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FORM LGT-241  
(7-27-70)

U.S. DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS

NATIONAL LONGITUDINAL SURVEYS  
SURVEY OF WORK EXPERIENCE  
OF YOUNG MEN

1970

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 – <i>Specify</i> → _____		a.m.	
				p.m.	

RECORD OF INTERVIEW			
Date completed Month / Day / Year	Interview time		Interviewed by
	Began	Ended	
009 Length of interview (minutes)	a.m.	a.m.	
010 <input type="text"/>	p.m.	p.m.	

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

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

1. EDUCATIONAL STATUS	
1. Are you attending or enrolled in regular school?	1. (016) 1 <input type="checkbox"/> Yes – ASK 2a 2 <input type="checkbox"/> No ↗ When were you last enrolled? (017) _____ Month _____ Year – SKIP to Check Item B
2a. What grade are you attending?	2a. (018) 1 Elementary   1 2 3 4 5 6 7 8 2 High school   1 2 3 4 3 College   1 2 3 4 5 6 +
b. Are you enrolled as a full-time or part-time student?	b. (019) 1 <input type="checkbox"/> Full-time 2 <input type="checkbox"/> Part-time
CHECK ITEM A	Refer to item 94R on Information Sheet <input type="checkbox"/> Respondent not in school in 1969 – ASK 3a <input type="checkbox"/> Respondent in school in 1969 – SKIP to Check Item C
CHECK ITEM B	Refer to item 94R on Information Sheet <input type="checkbox"/> Respondent in school in 1969 – SKIP to Check Item F, page 3 <input type="checkbox"/> All others – SKIP to 22a, page 5
3a. At this time last year, you were not enrolled in school. How long had you been out of school before returning?	3a. (020) _____ Years
b. Why did you return?	b. (021) <input type="checkbox"/>
c. In what curriculum are you enrolled?	c. (022) <input type="checkbox"/> <input type="checkbox"/> _____ SKIP to 5
CHECK ITEM C	Refer to items 2a and 94R on Information Sheet <input type="checkbox"/> Respondent in high school in 1969, college now – SKIP to 5 <input type="checkbox"/> Other – ASK 4
4. Are you attending the same school as you were at this time last year?	4. (023) 1 <input type="checkbox"/> Yes – SKIP to 10 2 <input type="checkbox"/> No – ASK 5
5. What is the name of the school you now attend?	5. _____
6. Where is this school located?	6. (024) <input type="checkbox"/> <input type="checkbox"/> _____ City _____ County _____ State
7. Is this school public or private?	7. (025) 1 <input type="checkbox"/> Public 2 <input type="checkbox"/> Private
8. When did you enter this school?	8. (026) _____ Month _____ Year
CHECK ITEM D	Refer to item 2a or item 94R on Information Sheet <input type="checkbox"/> Respondent in college I now – SKIP to 14a <input type="checkbox"/> Respondent in high school I now <input type="checkbox"/> Respondent not in school in 1969 } SKIP to 22a, page 5 <input type="checkbox"/> Other – ASK 9
9. Why did you change schools?	9. (027) <input type="checkbox"/>
10. Would you say you now like school more, about the same, or less than you did last year?	10. (028) 1 <input type="checkbox"/> More 2 <input type="checkbox"/> Less 3 <input type="checkbox"/> About the same

## 1. EDUCATIONAL STATUS – Continued

11. Are you enrolled in the same curriculum now as you were last year?

11.

(029)

☐ Yes1 ☐ College – SKIP to 14a2 ☐ High school3 ☐ Elementary4 ☐ No – ASK 12

} SKIP to 22a, page 5

12. In what curriculum are you enrolled now?

12.

(030)

13. How did you happen to change your curriculum?

13.

(031)

☐ Respondent not now in college – SKIP to  
Check Item E

14a. How much is the full-time tuition this year at the college you attend?

14a.

(032)

\$ \_\_\_\_\_

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

b.

(033)

1 ☐ Yes – ASK c2 ☐ No – SKIP to Check Item E

c. What kind?

c.

(034)

1 ☐ Scholarship2 ☐ Fellowship3 ☐ Assistantship4 ☐ Loan5 ☐ Other – Specify \_\_\_\_\_

d. How much is it per year?

d.

(035)

\$ \_\_\_\_\_

CHECK  
ITEM E

Refer to item 94R on Information Sheet

☐ Respondent in college 3–6 in 1969 – ASK 15a☐ Other – SKIP to 22a, page 5

15a. Have you received a degree since last year at this time?

15a.

(036)

1 ☐ Yes – ASK b2 ☐ No – SKIP to 22a, page 5

b. What degree was it?

b.

(037)

1 ☐ Bachelor's (B.A., B.S., A.B.)2 ☐ Master's (M.S., M.B., M.B.A.)3 ☐ Doctor's (Ph.D.)4 ☐ Other – Specify \_\_\_\_\_

c. In what field did you receive your degree?

c.

(038)

d. Why did you decide to continue your education after receiving this degree?

d.

(039)

SKIP to 22a, page 5

CHECK  
ITEM F

Refer to item 94R on Information Sheet

☐ Respondent in high school 1–3 last year – ASK 16a☐ Respondent in high school 4 last year – SKIP to 17a☐ Respondent in college 1–3 last year – SKIP to 19a☐ Respondent in college 4+ last year – SKIP to 20a☐ Respondent in elementary school last year – ASK 16a

16a. At this time last year, you were attending your \_\_\_\_\_ year of high school. Did you complete that year?

16a.

(040)

1 ☐ Yes2 ☐ No

b. Why did you drop out of high school?

b.

(041)

c. Do you expect to return?

c.

(042)

1 ☐ Yes – ASK d2 ☐ No – SKIP to 24, page 5

d. When do you expect to return?

d.

(043)

1 ☐ This school year2 ☐ Next school year3 ☐ Don't know4 ☐ Other

SKIP to 22a, page 5

# 1. EDUCATIONAL STATUS – Continued

17a. Did you graduate from high school?

17a.

- (044) 1 ☐ Yes – SKIP to Check Item G  
2 ☐ No – ASK b

b. Why not?

b.

(045) ☐

CHECK

ITEM G

Refer to item 95R on Information Sheet

- (046) 1 ☐ Respondent had planned to enter college when last interviewed – ASK 18a  
2 ☐ Respondent had not planned to enter college when last interviewed – SKIP to 22a, page 5  
3 ☐ Respondent not asked about educational goal – SKIP to 22a, page 5

18a. When we last interviewed you, you said you planned to go to college. Have your plans changed?

18a.

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

b. What caused your plans to change?

b.

- (048) 1 ☐ Poor grades, lacked ability, wasn't accepted because of low grades, etc.  
2 ☐ Economic reasons (couldn't afford, had to work instead, unable to obtain financial assistance)  
3 ☐ Disliked school, lost interest, had enough school  
4 ☐ Military service  
5 ☐ Personal health reasons  
6 ☐ Other – Specify \_\_\_\_\_  
SKIP to d

c. Why are you presently not enrolled in college?

c.

- (049) 1 ☐ Economic reasons (couldn't afford, have to work, unable to obtain financial assistance, etc.)  
2 ☐ Was rejected or turned down  
3 ☐ Waiting to be accepted by a school  
4 ☐ Military service  
5 ☐ Personal health reasons  
6 ☐ Other – Specify \_\_\_\_\_

d. When do you plan to enroll in college?

d.

- (050) \_\_\_\_\_ Month \_\_\_\_\_ Year – SKIP to 22a  
x ☐ Don't plan to enroll – SKIP to 24

19a. Last year at this time you were in college. Why did you decide to drop out?

19a.

(051) ☐

- x ☐ Received degree – SKIP to 21a

b. Do you expect to return?

b.

- (052) 1 ☐ Yes – ASK c  
2 ☐ No – SKIP to 24

c. When do you think you will return?

c.

- (053) 1 ☐ This school year  
2 ☐ Next school year  
3 ☐ Don't know  
4 ☐ Other

SKIP to 22a

20a. Last year at this time you were in college. Did you receive a degree?

20a.

- (054) 1 ☐ Yes – SKIP to 21a  
2 ☐ No – ASK b

b. Why did you decide to drop out?

b.

(055) ☐

c. Do you expect to return?

c.

- (056) 1 ☐ Yes – ASK d  
2 ☐ No – SKIP to 24

d. When?

d.

