

Household Survey, Baseline

This survey collects household background information for the Social Mobilizer Evaluation (SME). This survey is to be addressed to households of children that are candidates for the SME. A household is defined as all individuals who slept under the same roof in the past 7 days, sharing the same kitchen and other housekeeping arrangements, and being catered to as one unit.

Section 0: General Information

S.N	Questions	Codes and Responses	Go to
001	School DISE Code (Associated School Identifier)	DISE Code _ _ _ _ _ _ _ _ _ _ _ _ : (Enter 10 digit DISE code)	
002	School Name	_____ : (Prefill in Survey)	
003	School ID (Sample School ID)	_ _ _ _ (Prefill in survey)	
004	Target Respondent Name:	RID: _ _ _ _ _ _ _ _ _ _ _ _ (Enter RID) Name: _____ Change Name Yes 1 No 2→005 Enter New name: _____	
005	Names & Identifier of MLSIE candidate children in household (provided by school attendance roster)	Name _____ CID _ _ _ _ _ _ _ _ _ _ _ _ Change Name Yes 1 No 2→Move to next CID (if applicable) or 006	
006	Block	1. Block: _____ 2. Code: _ _ _ _ _ _ _ _ _ _ _ _ (Prefill)	
007	Village Name	Village: _____ Code: _ _ _ _ _ _ _ _ _ _ _ _	

S.N	Questions	Codes and Responses	Go to
		(Prefill)	
008	Hamlet Name:	Place: _____	
009	Record the address of the household.	_____ _____ _____ _____	
010	Unique Household Identity Code	HID: _ _ _ _ _ _ _	
011	Enumerator Code	_ _	
012	Urban/Rural	Urban: 1 Rural: 2	
013	Date of interview	_ _ _ _ _ _ _ _ DD MM YYYY	
014	Time of Start of Interview (IN 24 HR FORMAT)	_ _ _ _ HH MM	

Target Respondent with MLSIE Subject Child: Verbal Informed Consent to be Interviewed

School Identifier (Copy DISE CODE (Prefill) from 001) _____

Target Respondent _____

Enter relation to the household head: |_|_|
(Relationship Code)

Target ID Number (Copy RID(Prefill) from 004) _____

Instructions to Interviewer: Conduct this interview in private. Read the following statements to the respondent and answer any questions the individual may have. If the individual asks about the sponsorship of the study and how the findings will be used, read the explanation that has been provided to you. Do not begin the interview until all questions have been addressed and the individual has agreed to participate in the study.

- Hello, my name is _____. I am talking with families with adolescent girls eligible for schooling in area schools. The information collected will be used in a study about the schooling decisions of the adolescent girls in the area.
- At least one child in your household has been identified as a candidate to participate in the Monitoring and Life Skills Impact Evaluation. DESCRIBE PURPOSE OF STUDY AND PARAMETERS. I am not involved in deciding which group your child might be assigned to, and the answers you give me today have no impact on whether your children are selected for any of the study groups.
- The families of all selected students will be interviewed DATES.
- Each visit in your home will take approximately 60 minutes.
- Your participation in this study is voluntary. If you choose to talk with me, you may choose not to answer some questions or end the interview at any time.
- Your answers to the questions will be kept private and no one will know what you said. Your answers will not be used in determining whether you receive benefits in the program and will not be shared with the individuals administering the program.
- Your name will not be used in any reports.
- I will answer any questions that you have about the study before we begin. Do you have any questions about the study?
- We ask that all participating families in the study agree to be interviewed LIST ALL DATES even if families do not receive financial support from the project. Would you be willing to participate in the study?
- I would like to seek your permission to contact you again in the coming few weeks. The subsequent follow-up visit will collect further information on schooling and household decisions.
- If so, may we begin?

Interviewer Certification of Consent:

My signature affirms that I have read the verbal informed consent statement to the respondent, and I have answered any questions asked about the study. The respondent agreed to be interviewed.

		No	2	
109	How many MGNREG job cards issued to household	Cards:	_ _	
110	Does any member of the household have a bank or post office account?	Yes	1	
		No	2	

Household exposure to general problems in the community

S. N	General Problems	111. Has the household been affected by a (general problem) in the last 12 months Yes 1 No 2 --> Next Problem	112. Did (general problem) result in a significant decrease or loss in household income or inheritance? Yes 1 No 2
A	Earthquake	_	_
B	Drought	_	_
C	Flood	_	_
D	Storms	_	_
E	Cyclone	_	_
F	Plague	_	_
G	Massive Lay Offs	_	_
H	General Price Increases	_	_
I	Public Protest	_	_
J	Other General Problem (Specify)		
	1 Household sequestered		
	2 Infrastructure problems		
	3 Fodder shortage for cattles		
	4 School facilities	_	_
	5 Employment opportunities		
	6 Inflation		
	7 Intermittent electricity		

Household exposure to problems particular to household

S. N	Household Problems	113. Has the household been affected by a (household problem) in the last 12 months	114. Did (household problem) result in a significant decrease or loss in household income or inheritance?
		Yes 1 No 2 --> Next Problem	Yes 1 No 2
A	Loss of employment of any member	_	_
B	Lowered income of any member	_	_
C	Bankruptcy of family business	_	_
D	Serious illness or accident of a working member of the household	_	_
E	Serious illness or accident of a non-working member of the household	_	_
F	Death of a household member	_	_
G	Fire in the house/business/ or household property	_	_
H	Criminal Act including robbery, assault, or physical aggression	_	_
I	Land Dispute	_	_
J	Family Dispute	_	_
K	Loss of cash or in-kind assistance	_	_
L	Fall in prices of goods produced by household business	_	_
M	Loss of Harvest		
N	Illness relating to animals	_	_
O	Other Household Problem (Specify)	_	_

115	Who in your household is most knowledgeable about the activities of members of your household?	Name: _____	
-----	--	-------------	--

116	Who in your household is most knowledgeable about household consumption and expenditure activities?	Name: _____	
-----	---	-------------	--

Target Respondent for Section 2 (115): Verbal Informed Consent to be Interviewed

School DISE (Prefill) Number (Copy from 001): |_|_|

Household ID (Prefill) (Copy from 010): |_|_|

Name of Person who consents to Interview _____

Instructions to Interviewer: Conduct this interview in private. Read the following statements to the individual who is the head of household or the most knowledgeable member of the household and answer any questions the individual may have. If the individual asks about the sponsorship of the study and how the findings will be used, read the explanation that has been provided to you. Do not begin the interview until all questions have been addressed and the individual has agreed to participate in the study.

- Hello, my name is _____. I am talking with families with adolescent girls eligible for schooling in area schools. The information collected will be used in a study about the schooling decisions of the adolescent girls in the area.
- I would like to ask you some questions about you and the members of your household, and your perceptions, psychological well-being and adequacy of consumption in your household.
- Your participation in this study is voluntary. If you choose to talk with me, you may choose not to answer some questions or end the interview at any time.
- Your answers to the questions will be kept private and no one will know what you said. Your name and the contact information you provide will be kept secure and confidential and will not be used in any reports.
- I would like to seek your permission to contact you again in the coming few weeks. The subsequent follow-up visit will collect further information on schooling and household decisions.
- The interview will take about 15 minutes.
- I will answer any questions that you have about the study before we begin. Do you have any questions about the study?
- May we begin?

Interviewer Certification of Consent:

My signature affirms that I have read the verbal informed consent statement to the head of household or the most knowledgeable member of the household, and I have answered any questions asked about the study. The respondent agreed to be interviewed.

1. Respondent agreed to be interviewed.
2. Respondent did not agree to be interviewed → 704

Print Interviewer's Name _____

Interviewer's Signature _____ Date _____

Section 2: Household Roster

200: Respondent Name From Consent Form _____

Please provide information on all individuals who slept under the same roof as you did for the past 7 days, sharing the same kitchen and other housekeeping arrangements and being catered to as one unit. Do not include names of children between 5-18 years who are at the moment staying away for study or work purposes. For them we would ask separately in section 3.

	Line No.	1	2	3	4	5	6	7	8	9	10
201a	List the names of the individuals residing in this household, starting with household head as number 1.										
202	What is (Name)'s relationship to the household head? (Put relationship code)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
203	How old is (Name)? Don't Know -98	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
204	What is the gender of (Name)? Male 1 Female 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
205	INTERVIEWER: IS (NAME) UNDER 6 years of AGE? [CHECK question 203 AND FILL IN] Yes 1 No 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(End this section for children under 6 (with '1' in 205). For people aged 6 years and above, continue with the questions)											

	Line No.	1	2	3	4	5	6	7	8	9	10
206	Is (Name)'s relationship finalized? Single/not committed1 Single, committed or engaged2 Currently Married and cohabitating3 Married but not cohabitating4 Divorced5 Widowed/Widower6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
207	Was (Name) born in this village? Yes 1 No 2 Don't Know -98	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
208	At what age did (Name) first enroll in school? Don't Know -98 Did not go to school ever -101→222	<input type="checkbox"/> -	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
209	After beginning school, did (Name) ever miss school for a year and then return the following year? Yes 1 No 2 Don't Know -98	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
210	If yes, in how many years did (Name) fail to attend school?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
211	After beginning school, did (Name) ever repeat a grade? Yes 1 No 2 Don't Know -98										
212	If yes, what grade did s/he repeat? (Allow for the selection of multiple grades.)	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6

