

NOTICE - We are conducting this survey under the authority of Title 13, United States Code, Section 8, Section 9 of this law requires us to keep all information about you and your household strictly confidential. We may use this information only for statistical purposes. Also, Title 42, Section 3732, United States Code, authorizes the Bureau of Justice Statistics, Department of Justice, to collect information using this survey. Title 42, Sections 3789g and 3735, United States Code, also requires us to keep all information about you and your household strictly confidential. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB number.

FORM NCVS-1  
Implementation Date: (07-01-2008)

U.S. DEPARTMENT OF COMMERCE  
Economics and Statistics Administration  
U.S. CENSUS BUREAU

ACTING AS COLLECTING AGENT FOR THE  
BUREAU OF JUSTICE STATISTICS  
U.S. DEPARTMENT OF JUSTICE

**NATIONAL CRIME  
VICTIMIZATION SURVEY**

**NCVS-1 BASIC SCREEN QUESTIONNAIRE**

Control number  
PSU Segment/Suffix Sample designation/Suffix Serial/Suffix HH No. Spinoff Indicator

**1. Field representative identification**  
Code Name

**2. Unit status**  
202 1 Unit in sample the previous enumeration period - Fill 3  
2 Unit in sample first time this period - SKIP to 4

**3. Household status - Mark first box that applies.**  
203 1 Same household interviewed the previous enumeration  
2 Replacement household since the previous enumeration  
3 Noninterview the previous enumeration  
4 Other - Specify

**4. Line number of household respondent**  
204 Go to page 2

**5. Group Quarters [GQ] type code**  
205

**6. Tenure**  
206 1 Owned or being bought 2 Rented for cash 3 No cash rent

**7. Land Use**  
207 1 Urban 2 Rural

**8. Farm Sales**  
208 X Item blank 1 \$1,000 or more 2 Less than \$1,000

**9. Type of living quarters**  
Housing unit  
209 1 House, apartment, flat  
2 HU in nontransient hotel, motel, etc.  
3 HU permanent in transient hotel, motel, etc  
4 HU in rooming house  
5 Mobile home or trailer with no permanent room added  
6 Mobile home or trailer with one or more permanent rooms added  
7 HU not specified above - Describe  
OTHER unit  
8 Quarters not HU in rooming or boarding house  
9 Unit not permanent in transient hotel, motel, etc.  
10 Unoccupied site for mobile home, trailer, or tent  
11 Student quarters in college dormitory  
12 OTHER unit not specified above - Describe

**10a. Use of telephone**  
Location of phone - Mark first box that applies.  
210 1 Phone in unit  
2 Phone in common area (hallway, etc.)  
3 Phone in another unit (neighbor, friend, etc.)  
4 Work/office phone  
5 No phone - SKIP to 11a

**10b. Is phone interview acceptable?**  
211 1 Yes 2 No 3 Refused to give number

**11a. Number of housing units in structure**  
212 1 1 - SKIP to 11c 4 4 7 Mobile home/trailer -  
2 2 5 5-9 SKIP to 11c  
3 3 6 10+ 8 Only OTHER units

**11b. Direct outside access**  
213 1 Yes 2 No 3 DK X Item blank

**11c. Restricted access**  
222 Gated or walled community 1 Yes 2 No X Item blank  
223 Building with restricted access 1 Yes 2 No X Item blank

**12a. Household Income**  
214 1 Less than \$5,000 6 15,000 - 17,499 11 35,000 - 39,999  
2 \$5,000 - 7,499 7 17,500 - 19,999 12 40,000 - 49,999  
3 7,500 - 9,999 8 20,000 - 24,999 13 50,000 - 74,999  
4 10,000 - 12,499 9 25,000 - 29,999 14 75,000 and over  
5 12,500 - 14,999 10 30,000 - 34,999

**12b. College/University**  
218 1 Yes 2 No

**12c. Public Housing**  
219 X Item blank 1 Yes (public housing) 2 No (not public housing)

**12d. Manager Verification of Public Housing**  
220 Able to verify Unable to verify  
1 Public housing 3 Telephone  
2 Not public housing 4 Other - Specify

**12e. American Indian Reservation or American Indian Lands**  
221 1 Yes 2 No

**13. Proxy information - Fill for all proxy interviews**

a. Proxy interview obtained for Line No.	b. Proxy respondent Name	c. Reason Line No. (Enter code)
301		302 303
304		305 306
307		308 309
310		311 312

