

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

FORM **LGT-421N**  
(11-17-69)

U.S. DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS

**NATIONAL LONGITUDINAL SURVEYS**  
**SURVEY OF WORK EXPERIENCE**  
**OF YOUNG WOMEN**

1970

**001** 1 ☐ Respondent a noninterview in 1969 – *GO to page 23*

RECORD OF CALLS			METHODS OF LOCATING RESPONDENT WHO HAS MOVED		
Date	Time	Comments		Successful	Unsuccessful
	a.m.		New occupants . . . . .	<b>002</b> 1 <input type="checkbox"/>	2 <input type="checkbox"/>
	p.m.		Neighbors . . . . .	<b>003</b> 1 <input type="checkbox"/>	2 <input type="checkbox"/>
	a.m.		Apartment house manager . . . . .	<b>004</b> 1 <input type="checkbox"/>	2 <input type="checkbox"/>
	p.m.		Post office . . . . .	<b>005</b> 1 <input type="checkbox"/>	2 <input type="checkbox"/>
	a.m.		School . . . . .	<b>006</b> 1 <input type="checkbox"/>	2 <input type="checkbox"/>
	p.m.		Persons listed on information sheet . . . . .	<b>007</b> 1 <input type="checkbox"/>	2 <input type="checkbox"/>
	a.m.		Other – <i>Specify</i> ↘ . . . . .	<b>008</b> 1 <input type="checkbox"/>	2 <input type="checkbox"/>
	p.m.				

RECORD OF INTERVIEW			
Interview time		Date completed	Interviewed by
Began	Ended		
a.m.	a.m.		
p.m.	p.m.		

NONINTERVIEW REASON	
<b>009</b> <input type="checkbox"/> Unable to contact respondent – <i>Specify</i>	
6 <input type="checkbox"/> Temporarily absent – <i>Give return date</i>	
8 <input type="checkbox"/> Institutionalized – <i>Specify type</i>	
9 <input type="checkbox"/> Refused	
o <input type="checkbox"/> Deceased	
A <input type="checkbox"/> Other – <i>Specify</i>	

TRANSCRIPTION FROM HOUSEHOLD RECORD CARD				
<b>010</b> Item 13 – Marital status of respondent				
1 <input type="checkbox"/> Married, spouse present	3 <input type="checkbox"/> Widowed	5 <input type="checkbox"/> Separated		
2 <input type="checkbox"/> Married, spouse absent	4 <input type="checkbox"/> Divorced	6 <input type="checkbox"/> Never married		

<i>If respondent has moved, enter new address</i> 1. Number and street				<b>011</b>	
				<b>012</b>	
2. City	3. County	4. State	5. ZIP code	<b>013</b>	

I. EDUCATIONAL STATUS

1. Are you attending or enrolled in regular school?		014	1. 1 <input type="checkbox"/> Yes – ASK 2a 2 <input type="checkbox"/> No ↘  When were you last enrolled?  Month _____ Year _____ SKIP to Check Item B	
2a. What grade are you attending?		016	2a. 1 Elementary   2   3   4   5   6   7   8 2 High school   2   3   4 3 College   2   3   4   5   6+	
b. Are you enrolled as a full-time or part-time student?		017	b. 1 <input type="checkbox"/> Full-time 2 <input type="checkbox"/> Part-time	
CHECK ITEM A	Refer to item 92R on Information Sheet <input type="checkbox"/> Respondent not in school in 1969 – ASK 3a <input type="checkbox"/> Respondent in school in 1969 – SKIP to Check Item C			
CHECK ITEM B	Refer to item 92R on Information Sheet <input type="checkbox"/> Respondent in school in 1969 – SKIP to Check Item F, page 3 <input type="checkbox"/> All others – SKIP to 23a, page 4			
3a. At this time last year, you were not enrolled in school. How long had you been out of school before returning?		018	3a. Years _____	
b. Why did you return?		019	b. <input type="checkbox"/> _____	
c. In what curriculum are you enrolled?		020	c. <input type="checkbox"/> <input type="checkbox"/> _____ SKIP to 5	
CHECK ITEM C	Refer to items 2a and 92R on Information Sheet <input type="checkbox"/> Respondent in high school in 1969, college now – SKIP to 5 <input type="checkbox"/> Other – ASK 4			
4. Are you attending the same school as you were at this time last year?		021	4. 1 <input type="checkbox"/> Yes – SKIP to 10 2 <input type="checkbox"/> No – ASK 5	
5. What is the name of the school you now attend?		5. _____		
6. Where is this school located?		022	<input type="checkbox"/> <input type="checkbox"/> 6. City _____ County _____ State _____	
7. Is this school public or private?		023	7. 1 <input type="checkbox"/> Public 2 <input type="checkbox"/> Private	
8. When did you enter this school?		024	8. Month _____ Year _____	
CHECK ITEM D	Refer to item 2a and item 92R on Information sheet <input type="checkbox"/> Respondent in college I now – SKIP to 15a <input type="checkbox"/> Respondent in high school I now <input type="checkbox"/> Respondent not in school in 1969 } SKIP to 23a, page 4 <input type="checkbox"/> Other – ASK 9			
9. Why did you change schools?		025	<input type="checkbox"/> 9. _____	
10. Would you say you now like school more, about the same, or less than you did last year?		026	10. 1 <input type="checkbox"/> More } ASK 11 2 <input type="checkbox"/> Less } 3 <input type="checkbox"/> About the same – SKIP to 12	
11. Why do you like it more (less)?		027	11. <input type="checkbox"/> _____	

# I. EDUCATIONAL STATUS – Continued

12. Are you enrolled in the same curriculum now as you were last year?	028	12. <input type="checkbox"/> Yes <input type="checkbox"/> No – ASK 13 1 <input type="checkbox"/> College – SKIP to 15a 2 <input type="checkbox"/> High school 3 <input type="checkbox"/> Elementary } SKIP to 23a, page 4
13. In what curriculum are you enrolled now?	029	13.
14. How did you happen to change your curriculum?	030	14.
<input type="checkbox"/> Respondent not now in college – SKIP to Check Item E 15a. How much is the full-time tuition this year at the college you attend? b. Do you have a scholarship, fellowship, assistantship, or other type of financial aid this year? c. What kind? d. How much is it per year?	031 032 033 034	15a. \$ _____ b. 1 <input type="checkbox"/> Yes – ASK c 2 <input type="checkbox"/> No – SKIP to Check Item E c. 1 <input type="checkbox"/> Scholarship 4 <input type="checkbox"/> Loan 2 <input type="checkbox"/> Fellowship 5 <input type="checkbox"/> Other – Specify 3 <input type="checkbox"/> Assistantship d. \$ _____
CHECK ITEM E	Refer to item 92R on Information Sheet <input type="checkbox"/> Respondent in college 3–6 in 1969 – ASK 16a <input type="checkbox"/> Other – SKIP to 23a, page 4	
16a. Have you received a degree since last year at this time? b. What degree was it? c. In what field did you receive your degree? d. Why did you decide to continue your education after receiving this degree?	035 036 037 038	16a. 1 <input type="checkbox"/> Yes – ASK b 2 <input type="checkbox"/> No – SKIP to 23a, page 4 b. 1 <input type="checkbox"/> Bachelor's (B.A., B.S., A.B.) 2 <input type="checkbox"/> Master's (M.S., M.B., M.B.A.) 3 <input type="checkbox"/> Doctor's (Ph.D.) 4 <input type="checkbox"/> Other – Specify c. d. SKIP to 23a, page 4
CHECK ITEM F	Refer to item 92R on Information Sheet <input type="checkbox"/> Respondent in high school 1–3 last year – ASK 17a <input type="checkbox"/> Respondent in high school 4 last year – SKIP to 18a <input type="checkbox"/> Respondent in college 1–3 last year – SKIP to 20a <input type="checkbox"/> Respondent in college 4+ last year – SKIP to 21a <input type="checkbox"/> Respondent in elementary school last year – ASK 17a	
17a. At this time last year, you were attending your _____ year of high school. Did you complete that year? b. Why did you drop out of high school? c. Do you expect to return? d. When do you expect to return?	039 040 041 042	17a. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No b. c. 1 <input type="checkbox"/> Yes – ASK d 2 <input type="checkbox"/> No – SKIP to 26a, page 5 d. SKIP to 23a, page 4
18a. Did you graduate from high school? b. Why not?	043 044	18a. 1 <input type="checkbox"/> Yes – SKIP to Check Item G 2 <input type="checkbox"/> No – ASK b b.
CHECK ITEM G	Refer to item 93R on Information Sheet <input type="checkbox"/> Respondent had planned to enter college when last interviewed – ASK 19a <input type="checkbox"/> Respondent had not planned to enter college when last interviewed – SKIP to 23a, page 4 <input type="checkbox"/> Respondent not asked about educational goal – SKIP to 23a, page 4	