- (057) 1 ☐ This school year  
2 ☐ Next school year  
3 ☐ Don't know  
4 ☐ Other

SKIP to 22a

# I. EDUCATIONAL STATUS – Continued

21a. What degree did you receive?	21a. (058) 1 <input type="checkbox"/> Associate (2 year course) 2 <input type="checkbox"/> Bachelor's (B.A., B.S., A.B.) 3 <input type="checkbox"/> Master's (M.S., M.B., M.B.A. ) 4 <input type="checkbox"/> Doctor's (Ph.D.) 5 <input type="checkbox"/> Other – Specify _____
b. In what field of study did you receive your degree?	b. (059) <input type="text"/> <input type="text"/>
22a. How much education would you like to get?  If "Other," Specify _____   b. As things stand now how much education do you think you will actually get?  If "Other," Specify _____   	22a. (060) High school 1 <input type="checkbox"/> 1 yr. 2 <input type="checkbox"/> 2 yrs. 3 <input type="checkbox"/> 3 yrs. 4 <input type="checkbox"/> 4 yrs. College { 5 <input type="checkbox"/> 2 yrs. (complete junior college) 6 <input type="checkbox"/> 4 yrs. (graduate from 4-year college) 7 <input type="checkbox"/> 6 yrs. (master's degree or equivalent) 8 <input type="checkbox"/> 7 + yrs. (Ph.D. or professional degree) Other 0 <input type="checkbox"/> None, don't know, other responses  b. (061) High school 1 <input type="checkbox"/> 1 yr. 2 <input type="checkbox"/> 2 yrs. 3 <input type="checkbox"/> 3 yrs. 4 <input type="checkbox"/> 4 yrs. College { 5 <input type="checkbox"/> 2 yrs. (complete junior college) 6 <input type="checkbox"/> 4 yrs. (graduate from 4-year college) 7 <input type="checkbox"/> 6 yrs. (master's degree or equivalent) 8 <input type="checkbox"/> 7 + yrs. (Ph.D. or professional degree) Other 0 <input type="checkbox"/> None, don't know, other responses
<b>CHECK ITEM H</b>	Refer to item 22a and item 95R on Information Sheet <input type="checkbox"/> Educational goal different from when last interviewed – ASK 23 <input type="checkbox"/> Educational goal same as when last interviewed } SKIP to 24 <input type="checkbox"/> Respondent not asked about educational goal
23. When we last interviewed you, you said you would like to get (amount of education indicated in 95R) Why have you changed your plans?	23. (062) <input type="text"/>
24. How much encouragement has your father given you to continue your education beyond high school?	24. (063) 1 <input type="checkbox"/> Much 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> None 4 <input type="checkbox"/> Does not live with father
25. How much encouragement has your mother given you to continue your education beyond high school?	25. (064) 1 <input type="checkbox"/> Much 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> None 4 <input type="checkbox"/> Does not live with mother
26. How much help in continuing your schooling after high school do you expect to get (have you received) from your parents?	26. (065) 1 <input type="checkbox"/> Much 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> None
27. How much encouragement have (did) your teachers and other adults in your high school given (give) you to continue your education beyond high school?	27. (066) 1 <input type="checkbox"/> Much 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> None
28. How many of your friends plan to go to college or are actually attending college?	28. (067) 1 <input type="checkbox"/> Many of them 2 <input type="checkbox"/> Some of them 3 <input type="checkbox"/> Few or none of them

Notes

## 1. EDUCATIONAL STATUS – Continued

☐ Respondent now attends school – *SKIP to Check Item I*

29a. Since this time last year have you taken any training courses or educational programs of any kind, either on the job or elsewhere?

- 29a. (068) 1 ☐ Yes – *ASK b*  
2 ☐ No – *SKIP to Check Item I*

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

- b. (069) 1 ☐ Professional, technical  
2 ☐ Managerial  
3 ☐ Clerical  
4 ☐ Skilled manual  
5 ☐ Other

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

- c. (070) 1 ☐ Business college, technical institute  
2 ☐ Company training school  
3 ☐ Correspondence course  
4 ☐ Regular school  
5 ☐ Other

d. How long did you attend this course or program?

- d. (071) \_\_\_\_\_ Months  
99 ☐ Still attending

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

- e. (072) 1 ☐ 1–4  
2 ☐ 5–9  
3 ☐ 10–14  
4 ☐ 15–19  
5 ☐ 20 or more

f. Did you complete this program?

- f. (073) 1 ☐ Yes – *When?*  
\_\_\_\_ Month \_\_\_\_\_ Year – *SKIP to h*  
2 ☐ No, dropped out – *When?*  
\_\_\_\_ Month \_\_\_\_\_ Year – *ASK g*  
x ☐ No, still enrolled – *SKIP to h*

g. Why didn't you complete this program?

- g. (074) 1 ☐ Found a job  
2 ☐ Interfered with school  
3 ☐ Too much time involved  
4 ☐ Lost interest  
5 ☐ Too difficult  
6 ☐ Other – *Specify* \_\_\_\_\_

h. Why did you decide to get this training?

- h. (075) 1 ☐ To obtain work  
2 ☐ To improve current job situation  
3 ☐ To get better job than present one  
4 ☐ Wanted to continue education  
5 ☐ Need it; worthwhile  
6 ☐ Other – *Specify* \_\_\_\_\_

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

- i. (076) 1 ☐ Yes  
2 ☐ No  
3 ☐ Not employed

CHECK  
ITEM I

- ☐ Respondent a college graduate  
(Item 94R or item 2 equals college 4+) – *ASK 30a*  
☐ Respondent not a college graduate  
(Item 94R or item 2 does not equal college 4+) – *SKIP to 31*

Notes

# 1. EDUCATIONAL STATUS – Continued

30a. Prior to October of 1967, did you take any training courses or educational programs of any kind, either on the job or elsewhere?

30a.

- (077) 1 ☐ Yes – ASK b  
2 ☐ No – SKIP to 31a

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

b.

- (078) 1 ☐ Professional, technical  
2 ☐ Managerial  
3 ☐ Clerical  
4 ☐ Skilled manual  
5 ☐ Other

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

c.

- (079) 1 ☐ Business college, technical institute  
2 ☐ Company training school  
3 ☐ Correspondence course  
4 ☐ Regular school  
5 ☐ Other

d. How long did you attend this course or program?

d.

- (080) \_\_\_\_\_ Months  
99 ☐ Still attending

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

e.

- (081) 1 ☐ 1–4  
2 ☐ 5–9  
3 ☐ 10–14  
4 ☐ 15–19  
5 ☐ 20 or more

f. Did you complete this program?

f.

- (082) 1 ☐ Yes – When?  
\_\_\_\_ Month \_\_\_\_\_ Year – SKIP to h  
2 ☐ No, dropped out – When?  
\_\_\_\_ Month \_\_\_\_\_ Year – ASK g  
x ☐ No, still enrolled – SKIP to h

g. Why didn't you complete this program?

g.

- (083) 1 ☐ Found a job  
2 ☐ Interfered with school  
3 ☐ Too much time involved  
4 ☐ Lost interest  
5 ☐ Too difficult  
6 ☐ Other – Specify \_\_\_\_\_

h. Why did you decide to get this training?

h.

- (084) 1 ☐ To obtain work  
2 ☐ To improve current job situation  
3 ☐ To get better job than present one  
4 ☐ Wanted to continue education  
5 ☐ Need it; worthwhile  
6 ☐ Other – Specify \_\_\_\_\_

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

i.

- (085) 1 ☐ Yes  
2 ☐ No  
3 ☐ Not employed

Notes

(086)

(087)

(088)

## II. CURRENT LABOR FORCE STATUS

31. What were you doing most of **LAST WEEK** – working, going to school, or something else?

- (089) 1 ☐ WK – Working – *SKIP to 32b*  
 2 ☐ J – With a job but not at work  
 3 ☐ LK – Looking for work  
 4 ☐ S – Going to school  
 5 ☐ U – Unable to work – *SKIP to 35*  
 6 ☐ OT – Other – *Specify* →

32a. Did you do any work at all **LAST WEEK**, not counting work around the house?

- (092) 1 ☐ Yes 2 ☐ No – *SKIP to 33a*

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

(093) \_\_\_\_\_ Hours

### CHECK ITEM J

Respondent worked –

☐ 49 hours or more – *SKIP to 36a and enter job worked at last week*

☐ 1–34 hours – *ASK c*

☐ 35–48 hours – *ASK d*

32d. 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?

(094) \_\_\_\_\_ Hours

☐ No – *GO to 32e*

*NOTE: Correct item 32b if lost time not already deducted; if item 32b is reduced below 35 hours, ask item c, otherwise SKIP to 36a.*

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

☐ Yes – How many extra hours did you work?

