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FORM **LGT-361**
(1-3-74)

U.S. DEPARTMENT OF COMMERCE
SOCIAL AND ECONOMIC STATISTICS
ADMINISTRATION
BUREAU OF THE CENSUS

NATIONAL LONGITUDINAL SURVEYS
SURVEY OF WORK EXPERIENCE
OF MATURE WOMEN
1974

(001) 1 Respondent a noninterview in 1972

METHODS OF LOCATING RESPONDENT WHO HAS MOVED

RECORD OF CALLS

Successful		Unsuccessful			Date	Time	Comments
(002)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	New occupants			a.m.	
(003)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	Neighbors		1.	p.m.	
(004)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	Apartment house manager			a.m.	
(005)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	Post office		2.	p.m.	
(006)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	School			a.m.	
(007)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	Persons listed on information sheet		3.	p.m.	
(008)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	Other - Specify <i>7</i>		4.	a.m.	
						p.m.	

RECORD OF INTERVIEW

Date completed			Method of interview		Length of interview	Interviewed by
Month	Day	Year	(010) 1 <input type="checkbox"/> Telephone 2 <input type="checkbox"/> Personal visit		(011) Minutes	

NONINTERVIEW REASON

- (012) Unable to contact respondent - Specify _____
- 6 Temporarily absent - Give return date _____
- 8 Institutionalized - Specify type _____
- 9 Refused _____
- 10 Deceased _____
- 11 Other - Specify _____

State/county	<i>If respondent has moved, enter new address</i>			
(013)	1. Number and street			
PSU				
(014)				
SMSA	2. City	3. County	4. State	5. ZIP code
(015)				

1. What were you doing most of LAST WEEK – working, looking for work, or something else?

- (016) 1 WK – Working – SKIP to 2b
 2 J – With a job but not at work
 3 LK – Looking for work
 4 S – Going to school
 5 KH – Keeping house
 6 U – Unable to work – SKIP to 5a
 7 OT – Other – Specify ➤

2a. Did you do any work at all LAST WEEK, not counting work around the house? (Note: If farm or business operator in household, ask about unpaid work.)

- (017) 1 Yes – ASK 2b
 2 No – SKIP to 3

b. How many hours did you work LAST WEEK at all jobs?

(018) _____ Hours – SKIP to 6a

3. Did you have a job (or business) from which you were temporarily absent or on layoff LAST WEEK?

- (019) 1 No – ASK 4a
 2 Yes, on layoff
 3 Yes, new job to begin within 30 days } SKIP to 4b
 4 Yes, other – SKIP to 6a

4a. Have you been looking for work during the past 4 weeks?

- (020) 1 Yes – ASK 4b
 2 No – SKIP to 5a

b. Is there any reason why you could not take a job LAST WEEK?

- (021) 1 No
 Yes
 2 Already had a job
 3 Temporary illness
 4 Going to school
 5 Other – Specify ➤

5a. When did you last work at a regular job or business, either full time or part time?

- Date of last interview or later (item 25R on Information Sheet, page 7) – Specify ➤
 (022)

Month	Day	Year
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 – ASK 5b
 2 “Unable” in item 1 and “Unable” in item 26R on the Information Sheet – SKIP to 18, page 5
 3 All others – Mark the “None” box in item 10 and SKIP to item 12

b. Why did you leave that job?

(023)

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6a. For whom did you (last) work? (Name of company, business, organization or other employer)

b. What kind of business or industry is this? (For example: TV and radio manufacturer, retail shoe store, State Labor Department, farm)

(024)

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c. Were you –

- (025) 1 P – An employee of a PRIVATE company, business, or individual for wages, salary, or commissions?
 2 G – A GOVERNMENT employee (Federal, State, county, or local)?
 3 O – Self-employed in your OWN business, professional practice, or farm? (If not a farm)
 Is this business incorporated?
 4 Yes 5 No
 6 WP – Working WITHOUT PAY in family business or farm?

d. What kind of work were you doing? (For example: registered nurse, high school English teacher, waitress)

(026)

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e. What were your most important activities or duties? (For example: typed, kept account books, filed, sold millinery, operated business machine, cleaned buildings)

f. When did you start working for (Entry in 6a)?

(027)