	Line No.	1	2	3	4	5	6	7	8	9	10
		<input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/> 21 <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25 <input type="checkbox"/> 26 <input type="checkbox"/> 27 <input type="checkbox"/> 28 <input type="checkbox"/> 29 <input type="checkbox"/> 30 <input type="checkbox"/> 31 <input type="checkbox"/> 32 <input type="checkbox"/> 33 <input type="checkbox"/> 34 <input type="checkbox"/> 35 <input type="checkbox"/> 36 <input type="checkbox"/> 37 <input type="checkbox"/> 38 <input type="checkbox"/> 39 <input type="checkbox"/> 40 <input type="checkbox"/> 41 <input type="checkbox"/> 42 <input type="checkbox"/> 43 <input type="checkbox"/> 44 <input type="checkbox"/> 45 <input type="checkbox"/> 46 <input type="checkbox"/> 47 <input type="checkbox"/> 48 <input type="checkbox"/> 49 <input type="checkbox"/> 50 <input type="checkbox"/> 51 <input type="checkbox"/> 52 <input type="checkbox"/> 53 <input type="checkbox"/> 54 <input type="checkbox"/> 55 <input type="checkbox"/> 56 <input type="checkbox"/> 57 <input type="checkbox"/> 58 <input type="checkbox"/> 59 <input type="checkbox"/> 60 <input type="checkbox"/> 61 <input type="checkbox"/> 62 <input type="checkbox"/> 63 <input type="checkbox"/> 64 <input type="checkbox"/> 65 <input type="checkbox"/> 66 <input type="checkbox"/> 67 <input type="checkbox"/> 68 <input type="checkbox"/> 69 <input type="checkbox"/> 70 <input type="checkbox"/> 71 <input type="checkbox"/> 72 <input type="checkbox"/> 73 <input type="checkbox"/> 74 <input type="checkbox"/> 75 <input type="checkbox"/> 76 <input type="checkbox"/> 77 <input type="checkbox"/> 78 <input type="checkbox"/> 79 <input type="checkbox"/> 80 <input type="checkbox"/> 81 <input type="checkbox"/> 82 <input type="checkbox"/> 83 <input type="checkbox"/> 84 <input type="checkbox"/> 85 <input type="checkbox"/> 86 <input type="checkbox"/> 87 <input type="checkbox"/> 88 <input type="checkbox"/> 89 <input type="checkbox"/> 90 <input type="checkbox"/> 91 <input type="checkbox"/> 92 <input type="checkbox"/> 93 <input type="checkbox"/> 94 <input type="checkbox"/> 95 <input type="checkbox"/> 96 <input type="checkbox"/> 97 <input type="checkbox"/> 98 <input type="checkbox"/> 99 <input type="checkbox"/> 100 <input type="checkbox"/> 101 <input type="checkbox"/> 102 <input type="checkbox"/> 103 <input type="checkbox"/> 104 <input type="checkbox"/> 105 <input type="checkbox"/> 106 <input type="checkbox"/> 107 <input type="checkbox"/> 108 <input type="checkbox"/> 109 <input type="checkbox"/> 110 <input type="checkbox"/> 111 <input type="checkbox"/> 112 <input type="checkbox"/> 113 <input type="checkbox"/> 114 <input type="checkbox"/> 115 <input type="checkbox"/> 116 <input type="checkbox"/> 117 <input type="checkbox"/> 118 <input type="checkbox"/> 119 <input type="checkbox"/> 120 <input type="checkbox"/> 121 <input type="checkbox"/> 122 <input type="checkbox"/> 123 <input type="checkbox"/> 124 <input type="checkbox"/> 125 <input type="checkbox"/> 126 <input type="checkbox"/> 127 <input type="checkbox"/> 128 <input type="checkbox"/> 129 <input type="checkbox"/> 130 <input type="checkbox"/> 131 <input type="checkbox"/> 132 <input type="checkbox"/> 133 <input type="checkbox"/> 134 <input type="checkbox"/> 135 <input type="checkbox"/> 136 <input type="checkbox"/> 137 <input type="checkbox"/> 138 <input type="checkbox"/> 139 <input type="checkbox"/> 140 <input type="checkbox"/> 141 <input type="checkbox"/> 142 <input type="checkbox"/> 143 <input type="checkbox"/> 144 <input type="checkbox"/> 145 <input type="checkbox"/> 146 <input type="checkbox"/> 147 <input type="checkbox"/> 148 <input type="checkbox"/> 149 <input type="checkbox"/> 150 <input type="checkbox"/> 151 <input type="checkbox"/> 152 <input type="checkbox"/> 153 <input type="checkbox"/> 154 <input type="checkbox"/> 155 <input type="checkbox"/> 156 <input type="checkbox"/> 157 <input type="checkbox"/> 158 <input type="checkbox"/> 159 <input type="checkbox"/> 160 <input type="checkbox"/> 161 <input type="checkbox"/> 162 <input type="checkbox"/> 163 <input type="checkbox"/> 164 <input type="checkbox"/> 165 <input type="checkbox"/> 166 <input type="checkbox"/> 167 <input type="checkbox"/> 168 <input type="checkbox"/> 169 <input type="checkbox"/> 170 <input type="checkbox"/> 171 <input type="checkbox"/> 172 <input type="checkbox"/> 173 <input type="checkbox"/> 174 <input type="checkbox"/> 175 <input type="checkbox"/> 176 <input type="checkbox"/> 177 <input type="checkbox"/> 178 <input type="checkbox"/> 179 <input type="checkbox"/> 180 <input type="checkbox"/> 181 <input type="checkbox"/> 182 <input type="checkbox"/> 183 <input type="checkbox"/> 184 <input type="checkbox"/> 185 <input type="checkbox"/> 186 <input type="checkbox"/> 187 <input type="checkbox"/> 188 <input type="checkbox"/> 189 <input type="checkbox"/> 190 <input type="checkbox"/> 191 <input type="checkbox"/> 192 <input type="checkbox"/> 193 <input type="checkbox"/> 194 <input type="checkbox"/> 195 <input type="checkbox"/> 196 <input type="checkbox"/> 197 <input type="checkbox"/> 198 <input type="checkbox"/> 199 <input type="checkbox"/> 200 <input type="checkbox"/> 201 <input type="checkbox"/> 202 <input type="checkbox"/> 203 <input type="checkbox"/> 204 <input type="checkbox"/> 205 <input type="checkbox"/> 206 <input type="checkbox"/> 207 <input type="checkbox"/> 208 <input type="checkbox"/> 209 <input type="checkbox"/> 210 <input type="checkbox"/> 211 <input type="checkbox"/> 212 <input type="checkbox"/> 213 <input type="checkbox"/> 214 <input type="checkbox"/> 215 <input type="checkbox"/> 216 <input type="checkbox"/> 217 <input type="checkbox"/> 218 <input type="checkbox"/> 219 <input type="checkbox"/> 220 <input type="checkbox"/> 221 <input type="checkbox"/> 222 <input type="checkbox"/> 223 <input type="checkbox"/> 224 <input type="checkbox"/> 225 <input type="checkbox"/> 226 <input type="checkbox"/> 227 <input type="checkbox"/> 228 <input type="checkbox"/> 229 <input type="checkbox"/> 230 <input type="checkbox"/> 231 <input type="checkbox"/> 232 <input type="checkbox"/> 233 <input type="checkbox"/> 234 <input type="checkbox"/> 235 <input type="checkbox"/> 236 <input type="checkbox"/> 237 <input type="checkbox"/> 238 <input type="checkbox"/> 239 <input type="checkbox"/> 240 <input type="checkbox"/> 241 <input type="checkbox"/> 242 <input type="checkbox"/> 243 <input type="checkbox"/> 244 <input type="checkbox"/> 245 <input type="checkbox"/> 246 <input type="checkbox"/> 247 <input type="checkbox"/> 248 <input type="checkbox"/> 249 <input type="checkbox"/> 250 <input type="checkbox"/> 251 <input type="checkbox"/> 252 <input type="checkbox"/> 253 <input type="checkbox"/> 254 <input type="checkbox"/> 255 <input type="checkbox"/> 256 <input type="checkbox"/> 257 <input type="checkbox"/> 258 <input type="checkbox"/> 259 <input type="checkbox"/> 260 <input type="checkbox"/> 261 <input type="checkbox"/> 262 <input type="checkbox"/> 263 <input type="checkbox"/> 264 <input type="checkbox"/> 265 <input type="checkbox"/> 266 <input type="checkbox"/> 267 <input type="checkbox"/> 268 <input type="checkbox"/> 269 <input type="checkbox"/> 270 <input type="checkbox"/> 271 <input type="checkbox"/> 272 <input type="checkbox"/> 273 <input type="checkbox"/> 274 <input type="checkbox"/> 275 <input type="checkbox"/> 276 <input type="checkbox"/> 277 <input type="checkbox"/> 278 <input type="checkbox"/> 279 <input type="checkbox"/> 280 <input type="checkbox"/> 281 <input type="checkbox"/> 282 <input type="checkbox"/> 283 <input type="checkbox"/> 284 <input type="checkbox"/> 285 <input type="checkbox"/> 286 <input type="checkbox"/> 287 <input type="checkbox"/> 288 <input type="checkbox"/> 289 <input type="checkbox"/> 290 <input type="checkbox"/> 291 <input type="checkbox"/> 292 <input type="checkbox"/> 293 <input type="checkbox"/> 294 <input type="checkbox"/> 295 <input type="checkbox"/> 296 <input type="checkbox"/> 297 <input type="checkbox"/> 298 <input type="checkbox"/> 299 <input type="checkbox"/> 300 <input type="checkbox"/> 301 <input type="checkbox"/> 302 <input type="checkbox"/> 303 <input type="checkbox"/> 304 <input type="checkbox"/> 305 <input type="checkbox"/> 306 <input type="checkbox"/> 307 <input type="checkbox"/> 308 <input type="checkbox"/> 309 <input type="checkbox"/> 310 <input type="checkbox"/> 311 <input type="checkbox"/> 312 <input type="checkbox"/> 313 <input type="checkbox"/> 314 <input type="checkbox"/> 315 <input type="checkbox"/> 316 <input type="checkbox"/> 317 <input type="checkbox"/> 318 <input type="checkbox"/> 319 <input type="checkbox"/> 320 <input type="checkbox"/> 321 <input type="checkbox"/> 322 <input type="checkbox"/> 323 <input type="checkbox"/> 324 <input type="checkbox"/> 325 <input type="checkbox"/> 326 <input type="checkbox"/> 327 <input type="checkbox"/> 328 <input type="checkbox"/> 329 <input type="checkbox"/> 330 <input type="checkbox"/> 331 <input type="checkbox"/> 332 <input type="checkbox"/> 333 <input type="checkbox"/> 334 <input type="checkbox"/> 335 <input type="checkbox"/> 336 <input type="checkbox"/> 337 <input type="checkbox"/> 338 <input type="checkbox"/> 339 <input type="checkbox"/> 340 <input type="checkbox"/> 341 <input type="checkbox"/> 342 <input type="checkbox"/> 343 <input type="checkbox"/> 344 <input type="checkbox"/> 345 <input type="checkbox"/> 346 <input type="checkbox"/> 347 <input type="checkbox"/> 348 <input type="checkbox"/> 349 <input type="checkbox"/> 350 <input type="checkbox"/> 351 <input type="checkbox"/> 352 <input type="checkbox"/> 353 <input type="checkbox"/> 354 <input type="checkbox"/> 355 <input type="checkbox"/> 356 <input type="checkbox"/> 357 <input type="checkbox"/> 358 <input type="checkbox"/> 359 <input type="checkbox"/> 360 <input type="checkbox"/> 361 <input type="checkbox"/> 362 <input type="checkbox"/> 363 <input type="checkbox"/> 364 <input type="checkbox"/> 365 <input type="checkbox"/> 366 <input type="checkbox"/> 367 <input type="checkbox"/> 368 <input type="checkbox"/> 369 <input type="checkbox"/> 370 <input type="checkbox"/> 371 <input type="checkbox"/> 372 <input type="checkbox"/> 373 <input type="checkbox"/> 374 <input type="checkbox"/> 375 <input type="checkbox"/> 376 <input type="checkbox"/> 377 <input type="checkbox"/> 378 <input type="checkbox"/> 379 <input type="checkbox"/> 380 <input type="checkbox"/> 381 <input type="checkbox"/> 382 <input type="checkbox"/> 383 <input type="checkbox"/> 384 <input type="checkbox"/> 385 <input type="checkbox"/> 386 <input type="checkbox"/> 387 <input type="checkbox"/> 388 <input type="checkbox"/> 389 <input type="checkbox"/> 390 <input type="checkbox"/> 391 <input type="checkbox"/> 392 <input type="checkbox"/> 393 <input type="checkbox"/> 394 <input type="checkbox"/> 395 <input type="checkbox"/> 396 <input type="checkbox"/> 397 <input type="checkbox"/> 398 <input type="checkbox"/> 399 <input type="checkbox"/> 400 <input type="checkbox"/> 401 <input type="checkbox"/> 402 <input type="checkbox"/> 403 <input type="checkbox"/> 404 <input type="checkbox"/> 405 <input type="checkbox"/> 406 <input type="checkbox"/> 407 <input type="checkbox"/> 408 <input type="checkbox"/> 409 <input type="checkbox"/> 410 <input type="checkbox"/> 411 <input type="checkbox"/> 412 <input type="checkbox"/> 413 <input type="checkbox"/> 414 <input type="checkbox"/> 415 <input type="checkbox"/> 416 <input type="checkbox"/> 417 <input type="checkbox"/> 418 <input type="checkbox"/> 419 <input type="checkbox"/> 420 <input type="checkbox"/> 421 <input type="checkbox"/> 422 <input type="checkbox"/> 423 <input type="checkbox"/> 424 <input type="checkbox"/> 425 <input type="checkbox"/> 426 <input type="checkbox"/> 427 <input type="checkbox"/> 428 <input type="checkbox"/> 429 <input type="checkbox"/> 430 <input type="checkbox"/> 431 <input type="checkbox"/> 432 <input type="checkbox"/> 433 <input type="checkbox"/> 434 <input type="checkbox"/> 435 <input type="checkbox"/> 436 <input type="checkbox"/> 437 <input type="checkbox"/> 438 <input type="checkbox"/> 439 <input type="checkbox"/> 440 <input type="checkbox"/> 441 <input type="checkbox"/> 442 <input type="checkbox"/> 443 <input type="checkbox"/> 444 <input type="checkbox"/> 445 <input type="checkbox"/> 446 <input type="checkbox"/> 447 <input type="checkbox"/> 448 <input type="checkbox"/> 449 <input type="checkbox"/> 450 <input type="checkbox"/> 451 <input type="checkbox"/> 452 <input type="checkbox"/> 453 <input type="checkbox"/> 454 <input type="checkbox"/> 455 <input type="checkbox"/> 456 <input type="checkbox"/> 457 <input type="checkbox"/> 458 <input type="checkbox"/> 459 <input type="checkbox"/> 460 <input type="checkbox"/> 461 <input type="checkbox"/> 462 <input type="checkbox"/> 463 <input type="checkbox"/> 464 <input type="checkbox"/> 465 <input type="checkbox"/> 466 <input type="checkbox"/> 467 <input type="checkbox"/> 468 <input type="checkbox"/> 469 <input type="checkbox"/> 470 <input type="checkbox"/> 471 <input type="checkbox"/> 472 <input type="checkbox"/> 473 <input type="checkbox"/> 474 <input type="checkbox"/> 475 <input type="checkbox"/> 476 <input type="checkbox"/> 477 <input type="checkbox"/> 478 <input type="checkbox"/> 479 <input type="checkbox"/> 480 <input type="checkbox"/> 481 <input type="checkbox"/> 482 <input type="checkbox"/> 483 <input type="checkbox"/> 484 <input type="checkbox"/> 485 <input type="checkbox"/> 486 <input type="checkbox"/> 487 <input type="checkbox"/> 488 <input type="checkbox"/> 489 <input type="checkbox"/> 490 <input type="checkbox"/> 491 <input type="checkbox"/> 492 <input type="checkbox"/> 493 <input type="checkbox"/> 494 <input type="checkbox"/> 495 <input type="checkbox"/> 496 <input type="checkbox"/> 497 <input type="checkbox"/> 498 <input type="checkbox"/> 499 <input type="checkbox"/> 500 <input type="checkbox"/> 501 <input type="checkbox"/> 502 <input type="checkbox"/> 503 <input type="checkbox"/> 504 <input type="checkbox"/> 505 <input type="checkbox"/> 506 <input type="checkbox"/> 507 <input type="checkbox"/> 508 <input type="checkbox"/> 509 <input type="checkbox"/> 510 <input type="checkbox"/> 511 <input type="checkbox"/> 512 <input type="checkbox"/> 513 <input type="checkbox"/> 514 <input type="checkbox"/> 515 <input type="checkbox"/> 516 <input type="checkbox"/> 517 <input type="checkbox"/> 518 <input type="checkbox"/> 519 <input type="checkbox"/> 520 <input type="checkbox"/> 521 <input type="checkbox"/> 522 <input type="checkbox"/> 523 <input type="checkbox"/> 524 <input type="checkbox"/> 525 <input type="checkbox"/> 526 <input type="checkbox"/> 527 <input