**Codes for item 13c**  
1-12-13 years old and parent refused permission for self interview  
2- Physically/mentally unable to answer  
3- TA and won't return before closeout

**14. Type Z noninterview**

a. Interview not obtained for Line No.	b. Reason (Enter code)	Codes for item 14b
313	314	1-Never available 2-Refused .... 3-Physically/mentally unable to answer-no proxy available 4-TA and no proxy available .... 5-Other ..... 6-Office use only
315	316	
317	318	
319	320	

**15a. Household members 12 years of age and OVER**  
321 Total number

**15b. Household members UNDER 12 years of age**  
322 Total number 0 None

**15c. Number of Type Z noninterview household members 12 years of age and OVER**  
323 Total number 0 None

**15d. Crime Incident Reports filled**  
323 Total number of NCVS-2s filled 0 None

**16. Changes in Household Composition**

a. Line No.	b. Reason (Enter code)	Only enter changes discovered during the current enumeration
324	325	
326	327	
328	329	
330	331	

N  
C  
V  
S  
1

RESPONDENT'S PERSONAL CHARACTERISTICS									
<b>17. Name of respondent</b>					18. Type of interview			19. Line No.	
Last					401			402	
First					1 <input type="checkbox"/> Per. - Self-respondent 2 <input type="checkbox"/> Tel. - Self-respondent 3 <input type="checkbox"/> Per. - Proxy 4 <input type="checkbox"/> Tel. - Proxy } Fill 13 on cover page			Line No.	
20. Relationship to reference person	21. Age last Birthday	22a. Marital status THIS survey period	22b. Marital status LAST survey period (From previous enumeration)	23. Sex	24. Armed Forces Member	25. Educational attainment	26. Attending School	27. Hispanic Origin	28. Race <small>Mark all that apply.</small>
403  1 <input type="checkbox"/> Husband 2 <input type="checkbox"/> Wife 3 <input type="checkbox"/> Son 4 <input type="checkbox"/> Daughter 5 <input type="checkbox"/> Father 6 <input type="checkbox"/> Mother 7 <input type="checkbox"/> Brother 8 <input type="checkbox"/> Sister 9 <input type="checkbox"/> Other relative 10 <input type="checkbox"/> Nonrelative 11 <input type="checkbox"/> Ref. person	404  _____ Age	405  1 <input type="checkbox"/> Married 2 <input type="checkbox"/> Widowed 3 <input type="checkbox"/> Divorced 4 <input type="checkbox"/> Separated 5 <input type="checkbox"/> Never married	406  1 <input type="checkbox"/> Married 2 <input type="checkbox"/> Widowed 3 <input type="checkbox"/> Divorced 4 <input type="checkbox"/> Separated 5 <input type="checkbox"/> Never married 6 <input type="checkbox"/> Not interviewed last survey period	407  1 <input type="checkbox"/> M 2 <input type="checkbox"/> F	408  1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	409  _____ Highest level completed	411  1 <input type="checkbox"/> Regular school 2 <input type="checkbox"/> College/University 3 <input type="checkbox"/> Trade school 4 <input type="checkbox"/> Vocational school 5 <input type="checkbox"/> None of the above schools	413  1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	412 *  1 <input type="checkbox"/> White 2 <input type="checkbox"/> Black/African American 3 <input type="checkbox"/> American Indian/Alaska Native 4 <input type="checkbox"/> Asian 5 <input type="checkbox"/> Native Hawaiian/Other Pacific Islander 6 <input type="checkbox"/> Other - Specify _____ _____
29. Date of interview _____					501	<input type="text"/> / <input type="text"/> / <input type="text"/> Month Day Year			
MOBILITY QUESTIONS									
<b>33a.</b>  <b>Before we get to the crime questions, I have some questions that are helpful in studying where and why crimes occur.</b>  <small>Ask or verify -</small> <b>How long have you lived at this address?</b>  <small>(Enter 0 if less than 1 year.)</small>					506 _____ Years (Round to nearest whole year)  <small>If = 0 ASK to 33b If = DK or RF SKIP to 33c Else SKIP to 33d</small>				
<b>33b.</b>  <b>How many months?</b>					505 _____ Months (1-11) - SKIP to 33e				
<b>33c.</b>  <b>Have you lived here...</b>  <small>Read categories 1-4:</small>					1 <input type="checkbox"/> <b>More than 5 years</b> - If HHLD Respondent ASK 34, else SKIP to 36a. 2 <input type="checkbox"/> <b>Less than 5 years, but more than 1 year</b> 3 <input type="checkbox"/> <b>Less than 1 year, but more than 6 months</b> } SKIP to 33e 4 <input type="checkbox"/> <b>6 months or less</b> 5 <input type="checkbox"/> Don't Know				
<b>33d.</b> <span style="background-color: #f0f0f0; padding: 2px;">CHECK ITEM A</span> How many years are entered in 33a?					<input type="checkbox"/> 5 years or more - If HHLD Respondent SKIP to 34, else SKIP to 36a <input type="checkbox"/> Less than 5 years - ASK 33e				
<b>33e.</b>  <b>Altogether, how many times have you moved in the last 5 years, that is, since _____, 20__?</b>  <small>Enter number of times.</small>					508 _____ Number of times - <small>If HHLD Respondent ASK 34, Else SKIP to 36a</small>				
BUSINESS OPERATED FROM SAMPLE ADDRESS (Ask of Household Respondent Only)									
<b>34. (Asked of Household Respondent Only)</b>  <b>Does anyone in this household operate a business from this address?</b>					530 1 <input type="checkbox"/> Yes - ASK 35 2 <input type="checkbox"/> No - SKIP to 36a				
<b>35. (Asked of Household Respondent Only)</b>  <small>If this is a PERSONAL visit - Fill by observation. If this is a TELEPHONE contact - Ask.</small>  <b>Is there a sign on the premises or some other indication to the general public that a business is operated from this address?</b>					531 1 <input type="checkbox"/> Yes (Recognizable business) 2 <input type="checkbox"/> No (Unrecognizable business)				

