

Questionnaire number							

Part 1. GENERAL INFORMATION

00	Voivodship code						
01	Regional Statistical Office code						
02	Dwelling identifier IDM						
03	Within dwelling household number						
04	Number of person in the household						
05	Relationship to the household head						
06	Sex						
07	Year of birth						
08	Marital status code						
09	Survey round number						
10	Sample number						

Part 2. ECONOMIC ACTIVITY AND MAIN JOB

12	Did you do any work generating earnings or income, or assisted without pay in family economic activity for at least one hour during the reference week from Monday [date] to Sunday [date]?					1 >>14 2 >>13
	<input type="checkbox"/> yes <input type="checkbox"/> no					

13	Were you not working but had a job or business from which you were absent during the reference week?					1 >>17 2 >>59
	<input type="checkbox"/> yes <input type="checkbox"/> no					

14	How many hours did you work in the main job in the reference week? (actual number of hours)					>>15
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Note:

If in the reference week respondent stayed on maternity, parental or child-care leave and simultaneously worked in another job, as the main job should be indicated the job from which the respondent obtained maternity, parental or child-care leave; and code "0" should be marked in question 14

15	How many hours a week do you usually work in the main job?					>>16 or >>22A
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Note:

If in the reference week respondent worked:

- longer than usually question >>16.1
- shorter than usually question >>16.2
- the usual duration question >>22A

If respondent did not work in the main job in the reference week >> question 16.2

16.1	Why did you work longer than usually in the reference week?					1 2 3 >>22A
	<input type="checkbox"/> the number of working hours varies (flexible working time) <input type="checkbox"/> I worked overtime hours <input type="checkbox"/> other reasons					

16.2	Why did you work fewer hours than usually in the reference week?		
	<input type="checkbox"/> For reasons related to the establishment (break in establishment activity, production stoppage, enforced leave, lack of orders, etc.)	1	
	<input type="checkbox"/> I stopped working	2	
	<input type="checkbox"/> I started a job	3	
	<input type="checkbox"/> I participated in a strike (labour dispute)	4	
	<input type="checkbox"/> I participate in education, improve my qualifications	5	
	<input type="checkbox"/> Bad weather conditions	6	
	<input type="checkbox"/> Vacation	7	
	<input type="checkbox"/> Special leave for personal or family reasons	8	>>22A
	<input type="checkbox"/> Maternity leave	9	
	<input type="checkbox"/> Parental leave	10	
	<input type="checkbox"/> Child care leave	11	
	<input type="checkbox"/> Own illness	12	
	<input type="checkbox"/> The number of working hours varies (flexible working time)	13	
	<input type="checkbox"/> Holidays, celebrations	14	
	<input type="checkbox"/> Other reasons, specify	15	

17	Why were you absent from work in the reference week?		
	<input type="checkbox"/> my own illness	1	>>22
	<input type="checkbox"/> maternity leave	2	>>22
	<input type="checkbox"/> parental leave	3	>>22
	<input type="checkbox"/> vacation	4	>>22
	<input type="checkbox"/> child care leave	5	>>18
	<input type="checkbox"/> break in the establishment's activity	6	>>18
	<input type="checkbox"/> bad weather	7	>>18
	<input type="checkbox"/> I participated in a strike (labour dispute)	8	>>18
	<input type="checkbox"/> system of work	9	>>18
	<input type="checkbox"/> education, improving qualification	10	>>18
	<input type="checkbox"/> unpaid leave	11	>>18
	<input type="checkbox"/> other reasons, specify	12	>>18

18	Do you expect to return to the current job after a break? (break measured from the moment of stopping work to the moment of expected return to work)		
	<input type="checkbox"/> yes, within 3 months or less	1	>>22
	<input type="checkbox"/> yes, in over 3 months	2	>>19
	<input type="checkbox"/> no	3	>>19

19	What is your employment status in your current job:		
	<input type="checkbox"/> self-employed	1	>>60
	<input type="checkbox"/> an employee	2	>>20
	<input type="checkbox"/> an unpaid family worker	3	>>60

20	How long have you been absent from work? (measured from the moment of stopping work to the end of reference week)		
	<input type="checkbox"/> 3 months or less	1	
	<input type="checkbox"/> over 3 months	2	>>21

21	Have you been receiving at least 50% of your hitherto net earnings during your absence from work?		
	<input type="checkbox"/> yes	1	>>24B
	<input type="checkbox"/> no	2	>>60

22	How many hours a week do you usually work in your main job?		>>22A
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22A	When did you start working in your present job? Please state year and month	YEAR	MONTH		>>23