type="checkbox"/> 528 <input type="checkbox"/> 529 <input type="checkbox"/> 530 <input type="checkbox"/> 531 <input type="checkbox"/> 532 <input type="checkbox"/> 533 <input type="checkbox"/> 534 <input type="checkbox"/> 535 <input type="checkbox"/> 536 <input type="checkbox"/> 537 <input type="checkbox"/> 538 <input type="checkbox"/> 539 <input type="checkbox"/> 540 <input type="checkbox"/> 541 <input type="checkbox"/> 542 <input type="checkbox"/> 543 <input type="checkbox"/> 544 <input type="checkbox"/> 545 <input type="checkbox"/> 546 <input type="checkbox"/> 547 <input type="checkbox"/> 548 <input type="checkbox"/> 549 <input type="checkbox"/> 550 <input type="checkbox"/> 551 <input type="checkbox"/> 552 <input type="checkbox"/> 553 <input type="checkbox"/> 554 <input type="checkbox"/> 555 <input type="checkbox"/> 556 <input type="checkbox"/> 557 <input type="checkbox"/> 558 <input type="checkbox"/> 559 <input type="checkbox"/> 560 <input type="checkbox"/> 561 <input type="checkbox"/> 562 <input type="checkbox"/> 563 <input type="checkbox"/> 564 <input type="checkbox"/> 565 <input type="checkbox"/> 566 <input type="checkbox"/> 567 <input type="checkbox"/> 568 <input type="checkbox"/> 569 <input type="checkbox"/> 570 <input type="checkbox"/> 571 <input type="checkbox"/> 572 <input type="checkbox"/> 573 <input type="checkbox"/> 574 <input type="checkbox"/> 575 <input type="checkbox"/> 576 <input type="checkbox"/> 577 <input type="checkbox"/> 578 <input type="checkbox"/> 579 <input type="checkbox"/> 580 <input type="checkbox"/> 581 <input type="checkbox"/> 582 <input type="checkbox"/> 583 <input type="checkbox"/> 584 <input type="checkbox"/> 585 <input type="checkbox"/> 586 <input type="checkbox"/> 587 <input type="checkbox"/> 588 <input type="checkbox"/> 589 <input type="checkbox"/> 590 <input type="checkbox"/> 591 <input type="checkbox"/> 592 <input type="checkbox"/> 593 <input type="checkbox"/> 594 <input type="checkbox"/> 595 <input type="checkbox"/> 596 <input type="checkbox"/> 597 <input type="checkbox"/> 598 <input type="checkbox"/> 599 <input type="checkbox"/> 600 <input type="checkbox"/> 601 <input type="checkbox"/> 602 <input type="checkbox"/> 603 <input type="checkbox"/> 604 <input type="checkbox"/> 605 <input type="checkbox"/> 606 <input type="checkbox"/> 607 <input type="checkbox"/> 608 <input type="checkbox"/> 609 <input type="checkbox"/> 610 <input type="checkbox"/> 611 <input type="checkbox"/> 612 <input type="checkbox"/> 613 <input type="checkbox"/> 614 <input type="checkbox"/> 615 <input type="checkbox"/> 616 <input type="checkbox"/> 617 <input type="checkbox"/> 618 <input type="checkbox"/> 619 <input type="checkbox"/> 620 <input type="checkbox"/> 621 <input type="checkbox"/> 622 <input type="checkbox"/> 623 <input type="checkbox"/> 624 <input type="checkbox"/> 625 <input type="checkbox"/> 626 <input type="checkbox"/> 627 <input type="checkbox"/> 628 <input type="checkbox"/> 629 <input type="checkbox"/> 630 <input type="checkbox"/> 631 <input type="checkbox"/> 632 <input type="checkbox"/> 633 <input type="checkbox"/> 634 <input type="checkbox"/> 635 <input type="checkbox"/> 636 <input type="checkbox"/> 637 <input type="checkbox"/> 638 <input type="checkbox"/> 639 <input type="checkbox"/> 640 <input type="checkbox"/> 641 <input type="checkbox"/> 642 <input type="checkbox"/> 643 <input type="checkbox"/> 644 <input type="checkbox"/> 645 <input type="checkbox"/> 646 <input type="checkbox"/> 647 <input type="checkbox"/> 648 <input type="checkbox"/> 649 <input type="checkbox"/> 650 <input type="checkbox"/> 651 <input type="checkbox"/> 652 <input type="checkbox"/> 653 <input type="checkbox"/> 654 <input type="checkbox"/> 655 <input type="checkbox"/> 656 <input type="checkbox"/> 657 <input type="checkbox"/> 658 <input type="checkbox"/> 659 <input type="checkbox"/> 660 <input type="checkbox"/> 661 <input type="checkbox"/> 662 <input type="checkbox"/> 663 <input type="checkbox"/> 664 <input type="checkbox"/> 665 <input type="checkbox"/> 666 <input type="checkbox"/> 667 <input type="checkbox"/> 668 <input type="checkbox"/> 669 <input type="checkbox"/> 670 <input type="checkbox"/> 671 <input type="checkbox"/> 672 <input type="checkbox"/> 673 <input type="checkbox"/> 674 <input type="checkbox"/> 675 <input type="checkbox"/> 676 <input type="checkbox"/> 677 <input type="checkbox"/> 678 <input type="checkbox"/> 679 <input type="checkbox"/> 680 <input type="checkbox"/> 681 <input type="checkbox"/> 682 <input type="checkbox"/> 683 <input type="checkbox"/> 684 <input type="checkbox"/> 685 <input type="checkbox"/> 686 <input type="checkbox"/> 687 <input type="checkbox"/> 688 <input type="checkbox"/> 689 <input type="checkbox"/> 690 <input type="checkbox"/> 691 <input type="checkbox"/> 692 <input type="checkbox"/> 693 <input type="checkbox"/> 694 <input type="checkbox"/> 695 <input type="checkbox"/> 696 <input type="checkbox"/> 697 <input type="checkbox"/> 698 <input type="checkbox"/> 699 <input type="checkbox"/> 700 <input type="checkbox"/> 701 <input type="checkbox"/> 702 <input type="checkbox"/> 703 <input type="checkbox"/> 704 <input type="checkbox"/> 705 <input type="checkbox"/> 706 <input type="checkbox"/> 707 <input type="checkbox"/> 708 <input type="checkbox"/> 709 <input type="checkbox"/> 710 <input type="checkbox"/> 711 <input type="checkbox"/> 712 <input type="checkbox"/> 713 <input type="checkbox"/> 714 <input type="checkbox"/> 715 <input type="checkbox"/> 716 <input type="checkbox"/> 717 <input type="checkbox"/> 718 <input type="checkbox"/> 719 <input type="checkbox"/> 720 <input type="checkbox"/> 721 <input type="checkbox"/> 722 <input type="checkbox"/> 723 <input type="checkbox"/> 724 <input type="checkbox"/> 725 <input type="checkbox"/> 726 <input type="checkbox"/> 727 <input type="checkbox"/> 728 <input type="checkbox"/> 729 <input type="checkbox"/> 730 <input type="checkbox"/> 731 <input type="checkbox"/> 732 <input type="checkbox"/> 733 <input type="checkbox"/> 734 <input type="checkbox"/> 735 <input type="checkbox"/> 736 <input type="checkbox"/> 737 <input type="checkbox"/> 738 <input type="checkbox"/> 739 <input type="checkbox"/> 740 <input type="checkbox"/> 741 <input type="checkbox"/> 742 <input type="checkbox"/> 743 <input type="checkbox"/> 744 <input type="checkbox"/> 745 <input type="checkbox"/> 746 <input type="checkbox"/> 747 <input type="checkbox"/> 748 <input type="checkbox"/> 749 <input type="checkbox"/> 750 <input type="checkbox"/> 751 <input type="checkbox"/> 752 <input type="checkbox"/> 753 <input type="checkbox"/> 754 <input type="checkbox"/> 755 <input type="checkbox"/> 756 <input type="checkbox"/> 757 <input type="checkbox"/> 758 <input type="checkbox"/> 759 <input type="checkbox"/> 760 <input type="checkbox"/> 761 <input type="checkbox"/> 762 <input type="checkbox"/> 763 <input type="checkbox"/> 764 <input type="checkbox"/> 765 <input type="checkbox"/> 766 <input type="checkbox"/> 767 <input type="checkbox"/> 768 <input type="checkbox"/> 769 <input type="checkbox"/> 770 <input type="checkbox"/> 771 <input type="checkbox"/> 772 <input type="checkbox"/> 773 <input type="checkbox"/> 774 <input type="checkbox"/> 775 <input type="checkbox"/> 776 <input type="checkbox"/> 777 <input type="checkbox"/> 778 <input type="checkbox"/> 779 <input type="checkbox"/> 780 <input type="checkbox"/> 781 <input type="checkbox"/> 782 <input type="checkbox"/> 783 <input type="checkbox"/> 784 <input type="checkbox"/> 785 <input type="checkbox"/> 786 <input type="checkbox"/> 787 <input type="checkbox"/> 788 <input type="checkbox"/> 789 <input type="checkbox"/> 790 <input type="checkbox"/> 791 <input type="checkbox"/> 792 <input type="checkbox"/> 793 <input type="checkbox"/> 794 <input type="checkbox"/> 795 <input type="checkbox"/> 796 <input type="checkbox"/> 797 <input type="checkbox"/> 798 <input type="checkbox"/> 799 <input type="checkbox"/> 800 <input type="checkbox"/> 801 <input type="checkbox"/> 802 <input type="checkbox"/> 803 <input type="checkbox"/> 804 <input type="checkbox"/> 805 <input type="checkbox"/> 806 <input type="checkbox"/> 807 <input type="checkbox"/> 808 <input type="checkbox"/> 809 <input type="checkbox"/> 810 <input type="checkbox"/> 811 <input type="checkbox"/> 812 <input type="checkbox"/> 813 <input type="checkbox"/> 814 <input type="checkbox"/> 815 <input type="checkbox"/> 816 <input type="checkbox"/> 817 <input type="checkbox"/> 818 <input type="checkbox"/> 819 <input type="checkbox"/> 820 <input type="checkbox"/> 821 <input type="checkbox"/> 822 <input type="checkbox"/> 823 <input type="checkbox"/> 824 <input type="checkbox"/> 825 <input type="checkbox"/> 826 <input type="checkbox"/> 827 <input type="checkbox"/> 828 <input type="checkbox"/> 829 <input type="checkbox"/> 830 <input type="checkbox"/> 831 <input type="checkbox"/> 832 <input type="checkbox"/> 833 <input type="checkbox"/> 834 <input type="checkbox"/> 835 <input type="checkbox"/> 836 <input type="checkbox"/> 837 <input type="checkbox"/> 838 <input type="checkbox"/> 839 <input type="checkbox"/> 840 <input type="checkbox"/> 841 <input type="checkbox"/> 842 <input type="checkbox"/> 843 <input type="checkbox"/> 844 <input type="checkbox"/> 845 <input type="checkbox"/> 846 <input type="checkbox"/> 847 <input type="checkbox"/> 848 <input type="checkbox"/> 849 <input type="checkbox"/> 850 <input type="checkbox"/> 851 <input type="checkbox"/> 852 <input type="checkbox"/> 853 <input type="checkbox"/> 854 <input type="checkbox"/> 855 <input type="checkbox"/> 856 <input type="checkbox"/> 857 <input type="checkbox"/> 858 <input type="checkbox"/> 859 <input type="checkbox"/> 860 <input type="checkbox"/> 861 <input type="checkbox"/> 862 <input type="checkbox"/> 863 <input type="checkbox"/> 864 <input type="checkbox"/> 865 <input type="checkbox"/> 866 <input type="checkbox"/> 867 <input type="checkbox"/> 868 <input type="checkbox"/> 869 <input type="checkbox"/> 870 <input type="checkbox"/> 871 <input type="checkbox"/> 872 <input type="checkbox"/> 873 <input type="checkbox"/> 874 <input type="checkbox"/> 875 <input type="checkbox"/> 876 <input type="checkbox"/> 877 <input type="checkbox"/> 878 <input type="checkbox"/> 879 <input type="checkbox"/> 880 <input type="checkbox"/> 881 <input type="checkbox"/> 882 <input type="checkbox"/> 883 <input type="checkbox"/> 884 <input type="checkbox"/> 885 <input type="checkbox"/> 886 <input type="checkbox"/> 887 <input type="checkbox"/> 888 <input type="checkbox"/> 889 <input type="checkbox"/> 890 <input type="checkbox"/> 891 <input type="checkbox"/> 892 <input type="checkbox"/> 893 <input type="checkbox"/> 894 <input type="checkbox"/> 895 <input type="checkbox"/> 896 <input type="checkbox"/> 897 <input type="checkbox"/> 898 <input type="checkbox"/> 899 <input type="checkbox"/> 900 <input type="checkbox"/> 901 <input type="checkbox"/> 902 <input type="checkbox"/> 903 <input type="checkbox"/> 904 <input type="checkbox"/> 905 <input type="checkbox"/> 906 <input type="checkbox"/> 907 <input type="checkbox"/> 908 <input type="checkbox"/> 909 <input type="checkbox"/> 910 <input type="checkbox"/> 911 <input type="checkbox"/> 912 <input type="checkbox"/> 913 <input type="checkbox"/> 914 <input type="checkbox"/> 915 <input type="checkbox"/> 916 <input type="checkbox"/> 917 <input type="checkbox"/> 918 <input type="checkbox"/> 919 <input type="checkbox"/> 920 <input type="checkbox"/> 921 <input type="checkbox"/> 922 <input type="checkbox"/> 923 <input type="checkbox"/> 924 <input type="checkbox"/> 925 <input type="checkbox"/> 926 <input type="checkbox"/> 927 <input type="checkbox"/> 928 <input type="checkbox"/> 929 <input type="checkbox"/> 930 <input type="checkbox"/> 931 <input type="checkbox"/> 932 <input type="checkbox"/> 933 <input type="checkbox"/> 934 <input type="checkbox"/> 935 <input type="checkbox"/> 936 <input type="checkbox"/> 937 <input type="checkbox"/> 938 <input type="checkbox"/> 939 <input type="checkbox"/> 940 <input type="checkbox"/> 941 <input type="checkbox"/> 942 <input type="checkbox"/> 943 <input type="checkbox"/> 944 <input type="checkbox"/> 945 <input type="checkbox"/> 946 <input type="checkbox"/> 947 <input type="checkbox"/> 948 <input type="checkbox"/> 949 <input type="checkbox"/> 950 <input type="checkbox"/> 951 <input type="checkbox"/> 952 <input type="checkbox"/> 953 <input type="checkbox"/> 954 <input type="checkbox"/> 955 <input type="checkbox"/> 956 <input type="checkbox"/> 957 <input type="checkbox"/> 958 <input type="checkbox"/> 959 <input type="checkbox"/> 960 <input type="checkbox"/> 961 <input type="checkbox"/> 962 <input type="checkbox"/> 963 <input type="checkbox"/> 964 <input type="checkbox"/> 965 <input type="checkbox"/> 966 <input type="checkbox"/> 967 <input type="checkbox"/> 968 <input type="checkbox"/> 969 <input type="checkbox"/> 970 <input type="checkbox"/> 971 <input type="checkbox"/> 972 <input type="checkbox"/> 973 <input type="checkbox"/> 974 <input type="checkbox"/> 975 <input type="checkbox"/> 976 <input type="checkbox"/> 977 <input type="checkbox"/> 978 <input type="checkbox"/> 979 <input type="checkbox"/> 980 <input type="checkbox"/> 981 <input type="checkbox"/> 982 <input type="checkbox"/> 983 <input type="checkbox"/> 984 <input type="checkbox"/> 985 <input type="checkbox"/> 986 <input type="checkbox"/> 987 <input type="checkbox"/> 988 <input type="checkbox"/> 989 <input type="checkbox"/> 990 <input type="checkbox"/> 991 <input type="checkbox"/> 992 <input type="checkbox"/> 993 <input type="checkbox"/> 994 <input type="checkbox"/> 995 <input type="checkbox"/> 996 <input type="checkbox"/> 997 <input type="checkbox"/> 998 <input type="checkbox"/> 999 <input type="checkbox"/> 1000 <input type="checkbox"/> 1001 <input type="checkbox"/> 1002 <input type="checkbox"/> 1003 <input type="checkbox"/> 1004 <input type="checkbox"/> 1005 <input type="checkbox"/> 1006 <input type="checkbox"/> 1007 <input type="checkbox"/> 1008 <input type="checkbox"/> 1009 <input type="checkbox"/> 1010 <input type="checkbox"/> 1011 <input type="checkbox"/> 1012 <input type="checkbox"/> 1013 <input type="checkbox"/> 1014 <input type="checkbox"/> 1015 <input type="checkbox"/> 1016 <input type="checkbox"/> 1017 <input type="checkbox"/> 1018 <input type="checkbox"/> 1019 <input type="checkbox"/> 1020 <input type="checkbox"/> 1021 <input type="checkbox"/> 1022 <input type="checkbox"/> 1023 <input type="checkbox"/> 1024 <input type="checkbox"/> 1025 <input type="checkbox"/> 1026 <input type="checkbox"/> 1027 <input type="checkbox"/> 1028 <input type="checkbox"/> 1029 <input type="checkbox"/> 1030 <input type="checkbox"/> 1031 									