**RESPONDENT'S SCREEN QUESTIONS**

**36a.**

I'm going to read some examples that will give you an idea of the kinds of crimes this study covers.

As I go through them, tell me if any of these happened to you in the last 6 months, that is since \_\_\_\_\_, 20 \_\_\_\_.

Was something belonging to YOU stolen, such as -

Read each category.

- (a) Things that you carry, like luggage, a wallet, purse, briefcase book -
- (b) Clothing, jewelry, or cellphone -
- (c) Bicycle or sports equipment -
- (d) Things in your home - like a TV, stereo, or tools -
- (e) Things outside your home such as a garden hose or lawn furniture - (Asked of Household Respondent only)
- (f) Things belonging to children in the household - (Asked of Household Respondent only)
- (g) Things from a vehicle, such as a package, groceries, camera, or CDs -

OR

(h) Did anyone ATTEMPT to steal anything belonging to you?  
Ask only if necessary

Did any incidents of this type happen to you?

532

- 1  Yes - ASK 36b
- 2  No - If Household Respondent SKIP to 37a; Else SKIP to 40a

**36b.**

How many times?

533

\_\_\_\_\_

Number of times (36b)

**36c.**

What happened?

Briefly describe incident(s)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If Household Respondent ASK 37a; else SKIP to 40a

**37a.** (Asked of Household Respondent Only)

(Other than any incidents already mentioned,) has anyone -

Read each category.

(a) Broken in or ATTEMPTED to break into your home by forcing a door or window, pushing past someone, jimmying a lock, cutting a screen, or entering through an open door or window?

(b) Has anyone illegally gotten in or tried to get into a garage, shed, or storage room?

OR

(c) Illegally gotten in or tried to get into a hotel or motel room or vacation home where you were staying?

Ask only if necessary

Did any incidents of this type happen to you?

534

- 1  Yes - ASK 37b
- 2  No - SKIP to 38

**37b.** (Asked of Household Respondent Only)

How many times?

535

\_\_\_\_\_

Number of times (37b)

**37c.** (Asked of Household Respondent Only)

What happened?