Month	Day	Year
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<p>CHECK ITEM A (Refer to item 6c)</p> <p>(028) 1 <input type="checkbox"/> "P" or "G" in item 6c – ASK 7 2 <input type="checkbox"/> "O" or "WP" in item 6c – SKIP to 8</p>	<p>11. During the weeks that you worked, how many hours per week did you usually work?</p> <p>(037) _____ Hours per week</p>
<p>7. Altogether, how much do (did) you usually earn at this job before deductions?</p> <p>(029) \$ _____ . _____ per hour (Dollars) (Cents)</p> <p>OR</p> <p>(030) \$ _____ . 00 per ➤ (Dollars only)</p> <p>(031) 2 <input type="checkbox"/> Day 3 <input type="checkbox"/> Week 4 <input type="checkbox"/> Biweekly 5 <input type="checkbox"/> Month 6 <input type="checkbox"/> Year 7 <input type="checkbox"/> Other – Specify _____</p>	<p>CHECK ITEM D (Refer to item 10)</p> <p>(038) 1 <input type="checkbox"/> 52 weeks in 10 – SKIP to Check Item F 2 <input type="checkbox"/> 1–51 weeks in 10 – ASK 12</p>
<p>8. How many hours per week do (did) you usually work on this job?</p> <p>(032) _____ Hours</p>	<p>12. You said you worked (Entry in 10) weeks in the last 12 months. How many of the remaining (52 minus entry in item 10) weeks were you looking for work or on layoff from a job?</p> <p>(039) _____ Weeks 00 <input type="checkbox"/> None</p>
<p>CHECK ITEM B (Refer to item 5a)</p> <p>(033) 1 <input type="checkbox"/> Entry in item 5a (date) – SKIP to 10 2 <input type="checkbox"/> Item 5a blank (date) – Fill Check Item C</p>	<p>CHECK ITEM E (Refer to items 10 and 12)</p> <p>(040) 1 <input type="checkbox"/> All weeks accounted for (Item 10 + item 12 = 52 weeks) – SKIP to Check Item F 2 <input type="checkbox"/> Some weeks not accounted for – ASK 13</p>
<p>CHECK ITEM C (Refer to 27R, page 7 and item 6a)</p> <p>(034) 1 <input type="checkbox"/> 27R has an employer name and this same employer is NOT entered in 6a – ASK 9 2 <input type="checkbox"/> All others – SKIP to 10</p>	<p>13. What was the main reason you were not working or looking for work during the remaining weeks in the last 12 months?</p> <p>(041) 1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Own illness 3 <input type="checkbox"/> Child care problems 4 <input type="checkbox"/> Pregnancy 5 <input type="checkbox"/> Layoff 6 <input type="checkbox"/> Labor dispute 7 <input type="checkbox"/> Did not want to work 8 <input type="checkbox"/> Vacation 9 <input type="checkbox"/> No suitable jobs available, would not have done any good to look 0 <input type="checkbox"/> Other – Specify ➤ _____</p>
<p>9. When we last talked to you, you were working for (Name of employer entered in item 27R). Why did you happen to leave that job?</p> <p>(035) </p>	<p>CHECK ITEM F (Refer to items 1, 2a and 3)</p> <p>(042) 1 <input type="checkbox"/> Labor Force Group A ("WK" or "J" in 1, or "Yes" in 2a or "Yes – other" in 3) – SKIP to 14b 2 <input type="checkbox"/> All others – ASK 14a</p>
<p>10. In the last 12 months, how many different weeks did you work altogether? Count any weeks in which you did any work at all and weeks in which you were on paid vacation or paid sick leave.</p> <p>(036) _____ Weeks – ASK 11 00 <input type="checkbox"/> None – SKIP to 12</p>	

14a. If you were offered a job by some employer in THIS AREA, do you think you would take it?

- 043 1 Yes, definitely
- 2 Yes, if it is something I can do
- 3 Yes, if satisfactory wage
- 4 Yes, if satisfactory location
- 5 Yes, if child care available
- 6 Yes, if husband agrees
- 7 Yes, if other - Specify →

- 8 No, definitely not
- 9 No, health won't permit
- 10 No, don't want to work (no need to)
- 11 No, husband doesn't want me to
- 12 No, too busy with home and/or family
- 13 No, other - Specify →

SKIP to 15a

b. If, by some chance, you (and your husband) were to get enough money to live comfortably without working, do you think you would work anyway?

- 044 1 Yes
- 2 No
- 3 Undecided

15a. Do you have a health problem or condition that limits in any way the amount or kind of work you can do?

- 045 1 Yes
- 2 No

b. Do you have any health problem or condition that limits in any way the amount or kind of housework you can do?

- 046 1 Yes
- 2 No

16a. In the past 12 months did you do any unpaid volunteer work?

- Yes - How many weeks? → } ASK 16b
- 047 _____ Weeks
- 00 No - SKIP to 18

b. On the average, how many hours per week did you do volunteer work during these weeks?

- 048 _____ Hours per week

17a. What organization did you work for?

(If more than one organization, ask about the one for which she worked the most weeks.)

- 049 1 Hospital or clinic
- 2 School
- 3 Church
- 4 Political organization
- 5 Groups such as Community Chest, United Fund, Heart Fund
- 6 Boy Scouts, Girl Scouts, Little League, etc.
- 7 Civic or community action
- 8 Social and welfare
- 9 Other - Specify →

b. Why did you volunteer?