23	Were you working in the reference week as:		
	<input type="checkbox"/> self-employed	1	>>24
	<input type="checkbox"/> an employee	2	>>26
	<input type="checkbox"/> an unpaid family worker	3	>>38

24	Did you employ any employees in the reference week?		
	<input type="checkbox"/> yes	1	>>38
	<input type="checkbox"/> no	2	>>24A

24A	Do you work permanently for one client (customer)?		
	<input type="checkbox"/> yes, I work only for one client (customer)	1	
	<input type="checkbox"/> yes, I work mostly for one client (customer)	2	>>38
	<input type="checkbox"/> no	3	

24B	When did you start working in your present job? <i>Please state year and month</i>	YEAR	MONTH		>>25
25	How many hours a week do you usually work in your main job?				>>26
26	Is the institution (company) of your main job: <input type="checkbox"/> public <input type="checkbox"/> private			1	>>27
				2	
27	Is your main job? <input type="checkbox"/> permanent, for unlimited duration <input type="checkbox"/> for limited duration, because it is a period of training, apprenticeship, traineeship <input type="checkbox"/> for limited duration, because I cannot find a permanent job <input type="checkbox"/> for limited duration, because it is convenient for me <input type="checkbox"/> for limited duration, because it is a probationary period			1	>>30
				2	>>27A
				3	>>28
				4	>>28
				5	>>28
27A	Does the apprenticeship/traineeship that you are participating in constitute an obligatory part of curriculum carried out within the formal system of education? <input type="checkbox"/> yes <input type="checkbox"/> no			1	
				2	>>28
28	What is the duration of your limited employment? <input type="checkbox"/> less than one month <input type="checkbox"/> 1-3 months <input type="checkbox"/> 4-6 months <input type="checkbox"/> 7-12 months <input type="checkbox"/> 13-18 months <input type="checkbox"/> 19-24 months <input type="checkbox"/> 25-36 months <input type="checkbox"/> more than 36 months			1	
				2	
				3	
				4	
				5	>29
				6	
				7	
				8	
29	Do you work on the basis of a contract with a temporary work agency? <input type="checkbox"/> yes <input type="checkbox"/> no			1	>>30
				2	
30	Was the Powiat Labour Office involved in finding your current main job? <input type="checkbox"/> yes <input type="checkbox"/> no			1	>>30A
				2	
30A	Do you have an employment contract signed in a written form? <input type="checkbox"/> yes <input type="checkbox"/> no			1	>>30B
				2	>>31
30B	Is the contract you signed: <input type="checkbox"/> employment contract <input type="checkbox"/> order-agreement contract <input type="checkbox"/> contract for performing specific task/work <input type="checkbox"/> management contract <input type="checkbox"/> contract in a mixed form (simultaneously concluding employment contract with the employer and, e.g. order agreement contract) <input type="checkbox"/> other civil-law contract			1	
				2	
				3	
				4	
				5	>31
				6	
31	Do you do shift work in your main job? <input type="checkbox"/> yes <input type="checkbox"/> no			1	>>32
				2	
32	Do you supervise work of other people? <input type="checkbox"/> yes <input type="checkbox"/> no			1	>>33
				2	
33	Did you work paid overtime hours in the reference week? <i>(including possibility to reclaim hours)</i> <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> not applicable (<i>person did not work in the main job in the reference week</i>)			1	>>34
				2	>>35
				3	>>37
34	Please specify the number of paid overtime hours you worked in the reference week?				>>35