Briefly describe incident(s)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Notes

**RESPONDENT'S SCREEN QUESTIONS**

<p><b>38.</b> (Asked of Household Respondent Only)</p> <p><b>What was the TOTAL number of cars, vans, trucks, motorcycles, or other motor vehicles owned by you or any other member of this household during the last 6 months? Include those you no longer own.</b></p>	<p>536</p> <p>0 <input type="checkbox"/> None - SKIP to 40a          1 <input type="checkbox"/> 1          2 <input type="checkbox"/> 2          3 <input type="checkbox"/> 3          4 <input type="checkbox"/> 4 or more</p>
<p><b>39a.</b> (Asked of Household Respondent Only)</p> <p><b>During the last 6 months, (other than any incidents already mentioned,) (was the vehicle/were any of the vehicles) -</b></p> <p>Read each category.</p> <p><b>(a) Stolen or used without permission?</b></p> <p><b>(b) Did anyone steal any parts such as a tire, car stereo, hubcap, or battery?</b></p> <p><b>(c) Did anyone steal any gas from (it/them)?</b></p> <p><b>OR</b></p> <p><b>(d) Did anyone ATTEMPT to steal any vehicle or parts attached to (it/them)?</b></p> <p>Ask only if necessary</p> <p><b>Did any incidents of this type happen to you?</b></p>	<p>537</p> <p>1 <input type="checkbox"/> Yes - ASK 39b          2 <input type="checkbox"/> No - SKIP to 40a</p>
<p><b>39b.</b> (Asked of Household Respondent Only)</p> <p><b>How many times?</b></p>	<p>538</p> <p>_____</p> <p>Number of times (39b)</p>
<p><b>39c.</b> (Asked of Household Respondent Only)</p> <p><b>What happened?</b></p>	<p>Briefly describe incident(s)</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><b>40a.</b></p> <p><b>(Other than any incidents already mentioned,) since _____, 20 ____, were you attacked or threatened OR did you have something stolen from you -</b></p> <p>Read each category.</p> <p><b>(a) At home including the porch or yard -</b></p> <p><b>(b) At or near a friend's, relative's, or neighbor's home -</b></p> <p><b>(c) At work or school -</b></p> <p><b>d) In places such as a storage shed or laundry room, a shopping mall, restaurant, bank, or airport -</b></p> <p><b>(e) While riding in any vehicle -</b></p> <p><b>(f) On the street or in a parking lot -</b></p> <p><b>(g) At such places as a party, theater, gym, picnic area, bowling lanes, or while fishing or hunting -</b></p> <p><b>OR</b></p> <p><b>(h) Did anyone ATTEMPT to attack or ATTEMPT to steal anything belonging to you from any of these places?</b></p> <p>Ask only if necessary</p> <p><b>Did any incidents of this type happen to you?</b></p>	<p>539</p> <p>1 <input type="checkbox"/> Yes - ASK 40b          2 <input type="checkbox"/> No - SKIP to 41a</p>
<p><b>40b.</b></p> <p><b>How many times?</b></p>	<p>540</p> <p>_____</p> <p>Number of times (40b)</p>
<p><b>40c.</b></p> <p><b>What happened?</b></p>	<p>Briefly describe incident(s)</p> <p>_____</p> <p>_____</p> <p>_____</p>

**RESPONDENT'S SCREEN QUESTIONS**

**41a.**  
**(Other than any incidents already mentioned,) has anyone attacked or threatened you in any of these ways -**

(Exclude telephone threats) -

Read each category.

- (a) With any weapon, for instance, a gun or knife -**
- (b) With anything like a baseball bat, frying pan, scissors, or stick -**
- (c) By something thrown, such as a rock or bottle -**
- (d) Include any grabbing, punching, or choking,**
- (e) Any rape, attempted rape or other type of sexual attack -**
- (f) Any face to face threats -**

**OR**

**(g) Any attack or threat or use of force by anyone at all? Please mention it even if you are not certain it was a crime.**

Ask only if necessary

**Did any incidents of this type happen to you?**

541    1  Yes - ASK 41b  
 2  No - SKIP to 42a

**41b.**  
**How many times?**

542    \_\_\_\_\_  
 Number of times (41b)

**41c.**  
**What happened?**

Briefly describe incident(s)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**42a.**  
**People often don't think of incidents committed by someone they know. (Other than any incidents already mentioned,) did you have something stolen from you OR were you attacked or threatened by -**

(Exclude telephone threats)

Read each category.

- (a) Someone at work or school -**
- (b) A neighbor or friend -**
- (c) A relative or family member -**
- (d) Any other person you've met or known?**

Ask only if necessary

**Did any incidents of this type happen to you?**

543    1  Yes - ASK 42b  
 2  No - SKIP to 43a

**42b.**  
**How many times?**

544    \_\_\_\_\_  
 Number of times (42b)

**42c.**  
**What happened?**

Briefly describe incident(s)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Notes

RESPONDENT'S SCREEN QUESTIONS

43a.