# I. EDUCATIONAL STATUS – Continued

<p>19a. When we last interviewed you, you said you planned to go to college. Have your plans changed?</p> <p>b. What caused your plans to change?</p> <p>c. Why are you presently not enrolled in college?</p> <p>d. When do you plan to enroll in college?</p>	<p>045 19a. 1 <input type="checkbox"/> Yes – ASK b 2 <input type="checkbox"/> No – SKIP to c</p> <p>046 b. 1 <input type="checkbox"/> Poor grades, lacked ability, wasn't accepted because of low grades, etc. 2 <input type="checkbox"/> Economic reasons (couldn't afford, had to work instead, unable to obtain financial assistance) 3 <input type="checkbox"/> Disliked school, lost interest, had enough school 4 <input type="checkbox"/> Marriage, pregnancy or children 5 <input type="checkbox"/> Personal health reasons 6 <input type="checkbox"/> Other – Specify _____ SKIP to d</p> <p>047 c. 1 <input type="checkbox"/> Economic reasons (couldn't afford, have to work, unable to obtain financial assistance, etc.) 2 <input type="checkbox"/> Was rejected or turned down 3 <input type="checkbox"/> Waiting to be accepted by a school 4 <input type="checkbox"/> Marriage, pregnancy or children 5 <input type="checkbox"/> Personal health reasons 6 <input type="checkbox"/> Other – Specify _____</p> <p>048 d. Month _____ Year _____ – SKIP to 23a x <input type="checkbox"/> Don't plan to enroll – SKIP to 26a, page 5</p>
<p>20a. Last year at this time you were in college. Why did you decide to drop out?</p> <p>b. Do you expect to return?</p> <p>c. When do you think you will return?</p>	<p><input type="checkbox"/> 20a. _____</p> <p>049 x <input type="checkbox"/> Received degree – SKIP to 22a</p> <p>050 b. 1 <input type="checkbox"/> Yes – ASK c 2 <input type="checkbox"/> No – SKIP to 26a</p> <p>c. Month _____ Year _____ – SKIP to 23a</p> <p>051</p>
<p>21a. Last year at this time you were in college. Did you receive a degree?</p> <p>b. Why did you decide to drop out?</p> <p>c. Do you expect to return?</p> <p>d. When?</p>	<p>052 21a. 1 <input type="checkbox"/> Yes – SKIP to 22a 2 <input type="checkbox"/> No – ASK b</p> <p><input type="checkbox"/> b. _____</p> <p>053 c. 1 <input type="checkbox"/> Yes – ASK d 2 <input type="checkbox"/> No – SKIP to 26a</p> <p>054 <input type="checkbox"/> d. Month _____ Year _____ – SKIP to 23a</p> <p>055</p>
<p>22a. What degree did you receive?</p> <p>b. In what field of study did you receive your degree?</p>	<p>056 22a. 1 <input type="checkbox"/> Associate (2 year course) 2 <input type="checkbox"/> Bachelor's (B.A., B.S., A.B.) 3 <input type="checkbox"/> Master's (M.S., M.B., M.B.A.) 4 <input type="checkbox"/> Doctor's (Ph.D.) 5 <input type="checkbox"/> Other – Specify _____</p> <p><input type="checkbox"/> b. _____</p> <p>057</p>
<p>23a. How much education would you like to get?</p> <p>b. As things stand now how much education do you think you will actually get?</p>	<p>058 23a. High school 1 <input type="checkbox"/> 1 yr. 2 <input type="checkbox"/> 2 yrs. 3 <input type="checkbox"/> 3 yrs. 4 <input type="checkbox"/> 4 yrs. College { 5 <input type="checkbox"/> 2 yrs. (complete junior college) 6 <input type="checkbox"/> 4 yrs. (graduate from 4-year college) 7 <input type="checkbox"/> 6 yrs. (master's degree or equivalent) 8 <input type="checkbox"/> 7 + yrs. (Ph.D. or professional degree)</p> <p>059 b. High school 1 <input type="checkbox"/> 1 yr. 2 <input type="checkbox"/> 2 yrs. 3 <input type="checkbox"/> 3 yrs. 4 <input type="checkbox"/> 4 yrs. College { 5 <input type="checkbox"/> 2 yrs. (complete junior college) 6 <input type="checkbox"/> 4 yrs. (graduate from 4-year college) 7 <input type="checkbox"/> 6 yrs. (master's degree or equivalent) 8 <input type="checkbox"/> 7 + yrs. (Ph.D. or professional degree)</p>
<p>CHECK ITEM H</p>	<p>Refer to item 23a and item 93R on Information Sheet</p> <p><input type="checkbox"/> Educational goal different from when last interviewed – ASK 24  <input type="checkbox"/> Educational goal same as when last interviewed } SKIP to 25a  <input type="checkbox"/> Respondent not asked about educational goal }</p>

I. EDUCATIONAL STATUS – Continued		
24. When we last interviewed you, you said you would like to get (amount of education indicated in 93R). Why have you changed your plans?	060	24. <input type="checkbox"/>
<input type="checkbox"/> Respondent now attends school – SKIP to 26a		
25a. Since this time last year have you taken any training courses or educational programs of any kind, either on the job or elsewhere?	061	25a. 1 <input type="checkbox"/> Yes – ASK b 2 <input type="checkbox"/> No – SKIP to 26a
b. What kind of training or education program did you take? (Specify below, then mark one box)	062	b. 1 <input type="checkbox"/> Professional, technical 2 <input type="checkbox"/> Managerial 3 <input type="checkbox"/> Clerical 4 <input type="checkbox"/> Skilled manual 5 <input type="checkbox"/> Other
c. Where did you take this training course? (Specify below, then mark one box)	063	c. 1 <input type="checkbox"/> Business college, technical institute 2 <input type="checkbox"/> Company training school 3 <input type="checkbox"/> Correspondence course 4 <input type="checkbox"/> Regular school 5 <input type="checkbox"/> Other
d. How long did you attend this course or program?	064	d. Months _____ 99 <input type="checkbox"/> Still attending
e. How many hours per week did you spend on this training?	065	e. 1 <input type="checkbox"/> 1–4 2 <input type="checkbox"/> 5–9 3 <input type="checkbox"/> 10–14 4 <input type="checkbox"/> 15–19 5 <input type="checkbox"/> 20 or more
f. Did you complete this program?	066	f. 1 <input type="checkbox"/> Yes – When? Month _____ Year _____ – SKIP to h 2 <input type="checkbox"/> No, dropped out – When? Month _____ Year _____ – ASK g x <input type="checkbox"/> No, still enrolled – SKIP to h
g. Why didn't you complete this program?	067	9. 1 <input type="checkbox"/> Found a job 2 <input type="checkbox"/> Interfered with school 3 <input type="checkbox"/> Too much time involved 4 <input type="checkbox"/> Lost interest 5 <input type="checkbox"/> Too difficult 6 <input type="checkbox"/> Other – Specify _____
h. Why did you decide to get more training?	068	h. 1 <input type="checkbox"/> To obtain work 2 <input type="checkbox"/> To improve current job situation 3 <input type="checkbox"/> To get better job than present one 4 <input type="checkbox"/> Other – Specify _____
i. Do you use this training on your present job?	069	i. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Not employed
26a. Since last year have you obtained a certificate for practicing a profession or trade?	070	26a. 1 <input type="checkbox"/> Yes – ASK b 2 <input type="checkbox"/> No – SKIP to 27
b. What type of certificate is (was) it?	071	b. <input type="checkbox"/>
c. Is this certificate currently valid?	072	c. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
Notes		073
		074
		075

## II. CURRENT LABOR FORCE STATUS

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

- 1 ☐ WK – Working – *SKIP to 28b*  
 2 ☐ J – With a job but not at work  
 3 ☐ LK – Looking for work  
 4 ☐ S – Going to school  
 5 ☐ KH – Keeping house  
 6 ☐ U – Unable to work – *SKIP to 31*  
 7 ☐ OT – Other – *Specify* →

28a. Did you do any work at all **LAST WEEK**, not counting work around the house?