35	Did you work unpaid overtime hours in the reference week? <input type="checkbox"/> yes <input type="checkbox"/> no		1 2	>>36 >>37				
36	Please specify the number of unpaid overtime hours you worked in the reference week:			>>37				
37	Please, specify the amount of your net earnings in the main job for the last month:	<table border="1"> <tr> <td>net</td> <td>gross</td> </tr> <tr> <td></td> <td></td> </tr> </table>	net	gross				>>38
net	gross							
	including: payment for overtime, bonuses, prizes, premiums (recalculated per 1 month, e.g. 1/3 of quarterly premium, 1/12 the so-called „thirteenth salary”, etc.)							
38	What is the kind of activity of the institution (company) of your main job?		NACE	>>38A				
38A	Is the institution (company) in which you are employed located in the same gmina as your place of residence? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> I don't know		1 2 3	>>42 >>39 >>39				
39	Where is the institution (company) of your main job situated? <input type="checkbox"/> in Poland <input type="checkbox"/> abroad		1 2	>40 >41				
40	What is the voivodship where the institution (company) of job is situated? <i>Name of voivodship</i>			>42				
41	What is the country and region where the institution (company) of your job is situated? <input type="checkbox"/> Name of the country <input type="checkbox"/> Name of the region			>>42				
42	How many persons are employed in your institution (company): If the number of employed persons is it <input type="checkbox"/> 1-10 (please specify the exact number) <input type="checkbox"/> 11 –19 <input type="checkbox"/> 20 – 49 <input type="checkbox"/> 50 – 100 <input type="checkbox"/> 101 – 250 <input type="checkbox"/> 251 or more <input type="checkbox"/> I don't know, but fewer than 11 <input type="checkbox"/> I don't know, but more than 10			11 12 13 14 15 16 17 >>43				
43	In what time frame do you work: <input type="checkbox"/> full-time <input type="checkbox"/> part-time		1 2	>>46 >>44				
44	Why do you work part-time? <input type="checkbox"/> I study at school, attend a course <input type="checkbox"/> because of illness, disability <input type="checkbox"/> I cannot find a full-time job <input type="checkbox"/> I want to work part-time <input type="checkbox"/> I look after children or other persons requiring care <input type="checkbox"/> other personal or family reasons <input type="checkbox"/> other reasons		1 2 3 4 5 6 7	>>46 >>46 >>46 >>46 >>45 >>46 >>46				
45	Did you choose to work part-time because respective care providing institutions, in case of:	A. children			B. other persons			
		yes	no	not applicable	yes	no	not applicable	
	a) are not available because of location	1	2	3	1	2	3	
	b) are not available because of financial reasons	1	2	3	1	2	3	>>46
	c) are of inadequate quality	1	2	3	1	2	3	

46	Would you like to work longer than at present assuming that longer working hours stipulate higher earnings?		
	<input type="checkbox"/> no	1	>>48
	<input type="checkbox"/> yes, by taking an additional job	2	
	<input type="checkbox"/> yes, by taking a job with longer hours	3	>>47
	<input type="checkbox"/> yes, but only within a present job	4	
	<input type="checkbox"/> yes, in any way	5	

47	Could you take a job (another or additional) in the two weeks following the reference week?		
	<input type="checkbox"/> Yes	1	
	<input type="checkbox"/> No, because I have to complete education, training	2	
	<input type="checkbox"/> No, because I can't leave the present job so soon	3	>>48
	<input type="checkbox"/> No, because of family, personal reasons	4	
	<input type="checkbox"/> No, because of illness	5	
	<input type="checkbox"/> No, because of other reasons	6	

48	How many hours a week would you like to work in total? (in the main job and all additional jobs)		>>49
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49	Did you work during the previous four weeks, including the reference week as the last:	<i>usually</i>	<i>sometimes</i>	<i>not</i>	
	a) at home?	1	2	3	>>50
	c) in the evenings?	1	2	3	
	d) at night?	1	2	3	
	e) on Saturdays?	1	2	3	
	f) on Sundays?	1	2	3	

50	What was your occupation in the reference week?		>>51
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51	Please, do asses to what extent the main job you perform at present is compatible with your educational attainment?		
	<input type="checkbox"/> work is fully compatible	1	
	<input type="checkbox"/> work is compatible to a large extent	2	
	<input type="checkbox"/> work is partially compatible	3	>>52
	<input type="checkbox"/> work is incompatible to a large extent	4	
	<input type="checkbox"/> work is entirely incompatible	5	

52	What is the total duration of your work (work seniority)? <i>(Please specify the number rounded-off to a full year).</i>		>>53
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Part 3. ADDITIONAL JOB

53	Do you have any additional jobs beside your main one?		
	<input type="checkbox"/> yes	1	>>54
	<input type="checkbox"/> no	2	>>69

54	How many hours did you work in the reference week in all additional jobs? <i>(actual number of hours)</i>		>>55
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Notice: questions between 55 and 58 concern only one, the most important additional job.

55	Did you work in your additional job as:		
	<input type="checkbox"/> self-employed	1	>>56
	<input type="checkbox"/> an employee	2	>>57
	<input type="checkbox"/> an unpaid family worker	3	>>57

56	Did you employ any employees in your additional job in the reference week?		
	<input type="checkbox"/> yes	1	>>57
	<input type="checkbox"/> no	2	>>56A

56A	Do you work constantly for one client (customer)?		
	<input type="checkbox"/> yes, I work only for one client (customer)	1	
	<input type="checkbox"/> yes, I work mainly for one client (customer)	2	>>57
	<input type="checkbox"/> no	3	

57	What is the kind of activity of the institution (company) of your additional job?	NACE	>58
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58	Is your additional job? <input type="checkbox"/> permanent, for unlimited duration <input type="checkbox"/> for limited duration	1	>>69
		2	

