



COOK ISLANDS
CENSUS OF POPULATION AND DWELLINGS
Midnight, between Saturday 30 November and Sunday 1 December 1996
Dwelling Questionnaire

CONFIDENTIAL

Statistics Office
Rarotonga, Cook Islands

Who should fill in this form?

In every dwelling, one person must take the responsibility for providing information on this form.
Enumerators must make sure that every household is provided with a Dwelling Questionnaire.

Collection Authority

This Census is taken under the authority of the Statistics Act (1966).

All information obtained will be kept **confidential** and used for statistical purposes only

<p>1 Name of Person In Charge of Dwelling:</p> <div style="border-bottom: 1px solid black; margin-top: 10px; display: flex; justify-content: space-between;">FirstnameSurname</div>	<p>6 Materials of construction of dwelling:</p> <table style="width: 100%;"><tr><td>Outer walls</td><td><div style="border-bottom: 1px solid black; width: 100%;"></div></td></tr><tr><td>Roof</td><td><div style="border-bottom: 1px solid black; width: 100%;"></div></td></tr><tr><td>Floor</td><td><div style="border-bottom: 1px solid black; width: 100%;"></div></td></tr></table>	Outer walls	<div style="border-bottom: 1px solid black; width: 100%;"></div>	Roof	<div style="border-bottom: 1px solid black; width: 100%;"></div>	Floor	<div style="border-bottom: 1px solid black; width: 100%;"></div>				
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Floor	<div style="border-bottom: 1px solid black; width: 100%;"></div>										
<p>2 Count all persons living in this dwelling on Census Night. Do not forget to count babies.</p> <div style="display: flex; justify-content: space-around; margin-top: 10px;"><div style="border-bottom: 1px solid black; width: 30%; text-align: center;">Male</div><div style="border-bottom: 1px solid black; width: 30%; text-align: center;">Female</div><div style="border-bottom: 1px solid black; width: 30%; text-align: center;">Total</div></div>	<p>7 Count the number of rooms in this dwelling:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px; text-align: center;">DO NOT COUNT rooms used as: laundry, bathroom, toilet and garages.</div> <div style="display: flex; justify-content: flex-end; margin-top: 10px;">Nos: <div style="border-bottom: 1px solid black; width: 50px;"></div> Rooms</div>										
<p>3 Type of Dwelling: Tick circle (✓) which applies</p> <div style="display: flex; align-items: flex-start; margin-top: 5px;"><div style="margin-right: 10px;"><p>1 <input type="radio"/> Private dwelling</p><p>2 <input type="radio"/> Non private dwelling, such as (Hotels, Motels, Hospitals, Hostels, etc.)</p></div><div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;">IF NON PRIVATE GOTO 22</div></div>	<p>8 Source of Water: Tick circles (✓) which apply</p> <div style="display: flex; flex-direction: column; margin-top: 5px;"><p>1 <input type="radio"/> Public water main</p><p>2 <input type="radio"/> Public water catchment</p><p>3 <input type="radio"/> Own rainwater tank</p></div>										
<p>4 State year in which dwelling was constructed:</p> <div style="text-align: center; margin-top: 10px;"><div style="border-bottom: 1px solid black; width: 100px;"></div> Year</div>	<p>9 Supply of Water: Tick circle (✓) which applies</p> <div style="display: flex; flex-direction: column; margin-top: 5px;"><p>1 <input type="radio"/> Piped to inside Dwellings</p><p>2 <input type="radio"/> Piped to outside Dwellings</p></div>										
<p>5 Dwelling Tenure: Tick circle (✓) which applies</p> <div style="display: flex; flex-direction: column; margin-top: 5px;"><p>1 <input type="radio"/> Owned outright</p><p>2 <input type="radio"/> Occupying without charge</p><p>3 <input type="radio"/> Provided free with job</p><p>4 <input type="radio"/> On loan repayment/mortgage</p><p>5 <input type="radio"/> Rented or Leased</p></div> <div style="margin-top: 20px;"><p>If Dwelling is Rented or Leased</p><p>(a) State weekly rent in dollars: \$ <div style="border-bottom: 1px solid black; width: 100px;"></div></p><p>(b) Tick circle (✓) which applies</p><div style="display: flex; flex-direction: column; margin-top: 5px;"><p>1 <input type="radio"/> Unfurnished</p><p>2 <input type="radio"/> Partly furnished</p><p>3 <input type="radio"/> Fully furnished</p></div></div>	<p>10 Principal Means of Cooking: Tick circle (✓) which applies</p> <div style="display: flex; flex-direction: column; margin-top: 5px;"><div style="display: flex; justify-content: space-between;"><p>1 <input type="radio"/> Electric Stove</p><p>4 <input type="radio"/> Wood grate</p></div><div style="display: flex; justify-content: space-between;"><p>2 <input type="radio"/> Gas Stove</p><p>5 <input type="radio"/> Micro-wave</p></div><p>3 <input type="radio"/> Kerosene burner</p></div>										
<p>11 Appliances and Amenities: Tick circles (✓) which apply</p> <table style="width: 100%;"><tr><td>1 <input type="radio"/> Electricity</td><td>6 <input type="radio"/> Bath/shower</td></tr><tr><td>2 <input type="radio"/> Telephone</td><td>7 <input type="radio"/> Flush toilet</td></tr><tr><td>3 <input type="radio"/> Kitchen sink</td><td>8 <input type="radio"/> Pour-flush toilet</td></tr><tr><td>4 <input type="radio"/> Water filter</td><td>9 <input type="radio"/> Pit toilet</td></tr><tr><td>5 <input type="radio"/> Hot water system</td><td>10 <input type="radio"/> Lagoon toilet</td></tr></table>		1 <input type="radio"/> Electricity	6 <input type="radio"/> Bath/shower	2 <input type="radio"/> Telephone	7 <input type="radio"/> Flush toilet	3 <input type="radio"/> Kitchen sink	8 <input type="radio"/> Pour-flush toilet	4 <input type="radio"/> Water filter	9 <input type="radio"/> Pit toilet	5 <input type="radio"/> Hot water system	10 <input type="radio"/> Lagoon toilet
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12 Agriculture Activity: Tick circle(✓) which applies

