

NOTICE - Your report to the Census Bureau is confidential by law (Title 13, U.S. Code). It may be seen only by sworn Census employees and may be used only for statistical purposes.

FORM LGT-151
(4-20-71)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

**NATIONAL LONGITUDINAL SURVEYS
SURVEY OF WORK EXPERIENCE
OF MATURE MEN**

1971

001 1 Respondent a noninterview in 1969 - GO to page 35

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		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		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		p.m.	
008 1 <input type="checkbox"/>	2 <input type="checkbox"/>	Other - Specify <i>→</i> _____		a.m.	
				p.m.	

RECORD OF INTERVIEW			
Date completed Month / Day / Year	Interview time		Interviewed by
	Began	Ended	
009 _____	a.m.	a.m.	
010 _____ Length of interview (minutes)	p.m.	p.m.	

NONINTERVIEW REASON	
011 <input type="checkbox"/> Unable to contact respondent - Specify _____	
6 <input type="checkbox"/> Temporarily absent - Give return date _____	
8 <input type="checkbox"/> Institutionalized - Specify type _____	
9 <input type="checkbox"/> Refused _____	
0 <input type="checkbox"/> Deceased _____	
A <input type="checkbox"/> Other - Specify _____	

TRANSCRIPTION FROM HOUSEHOLD RECORD CARD		
Item 13 - Marital status of respondent		
012 1 <input type="checkbox"/> Married, spouse present	3 <input type="checkbox"/> Widowed	5 <input type="checkbox"/> Separated
2 <input type="checkbox"/> Married, spouse absent	4 <input type="checkbox"/> Divorced	6 <input type="checkbox"/> Never married

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

I. CURRENT LABOR FORCE STATUS AND WORK HISTORY

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 R – Retired
 6 U – Unable to work – SKIP to 5
 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.)

(019) 1 Yes 2 No – SKIP to 3a

(If "J" in 1, SKIP to b.)

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

(024) 1 Yes 2 No – SKIP to 4a

2b. How many hours did you work LAST WEEK at all jobs?

(020) _____ Hours

3b. Why were you absent from work LAST WEEK?

(025) 1 Own illness
 2 On vacation
 3 Bad weather
 4 Labor dispute
 5 New job to begin within 30 days – } ASK 4c and 4d (2)
 6 Temporary layoff (under 30 days)
 7 Indefinite layoff (30 days or more or no definite recall date) } ASK 4d (3)
 8 Other – Specify →

2c. Do you USUALLY work 35 hours or more a week at this job?

(017) 1 Yes – What is the reason you worked less than 35 hours LAST WEEK?
 2 No – What is the reason you USUALLY work less than 35 hours a week?

CHECK ITEM A

Respondent worked –

(021) 1 49 hours or more – SKIP to 6a and enter job worked at last week
 2 1–34 hours – ASK c
 3 35–48 hours – ASK d

2d. Did you lose any time or take any time off LAST WEEK for any reason such as illness, holiday, or slack work?

Yes – How many hours did you take off?
 (022) _____ Hours

No

(Correct 2b if lost time not already deducted; if 2b reduced below 35, fill 2c, otherwise SKIP to 6.)

3c. Are you getting wages or salary for any of the time off LAST WEEK?

(026) 1 Yes
 2 No
 3 Self-employed

(Mark the appropriate reason)

(018) 1 Slack work
 2 Material shortage
 3 Plant or machine repair
 4 New job started during week
 5 Job terminated during week
 6 Could find only part-time work
 7 Holiday (legal or religious)
 8 Labor dispute
 9 Bad weather
 10 Own illness
 11 Illness of family member
 12 On vacation
 13 Too busy with school, personal business, etc.
 14 Did not want full-time work
 15 Full-time work week under 35 hours
 16 Other reason – Specify →

2e. Did you work any overtime or at more than one job LAST WEEK?

Yes – How many extra hours did you work?
 (023) _____ Hours

No

(Correct 2b if extra hours not already included and SKIP to 6a.)

3d. Do you usually work 35 hours or more a week at this job?

(027) 1 Yes
 2 No

(SKIP to 6a and enter job held last week.)

(SKIP to 6a and enter job worked at last week.)

Notes

1. CURRENT LABOR FORCE STATUS AND WORK HISTORY - Continued

(If "LK" in 1, SKIP to b)

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

028 1 Yes
 2 No - SKIP to 5

b. What have you been doing in the last 4 weeks to find work?

(Mark all methods used; do not read list)

029 0 Nothing - SKIP to 5

Checked with {
 1 State employment agency
 2 Private employment agency
 3 Employer directly
 4 Friends or relatives

5 Placed or answered ads
 6 Other - Specify - e.g. MDTA, union or professional register, etc.

c. Why did you start looking for work? Was it because you lost or quit a job at that time (pause) or was there some other reason?

030 1 Lost job
 2 Quit job
 3 Wanted temporary work
 4 Health improved
 5 Other - Specify

d.(1) How many weeks have you been looking for work?
(2) How many weeks ago did you start looking for work?
(3) How many weeks ago were you laid off?

031 _____ Weeks

e. Have you been looking for full-time or part-time work?

032 1 Full-time
 2 Part-time

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

033 Yes → {
 1 Already has a job
 2 Temporary illness
 3 Going to school
 4 Other - Specify

5 No

g. When did you last work at a regular job or business lasting two consecutive weeks or more, either full-time or part-time?

Date of last interview or later (item 116R on Information Sheet) - Specify

034

Month	Day	Year

 -SKIP to 14a on page 7

2 All others - SKIP to 15a on page 7

5. When did you last work at a regular job or business lasting two consecutive weeks or more, either full-time or part-time?

Date of last interview or later (item 116R on Information Sheet) - Specify

035

Month	Day	Year

 -SKIP to 14a on page 7

2 Before date of last interview (item 116R on Information Sheet) and "unable" now and "unable" in item 113R on the Information Sheet - SKIP to 38 on page 12

3 All others - SKIP to 15a on page 7

036 DESCRIPTION OF JOB OR BUSINESS

6a.(1) For whom did you work? (Name of company, business, organization or other employer)

(2) Is this the full and complete name of the company?
 Yes
 No - What is the full and complete name?

(3) Do you ever refer to the company by any other name?
 Yes - What is that name?

 No

(4) To the best of your knowledge, has the name of the company changed in the past five years?
 Yes - What was the name?

 No

037

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b. In what city and State is . . . located?

_____ City _____ State

038

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

d. Were you -

039 10 P - An employee of a PRIVATE company, business, or individual for wages, salary, or commissions?
 20 G - A GOVERNMENT employee (Federal, State, county, or local)?
 30 O - Self-employed in your OWN business, professional practice, or farm?
 (If not a farm)
 Is this business incorporated?
 31 Yes 32 No

40 WP - Working WITHOUT PAY in family business or farm?

040

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e. What kind of work were you doing? (For example: electrical engineer, waiter, stock clerk, farmer)

f. What were your most important activities or duties?
 (For example: selling cars, operating printing press, finishing concrete, cleaning buildings)

g. What was your job title?

h. When did you start working for (entry in 6a)?

041

Month	Day	Year

I. CURRENT LABOR FORCE STATUS – Continued

<p>8a. How long does it usually take you to get to work?</p>	<p>8a. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>(059) _____ Hours _____ Minutes</p>
<p>b. What means of transportation do you usually use to get to work?</p> <p>(Mark as many boxes as apply)</p> <p>If "Other," specify here → _____</p>	<p>b. (060) 1 <input type="checkbox"/> Own auto – ASK c</p> <p>* 2 <input type="checkbox"/> Ride with someone else } SKIP to d</p> <p>3 <input type="checkbox"/> Bus or streetcar</p> <p>4 <input type="checkbox"/> Subway or elevated</p> <p>5 <input type="checkbox"/> Railroad</p> <p>6 <input type="checkbox"/> Taxicab</p> <p>7 <input type="checkbox"/> Walk only } SKIP to Check Item C</p> <p>8 <input type="checkbox"/> Other</p>
<p>c.(1) What is the total round trip cost of any parking fees or tolls you have to pay when you drive your own auto?</p>	<p>c. (1) (061) \$ _____ · _____ per: →</p> <p>(Dollars) (Cents)</p> <p>(062) 0 <input type="checkbox"/> No cost</p> <p>1 <input type="checkbox"/> Day</p> <p>2 <input type="checkbox"/> Week</p> <p>3 <input type="checkbox"/> Month</p>
<p>(2) How many miles do you go by auto round trip?</p>	<p>(2) (063) _____ Miles</p>
<p><input type="checkbox"/> Only box 1 marked in b – SKIP to Check Item C</p> <p><input type="checkbox"/> Box 1 and any of boxes 2–6 marked in b – ASK d</p> <p>d. What is the total cost of the round trip by (means of transportation in b other than own auto)?</p>	<p>d. (064) \$ _____ · _____ per: →</p> <p>(Dollars) (Cents)</p> <p>(065) 0 <input type="checkbox"/> No cost</p> <p>1 <input type="checkbox"/> Day</p> <p>2 <input type="checkbox"/> Week</p> <p>3 <input type="checkbox"/> Month</p>

CHECK ITEM C	<p><input type="checkbox"/> Entry in 3b – SKIP to 9d</p> <p>Item 3b is blank, and</p> <p><input type="checkbox"/> Entry in 6d is "P" or "G" – ASK 9a</p> <p><input type="checkbox"/> Entry in 6d is "O" or "WP" – SKIP to 9c</p>
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<p>9a. Did you work for more than one employer last week?</p>	<p>9a. (066) 1 <input type="checkbox"/> Yes – SKIP to 10a</p> <p>2 <input type="checkbox"/> No – ASK b</p>
<p>b. In addition to working for wages and salary did you operate your own farm, business, or profession last week?</p>	<p>b. (067) 1 <input type="checkbox"/> Yes – SKIP to 10a</p> <p>2 <input type="checkbox"/> No – SKIP to d</p>
<p>c. In addition to this work, did you do any work for wages or salary last week?</p>	<p>c. (068) 1 <input type="checkbox"/> Yes – SKIP to 10a</p> <p>2 <input type="checkbox"/> No – ASK d</p>
<p>d. Did you have any other job at which you did not work at all last week?</p>	<p>d. (069) 1 <input type="checkbox"/> Yes – ASK 10a</p> <p>2 <input type="checkbox"/> No – SKIP to 11a</p>

Notes

I. CURRENT LABOR FORCE STATUS AND WORK HISTORY - Continued

10a. For whom did you work in addition to (entry in 6a)?
(Name of company, business organization or other employer)

10a. (070) _____

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

b. (071) _____

c. Were you -

- c. (072)
- 1 P - An employee of a PRIVATE company, business or individual for wages, salary, or commission?
 - 2 G - A GOVERNMENT employee (Federal, State, county or local)?
 - 3 O - Self-employed in your OWN business, professional practice or farm?
 - 4 WP - Working WITHOUT PAY in family business or farm?

d. What kind of work were you doing? (For example: electrical engineer, waiter, stock clerk, farmer)

d. (073) _____

e. What were your most important activities or duties?
(For example: selling cars, operating printing press, finishing concrete, cleaning buildings)

e. _____

f. What was your job title?

f. _____

**CHECK
ITEM D**

- If "P" or "G" in item 10c - ASK g
- If "O" or "WP" in item 10c - SKIP to h

10g. Altogether how much do you usually earn at this job before deductions?