Part 4. PREVIOUS OCCUPATIONAL EXPERIENCE

59	Have you ever performed any work generating earnings or income or assisted without pay in family-owned business? <input type="checkbox"/> yes <input type="checkbox"/> no	1	>>60 >>71
		2	

60	When did you stop working? <i>Please specify year and month</i> <input type="checkbox"/> year <input type="checkbox"/> month		>>61

61	Why did you stop working? <input type="checkbox"/> I retired <input type="checkbox"/> I left into early retirement <input type="checkbox"/> I was granted a disability pension <input type="checkbox"/> I lost my job due to liquidation of the establishment (bankruptcy or reorganisation) or due to liquidation of my position <input type="checkbox"/> I was dismissed for other reasons <input type="checkbox"/> unsatisfactory financial conditions <input type="checkbox"/> unsatisfactory work conditions other than financial <input type="checkbox"/> I finished a temporary, seasonal job <input type="checkbox"/> I look after children <input type="checkbox"/> I look after other persons requiring care <input type="checkbox"/> for other personal, family reasons <input type="checkbox"/> due to illness, disability <input type="checkbox"/> I started education, training <input type="checkbox"/> I started military service <input type="checkbox"/> for other reasons, specify	1	>>62
		2	
		3	
		4	
		5	
		6	
		7	
		8	
		9	
		10	
		11	
		12	
		13	
		14	
		15	

Notice: If a person finished work in 2010 or earlier go to question 71

62	Did you work in your last job as: <input type="checkbox"/> self-employed <input type="checkbox"/> an employee <input type="checkbox"/> an unpaid family worker	1	>>63 >>64 >>65
		2	
		3	

63	Did you employ any employees in your last job? <input type="checkbox"/> yes <input type="checkbox"/> no	1	>>65 >>63A
		2	

63A	Did you work constantly for one client (customer)? <input type="checkbox"/> Yes, I worked only for one client (customer) <input type="checkbox"/> Yes, I worked mainly for one client (customer) <input type="checkbox"/> no	1	>>65
		2	
		3	

64	Was the institution (company) of your last job: <input type="checkbox"/> public <input type="checkbox"/> private	1	>>65
		2	

65	What is the kind of activity of the institution (company) of your last job?	NACE	>>66
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66	What was your occupation in your last job?		>>67
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67	How long did you work in your last job? <i>Please specify the number rounded-off to a full year</i>		>>68
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68	What is total duration of your work (work seniority)? <i>Please specify the number rounded-off to a full year</i>		>>71
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Part 5. LOOKING FOR A JOB

69	Have you been looking for another job (main or additional) during the period of the last 4 weeks (the reference week being the last one)? <input type="checkbox"/> yes <input type="checkbox"/> no	1	>>69A
		2	>>83

69A	Would you be willing to change your place of residence in order to find a job? Please code the answer YES or NO in case of each point a)-d)	YES	NO	>>70
	a) in Poland – within the territory of the current voivodship of residence	1	2	
	b) in Poland – outside the territory of the current voivodship of residence	1	2	
	c) abroad, within the territory of the European Union	1	2	
	d) abroad, outside the territory of the European Union	1	2	

70	Why are you looking for another job (main or additional)?		
	<input type="checkbox"/> I'm afraid that I will lose my present job	1	>>80
	<input type="checkbox"/> I'm looking for an additional job in order to extend the number of hours	2	
	<input type="checkbox"/> I'm looking for a job with longer hours	3	
	<input type="checkbox"/> I'm looking for a job with shorter hours	4	
	<input type="checkbox"/> I'm looking for a job with better financial conditions	5	
	<input type="checkbox"/> I'm looking for a job with better work conditions other than financial ones	6	
	<input type="checkbox"/> I'm looking for a job in accordance with my qualifications	7	
	<input type="checkbox"/> I'm looking for a permanent job	8	
	<input type="checkbox"/> other reasons, specify	9	

71	Did you look for a job during the previous four weeks, including the reference week as the last?		
	<input type="checkbox"/> yes	1	>>71A
	<input type="checkbox"/> no, I have found a job and I am waiting to start it within 3 months	2	>>77
	<input type="checkbox"/> no, I have found a job and I am waiting to start it in more than 3 months	3	>>82
	<input type="checkbox"/> no	4	>>73

71A	Would you be willing to change your place of residence in order to find a job? Please code the answer YES or NO in case of each point a)-d)	YES	NO	>>72
	a) in Poland – within the territory of the current voivodship of residence	1	2	
	b) in Poland – outside the territory of the current voivodship of residence	1	2	
	c) abroad, within the territory of the European Union	1	2	
	d) abroad, outside the territory of the European Union	1	2	

