

NOTICE — All information which would permit identification of the individual will be held strictly confidential, will be used only by persons engaged in and for the purposes of the survey and will not be disclosed or released to others for any other purpose.

FORM **LGT-391**
(12-5-78)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

**SURVEY OF WORK EXPERIENCE
OF MATURE WOMEN**

1979

NATIONAL LONGITUDINAL SURVEYS

METHODS OF LOCATING RESPONDENT WHO HAS MOVED

(Fill only if respondent has MOVED.)

Successful Unsuccessful

- (001)** * 1 ☐ 2 ☐ New occupants
3 ☐ 4 ☐ Neighbors
5 ☐ 6 ☐ Landlord or apartment manager
7 ☐ 8 ☐ Post office
- (002)** * 1 ☐ 2 ☐ Telephone company (including
directory and information operator)
3 ☐ 4 ☐ Persons listed on back of
record card
5 ☐ 6 ☐ Other — Specify

RECORD OF CALLS

Date	Time	Comments
	a.m.	
	p.m.	
	a.m.	
	p.m.	
	a.m.	
	p.m.	
	a.m.	
	p.m.	

RECORD OF INTERVIEW

(003) Method of interview 1 <input type="checkbox"/> Telephone 2 <input type="checkbox"/> Personal visit 3 <input type="checkbox"/> Both	(004) Date completed Month Day Year	Interview time Began Ended		Regional Office code _____00	Interviewed by
	(005) Length of interview (minutes)	a.m. a.m. p.m. p.m.			

NONINTERVIEW REASON

- (006)** ☐ Unable to contact respondent — Specify _____
- 6 ☐ Temporarily absent — Give return date _____
- 7 ☐ Armed Forces
- 8 ☐ Institutionalized — Specify name and type of institution and date of return _____
- 9 ☐ Refused — Give full explanation _____
- 10 ☐ Deceased — Give source of information _____
- 11 ☐ Moved outside U.S. (other than Armed Forces)
- 12 ☐ Other — Specify _____

PGM 3
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↓

INFORMATION SHEET

PART A: INTERVIEWER TRANSCRIPTION ITEMS

R1. Marital Status – Transcribe from Household Record Card item 7

- (007) 1 ☐ Married, spouse present
 2 ☐ Married, spouse absent
 3 ☐ Widowed
 4 ☐ Divorced
 5 ☐ Separated
 6 ☐ Never married

R2. Address where respondent living at time of interview – Transcribe from record card item 1b

- (008) 1 ☐ Same as on label – SKIP to R3
 2 ☐ Different from label – Transcribe below

Number and street

Place

State

ZIP code

For Jeffersonville Only

(009) State/county

(010) PSU

R3. Permanent address – Transcribe from record card item 1e

Only if different from R2 above

Number and street

Place

State

ZIP code

For Jeffersonville Only

(011) State/county

(012) PSU

PART B: 1977 INFORMATION

R4. Interview Status in 1977

- (013) 1 ☐ Interview in 1977 – SKIP to item 1 and begin regular interview
 2 ☐ Noninterview in 1977 – ASK R5

R5. What were you doing around April 15, 1977 – working, keeping house, or something else?

- (014) 1 ☐ Working } SKIP to R7
 2 ☐ With a job, not at work . . }
 3 ☐ Looking for work }
 4 ☐ Going to school } ASK R6
 5 ☐ Keeping house. }
 6 ☐ Unable to work }
 7 ☐ Other – Specify

R6. Did you do any work at all at this time in 1977, not counting work around the house?

- (015) 1 ☐ Yes – ASK R7
 2 ☐ No – Mark “Not employed in 1977” in R7 and begin regular interview with item 1

R7. For whom did you work then?

- (016) 1 ☐ Not employed in 1977
 SKIP to item 1 and begin regular interview

R8. Date of 1977 interview or 04/15/77 if noninterview in 1977

(017)

Month Day Year

Notes

1. What were you doing most of **LAST WEEK** – working, keeping house or something else?

- (018) 1 ☐ WK – Working – *SKIP* to 2b
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 5
7 ☐ OT – Other – *Specify* ↓

ASK
2a

_____ – ASK 2a

2a. Did you do any work at all **LAST WEEK**, not counting work around the house?

(NOTE: If farm, ask about unpaid work.)

- (019) 1 ☐ Yes – ASK 2b
2 ☐ No – *SKIP* to 3a

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

(020) _____ Hours – *SKIP* to 6a

☐ “J” in 1 – *SKIP* to 3b

3a. Did you have a job or business from which you were temporarily absent or on layoff **LAST WEEK**?

- (021) 1 ☐ Yes – ASK 3b
2 ☐ No – *SKIP* to 4a

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

- (022) 1 ☐ On layoff – ASK 3c
2 ☐ New job to begin within 30 days – *SKIP* to 4b
3 ☐ Other – *Specify* ↓

_____ *SKIP* to 6a

c. When did this layoff begin?

(023)

Month	Day	Year

SKIP to 4b

☐ “LK” in 1 – *SKIP* to 4b

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

- (024) 1 ☐ Yes – ASK 4b
2 ☐ No – *SKIP* to 5

4b. Is there any reason why you could not take a job **LAST WEEK**?

