

NOTICE - All information which would permit identification of the individual will be held strictly confidential, will be used only by persons engaged in and for the purposes of the survey and will not be disclosed or released to others for any other purpose.

FORM **LGT-471**
(8-31-76)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

NATIONAL LONGITUDINAL SURVEYS

**SURVEY OF
WORK EXPERIENCE
OF YOUNG WOMEN**

1977

(001) 1 ☐ Respondent a noninterview in 1975

METHODS OF LOCATING RESPONDENT WHO HAS MOVED

RECORD OF CALLS

(Fill only if respondent has MOVED.)

Successful Unsuccessful

- | | | | |
|-------|----------------------------|----------------------------|--|
| (002) | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | New occupants |
| (003) | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | Neighbors |
| (004) | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | Landlord or apartment manager |
| (005) | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | Post Office |
| (006) | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | Telephone company (including directory and information operator) |
| (007) | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | Persons listed on back of record card |
| (008) | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | Other - Specify _____ |

Date	Time	Comments
1.	a.m. p.m.	_____
2.	a.m. p.m.	_____
3.	a.m. p.m.	_____
4.	a.m. p.m.	_____

RECORD OF INTERVIEW

Date completed Month Day Year			Method of interview (010) 1 <input type="checkbox"/> Telephone 2 <input type="checkbox"/> Personal visit 3 <input type="checkbox"/> Both		Length of interview (011) _____ Minutes	Interviewed by
(009)						

NONINTERVIEW REASON

- (012) ☐ Unable to contact respondent - Specify _____
- 6 ☐ Temporarily absent - Give return date _____
- 8 ☐ Institutionalized - Specify name, address and type of institution, and expected date of return _____
- 9 ☐ Refused - Explain _____
- 10 ☐ Deceased _____
- 11 ☐ Other - Specify _____

1977 State/county (013)	If respondent has moved, enter new address			
PSU (014)	1. Number and street			
SMSA (015)	2. City	3. County	4. State	5. ZIP code

1a. Were you enrolled in regular school in January 1976?

- (016) 1 ☐ Yes
2 ☐ No

b. Are you presently attending or enrolled in regular school?

- (017) 1 ☐ Yes — SKIP to 2a
2 ☐ No — ASK 1c

c. When were you last attending or enrolled in regular school?

- (018)

Month	Year
-------	------

 — SKIP to 4a

2a. What grade are you attending? (Mark the appropriate box and circle the appropriate number)

- (019) ☐ High school 1 2 3 4 — Skip to 2d
(020) ☐ College 1 2 3 4 5 6+ — Ask 2b

b. Do you have a scholarship, fellowship, assistantship, grant, loan or other type of financial aid this year?

- (021) 1 ☐ Yes — ASK 2c
2 ☐ No — SKIP to 2d

c. What kind? (Mark all that apply and record the amount received for each)

- (022) 1 ☐ Scholarship or grant
How much per year?

(023) \$. 00

- (024) 2 ☐ Fellowship
How much per year?

(025) \$. 00

- (026) 3 ☐ Assistantship
How much per year?

(027) \$. 00

- (028) 4 ☐ Loan
How much per year?

(029) \$. 00

- (030) 5 ☐ Other — Specify

How much per year?

(031) \$. 00

2d. Are you enrolled as a full-time or part-time student?

- (032) 1 ☐ Full time
2 ☐ Part time

(033)

e. What is the name and address of the school you now attend?

CHECK
ITEM A

(Refer to 31R on Information Sheet)

- (034) 1 ☐ Respondent not enrolled in school at the date of the last interview — ASK 3

2 ☐ All others — SKIP to Check Item B

3. When we last talked with you, you were not enrolled in school. How long had you been out before returning? (Specify in months if less than one year)

(035) _____ Years

OR

(036) _____ Months
(If less than one year)

} SKIP to
Check
Item B

4a. What is the highest grade of school you have completed? (Mark the appropriate box and circle the appropriate number)

(037) ☐ Never attended 0

(038) ☐ Elementary 1 2 3 4
5 6 7 8

(039) ☐ High school 1 2 3

(040) ☐ High school 4 — ASK 4b

(041) ☐ College 1 2 3 4 5 6+ — SKIP to
Check
Item B

} SKIP
to 6a

b. Have you ever enrolled as a regular student in a college or a university?

