



CONFIDENTIAL

REPUBLIC OF NAURU

CENSUS OF POPULATION - 1992

HOUSEHOLD FORM

DISTRICT

DISTRICT NO ENUMERATOR

ENUMERATOR AREA NO SUPERVISOR

HOUSE NO NO. OF FAMILY UNITS

1. Name of head of house:

2. Do the occupants of this house live in:
01 A single dwelling? 01
02 A building housing 2 or more dwellings 02
03 Other living quarters 03

3. How many rooms does this house have? (DO NOT INCLUDE TOILETS, BATHROOMS, STORE ROOMS, GARAGE, HALLS, LAUNDRIES).

Type	Number
BEDROOMS	<input type="text"/>
DINING ROOM	<input type="text"/>
KITCHEN	<input type="text"/>
OTHER ROOMS	<input type="text"/>

4. Does this house have a shared bathroom\shower unit?
01 YES, bathroom shower unit shared by two or more family units 01
02 NO, one unit per family unit 02
03 NO, only one family unit residing 03

5. Does this house have a shared kitchen unit?
01 YES, kitchen is shared by two or more family unit. 01
02 NO, each family unit has its own kitchen unit. 02
03 NO, only one family unit residing. 03

6. What is the main building material used in constructing the walls of this building?
01 CONCRETE 01
02 WOOD 02
03 TIN 03
04 OTHER MATERIALS (Please specify) 04

7. Does this house have electricity?
01 YES 01
02 NO 02

8. What does this house mainly use for lighting?
01 ELECTRICITY (Government supplied, Own Generator, Solar powered) Please specify 01

02	KEROSENE LAMP	02
03	OTHER (Please specify)	03
9. What fuel does this house mainly use for cooking?		
01	ELECTRICITY	01
02	GAS	02
03	KEROSENE	03
04	WOOD\OPEN FIRE	04
05	OTHER (Please specify)	05
10. Do the occupants of this house		
01	OWN THESE LIVING QUARTERS	01
02	RENT THEM FROM A PRIVATE LANDLORD	02
03	RENT THEM FROM A HOUSING AUTHORITY\CORPORATION	03
04	OCCUPY HOUSING BELONGING TO EMPLOYER	04
05	OCCUPY GOVERNMENT HOUSING	05
06	SQUATTER	06
07	OCCUPY LIVING QUARTERS IN SOME OTHER WAY	07
08	OTHER (Please specify)	08
11. Is this house's water supply from: (More than one answer is acceptable)		
01	PRIVATE CISTERN LESS THAN THAN 3,000 GALLONS	01
02	SMALL TANK - 3,000 TO 5,000 GALLONS	02
03	5,000-10,000 GALLON TANK	03
04	10,000 plus GALLON TANK	04
05	WELL	05
06	OTHER SOURCE	06

12. Does this house share use of running water with other houses?		
01	YES	01
02	NO	02
03	NO WATER	03
13. Does the house's water supply dry up?		
01	NEVER	01
02	SOMETIMES	02
03	FREQUENTLY	03
14. Does this house have the following toilets?		
01	FLUSH TOILET FOR OWN USE	01
02	FLUSH TOILET SHARED WITH OTHERS	02
03	OTHER TYPE	03
15. Is the toilet flushed with?		
01	FRESH WATER ONLY	01
02	BRACKISH WATER ONLY	02
03	FRESH AND BRACKISH WATER	03
04	NO FLUSH TOILET	04
16. Is the toilet flushed into:		
01	SEWERAGE	01
02	SEPTIC TANK	02
03	OTHER	03
17. Does this house have any of the following: (State number of each where applicable)		
<u>Amenities\Services</u>		<u>No.</u>
01	MOTOR CAR	01
02	LAND ROVER	02
03	TRUCK\VAN\MINIBUS	03
04	MOTOR BIKE	04
05	BICYCLE	05
06	MOTOR BOAT	06

<u>Amenities\Services</u>	<u>No.</u>
07 SAIL BOAT	07
08 CANOE	08
09 REFRIGERATOR	09
10 DEEP FREEZER	10
11 MICROWAVE OVEN	11
12 TELEVISION	12
13 VIDEO TAPE RECORDER	13
14 RADIO	14
15 TELEPHONE	15
16 AIR-CONDITIONING UNIT	16
17 CEILING\GROUND FANS	17
18 SOLAR HOT WATER SYSTEM	18
19 OTHER HOT WATER SYSTEM	19
20 GARBAGE COLLECTION	20
21 TV DECODER	21
22 GARAGE	22

18. Does this house have a kitchen garden?

- 01 YES 01
02 NO 02

19. Does this house grow crops for sale?

- 01 YES 01
02 NO 02

If yes, what crops do you grow for sale?

(Please specify)

20. Do the occupants of this house catch fish?

- 01 FOR OWN USE 01
02 FOR SALE 02
03 DO NOT CATCH FISH 03

21. Which of these livestock does this house have?

<u>Type</u>	<u>Number</u>		
	<u>Penned</u>	<u>Other</u>	
01 PIGS	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	01
02 CHICKEN	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	02
03 DUCKS	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	03
04 OTHER	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	04
Please specify			
05 NONE			05

22. Does this house have any animal pets?

<u>Type</u>	<u>No.</u>
01 DOGS	<input type="checkbox"/> <input type="checkbox"/> 01
Please specify:	
[a] Type of Dog	
(eg. Alsatian, Doberman, etc.)	<input type="checkbox"/> <input type="checkbox"/>
[b] Place of Breed	
(Whether local\overseas)	<input type="checkbox"/> <input type="checkbox"/>
02 CATS	<input type="checkbox"/> <input type="checkbox"/> 02
03 OTHER	<input type="checkbox"/> <input type="checkbox"/> 03
(Please specify)	<input type="checkbox"/> <input type="checkbox"/>

DATE OF INTERVIEW:

DAY

MONTH

19

YEAR

THANK YOU FOR THIS INTERVIEW.

SUMMARY SHEET TO BE FILLED IN BY ENUMERATOR

Person Number	Family and First Name	Relationship to Head of House (Write wife, child, etc.)	Sex Write M or F	Age	Nauruan or Non-Nauruan Write M or NM		Residential Status on Census Night *				
					M	NM	Resident of House		Visitor to House		
							Present in H	Absent, else-where in Nauru	Absent Abroad	Resident else-where in Nauru (local visitor)	Visitor from Abroad
							(+)	(+)	(+)	(+)	(+)
							[7]	[8]	[9]	[10]	[11]
01			M		N	NM					
02			P								
03											
04											
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09											
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11											
12											
13											
14											
15											
16											
17											
18											
19											
TOTAL											

TICK ONE BOX

House enumerated

House not enumerated

* To be filled on Census night day.