	Line No.	1	2	3	4	5	6	7	8	9	10
	(Name)'s current grade?										
218	In the last 12 months, how much has this household spent out of pocket for (Name)'s education beyond the school fees you just mentioned. Please consider uniforms, books, PTO fees, bus or transport fees, school supplies, and anything else you believe (Name) needs in order to attend school Don't Know -98	— —	—	—	—	—	—	—	—	—	—
219	In the past 7 days, how many days did (Name) go to school?	_	_	_	_	_	_	_	_	_	_
220	In the past 7 days, how many days was (Name)'s school open for teaching? →222	_	_	_	_	_	_	_	_	_	_
221	At what age did (Name) stop attending school? Don't Know -98	_ _	_ _ 	_ _ 	_ _ 	_ _ 	_ _ 	_ _ 	_ _ 	_ _ 	_ _
222	What is (Name)'s usual employment status over the last 7 days?										
	98 Unknown										
	96 Other (Specify)										
	0 Not in labor force										
	1 Unpaid Worker in Family Farm										
	2 Unpaid Worker in Family Business	_	_	_	_	_	_	_	_	_	_
	3 Self Employed in Agriculture										
	4 Self Employed in Outside of Agr.										
	5 Regular Wage or Salary Worker in Agr										
	6 Regular Wage or Salary Worker Outside Agr										
	7 Skilled worker										
	Unknown - 98→225										

