



Confidentiality:

The use of the information obtained from this survey on individual's or specific household's in manner that will disclose the identity of any person or institution is prohibited. The information obtained will be published to represent the whole population.

IDENTIFICATION

No. of forms filled of

1. Atoll and island (Ward for Male'):
2. Block Number:
3. Name of the unit:

4. HH Serial number:
5. Name of Person:
6. Person Number:

(for all 15 years & above)

1. PRIMARY OCCUPATION

1.1. What was the main economic activity carried out at the place where you worked during the past week?

For example: Primary / Secondary education, Weaving thatch, Garment shops, Sea transport, Planting chilies, Reef fishing, Hotels/Café, Pharmacy, Construction or such activity which generates income to you or your family

! If you are temperately absent from work, state that economic activity

Industry/Main activity of your place of work

ISIC

Administrative use

1.2. Is this work related to tourism?

1. Directly related
2. Indirectly related
3. Not related at all
4. Don't know

2. What type of establishment is that?

1. Government office
2. Independent government institution
3. Non profit Organisations
4. M.N.D.F / Police
5. Embassy/International bodies
6. Private company (not operating under companies)/own enterprise
7. Company/establishment operating under a company
8. State owned enterprises
9. Agricultural plots
10. House / living quarter
11. No fixed premises
12. Other (specify)

Skip to Q4

Skip to Q5

3. Is that enterprise /business where you worked registered with the relevant national authority?

1. Yes
2. In the process of registration
3. No
4. Don't know

4. What is the name of your place of work and your designation in that economic activity?

Organization:

Designation:

5. What was your occupation or type of work carried out in that job during the past week?

For example: Car / Pickup driver, Construction worker, Boat captain, Weaving thatch, Civil engineer, Architect, Teacher (grade 4), Journalist, Restaurant manager, Musician, Singer etc)

Occupation/Detail of the work

ISCO

Administrative use

6. During the past 7 days, on average how many hours per day did you spend in that economic activity?

 hrs/day

7. How many days did you work during the past week?

 days

8. How many weeks did you work during the past month?

 weeks

9. During past 12 months how many months did you work?

 months

10. What is your status of employment in that economic activity?

1. Employee Skip to Q18
2. Employer or owner (with employees)
3. Own account worker Skip to Q15
4. Own account worker (with family members)
5. Contributing family worker
6. Group worker

11. Are you the owner or the one who is in charge of this income-generating activity?

- 1. Yes
- 2. No **Skip to Q17**

12. During the past month, how many persons were engaged in that activity?

- 1. less than 5 persons
- 2. between 5 and 9 persons
- 3. 10 or more persons **Skip to Q17**

2. Income from own or Family Business (primary activity)

13. What was the total number of people who were engaged in that activity by nationality?

	Total	Male	Female
1. Local	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Foreign	<input type="text"/>	<input type="text"/>	<input type="text"/>

14. Out of the total in Q13, how many are paid workers? Person(s)

15. During the past month, how much income/revenue was generated from that activity?

! If the income is not yet received, record the agreed amount you will receive per month

! If a lump sum amount is received, estimate the amount you will receive per month on average

MVR

16. How much did you spend on the following expenses during the past month?

Expenses (Item)	(Excluding personal expenses) Expenses spent		Amount (MVR)
	1. Yes	2. No skip to next Item	
(1)	(2)		(3)
1. Wages & Salaries (Include in kind)	1	2	<input type="text"/>
2. Rent of the establishment	1	2	<input type="text"/>
3. Fuel (petrol and alike)	1	2	<input type="text"/>
4. Raw materials	1	2	<input type="text"/>
5. Electricity	1	2	<input type="text"/>
6. Cost of Traded goods sold (only for trade)	1	2	<input type="text"/>
7. Other expenses (please specify)	1	2	<input type="text"/>
7.1.	1	2	<input type="text"/>
7.2.	1	2	<input type="text"/>

2.1 personal income from own or Family Business (primary activity)

17. During the past month, how much income/profit did you make from that activity/business?

(DO NOT include the business profit or expenses) (Estimate the amount for income in kind)

(Income after deducting business expenses) MVR **Skip to Q26**

3. Employees Only

18. With reference to the work you did in the past week, were you employed on the basis of a written or oral contract?

- 1. A written document
- 2. An oral agreement
- 3. No agreement **Skip to Q21**

19. Did your contract have a defined period of employment? (Defined for how long)

- 1. Less than a year
- 2. years
- 3. No specific period **Skip to Q21**

20. What was the reason for a defined period in your contract/agreement?

- 1. On-the-job training/internship
- 2. Probation period
- 3. Seasonal work
- 4. Occasional/daily work
- 5. Work as a replacement/substitute
- 6. Public employment program
- 7. Specific service or task
- 8. Fixed - term contract
- 9. Others (specify)