10g. (074) \$ _____ . _____ per: ↗
(Dollars) (Cents)

(075) 1 Hour

(076) \$ _____ . per: ↗
(Dollars only)

(077) 2 Day

3 Week

4 Biweekly

5 Month

6 Year

7 Other - Specify _____

h. How many hours per week do you usually work at this job?

h. (078) _____ Hours per week

i. When did you start working as a (Entry in 10d) for (Entry in 10a)?

i. (079)

Month	Day	Year

11a. Before you began to work as a (Entry in 6e) for (Entry in 6a), did you do any other kind of work for (Entry in 6a)?

- 11a. (080)
- 1 Yes - SKIP to 12a
 - 2 No

b. Excluding paid vacations and paid sick leave, during the time you have worked at this job, were there any full weeks in which you didn't work (since date of last interview)?

- b. Yes - How many weeks? ↗
- (081) _____ Weeks
- 0 No - SKIP to Check Item E

c. Why were you not working during these _____ weeks?

- c. (082)
- 1 Personal, family reasons
 - 2 Own illness
 - 3 Did not want to work
 - 4 Layoff
 - 5 Labor dispute
 - 6 Other

I. CURRENT LABOR FORCE STATUS AND WORK HISTORY – Continued

CHECK ITEM E	Refer to item 6h on page 3. <input type="checkbox"/> Current job started date of last interview or later – SKIP to 13 <input type="checkbox"/> Current job started before date of last interview – SKIP to Check Item L						
12a. When did you start working as a (entry in 6e) for (entry in 6a)? b. Excluding vacations and paid sick leave, during the time you have worked as a (entry in 6e) for (entry in 6a), were there any full weeks in which you didn't work, (since date of last interview)? c. Why were you not working during these _____ weeks?	12a. <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">Month</td> <td style="width: 20px; text-align: center;">Day</td> <td style="width: 20px; text-align: center;">Year</td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table> (083) b. <input type="checkbox"/> Yes – How many weeks? (084) _____ Weeks 0 <input type="checkbox"/> No – SKIP to Check Item F c. (085) 1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Own illness 3 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Layoff 5 <input type="checkbox"/> Labor dispute 6 <input type="checkbox"/> Other – Specify → _____	Month	Day	Year			
Month	Day	Year					
CHECK ITEM F	<input type="checkbox"/> Item 12a is date of last interview or later – ASK 13 <input type="checkbox"/> Item 12a is before date of last interview – SKIP to Check Item L on page 10						
13. Just before you started on this job, was there a period of a week or more in which you were not working?	13. (086) 1 <input type="checkbox"/> Yes – SKIP to 25 2 <input type="checkbox"/> No – SKIP to 16a						
14a. You said you last worked at a regular job on (entry in 4g or 5). Interviewer: Use calendar to determine the number of weeks since respondent last worked. That would be about _____ weeks since you last worked. In how many of these weeks were you looking for work or on layoff from a job?	14a. (1) (087) _____ Weeks since last worked (2) (088) _____ Weeks looking or on layoff						
CHECK ITEM G	<input type="checkbox"/> 14a (1) is equal to 14a (2) – SKIP to 16 <input type="checkbox"/> 14a (1) is greater than 14a (2) – ASK b						
14b. That leaves _____ weeks that you were not working or looking for work. What would you say was the main reason you were not looking for work during that period? If "Other," specify here → _____	14b. (089) _____ Weeks (090) 1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Ill or disabled, unable to work 3 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Retired 5 <input type="checkbox"/> Couldn't find work 6 <input type="checkbox"/> Vacation 7 <input type="checkbox"/> Other } SKIP to 16						
15a. Since (date of last interview) in how many different weeks did you do any work at all? b. Since (date of last interview) have you spent any weeks looking for work or on layoff from a job?	15a. (091) _____ Weeks 0 <input type="checkbox"/> None b. <input type="checkbox"/> Yes – How many weeks? (092) _____ Weeks 0 <input type="checkbox"/> No						
CHECK ITEM H	Interviewer: Use calendar to determine the number of weeks since date of last interview.						
15c. What would you say was the main reason you were not working or looking for work during (the rest of) that time? If "Other," specify here → _____	(1) (093) _____ Weeks since date of last interview (2) (094) _____ Weeks working, on layoff, or looking for work <input type="checkbox"/> (1) is equal to (2) – SKIP to Check Item L on Page 10 <input type="checkbox"/> (1) is greater than (2) – ASK 15c (095) 1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Ill or disabled, unable to work 3 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Retired 5 <input type="checkbox"/> Couldn't find work 6 <input type="checkbox"/> Vacation 7 <input type="checkbox"/> Other } SKIP to Check Item L on Page 10						

I. CURRENT LABOR FORCE STATUS AND WORK HISTORY - Continued

<p>16. Now let's talk about --</p>	<p>The job you worked at before you started to work as a (ENTRY IN 6e OR 16e) for (ENTRY IN 6a OR 16a)</p> <p>The last job you worked at; that is, the one which ended on (ENTRY IN 4g OR 5)</p> <p>a. For whom did you work? (Name of company, business, organization or other employer)</p> <p>b. In what city and State is . . . located?</p> <p>c. What kind of business or industry is this? (For example: TV and radio manufacturer, retail shoe store, State Labor Department, farm)</p> <p>d. Class of worker</p> <p>e. What kind of work were you doing? (For example: stock clerk, high school English teacher, car salesman)</p> <p>f. What were your most important activities or duties? (For example: selling clothing, keeping account books, teaching mathematics, finishing concrete)</p> <p>g. What was your job title?</p>	<p>16a.</p> <p>b.</p> <p>c.</p> <p>d.</p> <p>e.</p> <p>f.</p> <p>g.</p>	<p>(1)</p> <p>(096) <input type="checkbox"/> Same as 6a - SKIP to 16e</p> <p>(097) <input type="checkbox"/> <input type="checkbox"/> City, State</p> <p>(098) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>(099) 1 <input type="checkbox"/> P 2 <input type="checkbox"/> G 3 <input type="checkbox"/> O 4 <input type="checkbox"/> WP</p> <p>(100) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>									
<p>17a. Altogether, how much did you usually earn at this job before all deductions?</p> <p>b. How many hours per week did you usually work at this job?</p>	<p>17a.</p> <p>b.</p>	<p>(101) \$ _____</p> <p>(102) <input type="checkbox"/> per _____</p> <p>(103) _____ Hours</p>										
<p>18a. When did you start working as a (ENTRY IN 16e) for (ENTRY IN 16a)?</p> <p>b. When did you stop working as a (ENTRY IN 16e) for (ENTRY IN 16a)?</p>	<p>18a.</p> <p>b.</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">(104)</td> <td style="width:15%;">Month</td> <td style="width:15%;">Day</td> <td style="width:15%;">Year</td> <td style="width:15%;"></td> </tr> <tr> <td style="text-align: center;">(105)</td> <td>Month</td> <td>Day</td> <td>Year</td> <td>X <input type="checkbox"/> Still working there - SKIP to 20a</td> </tr> </table>	(104)	Month	Day	Year		(105)	Month	Day	Year	X <input type="checkbox"/> Still working there - SKIP to 20a
(104)	Month	Day	Year									
(105)	Month	Day	Year	X <input type="checkbox"/> Still working there - SKIP to 20a								
<p>19a. Why did you happen to leave this job (change the kind of work you were doing)?</p> <p>b. Did you have a new job lined up before you left this one?</p>	<p>19a.</p> <p>b.</p>	<p>(106) <input type="checkbox"/> <input type="checkbox"/></p> <p>(107) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p>										
<p>20a. Excluding paid vacations and paid sick leave, during the time you worked at this job were there any full weeks in which you didn't work on this job (since date of last interview)?</p> <p>b. Why were you not working at this job during these . . . weeks?</p> <p>c. Were you working for someone else during this period(s)?</p>	<p>20a.</p> <p>b.</p> <p>c.</p>	<p><input type="checkbox"/> Yes - How many weeks?</p> <p>(108) _____ Weeks - ASK b</p> <p>0 <input type="checkbox"/> No - SKIP to 21</p> <p>(109) 1 <input type="checkbox"/> Personal, family reasons 4 <input type="checkbox"/> Layoff</p> <p>2 <input type="checkbox"/> Own illness 5 <input type="checkbox"/> Labor dispute</p> <p>3 <input type="checkbox"/> Did not want to work 6 <input type="checkbox"/> Retired</p> <p>7 <input type="checkbox"/> Other - Specify _____</p> <p>(110) 1 <input type="checkbox"/> Yes - GO to next column and record information about this job</p> <p>2 <input type="checkbox"/> No</p>										
<p>21. Did you do any other kind of work for (ENTRY IN 16a) just before (DATE IN 18a)?</p>	<p>21.</p>	<p>(111) 1 <input type="checkbox"/> Yes - GO to next column and record information about this job</p> <p>2 <input type="checkbox"/> No</p>										
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">CHECK ITEM I</td> <td style="width:50%;">Item 18a is: 1. Date of last interview or later 2. Before date of last interview</td> <td style="width:10%;"></td> <td style="width:30%;"></td> </tr> </table>	CHECK ITEM I	Item 18a is: 1. Date of last interview or later 2. Before date of last interview			<p>1.</p> <p>2.</p>	<p><input type="checkbox"/> SKIP to 23</p> <p><input type="checkbox"/> ASK 22</p>						
CHECK ITEM I	Item 18a is: 1. Date of last interview or later 2. Before date of last interview											
<p>22. Have you worked for anyone else (since date of last interview)?</p>	<p>22.</p>	<p>(112) 1 <input type="checkbox"/> Yes - GO to next column and record information</p> <p>2 <input type="checkbox"/> No - SKIP to Check Item L on page 10</p>										
<p>23. While you were working for (ENTRY IN 16a), were you also working for someone else?</p>	<p>23.</p>	<p>(113) 1 <input type="checkbox"/> Yes - GO to next column and record information about simultaneous job</p> <p>2 <input type="checkbox"/> No - ASK 24</p>										
<p>24. JUST before you started working as a (ENTRY IN 16e) for (ENTRY IN 16a) was there a period of a week or more in which you were not working?</p>	<p>24.</p>	<p>(114) 1 <input type="checkbox"/> Yes - ASK 25</p> <p>2 <input type="checkbox"/> No - GO to next column and record information about previous job</p>										
<p>25. When did this period in which you were not working start?</p>	<p>25.</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">(115)</td> <td style="width:15%;">Month</td> <td style="width:15%;">Day</td> <td style="width:15%;">Year</td> </tr> </table> <p>X <input type="checkbox"/> Never worked before</p>	(115)	Month	Day	Year						
(115)	Month	Day	Year									
<p>26a. Interviewer: Determine number of weeks not working. If item 25 is before date of last interview, count only weeks since that time.</p> <p>b. That would be about . . . weeks that you were not working. How many of those weeks were you looking for work or on layoff from a job?</p>	<p>26a.</p> <p>b.</p>	<p>(116) _____ Weeks not working</p> <p>(117) _____ Weeks looking or on layoff</p>										
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">CHECK ITEM J</td> <td style="width:50%;">1. 26a is equal to 26b 2. 26a is greater than 26b</td> <td style="width:10%;"></td> <td style="width:30%;"></td> </tr> </table>	CHECK ITEM J	1. 26a is equal to 26b 2. 26a is greater than 26b			<p>1.</p> <p>2.</p>	<p><input type="checkbox"/> SKIP to Check Item K</p> <p><input type="checkbox"/> ASK 27</p>						
CHECK ITEM J	1. 26a is equal to 26b 2. 26a is greater than 26b											
<p>27. That leaves . . . weeks that you were not working or looking for work. What would you say was the main reason that you were not looking for work during that period?</p>	<p>27.</p>	<p>(118) 1 <input type="checkbox"/> Personal, family reasons 5 <input type="checkbox"/> Couldn't find work</p> <p>2 <input type="checkbox"/> Ill or disabled, unable to work 6 <input type="checkbox"/> Vacation</p> <p>3 <input type="checkbox"/> Did not want to work 7 <input type="checkbox"/> Other - Specify _____</p> <p>4 <input type="checkbox"/> Retired</p>										
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">CHECK ITEM K</td> <td style="width:50%;">1. Item 25 is date of last interview or later 2. Item 25 is before date of last interview</td> <td style="width:10%;"></td> <td style="width:30%;"></td> </tr> </table>	CHECK ITEM K	1. Item 25 is date of last interview or later 2. Item 25 is before date of last interview			<p>1.</p> <p>2.</p>	<p><input type="checkbox"/> GO to next column and record information about previous job</p> <p><input type="checkbox"/> SKIP to Check Item L on page 10</p>						
CHECK ITEM K	1. Item 25 is date of last interview or later 2. Item 25 is before date of last interview											