	Line No.	1	2	3	4	5	6	7	8	9	10
223	How many hours did (Name) spend in employment (both inside and outside the household) in the last 7 days?	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
224	How much income in cash or in kind did (Name) earn from employment in the last 7 days? If multiple family members were paid in lump sum, divide payment across participants. Don't Know -98	____ —	_____	_____	_____	_____	_____	_____	_____	_____	_____
225	How many hours did (Name) spend in collection activities in the last 7 days? This would include fetching water/dung cakes or wood, feeding cattle, animal husbandry?	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
226	How many hours did (Name) spend doing household chores over the last 7 days including cooking, cleaning, shopping, caretaking, babysitting etc.	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _

227	Enter Roster Number of (115)	_ _
228	Enter Roster Number of (116)	_ _

Section 3: Children of household members living elsewhere

Please list all offspring of household members who are above 5 and under age 18 and not listed on the household roster (section 2).

301	Is there any offspring in the household between age 5-18 who is not listed above and is staying elsewhere?	Yes 1	401
		No 2	

	Line No.	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10
301a	Name										
301b	Copy the line number for the individual	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
302	How old is (Name)? Don't Know -98	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
303	What is the gender of (Name)? Male 1 Female 2	_	_	_	_	_	_	_	_	_	_
304	Is (Name)'s mother in the household Yes 1 No 2 - go to 306	_	_	_	_	_	_	_	_	_	_
305	Mother's line number from roster	_	_	_	_	_	_	_	_	_	_

	Line No.	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10
306	Is (Name)'s father in the household Yes 1 No 2 – go to 308	_	_	_	_	_	_	_	_	_	_
307	Father's line number from roster	_	_	_	_	_	_	_	_	_	_
308	Why did (Name) leave this location? (Allow multiple responses) 1. To look for work 2. To take an existing job 3. To help in another's household 4. Training or informal education 5. Formal schooling 6. Traveled with parent (parent moved) 7. Marriage -98 Don't Know -96. Others specify	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
309	How was (Name's) travel organized? 1 – Child or parent organized trip 2 – Recruiter / future employer organized trip 3 – Other person organized trip -98 Don't Know -96-Others specify	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
310	Did anyone in this household receive money from a future employer or recruiter before or when (Name) left the household? 1- Yes 2- No -98-Don't Know	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _	_ _
311	Did anyone in this household pay money for the child's care before or when (Name) left the household? 1- Yes 2- No -98-Don't Know	_	_	_	_	_	_	_	_	_	_
312	Is (Name) currently attending a formal school in their current location?	_	_	_	_	_	_	_	_	_	_