- ☐ Yes ☐ No – *SKIP to 29a*

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

079

### CHECK ITEM I

Respondent worked –

- 1 ☐ 49 hours or more – *SKIP to 32a and enter job worked at last week*  
 2 ☐ 1–34 hours – *ASK c*  
 3 ☐ 35–48 hours – *ASK d and e*

080

28d. Did you lose any time or take any time off **LAST WEEK** for any reason such as illness, holiday, or slack work?

- ☐ Yes – How many hours did you take off \_\_\_\_\_  
☐ No – *Go to 28e*

081

*NOTE: Correct item 28b if lost time not already deducted; if item 28b is reduced below 35 hours, ask item c, otherwise SKIP to 32a.*

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

- ☐ Yes – How many extra hours did you work? . . . \_\_\_\_\_  
☐ No

082

*NOTE: Correct item 28b if extra hours not already included and SKIP to 32a.*

(If “J” in 27, *SKIP to b*)

29a. Did you have a job (or business) from which you were temporarily absent or on layoff **LAST WEEK**?

- ☐ Yes ☐ No – *ASK 30a*

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

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

083

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

- 1 ☐ Yes  
 2 ☐ No  
 3 ☐ Self-employed

084

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

- 1 ☐ Yes 2 ☐ No

085

(Go to 32a and enter job held last week)

28c. Do you **USUALLY** work 35 hours or more a week at this job?

- 1 ☐ Yes – What is the reason you worked less than 35 hours **LAST WEEK**?  
 2 ☐ No – What is the reason you **USUALLY** work less than 35 hours a week?

(Mark the appropriate reason)

- 01 ☐ Slack work  
 02 ☐ Material shortage  
 03 ☐ Plant or machine repair  
 04 ☐ New job started during week  
 05 ☐ Job terminated during week  
 06 ☐ Could find only part-time work  
 07 ☐ Labor dispute  
 08 ☐ Did not want full-time work  
 09 ☐ Full-time work week under 35 hours  
 10 ☐ Attends school  
 11 ☐ Holiday (legal or religious)  
 12 ☐ Bad weather  
 13 ☐ Own illness  
 14 ☐ On vacation  
 15 ☐ Too busy with housework, personal business, etc.  
 16 ☐ Other – *Specify* →

078

(*SKIP to 32a and enter job worked at last week*)

Notes

## II. CURRENT LABOR FORCE STATUS - Continued

(If "LK" in 27, *SKIP to b*)

30a. Have you been looking for work during the past 4 weeks?

☐ Yes

☐ No - *SKIP to 31*

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

(Mark all methods used; do not read list)

00 ☐ Nothing - *SKIP to 31*

Checked with

- ☐ 01 State employment agency  
☐ 02 Private employment agency  
☐ 03 Employer directly  
☐ 04 Friends or relatives

05 ☐ Placed or answered ads

06 ☐ School employment service

07 ☐ Other - *Specify - e.g., MDTA, union or professional register, etc.*

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

1 ☐ Lost job

2 ☐ Quit job

3 ☐ Wanted temporary work

4 ☐ Children are older

5 ☐ Enjoy working

6 ☐ Help with family expenses

7 ☐ Other - *Specify*

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

Weeks \_\_\_\_\_

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

1 ☐ Full-time

2 ☐ Part-time

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

- Yes →
- ☐ 1 Needed at home  
☐ 2 Temporary illness  
☐ 3 Going to school  
☐ 4 Other - *Specify*

5 ☐ No

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

1 ☐ January 1, 1968 or later -

*Specify* →

Month Day Year - *SKIP to 38a*

2 ☐ Before January 1, 1968

3 ☐ Never worked (two weeks or more) } *SKIP to 39a*

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

1 ☐ January 1, 1968 or later -

*Specify* →

Month Day Year - *SKIP to 38a*

2 ☐ Before January 1, 1968 and "unable" now and "unable" in item 94R on the Information Sheet - *SKIP to 72, page 19*

3 ☐ Never worked (two weeks or more) } *SKIP to 39a*

4 ☐ All others

### DESCRIPTION OF JOB OR BUSINESS

32a. Do you have more than one job?

☐ Yes - *Record information about primary job only*

☐ No

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

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

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

d. What kind of business or industry is this?

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

e. Were you -

10 ☐ P - An employee of a PRIVATE company, business, or individual for wages, salary, or commissions?

20 ☐ G - A GOVERNMENT employee (Federal, State, county, or local)?

30 ☐ O - Self-employed in your OWN business, professional practice, or farm?

(If not a farm)

Is this business incorporated?

31 ☐ Yes 32 ☐ No

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

f. What kind of work were you doing? (For example: registered nurse, high school English teacher, waitress)

g. What were your most important activities or duties? (For example: selling clothing, typing, keeping account books, filing)

h. What was your job title?

i. When did you start working for (ENTRY IN 32b)?

1 ☐ January 1, 1968 or later -

*Specify* →

Month Day Year

2 ☐ Before January 1, 1968



II. CURRENT LABOR FORCE STATUS - Continued		
CHECK ITEM J	<div><input type="checkbox"/> "P" or "G" in item 32e - ASK 33a</div> <div><input type="checkbox"/> "O" or "WP" in item 32e - SKIP to Check Item K</div>	
33a. Altogether, how much do you usually earn at this job before deductions?		<div>101 33a. \$ _____ per: 102</div> <div>(Dollars) (Cents)</div> <div>\$ _____ per:</div> <div>(Dollars only)</div> <div>1 <input type="checkbox"/> Hour</div> <div>2 <input type="checkbox"/> Day</div> <div>3 <input type="checkbox"/> Week</div> <div>4 <input type="checkbox"/> Biweekly</div> <div>5 <input type="checkbox"/> Month</div> <div>6 <input type="checkbox"/> Year</div> <div>7 <input type="checkbox"/> Other</div> <div>Specify _____</div>
b. How many hours per week do you usually work at this job?		103 b. Hours _____
c. Do you receive extra pay when you work over a certain number of hours?		104 c. 1 <input type="checkbox"/> Yes - ASK d
		2 <input type="checkbox"/> No
		3 <input type="checkbox"/> No, but received compensating time off
		4 <input type="checkbox"/> Never work overtime
d. After how many hours do you receive extra pay?		105 d. _____ Hours per day
		106 _____ Hours per week
e. For all hours worked over (entry in d) are you paid straight time, time and one-half, double time or what?		107 e. 1 <input type="checkbox"/> Compensating time off
		2 <input type="checkbox"/> Straight time
		3 <input type="checkbox"/> Time and one-half
		4 <input type="checkbox"/> Double time
		5 <input type="checkbox"/> Other - Specify _____
f. Are your wages (salary) on this job set by a collective bargaining agreement between your employer and a union or employee association?		108 f. 1 <input type="checkbox"/> Yes - ASK g
		2 <input type="checkbox"/> No - SKIP to 35a
g. What is the name of the union or employee association?		109 g. _____
h. Are you a member of that union or employee association?		110 h. 1 <input type="checkbox"/> Yes
		2 <input type="checkbox"/> No
CHECK ITEM K	111 1 <input type="checkbox"/> Respondent a noninterview in 1969 - SKIP to 35a	
	Refer to items 95R and 96R(1) on Information Sheet	
	2 <input type="checkbox"/> Respondent employed in both 1968 and 1969 but with DIFFERENT employers (names of employer in 95R and 96R(1) are different - ASK 34	
	3 <input type="checkbox"/> All others - SKIP to Check Item L	
34. Two years ago you were working at (name of company in 95R). Why did you happen to leave that job?		112 34. _____
CHECK ITEM L	<div><input type="checkbox"/> Respondent currently in Labor Force Group A - ASK 35a</div> <div>Respondent currently in Labor Force Group B or C and -</div> <div><input type="checkbox"/> Last worked January 1, 1969 or later - SKIP to 38a</div> <div><input type="checkbox"/> Last worked before January 1, 1969 or never worked - SKIP to 39a</div>	
35a. Before you began to work as a (entry in 32f) for (entry in 32b), did you do any other kind of work for (entry in 32b)?		35a. <input type="checkbox"/> Yes - SKIP to 36a
		oo <input type="checkbox"/> No
b. Excluding vacations, during the time you have worked at this job, were there any full weeks in which you didn't work (since January 1, 1968)?		113 b. <input type="checkbox"/> Yes - How many weeks? _____
		<input type="checkbox"/> No - SKIP to Check Item M
c. Why were you not working during these _____ weeks?		114 c. 1 <input type="checkbox"/> School
		2 <input type="checkbox"/> Personal, family reasons
		3 <input type="checkbox"/> Own illness
		4 <input type="checkbox"/> Pregnancy
		5 <input type="checkbox"/> Layoff
		6 <input type="checkbox"/> Labor dispute
		7 <input type="checkbox"/> Did not want to work
		8 <input type="checkbox"/> Other