I. CURRENT LABOR FORCE STATUS AND WORK HISTORY - Continued

	(2)	(3)	(4)
5a.	(119) <input type="checkbox"/> Never worked before - SKIP to Check Item L <input type="checkbox"/> Same as _____ - SKIP to 16e	(142) <input type="checkbox"/> Never worked before - SKIP to Check Item L <input type="checkbox"/> Same as _____ - SKIP to 16e	(165) <input type="checkbox"/> Never worked before - SKIP to Check Item L <input type="checkbox"/> Same as _____ - SKIP to 16e
b.	(120) [][] [][] City, State	(143) [][] [][] City, State	(166) [][] [][] City, State
c.	(121) [][][]	(144) [][][]	(167) [][][]
d.	(122) 1 <input type="checkbox"/> P 2 <input type="checkbox"/> G 3 <input type="checkbox"/> O 4 <input type="checkbox"/> WP	(145) 1 <input type="checkbox"/> P 2 <input type="checkbox"/> G 3 <input type="checkbox"/> O 4 <input type="checkbox"/> WP	(168) 1 <input type="checkbox"/> P 2 <input type="checkbox"/> G 3 <input type="checkbox"/> O 4 <input type="checkbox"/> WP
e.	(123) [][][]	(146) [][][]	(169) [][][]
f.			
g.			
7a.	(124) \$ _____ (125) _____ per _____	(147) \$ _____ (148) _____ per _____	(170) \$ _____ (171) _____ per _____
b.	(126) _____ Hours	(149) _____ Hours	(172) _____ Hours
8a.	(127) Month Day Year	(150) Month Day Year	(173) Month Day Year
b.	(128) Month Day Year X <input type="checkbox"/> Still working there - SKIP to 20a	(151) Month Day Year X <input type="checkbox"/> Still working there - SKIP to 20a	(174) Month Day Year X <input type="checkbox"/> Still working there - SKIP to 20a
9a.	(129) [][][]	(152) [][][]	(175) [][][]
b.	(130) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	(153) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	(176) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
10a.	<input type="checkbox"/> Yes - How many weeks? (131) _____ Weeks - ASK b 0 <input type="checkbox"/> No - SKIP to 21	<input type="checkbox"/> Yes - How many weeks? (154) _____ Weeks - ASK b 0 <input type="checkbox"/> No - SKIP to 21	<input type="checkbox"/> Yes - How many weeks? (177) _____ Weeks - ASK b 0 <input type="checkbox"/> No - SKIP to 21
b.	(132) 1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Own illness 3 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Layoff 5 <input type="checkbox"/> Labor dispute 6 <input type="checkbox"/> Retired 7 <input type="checkbox"/> Other - Specify _____	(155) 1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Own illness 3 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Layoff 5 <input type="checkbox"/> Labor dispute 6 <input type="checkbox"/> Retired 7 <input type="checkbox"/> Other - Specify _____	(178) 1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Own illness 3 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Layoff 5 <input type="checkbox"/> Labor dispute 6 <input type="checkbox"/> Retired 7 <input type="checkbox"/> Other - Specify _____
c.	(133) 1 <input type="checkbox"/> Yes - GO to next column and record information about this job 2 <input type="checkbox"/> No	(156) 1 <input type="checkbox"/> Yes - GO to next column and record information about this job 2 <input type="checkbox"/> No	(179) 1 <input type="checkbox"/> Yes - GO to next column and record information about this job 2 <input type="checkbox"/> No
21.	(134) 1 <input type="checkbox"/> Yes - GO to next column and record information about this job 2 <input type="checkbox"/> No	(157) 1 <input type="checkbox"/> Yes - GO to next column and record information about this job 2 <input type="checkbox"/> No	(180) 1 <input type="checkbox"/> Yes - GO to next column and record information about this job 2 <input type="checkbox"/> No
1.	<input type="checkbox"/> SKIP to 23	<input type="checkbox"/> SKIP to 23	<input type="checkbox"/> SKIP to 23
2.	<input type="checkbox"/> ASK 22	<input type="checkbox"/> ASK 22	<input type="checkbox"/> ASK 22
22.	(135) 1 <input type="checkbox"/> Yes - GO to next column and record information 2 <input type="checkbox"/> No - SKIP to Check Item L on page 10	(158) 1 <input type="checkbox"/> Yes - GO to next column and record information 2 <input type="checkbox"/> No - SKIP to Check Item L on page 10	(181) 1 <input type="checkbox"/> Yes - GO to next column and record information 2 <input type="checkbox"/> No - SKIP to Check Item L on page 10
23.	(136) 1 <input type="checkbox"/> Yes - GO to next column and record information about simultaneous job 2 <input type="checkbox"/> No - ASK 24	(159) 1 <input type="checkbox"/> Yes - GO to next column and record information about simultaneous job 2 <input type="checkbox"/> No - ASK 24	(182) 1 <input type="checkbox"/> Yes - GO to next column and record information about simultaneous job 2 <input type="checkbox"/> No - ASK 24
24.	(137) 1 <input type="checkbox"/> Yes - ASK 25 2 <input type="checkbox"/> No - GO to next column and record information about previous job	(160) 1 <input type="checkbox"/> Yes - ASK 25 2 <input type="checkbox"/> No - GO to next column and record information about previous job	(183) 1 <input type="checkbox"/> Yes - ASK 25 2 <input type="checkbox"/> No - GO to next column and record information about previous job
25.	(138) Month Day Year X <input type="checkbox"/> Never worked before	(161) Month Day Year X <input type="checkbox"/> Never worked before	(184) Month Day Year X <input type="checkbox"/> Never worked before
26a.	(139) _____ Weeks not working	(162) _____ Weeks not working	(185) _____ Weeks not working
b.	(140) _____ Weeks looking or on layoff	(163) _____ Weeks looking or on layoff	(186) _____ Weeks looking or on layoff
1.	<input type="checkbox"/> SKIP to Check Item K	<input type="checkbox"/> SKIP to Check Item K	<input type="checkbox"/> SKIP to Check Item K
2.	<input type="checkbox"/> ASK 27	<input type="checkbox"/> ASK 27	<input type="checkbox"/> ASK 27
27.	(141) 1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Ill or disabled, unable to work 3 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Retired 5 <input type="checkbox"/> Couldn't find work 6 <input type="checkbox"/> Vacation 7 <input type="checkbox"/> Other - Specify _____	(164) 1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Ill or disabled, unable to work 3 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Retired 5 <input type="checkbox"/> Couldn't find work 6 <input type="checkbox"/> Vacation 7 <input type="checkbox"/> Other - Specify _____	(187) 1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Ill or disabled, unable to work 3 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Retired 5 <input type="checkbox"/> Couldn't find work 6 <input type="checkbox"/> Vacation 7 <input type="checkbox"/> Other - Specify _____
1.	<input type="checkbox"/> GO to next column and record information about previous job	<input type="checkbox"/> GO to next column and record information about previous job	<input type="checkbox"/> GO to next column and record information about previous job
2.	<input type="checkbox"/> SKIP to Check Item L on page 10	<input type="checkbox"/> SKIP to Check Item L on page 10	<input type="checkbox"/> SKIP to Check Item L on page 10

II. WORK ATTITUDES

**CHECK
ITEM L**

Respondent is in —

- Labor Force Group A ("WK" or "J" in I or "Yes" in 2a or 3a) — SKIP to Check Item M
- Labor Force Group B ("LK" in I or "Yes" in 4a) — SKIP to 30a
- Labor Force Group C (All others) — ASK 28a

28a. Do you intend to look for work of any kind in the next 12 months?

- 28a. (257) 1 Yes — definitely } ASK b
 2 Yes — probably }
 Maybe — What does it depend on? _____ } SKIP to 29a
 _____ }
 3 No } SKIP to 29a
 4 Don't know }

b. When do you intend to start looking for work?

b. (258) _____ Month

c. What kind of work do you think you will look for?

c. (259)

d. What will you do to find work?
(Mark as many as apply)

- d. (260) * Check with { 1 State employment agency (or counselor)
 2 Private employment agency
 3 Employer directly
 4 Friends or relatives
 5 Place or answer ads
 6 School employment service
 7 Other — Specify _____

29a. Why would you say that you are not looking for work at this time?