(095) \_\_\_\_\_ Hours

☐ No

*NOTE: Correct item 32b if extra hours not already included and SKIP to 36a.*

(If “J” in 31, *SKIP to b*)

33a. Did you have a job (or business) from which you were temporarily absent or on layoff **LAST WEEK**?

- (096) 1 ☐ Yes  
 2 ☐ No – *ASK 34a*

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

- (097) 1 ☐ Own illness  
 2 ☐ On vacation  
 3 ☐ Bad weather  
 4 ☐ Labor dispute  
 5 ☐ New job to begin within 30 days } *ASK 34c and 34d(2)*  
 6 ☐ Temporary layoff (less than 30 days) }  
 7 ☐ Indefinite layoff (30 days or more or no definite recall date) } *ASK 34d(3)*  
 8 ☐ School interfered  
 9 ☐ Other – *Specify* →

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

- (098) 1 ☐ Yes  
 2 ☐ No  
 3 ☐ Self-employed

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

- (099) 1 ☐ Yes  
 2 ☐ No

(*GO to 36a and enter job held last week*)

32c. Do you **USUALLY** work 35 hours or more a week at this job?

- (090) 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?

(Mark the appropriate reason)

- (091) 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 ☐ Labor dispute  
 8 ☐ Did not want full-time work  
 9 ☐ Full-time work week under 35 hours  
 10 ☐ Attends school  
 11 ☐ Holiday (legal or religious)  
 12 ☐ Bad weather  
 13 ☐ Own illness  
 14 ☐ On vacation  
 15 ☐ Too busy with housework, personal business, etc.  
 16 ☐ Other – *Specify* →

(*SKIP to 36a and enter job worked at last week*)

Notes

## II. CURRENT LABOR FORCE STATUS - Continued

(If "LK" in 31, ASK b)

34a. Have you been looking for work during the past 4 weeks?

(100) 1 ☐ Yes 2 ☐ No - SKIP to 35

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

(Mark all methods used; do not read list)

(101) 0 ☐ Nothing - SKIP to 35

Checked with

1 ☐ State employment agency

2 ☐ Private employment agency

3 ☐ Employer directly

4 ☐ Friends or relatives

5 ☐ Placed or answered ads

6 ☐ School employment service

7 ☐ 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?

(102) 1 ☐ Lost job

2 ☐ Quit job

3 ☐ Left school

4 ☐ Wanted temporary work

5 ☐ Enjoy working

6 ☐ Help with family expenses

7 ☐ 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?

(103) \_\_\_\_\_ Weeks

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

(104) 1 ☐ Full-time

2 ☐ Part-time

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

(105)

Yes →

1 ☐ Needed at home

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?

☐ October 1, 1969 or later -

Specify

(106) 

Month	Day	Year
-------	-----	------

 - SKIP to 41a

3 ☐ All others - SKIP to 42a

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

☐ October 1, 1969 or later -

Specify

(107) 

Month	Day	Year
-------	-----	------

 - SKIP to 41a

2 ☐ Before October 1, 1969 and "unable" now and "unable" in item 96R on the Information Sheet - SKIP to 71a, page 18

3 ☐ All others - SKIP to 42a

### DESCRIPTION OF JOB OR BUSINESS

36a. Do you have more than one job?

(108) 1 ☐ Yes - Record information about primary job only

2 ☐ No

(109) 

--	--	--

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

(110) 

--	--	--

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

\_\_\_\_\_ City \_\_\_\_\_ State

(111) 

--	--	--

d. What kind of business or industry is this?

(For example: TV and radio manufacturer, retail shoe store, State Labor Department, farm)

e. Were you -

(112) 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?

(113) 

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f. What kind of work were you doing? (For example: car salesman, high school English teacher, stock clerk)

g. What were your most important activities or duties?

(For example: selling clothing, keeping account books, teaching mathematics, finishing concrete)

h. What was your job title?

i. When did you start working for (ENTRY IN 36b)?

☐ October 1, 1969 or later - Specify

(114) 

Month	Day	Year
-------	-----	------

2 ☐ Before October 1, 1969

II. CURRENT LABOR FORCE STATUS – Continued

CHECK  
ITEM K

- ☐ "P" or "G" in item 36e – ASK 37a  
☐ "O" or "WP" in item 36e – SKIP to 38a

37a. Altogether, how much do you usually earn at this job before deductions?

37a. (115) \$ \_\_\_\_\_ (Dollars) . \_\_\_\_\_ (Cents) per: ➤

(116) 1 ☐ Hour

(117) \$ \_\_\_\_\_ (Dollars only) per: ➤

(118) 2 ☐ Day

3 ☐ Week

4 ☐ Biweekly

5 ☐ Month

6 ☐ Year

7 ☐ Other – Specify \_\_\_\_\_

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

b. (119) \_\_\_\_\_ Hours

c. Do you receive extra pay when you work over a certain number of hours?

c. (120) 1 ☐ Yes – ASK d  
2 ☐ No  
3 ☐ No, but received compensating time off  
4 ☐ Never work overtime } SKIP to f

d. After how many hours do you receive extra pay?

d. (121) \_\_\_\_\_ Hours per day

(122) \_\_\_\_\_ Hours per week

e. For all hours worked over (entry in d) are you paid straight time, time and one-half, double time or what?

e. (123) 1 ☐ Compensating time off  
2 ☐ Straight time  
3 ☐ Time and one-half  
4 ☐ Double time  
5 ☐ Other – Specify \_\_\_\_\_

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

f. (124) 1 ☐ Yes – ASK g  
2 ☐ No – SKIP to 38a

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

g. (125) ☐ \_\_\_\_\_

h. Are you a member of that union or employee association?

h. (126) 1 ☐ Yes  
2 ☐ No

38a. Before you began to work as a (entry in 36f) for (entry in 36b), did you do any other kind of work for (entry in 36b)?

38a. (127) 1 ☐ Yes – SKIP TO 39a  
2 ☐ No

b. Excluding 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 October 1, 1969)?

b. ☐ Yes – How many weeks?  
(128) \_\_\_\_\_ Weeks  
0 ☐ No – SKIP to Check Item L

c. Why were you not working during these \_\_\_\_\_ weeks?

c. (129) 1 ☐ School  
2 ☐ Personal, family reasons  
3 ☐ Own illness  
4 ☐ Layoff  
5 ☐ Labor dispute  
6 ☐ Did not want to work  
7 ☐ Other