II. CURRENT LABOR FORCE STATUS – Continued			
CHECK ITEM M	Refer to item 32i <input type="checkbox"/> Current job started before January 1, 1968 – SKIP to Check Item T <input type="checkbox"/> Current job started January 1, 1968 or later – SKIP to 37		
36a. When did you start working as a (entry in 32f) for (entry in 32b)?	115	36a.	Month   Day   Year
b. Excluding vacations, during the time you have worked as a (entry in 32f) for (entry in 32b), were there any full weeks in which you didn't work, (since January 1, 1968)?	116	b.	<input type="checkbox"/> Yes – How many weeks? _____ 00 <input type="checkbox"/> No – SKIP to Check Item N
c. Why were you not working during these _____ weeks?	117	c.	1 <input type="checkbox"/> School 2 <input type="checkbox"/> Personal, family reasons 3 <input type="checkbox"/> Own illness 4 <input type="checkbox"/> Pregnancy 5 <input type="checkbox"/> Layoff 6 <input type="checkbox"/> Labor dispute 7 <input type="checkbox"/> Did not want to work 8 <input type="checkbox"/> Other
CHECK ITEM N	<input type="checkbox"/> Item 36a is earlier than January 1, 1968 – SKIP to Check Item T <input type="checkbox"/> Item 36a is January 1, 1968 or later – ASK 37		
37. Just before you started on this job, was there a period of a week or more in which you were not working?		37.	<input type="checkbox"/> Yes – SKIP to 48 <input type="checkbox"/> No – SKIP to 40
38a. You said you last worked at a regular job on (entry in 30g or 31). (Interviewer: Use calendar to determine the number of weeks since respondent last worked.)	118	38a.	(1) _____ Weeks since last worked
That would be about _____ weeks since you last worked. In how many of these weeks were you looking for work or on layoff from a job?	119		(2) _____ Weeks looking or on layoff
CHECK ITEM O	<input type="checkbox"/> 38a(1) is equal to 38a(2) – SKIP to 40 <input type="checkbox"/> 38a(1) is greater than 38a(2) – ASK b		
38b. That leaves _____ weeks that you were not working or looking for work. What would you say was the main reason you were not looking for work during that period?	120 121	38b. Weeks _____	1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Ill or disabled, unable to work 3 <input type="checkbox"/> In school 4 <input type="checkbox"/> Pregnancy 5 <input type="checkbox"/> Couldn't find work 6 <input type="checkbox"/> Vacation 7 <input type="checkbox"/> Did not want to work 8 <input type="checkbox"/> Other – Specify _____ <div>SKIP to 40</div>
39a. Since January 1, 1968 have you spent any weeks looking for work or on layoff from a job?	122	39a.	<input type="checkbox"/> Yes – How many weeks? _____ 00 <input type="checkbox"/> No
CHECK ITEM P	Interviewer: Use calendar to determine the number of weeks since last worked. 123 (1) Weeks since January 1, 1968 _____ 124 (2) Weeks on layoff or looking for work _____ <input type="checkbox"/> (1) is equal to (2) – SKIP to Check Item T. <input type="checkbox"/> (1) is greater than (2) – ASK b		
39b. What would you say was the main reason you were not looking for work during (the rest of) that time?	125	39b.	1 <input type="checkbox"/> Personal, family reasons 2 <input type="checkbox"/> Ill or disabled, unable to work 3 <input type="checkbox"/> In school 4 <input type="checkbox"/> Retired 5 <input type="checkbox"/> Couldn't find work 6 <input type="checkbox"/> Vacation 7 <input type="checkbox"/> Did not want to work 8 <input type="checkbox"/> Other – Specify _____ <div>SKIP to Check Item T</div>
Notes		126	
		127	

III. WORK EXPERIENCE AND ATTITUDES

40. Now let's talk about -		<div>The job you worked at before you started to work as a (ENTRY IN 32f OR 40e) for (ENTRY IN 32b OR 40a)</div> <div>The last job you worked at; that is, the one which ended on (ENTRY IN 30g OR 31.)</div>		(1)	
a. For whom did you work? (Name of company, business, organization or other employer)				a. <input type="checkbox"/> Same as 32b - SKIP to 40e	
b. In what city and State is . . . located?		128 <input type="text"/>		b. City, State	
c. What kind of business or industry is this? (For example: TV and radio manufacturer, retail shoe store, State Labor Department, farm)		129 <input type="text"/>		c.	
d. Class of worker.		130 <input type="checkbox"/> P <input type="checkbox"/> G <input type="checkbox"/> O <input type="checkbox"/> WP		d.	
e. What kind of work were you doing? (For example: registered nurse, high school English teacher, waitress)		131 <input type="text"/>		e.	
f. What were your most important activities or duties? (For example: selling clothing, typing, keeping account books, filing)				f.	
g. What was your job title?				g.	
41a. Altogether, how much did you usually earn at this job before all deductions?		132 \$ <input type="text"/> per <input type="text"/>		a.	
b. How many hours per week did you usually work at this job?		134 Hours <input type="text"/>		b.	
42a. When did you start working as a (ENTRY IN 40e) for (ENTRY IN 40a)?		135 <input type="text"/> Month <input type="text"/> Day <input type="text"/> Year		a.	
b. When did you stop working as a (ENTRY IN 40e) for (ENTRY IN 40a)?		136 <input type="text"/> Month <input type="text"/> Day <input type="text"/> Year		b.	
43. Why did you happen to leave this job (change the kind of work you were doing)?		137 <input type="text"/>			
44a. Excluding vacations, during the time you worked at this job were there any full weeks in which you didn't work (since January 1, 1968)?		138 a. <input type="checkbox"/> Yes - How many weeks? <input type="text"/> - ASK b			
b. Why were you not working during these . . . weeks?		139 b. <input type="checkbox"/> No - SKIP to Check Item Q			
		1 <input type="checkbox"/> Layoff		5 <input type="checkbox"/> Own illness	
		2 <input type="checkbox"/> Labor dispute		6 <input type="checkbox"/> Pregnancy	
		3 <input type="checkbox"/> In school		7 <input type="checkbox"/> Did not want to work	
		4 <input type="checkbox"/> Personal family reasons		8 <input type="checkbox"/> Other	
CHECK ITEM Q	Item 42a is: 1. January 1, 1968 or later 2. Before January 1, 1968	1. <input type="checkbox"/> - ASK 45			
		2. <input type="checkbox"/> - SKIP to Check Item T			
45. Did you do any other kind of work for (ENTRY IN 40a) before (ENTRY IN 42a)?		140 1 <input type="checkbox"/> Yes - GO to next column and record information about this work			
		2 <input type="checkbox"/> No - ASK 46			
46. While you were working for (ENTRY IN 40a), were you also working for someone else?		141 1 <input type="checkbox"/> Yes - Go to next column and record information about simultaneous job			
		2 <input type="checkbox"/> No - ASK 47			
47. JUST before you started working as a (ENTRY IN 40e) for (ENTRY IN 40a) was there a period of a week or more in which you were not working?		142 1 <input type="checkbox"/> Yes - ASK 48			
		2 <input type="checkbox"/> No - Go to next column and record information about previous job			
48. When did this period in which you were not working start?		143 <input type="text"/> Month <input type="text"/> Day <input type="text"/> Year			
		X <input type="checkbox"/> Never worked before			
49a. Interviewer: Determine number of weeks not working. If item 48 is before January 1, 1968, count only weeks since that time.		144 a. Weeks not working <input type="text"/>			
b. That would be about . . . weeks that you were not working. How many of those weeks were you looking for work or on layoff from a job?		145 b. Weeks looking or on layoff <input type="text"/>			
CHECK ITEM R	1. 49a is equal to 49b 2. 49a is greater than 49b	1. <input type="checkbox"/> - SKIP to Check Item S			
		2. <input type="checkbox"/> - ASK 50			
50a. That leaves . . . weeks that you were not working or looking for work. What would you say was the main reason that you were not looking for work during that period?		146 a. 1 <input type="checkbox"/> Ill or disabled, unable to work		6 <input type="checkbox"/> Couldn't find work	
		2 <input type="checkbox"/> In school		7 <input type="checkbox"/> Did not want to work	
		3 <input type="checkbox"/> Personal family		8 <input type="checkbox"/> Other	
		4 <input type="checkbox"/> Vacation		5 <input type="checkbox"/> Birth or acquired child(ren) - ASK b	
b. When was your baby born (did you assume charge of this child)?		147 <input type="text"/> Month <input type="text"/> Year		SKIP to Check Item S	
		X <input type="checkbox"/> Not born yet			
c. Were you employed within one year before (this pregnancy, birth of child, child came to live with you)?		148 c. 1 <input type="checkbox"/> Yes - ASK d			
		2 <input type="checkbox"/> No - SKIP to Check Item S			
d. Did you receive maternity leave or some assurance that your job would be held for you?		149 d. 1 <input type="checkbox"/> Yes			
		2 <input type="checkbox"/> No			
CHECK ITEM S	1. Item 48 is January 1, 1968 or later 2. Item 48 is before January 1, 1968	1. <input type="checkbox"/> - Go to next column and record information about previous job			
		2. <input type="checkbox"/> - SKIP to Check Item T			