- 29a. (261) 1 Personal, family reasons
 2 Health reasons
 3 Does not want to work at this time of year
 4 Retired
 5 Couldn't find work
 6 Believes no work available
 7 Other or no reason

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

- b. (262) 1 Yes, definitely } ASK c
 2 Yes, if it is something I can do }
 3 Yes, if satisfactory wage }
 4 Yes, if satisfactory location }
 5 Yes, if satisfactory hours }
 6 Yes, if other _____ }
 7 No, health won't permit } SKIP to 38 on page 12
 8 No, don't want to work, retired }
 9 No, don't need the money }
 0 No, other _____ }

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

- c. (263) 1 1-4
 2 5-14
 3 15-24
 4 25-34
 5 35-40
 6 41-48
 7 49 or more

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

d. (264)

e. What would the wage or salary have to be?

- e. (265) \$ _____ . _____ per: ➔
 (Dollars) (Cents)
 (266) 1 Hour
 (267) \$ _____ . 00 per: ➔
 (Dollars only)
 (268) 2 Day
 3 Week
 4 Biweekly
 5 Month
 6 Year
 7 Any pay
 8 Other — Specify _____

SKIP to 38, on page 12

II. WORK ATTITUDES - Continued

30a. What type of work are you looking for?

30a. (269)

b. What would the wage or salary have to be for you to be willing to take it?

b. (270) \$ _____ . _____ per: ↘
(Dollars) (Cents)

(271) 1 Hour

(272) \$ _____ . per: ↘
(Dollars only)

(273) 2 Day

3 Week

4 Biweekly

5 Month

6 Year

7 Any pay

8 Other - Specify _____

c. Are there any restrictions, such as hours or location of job that would be a factor in your taking a job?

c. (274) 1 Yes - ASK d
2 No - SKIP to e

d. What are these restrictions?

d. (275) _____

e. If you were offered a job in this area at the same pay as your last job, would you take it?

e. (276) 1 Yes, definitely
2 It depends on type of work
3 It depends if satisfied with company
4 It depends - Other - Specify below ↘
5 No, pay not high enough
6 No, other - Specify ↘

SKIP to 38 on page 12

CHECK ITEM M

Respondent -

- Was in Labor Force Group A in 1969 (I13R on Information Sheet) - SKIP to 32a
- Was in Labor Force Group B in 1969 (I13R on Information Sheet) - SKIP to 33
- Was in Labor Force Group C in 1969 (I13R on Information Sheet) - ASK 31

31. At this time two years ago, you were not looking for work. What made you decide to take a job?

31. (277) 1 Recovered from illness
2 Bored
3 Heard about a job I was qualified for
4 Completed education
5 Needed money
6 Other - Specify _____

SKIP to 33

32a. The last time we talked to you was two years ago. Would you say you like your present job more, less, or about the same as the job you held at that time?

32a. (278) 1 More
2 Less } ASK b
3 Same - SKIP to 33

b. What would you say is the main reason you like your present job (more, less)?

b. (279) _____

33. How do you feel about the job you have now? Do you like it very much, like it fairly well, dislike it somewhat, or dislike it very much?

33. (280) 1 Like it very much
2 Like it fairly well
3 Dislike it somewhat
4 Dislike it very much

34. What are the things you like best about your job?

34. (281) _____

(282) _____

(283) _____

II. WORK ATTITUDES – Continued

35. What are the things about your job that you don't like? 35.

(284)

(285)

(286)

36a. Suppose someone **IN THIS AREA** offered you a job in the same line of work you're in now. How much would the new job have to pay for you to be willing to take it?

(If amount given per hour, record dollars and cents. Otherwise, round to the nearest dollar.)

36a.

(287) \$ _____ . _____ per: ↘
(Dollars) (Cents)

(288) 1 Hour

(289) \$ _____ . per: ↘
(Dollars only)

(290) 2 Day

3 Week

4 Biweekly

5 Month

6 Year

7 Other – Specify _____

(291) 8 I wouldn't take it at any conceivable pay

9 I would take a steady job at same or less pay

10 Would accept job; don't know specific amount

11 Don't know

12 Other

b. If someone **IN THIS AREA** offered you a job at your present rate of pay in a different line of work for which you are qualified, do you think you would take it?

b.

(292) 1 Yes – ASK c

2 No – SKIP to 37

c. What kind of work would you accept?

c.

(293)

37. What if this job was in the same line of work you are in now, but was **IN SOME OTHER PART OF THE COUNTRY** – how much would it have to pay in order for you to be willing to take it?

(If amount given per hour, record dollars and cents. Otherwise, round to the nearest dollar.)

37.

(294) \$ _____ . _____ per: ↘
(Dollars) (Cents)

(295) 1 Hour

(296) \$ _____ . per: ↘
(Dollars only)

(297) 2 Day

3 Week

4 Biweekly

5 Month

6 Year

7 Other – Specify _____

(298) 8 I wouldn't take it at any conceivable pay

9 I would take a steady job at same or less pay

10 Would accept job; don't know specific amount

11 Depends on location, cost of living

12 Don't know

13 Other

38. Now I'd like your opinion about women working. People have different ideas about whether married women should work. Here are three statements about a married woman with children between the ages of 6 and 12. (**HAND CARD TO RESPONDENT.**) In each case, how do you feel about such a woman taking a full-time job outside the home: Is it definitely all right, probably all right, probably not all right, or definitely not all right?

Statements	Definitely all right	Probably all right	Probably not all right	Definitely not all right	No opinion, undecided
a. If it is absolutely necessary to make ends meet	(299) 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b. If she wants to work and her husband agrees	(300) 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
c. If she wants to work, even if her husband does not particularly like the idea	(301) 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

II. WORK ATTITUDES – Continued

39. We would like to find out whether people's outlook on life has any effect on the kind of jobs they have, the way they look for work, how much they work, and matters of that kind. On each of these cards is a pair of statements, numbered 1 or 2. For each pair, please select **ONE** statement which is closer to your opinion. In addition, tell me whether the statement you select is **MUCH CLOSER** to your opinion or **SLIGHTLY CLOSER**.

In some cases you may find that you believe both statements, in other cases you may believe neither one. Even when you feel this way about a pair of statements, select the one statement which is more nearly true in your opinion.

Try to consider each pair of statements separately when making your choices; do not be influenced by your previous choices.

- a. (302) 1 Many of the unhappy things in people's lives are partly due to bad luck. 2 People's misfortunes result from the mistakes they make.

Is this statement much closer or slightly closer to your opinion?

8 Much 9 Slightly

- b. (303) 1 In the long run, people get the respect they deserve in this world. 2 Unfortunately, an individual's worth often passes unrecognized no matter how hard he tries.

Is this statement much closer or slightly closer to your opinion?

8 Much 9 Slightly

- c. (304) 1 Without the right breaks, one cannot be an effective leader. 2 Capable people who fail to become leaders have not taken advantage of their opportunities.

Is this statement much closer or slightly closer to your opinion?

8 Much 9 Slightly

- d. (305) 1 Becoming a success is a matter of hard work; luck has little or nothing to do with it. 2 Getting a good job depends mainly on being in the right place at the right time.

Is this statement much closer or slightly closer to your opinion?

8 Much 9 Slightly

- e. (306) 1 What happens to me is my own doing. 2 Sometimes I feel that I don't have enough control over the direction my life is taking.

Is this statement much closer or slightly closer to your opinion?

8 Much 9 Slightly

- f. (307) 1 When I make plans, I am almost certain that I can make them work. 2 It is not always wise to plan too far ahead, because many things turn out to be a matter of good or bad fortune anyhow.

Is this statement much closer or slightly closer to your opinion?

8 Much 9 Slightly

- g. (308) 1 In my case, getting what I want has little or nothing to do with luck. 2 Many times we might just as well decide what to do by flipping a coin.

Is this statement much closer or slightly closer to your opinion?

8 Much 9 Slightly

II. WORK ATTITUDES – Continued

39h. (309) * 1 Who gets to be boss often depends on who was lucky enough to be in the right place first.

2 Getting people to do the right thing depends upon ability; luck has little or nothing to do with it.

Is this statement much closer or slightly closer to your opinion?

8 Much 9 Slightly

i. (310) * 1 Most people don't realize the extent to which their lives are controlled by accidental happenings.

2 There is really no such thing as "luck."

Is this statement much closer or slightly closer to your opinion?

8 Much 9 Slightly

j. (311) * 1 In the long run, the bad things that happen to us are balanced by the good ones.

2 Most misfortunes are the result of lack of ability, ignorance, laziness, or all three.

Is this statement much closer or slightly closer to your opinion?

8 Much 9 Slightly

k. (312) * 1 Many times I feel that I have little influence over the things that happen to me.

2 It is impossible for me to believe that chance or luck plays an important role in my life.

Is this statement much closer or slightly closer to your opinion?

8 Much 9 Slightly

(313)

Notes

(314)

III. RETROSPECTIVE WORK HISTORY

This is the fourth time over the past five years that we have talked to you about portions of your work experience. Now we'd like you to look back over the whole period and give some of your reactions to it.

**CHECK
ITEM N**

- Respondents with same employer (or self-employed status) as in 1966 (Item 117R is same as 6a(1-4) or 6d) - ASK 40a
- All others - SKIP to 43a, on page 17

<p>40a. Since we first talked with you in June of 1966, have you ever looked for another job except during periods of layoff?</p> <p>b. Would you say that you have looked for another job frequently, occasionally or just once?</p> <p>c. In what year was that (most recent if more than one)?</p> <p>d. Why did you decide to look for another job at that (this) time?</p> <p>e. How did you go about looking? (Mark all methods used; do not read list)</p> <p>f. What kind of work were you looking for?</p> <p>g. Were you looking for work in the same local area as you were living at that time?</p> <p>h. Did you find a job that you could have had?</p> <p>i. What kind of work was it?</p> <p>j. What kind of business or industry was it?</p> <p>k. Where was the job located?</p> <p>l. What would the job have paid?</p> <p>m. How many hours per week would the job have involved?</p> <p>n. Did you accept this job?</p> <p>o. Why did you decide not to take it?</p> <p>p. Why do you think you were unable to find anything?</p>	<p>40a.</p> <p>b.</p> <p>c.</p> <p>d.</p> <p>e.</p> <p>f.</p> <p>g.</p> <p>h.</p> <p>i.</p> <p>j.</p> <p>k.</p> <p>l.</p> <p>m.</p> <p>n.</p> <p>o.</p> <p>p.</p>	<p>(315) 1 <input type="checkbox"/> Yes - ASKb 2 <input type="checkbox"/> No - SKIP to 41a</p> <p>(316) 1 <input type="checkbox"/> Frequently 2 <input type="checkbox"/> Occasionally 3 <input type="checkbox"/> Just once</p> <p>(317) 19 _____ Year</p> <p>(318) [][]</p> <p>(319) [][]</p> <p>(320) Check with { 1 <input type="checkbox"/> State employment agency (or counselor) 2 <input type="checkbox"/> Private employment agency 3 <input type="checkbox"/> Employer directly 4 <input type="checkbox"/> Friends or relatives 5 <input type="checkbox"/> Placed or answered ads 6 <input type="checkbox"/> Other - Specify _____</p> <p>(321) [][][] *</p> <p>(322) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p> <p>(323) 1 <input type="checkbox"/> Yes - ASK i 2 <input type="checkbox"/> No - SKIP to p</p> <p>(324) [][][]</p> <p>(325) [][][]</p> <p>(326) [] _____ County _____ State</p> <p>(327) \$ _____ . _____ per: ↘ (Dollars) (Cents)</p> <p>(328) 1 <input type="checkbox"/> Hour</p> <p>(329) \$ _____ . [00] per: ↘ (Dollars only)</p> <p>(330) 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>(331) _____ Hours per week</p> <p>(332) 1 <input type="checkbox"/> Yes - SKIP to 43a, on page 17 2 <input type="checkbox"/> No - ASK o</p> <p>(333) [][]</p> <p>(334) [][]</p> <p>(335) [][]</p> <p>(336) [][]</p>
--	---	--

SKIP to 43a, on page 17

III. RETROSPECTIVE WORK HISTORY - Continued

41a. Since we first talked with you in June of 1966, has any other employer made you a definite offer of a full-time job that you did not accept?