21. Does your employer contribute to Pension Scheme?

- 1. Yes
- 2. No
- 3. Don't know

22. Do you get the following types of leaves, if so how many days do you get and are you paid for these leaves?

Types of leaves (Item)	Do you get....?			Total No. of Days	Did you Take....?		No. of Days taken last time	Did you get paid for these leaves?		
	1. Yes	2. No	3. Don't know		1. Yes	2. No skip to next item		1. Yes	2. No	3. Don't know
1. Annual leave	1	2	3	<input type="text"/>	1	2	<input type="text"/>	1	2	3
2. Maternity/Paternity	1	2	3	<input type="text"/>	1	2	<input type="text"/>	1	2	3
3. Sick leave	1	2	3	<input type="text"/>	1	2	<input type="text"/>	1	2	3

23. Does your employer contribute to Health Insurance Scheme?

- 1. Yes
- 2. No
- 3. Don't know

24. How long have you been active in this occupation or economic activity?

- 1. Less than 6 months
- 2. Between 6 months to 1 year
- 3. Years

35. During past 12 months how many months did you work? months

36. What is your status of employment in that economic activity?

- 1. Employee Skip to Q44
- 2. Employer or owner (with employees)
- 3. Own account worker Skip to Q41
- 4. Own account worker (with family members)
- 5. Contributing family worker
- 6. Group worker

37. Are you the owner of this Income generating activity?

- 1. Yes
- 2. No Skip to Q43

38. During the past month, how many persons were engaged in that activity?

- 1. less than 5 person
- 2. between 5 and 9 persons
- 3. 10 or more persons Skip to Q43

5. Income from own or family business (secondary activity)

39. What was the total number of people who were engaged in that activity by nationality?

	Total	Male	Female
1. Local	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Foreign	<input type="text"/>	<input type="text"/>	<input type="text"/>

40. Out of the total in Q39, how many are paid workers? Person(s)

41. During the past month, how much income/revenue was generated from that activity?

! If the income is not yet received, record the agreed amount you will receive per month

! If a lump sum amount is received, estimate the amount you will receive per month on average

MVR

42. How much did you spend on the following expenses during the past month?

Expenses (Item)	(Excluding personal expenses) Expenses spent		Amount (MVR)
	1. Yes	2. No skip to next Item	
(1)	(2)		(3)
1. Wages & Salaries (Include in kind)	1	2	<input type="text"/>
2. Rent of the establishment	1	2	<input type="text"/>
3. Fuel (petrol and alike)	1	2	<input type="text"/>
4. Raw materials	1	2	<input type="text"/>
5. Electricity	1	2	<input type="text"/>
6. Cost of Traded goods sold (only for trade)	1	2	<input type="text"/>
7. Other expenses (please specify)	1	2	<input type="text"/>
7.1.	1	2	<input type="text"/>
7.2.	1	2	<input type="text"/>

5.1 Income from own or family business (secondary activity)

43. During the past month, how much income/profit did you make from that activity/business?

(DO NOT include the business profit or expenses) (Estimate the amount for income in kind)

Excluding the amount for business expenses MVR Skip to Q52

5.1. Employees Only

44. With reference to the work you did in the past week, were you employed on the basis of written or oral contract?

- 1. A written document
- 2. An oral agreement
- 3. No agreement Skip to Q47

45. Did your contract have a defined period of employment? (Defined for how long)

- 1. Less than a year
- 2. years
- 3. No specific period Skip to Q47

46. What was the reason for a defined period in your contract/agreement?

- 1. On-the-job training/internship
- 2. Probation period
- 3. Seasonal work
- 4. Occasional/daily work
- 5. Work as a replacement/substitute
- 6. Public employment program
- 7. Specific service or task
- 8. Fixed - term contract
- 9. Others (specify).....

47. Does your employer contribute to Pension Scheme?

- 1. Yes
- 2. No
- 3. Don't know

48. Do you get the following types of leaves, if so how many days do you get and are you paid for these leaves?

Types of leaves (Item)	Do you get....?			Total No. of Days	Did you take....?		No. of Days taken last time	Did you get paid for these leaves?		
	1. Yes	2. No	3. Don't know		1. Yes	2. No skip to next item		1. Yes	2. No	3. Don't know
1. Annual leave	1	2	3	<input type="text"/>	1	2	<input type="text"/>	1	2	3
2. Maternity/Paternity	1	2	3	<input type="text"/>	1	2	<input type="text"/>	1	2	3
3. Sick leave	1	2	3	<input type="text"/>	1	2	<input type="text"/>	1	2	3

49. Does your employer contribute to Health Insurance Scheme?

- 1. Yes
- 2. No
- 3. Don't know

50. How long have you been active in this occupation or economic activity?

- 1. Less than 6 months
- 2. Between 6 months to 1 year
- 3. Years