(Probe for three reasons)

050 _____

051 _____

052 _____

Notes

18. What are the names of all family members who are living in your home?

Line number	Name	What is . . . 's relationship to you? <i>Example: husband, son, mother, father-in-law, brother, etc.</i>	How old was . . . on APRIL 1, 1974?	Persons 6-24 years old		How many weeks did . . . work full time or part time in the last twelve months (NOT counting work around the house)?	Persons 14 years old and older
				Was . . . enrolled in school at any time in the last twelve months? Circle 1 - Yes 2 - No	e.		
a.		Respondent	d.				
1							
2		(053)		(054) 1 2	(055)	(056)	(057)
3		(058)		(059) 1 2	(060)	(061)	(062)
4		(063)		(064) 1 2	(065)	(066)	(067)
5		(068)		(069) 1 2	(070)	(071)	(072)
6		(073)		(074) 1 2	(075)	(076)	(077)
7		(078)		(079) 1 2	(080)	(081)	(082)
8		(083)		(084) 1 2	(085)	(086)	(087)
9		(088)		(089) 1 2	(090)	(091)	(092)
10		(093)		(094) 1 2	(095)	(096)	(097)
11		(098)		(099) 1 2	(100)	(101)	(102)
12		(103)		(104) 1 2	(105)	(106)	(107)
13		(108)		(109) 1 2	(110)	(111)	(112)
14		(113)		(114) 1 2	(115)	(116)	(117)
15		(118)		(119) 1 2	(120)	(121)	(122)

19. What is your present marital status?
(If married, refer to item 18, page 5 to determine if husband is present.)

- (123) 1 Married, husband present – ASK 20
 2 Married, husband absent
 3 Widowed
 4 Divorced
 5 Separated
 6 Never married
- } – SKIP to 22

20. Now I would like to ask you a few questions about work around the home. Would you say that – week in and week out – you have the sole responsibility, someone else has the sole responsibility or that you share the responsibility with someone else for:

	Sole responsibility		Shared responsibility	Not applicable
	Respondent	Someone else		
(124) a. Grocery shopping? . . .	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
(125) b. Child care, including helping with children?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
(126) c. Cooking?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
(127) d. Cleaning the dishes after meals?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
(128) e. Cleaning the house? . .	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
(129) f. Washing the clothes? . .	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
(130) g. Yard and home maintenance?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

CHECK ITEM G

(Refer to item 18f, page 5)

- (131) 1 Husband worked less than 52 weeks – ASK 21a
 2 All others – SKIP to 22

21a. You said your husband worked (entry for husband in item 18f) weeks in the last 12 months. How many of the remaining (52 minus entry in item 18f) weeks was he looking for work or on layoff from a job?

- (132) _____ Weeks – ASK 21b
 00 None – SKIP to 22

21b. As a result of your husband's unemployment, did you start working or looking for work?

- (133) 1 Yes
 2 No

c. Did any other family member start working or looking for work?

- (134) 1 Yes
 2 No

22. Now I would like to ask a few questions about your income in the last 12 months.

a. How much did you receive from wages, salary, commissions, or tips from all jobs, before deductions for taxes or anything else?

(135) \$ _____ .
 0 None

(Refer to item 19)

Respondent not "Married, husband present" – SKIP to check box above 22c

b. How much did your husband receive from wages, salary, commissions, or tips from all jobs, before deductions for taxes or anything else?

(136) \$ _____ .
 0 None

(Refer to item 18d)

No other family member 14 years or older – SKIP to 22d

c. How much did all other family members living with you receive from wages, salary, commissions, or tips from all jobs before deductions for taxes or anything else?

(137) \$ _____ .
 0 None

22d. During the last 12 months did you receive any income from –
 Working on your own or in your own business, professional practice, partnership or farm?

\$ _____ less \$ _____ =
 (Gross income) (Expenses)

\$ _____
 (Net income)

Yes – How much?

(138) \$ _____ . 00

No

(Refer to item 18d)

No other family member 14 years or older – SKIP to 23

e. Did your husband (or any other family member living with you) receive any income from working in his/her business, professional practice, partnership, or farm?

\$ _____ less _____ =
 (Gross income) (Expenses)

\$ _____
 (Net income)

Yes – How much?

(139) \$ _____ . 00

No

23. Did you or any family members living here receive any income from –

a. Public welfare or public assistance?

Yes – How much?

(140) \$ _____ . 00

No

b. Alimony or child support?

Yes – How much?

(141) \$ _____ . 00

No

23c. Social Security, retirement or Railroad Retirement benefits from the U.S. Government, or any pension provided by a private employer, union, Federal, State or local government?

Yes – How much?

(142) \$ _____ . 00

No

d. Any other income such as interest, dividends, rent, disability income, unemployment compensation, etc?

Yes – How much?

(143) \$ _____ . 00

No

24. When we last interviewed you, you mentioned (Read names from back of Record Card) as persons who will always know where you can be reached even if you moved away. Is this still true?

(If so, verify the addresses and telephone numbers. If not, cross off incorrect information and enter information about other persons who will know the respondent's whereabouts.)

INFORMATION SHEET

25R. Date of last interview

(144) Month Day Year

26R. Labor Force Group at time of last interview

- (145) 1 A
- 2 B
- 3 C
- 4 Unable to work

27R. Name of employer at time of last interview

(152) 1 Not employed at time of last interview

(146)

(149)

(147)

(150)

(148)

(151)