72	What is the minimum gross pay for which you would be willing to take up work? (in zł)		>>77
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73	Why are you not looking for a job?		
	<input type="checkbox"/> I believe I will not find a suitable job	1	>>75
	<input type="checkbox"/> I tried every methods of job search that I can think about	2	>>75
	<input type="checkbox"/> I participate in education, I improve my qualifications	3	>>75
	<input type="checkbox"/> I look after children or other persons requiring care	4	>>74
	<input type="checkbox"/> other personal or family reasons	5	>>75
	<input type="checkbox"/> because of retirement	6	>>75
	<input type="checkbox"/> because of illness, disability	7	>>75
	<input type="checkbox"/> I'm waiting to restart work after a break	8	>>75
	<input type="checkbox"/> other reasons, specify	9	>>75

74	Is not looking for a job related to the fact that respective care providing institutions, in case of:	A. children			B. other persons			>>75
		yes	no	not applicable	yes	no	not applicable	
	a) are not available because of location	1	2	3	1	2	3	
	b) are not available because of financial reasons	1	2	3	1	2	3	
	c) are of inadequate quality	1	2	3	1	2	3	

75	Would you like to work?		
	<input type="checkbox"/> yes <input type="checkbox"/> no	1 2	>>76 >>83

76	Will you be able to start work in the two weeks following the reference week?		
	<input type="checkbox"/> yes <input type="checkbox"/> no	1 2	>>83

Part 6. SUPPLEMENTARY INFORMATION

83	What are your sources of maintenance in the current month? <i>(no more than 3 sources of maintenance may be indicated)</i>		
	<input type="checkbox"/> paid employment	1	>>84
	<input type="checkbox"/> work on own agricultural holding	2	
	<input type="checkbox"/> work in own business outside private agriculture	3	
	<input type="checkbox"/> retirement pay	4	
	<input type="checkbox"/> disability pension	5	
	<input type="checkbox"/> unemployment benefit	6	
	<input type="checkbox"/> pre-retirement allowance	7	
	<input type="checkbox"/> other social allowance	8	
	<input type="checkbox"/> other non-earning source	9	
	<input type="checkbox"/> provided for by other person	10	
<i>Please state your main source of maintenance</i>			

84	How would you describe your situation in the labour market in the reference week?		
	<input type="checkbox"/> work	1	>>85
	<input type="checkbox"/> unemployment	2	
	<input type="checkbox"/> education/training	3	
	<input type="checkbox"/> retirement pay, early retirement	4	
	<input type="checkbox"/> disability	5	
	<input type="checkbox"/> family responsibilities	6	
<input type="checkbox"/> other form of economic inactivity	7		

STATUS IN THE LABOUR MARKET A YEAR AGO

85	What was your situation a year ago		
	<input type="checkbox"/> work	1	>>86
	<input type="checkbox"/> unemployment	2	
	<input type="checkbox"/> education, training	3	
	<input type="checkbox"/> retirement pay, early retirement	4	
	<input type="checkbox"/> disability	5	>>89
	<input type="checkbox"/> compulsory military service	6	
	<input type="checkbox"/> family responsibilities	7	
<input type="checkbox"/> other form of economic inactivity	8		

86	Did you work a year ago as:		
	<input type="checkbox"/> self-employed	1	>>87
	<input type="checkbox"/> an employee	2	
<input type="checkbox"/> an unpaid family worker	3	>>88	

87	Did you employ any employees:		
	<input type="checkbox"/> yes	1	>>88
<input type="checkbox"/> no	2		

88	What was the main activity of the local unit of the job you had a year ago?	NACE	>>89
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89	Were you injured in an accident at work in the year 2017? <i>(concerns only persons who in 2017 were employed and were insured in the Social Insurance Institution)</i>		
	<input type="checkbox"/> yes, without absence or with sickly leave up to 3 days	1	>>90
	<input type="checkbox"/> yes, with sickly leave 4 days or longer	2	
	<input type="checkbox"/> no	3	
	<input type="checkbox"/> not applicable	4	

FORMAL EDUCATION

90	Were you a student (did you attend school during the previous four weeks, including the reference week as the last?)		
	<input type="checkbox"/> YES, I am a student	1	>>91
	<input type="checkbox"/> YES, I am a student but at the moment I have a holiday break	2	>>91
	<input type="checkbox"/> YES, I was a student but I resigned/did not finish school	3	>>91
	<input type="checkbox"/> YES, I was a student and I completed school/graduated from university	4	>>91
	<input type="checkbox"/> I finished school and I'm waiting for the results of recruitment to school/university	5	>>91
	<input type="checkbox"/> NO	6	>>94