	Line No.	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10
	1- Yes 2- No -98-Don't Know										
313	Is (Name) working for pay in their current location? 1- Yes 2- No -98-Don't Know	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
314	Is (Name) working without pay in their current location? 1- Yes 2- No -98-Don't Know	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
315	Has anyone in this household received money or in-kind transfers as a result of (Name)'s activities in (Name)'s current location? 1- Yes 2- No -98-Don't Know	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
316	Has anyone in this household sent money or in-kind transfers to (Name) in (Name)'s current location? 1- Yes 2- No -98-Don't Know	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
317	Would (Name) be free to leave their current location and move back to this residence if they desired? 1- Yes 2- No -98 Don't Know	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 4: Parental Background Information

(Enumerator: If the child's mother has answered section 2/3, then start from 408 and fill in 401 and 402 by yourself and if the father has answered then ask 401 to 407 and start from 413)

S.N	Questions	Codes and Responses	Goto
401	Does the girl's birth mother live in this residence	Yes(हाँ) 1 No ¼ना½ 2	403
402	If so, who is she? (enumerator, indicate id form roster) <i>Verify Respondent ID from Household</i>	Household ID from Roster: _ _	408
403	If not, is her birth mother alive?	Yes 1 No 2	405
404	How old was the girl when she died?	Age: _ _	406
405	How old was the girl when her mother stopped living in the same residence as her?	Age: _ _	
406	What was the highest level of education the girl's mother completed?? (Use Completed Education Codes)	Education Code: _ _	
407	What was / is the mother's usual employment status?	Not in labor force 0 Unpaid Worker in Family Farm 1 Unpaid Worker in Family Business 2 Self Employed in Agriculture 3 Self Employed in Outside of Agr. 4 Regular Wage or Salary Worker in Agr 5 Regular Wage or Salary Worker Outside of Agr. 6 Other (Specify):_____ -96 Unknown -98	

408	Does the girl's birth father live in this residence?	Yes 1 No 2	410
409	If so, who is he? (enumerator, indicate id from roster) <i>Verify Respondent ID from Household Roster</i>	Household ID from Roster: _ _	415
410	If not, is her birth father alive?	Yes 1 No 2	412
411	How old was the girl when he died?	Age: _ _	413
412	How old was the girl when her father stopped living in the same residence as her?	Age: _ _	
413	What was the highest level of education the girl's father completed? (Use Informant Completed Education Codes)	Education Code: _ _	
414	What was / is his usual employment status?	Not in labor force 0 Unpaid Worker in Family Farm 1 Unpaid Worker in Family Business 2 Self Employed in Agriculture 3 Self Employed in Outside of Agr. 4 Wage or Salary Worker in Agr 5 Wage or Salary Worker Outside of Agr. 6 Other (Specify)_____ -96 Unknown -98	

Parental perceptions of child's life skills

"We're going to start by talking about some of your daughter's qualities and skills. Please give your honest assessment of her. There are no right or wrong answers."

(Enumerator: Only ask this question to the guardian of the MLSIE child.)

414a.	Enter CID number and child name for which section 4 is being answered.	CID : _ _ _ _ _ Name: _____			
415	What is the relation of the respondent to the MLSIE subject?	1	Household Head		
		2	Wife / husband of household head		
		3	Child of household head		
		4	Son/daughter in law of household head		
		5	Grandchild of household head		
		6	Father or Mother of household head		
		7	Parent in law of household head		
		8	Sister or brother of household head		
		9	Grandfather / grandmother of household head		
		10	Niece / Nephew of household head		
		11	Other Relative		
		12	Adopted / step child of household head		
		13	Domestic Employee of Household		
		14	Other Employee of household		
		15	Other non-relative		
		-98	Don't Know/Unknown		

Strengths and difficulties test

416 For each item, please mark the box for Not True, Somewhat True or Certainly True. Please answer all items as best you can even if you are not absolutely certain. Please give your answers on the basis of your daughter's behavior over the last six months or this school year.

	Not true (1)	Somewhat true (2)	Certainly true (3)
a. Considerate of other people's feelings	_	_	_
b. Restless, overactive, cannot stay still for long	_	_	_
c. Often complains of headaches, stomach-aches or sickness	_	_	_

d. Shares readily with other youth, for example books, games, food	_	_	_
e. Often loses temper	_	_	_
f. Would rather be alone than with other youth	_	_	_
g. Generally well behaved, usually does what adults request	_	_	_
h. Many worries or often seems worried	_	_	_
i. Helpful if someone is hurt, upset or feeling ill	_	_	_
j. Constantly fidgeting or squirming	_	_	_
k. Has at least one good friend	_	_	_
l. Often unhappy, depressed or tearful	_	_	_
m. Generally liked by other youth	_	_	_
n. Easily distracted, concentration wanders	_	_	_
o. Nervous in new situations, easily loses confidence	_	_	_
p. Kind to younger children	_	_	_
q. Often offers to help others (parents, teachers, children)	_	_	_
r. Thinks things out before acting	_	_	_
s. Gets along better with adults than with other youth	_	_	_
t. Many fears, easily scared	_	_	_
u. Good attention span, sees work through to the end	_	_	_

Daughter's self-efficacy¹

417. For each statement please decide how true it is of your daughter in general over the last year.

¹ From NIH Behavioral Toolkit

	Never (1)	Rarely (2)	Sometimes (3)	Fairly often (4)	Almost always (5)	Don't know/ NA (-98)
a. If someone opposes her she will try to find a way to get them to see her point of view.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. She sets goals and follows through the necessary steps to achieve them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. She remains calm when facing difficulties.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. She is eager to learn new things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. She makes her opinions known about matters that affect her life, like school or chores around the house.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Mobility/Freedom of movement

418. I will read a list of some places that girls may go in their community and I want you to tell me whether your daughter is allowed to go to this place alone, accompanied by someone else, or not allowed to go at all:	
Places	Is she allowed to go to this place by herself, only with others, or not at all?
a. School	1. Allowed to go alone 2. Allowed to go accompanied only 3. Allowed to go alone or accompanied 4. Not allowed to go at all
b. A friend's house	1. Allowed to go alone 2. Allowed to go accompanied only 3. Allowed to go alone or accompanied 4. Not allowed to go at all
c. A relative's house	1. Allowed to go alone 2. Allowed to go accompanied only 3. Allowed to go alone or accompanied 4. Not allowed to go at all
d. Temple, church or mosque	1. Allowed to go alone 2. Allowed to go accompanied only 3. Allowed to go alone or accompanied 4. Not allowed to go at all
e. Health center or clinic	1. Allowed to go alone 2. Allowed to go accompanied only 3. Allowed to go alone or accompanied 4. Not allowed to go at all
f. Market	1. Allowed to go alone 2. Allowed to go accompanied only 3. Allowed to go alone or accompanied 4. Not allowed to go at all
g. To a mela	1. Allowed to go alone 2. Allowed to go accompanied only 3. Allowed to go alone or accompanied 4. Not allowed to go at all
h. To other villages/out of town	1. Allowed to go alone 2. Allowed to go accompanied only 3. Allowed to go alone or accompanied 4. Not allowed to go at all

i. Other (specify)	1. Allowed to go alone 2. Allowed to go accompanied only 3. Allowed to go alone or accompanied 4. Not allowed to go at all
--------------------	---

Parent-daughter communication:

419. In the past month, has your daughter discussed any of the following topics with you?

a. Something that was worrying her	1. Yes 2. No
b. Something that was going well	1. Yes 2. No
c. Her plans and goals for her education.	1. Yes 2. No
d. Her preferences about when she will be married	1. Yes 2. No
e. Her preferences about who she will marry	1. Yes 2. No
f. What type of work she would like to do in the future.	1. Yes 2. No
g. Talked to you about a fight with peers or a problem at school.	1. Yes 2. No

420. How much say does your daughter have in the following matters? (None, A little say, A lot)			
	None (1)	A little say (2)	A lot of say (3)
a. How she spends her free time	_	_	_
b . Whether she will go to school	_	_	_
c. How often she can see friends	_	_	_
d. What chores she does at home	_	_	_
e. When she will marry	_	_	_
f. Who she will marry	_	_	_
g. What type of work she will do in the future (or now if currently working)	_	_	_
h. Whether she can play sports or organized games	_	_	_

421. Has your daughter started menstruating?

1. Yes (skip to 423) 2. No (continue to 422, skip 423)

422. If not, are there any ways that you expect her life to change after that happens to her?

423. If so, have there been any changes in her life since then, like what she is allowed to do, or changes in plans for her future?