(042) 1 ☐ Yes

2 ☐ No

} SKIP to 6a

**CHECK
ITEM B**

(Refer to items 1b and 2a or 4a)

- (043) 1 ☐ Respondent currently enrolled and attending college 3+ – ASK 5a
- 2 ☐ Respondent currently not enrolled and has completed college 2+ – ASK 5a
- 3 ☐ All others – SKIP to 6a

5a. Have you received a college degree since
(the date of the last interview – refer to item 29R)?

- (044) 1 ☐ Yes – ASK 5b
- 2 ☐ No – SKIP to 6a

b. What degree was it? (If more than one, ask about the highest degree.)

- (045) 1 ☐ Associate
- 2 ☐ Bachelor's (B.A., B.S., A.B.)
- 3 ☐ Master's (M.A., M.S., M.B.A.)
- 4 ☐ Doctorate (Ph.D., M.D., LL.B., J.D.)
- 5 ☐ RN
- 6 ☐ Other – Specify _____

(046) ☐ ☐

c. In what field did you receive your degree?

6a. Since (the date of the last interview – refer to item 29R) **have you taken any training courses or educational programs of any kind, either on the job or elsewhere, other than regular school or college courses?**

- (047) 1 ☐ Yes – ASK 6b
- 2 ☐ No – SKIP to 7

(If more than one, ask items 6b–6h about the most recent program)

b. Are you still enrolled in this course or program?

- (048) 1 ☐ Yes
- 2 ☐ No

6c. What kind of training course or education program did you take?

- (049) 1 ☐ Professional, technical
- 2 ☐ Managerial
- 3 ☐ Clerical
- 4 ☐ Skilled manual
- 5 ☐ Other – Specify _____

d. Where did (are) you take (taking) this training?

(Specify below and then mark the appropriate box)

- (050) 01 ☐ Business college, technical institute
- 02 ☐ Company training school
- 03 ☐ Correspondence school
- 04 ☐ High school (including night school)
- 05 ☐ Community or junior college
- 06 ☐ Regular four-year college or university
- 07 ☐ Area vocational school
- 08 ☐ Nursing school, hospital, or medical school or college
- 09 ☐ Government agency (Federal, State or local)
- 10 ☐ Other – Specify _____

e. How long did (have) you attend (been attending) this training? (Record time period, and mark "Still attending" box if applicable)

- (051) _____ Months
- (052) 0 ☐ Less than 1 month
- (053) 1 ☐ Still attending

f. How many hours per week did (do) you spend on this training?

- (054) _____ Hours
- (055) 0 ☐ Less than 1 hour

g. Do you use this training on your present job?

- (056) 1 ☐ Yes
- 2 ☐ No
- 3 ☐ Not currently employed

h. Did you receive a certificate for this training?

- (057) 1 ☐ No
- 2 ☐ Yes – Specify _____
- (058) ☐ ☐ _____

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

- (059) 1 ☐ WK – Working – *SKIP to 8b*
 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 11a*
 7 ☐ OT – Other – *Specify* ↙

8a. 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.)

- (060) 1 ☐ Yes – *ASK 8b*
 2 ☐ No – *SKIP to 9*

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

(061) _____ Hours – *SKIP to 12a*

9. Did you have a job or business from which you were temporarily absent or on layoff **LAST WEEK**?

- (062) 1 ☐ No – *ASK 10a*
 2 ☐ Yes, on layoff
 3 ☐ Yes, new job to begin within 30 days
 4 ☐ Yes, other – *SKIP to 12a*
- } *SKIP to 10b*

10a. Have you been looking for work during the past 4 weeks?