The household is engaged in:

1 ☐ Mainly subsistence

2 ☐ Mainly commercial

3 ☐ No agricultural activity

13 Livestock: Count the number of livestock and pets owned

1 Pig	5 Horse
2 Goat	6 Chicken
3 Cattle	7 Cat
4 Duck	8 Dog

14 Farm Machinery: Count only those owned and in working order

1 Tractor	6 Disc
2 Rotary hoe	7 Plough
3 Mist blower	8 Tyne
4 Grass cutter	9 Slasher
5 Motor mower	10 Knapsack sprayer

15 Fishing Activity: Tick circles (✓) which apply

(a) The household is engaged in:

1 ☐ Mainly subsistence

2 ☐ Mainly commercial

3 ☐ No fishing activity

(b) The household fish:

1 ☐ Only in reef

2 ☐ Only outside reef

3 ☐ Both in reef and outside reef

16 Fishing Equipment: Count only those owned and in working order

1 Speargun	4 Fishing net
2 Canoe	5 Fishing rod
3 Boat	6 Outboard motor

17 Hardware Tools: Count only those owned and in working order

1 Drill	5 Battery charger
2 Skill saw	6 Generator
3 Compressor	7 Other tools
4 Sander	

18 Cooking Appliances: Count only those owned and in working order

1 Stove electric	7 Pressure cooker
2 Stove gas	8 Frying pan
3 Stove kerosene	9 Jug/kettle
4 Microwave oven	10 Food processor
5 Coffee percolator	11 Toaster
6 Rice cooker	12 Eggbeater

19 Household Appliances: Count only those owned and in working order

1 Freezer	8 Clothes dryer
2 Refrigerator	9 Shaver
3 Zip	10 Hair cutter
4 Dishwasher	11 Hair dryer
5 Iron	12 Vacuum cleaner
6 Washing machine	13 Fan
7 Sewing machine	14 Air conditioner
	15 Other appliances