41 a. Yes - How many times?
 (337) _____ - ASK b.
 No - SKIP to 42a

b. In what year was that (most recent if more than one)?

b. (338) 19____ Year

c. How did you happen to get the offer?

c. (339) 1 Job offered by a friend, relative
 2 Job offered by a business acquaintance
 3 Job offered by a former employer
 4 Other - Specify _____

d. What kind of work was it?

d. (340) [][] [][] [][]

e. What kind of business or industry was it?

e. (341) [][] [][] [][]

f. Was this job located in the same local area as you were living at that time?

f. (342) 1 Yes
 2 No

g. What would the job have paid?

g. (343) \$ _____ . _____ per: ↘
 (Dollars) (Cents)
 (344) 1 Hour
 (345) \$ _____ . 00 per: ↘
 (Dollars only)
 (346) 2 Day
 3 Week
 4 Biweekly
 5 Month
 6 Year
 7 Other - Specify _____

h. How many hours per week would this job have involved?

h. (347) _____ Hours per week

i. Why did you decide not to take it?

i. (348) [][] [][]
 (349) [][] [][] _____ } SKIP to 43a

If item 40a is "Yes" - SKIP to 43a

42a. During this period have you ever seriously thought of looking for another job?

42a. (350) 1 Yes - ASK b
 2 No - ASK d

b. Why would you say you've thought of looking?

b. (351) [][] [][]
 (352) [][] [][] _____

c. Why didn't you actually look for a job?

c. (353) [][] [][]
 (354) [][] [][] _____ } SKIP to 43a

d. Why not?

d. (355) [][] [][]
 (356) [][] [][] _____

III. RETROSPECTIVE WORK HISTORY - Continued

43a. All in all, so far as your work is concerned, would you say that you've progressed during the past five years, moved backward, or just about held your own?

- 43a. (357) 1 Progressed - ASK b
 2 Moved backward - SKIP to c
 3 Held own } SKIP to 44a
 4 Retired }

b. In what way(s) would you say you have progressed?

- b. (358) _____
 (359) _____
 (360) _____
- } SKIP to 44a

c. In what way(s) would you say you have moved backward?

- c. (361) _____
 (362) _____
 (363) _____

44a. During the past five years, do you feel that so far as work is concerned, you have been in any way discriminated against because of your age?

- 44a. (364) 1 Yes - ASK b
 2 No - SKIP to 45a

b. In what way (s)?

- b. (365) _____
 (366) _____
 (367) _____

45a. During that period, do you feel that so far as work is concerned, you have been in any way discriminated against because of race, religion, nationality, or for any other reason?

- 45a. (368) 1 Yes - ASK b and c
 2 No { If Negro, SKIP to 46a
 All others, SKIP to 47

b. For what reason?

- b. (369) 1 Race
 2 Religion
 3 Nationality
 4 Other - Specify _____

c. In what ways have you been discriminated against?

- c. (370) _____
 (371) _____
 (372) _____
- } If Negro, ASK 46a. All others, SKIP to 47.

46a. So far as you know, are there (other) employers in this area who discriminate against Negroes, such as by refusing to hire or promote them?

- 46a. (373) 1 Yes - ASK b
 2 No } SKIP to 47
 3 Don't know }

b. Would you say most employers, many employers, some employers, or few employers in this area discriminate against Negroes?

- b. (374) 1 Most employers
 2 Many employers
 3 Some employers
 4 Few employers

47. Excluding paid vacations and paid sick leave, since June 1966 - in about how many different weeks were you NOT working?

47. (375) _____ Weeks - ASK 48a
 0 None - SKIP to Check Item 0

III. RETROSPECTIVE WORK HISTORY – Continued

<p>48a. How many of these (entry in 47) weeks were you looking for work or on layoff from a job?</p>	<p>48a. (376) _____ Weeks 0 <input type="checkbox"/> None</p>
<p>b. That means there were about (entry in 47 less entry in 48a) weeks since June 1966 that you were not working, or looking for work. Is that correct?</p>	<p>b. (377) _____ Weeks</p> <p>(378) 1 <input type="checkbox"/> Yes – GO to Check Item O 2 <input type="checkbox"/> No – Determine whether 47 or 48a is incorrect and make necessary correction.</p>

CHECK	<input type="checkbox"/> In Labor Force Group A (“WK” or “J” in I or “Yes” in 2a or 3a) – ASK 49
ITEM O	<input type="checkbox"/> All others – SKIP to Check Item P

<p>49. As you look back over the past five years, would you say that –</p>	<p>49.</p>
<p>a. The pressures you feel in your job have increased, decreased, or remained about the same?</p>	<p>49a. (379) 1 <input type="checkbox"/> Increased 2 <input type="checkbox"/> Decreased 3 <input type="checkbox"/> Remained about the same</p>
<p>b. There has been any change in your ability to keep up with the pace of your job?</p>	<p>b. (380) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> Is it easier? 3 <input type="checkbox"/> Is it harder? 4 <input type="checkbox"/> No</p>
<p>c. The amount of fatigue you feel at the end of a work day has increased, decreased, or remained about the same?</p>	<p>c. (381) 1 <input type="checkbox"/> Increased 2 <input type="checkbox"/> Decreased 3 <input type="checkbox"/> Remained about the same</p>

<p>Notes</p>	<p>(382)</p> <hr/> <p>(383)</p>
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IV. PLANS FOR THE FUTURE

CHECK ITEM P	<input type="checkbox"/> Respondent in Labor Force Group A ("WK" or "J" in I or "Yes" in 2a or 3a) – ASK 50a <input type="checkbox"/> All others – SKIP to 51a
<p>50a. Is there a compulsory retirement plan where you work; that is, do you have to stop working at your present job at a certain age?</p> <p>b. At what age?</p> <p>c. Would you work longer than that if you could?</p> <p>d. If there were no compulsory retirement, at what age would you expect to stop working at your regular job?</p> <p>e. Why would you never expect to retire?</p> <p>f. Do you expect to retire before this age?</p>	<p>50a. (384) 1 <input type="checkbox"/> Yes – ASK b 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know } SKIP to 51a</p> <p>b. (385) _____ Age x <input type="checkbox"/> Don't know</p> <p>c. (386) 1 <input type="checkbox"/> Yes – ASK d 2 <input type="checkbox"/> No – SKIP to f</p> <p>d. (387) _____ Age – SKIP to 52a (388) 1 <input type="checkbox"/> Don't plan to stop working – ASK e 2 <input type="checkbox"/> Don't know – SKIP to 52a</p> <p>e. (389) <input type="checkbox"/> _____ SKIP to 52a</p> <p>f. (390) 1 <input type="checkbox"/> Yes – ASK 51a 2 <input type="checkbox"/> No – SKIP to 52a</p>
<p>51a. At what age do you expect to stop working at your (a) regular job?</p> <p>b. Why do you never expect to retire?</p>	<p>51a. (391) _____ Age } SKIP to 52a (392) 1 <input type="checkbox"/> Don't know 2 <input type="checkbox"/> Already stopped – SKIP to Check Item Q 3 <input type="checkbox"/> Don't plan to stop working – ASK b</p> <p>b. (393) <input type="checkbox"/> _____ SKIP to 53a</p>
<p>52a. Have you given any thought to what you will do after you retire from your (a) regular job?</p> <p>b. What do you think you will do? (Mark all that apply)</p> <p>c. What kind of job (business)?</p> <p>d. How many hours a week do you think you will want to work?</p>	<p>52a. (394) 1 <input type="checkbox"/> Yes – ASK b 2 <input type="checkbox"/> No – SKIP to 53a</p> <p>b. (395) 1 <input type="checkbox"/> Travel; visit friends } SKIP to 53a 2 <input type="checkbox"/> Relax; take it easy 3 <input type="checkbox"/> Enjoy a hobby 4 <input type="checkbox"/> Take another job; go into business – ASK c 5 <input type="checkbox"/> Other – Specify _____ SKIP to 53a</p> <p>c. (396) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>d. (397) _____ Hours per week</p>
<p>53a. When you reach retirement age will you be eligible for Social Security or Railroad Retirement benefits?</p> <p>b. How much income per month can you (and your wife) expect from Social Security or Railroad Retirement?</p>	<p>53a. (398) 1 <input type="checkbox"/> Yes – ASK b 2 <input type="checkbox"/> No – SKIP to Check Item Q</p> <p>b. (399) \$ _____ . <input type="text" value="00"/> per month (400) 1 <input type="checkbox"/> The maximum amount 2 <input type="checkbox"/> Don't know</p>
CHECK ITEM Q	<p>Refer to Item I18R on Information Sheet.</p> <input type="checkbox"/> Response in items 50 or 51 is the same as response in 1969 – SKIP to Check Item R <input type="checkbox"/> Response in 1969 was NA – SKIP to Check Item R <input type="checkbox"/> Response in items 50 or 51 is different from response in 1969 – ASK 54

IV. PLANS FOR THE FUTURE - Continued

54. When we talked to you two years ago, you said that you (entry in item 118R on Information Sheet). Is there any particular reason why you've changed your mind?

54. (401)

**CHECK
ITEM R**

- "Already stopped" in 51a - SKIP to Check Item S
- Respondent in Labor Force Group A and "P" or "G" in 6d - ASK 55a
- All others - SKIP to 56

55a. Does your employer or union have a pension plan, other than Social Security or Railroad Retirement, that will provide some income to you when you reach retirement age?