Notes

II. CURRENT LABOR FORCE STATUS – Continued

CHECK ITEM L	Refer to item 36i <input type="checkbox"/> Current job started before October 1, 1969 – SKIP to Check Item S <input type="checkbox"/> Current job started October 1, 1969 or later – SKIP to 40														
39a. When did you start working as a (entry in 36f) for (entry in 36b)?	39a. <table><tr><td>(130)</td><td>Month</td><td>Day</td><td>Year</td></tr></table>	(130)	Month	Day	Year										
(130)	Month	Day	Year												
b. Excluding vacations and paid sick leave, during the time you have worked as a (entry in 36f) for (entry in 36b), were there any full weeks in which you didn't work, (since October 1, 1969)?	b. <input type="checkbox"/> Yes – How many weeks? (131) _____ Weeks 0 <input type="checkbox"/> No – SKIP to Check Item M														
c. Why were you not working during these _____ weeks?	c. (132) <table><tr><td>1</td><td><input type="checkbox"/> School</td></tr><tr><td>2</td><td><input type="checkbox"/> Personal, family reasons</td></tr><tr><td>3</td><td><input type="checkbox"/> Own illness</td></tr><tr><td>4</td><td><input type="checkbox"/> Layoff</td></tr><tr><td>5</td><td><input type="checkbox"/> Labor dispute</td></tr><tr><td>6</td><td><input type="checkbox"/> Did not want to work</td></tr><tr><td>7</td><td><input type="checkbox"/> Other</td></tr></table>	1	<input type="checkbox"/> School	2	<input type="checkbox"/> Personal, family reasons	3	<input type="checkbox"/> Own illness	4	<input type="checkbox"/> Layoff	5	<input type="checkbox"/> Labor dispute	6	<input type="checkbox"/> Did not want to work	7	<input type="checkbox"/> Other
1	<input type="checkbox"/> School														
2	<input type="checkbox"/> Personal, family reasons														
3	<input type="checkbox"/> Own illness														
4	<input type="checkbox"/> Layoff														
5	<input type="checkbox"/> Labor dispute														
6	<input type="checkbox"/> Did not want to work														
7	<input type="checkbox"/> Other														
CHECK ITEM M	<input type="checkbox"/> Item 39a is earlier than October 1, 1969 – SKIP to Check Item S <input type="checkbox"/> Item 39a is October 1, 1969 or later – ASK 40														
40. Just before you started on this job, was there a period of a week or more in which you were not working?	40. (133) <table><tr><td>1</td><td><input type="checkbox"/> Yes – SKIP to 52</td></tr><tr><td>2</td><td><input type="checkbox"/> No – SKIP to 43a</td></tr></table>	1	<input type="checkbox"/> Yes – SKIP to 52	2	<input type="checkbox"/> No – SKIP to 43a										
1	<input type="checkbox"/> Yes – SKIP to 52														
2	<input type="checkbox"/> No – SKIP to 43a														
41a. You said you last worked at a regular job on (entry in 34g or 35). (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?	41a. (1) (134) _____ Weeks since last worked (2) (135) _____ Weeks looking or on layoff														
CHECK ITEM N	<input type="checkbox"/> 41a(1) is equal to 41a(2) – SKIP to 43 <input type="checkbox"/> 41a(1) is greater than 41a(2) – ASK b														
41b. 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?	41b. (136) _____ Weeks (137) <table><tr><td>1</td><td><input type="checkbox"/> Personal, family reasons</td></tr><tr><td>2</td><td><input type="checkbox"/> Ill or disabled, unable to work</td></tr><tr><td>3</td><td><input type="checkbox"/> In school</td></tr><tr><td>4</td><td><input type="checkbox"/> Couldn't find work</td></tr><tr><td>5</td><td><input type="checkbox"/> Vacation</td></tr><tr><td>6</td><td><input type="checkbox"/> Did not want to work</td></tr><tr><td>7</td><td><input type="checkbox"/> Other – Specify _____</td></tr></table> SKIP to 43	1	<input type="checkbox"/> Personal, family reasons	2	<input type="checkbox"/> Ill or disabled, unable to work	3	<input type="checkbox"/> In school	4	<input type="checkbox"/> Couldn't find work	5	<input type="checkbox"/> Vacation	6	<input type="checkbox"/> Did not want to work	7	<input type="checkbox"/> Other – Specify _____
1	<input type="checkbox"/> Personal, family reasons														
2	<input type="checkbox"/> Ill or disabled, unable to work														
3	<input type="checkbox"/> In school														
4	<input type="checkbox"/> Couldn't find work														
5	<input type="checkbox"/> Vacation														
6	<input type="checkbox"/> Did not want to work														
7	<input type="checkbox"/> Other – Specify _____														
42a. Since October 1, 1969 have you spent any weeks looking for work or on layoff from a job?	42a. <input type="checkbox"/> Yes – How many weeks? (138) _____ Weeks 0 <input type="checkbox"/> No														
CHECK ITEM O	Interviewer: Use calendar to determine the number of weeks since October 1, 1969. (1) (139) _____ Weeks since last worked, after October 1, 1969 (2) (140) _____ Weeks on layoff or looking for work <input type="checkbox"/> (1) is equal to (2) – SKIP to Check Item S <input type="checkbox"/> (1) is greater than (2) – ASK b														
42b. What would you say was the main reason you were not looking for work during (the rest of) that time?	42b. (141) <table><tr><td>1</td><td><input type="checkbox"/> Personal, family reasons</td></tr><tr><td>2</td><td><input type="checkbox"/> Ill or disabled, unable to work</td></tr><tr><td>3</td><td><input type="checkbox"/> In school</td></tr><tr><td>4</td><td><input type="checkbox"/> Couldn't find work</td></tr><tr><td>5</td><td><input type="checkbox"/> Vacation</td></tr><tr><td>6</td><td><input type="checkbox"/> Did not want to work</td></tr><tr><td>7</td><td><input type="checkbox"/> Other – Specify _____</td></tr></table> SKIP to Check Item S	1	<input type="checkbox"/> Personal, family reasons	2	<input type="checkbox"/> Ill or disabled, unable to work	3	<input type="checkbox"/> In school	4	<input type="checkbox"/> Couldn't find work	5	<input type="checkbox"/> Vacation	6	<input type="checkbox"/> Did not want to work	7	<input type="checkbox"/> Other – Specify _____
1	<input type="checkbox"/> Personal, family reasons														
2	<input type="checkbox"/> Ill or disabled, unable to work														
3	<input type="checkbox"/> In school														
4	<input type="checkbox"/> Couldn't find work														
5	<input type="checkbox"/> Vacation														
6	<input type="checkbox"/> Did not want to work														
7	<input type="checkbox"/> Other – Specify _____														
Notes	(142) _____ (143) _____ (144) _____														

III. WORK EXPERIENCE AND ATTITUDES											
43. Now let's talk about –		(1)									
The job you worked at before you started to work as a (ENTRY IN 36f OR 43e) for (ENTRY IN 36b OR 43a)		43a. (145) <input type="checkbox"/> Same as 36b – SKIP to 43e									
The last job you worked at; that is, the one which ended on (ENTRY IN 34g OR 35)											
a. For whom did you work? (Name of company, business, organization or other employer)		b. (146) <input type="text"/> <input type="text"/> City, State									
b. In what city and State is . . . located?		(147) <input type="text"/> <input type="text"/> <input type="text"/>									
c. What kind of business or industry is this? (For example: TV and radio manufacturer, retail shoe store, State Labor Department, farm)		c. (148) 1 <input type="checkbox"/> P 2 <input type="checkbox"/> G 3 <input type="checkbox"/> O 4 <input type="checkbox"/> WP									
d. Class of worker.		d. (149) <input type="text"/> <input type="text"/> <input type="text"/>									
e. What kind of work were you doing? (For example: stock clerk, high school English teacher, car salesman)		e.									
f. What were your most important activities or duties? (For example: selling clothing, keeping account books, teaching mathematics, finishing concrete)		f.									
g. What was your job title?		g.									
44a. Altogether, how much did you usually earn at this job before all deductions?		44a. (150) \$ <input type="text"/>									
		(151) <input type="text"/> per <input type="text"/>									
b. How many hours per week did you usually work at this job?		b. (152) <input type="text"/> Hours									
45a. When did you start working as a (ENTRY IN 43e) for (ENTRY IN 43a)?		45a. (153) <table><tr><td>Month</td><td>Day</td><td>Year</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table>		Month	Day	Year	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Month	Day	Year									
<input type="text"/>	<input type="text"/>	<input type="text"/>									
b. When did you stop working as a (ENTRY IN 43e) for (ENTRY IN 43a)?		b. (154) <table><tr><td>Month</td><td>Day</td><td>Year</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table> X <input type="checkbox"/> Still working there – SKIP to 47a		Month	Day	Year	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Month	Day	Year									
<input type="text"/>	<input type="text"/>	<input type="text"/>									
46a. Why did you happen to leave this job (change the kind of work you were doing)?		46a. (155) <input type="text"/> <input type="text"/>									
b. Did you have a new job lined up before you left this one?		b. (156) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No									
47a. Excluding vacations, during the time you worked at this job were there any full weeks in which you didn't work on this job (since October 1, 1969)?		47a. <input type="checkbox"/> Yes – How many weeks? (157) <input type="text"/> Weeks – ASK b 0 <input type="checkbox"/> No – SKIP to 48									
b. Why were you not working during these . . . weeks at this job?		b. (158) <table><tr><td>1 <input type="checkbox"/> Layoff</td><td>5 <input type="checkbox"/> Own illness</td></tr><tr><td>2 <input type="checkbox"/> Labor dispute</td><td></td></tr><tr><td>3 <input type="checkbox"/> In school</td><td>6 <input type="checkbox"/> Did not want to work</td></tr><tr><td>4 <input type="checkbox"/> Personal family reasons</td><td>7 <input type="checkbox"/> Other</td></tr></table>		1 <input type="checkbox"/> Layoff	5 <input type="checkbox"/> Own illness	2 <input type="checkbox"/> Labor dispute		3 <input type="checkbox"/> In school	6 <input type="checkbox"/> Did not want to work	4 <input type="checkbox"/> Personal family reasons	7 <input type="checkbox"/> Other
1 <input type="checkbox"/> Layoff	5 <input type="checkbox"/> Own illness										
2 <input type="checkbox"/> Labor dispute											
3 <input type="checkbox"/> In school	6 <input type="checkbox"/> Did not want to work										
4 <input type="checkbox"/> Personal family reasons	7 <input type="checkbox"/> Other										
c. Were you working for someone else during this period(s)?		c. (159) 1 <input type="checkbox"/> Yes – GO to next column and record information about this job 2 <input type="checkbox"/> No									
48. Did you do any other kind of work for (ENTRY IN 43a) just before (DATE IN 45a)?		48. (160) 1 <input type="checkbox"/> Yes – GO to next column and record information about this job 2 <input type="checkbox"/> No									
CHECK ITEM P	Item 45a is: 1. October 1, 1969 or later 2. Before October 1, 1969	1. <input type="checkbox"/> – SKIP to 50 2. <input type="checkbox"/> – ASK 49									
49. Have you worked for anyone else since October 1, 1969?		49. (161) 1 <input type="checkbox"/> Yes – GO to next column and record information 2 <input type="checkbox"/> No – SKIP to Check Item S									
50. While you were working for (ENTRY IN 43a), were you also working for someone else?		50. (162) 1 <input type="checkbox"/> Yes – GO to next column and record information about simultaneous job 2 <input type="checkbox"/> No – ASK 51									
51. JUST before you started working as a (ENTRY IN 43e) for (ENTRY IN 43a) was there a period of a week or more in which you were not working?		51. (163) 1 <input type="checkbox"/> Yes – ASK 52 2 <input type="checkbox"/> No – GO to next column and record information about previous job									
52. When did this period in which you were not working start?		52. (164) <table><tr><td>Month</td><td>Day</td><td>Year</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table> X <input type="checkbox"/> Never worked before		Month	Day	Year	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Month	Day	Year									
<input type="text"/>	<input type="text"/>	<input type="text"/>									
53a. Interviewer: Determine number of weeks not working. If item 52 is before October 1, 1969, count only weeks since that time.		53a. (165) <input type="text"/> Weeks not working									
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?		b. (166) <input type="text"/> Weeks looking or on layoff									
CHECK ITEM Q	1. 53a is equal to 53b 2. 53a is greater than 53b	1. <input type="checkbox"/> – SKIP to Check Item R 2. <input type="checkbox"/> – ASK 54									
54. 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?		54. (167) <table><tr><td>1 <input type="checkbox"/> Ill or disabled, unable to work</td><td>5 <input type="checkbox"/> Couldn't find work</td></tr><tr><td>2 <input type="checkbox"/> In school</td><td>6 <input type="checkbox"/> Did not want to work</td></tr><tr><td>3 <input type="checkbox"/> Personal family reason</td><td></td></tr><tr><td>4 <input type="checkbox"/> Vacation</td><td>7 <input type="checkbox"/> Other</td></tr></table>		1 <input type="checkbox"/> Ill or disabled, unable to work	5 <input type="checkbox"/> Couldn't find work	2 <input type="checkbox"/> In school	6 <input type="checkbox"/> Did not want to work	3 <input type="checkbox"/> Personal family reason		4 <input type="checkbox"/> Vacation	7 <input type="checkbox"/> Other
1 <input type="checkbox"/> Ill or disabled, unable to work	5 <input type="checkbox"/> Couldn't find work										
2 <input type="checkbox"/> In school	6 <input type="checkbox"/> Did not want to work										
3 <input type="checkbox"/> Personal family reason											
4 <input type="checkbox"/> Vacation	7 <input type="checkbox"/> Other										
CHECK ITEM R	1. Item 52 is October 1, 1969 or later 2. Item 52 is before October 1, 1969	1. <input type="checkbox"/> – GO to next column and record information about previous job 2. <input type="checkbox"/> – SKIP to Check Item S									

