

BACKGROUND DATA

1. Age (In completed years) _____
2. Gender 1. Male 2. Female
3. Level of Education (record exactly and consult code book) _____
4. Total agricultural land _____ (in Acres)
- 4a. Irrigated land _____ (in Acres)
5. What is/has been the main occupation of the Respondent? (*Record exactly and consult code book*) (*If retired, try to ascertain his/her previous occupation*) _____
6. (*If respondent is not the main earner*) Main occupation of the main earner of the family (*Record exactly and code book*) _____
7. Exact Cast/Jati-biradari? Tribe, name (*Probe further, if R mentions ambiguous surname*) _____ (*Consult code book*)
- 7a. Caste group (Ascertain and consult SC/ST/OBC list for the state)
1. SC 2. ST 3. OBC 4. Others
8. Religion: 1 Hindu 2 Muslim 3 Christian 4 Sikh
5 Buddhist 6 Jain 7 Parsi 8 Other (*Specify*) _____
9. Locality: 1 Village 2 Town 3 City (5,00,000+)
10. Type of house where R lives (**own or rented**)
 - a. Floor material
 1. Mud 2. Wood/Bamboos 3. Brick
 4. Stone 5. Cement 6. Mosaic/Floor Tiles
 7. Any other (*Specify*) _____
 - b. Wall material
 1. Grass/Thatch (iqoky)/Bamboos etc. 2. Plastic/Polythene
 3. Mud/Unburnt brick 4. Wood
 5. G.I./Metal/Asbestos sheets 6. Burnt brick
 7. Stone 8. Concrete
 9. Any other (*Specify*) _____
 - c. Roof material
 1. Grass/Thatch/Bamboos/Wood/mud etc. 2. Plastic/Polythene
 3. Tiles 4. Slate
 5. G.I./Metal/Asbestos sheets 6. Brick
 7. Stone 8. Concrete
 9. Any other (*Specify*) _____
11. Total number of rooms in this house _____
12. Total number of family members living in this house _____
13. Number of married couples living in this house _____

14. Do you or your family own the following.
- | | | |
|-----------------------------|-------|------|
| a. Car/Jeep/Van | 2 Yes | 1 No |
| b. Tractor | 2 Yes | 1 No |
| c. Television | 2 Yes | 1 No |
| d. Scooter/Motorcycle/Moped | 2 Yes | 1 No |
| e. Telephone | 2 Yes | 1 No |
| f. Electric fan/cooler | 2 Yes | 1 No |
| g. Bicycle | 2 Yes | 1 No |
| h. Radio/Transistor | 2 Yes | 1 No |
| i. Wrist Watch/Clock | 2 Yes | 1 No |
| j. Pumping set | 2 Yes | 1 No |
| k. Bank Account | 2 Yes | 1 No |

15. Most important source of Drinking Water

- | | |
|-------------------|--------------------|
| 1. Tap | 2. Hand pump |
| 3. Tubwell | 4. Well |
| 5. Tank/Pond/Lake | 6. River/Canal |
| 7. Spring | 8. Any other _____ |

16. Most important source of lighting

- | | |
|--------------------|----------------|
| 1. Electricity | 2. Kerosene |
| 3. Solar/Gobar gas | 4. Other oil |
| 5. Any other | 6. No lighting |

17. Most important source Fuel used for cooking

- | | |
|-----------------|--------------------------|
| 1. Firewood | 2. Crop residue |
| 3. Cowdung cake | 4. Coal/lignite/Charcoal |
| 5. Kerosene | 6. LPG |
| 7. Electricity | 8. Bio gas |
| 9. Any other | 0. No Cooking |

Not to be asked

Date of Interview _____ Interviewer`s name _____

Name of Respondent _____ S.No of Electoral roll _____

AC Name _____ PS Name _____

Official No. of PS. _____