- (063) 1 ☐ Yes – *ASK 10b*
 2 ☐ No – *SKIP to 11a*

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

- (064) 1 ☐ No – *GO to 11a*
 Yes – *Why?* ↙
 2 ☐ Already had a job
 3 ☐ Temporary illness
 4 ☐ Going to school
 5 ☐ Child care problems
 6 ☐ Husband (parents) would not permit
 7 ☐ Other family or personal reasons
 8 ☐ Did not want to work
 9 ☐ Other – *Specify* ↙

11a. When did you last work at a regular job or business, either full time or part time?

☐ Date of last interview or later (item 29R on Information Sheet, page 14) – *Specify*

Month	Day	Year

– *ASK 11b*

(065)

- 2 ☐ “Unable” in item 7 and “Unable” in item 30R on the Information Sheet – *SKIP to 20, page 7*
 3 ☐ All others – Mark the “None” box in item 15a and *SKIP to item 16.*

b. Why did you leave that job? (Mark main reason)

Involuntary reason

(066) 01 ☐ Layoff, plant closed, end of temporary job

02 ☐ Discharge

Voluntary reason

(066) 03 ☐ To get married

04 ☐ Pregnancy

05 ☐ Children or child care

06 ☐ Other family reasons

07 ☐ Own health; disability

08 ☐ Dissatisfied with wages

09 ☐ Didn't like work, hours, working conditions

10 ☐ Interpersonal relations

11 ☐ Didn't like job location

12 ☐ Found better job

13 ☐ Moved

14 ☐ Academic reasons (interfered with school, to go to school, etc.)

15 ☐ Other – *Explain* ↙

12a. 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)

(067)

c. Were you –

(068) 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)

Was 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, carpenter)

(069)

e. What were your most important activities or duties?

(For example: typed, kept account books, filed, sold millinery, operated business machine, cleaned buildings, operated foundry machinery)

f. When did you start working for (Entry in 12a)?

(070)

Month	Day	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

**CHECK
ITEM C**

(Refer to item 12c)

- (071) 1 ☐ Box 1, 2 or 4 marked in item 12c – ASK 13a
- 2 ☐ All others – SKIP to 13b

13a. Altogether, how much do (did) you usually earn at this job before deductions?

(072) \$ (Dollars) . (Cents) per hour

OR

(073) \$ (Dollars only) . 00 per

(074) 2 ☐ Day

3 ☐ Week

4 ☐ Biweekly

5 ☐ Month

6 ☐ Year

7 ☐ Other – Specify _____

b. How many hours per week do (did) you usually work on this job?

(075) _____ Hours

c. Are (Were) your wages (salary) on this job set by a collective bargaining agreement between your employer and a union or employee association?

(076) 1 ☐ Yes – ASK 13d

2 ☐ No – SKIP to Check Item D-1

d. What is the name of the union or employee association?

(077)

e. Are (Were) you a member of that union or employee association?

(078) 1 ☐ Yes

2 ☐ No

**CHECK
ITEM
D-1**

(Refer to 32R on Information Sheet)

(079) 1 ☐ Employer name entered in 32R – GO to Check Item D-2

2 ☐ Not employed at time of last interview (Box 1 marked in 32R) – SKIP to 15a

**CHECK
ITEM D-2**

(Refer to 32R on Information
Sheet and to item 12a)

- (080) 1 ☐ Employer name in 32R is the same as
the employer in 12a – *SKIP* to 15a
- 2 ☐ Employer name in 32R is different
from the employer in 12a – *ASK* 14a

**14a. When we last talked to you, you were
working for** (Name of employer entered
in item 32R). **When did you leave
that job?**

(081)

Month	Day	Year

 – *ASK* 14b

(082) 0 ☐ Still working there – *SKIP* to 15a

b. Why did you happen to leave that job? (Mark main
reason)