Incidents involving forced or unwanted sexual acts are often difficult to talk about. (Other than any incidents already mentioned,) have you been forced or coerced to engage in unwanted sexual activity by -

Read each category:

(a) Someone you didn't know -

(b) A casual acquaintance -

OR

(c) Someone you know well?

Ask only if necessary

Did any incidents of this type happen to you?

545

1  Yes - ASK 43b

2  No - SKIP to 44a

43a.

How many times?

546

\_\_\_\_\_ Number of times (43b)

43c.

What happened?

Briefly describe incident(s)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

44a.

During the last 6 months, (other than any incidents already mentioned,) did you call the police to report something that happened to YOU which you thought was a crime?

547

1  Yes - ASK 44b

2  No - SKIP to 45a

44b.

What happened?

Briefly describe incident(s)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

44c.

CHECK  
ITEM B

If not sure ask:

Were you attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you or another household member?

549

1  Yes - ASK 44d

2  No - SKIP to 45a

44d.

How many times?

550

\_\_\_\_\_ Number of times (44d)

Notes

**RESPONDENT'S SCREEN QUESTIONS**

<p><b>45a.</b></p> <p><b>During the last 6 months, (other than any incidents already mentioned,) did anything which you thought was a crime happen to YOU, but you did NOT report to the police?</b></p>	<p>551    1 <input type="checkbox"/> Yes - ASK 45b          2 <input type="checkbox"/> No - If HHLD Respondent ASK 46, Else SKIP to 71</p>
<p><b>45b.</b></p> <p><b>What happened?</b></p>	<p>Briefly describe incident(s)</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><b>45c.</b>    <b>CHECK ITEM C</b></p> <p>If not sure ask:</p> <p><b>Were you attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you or another household member?</b></p>	<p>553    1 <input type="checkbox"/> Yes - ASK 45d          2 <input type="checkbox"/> No - If HHLD Respondent ASK 46, Else SKIP to 71</p>
<p><b>45d.</b></p> <p><b>How many times?</b></p>	<p>554    _____</p> <p>Number of times (45d)    - If HHLD Respondent ASK 46, Else SKIP to 71</p>

**RESPONDENT'S CHECK ITEMS D, E, AND G**

<p><b>71.</b>    <b>CHECK ITEM D</b></p> <p>Who besides the respondent was present when the screen questions were asked? (if telephone interview, mark box 1 only.)</p>	<p>555    1 <input type="checkbox"/> Telephone interview - SKIP to 73.</p> <p>*        <b>Personal interview</b> - Mark all that apply.</p> <p>2 <input type="checkbox"/> No one besides respondent present</p> <p>3 <input type="checkbox"/> Respondent's spouse</p> <p>4 <input type="checkbox"/> HHLD member(s) 12+, not spouse</p> <p>5 <input type="checkbox"/> HHLD member(s) under 12</p> <p>6 <input type="checkbox"/> Nonhousehold member(s)</p> <p>7 <input type="checkbox"/> Someone was present - Can't say who</p> <p>8 <input type="checkbox"/> Don't know if someone else present</p> <p style="text-align: right;">} If a Proxy interview, ASK 72, else SKIP to 73.</p>
<p><b>72.</b>    <b>CHECK ITEM E</b></p> <p>Did the person for whom this interview was taken help the proxy respondent answer any screen questions?</p>	<p>556    1 <input type="checkbox"/> Yes          2 <input type="checkbox"/> No          3 <input type="checkbox"/> Person for whom interview taken not present</p>
<p><b>73.</b>    <b>CHECK ITEM G</b>    Is one or more crimes reported in 36b, 37b, 39b, 40b, 41b, 42b, 43b, 44d, or 45d?</p>	<p><input type="checkbox"/> Yes - SKIP to Crime Incident Report (Item 1a on the NCVS-2)</p> <p><input type="checkbox"/> No - SKIP to 74 (on the NCVS-1)</p>

Notes

**RESPONDENT'S EMPLOYMENT QUESTIONS**

All incident reports must be completed before asking this series of questions.