### III. WORK EXPERIENCE AND ATTITUDES - Continued

(2)	(3)	(4)
<p><input type="checkbox"/> Never worked before - <i>SKIP to Check Item T</i></p> <p>a. <input type="checkbox"/> Same as _____</p> <p>b. City, State _____</p> <p>c. _____</p> <p>d. <input type="checkbox"/> P <input type="checkbox"/> G <input type="checkbox"/> O <input type="checkbox"/> WP</p> <p>e. _____</p> <p>f. _____</p> <p>g. _____</p> <p>154 a. \$ _____ per _____</p> <p>155 b. Hours _____</p> <p>156 a. Month Day Year</p> <p>157 b. Month Day Year</p> <p>158 _____</p> <p>159 a. <input type="checkbox"/> Yes - How many weeks? _____ - ASK b</p> <p>160 b. <input type="checkbox"/> No - <i>SKIP to Check Item Q</i></p> <p>161 b. 1 <input type="checkbox"/> Layoff 5 <input type="checkbox"/> Own illness 2 <input type="checkbox"/> Labor dispute 6 <input type="checkbox"/> Pregnancy 3 <input type="checkbox"/> In school 7 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Personal family reasons 8 <input type="checkbox"/> Other</p> <p>1. <input type="checkbox"/> - ASK 45 2. <input type="checkbox"/> - <i>SKIP to Check Item T</i></p> <p>162 1 <input type="checkbox"/> Yes - GO to next column and record information about this work 2 <input type="checkbox"/> No - ASK 46</p> <p>163 1 <input type="checkbox"/> Yes - Go to next column and record information about simultaneous job 2 <input type="checkbox"/> No - ASK 47</p> <p>164 1 <input type="checkbox"/> Yes - ASK 48 2 <input type="checkbox"/> No - Go to next column and record information about previous job</p> <p>165 Month Day Year X <input type="checkbox"/> Never worked before</p> <p>166 a. Weeks not working _____</p> <p>167 b. Weeks looking or on layoff _____</p> <p>1. <input type="checkbox"/> - <i>SKIP to Check Item S</i> 2. <input type="checkbox"/> - ASK 50</p> <p>168 a. 1 <input type="checkbox"/> Ill or disabled, unable to work 6 <input type="checkbox"/> Couldn't find work 2 <input type="checkbox"/> In school 7 <input type="checkbox"/> Did not want to work 3 <input type="checkbox"/> Personal family 8 <input type="checkbox"/> Other 4 <input type="checkbox"/> Vacation 5 <input type="checkbox"/> Birth or acquired child(ren) - ASK b</p> <p>169 b. Month Year X <input type="checkbox"/> Not born yet</p> <p>170 c. 1 <input type="checkbox"/> Yes - ASK d 2 <input type="checkbox"/> No - <i>SKIP to Check Item S</i></p> <p>171 d. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p> <p>1. <input type="checkbox"/> - Go to next column and record information about previous job 2. <input type="checkbox"/> - <i>SKIP to Check Item T</i></p>	<p><input type="checkbox"/> Never worked before - <i>SKIP to Check Item T</i></p> <p>a. <input type="checkbox"/> Same as _____</p> <p>b. City, State _____</p> <p>c. _____</p> <p>d. <input type="checkbox"/> P <input type="checkbox"/> G <input type="checkbox"/> O <input type="checkbox"/> WP</p> <p>e. _____</p> <p>f. _____</p> <p>g. _____</p> <p>176 a. \$ _____ per _____</p> <p>177 b. Hours _____</p> <p>178 a. Month Day Year</p> <p>179 b. Month Day Year</p> <p>180 _____</p> <p>181 a. <input type="checkbox"/> Yes - How many weeks? _____ - ASK b</p> <p>182 b. <input type="checkbox"/> No - <i>SKIP to Check Item Q</i></p> <p>183 b. 1 <input type="checkbox"/> Layoff 5 <input type="checkbox"/> Own illness 2 <input type="checkbox"/> Labor dispute 6 <input type="checkbox"/> Pregnancy 3 <input type="checkbox"/> In school 7 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Personal family reasons 8 <input type="checkbox"/> Other</p> <p>1. <input type="checkbox"/> - ASK 45 2. <input type="checkbox"/> - <i>SKIP to Check Item T</i></p> <p>184 1 <input type="checkbox"/> Yes - GO to next column and record information about this work 2 <input type="checkbox"/> No - ASK 46</p> <p>185 1 <input type="checkbox"/> Yes - Go to next column and record information about simultaneous job 2 <input type="checkbox"/> No - ASK 47</p> <p>186 1 <input type="checkbox"/> Yes - ASK 48 2 <input type="checkbox"/> No - Go to next column and record information about previous job</p> <p>187 Month Day Year X <input type="checkbox"/> Never worked before</p> <p>188 a. Weeks not working _____</p> <p>189 b. Weeks looking or on layoff _____</p> <p>1. <input type="checkbox"/> - <i>SKIP to Check Item S</i> 2. <input type="checkbox"/> - ASK 50</p> <p>190 a. 1 <input type="checkbox"/> Ill or disabled, unable to work 6 <input type="checkbox"/> Couldn't find work 2 <input type="checkbox"/> In school 7 <input type="checkbox"/> Did not want to work 3 <input type="checkbox"/> Personal family 8 <input type="checkbox"/> Other 4 <input type="checkbox"/> Vacation 5 <input type="checkbox"/> Birth or acquired child(ren) - ASK b</p> <p>191 b. Month Year X <input type="checkbox"/> Not born yet</p> <p>192 c. 1 <input type="checkbox"/> Yes - ASK d 2 <input type="checkbox"/> No - <i>SKIP to Check Item S</i></p> <p>193 d. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p> <p>1. <input type="checkbox"/> - Go to next column and record information about previous job 2. <input type="checkbox"/> - <i>SKIP to Check Item T</i></p>	<p><input type="checkbox"/> Never worked before - <i>SKIP to Check Item T</i></p> <p>a. <input type="checkbox"/> Same as _____</p> <p>b. City, State _____</p> <p>c. _____</p> <p>d. <input type="checkbox"/> P <input type="checkbox"/> G <input type="checkbox"/> O <input type="checkbox"/> WP</p> <p>e. _____</p> <p>f. _____</p> <p>g. _____</p> <p>198 a. \$ _____ per _____</p> <p>199 b. Hours _____</p> <p>200 a. Month Day Year</p> <p>201 b. Month Day Year</p> <p>202 _____</p> <p>203 a. <input type="checkbox"/> Yes - How many weeks? _____ - ASK b</p> <p>204 b. <input type="checkbox"/> No - <i>SKIP to Check Item Q</i></p> <p>205 b. 1 <input type="checkbox"/> Layoff 5 <input type="checkbox"/> Own illness 2 <input type="checkbox"/> Labor dispute 6 <input type="checkbox"/> Pregnancy 3 <input type="checkbox"/> In school 7 <input type="checkbox"/> Did not want to work 4 <input type="checkbox"/> Personal family reasons 8 <input type="checkbox"/> Other</p> <p>1. <input type="checkbox"/> - ASK 45 2. <input type="checkbox"/> - <i>SKIP to Check Item T</i></p> <p>206 1 <input type="checkbox"/> Yes - GO to next column and record information about this work 2 <input type="checkbox"/> No - ASK 46</p> <p>207 1 <input type="checkbox"/> Yes - Go to next column and record information about simultaneous job 2 <input type="checkbox"/> No - ASK 47</p> <p>208 1 <input type="checkbox"/> Yes - ASK 48 2 <input type="checkbox"/> No - Go to next column and record information about previous job</p> <p>209 Month Day Year X <input type="checkbox"/> Never worked before</p> <p>210 a. Weeks not working _____</p> <p>211 b. Weeks looking or on layoff _____</p> <p>1. <input type="checkbox"/> - <i>SKIP to Check Item S</i> 2. <input type="checkbox"/> - ASK 50</p> <p>212 a. 1 <input type="checkbox"/> Ill or disabled, unable to work 6 <input type="checkbox"/> Couldn't find work 2 <input type="checkbox"/> In school 7 <input type="checkbox"/> Did not want to work 3 <input type="checkbox"/> Personal family 8 <input type="checkbox"/> Other 4 <input type="checkbox"/> Vacation 5 <input type="checkbox"/> Birth or acquired child(ren) - ASK b</p> <p>213 b. Month Year X <input type="checkbox"/> Not born yet</p> <p>214 c. 1 <input type="checkbox"/> Yes - ASK d 2 <input type="checkbox"/> No - <i>SKIP to Check Item S</i></p> <p>215 d. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p> <p>1. <input type="checkbox"/> - Go to next column and record information about previous job 2. <input type="checkbox"/> - <i>SKIP to Check Item T</i></p>