91	<p>What level of education are you attending/have attended?</p> <input type="checkbox"/> primary school <input type="checkbox"/> lower secondary school (gimnazjum) <input type="checkbox"/> basic vocational school <input type="checkbox"/> general secondary school <input type="checkbox"/> vocational secondary school / first degree branch school <input type="checkbox"/> post-secondary school <input type="checkbox"/> college <input type="checkbox"/> tertiary school (engineering, licentiate courses) <input type="checkbox"/> tertiary school (Master degree courses) <input type="checkbox"/> post-graduate studies <input type="checkbox"/> doctorate studies	1 2 3 4 5 6 7 8 9 10 11	>>92
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92	<p>What is the field of education that you are attending/have attended?</p> <input type="checkbox"/> Education <input type="checkbox"/> Arts and Humanities <input type="checkbox"/> Social sciences, Journalism and Information <input type="checkbox"/> Business, Administration and Law <input type="checkbox"/> Natural Sciences, Mathematics and Statistics <input type="checkbox"/> Information and Communication Technologies <input type="checkbox"/> Engineering, Manufacturing and Construction <input type="checkbox"/> Agriculture, Forestry, Fisheries and Veterinary <input type="checkbox"/> Health and Welfare <input type="checkbox"/> Services <input type="checkbox"/> Generic programmes and qualifications <input type="checkbox"/> I can't specify	0100 0200 0300 0400 0500 0600 0700 0800 0900 1000 0000 9998	>>93
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93	<p>What system of education have you attended?</p> <input type="checkbox"/> full-time <input type="checkbox"/> weekend <input type="checkbox"/> evening <input type="checkbox"/> other, specify?	1 2 3 4	>>94
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94	<p>What is the highest level of education that you have successfully attained?</p> <input type="checkbox"/> tertiary with academic degree (at least doctorate), <input type="checkbox"/> tertiary (master or equivalent), <input type="checkbox"/> tertiary (licentiate or engineer), <input type="checkbox"/> college education, <input type="checkbox"/> post-secondary education, <input type="checkbox"/> vocational secondary with Matura certificate, <input type="checkbox"/> vocational secondary without Matura certificate, <input type="checkbox"/> general secondary with Matura certificate, <input type="checkbox"/> general secondary without Matura certificate, <input type="checkbox"/> basic vocational, <input type="checkbox"/> lower secondary (gimnazjum), <input type="checkbox"/> primary, <input type="checkbox"/> incomplete primary, <input type="checkbox"/> without school education.	00 10 11 12 20 31 32 41 42 50 60 70 80 90	>>95
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95	<p>Did you attain your present level of education in the last 12 months?</p> <input type="checkbox"/> yes, during this calendar year <input type="checkbox"/> yes, during the previous calendar year <input type="checkbox"/> no	1 2 3	>>96 >>96A
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95A	<p>When (in what year) did you attain your present level of education?</p>		>>96
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96	<p>What is the field of the highest education level that you have successfully attained?</p> <input type="checkbox"/> Education <input type="checkbox"/> Arts and Humanities <input type="checkbox"/> Social sciences, Journalism and Information <input type="checkbox"/> Business, Administration and Law <input type="checkbox"/> Natural Sciences, Mathematics and Statistics <input type="checkbox"/> Information and Communication Technologies <input type="checkbox"/> Engineering, Manufacturing and Construction <input type="checkbox"/> Agriculture, Forestry, Fisheries and Veterinary	0100 0200 0300 0400 0500 0600 0700 0800	>>96A or 97A
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	<input type="checkbox"/> Health and Welfare <input type="checkbox"/> Services <input type="checkbox"/> Generic programmes and qualifications <input type="checkbox"/> I can't specify	0900 1000 0000 9998	
Note: persons who had codes 60, 70, 80, 90 in Question 94 are asked Question 97A			

96A	Did you completed your qualification after attaining your highest level of education, additionally attaining basic vocational or vocational secondary education (e.g. at Occupational Qualification Courses)? (please specify the last attained) <input type="checkbox"/> YES basic vocational <input type="checkbox"/> YES vocational secondary <input type="checkbox"/> NO	1 2 3	>>96B >>96B >>96C
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96B	What was the field of education in which you attained additional vocational education? <input type="checkbox"/> Education <input type="checkbox"/> Arts and Humanities <input type="checkbox"/> Social sciences, Journalism and Information <input type="checkbox"/> Business, Administration and Law <input type="checkbox"/> Natural Sciences, Mathematics and Statistics <input type="checkbox"/> Information and Communication Technologies <input type="checkbox"/> Engineering, Manufacturing and Construction <input type="checkbox"/> Agriculture, Forestry, Fisheries and Veterinary <input type="checkbox"/> Health and Welfare <input type="checkbox"/> Services <input type="checkbox"/> Generic programmes and qualifications <input type="checkbox"/> I can't specify	0100 0200 0300 0400 0500 0600 0700 0800 0900 1000 0000 9998	>>96C
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96C	What is your learned occupation?		>>97A
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NON-FORMAL EDUCATION