### III. WORK EXPERIENCE AND ATTITUDES – Continued

	(2)	(3)	(4)
43a.	(168) <input type="checkbox"/> Never worked before – <i>SKIP to Check Item T</i> <input type="checkbox"/> Same as _____ – <i>SKIP to 43e</i>	(191) <input type="checkbox"/> Never worked before – <i>SKIP to Check Item T</i> <input type="checkbox"/> Same as _____ – <i>SKIP to 43e</i>	(214) <input type="checkbox"/> Never worked before – <i>SKIP to Check Item T</i> <input type="checkbox"/> Same as _____ – <i>SKIP to 43e</i>
b.	(169) _____ City, State	(192) _____ City, State	(215) _____ City, State
c.	(170) _____	(193) _____	(216) _____
d.	(171) 1 <input type="checkbox"/> P 2 <input type="checkbox"/> G 3 <input type="checkbox"/> O 4 <input type="checkbox"/> WP	(194) 1 <input type="checkbox"/> P 2 <input type="checkbox"/> G 3 <input type="checkbox"/> O 4 <input type="checkbox"/> WP	(217) 1 <input type="checkbox"/> P 2 <input type="checkbox"/> G 3 <input type="checkbox"/> O 4 <input type="checkbox"/> WP
e.	(172) _____	(195) _____	(218) _____
f.			
g.			
44a.	(173) \$ _____ (174) _____ per _____	(196) \$ _____ (197) _____ per _____	(219) \$ _____ (220) _____ per _____
b.	(175) _____ Hours	(198) _____ Hours	(221) _____ Hours
45a.	(176) Month Day Year Month Day Year X <input type="checkbox"/> Still working there – <i>SKIP to 47a</i>	(199) Month Day Year Month Day Year X <input type="checkbox"/> Still working there – <i>SKIP to 47a</i>	(222) Month Day Year Month Day Year X <input type="checkbox"/> Still working there – <i>SKIP to 47a</i>
b.	(177) Month Day Year X <input type="checkbox"/> Still working there – <i>SKIP to 47a</i>	(200) Month Day Year X <input type="checkbox"/> Still working there – <i>SKIP to 47a</i>	(223) Month Day Year X <input type="checkbox"/> Still working there – <i>SKIP to 47a</i>
46a.	(178) _____	(201) _____	(224) _____
b.	(179) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	(202) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	(225) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
47a.	<input type="checkbox"/> Yes – How many weeks? (180) _____ Weeks – ASK b 0 <input type="checkbox"/> No – <i>SKIP to 48</i>	<input type="checkbox"/> Yes – How many weeks? (203) _____ Weeks – ASK b 0 <input type="checkbox"/> No – <i>SKIP to 48</i>	<input type="checkbox"/> Yes – How many weeks? (226) _____ Weeks – ASK b 0 <input type="checkbox"/> No – <i>SKIP to 48</i>
b.	(181) 1 <input type="checkbox"/> Layoff 5 <input type="checkbox"/> Own illness 2 <input type="checkbox"/> Labor dispute 6 <input type="checkbox"/> Did not want to work 3 <input type="checkbox"/> In school 7 <input type="checkbox"/> Other 4 <input type="checkbox"/> Personal family reasons	(204) 1 <input type="checkbox"/> Layoff 5 <input type="checkbox"/> Own illness 2 <input type="checkbox"/> Labor dispute 6 <input type="checkbox"/> Did not want to work 3 <input type="checkbox"/> In school 7 <input type="checkbox"/> Other 4 <input type="checkbox"/> Personal family reasons	(227) 1 <input type="checkbox"/> Layoff 5 <input type="checkbox"/> Own illness 2 <input type="checkbox"/> Labor dispute 6 <input type="checkbox"/> Did not want to work 3 <input type="checkbox"/> In school 7 <input type="checkbox"/> Other 4 <input type="checkbox"/> Personal family reasons
c.	(182) 1 <input type="checkbox"/> Yes – GO to next column and record information about this job 2 <input type="checkbox"/> No	(205) 1 <input type="checkbox"/> Yes – GO to next column and record information about this job 2 <input type="checkbox"/> No	(228) 1 <input type="checkbox"/> Yes – GO to next column and record information about this job 2 <input type="checkbox"/> No
48.	(183) 1 <input type="checkbox"/> Yes – GO to next column and record information about this job 2 <input type="checkbox"/> No	(206) 1 <input type="checkbox"/> Yes – GO to next column and record information about this job 2 <input type="checkbox"/> No	(229) 1 <input type="checkbox"/> Yes – GO to next column and record information about this job 2 <input type="checkbox"/> No
1.	<input type="checkbox"/> – <i>SKIP to 50</i>	<input type="checkbox"/> – <i>SKIP to 50</i>	<input type="checkbox"/> – <i>SKIP to 50</i>
2.	<input type="checkbox"/> – ASK 49	<input type="checkbox"/> – ASK 49	<input type="checkbox"/> – ASK 49
49.	(184) 1 <input type="checkbox"/> Yes – GO to next column and record information 2 <input type="checkbox"/> No – <i>SKIP to Check Item S</i>	(207) 1 <input type="checkbox"/> Yes – GO to next column and record information 2 <input type="checkbox"/> No – <i>SKIP to Check Item S</i>	(230) 1 <input type="checkbox"/> Yes – GO to next column and record information 2 <input type="checkbox"/> No – <i>SKIP to Check Item S</i>
50.	(185) 1 <input type="checkbox"/> Yes – GO to next column and record information about simultaneous job 2 <input type="checkbox"/> No – ASK 51	(208) 1 <input type="checkbox"/> Yes – GO to next column and record information about simultaneous job 2 <input type="checkbox"/> No – ASK 51	(231) 1 <input type="checkbox"/> Yes – GO to next column and record information about simultaneous job 2 <input type="checkbox"/> No – ASK 51
51.	(186) 1 <input type="checkbox"/> Yes – ASK 52 2 <input type="checkbox"/> No – GO to next column and record information about previous job	(209) 1 <input type="checkbox"/> Yes – ASK 52 2 <input type="checkbox"/> No – GO to next column and record information about previous job	(232) 1 <input type="checkbox"/> Yes – ASK 52 2 <input type="checkbox"/> No – GO to next column and record information about previous job
52.	(187) Month Day Year X <input type="checkbox"/> Never worked before	(210) Month Day Year X <input type="checkbox"/> Never worked before	(233) Month Day Year X <input type="checkbox"/> Never worked before
53a.	(188) _____ Weeks not working	(211) _____ Weeks not working	(234) _____ Weeks not working
b.	(189) _____ Weeks looking or on layoff	(212) _____ Weeks looking or on layoff	(235) _____ Weeks looking or on layoff
1.	<input type="checkbox"/> – <i>SKIP to Check Item R</i>	<input type="checkbox"/> – <i>SKIP to Check Item R</i>	<input type="checkbox"/> – <i>SKIP to Check Item R</i>
2.	<input type="checkbox"/> – ASK 54	<input type="checkbox"/> – ASK 54	<input type="checkbox"/> – ASK 54
54.	(190) 1 <input type="checkbox"/> Ill or disabled, unable to work 5 <input type="checkbox"/> Couldn't find work 2 <input type="checkbox"/> In school 6 <input type="checkbox"/> Did not want to work 3 <input type="checkbox"/> Personal family reason 7 <input type="checkbox"/> Other 4 <input type="checkbox"/> Vacation	(213) 1 <input type="checkbox"/> Ill or disabled, unable to work 5 <input type="checkbox"/> Couldn't find work 2 <input type="checkbox"/> In school 6 <input type="checkbox"/> Did not want to work 3 <input type="checkbox"/> Personal family reason 7 <input type="checkbox"/> Other 4 <input type="checkbox"/> Vacation	(236) 1 <input type="checkbox"/> Ill or disabled, unable to work 5 <input type="checkbox"/> Couldn't find work 2 <input type="checkbox"/> In school 6 <input type="checkbox"/> Did not want to work 3 <input type="checkbox"/> Personal family reason 7 <input type="checkbox"/> Other 4 <input type="checkbox"/> Vacation
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"/> – <i>SKIP to Check Item S</i>	<input type="checkbox"/> – <i>SKIP to Check Item S</i>	<input type="checkbox"/> – <i>SKIP to Check Item S</i>