### III. WORK EXPERIENCE AND ATTITUDES – Continued

**CHECK  
ITEM T**

Respondent is in –

- ☐ Labor Force Group A ("WK" or "J" in 27 or "Yes" in 28a or 29a) – *SKIP to Check Item U*  
☐ Labor Force Group B ("LK" in 27 or "Yes" in 30a) – *SKIP to 53a*  
☐ Labor Force Group C (All others) – *ASK 51a*

51a. Do you intend to look for work of any kind in the next 12 months?

282

- 51a. 1 ☐ Yes – definitely } *ASK b*  
2 ☐ Yes – probably }  
☐ Maybe – What does it depend on? \_\_\_\_\_ } *SKIP to 52a*  
3 ☐ No } *SKIP to 52a*  
4 ☐ Don't know }

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

283

Month \_\_\_\_\_

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

284

c.

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

285

- d. Check with { 01 ☐ School employment service (or counselor)  
02 ☐ State employment agency  
03 ☐ Private employment agency  
04 ☐ Directly with employer  
05 ☐ Friends or relatives  
06 ☐ Place or answer newspaper ads  
07 ☐ Other – Specify \_\_\_\_\_

52a. Why would you say that you are not looking for work at this time?

286

- 52a. 1 ☐ School  
2 ☐ Health reasons  
3 ☐ Husband (parents) would not permit  
4 ☐ Believes no work available  
5 ☐ Does not want to work at this time of year  
6 ☐ Pregnancy  
7 ☐ Personal, family reasons  
8 ☐ Other or no reason

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

287

- b. 01 ☐ Yes, definitely  
02 ☐ Yes, if it is something I can do  
03 ☐ Yes, if satisfactory wage  
04 ☐ Yes, if satisfactory location  
05 ☐ Yes, if child care available  
06 ☐ Yes, if husband agrees  
07 ☐ Yes, if other \_\_\_\_\_ } *ASK c*  
08 ☐ No, health won't permit  
09 ☐ No, it will interfere with school  
10 ☐ No, parents (husband) don't want me to  
11 ☐ No, too busy with home and/or family  
12 ☐ No, other \_\_\_\_\_ } *SKIP to Check Item X*

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

288

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

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

289

d.

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

290

- e. \$ \_\_\_\_\_ per: 291 1 ☐ Hour  
(Dollars) (Cents) 2 ☐ Day  
3 ☐ Week  
4 ☐ Biweekly  
5 ☐ Month  
6 ☐ Year  
7 ☐ Other →

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

Specify \_\_\_\_\_

*SKIP to Check Item X*

III. WORK EXPERIENCE AND ATTITUDES – Continued

53a. What type of work are you looking for?

292 53a.

293

b.

\$

(Dollars)

.

(Cents)

per:

\$

(Dollars only)

per:

1 ☐ Hour

2 ☐ Day

3 ☐ Week

4 ☐ Biweekly

5 ☐ Month

6 ☐ Year

7 ☐ Other

Specify

295

c.

1 ☐ Yes – ASK d

2 ☐ No – SKIP to 54a

296

d.

297

54a.

1 ☐ Yes – ASK b

☐ No – Why not?

SKIP to Check Item X

298

b. Child will be cared for:

1 ☐ In own home by relative

2 ☐ In own home by nonrelative

3 ☐ In relative's home

4 ☐ In nonrelative's home

5 ☐ At school or group care center (day care center, nursery school, after-school center, settlement house, etc.)

6 ☐ Don't know

SKIP to Check Item X

299

55.

1 ☐ Recovered from illness

2 ☐ Bored

3 ☐ Completed education

4 ☐ Needed money

5 ☐ Other – Specify

300

56.

1 ☐ Like it very much

2 ☐ Like it fairly well

3 ☐ Dislike it somewhat

4 ☐ Dislike it very much

301

57.

(1)

302

(2)

303

(3)

304

58.

(1)

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### III. WORK EXPERIENCE AND ATTITUDES – Continued

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

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

307

59.

\$ \_\_\_\_\_ per:  
(Dollars) (Cents)

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

308

- 01 ☐ Hour  
02 ☐ Day  
03 ☐ Week  
04 ☐ Biweekly  
05 ☐ Month  
06 ☐ Year  
07 ☐ Other →

Specify \_\_\_\_\_

308

- 08 ☐ I wouldn't take it at any conceivable pay  
09 ☐ I would take a steady job at same or less pay  
10 ☐ Would accept job; don't know specific amount

CHECK

ITEM V

- ☐ Respondent married – *SKIP to Check Item W*  
Respondent not married and:  
☐ Is enrolled in school – *SKIP to Check Item W*  
☐ All others – *ASK 60*

60. What if this job were **IN SOME OTHER PART OF THE COUNTRY** – how much would it have to pay in order for you to be willing to take it?

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

309

60.

\$ \_\_\_\_\_ per:  
(Dollars) (Cents)

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

310

- 01 ☐ Hour  
02 ☐ Day  
03 ☐ Week  
04 ☐ Biweekly  
05 ☐ Month  
06 ☐ Year  
07 ☐ Other →

Specify \_\_\_\_\_

310

- 08 ☐ I wouldn't take it at any conceivable pay  
09 ☐ I would take a steady job at same or less pay  
10 ☐ Would accept job; don't know specific amount  
11 ☐ Depends on location, cost of living

CHECK

ITEM W

- Refer to item 94R on the Information Sheet  
☐ Respondent in Labor Force Group A in 1969 – *ASK 61a*  
☐ All other – *SKIP to check box before 62a*

61a. Would you say you like your present job more, less, or about the same as (the job you held) last year?

311

61a.

- 1 ☐ More } *ASK b*  
2 ☐ Less }  
3 ☐ Same – *SKIP to 62a*

☐ ☐

312

b.

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

☐ Respondent has no children in the household – *SKIP to Check Item X*

62a. Is it necessary for you to make any regular arrangements for the care of your child(ren) while you are working?

313

62a.

- 1 ☐ Yes – *ASK b and c*  
☐ No – Why not? \_\_\_\_\_

*SKIP to Check Item X*

314

b. Child is cared for:

- 1 ☐ In own home by relative  
2 ☐ In own home by nonrelative  
3 ☐ In relative's home  
4 ☐ In nonrelative's home  
5 ☐ At school or group care center (day care center, day nursery, nursery school, after-school center, settlement house, etc.)  
6 ☐ Don't know

b. What arrangements have you made?

315

c.

\$ \_\_\_\_\_ per:

316

- 1 ☐ Hour  
2 ☐ Day  
3 ☐ Week  
4 ☐ Month  
5 ☐ Other – *Specify* →

c. What is the cost of these child care arrangements?

x ☐ No cost

III. WORK EXPERIENCE AND ATTITUDES – Continued	
CHECK ITEM X	<div>Respondent is NOT currently enrolled in school AND is now in – <div><input type="checkbox"/> Labor Force Group A (“WK” or “J” in 27 or “Yes” in 28a or 29a) <input type="checkbox"/> Labor Force Group B (“LK” in 27 or “Yes” in 30a) <input type="checkbox"/> Labor Force Group C (All others) <input type="checkbox"/> Respondent is attending school</div><div><div>  } SKIP to 63a</div><div>  } SKIP to 64a</div></div></div>
63a. If, by some chance, you (and your husband) were to get enough money to live comfortably without working, do you think you would work anyway?	317 63a. 1 <input type="checkbox"/> Yes – ASK b 2 <input type="checkbox"/> No – SKIP to c 3 <input type="checkbox"/> Undecided – SKIP to d <div><input type="checkbox"/></div>
b. Why do you feel you would work?	318 b. <div></div> <div>SKIP to 64a</div>
c. Why do you feel you would not work?	319 c. <div></div> <div>SKIP to 64a</div>
d. On what would it depend?	320 d. <div></div>
64a. Would you say that during the past year there has been any change in your feeling about having a job outside the home for pay?	321 64a. 1 <input type="checkbox"/> Yes – ASK b and c 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don’t know } SKIP to 65 <div><input type="checkbox"/></div>
b. In what way has your feeling changed?	322 b. <div></div>
c. Why would you say your thinking has changed?	323 c. <div></div>
Notes	



### III. WORK EXPERIENCE AND ATTITUDES – Continued

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

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

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

- a. 1 ☐ Many of the unhappy things in people's lives are partly due to bad luck.