Involuntary reason

- (083) 01 ☐ Layoff, plant closed, end of
temporary job
- 02 ☐ Discharge

Voluntary reason

- (083) 03 ☐ To get married
- 04 ☐ Pregnancy
- 05 ☐ Children or child care
- 06 ☐ Other family reasons
- 07 ☐ Own health; disability
- 08 ☐ Dissatisfied with wages
- 09 ☐ Didn't like work, hours,
working conditions
- 10 ☐ Interpersonal relations
- 11 ☐ Didn't like job location
- 12 ☐ Found better job
- 13 ☐ Moved
- 14 ☐ Academic reasons (interfered
with school, to go to school, etc.)
- 15 ☐ Other – *Explain*

**15a. 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.**

(084) _____ Weeks – *ASK* 15b

00 ☐ None – *SKIP* to 16

**15b. During the weeks that you worked, how many
hours per week did you usually work?**

(085) _____ Hours per week

**CHECK
ITEM E**

(Refer to item 15a)

- (086) 1 ☐ 52 weeks in 15a – Mark “None” in
16 and *SKIP* to
Check Item G
- 2 ☐ 1–51 weeks in 15a – *ASK* 16

16. You said you worked (Entry in 15a) **weeks in
the last 12 months.**

How many of the remaining (52 minus entry in
item 15a) **weeks were you looking for work or
on layoff from a job?**

(087) _____ Weeks

00 ☐ None

**CHECK
ITEM F**

(Refer to items 15a and 16)

- (088) 1 ☐ “None” in item 15a AND
“None” in item 16 – *ASK* 17
- 2 ☐ Entry in item 15a + entry in
item 16 = 1–51 weeks – *ASK* 17
- 3 ☐ Entry in item 15a + entry
in item 16 = 52 weeks – *SKIP* to Check
Item G

**17. What was the main reason you were not working or
looking for work during the remaining weeks in the
last 12 months?** (Mark only one box)

- (089) 01 ☐ Own illness
- 02 ☐ School
- 03 ☐ Got married
- 04 ☐ Child care problems
- 05 ☐ Pregnancy
- 06 ☐ Husband (parents) would
not permit
- 07 ☐ Other family or personal
reasons
- 08 ☐ Believed no work available
- 09 ☐ Did not want to work
- 10 ☐ Layoff
- 11 ☐ Labor dispute
- 12 ☐ Other – *Specify*

**CHECK
ITEM G**

(Refer to items 7, 8a, 9 and 10a)

- (090) 1 ☐ Labor Force Group A ("WK" or "J" in 7, or "Yes" in 8a, or "Yes, other" in 9) – SKIP to 19a
- 2 ☐ Labor Force Group B ("LK" in 7 or "Yes" in 10a) – ASK 18a
- 3 ☐ Labor Force Group C (All others) – ASK 18a

18a. If you were offered a job by some employer in THIS AREA, do you think you would take it?

Yes

- (091) 1 ☐ Definitely
- 2 ☐ If it is something I can do . . .
- 3 ☐ If satisfactory wage
- 4 ☐ If satisfactory location
- 5 ☐ If child care available
- 6 ☐ If husband (parents) agree . . .
- 7 ☐ If other – Specify,
- } ASK 18b

No

- (091) 8 ☐ Health won't permit
- 9 ☐ It will interfere with school . .
- 10 ☐ Husband (parents) don't want me to
- 11 ☐ Too busy with home and/or family
- 12 ☐ Other – Specify,
- } SKIP to 19a

b. How many hours per week would you be willing to work?

(092) _____ Hours

c. What kind of work would it have to be?

(093) ☐ ☐ ☐ ☐

18d. What would the wage or salary have to be?

(094) \$ _____ . _____ per hour
(Dollars) (Cents)

OR

(095) \$ _____ . per
(Dollars only)

- (096) 2 ☐ Day
- 3 ☐ Week
- 4 ☐ Biweekly
- 5 ☐ Month
- 6 ☐ Year
- 7 ☐ Other – Specify _____

19a. Do you have any health problem or physical condition that limits in any way the amount or kind of work you can do?