I would like to ask you a few questions concerning non-school ways of attaining knowledge and developing skills by you (i.e. beside education within the scope of the formal education system), regarding either your own paid work, social activities, as well as your own development and interests.

97A	Did you participate during the last four weeks, including the reference week as the last, in any non-school form of attaining knowledge and developing own occupational/related to paid work skills among the mentioned in the attached (list 97A)? <i>NOTICE: the education is to be carried out in an organized form (by the employer, Labour Office, or other institution/company or organization) with participation or under supervision of a lecturer, instructor/trainer or teacher</i> <input type="checkbox"/> yes <input type="checkbox"/> no	1 2	>>97D >>97B
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97B	In your current job, do you have your individual programme of professional development defined by your direct supervisor? (the example may be Individual Programme of Professional Development obligatory for civil service employees) <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> I do not know <input type="checkbox"/> not applicable (the respondent does not work or works as self-employed or contributing family worker)	1 2 3 4	>>97C >>97D >>97D >>97D
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97C	Did you participate during the last four weeks, including the reference week as the last, in the training following this programme (e.g. course/training, conference, seminar, lecture)? <input type="checkbox"/> yes <input type="checkbox"/> no	1 2	>>97D >>97D
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97D	<p>Did you participate during the last four weeks, including the reference week as the last, in any form of attaining knowledge and developing your own skills in respect to personal development, social activity or own interests (it concerns the knowledge and skills not connected directly with your paid work) among the mentioned in the attached (list 97d)?</p> <p>NOTICE: the education is to be carried out in an organized form (by the employer, Labour Office, or other institution/company or organization) with participation or under supervision of a lecturer, instructor/trainer or teacher</p> <p><input type="checkbox"/> yes <input type="checkbox"/> no</p>	1 2	>>98 or 105*
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* If there was at least one answer YES to any of the questions: 97a, 97c or 97d → 98
If the answer to all these questions was No → 105

98	What was the combined total number of hours that you spent on all forms of training/learning activity during the previous four weeks, including the reference week as the last?		>>99
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99	What was/is the goal of the last (most recent) training/learning activity you participated in?		
	<input type="checkbox"/> obtaining occupational qualifications or occupational or related to paid work competences (necessary in your work)	1	>>100
	<input type="checkbox"/> improving occupational or related to paid work competences (necessary in your work)	2	>>100
	<input type="checkbox"/> changing occupational qualifications	3	>>100
	<input type="checkbox"/> realization of social goals	4	>>101
	<input type="checkbox"/> personal interests	5	>>101

100	Who initiated this training/learning activity?		
	<input type="checkbox"/> it was organized by the employer	1	
	<input type="checkbox"/> it was organized by the labour office	2	>>101
	<input type="checkbox"/> it was my own initiative	3	

101	What is the field of this training/learning activity?		
	<input type="checkbox"/> Education	0100	
	<input type="checkbox"/> Arts and Humanities	0200	
	<input type="checkbox"/> Social sciences, Journalism and Information	0300	
	<input type="checkbox"/> Business, Administration and Law	0400	
	<input type="checkbox"/> Natural Sciences, Mathematics and Statistics	0500	
	<input type="checkbox"/> Information and Communication Technologies	0600	
	<input type="checkbox"/> Engineering, Manufacturing and Construction	0700	>>102
	<input type="checkbox"/> Agriculture, Forestry, Fisheries and Veterinary	0800	
	<input type="checkbox"/> Health and Welfare	0900	
	<input type="checkbox"/> Services	1000	
	<input type="checkbox"/> Generic programmes and qualifications	0000	
	<input type="checkbox"/> I can't specify	9998	

102	Has this training/learning activity taken place:		
	<input type="checkbox"/> only during paid working hours	1	
	<input type="checkbox"/> mainly during paid working hours	2	
	<input type="checkbox"/> mainly outside paid working hours	3	>>103
	<input type="checkbox"/> only outside paid working hours	4	
	<input type="checkbox"/> I didn't/ don't work at this time	5	