20 Entertainment Appliances: Count only those owned and in working order

1 Radio/cassette	7 Guitar
2 TV Monitor	8 Piano/organ
3 TV Video player	9 Musical instrument
4 Video recorder	
5 Video camera	10 TV Dish
6 Personal computer	

21 Transport: Count only those owned and in working order

1 Motor cycle	6 Utility vehicle
2 Motor Car	
3 Van	7 Bicycle
4 Mini bus	8 Other vehicle
5 Truck	

22 DECLARATION: I HEREBY DECLARE THAT THE PARTICULARS GIVEN ABOVE ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Signature

Thank you for your cooperation.



COOK ISLANDS

CENSUS OF POPULATION AND DWELLINGS

Midnight, between Saturday 30 November and Sunday 1 December 1996

Personal Questionnaire

Statistics Office
Rarotonga, Cook Islands

This Census is taken under the authority of the Statistics Act 1966

Person No:

All information obtained will be kept confidential and used for statistical purposes only

A questionnaire is to be completed by or for each person found in the Cook Islands on Census Night

1 Name: _____ Firstname Surname	(iii) If your usual residential address one year ago was the same as 9(i) tick (✓) circle else state your residential address in 1 December 1995. <input type="radio"/> Village/ _____ Island/ _____ City _____ Country _____
2 Sex: Tick circle (✓) which applies 1 <input type="radio"/> Male 2 <input type="radio"/> Female	(iv) If your usual residential address five years ago was the same as 9(iii) tick (✓) circle else state your residential address in 1 December 1991. <input type="radio"/> Village/ _____ Island/ _____ City _____ Country _____
3 Relationship to Person In Charge of Household: Tick circle (✓) which applies 1 <input type="radio"/> Head 4 <input type="radio"/> Guest 2 <input type="radio"/> Spouse 5 <input type="radio"/> Other, specify _____ 3 <input type="radio"/> Son/Daughter	10 Religion: Tick circle (✓) which applies 1 <input type="radio"/> No Religion 2 <input type="radio"/> Cook Islands Christian Church 3 <input type="radio"/> Roman Catholic 4 <input type="radio"/> Seventh Day Adventist 5 <input type="radio"/> Church of Jesus Christ of Latter Days Saints 6 <input type="radio"/> Other, specify _____ 7 <input type="radio"/> I OBJECT to answering this question
4 Date of Birth: _____ Day / Month / Year	If you are under 15 years GO TO 22 else continue.
5 Place of Birth: _____ Island/Country _____	
6 Visitors Only: If you are a visitor tick circle (✓) <input type="radio"/> <div style="border: 1px solid black; padding: 5px; display: inline-block;">A VISITOR is a person who does not normally reside in the Cook Islands.</div> GO TO 22	
7 Ethnic Origin: Tick circle (✓) which applies 1 <input type="radio"/> Cook Island Maori GO TO 9 2 <input type="radio"/> Part Cook Island Maori 3 <input type="radio"/> Other ethnic origin	11 Marital Status: Tick circle (✓) which applies 1 <input type="radio"/> Never Married 4 <input type="radio"/> Separated from legal partner 2 <input type="radio"/> Married 5 <input type="radio"/> Divorced 3 <input type="radio"/> Widowed
8 Residential Status: Tick circle (✓) which applies 1 <input type="radio"/> Temporary contract worker 2 <input type="radio"/> Dependent of temporary worker 3 <input type="radio"/> Other Nationality _____ State number of years you have lived in the Cook Islands. _____	12 Educational Attainment: Tick circles (✓) which apply (a) Are you still attending school? 1 <input type="radio"/> Yes 2 <input type="radio"/> No (b) What is your highest education level completed? e.g Grade 6, Form 5, Stage III Specify _____ (c) What is your highest school qualification gained? e.g School Certificate, University Bursary Specify _____ (d) What is your highest Trade, Vocational or Professional qualification gained? e.g Trade Certificate, Bachelors Degree, Teachers Diploma Specify _____
9 Address on Census Night: Village _____ Island _____ (i) If you usually live at the above address, tick (✓) circle else state your usual residential address. <input type="radio"/> Village/ _____ Island/ _____ City _____ Country _____ (ii) How long have you lived on the island of your usual address. _____	