- 2 ☐ People's misfortunes result from the mistakes they make.

324\*

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

8 ☐ Much

9 ☐ Slightly

- b. 1 ☐ In the long run, people get the respect they deserve in this world.

- 2 ☐ Unfortunately, an individual's worth often passes unrecognized no matter how hard he tries.

325\*

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

8 ☐ Much

9 ☐ Slightly

- c. 1 ☐ Without the right breaks, one cannot be an effective leader.

- 2 ☐ Capable people who fail to become leaders have not taken advantage of their opportunities.

326\*

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

8 ☐ Much

9 ☐ Slightly

- d. 1 ☐ Becoming a success is a matter of hard work; luck has little or nothing to do with it.

- 2 ☐ Getting a good job depends mainly on being in the right place at the right time.

327\*

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

8 ☐ Much

9 ☐ Slightly

- e. 1 ☐ What happens to me is my own doing.

- 2 ☐ Sometimes I feel that I don't have enough control over the direction my life is taking.

328\*

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

8 ☐ Much

9 ☐ Slightly

- f. 1 ☐ When I make plans, I am almost certain that I can make them work.

- 2 ☐ It is not always wise to plan too far ahead, because many things turn out to be a matter of good or bad fortune anyhow.

329\*

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

8 ☐ Much

9 ☐ Slightly

- g. 1 ☐ In my case, getting what I want has little or nothing to do with luck.

- 2 ☐ Many times we might just as well decide what to do by flipping a coin.

330\*

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

8 ☐ Much

9 ☐ Slightly

III. WORK EXPERIENCE AND ATTITUDES – Continued

- 65h. 1 ☐ Who gets to be boss often depends on who was lucky enough to be in the right place first.
- 2 ☐ Getting people to do the right thing depends upon ability; luck has little or nothing to do with it.

331\*

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

8 ☐ Much 9 ☐ Slightly

- i. 1 ☐ Most people don't realize the extent to which their lives are controlled by accidental happenings.
- 2 ☐ There is really no such thing as "luck."

332\*

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

8 ☐ Much 9 ☐ Slightly

- j. 1 ☐ In the long run, the bad things that happen to us are balanced by the good ones.
- 2 ☐ Most misfortunes are the result of lack of ability, ignorance, laziness, or all three.

333\*

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

8 ☐ Much 9 ☐ Slightly

- k. 1 ☐ Many times I feel that I have little influence over the things that happen to me.
- 2 ☐ It is impossible for me to believe that chance or luck plays an important role in my life.

334\*

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

8 ☐ Much 9 ☐ Slightly

Notes

335
336
337

IV. FUTURE JOB PLANS			
66. Now I would like to talk to you about your future job plans. What kind of work would you like to be doing when you are 35 years old?		338	66.
		339	1 <input type="checkbox"/> Married, keeping house, raising family 2 <input type="checkbox"/> Same as present job 3 <input type="checkbox"/> Don't know
CHECK ITEM Y	340 Refer to Item 97R on the Information Sheet 1 <input type="checkbox"/> Respondent's future job plans are the same as when last interviewed – (Entries in 66 and item 97R on the Information Sheet are the same) – SKIP to Check Item Z 2 <input type="checkbox"/> Respondent's future job plans differ from when last interviewed – (Entries in 66 and item 97R of Information Sheet differ) – ASK 67 3 <input type="checkbox"/> Respondent not asked about future job plans – SKIP to Check Item Z		
67. When we last interviewed you, you said you thought that you'd like to be (entry in item 97R of Information Sheet). Why would you say you have changed your plans?		341	67.
V. HEALTH			
CHECK ITEM Z	<input type="checkbox"/> Respondent is currently in school – ASK 68a <input type="checkbox"/> Respondent is not currently enrolled in school – SKIP to 68b		
68a. Do you have any health problems that limit in any way your activity in school?		342	68a. 1 <input type="checkbox"/> Yes – SKIP to 69 2 <input type="checkbox"/> No – ASK b
b. Do you have any health problems that limit in any way the amount or kind of work you can do?		343	b. 1 <input type="checkbox"/> Yes – SKIP to 69 2 <input type="checkbox"/> No – ASK c
c. Do you have any health problems that in any way limit your other activities?		344	c. 1 <input type="checkbox"/> Yes – ASK 69 2 <input type="checkbox"/> No – SKIP to 70
69. How long have you been limited in this way?		345	69. Years _____
<input type="checkbox"/> Respondent not married – SKIP to 72a		346	70. 1 <input type="checkbox"/> Yes – ASK 71 2 <input type="checkbox"/> No – SKIP to 72
70. Does your husband's health limit the amount or kind of work he can do?			
71. How long has he been limited in this way?		347	71. Years _____
Notes			

VI. ASSETS AND INCOME			
72a. So far as your overall financial position is concerned, would you say you are better off, about the same, or worse off now than you were at this time last year?		348	72a. 1 <input type="checkbox"/> Same – SKIP to Check Item AA 2 <input type="checkbox"/> Better off } ASK b 3 <input type="checkbox"/> Worse off }
b. In what ways are you (better, worse) off?		349	<input type="checkbox"/> b.
CHECK ITEM AA	<input type="checkbox"/> Respondent (or husband) is NOT head of household – SKIP to 74a <input type="checkbox"/> Respondent (or husband) is head of household – ASK 73a		
73a. In the last 12 months, did you (or your husband) receive financial assistance from any of your relatives?		350	73a. 1 <input type="checkbox"/> Yes – ASK b 2 <input type="checkbox"/> No – SKIP to 74a
b. From whom?		351	<input type="checkbox"/> b.
c. How much did you receive?		352	c. \$ _____
Now I would like to ask a few questions about your income in the last 12 months.			
74a. How much did you (or your husband) receive from wages, salary, commissions, or tips from all jobs, before deductions for taxes or anything else?		353	74a. Respondent \$ _____ <input type="checkbox"/> None
b. Did you (or your husband) receive any income from working on your own or in your own business or farm?			Husband <input type="checkbox"/> Not married
\$ _____ less \$ _____ = \$ _____ (Gross income) (Expenses) (Net Income)		354	358 \$ _____ <input type="checkbox"/> None
c. Did you (or your husband) receive any unemployment compensation?		355	b. <input type="checkbox"/> Yes – How much? \$ _____ <input type="checkbox"/> No
		356	359 \$ _____ <input type="checkbox"/> No
d. Did you (or your husband) receive any other income, such as rental income, interest or dividends, income as a result of disability or illness, etc.?		357	c. <input type="checkbox"/> Yes (1) How many weeks? _____ (2) How much? _____ \$ _____ <input type="checkbox"/> No
			360 (1) How many weeks? _____ 361 (2) How much? _____ \$ _____ <input type="checkbox"/> No
			d. <input type="checkbox"/> Yes – How much? \$ _____ <input type="checkbox"/> No
			362 \$ _____ <input type="checkbox"/> No
CHECK ITEM BB	<input type="checkbox"/> Respondent (and husband) lives alone – SKIP to 75b <input type="checkbox"/> All others – ASK 75a (if two or more RELATED respondents in household, ASK 75a–b only once, and transcribe answers from the first to the other questionnaires).		
75a. In the past 12 months, what was the total income of ALL family members living here? (Show flashcard)		363	75a. 01 <input type="checkbox"/> Under \$1,000 02 <input type="checkbox"/> \$1,000–\$1,999 03 <input type="checkbox"/> 2,000– 2,999 04 <input type="checkbox"/> 3,000– 3,999 05 <input type="checkbox"/> 4,000– 4,999 06 <input type="checkbox"/> 5,000– 5,999 07 <input type="checkbox"/> 6,000– 7,499 08 <input type="checkbox"/> 7,500– 9,999 09 <input type="checkbox"/> 10,000–14,999 10 <input type="checkbox"/> 15,000–24,999 11 <input type="checkbox"/> 25,000 and over
b. Did anyone in this family receive any welfare or public assistance in the last 12 months?		364	b. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No

# VII. FAMILY BACKGROUND

76a. How many persons not counting yourself (or your husband) are dependent upon you for at least one-half of their support?