*Gender norms*²

"This section is about the roles and responsibilities of females and males. Please say whether you agree or disagree with each of the following statements."		
Role/Privileges/Restrictions	Agree (1)	Disagree (2)
424a. Is it acceptable for women to work outside the home.	<input type="checkbox"/>	<input type="checkbox"/>
424b. A wife should always obey her husband.	<input type="checkbox"/>	<input type="checkbox"/>
424c. Since girls have to get married, they do not need higher education.	<input type="checkbox"/>	<input type="checkbox"/>
424d. It is necessary to give dowry.	<input type="checkbox"/>	<input type="checkbox"/>
424e. When money is scarce and parents cannot send all children to school, boys should be sent before girls.	<input type="checkbox"/>	<input type="checkbox"/>
424f. Boys and girls should do the same amount of household chores.	<input type="checkbox"/>	<input type="checkbox"/>
424g. Girls should have the same freedoms as boys.	<input type="checkbox"/>	<input type="checkbox"/>
Attributes		

424h. Boys are naturally better at studying than girls.	_	_
424i. Girls can be as good at being a leader as boys.	_	_

Parental attitudes towards girls' schooling

425	What is the lowest level of schooling/grade you can imagine your daughter completing?	1. No further schooling 2. Primary school 3. Upper Primary school 4. Secondary school 5. Senior secondary school 6. University 7. Post-university degree 8. As much as she wants to study -96. Other (specify)	
426	What is the highest?	1. No further schooling 2. Primary school 3. Secondary school 4. Senior secondary school 5. University 6. Post-university degree 7. As much as she wants to study 8. As much as she wants to study -96. Other (specify)	
427	If it were up to you, ideally what year of schooling/grade would you like your daughter to complete?	_ _ (Enter Detailed education codes)	
428	Do you expect she could actually end her schooling before this point?	Yes 1 No 2	
429	What would be the obstacles to a girl in your community completing school up to (the year/grade they said was ideal in Q427). Please list the most important one first, but you may give as many as you like	1. Financial constraints 2. More schooling not necessary 3. Need to work 4. Domestic responsibilities 5. Farming responsibilities 6. Lack of interest 7. School too far away 8. Poor performance at school 9. Poor quality of schooling 10. Community pressure 11. Need to take care of other	

		family members 12. Safety concerns about travel to school 13 "Girl's in-laws not committed" -96Other (specify)	
--	--	---	--

430. How does your daughter currently get to school? What form of transportation would she use for the rest of her schooling? (Do not read out choices, but select 'yes' for each form mentioned) [select all that apply]

Mode of transportation	a. Current	b. Future
a. Walking alone	1.Yes 2.No	1.Yes 2.No -98Don't know
b. Walking in groups	1.Yes 2.No	1.Yes 2.No -98Don't know
c. Bicycle	1.Yes 2.No	1.Yes 2.No -98Don't know
d. Motorcycle	1.Yes 2.No	1.Yes 2.No -98Don't know
e. Private car/taxi	1.Yes 2.No	1.Yes 2.No -98Don't know
f. Public transportation	1.Yes 2.No	1.Yes 2.No -98Don't know
g. Shared car	1.Yes 2.No	1.Yes 2.No -98Don't know
h. School-provided transportation	1.Yes 2.No	1.Yes 2.No -98Don't know
i. Live at the school	1.Yes 2.No	1.Yes 2.No -98Don't know
j. Other (specify) 1. Public transportation - auto, bus 2. Bike/scooter/scooty	1.Yes 2.No	1.Yes 2.No -98Don't know

431. Do you currently get any support for your daughter's schooling? What forms of support if any do you expect to have at the next level of education? Which ones would be necessary for her to be able to continue to the next level of schooling? [Read options out]

Type of support	a. Currently received	b. Expect to receive in future	c. Necessary for continuing
a. Scholarships/grants	1.Yes 2.No	1.Yes 2.No -98Don't know	1.Yes 2.No
b. Fee waivers	1.Yes 2.No	1.Yes 2.No -98Don't know	1.Yes 2.No
c. Books	1.Yes 2.No	1.Yes 2.No -98Don't know	1.Yes 2.No
d. Other school supplies like pencil boxes and notebooks	1.Yes 2.No	1.Yes 2.No -98Don't know	1.Yes 2.No
e. Uniforms	1.Yes 2.No	1.Yes 2.No -98Don't know	1.Yes 2.No
f. Bicycle	1.Yes 2.No	1.Yes 2.No -98Don't know	1.Yes 2.No
g. Mid-day meal	1.Yes 2.No	1.Yes 2.No -98Don't know	1.Yes 2.No
h. Other (specify)	1.Yes 2.No	1.Yes 2.No -98Don't know	1.Yes 2.No

Parental attitudes towards girl's marriage timing

432	What is the earliest age girls in this community get married?	_ _	
433	What is the earliest age that married girls in this community can leave her parents' home to live with her husband?	_ _	
434	In your opinion what is the ideal age for a girl to get married?	_ _	
435	What is the oldest age that a girl should be married?	_ _	
436	What are situations or circumstances that might prompt a family to marry their daughter younger than that? (don't read out but select all that are mentioned)	1.Family pressure 2.Community customs 3.Financial hardship 4.A suitable suitor is found earlier than expected 5.If the mother is a widow 6.Many other siblings in the house 7.Her older sister is getting married 8.Convenience, like finding a family with 2 sons when you have 2 daughters 9.Pressure of exchange (one daughter for another) -96. Other (specify) _____	Others codes 0 "No constraints" -98 "Don't know" 1 "A suitable suitor is available" 2 "Girls change in behavior - not aligned with social norm" 3 "Social norm for marriage" 4 "Financial constraint" 5 "Girl is grown up" 6 "Uncertainty in the household/death in the family" 7 "Social environment not conducive for girls" 8 "Girl not interested in education" 9 "Function scheduled in an household"
437	Are there advantages to a girl getting married after 18 as opposed to younger than that?	Yes 1 No 2	439
438	What are those advantages? (do not read out, but select all that are mentioned)	1.18 is the legal minimum age of marriage 2.She can complete her education 3.Girl is old enough to have a healthy childbirth 4.She will have more ability to make decisions (maturity)	Others code

		5.She will be able to enjoy her childhood 6.She will have more opportunity to achieve her aspirations 7.She is less likely to face domestic violence -96 Other (Specify)	0 "No benefits" 1 "Monetary benefits from the government" 2 "Better understanding of girls" 3 "Girls move early to in-laws house" 4 "Less expenses incurred on marriages" 5 "Less dowry demanded" 6 "Girls can decide groom on their own" 7 "Enough money is accumulated for marriage"
439	If you were looking for a good match for your son, what qualities would you want the girl to have? (do not read out, but select all that are mentioned)	1. Brings a good dowry 2.Well-educated 3.Religious 4.Has a job 5.Respects elders in family 6.Capable of doing housework and agricultural work 7.Soft-spoken 8.Obedient 9Physical attributes -96 Other (specify)_____	Others codes -98 "Don't know" -97 "Not decided" 1 "Economically humble background" 2 "Girl should be well-behaved" 3 "Girl should be beautiful" 4 "Girl should be from a respectable family" 5 "Girl should be compatible with boy"

Parental expectations for the child's future

440. After how many years do you expect your daughter to (do not read out options):

	Already doing or in next year (1)	In the next 5 years (2)	In the next 7 years (3)	Longer than 7 years from now (4)	I do not expect her to do this (5)	Don't know (-98)
a. Start earning money to support your household	__	__	__	__	__	__
b. Leave full-time						

education	_	_	_	_	_	_
c. Be financially independent of parents	_	_	_	_	_	_
d. Get married	_	_	_	_	_	_
e. After marriage, have her first child	_	_	_	_	_	_
f. Leave this household	_	_	_	_	_	_

S.N	Questions	Codes and Responses	Goto
441	Do you want to continue with the survey in one sitting?	Yes 1 No 2	Section 5 consent
442	Revisit Date	_ _ _ _ _ DD MM YYYY	
443	End Time of first visit interview	_ _ HH MM	
444	Second Visit Date	_ _ _ _ _ DD MM YYYY	
445	Start Time of second visit	_ _ HH MM	
446	School DISE Code	DISE Code _ _ _ _ _ _ _ _ _ _ : (Enter 10 digit DISE code)	
447	Household ID	HID: _ _ _ _ _ _ _ _ _	

448	Enumerator Code	_ _	
-----	-----------------	-----	--

Target Respondent for Section 5 (116): Verbal Informed Consent to be Interviewed

School DISE Code (Copy DISE from 001): |_|_|

Household ID (Copy from 010): |_|_|

Name of Person who consents to Interview _____

Instructions to Interviewer: Conduct this interview in private. Read the following statements to the individual who is the head of household or the most knowledgeable member of the household and answer any questions the individual may have. If the individual asks about the sponsorship of the study and how the findings will be used, read the explanation that has been provided to you. Do not begin the interview until all questions have been addressed and the individual has agreed to participate in the study.

- Hello, my name is _____. I am talking with families with adolescent girls eligible for schooling in area schools. The information collected will be used in a study about the schooling decisions of the adolescent girls in the area.
- I would like to ask you some questions about you and the members of your household, and your perceptions, psychological well-being and adequacy of consumption in your household.
- Your participation in this study is voluntary. If you choose to talk with me, you may choose not to answer some questions or end the interview at any time.
- Your answers to the questions will be kept private and no one will know what you said. Your name and the contact information you provide will be kept secure and confidential and will not be used in any reports.
- I would like to seek your permission to contact you again in the coming few weeks. The subsequent follow-up visit will collect further information on schooling and household decisions.
- The interview will take about 15 minutes.
- I will answer any questions that you have about the study before we begin. Do you have any questions about the study?
- May we begin?

Interviewer Certification of Consent:

My signature affirms that I have read the verbal informed consent statement to the head of household or the most knowledgeable member of the household, and I have answered any questions asked about the study. The respondent agreed to be interviewed.