<p><b>74.</b> <span style="background-color: #e91e63; color: white; padding: 2px 5px; font-weight: bold;">CHECK ITEM H1</span> Is the respondent 16 years or older?</p>	<p>1 <input type="checkbox"/> Yes - ASK 75a 2 <input type="checkbox"/> No - SKIP to 80</p>
<p><b>75a.</b></p> <p><b>Did you have a job or work at a business LAST WEEK? (Do not include volunteer work or work around the house.)</b></p> <p><b>(If farm or business operator in household, ask about unpaid work.)</b></p>	<p>576 1 <input type="checkbox"/> Yes - SKIP to 76a 2 <input type="checkbox"/> No - ASK 75b</p>
<p><b>75b.</b></p> <p>Ask or verify -</p> <p><b>Did you have a job or work at a business DURING THE LAST 6 MONTHS?</b></p>	<p>577 1 <input type="checkbox"/> Yes - ASK 75c 2 <input type="checkbox"/> No - SKIP to 80</p>
<p><b>75c.</b></p> <p><b>Did that (job/work) last 2 consecutive weeks or more?</b></p>	<p>578 1 <input type="checkbox"/> Yes - ASK 76a 2 <input type="checkbox"/> No - SKIP to 80</p>
<p><b>76a.</b></p> <p>Ask or verify -</p> <p><b>Which of the following best describes your job?</b></p> <p><b>Were you employed in the ...</b></p> <p>Read each category until respondent says "yes", then enter appropriate precode.</p>	<p>1 <input type="checkbox"/> <b>Medical Profession?</b> - SKIP 76c 2 <input type="checkbox"/> <b>Mental Health Services Field?</b> - SKIP to 76e 3 <input type="checkbox"/> <b>Teaching Profession?</b> - SKIP to 76g 4 <input type="checkbox"/> <b>Law Enforcement or Security Field?</b> - SKIP to 76i 5 <input type="checkbox"/> <b>Retail Sales?</b> - SKIP to 76k 6 <input type="checkbox"/> <b>Transportation Field?</b> - SKIP to 76m 7 <input type="checkbox"/> <b>Something else?</b> - Specify - ASK 76b</p>
<p><b>76b.</b></p> <p>Please specify the job not covered in answer categories 1-6 in 76a.</p>	<p>Specify - SKIP to 76o</p> <p>_____</p>
<p><b>76c.</b></p> <p>Employed in the Medical Profession:</p> <p><b>As a -</b></p> <p>Read each category.</p>	<p><b>Medical Profession</b></p> <p>1 <input type="checkbox"/> <b>Physician?</b> 2 <input type="checkbox"/> <b>Nurse?</b> 3 <input type="checkbox"/> <b>Technician?</b> 4 <input type="checkbox"/> <b>Other medical profession?</b> - Specify - ASK 76d</p> <p>} SKIP to 76o</p>
<p><b>76d.</b></p> <p>Please specify employed in the medical profession as a -</p>	<p>Specify - SKIP to 76o</p> <p>_____</p>
<p><b>76e.</b></p> <p>Employed in the Mental Health Services Field:</p> <p><b>Are YOUR duties -</b></p> <p>Read each category.</p>	<p><b>Mental Health Services Field</b></p> <p>5 <input type="checkbox"/> <b>Professional (Social worker/psychiatrist)?</b> 6 <input type="checkbox"/> <b>Custodial care?</b> 7 <input type="checkbox"/> <b>Some other mental health services profession?</b> - Specify <sup>ASK</sup> 76f</p> <p>} SKIP to 76o</p>
<p><b>76f.</b></p> <p>Please specify duties in the mental health services field.</p>	<p>Specify - SKIP to 76o</p> <p>_____</p>
<p>Notes</p>	