365

76a.

Number \_\_\_\_\_

o ☐ None — SKIP to Check Item CC

b. Do any of these dependents live somewhere else other than here at home with you?

366

b.

☐ Yes — How many? \_\_\_\_\_ — ASK c

o ☐ No — SKIP to Check Item CC

c. What is their relationship to you?

367

c.

CHECK  
ITEM CC

368

Refer to name and address label on cover page

1 ☐ Respondent lives in same area (SMSA or county) as when last interviewed — SKIP to 79

2 ☐ Respondent lives in different area (SMSA or county) than when last interviewed — ASK 77a

77a. When we last interviewed you, you were living in (city in address on cover page). How many miles from here is that?

369

77a.

Miles \_\_\_\_\_

b. How did you happen to move here?

370

b.

☐ Respondent currently in school — SKIP to 78c

78a. Did you have a job lined up here at the time you moved?

371

78a.

1 ☐ Yes, different from job held at time of move

2 ☐ Yes, same as job held at time of move

3 ☐ Yes, transferred job in same company

4 ☐ No — ASK b

SKIP  
to c

b. How many weeks did you look before you found work?

372

b.

Weeks \_\_\_\_\_

00 ☐ Did not look for work

99 ☐ Still haven't found work

c. Since we last interviewed you, have you lived in any area (SMSA or county) other than the present one or the one in which you lived when we interviewed you last?

373

c.

☐ Yes — How many? \_\_\_\_\_

o ☐ No

SKIP to  
Check Item DD

79. Have you lived in any area (SMSA or county) other than the present one since we last interviewed you?

374

79.

☐ Yes — How many? \_\_\_\_\_

o ☐ No

CHECK  
ITEM DD

375

1 ☐ Father lives in household

2 ☐ Father deceased

3 ☐ Other — ASK 80a

SKIP to Check Item EE

80a. During the past 12 months, about how many weeks did your father work either full-time or part-time (not counting work around the house)?

376

80a.

Weeks \_\_\_\_\_

00 ☐ Did not work

99 ☐ Don't know

SKIP to Check Item EE

b. Did your father usually work full-time or part-time?

377

b.

1 ☐ Full-time

2 ☐ Part-time

c. What kind of work was he doing?  
(If more than one, record the one worked at longest)

378

c.

CHECK  
ITEM EE

379

1 ☐ Mother lives in household

2 ☐ Mother deceased

3 ☐ Other — ASK 81a

SKIP to FF

VII. FAMILY BACKGROUND – Continued

81a. During the past 12 months, about how many weeks did your mother work either full-time or part-time (not counting work around the house)?

b. Did your mother usually work full-time or part-time?

c. What kind of work was she doing?  
(If more than one, record the one worked at longest)

81a. Weeks \_\_\_\_\_

00 ☐ Did not work } SKIP to FF

99 ☐ Don't know }

b. 1 ☐ Full-time

2 ☐ Part-time

\_\_\_\_\_

c. \_\_\_\_\_

CHECK  
ITEM FF

Refer to item 98R on Reference Sheet

☐ Marital status has changed since 1969 – ASK 82

☐ Marital status has not changed since 1969 – SKIP to 83

82. In what month were you –

married?

divorced?

widowed?

separated?

82.

Month \_\_\_\_\_ Year \_\_\_\_\_

83. How many rooms are there in this house or apartment?  
Do not count bathrooms, porches, balconies, foyers, halls, or half rooms.

83.

Number \_\_\_\_\_

Notes

385

386

Now I have a few questions about the education and work experience of the other family members living here.									
Line number	Name  List below all persons living here who are related to respondent.  Enter line number from the Household Record Card in Column 84a.	Relationship to respondent  Example: wife, son, daughter-in-law, brother, etc.	Age  As of January 1, 1969	Persons 6-24 years old			Persons 14 years old and over		
				Is . . . attending or enrolled in school?  Circle Y - Yes N - No	If "Yes" - What grade (year)?  If "No" - What is the highest grade (year) . . . ever attended?	Did . . . finish this grade (year)?	In the past 12 months how many weeks did . . . work either full- or part-time (not counting work around the house)?	In the weeks that . . . worked, how many hours did . . . usually work per week?	What kind of work was . . . doing in the past 12 months?  If more than one, record the longest.
84a	84b	84c	84d						
		387 Respondent							
		388		389 Y N		Y N	390		391
		392		393 Y N		Y N	394		395
		396		397 Y N		Y N	398		399
		400		401 Y N		Y N	402		403
		404		405 Y N		Y N	406		407
		408		409 Y N		Y N	410		411
		412		413 Y N		Y N	414		415
		416		417 Y N		Y N	418		419
		420		421 Y N		Y N	422		423
		424		425 Y N		Y N	426		427
		428		429 Y N		Y N	430		431
		432		433 Y N		Y N	434		435
		436		437 Y N		Y N	438		439
		440		441 Y N		Y N	442		443
		444		445 Y N		Y N	446		447
		448		449 Y N		Y N	450		451
		452		453 Y N		Y N	454		455
		456		457 Y N		Y N	458		459
		460		461 Y N		Y N	462		463
		464		465 Y N		Y N	466		467
		468		469 Y N		Y N	470		471
		472		473 Y N		Y N	474		475
		476		477 Y N		Y N	478		479



91. When we last interviewed you, you mentioned (read names from item 99R on Information Sheet.) as persons who will always know where you can be reached even if you moved away. Is this still true? (If so, verify the addresses and telephone numbers and enter below. If not, enter information about other persons who will know the respondent's whereabouts.)	NONINTERVIEWS IN 1969	
	Telephone number	Ask the following questions of all respondents who were noninterviews in 1969. Transcribe the answers to the appropriate item on the Information Sheet, then proceed with the regular interview.
	Address	
	Relationship to respondent	
(1)		
(2)		

**A. Were you attending or enrolled in regular school at this time last year?**

1 ☐ Yes – ASK B(1)

2 ☐ No – SKIP to B(2)

**B. (1) What grade were you attending at that time?**  
**(2) What is the highest grade of regular school you have completed?**

1 Elementary    1    2    3    4    5    6    7    8

2 High School    1    2    3    4

3 College    1    2    3    4    5    6+

**C. What were you doing at this time last year, working going to school, keeping house or something else?**

1 ☐ Working

2 ☐ With a job, not at work

3 ☐ Looking for work

4 ☐ Going to school

5 ☐ KH – Keeping house

6 ☐ U – Unable to work

7 ☐ Other – Specify \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**D. What was your marital status at this time last year?**

1 ☐ Married

2 ☐ Widowed

3 ☐ Divorced

4 ☐ Separated

5 ☐ Never married

Transcribe entries to 92R

Transcribe entries to 94R as follows:

1. Mark "Labor Force Group A" if box 1 or 2 is marked

2. Mark "Labor Force Group B" if box 3 is marked

3. Mark "Labor Force Group C" if box 4, 5, or 7 is marked

4. Mark "Unable to work" if box 6 is marked

Transcribe entries to 98R

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

INFORMATION SHEET  
DATA FROM 1968, 1969 INTERVIEWS

92R. Whether Respondent was attending  
or enrolled in school in 1969

- 1 ☐ Yes  
2 ☐ No

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

- 0 ☐ None      0  
1 ☐ Elem.      1 2 3 4 5 6 7 8  
2 ☐ High      1 2 3 4  
3 ☐ College    1 2 3 4 5 6 7 +

93R. Respondent's educational goal in 1968

- ☐ Not asked educational goal  
☐ High      1 2 3 4  
☐ College    2 4 6 7 +

94R. Respondent's labor force status in 1969

- 1 ☐ Unable to work  
2 ☐ Labor Force Group A  
3 ☐ Labor Force Group B  
4 ☐ Labor Force Group C

95R. Name of employer in 1968

☐ Not employed in 1968

96R.

(1) Name of employer in 1969

(2) Kind of work done

☐ ☐ ☐

x ☐ Not employed in 1969

97R. Plans for age 35 in 1968

☐ Working – *Specify kind*

- ☐ Married, homemaking  
☐ Other or don't know

98R. Marital status last year

- 1 ☐ Married      4 ☐ Separated  
2 ☐ Widowed      5 ☐ Never married  
3 ☐ Divorced

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

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