### III. WORK EXPERIENCE AND ATTITUDES – Continued

#### CHECK ITEM S

Respondent is in –

- ☐ Labor Force Group A (“WK” or “J” in 31 or “Yes” in 32a or 33a) – *SKIP to Check Item T*
- ☐ Labor Force Group B (“LK” in 31 or “Yes” in 34a) – *SKIP to 57a*
- ☐ Labor Force Group C (All others) – *ASK 55a*

55a. Do you intend to look for work of any kind in the next 12 months?

55a.

- (306) 1 ☐ Yes – definitely } *ASK b*  
 2 ☐ Yes – probably }  
☐ Maybe – What does it depend on? \_\_\_\_\_ } *SKIP to 56a*
- 3 ☐ No } *SKIP to 56a*  
 4 ☐ Don't know }

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

b.

(307) \_\_\_\_\_ Month

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

c.

(308) ☐ ☐ ☐

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

d.

- (309) Check with { 1 ☐ State employment agency (or counselor)  
 2 ☐ Private employment agency  
 3 ☐ Employer directly  
 4 ☐ Friends or relatives  
 5 ☐ Placed or answered ads  
 6 ☐ School employment service  
 7 ☐ Other – Specify \_\_\_\_\_

56a. Why would you say that you are not looking for work at this time?

56a.

- (310) 1 ☐ School  
 2 ☐ Personal family reasons  
 3 ☐ Health reasons  
 4 ☐ Waiting to be called into military service  
 5 ☐ Believes no work available  
 6 ☐ Does not want to work at this time of year  
 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.

- (311) 1 ☐ Yes, definitely  
 2 ☐ Yes, if it is something I can do } *ASK c*  
 3 ☐ Yes, if satisfactory wage }  
 4 ☐ Yes, if satisfactory location }  
 5 ☐ Yes, if other \_\_\_\_\_ }  
 6 ☐ No, health won't permit } *SKIP to 65*  
 7 ☐ No, it will interfere with school } *page 17*  
 8 ☐ No, parents don't want me to }  
 9 ☐ No, don't need the money }  
 10 ☐ No, other \_\_\_\_\_ }

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

c.

- (312) 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.

(313) ☐ ☐ ☐

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

e.

- (314) \$ \_\_\_\_\_ per: ➤  
 (Dollars) (Cents)
- (315) 1 ☐ Hour
- (316) \$ \_\_\_\_\_ per: ➤  
 (Dollars only)
- (317) 2 ☐ Day  
 3 ☐ Week  
 4 ☐ Biweekly  
 5 ☐ Month  
 6 ☐ Year  
 7 ☐ Other – Specify \_\_\_\_\_  
 8 ☐ Any pay

*SKIP to 65, page 17*

III. WORK EXPERIENCE AND ATTITUDES – Continued

57a. What type of work are you looking for?	57a. (318) <input type="text"/>
b. What would the wage or salary have to be for you to be willing to take it?	b. (319) \$ _____ per: ➤ (Dollars) (Cents) (320) 1 <input type="checkbox"/> Hour (321) \$ _____ per: ➤ (Dollars only) (322) 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 _____ 8 <input type="checkbox"/> Any pay
c. Are there any restrictions, such as hours or location of job that would be a factor in your taking a job?	c. (323) 1 <input type="checkbox"/> Yes – ASK d 2 <input type="checkbox"/> No – SKIP to 65, page 17
d. What are these restrictions?	d. (324) <input type="text"/> _____ _____ _____ SKIP to 65, page 17

CHECK ITEM T	Respondent is currently in Labor Force Group A and –
	<input type="checkbox"/> Was in Labor Force Group C last year (Item 96R on Information Sheet) – ASK 58
	<input type="checkbox"/> All others – SKIP to 59

58. At this time last year, you were not looking for work. What made you decide to take a job?	58. (325) 1 <input type="checkbox"/> Recovered from illness 2 <input type="checkbox"/> Bored 3 <input type="checkbox"/> Completed education 4 <input type="checkbox"/> Needed money 5 <input type="checkbox"/> Other – Specify _____
--	--

59. How do you feel about the job you have now? Do you like it very much, like it fairly well, dislike it somewhat, dislike it very much?	59. (326) 1 <input type="checkbox"/> Like it very much 2 <input type="checkbox"/> Like it fairly well 3 <input type="checkbox"/> Dislike it somewhat 4 <input type="checkbox"/> Dislike it very much
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60. What are the things you like best about your job?	60. (327) <input type="text"/> (1) _____ (328) <input type="text"/> (2) _____ (329) <input type="text"/> (3) _____
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61. What are the things about your job that you don't like?	61. (330) <input type="text"/> (1) _____ (331) <input type="text"/> (2) _____ (332) <input type="text"/> (3) _____
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Notes