55a. (402) 1 Yes - ASK b
 2 No
 3 Don't know } SKIP to 56

b. If you stay on this job, at what age will you be eligible to receive FULL benefits from this plan?

b. (403) _____ Age } SKIP to e
 (404) 1 Don't know

2 Already eligible - ASK c
 3 Never - SKIP to d

c. At what age did you become eligible?

c. (405) _____ Age - SKIP to k

d. Why will you never be eligible for FULL benefits?

d. (406) 1 Haven't worked at job long enough
 2 Will get lump sum
 3 Other reasons related to company rules
 4 Other - Specify _____
 5 Don't know

e. Is there any earlier age at which you would be eligible to receive REDUCED benefits from this plan?

e. Yes - At what age?
 (407) _____ Age - SKIP to g
 (408) 1 No } SKIP to h
 2 Don't know
 3 Already eligible - ASK f
 4 Never - SKIP to h

f. At what age did you become eligible?

f. (409) _____ Age

g. How much income per month would you be eligible for if you were to receive reduced benefits?

g. (410) \$ _____ . per month

h. If you left this job today, could you later start drawing a benefit?

h. (411) 1 Yes - ASK i
 2 No - SKIP to l

i. At what age could you draw this benefit?

i. (412) _____ Age

j. Under these circumstances, how much income per month would you be eligible for?

j. (413) \$ _____ . per month - SKIP to l

k. If you were to retire today, how much income per month would you get under this pension plan?

k. (414) \$ _____ . per month - SKIP to 56

Never eligible in 55b - SKIP to 56

l. If you were to continue to work with your present employer until you are eligible for full retirement benefits, how much income per month would you get under this pension plan?

l. (415) \$ _____ . per month
 x Don't know

If the answer to 51a was "Don't plan to stop working" - SKIP to question 59

56. Some people look forward to retirement because they wish to have more time to do things; others think they might be bored after they retire. How do you feel about it?

56. (416) 1 Look forward to it
 2 Bored after they retire
 3 Other - Specify _____

IV. PLANS FOR THE FUTURE - Continued

Respondent not married - SKIP to 58

<p>57. Would your wife like for you to retire as soon as possible or would she prefer for you to keep working?</p>	57.	(417)	<p>1 <input type="checkbox"/> Retire as soon as possible 2 <input type="checkbox"/> Keep working 3 <input type="checkbox"/> Do whatever I want to 4 <input type="checkbox"/> Other - Specify _____</p>
--	-----	-------	---

<p>58. After you retire, do you think you will have financial problems?</p>	58.	(418)	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>
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<p>59. When people retire from their jobs they may receive income from several sources. When you reach retirement age about how much income per month or per year would you get from all sources if you did not work at all? Include even such things as income from interest on savings accounts and annuities.</p>	59.	(419)	<p>\$ _____ . <input style="width: 40px; text-align: center;" type="text" value="00"/> per month or ↗</p>
		(420)	<p>\$ _____ . <input style="width: 40px; text-align: center;" type="text" value="00"/> per year</p>

<p>60a. Among your friends, is there anyone who is retired?</p>	60a.	(421)	<p>1 <input type="checkbox"/> Yes - ASK b 2 <input type="checkbox"/> No - SKIP to 61</p>
---	------	-------	---

<p>b. Overall, how happy would you say he (they) is (are) with retirement - very happy, fairly happy, somewhat unhappy, or very unhappy?</p>	b.	(422)	<p>1 <input type="checkbox"/> Very happy 2 <input type="checkbox"/> Fairly happy 3 <input type="checkbox"/> Somewhat unhappy 4 <input type="checkbox"/> Very unhappy</p>
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<p>61. Considering your circle of friends, would you say that most of them will retire from their regular jobs at age 65, before 65, or after 65?</p>	61.	(423)	<p>1 <input type="checkbox"/> 65 2 <input type="checkbox"/> Before 65 3 <input type="checkbox"/> After 65</p>
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<p><input type="checkbox"/> If elderly relative in room, mark the "Elderly relative in room" box and go to Check Item S.</p> <p>62. At what age do you think you will have no dependents (other than your wife)?</p>	62.	(424)	<p>_____ Age</p>
		(425)	<p>1 <input type="checkbox"/> Elderly relative in room 2 <input type="checkbox"/> No dependents now 3 <input type="checkbox"/> Don't know 4 <input type="checkbox"/> Never</p>

CHECK ITEM S	<p><input type="checkbox"/> Respondent has son(s) in household - ASK 63a</p> <p><input type="checkbox"/> All others - SKIP to Check Item U</p>
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<p>63a. Is (are any of) your son(s) currently attending or enrolled in school?</p>	63a.	(426)	<p>1 <input type="checkbox"/> Yes - ASK 63b 2 <input type="checkbox"/> No - SKIP to Check Item U</p>
--	------	-------	---

<p>b. Let's talk about your (youngest) son in school. How much education would you like him to get?</p>	b.	(427)	<p>1 <input type="checkbox"/> Less than High school 12 2 <input type="checkbox"/> High school 12 3 <input type="checkbox"/> College 2 4 <input type="checkbox"/> College 4 5 <input type="checkbox"/> College 6 6 <input type="checkbox"/> College 7+ 7 <input type="checkbox"/> Don't know</p>
---	----	-------	---

<p>c. How much education do you think he will actually get?</p>	c.	(428)	<p>1 <input type="checkbox"/> Less than High school 12 2 <input type="checkbox"/> High school 12 3 <input type="checkbox"/> College 2 4 <input type="checkbox"/> College 4 5 <input type="checkbox"/> College 6 6 <input type="checkbox"/> College 7+ 7 <input type="checkbox"/> Don't know</p>
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CHECK ITEM T	<p><input type="checkbox"/> Response to 63c is less than 63b - ASK 63d</p> <p><input type="checkbox"/> All others - SKIP to Check Item U</p>
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<p>63d. Why do you think he will get less education than you would like?</p>	63d.	(429)	<p>1 <input type="checkbox"/> Marriage, family responsibility 2 <input type="checkbox"/> Financial reasons 3 <input type="checkbox"/> Lack of motivation 4 <input type="checkbox"/> Lack of academic ability 5 <input type="checkbox"/> Armed Forces 6 <input type="checkbox"/> Other - Specify _____</p>
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V. HEALTH

66a. Do you have any health problem or condition that limits in any way the amount or kind of work you can do? 66a.

- (435) 1 Yes – SKIP to 67a
2 No – ASK b

b. Do you have any health problem or condition that in any way limits your other activities? b.

- (436) 1 Yes – ASK 67a
2 No – SKIP to Check Item W

67a. How long have you been limited in this way? 67a.

Record actual time and mark the appropriate box:

- (437) _____ Years **OR** ↗
(438) _____ Months
(439) 1 Less than 3 months
2 3 months, but less than 6 months
3 6 months, but less than 1 year
4 1 year, but less than 3 years
5 3 years, but less than 5 years
6 5 years, but less than 10 years
7 10 years or longer, but less than life
8 All my life

SHOW FLASHCARD (A)

b. Do you ever have any difficulty performing any of the activities on this card? b.

- (440) 1 No
2 Yes – Which ones? – Mark each activity mentioned and for each marked ask –
- | | | Can you . . . at all? | |
|-------|--|----------------------------|----------------------------|
| | | Yes | No |
| (441) | 1 <input type="checkbox"/> Walking | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (442) | 2 <input type="checkbox"/> Using stairs or inclines | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (443) | 3 <input type="checkbox"/> Standing for long period of time | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (444) | 4 <input type="checkbox"/> Sitting for long periods | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (445) | 5 <input type="checkbox"/> Stooping, kneeling or crouching | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (446) | 6 <input type="checkbox"/> Lifting or carrying weights up to 10 lbs. | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (447) | 7 <input type="checkbox"/> Lifting or carrying heavy weights | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (448) | 8 <input type="checkbox"/> Reaching | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (449) | 9 <input type="checkbox"/> Handling and fingering | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (450) | 10 <input type="checkbox"/> Seeing (even with glasses) | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (451) | 11 <input type="checkbox"/> Hearing | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (452) | 12 <input type="checkbox"/> Dealing with people | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| (453) | 13 <input type="checkbox"/> Other – Specify _____ | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

SHOW FLASHCARD (B)

c. Are there any things on this card that bother you enough to be a problem? c.

- (454) 1 No
2 Yes – Which ones? – Mark each activity mentioned.
- (455) * 1 Pain
2 Tiring easily, no energy
3 Weakness, lack of strength
4 Aches, swelling, sick feeling
- (456) * 5 Fainting spells, dizziness
6 Nervousness, tension, anxiety, depression
7 Shortness of breath, trouble breathing
8 Other – Specify _____

V. HEALTH - Continued

SHOW FLASHCARD (C)

67d. Which of these conditions would you have trouble working under BECAUSE OF YOUR HEALTH?

(Mark as many as apply)

- 67d. (457) 1 Fumes, dust or smoke
 * 2 Hot places
 3 Cold places
 4 Damp places
 5 Noise or vibrations
 (458) 6 Confusion or disorder
 * 7 Working indoors
 8 Working outdoors
 9 Other - Specify _____
 0 None

e. Are you able to go outdoors without help from another person?

- e. (459) 1 Yes
 2 No

f. Are you able to use public transportation, such as trains or buses, without help from another person?

- f. (460) 1 Yes
 2 No

g. Do you ever need help from others in looking after your personal care such as dressing, bathing, eating, and other daily activities?

- g. (461) 1 Yes - ASK h
 2 No - SKIP to i

h. Would you say you need this kind of help frequently, occasionally, or rarely?

- h. (462) 1 Frequently
 2 Occasionally
 3 Rarely

i. During the past three years, has your health condition become better, worse, or remained about the same?

- i. (463) 1 Better
 2 Worse
 3 Same

CHECK
ITEM W

- Respondent currently married - ASK 68
 All others - SKIP to 71a

68. Does your wife's health or physical condition limit the amount or kind of work she can do?

68. (464) 1 Yes - ASK 69
 2 No - SKIP to 71a

69. How long has she been limited in this way?

69. (465) 1 Under 3 months
 2 3 months, but less than 6 months
 3 6 months, but less than 1 year
 4 1 year, but less than 3 years
 5 3 years or more

70a. Is she able to go outdoors without help from another person?

- 70a. (466) 1 Yes
 2 No

b. Is she able to use public transportation, such as trains or buses, without help from another person?

- b. (467) 1 Yes
 2 No

c. Does she ever need help from others in looking after her personal care such as dressing, bathing, eating and other daily activities?

- c. (468) 1 Yes - ASK d
 2 No - SKIP to e

d. Would you say she needs this kind of help frequently, occasionally, or rarely?

- d. (469) 1 Frequently
 2 Occasionally
 3 Rarely

e. Does the health condition of your wife in any way affect the kind or amount of work you do or where you work?

- e. (470) Yes - How?

 0 No

V. HEALTH – Continued

71a. Is there anyone (else) in this family living here who is not working or not going to school because of poor health?

(Mark as many as apply)

71a.

(471)

Yes – Who is it?

*

1 Son

2 Daughter

3 Parents (in-laws)

4 Grandchildren

5 Other – Specify _____

6 No – SKIP to 72a

b. Does the health condition of this person in any way affect the kind or amount of work you do or where you work?

b.