- (097) 1 ☐ Yes – ASK 19b
- 2 ☐ No – SKIP to 20

b. How long have you been limited in this way?
(Specify number of months if less than a year)

(098) _____ Year(s)

OR

(099) _____ Months (If less than 1 year)

20. What is your relationship to the head of the household?

- (100) 1 ☐ Respondent is head
- 2 ☐ Wife of head
- 3 ☐ Sister of head
- 4 ☐ Daughter of head
- 5 ☐ Other – Specify _____

Notes

21. Now I have a few questions about the education and work experience of the other family members living here.

INTERVIEWER — Refer to the Household Record Card. Transcribe the line number (in 21a), name (in 21b), and date of birth (in 21d) for all persons living here who are related to the respondent. Then, ask item 21c and items 21e-k as applicable for all other family members living in the household.

Line number 21a.	Name 21b.	RELATIONSHIP TO RESPONDENT 21c. What is . . . 's relationship to you? <i>Example: husband, son, mother, father-in-law, brother, etc.</i>		Date of birth (Enter two digits each for the month, day and year) 21d.			Age How old was . . . on January 1, 1977? 21e.
				Mo.	Day	Yr.	
		Respondent		(118)			
			(101)	(119)			(136)
			(102)	(120)			(137)
			(103)	(121)			(138)
			(104)	(122)			(139)
			(105)	(123)			(140)
			(106)	(124)			(141)
			(107)	(125)			(142)
			(108)	(126)			(143)
			(109)	(127)			(144)
			(110)	(128)			(145)
			(111)	(129)			(146)
			(112)	(130)			(147)
			(113)	(131)			(148)
			(114)	(132)			(149)
			(115)	(133)			(150)
			(116)	(134)			(151)
			(117)	(135)			(152)

21. (Continued)

Persons 3 years old and older			Persons 14 years old and older								
Is . . . attending or enrolled in school? Circle 1 – Yes 2 – No 21f.	If "Yes" – What grade (year)? If "No" – What is the highest grade (year) . . . ever attended? P – Preschool K – Kindergarten 00 – 36 21g.	Did . . . finish the grade (year)? Circle 1 – Yes 2 – No 21h.	In the past 12 months, how many weeks did . . . work either full- or part-time (NOT counting work around the house)? 21i.	If person worked at all in the past 12 months, ask 21j and 21k. In the weeks that . . . worked, how many hours did . . . usually work per week? 21j.				What kind of work was . . . doing in the past 12 months? (If more than one, record the longest) 21k.			
(153) 2	(170)	(187) 2	(204)	(221)		(238)					
(154) 2	(171)	(188) 2	(205)	(222)		(239)					
(155) 2	(172)	(189) 2	(206)	(223)		(240)					
(156) 2	(173)	(190) 2	(207)	(224)		(241)					
(157) 2	(174)	(191) 2	(208)	(225)		(242)					
(158) 2	(175)	(192) 2	(209)	(226)		(243)					
(159) 2	(176)	(193) 2	(210)	(227)		(244)					
(160) 2	(177)	(194) 2	(211)	(228)		(245)					
(161) 2	(178)	(195) 2	(212)	(229)		(246)					
(162) 2	(179)	(196) 2	(213)	(230)		(247)					
(163) 2	(180)	(197) 2	(214)	(231)		(248)					
(164) 2	(181)	(198) 2	(215)	(232)		(249)					
(165) 2	(182)	(199) 2	(216)	(233)		(250)					
(166) 2	(183)	(200) 2	(217)	(234)		(251)					
(167) 2	(184)	(201) 2	(218)	(235)		(252)					
(168) 2	(185)	(202) 2	(219)	(236)		(253)					
(169) 2	(186)	(203) 2	(220)	(237)		(254)					

**CHECK
ITEM H**

(Refer to items 21c and 21e)

- (255) 1 ☐ Respondent has one or more children under 18 years of age in the household – GO to Check Item I
- 2 ☐ Respondent has no children under 18 years of age in the household – SKIP to 23

**CHECK
ITEM I**

(Refer to Check Item G on page 7)