III. WORK EXPERIENCE AND ATTITUDES – Continued		
<div>62. 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? <i>(If amount given per hour, record dollars and cents. Otherwise, round to the nearest dollar.)</i></div>		<div>62.<div><div>333</div><div>\$</div><div></div><div>.</div><div></div><div>per: <input checked="" type="checkbox"/></div><div>(Dollars)</div><div>(Cents)</div></div><div>3341 <input type="checkbox"/> Hour</div><div>335\$ <div></div> per: <input checked="" type="checkbox"/><div>(Dollars only)</div></div><div>3362 <input type="checkbox"/> Day</div><div>3 <input type="checkbox"/> Week</div><div>4 <input type="checkbox"/> Biweekly</div><div>5 <input type="checkbox"/> Month</div><div>6 <input type="checkbox"/> Year</div><div>7 <input type="checkbox"/> Other – Specify</div></div> <div>3378 <input type="checkbox"/> I wouldn't take it at any conceivable pay</div> <div>9 <input type="checkbox"/> I would take a steady job at same or less pay</div> <div>10 <input type="checkbox"/> Would accept job; don't know specific amount</div> <div>11 <input type="checkbox"/> Don't know</div> <div>12 <input type="checkbox"/> Other</div>
CHECK ITEM U	<div><input type="checkbox"/> Respondent is enrolled in school this year – SKIP to 64a</div> <div><input type="checkbox"/> All others – ASK 63</div>	
<div>63. What if this job were IN SOME OTHER PART OF THE COUNTRY – how much would it have to pay in order for you to be willing to take it? <i>(If amount given per hour, record dollars and cents. Otherwise, round to the nearest dollar.)</i></div>		<div>63.<div><div>338</div><div>\$</div><div></div><div>.</div><div></div><div>per: <input checked="" type="checkbox"/></div><div>(Dollars)</div><div>(Cents)</div></div><div>3391 <input type="checkbox"/> Hour</div><div>340\$ <div></div> per: <input checked="" type="checkbox"/><div>(Dollars only)</div></div><div>3412 <input type="checkbox"/> Day</div><div>3 <input type="checkbox"/> Week</div><div>4 <input type="checkbox"/> Biweekly</div><div>5 <input type="checkbox"/> Month</div><div>6 <input type="checkbox"/> Year</div><div>7 <input type="checkbox"/> Other – Specify</div></div> <div>3428 <input type="checkbox"/> I wouldn't take it at any conceivable pay</div> <div>9 <input type="checkbox"/> I would take a steady job at same or less pay</div> <div>10 <input type="checkbox"/> Would accept job; don't know specific amount</div> <div>11 <input type="checkbox"/> Depends on location, cost of living</div> <div>12 <input type="checkbox"/> Don't know</div> <div>13 <input type="checkbox"/> Other</div>
CHECK ITEM V	<div>Refer to item 96R on the Information Sheet</div> <div><input type="checkbox"/> Respondent in Labor Force Group A in 1969 – ASK 64a</div> <div><input type="checkbox"/> All other – SKIP to 65, page 17</div>	
<div>64a. Would you say you like your present job more, less, or about the same as (the job you held) last year?</div>		<div>64a.<div>3431 <input type="checkbox"/> More</div><div>2 <input type="checkbox"/> Less</div><div>3 <input type="checkbox"/> Same – SKIP to 65, page 17</div></div> <div>ASK b</div>
<div>b. What would you say is the main reason that you like your present job (more, less)?</div>		<div>b.<div>344</div></div>
Notes		<div>345</div> <div>346</div> <div>347</div>

#### IV. FUTURE JOB PLANS

65. 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 30 years old?

348

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349

- 350** 1 ☐ Respondent's future job plans are the same as when last interviewed – (*Entries in 65 and item 98R on the Information Sheet are the same*) – *SKIP to Check Item X*
- 2 ☐ Respondent's future job plans differ from when last interviewed – (*Entries in 65 and item 98R of Information Sheet differ*) – *ASK 66*

**CHECK  
ITEM W**

*Refer to Item 98R on the Information Sheet*

350

- 1 ☐ Respondent's future job plans are the same as when last interviewed – (*Entries in 65 and item 98R on the Information Sheet are the same*) – SKIP to Check Item X
- 2 ☐ Respondent's future job plans differ from when last interviewed – (*Entries in 65 and item 98R of Information Sheet differ*) – ASK 66

66. When we last interviewed you, you said you thought that you'd like to be *(Entry in item 98R of Information Sheet)*. Why would you say you have changed your plans? 66.

351

V. HEALTH
-----------

**CHECK  
ITEM X**

- ☐ Respondent is currently in school – *ASK 67a*
- ☐ Respondent is not currently enrolled in school – *SKIP to 67b*

67a. Do you have any health problems that limit in any way your activity in school?	67a.
b. Do you have any health problems that limit in any way the amount or kind of work you can do?	b.
c. Do you have any health problems that in any way limit your other activities?	c.

252

252

- 353 1 ☐ Yes – SKIP to 68  
2 ☐ No – ASK c
- 
- 354 1 ☐ Yes – ASK 68  
2 ☐ No – SKIP to 69

353

- 354 1 ☐ Yes – *ASK 68*  
2 ☐ No – *SKIP to 69*

354

- 1 ☐ Yes – *ASK 68*  
2 ☐ No – *SKIP to 69*

68. How long have you been limited in this way?	68.
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355

355

\_\_\_\_\_ Years

<input type="checkbox"/> Respondent not married – <i>SKIP to 71a</i>	
69a. Does your wife's health limit the amount or kind of work she can do?	69a.
b. Does your wife's health limit the amount or kind of housework she can do?	b.

<input type="checkbox"/> Respondent not married – <i>SKIP to 71a</i>	
69a. Does your wife's health limit the amount or kind of work she can do?	69a.
b. Does your wife's health limit the amount or kind of housework she can do?	b.

356

356

- 357 1 ☐ Yes – ASK 70  
2 ☐ No – SKIP to 71a

357

- 1 ☐ Yes - *ASK 70*  
2 ☐ No - *SKIP to 71a*

70. How long has she been limited in this way?	70.
--	-----

\_\_\_\_\_ Years

[illegible]

VI. ASSETS AND INCOME	
71a. So far as your overall financial position is concerned, would you say you are better off, about the same, or worse off now than you were at this time last year?	71a. (359) 1 <input type="checkbox"/> Same – SKIP to Check Item Y 2 <input type="checkbox"/> Better off 3 <input type="checkbox"/> Worse off } ASK b
b. In what ways are you (better, worse) off?	b. (360) <input type="text"/>
CHECK ITEM Y	<input type="checkbox"/> Respondent is NOT head of household – SKIP to 74a <input type="checkbox"/> Respondent is head of household – ASK 72a
72a. In the last 12 months, did you (or your wife) receive financial assistance from any of your relatives?	72a. (361) 1 <input type="checkbox"/> Yes – ASK b–c 2 <input type="checkbox"/> No – SKIP to item 73a
b. From whom?	b. (362) <input type="text"/>
c. How much did you receive?	c. (363) \$ <input type="text"/>
73a. Is this house (apartment) owned or being bought by you (or your wife)?	73a. (364) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 74a
b. About how much do you think this property would sell for on today's market?	b. (365) \$ <input type="text"/>
c. About how much do you (or your wife) owe on this property for mortgages, back taxes, home improvement loans, etc?	c. (366) \$ <input type="text"/> <input type="checkbox"/> None
74a. Do you (or your wife) have any money in savings or checking accounts, savings and loan companies or credit unions?	74a. 1 <input type="checkbox"/> Yes – How much altogether? (367) \$ <input type="text"/> 2 <input type="checkbox"/> No – GO to b
b. Do you (or your wife) have any – (1) U.S. Savings Bonds?	b. 1 <input type="checkbox"/> Yes – What is their face value? (1) (368) \$ <input type="text"/> 2 <input type="checkbox"/> No – GO to (2)
(2) Stocks, bonds, or mutual funds?	(2) 1 <input type="checkbox"/> Yes – About how much is their market value? (369) \$ <input type="text"/> 2 <input type="checkbox"/> No
75a. Do YOU (or your wife) rent, own, or have an investment in a farm, business, or any other real estate?	75a. (370) 1 <input type="checkbox"/> Yes – ASK b–d 2 <input type="checkbox"/> No – SKIP to 76a
b. Which one?	b. (371) 1 <input type="checkbox"/> Farm 2 <input type="checkbox"/> Business 3 <input type="checkbox"/> Real estate
c. About how much do you think this (business, farm, or other real estate) would sell for on today's market?	c. (372) \$ <input type="text"/>
d. What is the total amount of debt and other liabilities on this (business, farm, or other real estate)?	d. (373) \$ <input type="text"/> <input type="checkbox"/> None
76a. Do you (or your wife) own an automobile(s)?	76a. (374) 1 <input type="checkbox"/> Yes – ASK b–d 2 <input type="checkbox"/> No – SKIP to 77
b. What is (are) the make and model year?	b. (375) <input type="text"/> Model year <input type="text"/> Make (376) <input type="text"/> Model year <input type="text"/> Make (377) <input type="text"/> Model year <input type="text"/> Make
c. Do you owe any money on this (these) automobile(s)?	c. <input type="checkbox"/> Yes – How much? (378) \$ <input type="text"/> (379) \$ <input type="text"/> (380) \$ <input type="text"/> <input type="checkbox"/> No
d. How much would this (these) car(s) sell for on today's market?	d. (381) \$ <input type="text"/> (382) \$ <input type="text"/> (383) \$ <input type="text"/>
77. Do you (or your wife) owe any (other) money to stores, banks, doctors, or anyone else, excluding 30-day charge accounts?	77. <input type="checkbox"/> Yes – How much? (384) \$ <input type="text"/> <input type="checkbox"/> No

