporarily absent in other city in the Republic of Macedonia up to six months
- 4. Temporarily absent in other city in the Republic of Macedonia more than six months
- 5. Absent abroad up to 1 year

**After completing the individual questionnaires (Form B) on all persons aged 15 years or more, you should continue in Form A with questions 2, 3 and 4.**

2.	<b>Which income group does the monthly net income of your household belong to?</b> 1. up to 5000 denars 2. 5001 - 7000 3. 7001 - 9000 4. 9001 - 11000 5. 11001 - 14000 6. 14001 - 18000 7. 18001 - 22000 8. 22001 - 26000 9. 26001 - 30000 10. 30001 - 34000 11. 34001 - 38000 12. 38001 - 44000 13. 44001 - 50000 14. more than 50000	<input type="text"/>
3.	<b>How do you consider the financial situation of your household?</b> 1. very good 2. mainly good 3. mainly bad 4. bad	<input type="text"/>
4a.	<b>Do you accept to be interviewed again?</b> 1. Yes                      2. No	<input type="text"/>
4b	<b>Do you accept to be telephone interviewed?</b> 1. Yes                      2. No                      3. Without telephone	<input type="text"/>

**NON RESPONSE**

5.	The reasons for non response	
	Indicated address does not exist ----- Dwelling is empty ----- Dwelling is demolisheed ----- Dwelling is used for business purposes ----- Household refuses interview - <i>Do not have time</i> ----- - <i>The head of household is absent</i> ----- - <i>Do not want to be interviewed in any Survey</i> ----- - <i>Do not want to participate in this Survey</i> ----- - <i>Too long participating in this Survey</i> ----- - <i>Other reasons</i> ----- Household of older persons ----- Household is abroad 1 year and longer ----- Household is absent in the week of interview ----- Other _____	01 02 03 04 05 06 07 08 09 10 11 12 13 14

Interviewer:

\_\_\_\_\_  
(name and surname)

Interview completed in    minutes

Supervisor:

\_\_\_\_\_  
(name and surname)