**RESPONDENT'S EMPLOYMENT QUESTIONS**

<p><b>76g.</b></p> <p>Employed in the Teaching Profession:</p> <p><b>Were you employed in a -</b></p> <p>Read each category.</p>	<p><b>Teaching Profession</b></p> <p>8 <input type="checkbox"/> <b>Preschool?</b></p> <p>9 <input type="checkbox"/> <b>Elementary school?</b></p> <p>10 <input type="checkbox"/> <b>Junior high or middle school?</b></p> <p>11 <input type="checkbox"/> <b>High school?</b></p> <p>12 <input type="checkbox"/> <b>College or university?</b></p> <p>13 <input type="checkbox"/> <b>Technical or industrial school?</b></p> <p>14 <input type="checkbox"/> <b>Special education facility?</b></p> <p>15 <input type="checkbox"/> <b>Other teaching profession?</b> - Specify - ASK 76h</p> <p align="right">} - SKIP to 76o</p>
<p><b>76h.</b></p> <p>Please specify employed in the teaching profession as a -</p>	<p>Specify - SKIP to 76o</p> <p>_____</p>
<p><b>76i.</b></p> <p>Employed in the Law Enforcement or Security Field:</p> <p><b>Were you employed as a -</b></p> <p>Read each category.</p>	<p><b>Law Enforcement or Security Field</b></p> <p>16 <input type="checkbox"/> <b>Law enforcement officer?</b></p> <p>17 <input type="checkbox"/> <b>Prison or jail guard?</b></p> <p>18 <input type="checkbox"/> <b>Security guard?</b></p> <p>19 <input type="checkbox"/> <b>Law enforcement profession?</b> - Specify - ASK 76j</p> <p align="right">} - SKIP to 76o</p>
<p><b>76j.</b></p> <p>Please specify employed in the law enforcement or security field as a -</p>	<p>Specify - SKIP to 76o</p> <p>_____</p>
<p><b>76k.</b></p> <p>Employed in Retail Sales:</p> <p><b>Were you employed as a -</b></p> <p>Read each category.</p>	<p><b>Retail Sales -</b></p> <p>20 <input type="checkbox"/> <b>Convenience or liquor store clerk?</b></p> <p>21 <input type="checkbox"/> <b>Gas station attendant?</b></p> <p>22 <input type="checkbox"/> <b>Bartender?</b></p> <p>23 <input type="checkbox"/> <b>Other retail sales profession?</b> - Specify - ASK 76l</p> <p align="right">} - SKIP to 76o</p>
<p><b>76l.</b></p> <p>Please specify employed in retail sales as a -</p>	<p>Specify - SKIP to 76o</p> <p>_____</p>
<p><b>76m.</b></p> <p>Employed in the Transportation Field:</p> <p><b>Were you employed as a -</b></p> <p>Read each category.</p>	<p><b>Transportation Field -</b></p> <p>24 <input type="checkbox"/> <b>Bus driver?</b></p> <p>25 <input type="checkbox"/> <b>Taxi cab driver?</b></p> <p>26 <input type="checkbox"/> <b>Other transportation Field profession?</b> - Specify - ASK 76n</p> <p align="right">} - SKIP to 76o</p>
<p><b>76n.</b></p> <p>Please specify employed in the transportation field as a -</p>	<p>Specify</p> <p>_____</p>
<p><b>76o.</b></p> <p><b>CHECK ITEM H2</b></p> <p>If 76a equals 7, enter 27 here., otherwise enter the number of the employment code entered in item 76c, 76e, 76g, 76i 76k, or 76m.</p>	<p>579 _____</p>
<p><b>77.</b></p> <p>Ask or verify -</p> <p><b>Is your job with -</b></p> <p>Read each category.</p>	<p>580</p> <p>1 <input type="checkbox"/> <b>A private company, business, or individual for wages?</b></p> <p>2 <input type="checkbox"/> <b>The Federal government?</b></p> <p>3 <input type="checkbox"/> <b>A State, county, or local government?</b></p> <p>4 <input type="checkbox"/> <b>Yourself (Self-employed) in your own business, professional practice, or farm?</b></p> <p align="right">} If 76o = 22 SKIP to 79, Else ASK 78.</p>
<p><b>78.</b></p> <p><b>Are you employed by a college or university?</b></p>	<p>581</p> <p>1 <input type="checkbox"/> Yes</p> <p>2 <input type="checkbox"/> No</p>
<p><b>79.</b></p> <p><b>While working at your job, do you work mostly in -</b></p> <p>Read each category.</p>	<p>582</p> <p>1 <input type="checkbox"/> <b>A city?</b></p> <p>2 <input type="checkbox"/> <b>Suburban area?</b></p> <p>3 <input type="checkbox"/> <b>Rural area?</b></p> <p>4 <input type="checkbox"/> <b>Combination of any of these?</b></p>

**RESPONDENT'S CHECK ITEM I**

**80.** **CHECK ITEM I** Is this the last household member to be interviewed?

- Yes - If Household Respondent finish collecting income and telephone information, then END interview. Otherwise END interview.
- No - GO TO question 33a for the next respondent. See note below before interviewing next household member.

FIELD REPRESENTATIVE -- *(Read to the Household Respondent Only.)* If there are any household members under 18, tell the Household Respondent that you will be asking the **same** questions you just asked him/her.

Notes