(472)

Yes – How? →

o No

Notes

(473)

(474)

(475)

VI. EDUCATION AND TRAINING

72a. Since we last interviewed you have you taken any training courses or educational programs of any kind, either on the job or elsewhere?

72a.

- (476) 1 Yes — ASK b-i
 2 No — SKIP to 73a

b. What kind of training did you take?
 (Specify below, then mark one box)

b.

- (477) 1 Professional, technical
 2 Managerial
 3 Clerical
 4 Skilled manual
 5 Other — Specify →

c. Where did you take this training?
 (Record reply below, then mark one box)

c.

- (478) 1 University or college
 2 Business college, technical institute
 3 Company training school
 4 Correspondence course
 5 Adult education or night school
 6 Other — Specify →

d. How long did you attend this program?

d.

- (479) _____ Weeks

e. How many hours per week did you spend on this program?

e.

- (480) 1 1-4
 2 5-9
 3 10-14
 4 15-19
 5 20 or more

f. Did you complete this program?

f.

- (481) 1 Yes — SKIP to h
 2 No, dropped out — ASK g
 3 No, still enrolled — SKIP to h

g. Why didn't you complete this program?

g.

- (482) 1 Found a job
 2 Too much time involved
 3 Too expensive
 4 Too difficult, uninteresting
 5 Other — Specify →

h. Why did you decide to take this program?

h.

- (483) 1 To get another job
 2 To get ahead in job
 3 For general knowledge
 4 Complete requirements for diploma
 5 Other — Specify →

i. Do you see any possibility of using this training after you retire?

i.

- (484) 1 Yes
 2 No

Respondent not currently employed — SKIP to 73a

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

j.

- (485) 1 Yes
 2 No

VI. EDUCATION AND TRAINING – Continued

73a. Do you have any plans for taking any training courses or educational programs of any kind in the near future?

- 73a. (486) 1 Yes – ASK b
 2 Maybe – SKIP to e
 3 No – SKIP to 74a

b. What kind of training do you plan to take?
 (Specify below and mark one box)

- b. (487) 1 Professional, technical
 2 Managerial
 3 Clerical
 4 Skilled manual
 5 Other

c. When do you plan to take this training?

- c. (488) _____ Month _____ Year

d. Why do you want to take this training?

- d. (489) 1 To get another job
 2 To get ahead in job
 3 For general knowledge
 4 Complete requirements for diploma
 5 Help me after retirement
 6 Other – Specify →
- } SKIP to 74a

e. On what would it depend?

- e. (490) _____

Notes

VII. ASSETS AND INCOME

74a. Is this house (apartment) owned or being bought by you (or your wife), or is it rented?
 If "Other," specify here

74a. (491) 1 Owned or being bought by respondent (or wife) – SKIP to 75a
 2 Rented – ASK b
 3 No cash rent } SKIP to 76a
 4 Other

b. How much rent do you pay per month?

b. (492) \$ _____ . 00 per month – SKIP to 76a

75a. About how much do you think this property would sell for on today's market?

75a. (493) \$ _____ . 00

b. How much do you (or your wife) owe on this property for mortgages, back taxes, loans, etc? (Mortgages include deeds of trust, land contracts, contracts for deed, etc.)

b. (494) \$ _____ . 00
 None

76a. Do you (or your wife) rent, own, or have an investment in a farm?

76a. (495) 1 Yes – ASK b
 2 No – SKIP to 77a

b. What is the total market value of your farm operation? (Include value of land, buildings, house, if you own them, and the equipment, livestock, stored crops, and other assets. Do not include crops held under Commodity Credit Loans.)

b. (496) \$ _____ . 00

c. Does that include the value of this house?

c. (497) 1 Yes
 2 No

d. How much do you owe on mortgages or other debts in connection with the farm itself, the equipment, livestock, or anything else? (Do not count Commodity Credit Loans.)

d. (498) \$ _____ . 00
 None

77a. Do you (or your wife) own or have an investment in a business or professional practice?

77a. (499) 1 Yes – ASK b
 2 No – SKIP to 78a

b. What is the total market value of all assets in the business, including tools and equipment? In other words, how much do you think this business would sell for on today's market? (Obtain value of respondent's and wife's share only.)

b. (500) \$ _____ . 00

c. What is the total amount of debts or liabilities owed by the business? (Include all liabilities, as carried on the books. Respondent's and wife's share only.)

c. (501) \$ _____ . 00
 None

78a. Do you (or your wife) own any other real estate – not counting the property on which you are living?

78a. (502) 1 Yes – ASK b
 2 No – SKIP to 79a

b. About how much do you think this property would sell for on today's market?

b. (503) \$ _____ . 00

c. How much is the unpaid amount of any mortgages on this property?

c. (504) \$ _____ . 00
 None

d. How much other debt do you have on this property, such as back taxes or assessments, unpaid amounts of home improvement loans, or home repair bills, etc?

d. (505) \$ _____ . 00
 None

79a. Do you (or your wife) own an automobile(s)?

79a. (506) 1 Yes – ASK b-d
 2 No – SKIP to 80

b. What is (are) the make and model year?

b. (507) _____ Model year _____ Make
 (508) _____ Model year _____ Make
 (509) _____ Model year _____ Make

c. Do you owe any money on this (these) automobile(s)?

c. Yes – How much?
 (510) \$ _____ . 00
 (511) \$ _____ . 00
 (512) \$ _____ . 00
 No

d. How much would this (these) car(s) sell for on today's market?

d. (513) \$ _____ . 00
 (514) \$ _____ . 00
 (515) \$ _____ . 00

VII. ASSETS AND INCOME - Continued

<p>80. Do you (or other members of your family living here) have any money in savings or checking accounts, savings and loan companies, or credit unions?</p>	<p>80. <input type="checkbox"/> Yes - How much? (516) \$ _____ . 00 <input type="checkbox"/> No</p>
---	---

<p>81. Do you (or any other members of your family living here) have any of the following -</p> <p>a. U.S. Savings Bonds?</p>	<p>81a. <input type="checkbox"/> Yes - What is their face value? (517) \$ _____ . 00 <input type="checkbox"/> No</p>
---	--

<p>b. Stocks, bonds, or shares in mutual funds?</p>	<p>b. <input type="checkbox"/> Yes - What is their face value? (518) \$ _____ . 00 <input type="checkbox"/> No</p>
---	--

<p>c. Personal loans to others or mortgages you hold (money owed to you by other people)?</p>	<p>c. <input type="checkbox"/> Yes - How much? (519) \$ _____ . 00 <input type="checkbox"/> No</p>
---	--

<p>82. Aside from any debts you have already mentioned, do you (and your wife) now owe any money to stores, doctors, hospitals, banks, or anyone else, excluding 30-day charge accounts?</p>	<p>82. <input type="checkbox"/> Yes - How much altogether? (520) \$ _____ . 00 <input type="checkbox"/> No</p>
--	--

<p><input type="checkbox"/> Respondent a noninterview in 1969 - SKIP to 85</p> <p>83. So far as your overall financial position is concerned, would you say you (and your wife) are better off, about the same, or worse off now than you were when we interviewed you TWO years ago?</p>	<p>83. (521) 1 <input type="checkbox"/> About the same - SKIP to 85 2 <input type="checkbox"/> Better off 3 <input type="checkbox"/> Worse off } ASK 84</p>
---	---

<p>84. In what ways are you (better, worse) off?</p>	<p>84. (522) <input type="checkbox"/> _____ _____</p>
--	--

<p>85. Now I'd like to ask a few questions on your income in 1970.</p> <p>a. In 1970 how much did you receive from wages, salary, commissions, or tips from all jobs before deductions for taxes or anything else?</p>	<p>85a. (523) \$ _____ . 00 <input type="checkbox"/> None</p>
--	--

<p><input type="checkbox"/> Respondent not married - SKIP to c</p> <p>b. In 1970, how much did your wife receive from wages, salary, commissions, or tips from all jobs, before deductions for taxes or anything else?</p>	<p>b. (524) \$ _____ . 00 <input type="checkbox"/> None</p>
--	--

<p><input type="checkbox"/> No other family members 14 years or older - SKIP to 86a</p> <p>c. In 1970, how much did all other family members living here receive from wages, salary, commissions, or tips from all jobs, before deductions for taxes or anything else?</p>	<p>c. (525) \$ _____ . 00 <input type="checkbox"/> None</p>
--	--

Notes

VII. ASSETS AND INCOME - Continued

86a. In 1970, did you receive any income from working on your own or in your own business, professional practice, or partnership?

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

86a. Yes - How much?
 (526) \$ _____ . 00
 No

No other family members 14 years or older - SKIP to 87

b. In 1970, did any other family members living here receive any income from working on their own or in their own business, professional practice, or partnership?

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

b. Yes - How much?
 (527) \$ _____ . 00
 No

87. In 1970, did your family receive any income from operating a farm?

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

87. Yes - How much?
 (528) \$ _____ . 00
 No

88. In addition, during 1970, did anyone in this family living here receive any rental income from roomers and boarders, an apartment in this house, or another building, or other real estate?

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

88. Yes - How much?
 (529) \$ _____ . 00
 No

89. In 1970, did anyone in this family living here receive interest or dividends on savings, stocks, bonds, or income from estates or trusts?

89. Yes - How much?
 (530) \$ _____ . 00
 No

90a. In 1970, did you receive any unemployment compensation?

No other family members 14 years or older - SKIP to 91

90a. Yes No
 (531) _____ How many weeks?
 How much did you receive altogether?
 (532) \$ _____ . 00
 No

b. In 1970, did any other family members living here receive any unemployment compensation?

b. Yes - How much?
 (533) \$ _____ . 00
 No

91. In 1970, did anyone in this family living here receive income as a result of disability or illness such as (read list):
 (If "Yes," to any items in list, enter amount, indicating whether received by respondent or other family member.)

(Mark one)

- | | Yes | No |
|--|--------------------------|--------------------------|
| (1) Veteran's compensation or pension? | <input type="checkbox"/> | <input type="checkbox"/> |
| (2) Workmen's compensation? | <input type="checkbox"/> | <input type="checkbox"/> |
| (3) Aid to the permanently and totally disabled or aid to the blind? ... | <input type="checkbox"/> | <input type="checkbox"/> |
| (4) Social Security disability payment? | <input type="checkbox"/> | <input type="checkbox"/> |
| (5) Any other disability payment? - Specify type <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Respondent		Other family member	
(534)	\$ _____ . 00	(539)	\$ _____ . 00
(535)	\$ _____ . 00	(540)	\$ _____ . 00
(536)	\$ _____ . 00	(541)	\$ _____ . 00
(537)	\$ _____ . 00	(542)	\$ _____ . 00
(538)	\$ _____ . 00	(543)	\$ _____ . 00

92. In 1970, did anyone in this family living here receive any other Social Security payments such as old age or survivor's insurance?