103	What was/will be duration of training/learning activity?		
	<input type="checkbox"/> less than one week	1	
	<input type="checkbox"/> 1 week or more but less than a month	2	
	<input type="checkbox"/> 1 month or more but less than 3 months	3	
	<input type="checkbox"/> 3 months or more but less than 6 months	4	>>104
	<input type="checkbox"/> 6 months or more but less than 1 year	5	
	<input type="checkbox"/> 1 year or more but less than 2 years	6	
	<input type="checkbox"/> 2 years or more	7	
	<input type="checkbox"/> duration is unspecified	8	

104	Have you participated partially or fully in the costs of this learning activity/training activity?		
	<input type="checkbox"/> yes	1	>>105
	<input type="checkbox"/> no	2	

Notice: for women aged 60 years or more and for men aged 65 years or more please go to question 107

REGISTRATION IN THE LABOUR OFFICE

105	Are you registered in the labour office? <input type="checkbox"/> yes, as unemployed <input type="checkbox"/> yes, as job seeker <input type="checkbox"/> no	1	>>106
		2	>>107
		3	>>107

106	Do you receive unemployment benefit? <input type="checkbox"/> yes <input type="checkbox"/> no	1	
		2	>>107

OTHER

107	Do you hold any of the following certificates of disability? (insert with the respondent's permission) <input type="checkbox"/> certificate of a considerable level of disability or equivalent..... <input type="checkbox"/> certificate of moderate level of disability or equivalent <input type="checkbox"/> certificate of minor level of disability or equivalent <input type="checkbox"/> Lack of valid certificate of disability level or equivalent		
		1	
		2	>>108
		3	
		4	

108	Information provided <input type="checkbox"/> personally by the respondent <input type="checkbox"/> by other member of the household (numberfirst name.....)	1	>>Stop
		2	

Interviewer's comments

Interviewer number		Legible signature of the interviewer	Date of the interview		Duration of the the interview (in minutes)	
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List 97a – attaining knowledge and developing occupational or related to paid work skills

NOTICE: the education is to be carried out in an organized form (by the employer, Labour Office, or other institution/company or organization) with participation or under supervision of a lecturer, instructor/trainer or teacher

Possible forms:

1. course/ training – both intramural, as well as carried out within the scope of distant education (i.e. correspondence courses, e-learning)
e.g. language courses, computer courses, courses connected to a particular occupation
2. lecture
3. seminar
4. conference
5. workshops
6. work within the scope of unpaid traineeship, apprenticeship (excluding those which are carried out within the framework of the formal education system, i.e. obligatory apprenticeships/traineeships related to school curriculum in basic and secondary vocational schools or tertiary schools are not included) or voluntary work of the traineeship or apprenticeship character
7. individual lessons taught by teacher in order to improve competences necessary at work
8. other forms of professional development not mentioned above

List 97d – attaining knowledge and developing skills in respect to personal development, social activity or own interests

NOTICE: the education is to be carried out in an organized form (by the employer, Labour Office, or other institution/company or organization) with participation or under supervision of a lecturer, instructor/trainer or teacher

Possible forms of learning:

1. course/ training / workshops – both intramural, as well as carried out within the scope of distant education (i.e. correspondence courses, e-learning)

Below are given examples of popular topics of such courses/ training:

- a. language courses
 - b. computer courses
 - c. driving course
 - d. sports activities – a particular sports discipline or, e.g. fitness activities, BUT under the supervision of a trainer
 - e. dance activities
 - f. musical activities – learning to play an instrument, singing lessons
 - g. artistic activities – e.g. painting, drawing, pottery, etc.
 - h. activities developing manual skills; handcraft – e.g. dressmaking course, knitting or crocheting course, felting, jewellery making, decoupage, floral composition, etc.
 - i. theatrical activities
 - j. courses of filming and photography
 - k. educational activities associated with organized tourism
 - l. culinary courses
 - m. courses connected with beauty – e.g. visage, manicure, hairdressing, etc.
 - n. courses connected with health and health prophylactics, including dietetics
 - o. training regarding personal skills – e.g. communication, auto presentation, assertiveness, coping with stress, etc.
 - p. training connected with social activity, including voluntary work, e.g. in hospice, communal day centre, children home or animal shelter
 - q. training regarding parental skills
 - r. pre-nuptial courses
 - s. training regarding knowledge of various religions, deepening religious knowledge, spiritual development
 - t. activities within the scope of public and personal security
2. lecture
 3. seminar
 4. conference
 5. third age university
 6. people's or general university
 7. open university
 8. individual lessons given by a teacher or private tutor
 9. other form of personal development not mentioned above