VI. ASSETS AND INCOME – Continued

Now I would like to ask a few questions about your income in the last 12 months.		RESPONDENT	WIFE <input type="checkbox"/> Not married
78a. How much did you (and your wife receive from wages, salary, commissions, or tips from all jobs, before deductions for taxes or anything else?	78a.	(385) \$ _____ <input type="checkbox"/> None	(390) \$ _____ <input type="checkbox"/> None
b. Did you (and your wife) receive any income from working on your own or in your own business or farm?	b.	<input type="checkbox"/> Yes – How much? (386) \$ _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes – How much? (391) \$ _____ <input type="checkbox"/> No
\$ _____ less \$ _____ = \$ _____ (Gross income) (Expenses) (Net income)			
c. Did you (or your wife) receive any unemployment compensation?	c.	<input type="checkbox"/> Yes — <del>✓</del> (1) How many weeks? (387) _____ (2) How much? (388) \$ _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes — <del>✓</del> How many weeks? (392) _____ How much? (393) \$ _____ <input type="checkbox"/> No
d. Did you (or your wife) receive any other income, such as rental income, interest or dividends, income as a result of disability or illness, etc.?	d.	<input type="checkbox"/> Yes – How much? (389) \$ _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes – How much? (394) \$ _____ <input type="checkbox"/> No
CHECK ITEM Z	(395) 1 <input type="checkbox"/> Respondent (and wife and children) live alone – SKIP to 79b 2 <input type="checkbox"/> All others – ASK 79a (If two or more RELATED respondents in household, ask 79a–b only once, and transcribe answers from the first to the other questionnaires.)		
79a. In the past 12 months, what was the total income of ALL family members living here? (Show flashcard)	79a.	(396) 1 <input type="checkbox"/> Under \$1,000 2 <input type="checkbox"/> \$1,000–\$1,999 3 <input type="checkbox"/> 2,000– 2,999 4 <input type="checkbox"/> 3,000– 3,999 5 <input type="checkbox"/> 4,000– 4,999 6 <input type="checkbox"/> 5,000– 5,999 7 <input type="checkbox"/> 6,000– 7,499 8 <input type="checkbox"/> 7,500– 9,999 9 <input type="checkbox"/> 10,000–14,999 10 <input type="checkbox"/> 15,000–24,999 11 <input type="checkbox"/> 25,000 and over	
b. Did anyone in this family receive any welfare or public assistance in the last 12 months?	b.	(397) 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	

Notes

VII. FAMILY BACKGROUND		
80a. How many persons not counting yourself (or your wife) are dependent upon you for at least one-half of their support?		80a. (398) _____ Number o <input type="checkbox"/> None – SKIP to Check Item AA
b. Do any of these dependents live somewhere else other than here at home with you?		b. <input type="checkbox"/> Yes – How many? (399) _____ Number – ASK c o <input type="checkbox"/> No – SKIP to Check Item AA
c. What is their relationship to you?		c. (400) <input type="checkbox"/>
CHECK ITEM AA	Refer to name and address label on cover page	(401) 1 <input type="checkbox"/> Respondent lives in same area (SMSA or county) as when last interviewed – SKIP to 83 2 <input type="checkbox"/> Respondent lives in different area (SMSA or county) than when last interviewed – ASK 81a
81a. When we last interviewed you, you were living in (city in address on cover page). How many miles from here is that?		81a. (402) _____ Miles
b. How did you happen to move here?		b. (403) <input type="checkbox"/>
<input type="checkbox"/> Respondent currently in school – SKIP to 82c		
82a. Did you have a job lined up here at the time you moved?		82a. (404) 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
b. How many weeks did you look before you found work?		b. (405) _____ Weeks o <input type="checkbox"/> Did not look for work 99 <input type="checkbox"/> Still haven't found work
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? (406) _____ o <input type="checkbox"/> No
83. Have you lived in any area (SMSA or county) other than the present one since we last interviewed you?		83. <input type="checkbox"/> Yes – How many? (407) _____ o <input type="checkbox"/> No
84a. What is your present draft classification?		84a. (408) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> o <input type="checkbox"/> Respondent is under 18 – SKIP to 85
b. (If 1-Y or 4-F) Why were you rejected?		b. (409) 1 <input type="checkbox"/> Failed both physical and written test 2 <input type="checkbox"/> Failed physical test 3 <input type="checkbox"/> Failed written test 4 <input type="checkbox"/> Not accepted for other reasons 5 <input type="checkbox"/> Don't know reason
85. How many rooms are there in this house or apartment? Do not count bathrooms, porches, balconies, foyers, halls, or half rooms.		85. (410) _____ Rooms
Notes		(411) _____ (412) _____ (413) _____



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 86a.	Relationship to respondent  Example: wife, son, daughter-in-law, brother, etc.	Age  As of October 1, 1970	Persons 6-24 years old				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?	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?	If person worked at all in the past 12 months -	
										87
86a	86b	86c	86d							
		(414) Respondent								
		(415)		(416) Y N		Y N	(417)			(418)
		(419)		(420) Y N		Y N	(421)			(422)
		(423)		(424) Y N		Y N	(425)			(426)
		(427)		(428) Y N		Y N	(429)			(430)
		(431)		(432) Y N		Y N	(433)			(434)
		(435)		(436) Y N		Y N	(437)			(438)
		(439)		(440) Y N		Y N	(441)			(442)
		(443)		(444) Y N		Y N	(445)			(446)
		(447)		(448) Y N		Y N	(449)			(450)
		(451)		(452) Y N		Y N	(453)			(454)
		(455)		(456) Y N		Y N	(457)			(458)
		(459)		(460) Y N		Y N	(461)			(462)
		(463)		(464) Y N		Y N	(465)			(466)
		(467)		(468) Y N		Y N	(469)			(470)
		(471)		(472) Y N		Y N	(473)			(474)
		(475)		(476) Y N		Y N	(477)			(478)
		(479)		(480) Y N		Y N	(481)			(482)
		(483)		(484) Y N		Y N	(485)			(486)
		(487)		(488) Y N		Y N	(489)			(490)
		(491)		(492) Y N		Y N	(493)			(494)
		(495)		(496) Y N		Y N	(497)			(498)
		(499)		(500) Y N		Y N	(501)			(502)
		(503)		(504) Y N		Y N	(505)			(506)

<b>93. When we last interviewed you, you mentioned (read names from item 99R on Information Sheet) as persons who will always know where you can be reached even if you moved away. Is this still true?</b> <i>(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.)</i>			
Name	Relationship to respondent	Address	Telephone number
(1)			
(2)			
Notes			

**INFORMATION SHEET  
DATA FROM 1969 INTERVIEWS**

94R.	Whether Respondent was attending or enrolled in school in 1969
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507

1 ☐ Yes

2 ☐ No

3 ☐ Armed Forces

Grade Respondent was attending OR  
highest year of regular school completed:

**508** ☐ None 0

☐ Elem. 1 2 3 4 5 6 7 8

☐ High 1 2 3 4

☐ College 1 2 3 4 5 6 7+

95R. Respondent's educational goal in 1969

509

☐ Not asked educational goal

☐ High 1 2 3 4

☐ College 2 4 6 7+

96R. Respondent's labor force status in 1969

510

- 1 ☐ Unable to work
- 2 ☐ Labor Force Group A
- 3 ☐ Labor Force Group B
- 4 ☐ Labor Force Group C
- 5 ☐ Labor Force Group C – Armed Forces

97R.	Name of employer in 1969
------	--------------------------

☐ Not employed in 1969

98R.	Plans for age 30 in 1969
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☐ Working - Specify kind

☐ Other or don't know

**99R.** Names and address of persons who will always know where respondent can be reached.

1. \_\_\_\_\_

2. \_\_\_\_\_

100R.	Month of last interview
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