- (256) 1 ☐ Labor Force Group A marked – ASK 22a
- 2 ☐ Labor Force Group B marked – ASK 22a but use alternate wording
- 3 ☐ Labor Force Group C marked or Check Item G blank – SKIP to 22e

22a. Who usually takes (will take) care of your child (children) while you are working?**Youngest child in each column**

0–2 years old

3–5 years old

6+ years old

☐☐☐

1. In own home by –

(a) Father of child (children) (257) *

1 ☐2 ☐3 ☐

1. (a)

(b) Older brother or sister of child (children) (258) *

1 ☐2 ☐3 ☐

(b)

(c) Other relative (259) *

1 ☐2 ☐3 ☐

(c)

(d) Nonrelative (260) *

1 ☐2 ☐3 ☐

(d)

2. In relative's home (261) *

1 ☐2 ☐3 ☐

2.

3. In nonrelative's home (262) *

1 ☐2 ☐3 ☐

3.

4. Group care center or day care home (such as nursery school or settlement house) other than "regular" school or formal kindergarten –

(a) Public (i.e., government sponsored) (263) *

1 ☐2 ☐3 ☐

4. (a)

(b) Private (264) *

1 ☐2 ☐3 ☐

(b)

5. Child cares for self (without supervision) (265) *

1 ☐2 ☐3 ☐

5.

6. Mother cares for child at work (266) *

1 ☐2 ☐3 ☐

6.

7. Mother works only when child (children) is in school and mother cares for child (children) after school (267) *

1 ☐2 ☐3 ☐

7.

8. Other – Specify

. (268) *

1 ☐2 ☐3 ☐

8.

22. (Continued)

b. What is (would be) the total cost of having (all of) your child (children) cared for while you are working?

(269) \$ _____ . _____ per

(270) 1 ☐ Hour – ASK 22c

2 ☐ Day – ASK 22d

3 ☐ Week

4 ☐ Month

5 ☐ No cost

6 ☐ Other – Specify

SKIP
to
23

c. How many hours per week are (would) these services (be) required?

(271) _____ Hours per week – SKIP to 23

d. How many days per week are (would) these services (be) required?

(272) _____ Days per week – SKIP to 23

e. In the past 12 months, have you been unable to look for a job or to take a job due to a lack of child care arrangements?

(273) 1 ☐ Yes

2 ☐ No

f. If a group care center or day care home were available for your child (children) at no cost to you, do you think you might look for a job right now?

(274) 1 ☐ Yes

2 ☐ No

3 ☐ Depends – Specify

23. Are you now married, widowed, divorced, separated, or never married?

(If married, refer to 21c on page 8 to determine if husband is present.)

(275) 1 ☐ Married, husband listed in item 21 – GO to Check Item J

2 ☐ Married, husband not listed in item 21

3 ☐ Widowed

4 ☐ Divorced

5 ☐ Separated

6 ☐ Never married

SKIP to 26

**CHECK
ITEM J**

(Refer to item 21g, page 9)

(276) 1 ☐ Husband attends or has attended college – ASK 24a

2 ☐ Husband never attended college – SKIP to Check Item K

24a. Has your husband ever received a college degree?

(277) 1 ☐ Yes – ASK 24b

2 ☐ No – SKIP to Check Item K

b. What degree did he receive? (If more than one degree received, record the highest degree)

(278) 1 ☐ Associate

2 ☐ Bachelor's (B.A., B.S., A.B.)

3 ☐ Master's (M.A., M.S., M.B.A.)

4 ☐ Doctorate (Ph.D., M.D., LL.B., J.D.)

5 ☐ Other – Specify _____

c. In what field did he receive his degree? (If more than one degree received, record the field in which the highest degree was received)

(279) _____

**CHECK
ITEM K**

(Refer to item 21i, page 9)

(280) 1 ☐ Husband worked 52 weeks in the last 12 months – SKIP to 26

2 ☐ All others – ASK 25

25. You said your husband worked (entry for husband in item 21i) weeks in the last 12 months.

How many of the remaining (52 minus entry in item 21i) weeks was he looking for work or on layoff from a job?