13 Activity Status: Tick circle (✓) which applies

1 ☐ Employer, own business/plantation without employees

2 ☐ Employer, own business/plantation with employees

3 ☐ Working full time for wages/salary

4 ☒ Working part time for wage or on casual basis

5 ☐ Unpaid family worker in plantation/store/business

6 ☐ Home Duties → **GO TO 17**

7 ☐ Full time student → **GO TO 15**

8 ☐ Unemployed and looking for work → **GO TO 16**

9 ☐ Retired → **GO TO 17**

10 ☐ Disabled → **GO TO 17**

14 Principal Activity:

(a) Give details of work done:
e.g. citrus grower, wharf labourer, accounts clerk.

(b) Give name of the business/employer that you worked for:
e.g. Statistics Dept., CITC, Tangi Growers, etc.

(c) Type of business/activity:
e.g. Services, Retail Trade, Manufacturing, etc.

(d) How many hours usually worked at this job in a week. _____ hrs

15 Secondary Activity: Were you engaged in other activities for gain?

(a) Give details of work done:
e.g. citrus grower, wharf labourer, accounts clerk.

(b) Give name of the business/employer that you worked for:
e.g. Statistics Dept., CITC, Tangi Growers, etc.

(c) Type of business/activity:
e.g. Services, Retail Trade, Manufacturing, etc.

(d) How many hours usually worked at this job in a week. _____ hrs

16 Unemployed Only and looking for work:

(a) Have you ever had paid work?

1 ☐ Yes → 2 ☐ No

(b) How many weeks since you last had paid work? _____ weeks

17 Unpaid Work: Tick (✓) as many circles as you may require.

1 ☐ Looking after children 5 ☐ Tending the garden

2 ☐ Housework 6 ☐ Fishing

3 ☐ Handicraft making 7 ☐ Catering

4 ☐ Tending the livestock 8 ☐ Sewing

18 Social Welfare Benefits: Tick circles (✓) which apply

(a) Indicate benefit(s) received in the last twelve months.

1 ☐ None 4 ☐ Destitute/Infirm

2 ☐ Child 5 ☐ Superannuation

3 ☐ Old Age 6 ☐ War Pension

19 Income: From ALL the sources of income you get what will be your total income including benefits before tax for the 12 months that will end on 1 December, 1996. Tick circle (✓) which applies

1 ☐ no income 6 ☐ \$20,000 - \$29,999

2 ☐ less than \$5,000 7 ☐ \$30,000 - \$39,999

3 ☐ \$5,000 - \$9,999 8 ☐ \$40,000 - \$49,999

4 ☐ \$10,000 - \$14,999 9 ☐ \$50,000 and over

5 ☐ \$15,000 - \$19,999

20 Land Rights: Tick circles (✓) which apply

(a) Do you have rights to land or will you succeed to land on the island of usual residence and other islands of the Cook Islands.

1 ☐ Yes 2 ☐ No **If NO AND A MALE GO TO 22 ELSE GO TO 21**

(b) Land Tenure

1 ☐ You are a land owner by succession and your rights have been determined by the land court.

State Islands: _____

2 ☐ Sole occupation right 4 ☐ Lease/Sub-lease

3 ☐ Joint Occupation right

4 ☐ Other right

(c) Purposes of the Occupation Right

1 ☐ House site 2 ☐ Agriculture 3 ☐ Other

(d) Purposes of the Lease/Sub-lease

1 ☐ House site 2 ☐ Agriculture 3 ☐ Other

21 Females Only: Include all children born alive to you.

Total Number of children

(a) Born alive: Males _____ Females _____

(b) Still living: Males _____ Females _____

(c) Date of birth of:

First child: / / Day / Month / Year

Last child: / / Day / Month / Year

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Thank you for your cooperation.