1. Respondent agreed to be interviewed.
2. Respondent did not agree to be interviewed → Verbal Consent for re-contacting

Print Interviewer's Name _____

Interviewer's Signature _____ Date _____

Section 5: Household Consumer Expenditures (taken from NSSO Schedule 10:16)

		Value of Consumption (purchased + home produced) in Rupees during	
	Item Description	Last 30 Days	Last 365 Days
501	Cereals & Cereal Products including muri, chira, maida, suji, noodles, bread, barley, cereal substitutes, etc		
502	Pulses and Pulse Products including soybean, gram products, besan, sattu, etc.		
503	Milk		
504	Milk Products including condensed milk, milk powder, babyfood, ghee, butter, ice-cream, etc		
505	Edible oil and Vanaspati		
506	Vegetables		
507	Fruits& nuts including mango, banana, coconut, dates, kishmish, monacca, other dry fruits, etc.		
508	Egg, fish, and meat		
509	Sugar including gur, candy, misri, honey, etc.		
510	Salt & Spices including dry chillies, curry powder, oilseeds, garlic, ginger, etc		
511	Other food items including beverages such as tea, coffee, fruit juice and processed food such as biscuits, cake, pickles, sauce, cooked meals, etc.		
512	Pan, tobacco, intoxicants		
513	Fuel & Light		
514	Entertainment including cinema, picnic, sports, club fees, video cassettes, cable charges, etc.		
515	Personal care and effects including spectacles, torch, umbrella, lighter, etc		

		Value of Consumption (purchased + home produced) in Rupees during	
	Item Description	Last 30 Days	Last 365 Days
516	Toilet articles including toothpaste, hair oil, shaving blades, etc.		
517	Sundry articles including electric bulb, tubelight, glassware, bucket, washing soap, agarbati, insecticide, etc		
518	Consumer services such as domestic servants, tailoring, grinding charges, telephone, legal expenses, pet animal, etc. (excluding conveyance)		
519	Conveyance including porter charges, diesel, petrol, school bus/van, etc.		
520	Rent / house rent		
521	Consumer taxes and cesses including water charges		
522	Medical Expenses (non-institutional)		
523	Medical (institutional)		
524	Tuition fees & other fees including private tutor, school/college fees, etc.		
525	School books & other educational articles including newspaper, library charges, stationary, internet charges, etc.		
526	Clothing and bedding		
527	Footwear		
	Durable Goods		
528	Furniture and Fixtures including bedstead, almirah, suitcase, carpet, paintings, etc.		
529	Crockery & utensils including stainless steel utensils, casseroles, themos, etc.		

		Value of Consumption (purchased + home produced) in Rupees during	
	Item Description	Last 30 Days	Last 365 Days
530	Cooking and household appliances including electric fan, air conditioners, sewing machine, washing machine, pressure cooker, refrigerator, heater, toaster, etc.		
531	Goods for Recreation including TV, radio, tape recorder, musical instruments, etc.		
532	Jewelry & ornaments		
533	Personal transport equipment including bicycle, scooter, car, tyres, tubes, etc.		
534	Therapeutic appliances including glass eye, hearing aids, orthopaedic equipment, etc.		
535	Other personal goods including clocks, watches, PC, telephone, mobile, etc.		
536	Repair and maintenance of residential buildings, bathroom equipment, etc.		

Head of the Household: Verbal Informed Consent to be Re-contacted

School DISE Code (Copy DISE from 001): _____

Target ID Number (Copy RID from 004): _____

Household ID (Copy from 010): |_|_|

Name of Person who consents to Interview _____

Instructions to Interviewer: Read the following statements to the individual who is the head of the household and answer any questions the individual may have. Do not fill in any contact information (Section 6) until all questions have been addressed and the individual has agreed to be re-contacted.

- The information collected will be used in a study about the schooling decisions of the adolescent girls in the area. This study will last 4 years.
- I would like to seek your permission to contact you again in the coming few weeks and over the next 4 years. The subsequent follow-up visits will collect further information on schooling decisions and also update the information that we have collected today.
- Your participation for the follow-up study is voluntary. By agreeing to be re-contacted now, you have only given us the permission to re-contact you in the future. You can decide at the time of next interview if you want to participate in that interview or not.
- Your contact information will be kept secure and private and will only be used for contacting you for the purpose of this study.
- Your name and contact information will not be used in any reports.
- Obtaining your contact information takes about 5 minutes.
- I will answer any questions that you have about the study before we collect your contact information. Do you have any questions about the study?
- May we begin?

Interviewer Certification of Consent to be re-contacted:

My signature affirms that I have read the verbal informed consent to be re-contacted statement to the individual who is the head of the household, and I have answered any questions asked about the study. The respondent agreed to be re-contacted for further interviews.

1. Respondent agreed to be re-contacted.
2. Respondent did not agree to be re-contacted → Parental Consent for Child's interview

Print Interviewer's Name _____

Interviewer's Signature _____ Date _____

Section 6: Contact Information

S.N	Questions	Codes and Responses	Goto
-----	-----------	---------------------	------

601	Do you have a mobile phone with you?	Yes 1 No 2	603
602	If yes, please provide us your mobile phone number.	Number: _____ Don't Know -98	
603	Do you have a landline phone with you or near your residence that may be used to contact you?	Yes 1 No 2	605
604	If yes, please provide us the landline number	Number: _____ Don't Know -98	
605	If you moved from this place, who would be the best person to contact for information about you? Please provide the names of two closest relatives/friends who will know your whereabouts if you leave this location.	1. Name1: _____ 2. Name2: _____	
606	How are (Name1 and Name2) related to you?	1. Relationship1: _____ 2. Relationship2: _____	
607	Where do (Name1 and Name2) live?	Name1: 11. District: _____ 12. District code: _ _ 13. Tehsil: _____ 14. Village Name: _____ 15. Hamlet Name: _____ Name2:	

		21. District: _____ 22. District code: _ _ 23. Tehsil: _____ 24. Village Name: _____ 25. Hamlet: _____	
608	How are (Name1 and Name2) typically known in their respective place of residence?	1. Name1 Known as: _____ 2. Name2 Known as: _____	
609	Please provide information on how to contact (Name1 and Name2).	Name1 contact: 11. Landline phone number (or nearest available landline): _____ Don't Know -98 12. Mobile number: _____ Don't Know -98 Name2 contact: 21. Landline phone number (or nearest available landline): _____ Don't Know -98 22. Mobile number: _____ Don't Know -98	
610	Time of End of Interview (IN 24 HR FORMAT)	_ _ _ _ HH MM	

Verbal Informed Consent: Parental Consent for Children's Interview

School Number (Copy DISE code from 001): _____

Household ID (Copy from 010):

|_|_|

Name of the Guardian _____

Total Number of MLSIE Candidate Children (005) in Household: |_|_|_|

<i>List All MLSIE Candidate Children from 003 (If more than 8, use two forms)</i>					
	Child's Name (Write below in ascending age)	Household Member Number (According to household roster)	Child's Age (Completed years)	Is one of child's parents/guardians present? 1. Yes 2. No	Has parent/guardian given consent for participation of the child? 1. Yes 2. No
1	_____	_ _	_ _	_ _	_ _
2	_____	_ _	_ _	_ _	_ _
3	_____	_ _	_ _	_ _	_ _
4	_____	_ _	_ _	_ _	_ _
5	_____	_ _	_ _	_ _	_ _
6	_____	_ _	_ _	_ _	_ _
7	_____	_ _	_ _	_ _	_ _
8	_____	_ _	_ _	_ _	_ _

Instructions to Interviewer: We want you to attempt to interview all of the MLSIE candidate children in the household. This same form may be used to obtain parental consent for more than one child. Read the following statements to a parent/ guardian of the MLSIE candidate children residing in the household and answer any questions the individual(s) may have. Do not begin to interview a child until all questions have been addressed, the parent/guardian has agreed to let the child/children participate in the study, and the child has agreed to be interviewed.

- Now I would like to ask some questions to [child's/children's name(s)].
- Your child/children does/do not have to answer the questions and they may stop at any time.
- Your child's/children's answers will be kept private and used only for this research.
- Your child's/children's name(s) will not be used in any reports.
- The interview with each child will take about 60 minutes in each visit.
- To make sure that the child feels comfortable to answer, we would like to talk with your child/children in a private setting.
- Do you have any questions of me before I talk with your child/children?
- May I talk with your child/children in private?

Interviewer Certification of Consent:

My signature affirms that I have read the verbal informed consent statement to the parent/guardian, and I have answered any questions asked about the study. The respondent consented to the children being interviewed.

1. Respondent agreed

2. Respondent did not agree

Print Interviewer's Name _____

Interviewer's Signature _____

Date _____

Section 7: Enumerator Information post survey

To be completed by interviewer after interview.

Copy child identifiers and names from question 003. Fill in child identification from household roster (section 2).

	Information from question 003 of cover sheet		
	CID	Name	Roster Identification Number (section 2)
	<u>701</u>	<u>702</u>	<u>703</u>
<u>A</u>			
<u>B</u>			
<u>C</u>			
<u>D</u>			
<u>E</u>			
<u>F</u>			
<u>G</u>			
<u>H</u>			

S.N	Questions	Codes and Responses	Goto
704	Travel distance from residence to associated school (DISE Code) in question 001 in kilometers	Kilometers: _ _ _	
705	Travel time from residence to associated school (DISE Code) in question 001 (minutes – convert hours to minutes)	Minutes: _ _ _	
706.	GPS Coordinates (Log GPS coordinates just outside the house in the open)	Latitude: N _ _ . _ _ _ _ _ Longitude: E _ _ . _ _ _ _ _ Altitude: _ _ _ _ meters	
707	Survey Completion Status	1. Yes→End Survey 2. Partially Complete 3. Refused 4. Others: (Please Specify: _____)	
708	Remarks	_____ _____	

Code list:

Relationship codes – consent section, 202,

RELATIONSHIP CODES	
1	Household Head
2	Wife / husband of household head
3	Child of household head
4	Son/daughter in law of household head
5	Grandchild of household head
6	Father or Mother of household head
7	Parent in law of household head
8	Sister or brother of household head
9	Grandfather / grandmother of household head
10	Niece / Nephew of household head
11	Other Relative
12	Adopted / step child of household head
13	Domestic Employee of Household
14	Other Employee of household
15	Other non-relative
-98	Don't Know/Unknown

Detailed education codes - 215, 427

0	Attended School or Only Attended
1	Grade 1
2	Grade 2
3	Grade 3
4	Grade 4
5	Grade 5
6	Grade 6
7	Grade 7
8	Grade 8
9	Grade 9
10	Grade 10
11	Grade 11
12	Grade 12
13	University / Not Graduate
14	University / Graduate
15	Post Bachelors Tertiary Education

16	Technical traning
17	Professional studies
18	Below primary