(281) _____ Weeks

00 ☐ None

26. Now I would like to ask a few questions about your income in the last 12 months.	RESPONDENT	HUSBAND <input type="checkbox"/> Not married
a. How much did you (or your husband) receive from wages, salary, commissions, or tips from all jobs, before deductions for taxes or anything else?	(282) \$ _____ . <input type="text" value="00"/> 0 <input type="checkbox"/> None	(283) \$ _____ . <input type="text" value="00"/> 0 <input type="checkbox"/> None
b. Did you (or your husband) receive any income from working in your own business, professional practice, partnership or farm? Gross income \$ _____ Less Expenses \$ _____ equal Net income \$ _____	(284) 0 <input type="checkbox"/> No 1 <input type="checkbox"/> Yes — How much? (286) \$ _____ . <input type="text" value="00"/>	(285) 0 <input type="checkbox"/> No 1 <input type="checkbox"/> Yes — How much? (287) \$ _____ . <input type="text" value="00"/>
c. Did you (or your husband) receive any unemployment compensation?	(288) 0 <input type="checkbox"/> No 1 <input type="checkbox"/> Yes (1) How many weeks? (290) _____ (2) How much? (292) \$ _____ . <input type="text" value="00"/>	(289) 0 <input type="checkbox"/> No 1 <input type="checkbox"/> Yes (1) How many weeks? (291) _____ (2) How much? (293) \$ _____ . <input type="text" value="00"/>
d. Did you (or your husband) receive any other income such as rental income, interest or dividends, supplemental unemployment benefits, Supplemental Security Income, income as a result of disability or illness, etc.?	(294) 0 <input type="checkbox"/> No 1 <input type="checkbox"/> Yes — How much? (296) \$ _____ . <input type="text" value="00"/>	(295) 0 <input type="checkbox"/> No 1 <input type="checkbox"/> Yes — How much? (297) \$ _____ . <input type="text" value="00"/>

Notes

**CHECK
ITEM L**

(Refer to items 21c and 21e, page 8)

- (298) 1 ☐ Only respondent (and husband and their children under 14)
listed in item 21 – *SKIP* to 26f
- 2 ☐ Other family members listed in item 21 – ASK 26e

26. (Continued)

e. In the past 12 months, what was the total
income of ALL family members living here?

(299) \$ _____ . 00

f. Did anyone in this family receive any
welfare or public assistance in the last
12 months?

- (300) 1 ☐ Yes – ASK 26g
- 2 ☐ No – *SKIP* to 27a

g. Did anyone in this family receive any
food stamp benefits in the last
12 months?

- (301) 1 ☐ Yes
- 2 ☐ No

Notes

27a. Now I would like to talk to you about your future job plans.
What kind of work would you like to be doing when you are 35 years old?

- (302) 1 ☐ Married, keeping house, raising a family — ASK 27b
2 ☐ Same as present job
3 ☐ Don't know } SKIP to 28

(303)

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_____ } SKIP to 28

b. Sometimes women decide to work after they have been married a while. If you were to work, what kind of work would you prefer?

- (304) 1 ☐ Same as present (last) job
2 ☐ Don't know
3 ☐ Don't plan to work
4 ☐ Different from present — Specify ↙

(305)

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28. 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.)

Notes

INFORMATION SHEET

29R. Date of last interview

(306)

Month	Day	Year
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30R. Labor Force Group at time of last interview

- (307) 1 ☐ A
2 ☐ B
3 ☐ C
4 ☐ Unable to work

31R. School enrollment status at time of last interview

- (308) 1 ☐ Enrolled
2 ☐ Not enrolled

32R. Name of employer at time of last interview

- (309) 1 ☐ Not employed at time of last interview

1968 State/county codes for 1975 noninterviews

(310)

Number of family members

(311)

(312)

(313)

(314)

(315)

(316)

(317)

(318)

NOTES