92. Yes - Who?
 Respondent - How much?
 (544) \$ _____ . 00
 Wife - How much?
 (545) \$ _____ . 00
 Other - How much?
 (546) \$ _____ . 00
 No

VII. ASSETS AND INCOME – Continued

93. In 1970, did anyone in this family living here receive any (other) public assistance or welfare payments?

93.

Yes – How much?

(547) \$ _____ . 00

No

94a. In 1970, did anyone in this family living here buy any food stamps under the Government's Food Stamp Plan?

94a.

Yes – ASK b

No – SKIP to 95a

b. In how many months during 1970 did you buy stamps?

b.

(548) _____ Months

c. How much was your monthly bonus?

c.

(549) \$ _____ . 00

95a. In 1970, did anyone in this family living here receive any pensions from local, State, or Federal Government?

95a.

Yes – Who?

Respondent – How much?

(550) \$ _____ . 00

Wife – How much?

(551) \$ _____ . 00

Other – How much?

(552) \$ _____ . 00

No

b. In 1970, did anyone in this family living here receive any other retirement pensions, such as private employee or personal retirement benefits?

b.

Yes – Who?

Respondent – How much?

(553) \$ _____ . 00

Wife – How much?

(554) \$ _____ . 00

Other – How much?

(555) \$ _____ . 00

No – SKIP to 96

Respondent not marked in b – SKIP to 96

c. Is this a pension from a private employer?

c.

1 Yes – ASK d

(556)

2 No – SKIP to 96

d. Are you getting pensions from more than one private employer?

d.

Yes – How many?

(557) _____

o No

If more than one pension received – ASK e–h about the pension providing the largest income.

e. Would this pension be larger if you had worked longer for that employer?

e.

(558) 1 Yes

2 No

f. Did you retire voluntarily or did you have to retire at that time?

f.

(559) 1 Retired voluntarily

2 Had to retire

g. At what age did you begin to receive this pension?

g.

(560) _____ Age

h. How many years of service did you have when you began to receive this pension?

h.

(561) _____ Years

VII. ASSETS AND INCOME - Continued

96. In 1970, did anyone in this family living here receive any other type of income; for example, royalties, annuities, contributions from family members living elsewhere, etc.?

96.

Yes - How much?

(562)

\$ _____ . 00

No

SHOW INCOME FLASHCARD

97. What was the total income of this family during 1969? Include wages, salaries, net income from business or farm, pensions, dividends, interest, rent and any other money income received by you and all family members living with you?

97.

(563)

- 1 Under \$2,000
- 2 2,000 - 2,999
- 3 3,000 - 3,999
- 4 4,000 - 4,999
- 5 5,000 - 5,999
- 6 6,000 - 6,999
- 7 7,000 - 7,999
- 8 8,000 - 9,999
- 9 10,000 - 14,999
- 10 15,000 - 24,999
- 11 25,000 and over

Notes

(564)

(565)

(566)

VIII. FAMILY BACKGROUND

CHECK ITEM X	Refer to item 119R on Information Sheet. <input type="checkbox"/> Respondent's parents are dead – SKIP to 98b <input type="checkbox"/> All others – ASK 98a	
	98a. Now I have some questions on your family background. Are your mother and father living?	98a. (567) 1 <input type="checkbox"/> BOTH parents alive 2 <input type="checkbox"/> MOTHER alive, father dead 3 <input type="checkbox"/> FATHER alive, mother dead 4 <input type="checkbox"/> NEITHER parent alive
	b. Did you live with your mother when you were 15 years old?	b. (568) 1 <input type="checkbox"/> Yes – ASK c 2 <input type="checkbox"/> No – SKIP to d
	c. Did your mother work for pay when you were 15 years old?	c. (569) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
	d. Was a foreign language spoken regularly in your home when you were 15 years old?	d. <input type="checkbox"/> Yes – What language? (570) _____ o <input type="checkbox"/> No
	e. In what State did you last attend high school?	e. (571) <input type="text"/> <input type="text"/> _____ State x <input type="checkbox"/> Did not attend high school
CHECK ITEM Y	Refer to item 120R on Information Sheet and item 13, cover page. <input type="checkbox"/> Respondent not married <input type="checkbox"/> Respondent's wife's parents are dead <input type="checkbox"/> All others – ASK 99	} SKIP to 100a
	99. Are your wife's mother and father living?	99. (572) 1 <input type="checkbox"/> BOTH parents alive 2 <input type="checkbox"/> MOTHER alive, father dead 3 <input type="checkbox"/> FATHER alive, mother dead 4 <input type="checkbox"/> NEITHER parent alive
	100a. How many persons, not counting yourself (or your wife), are dependent upon you (or your wife) for at least one-half of their support?	100a. (573) _____ Number – ASK b o <input type="checkbox"/> None – SKIP to Check Item Z
	b. Do any of these dependents live somewhere else other than here at home with you?	b. <input type="checkbox"/> Yes – How many? (574) _____ ASK c oo <input type="checkbox"/> No – SKIP to Check Item Z
	c. What is their relationship to you?	c. (575) <input type="text"/>
CHECK ITEM Z	Determine whether or not respondent lives in the same area (SMSA or county) as when last interviewed.	(576) 1 <input type="checkbox"/> Respondent lives in same area (SMSA or county) as when last interviewed – SKIP to 103 2 <input type="checkbox"/> Respondent lives in different area (SMSA or county) than when last interviewed – ASK 101a
	101a. When we last interviewed you, you were living in a different area. How many miles from here is that?	101a. (577) _____ Miles
	b. How did you happen to move here?	b. (578) <input type="text"/>
	102a. Did you have a job lined up here at the time you moved?	102a. (579) 1 <input type="checkbox"/> Yes, different from job held at time of move 2 <input type="checkbox"/> Yes, same as job held at time of move 3 <input type="checkbox"/> Yes, transferred job in same company 4 <input type="checkbox"/> No – ASK b } SKIP to c
	b. How many weeks did you look before you found work?	b. (580) _____ Total weeks oo <input type="checkbox"/> Did not look for work – SKIP to c 99 <input type="checkbox"/> Still haven't found work
	(1) How many weeks did you look before you moved?	(1) (581) _____ Weeks before
	(2) How many weeks did you look after you moved?	(2) (582) _____ Weeks after
	c. Since we last interviewed you, have you lived in any area (SMSA or county) other than the present one or the one in which you lived when we interviewed you last?	c. <input type="checkbox"/> Yes – How many? (583) _____ } SKIP to 104 o <input type="checkbox"/> No
	103. Have you lived in any area (SMSA or county) other than the present one since we last interviewed you?	103. <input type="checkbox"/> Yes – How many? (584) _____ o <input type="checkbox"/> No

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

Line number	Name List below all persons living here who are related to respondent. Enter line number from the Household Record Card in Column 104.	Relationship to respondent Example: wife, son, daughter-in-law, brother, etc.	Age As of July 7, 1971	Persons 6-24 years old		Did ... finish this grade (year)?	In the past 12 months how many weeks did ... work either full- or part-time (not counting work around the house)?	In the weeks that ... worked, how many hours did ... usually work per week?	Persons 14 years old and over	
				Is ... attending or enrolled in school? Circle Y - Yes N - No	If "Yes" - What grade (year)? If "No" - What is the highest grade (year) ... ever attended?				106	107
		(585) Respondent	105c			108	109	110		111
		(586)		Y N		Y N	(588)			(589)
		(590)		Y N		Y N	(592)			(593)
		(594)		Y N		Y N	(596)			(597)
		(598)		Y N		Y N	(600)			(601)
		(602)		Y N		Y N	(604)			(605)
		(606)		Y N		Y N	(608)			(609)
		(610)		Y N		Y N	(612)			(613)
		(614)		Y N		Y N	(616)			(617)
		(618)		Y N		Y N	(620)			(621)
		(622)		Y N		Y N	(624)			(625)
		(626)		Y N		Y N	(628)			(629)
		(630)		Y N		Y N	(632)			(633)
		(634)		Y N		Y N	(636)			(637)
		(638)		Y N		Y N	(640)			(641)
		(642)		Y N		Y N	(644)			(645)
		(646)		Y N		Y N	(648)			(649)
		(650)		Y N		Y N	(652)			(653)
		(654)		Y N		Y N	(656)			(657)
		(658)		Y N		Y N	(660)			(661)
		(662)		Y N		Y N	(664)			(665)
		(666)		Y N		Y N	(668)			(669)
		(670)		Y N		Y N	(672)			(673)
		(674)		Y N		Y N	(676)			(677)

NONINTERVIEWS IN 1969

Ask the following questions of all respondents who were noninterviews in 1969. Transcribe the answers to the appropriate item on the Information Sheet, then proceed with the regular interview.

A. What were you doing at this time in 1969 – working or something else?

- 1 Working
- 2 With a job, not at work
- 3 Looking for work
- 4 Retired
- 5 Unable to work
- 6 Other – Specify

ASK B

END of questions

Transcribe entries as follows:

- 1. If box 1 or 2 is checked, mark "Labor Force Group A" in 113R.
- 2. If box 3 is checked, mark "Labor Force Group B" in 113R.
- 3. If box 4 or 6 is checked, mark "Labor Force Group C" in 113R.
- 4. If box 5 is checked, mark "Unable to work" in 113R.

B. For whom did you work?

Transfer name of employer to 114R

C. What kind of work were you doing?

Transfer kind of work to 115R

**WHEN THE TRANSCRIPTION HAS BEEN COMPLETED,
BEGIN THE REGULAR INTERVIEW WITH ITEM 1.**

112. When we last interviewed you, you mentioned (read names from item 121R on Information Sheet) 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 and enter below. If not, enter information about other persons who will know the respondent's whereabouts.)

Name	Relationship to respondent	Address	Telephone number
(1)			
(2)			

Notes

OFFICE USE ONLY	
122R.	<input type="checkbox"/> Noninterview in 1968 (1) Name of employer in 1968 _____ _____
	<input type="checkbox"/> Not employed in 1968
123R.	(1) Name of employer in 1967 _____ _____
	<input type="checkbox"/> Not employed in 1967
124R.	Residence in 1966 City _____ State _____

**INFORMATION SHEET
DATA FROM 1966 AND 1969 INTERVIEWS**

113R. Labor Force Group in 1969

- (678) 1 A
2 B
3 C
4 Unable to work

114R. Name of employer in 1969

 Not employed in 1969

115R. Kind of work done in 1969

116R. Date of last interview

(679)

Month	Day	Year

117R. Name of employer in 1966

 Self-employed in 1966
 Not employed in 1966

118R. Retirement plans in 1969

- (680) _____ Age
- 1 Don't plan to stop working
2 Already stopped
3 Don't know
4 NA (includes "noninterview"
and "blank" in 1969)

119R. Status of respondent's parents in 1969

- (681) 1 Both parents of respondent are dead
2 All other

120R. Status of wife's parents in 1969

- (682) 1 Respondent not married
2 Both parents of the respondent's
wife are dead
3 All other

121R. Names, addresses and telephone numbers of persons who will always know where the respondent can be reached.

1. _____

2. _____