- (025) 1 ☐ No – Go to 5
 ↓ Yes – Why?
2 ☐ Already had a job
3 ☐ Temporary illness
4 ☐ Going to school
5 ☐ Child care problems
6 ☐ Husband would not permit
7 ☐ Other family or personal reasons
8 ☐ Did not want to work
9 ☐ Other – *Specify* _____

☐ “On layoff” in 3b – *SKIP* to 6a

5. Between (date in R8) and **LAST WEEK**, were you ever employed at a full-time or part-time job?

- (026) 1 ☐ Yes – ASK 6a
2 ☐ No – *SKIP* to Check Item H

6a. For whom did you (last) work? (Name of company, business, organization, or other employer)

(027)

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b. What kind of business or industry is this?
(For example: TV and radio manufacturer, retail shoe store, State Labor Department, farm)

(028)

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

d. What were your most important activities or duties?
(For example: typed, kept account books, filed, sold real estate, operated business machine, cleaned buildings)

e. Were you –

- (029) 1 ☐ P – An employee of a **PRIVATE** company, business, or individual for wages, salary, or commissions?
2 ☐ G – A **GOVERNMENT** employee (Federal, State, county, or local)
3 ☐ Federal 4 ☐ State 5 ☐ Other
(029) 6 ☐ O – Self-employed in your **OWN** business, professional practice, or farm?
 Is this business incorporated?
7 ☐ Yes 8 ☐ No (or farm)
(029) 9 ☐ WP – Working **WITHOUT PAY** in family business or farm?

6f. When did you start working for (entry in 6a)?

(030)

Month	Day	Year
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g. How many hours per week do (did) you usually work at that job?

(031)

_____ Hours

7a. Which days of the week do (did) you usually work for (entry in 6a)?

(032)

0 ☐ Monday through Friday

(033)

1 ☐ Monday

(034)

2 ☐ Tuesday

(035)

3 ☐ Wednesday

(036)

4 ☐ Thursday

(037)

5 ☐ Friday

(038)

6 ☐ Saturday

(039)

7 ☐ Sunday

Mark (X) all appropriate boxes

b. Do (Did) you work the same schedule of hours on each day you work (worked)?

(040)

1 ☐ Yes – ASK 7c

2 ☐ No – SKIP to 7f

c. Do (Did) you work more than one shift?

(041)

1 ☐ Yes – SKIP to 7e

2 ☐ No – ASK 7d

7d. What hours do (did) you work?

_____ to _____

INTERVIEWER: Write a.m. or p.m., as appropriate, for each time entered. Then SKIP to Check Item A

OFFICE USE ONLY

(042)

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e. What hours do (did) you work for each shift?

(1) _____ to _____

(2) _____ to _____

(3) _____ to _____

INTERVIEWER: Write a.m. or p.m., as appropriate, for each time entered. Then SKIP to Check Item A

OFFICE USE ONLY

(043)

(1)

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(044)

(2)

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(045)

(3)

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f. Do (Did) you work more than one shift on any of the days you work (worked)?

(046)

1 ☐ Yes – Complete each appropriate column in 7g

2 ☐ No – Complete only the first column in 7g

Notes

7g. What hours do (did) you work on (ask for each day reported in 7a)?

Day	First shift	Second shift	Third shift
Monday	(1) _____ to _____	(2) _____ to _____	(3) _____ to _____
Tuesday	(4) _____ to _____	(5) _____ to _____	(6) _____ to _____
Wednesday	(7) _____ to _____	(8) _____ to _____	(9) _____ to _____
Thursday	(10) _____ to _____	(11) _____ to _____	(12) _____ to _____
Friday	(13) _____ to _____	(14) _____ to _____	(15) _____ to _____
Saturday	(16) _____ to _____	(17) _____ to _____	(18) _____ to _____
Sunday	(19) _____ to _____	(20) _____ to _____	(21) _____ to _____

**OFFICE
USE
ONLY**

Monday	(1) (047)	(2) (048)	(3) (049)
Tuesday	(4) (050)	(5) (051)	(6) (052)
Wednesday	(7) (053)	(8) (054)	(9) (055)
Thursday	(10) (056)	(11) (057)	(12) (058)
Friday	(13) (059)	(14) (060)	(15) (061)
Saturday	(16) (062)	(17) (063)	(18) (064)
Sunday	(19) (065)	(20) (066)	(21) (067)

CHECK ITEM A

Refer to 6e

- (068) 1 ☐ "P" or "G" in 6e – ASK 7h
 2 ☐ "O" or "WP" in 6e – SKIP to Check Item B

7h. Were these hours set by your employer?

- (069) 1 ☐ Yes – SKIP to 7j
 2 ☐ No – ASK 7i

i. Who set these hours?

- (070) 1 ☐ Respondent – SKIP to 8
 2 ☐ Employer and respondent jointly
 3 ☐ Other – Specify _____

j. Would you prefer (Would you have preferred) to work different hours?

- (071) 1 ☐ Yes
 2 ☐ No

k. Could you change your hours on this job if you wanted to?

- (072) 1 ☐ Yes
 2 ☐ No

8. Altogether, how much do (did) you usually earn at this job before deductions?

(073) \$ _____ per hour
 (Dollars) (Cents)

OR

(074) \$ _____ per
 (Dollars only)

- (075) 2 ☐ Day
 3 ☐ Week
 4 ☐ Biweekly
 5 ☐ Month
 6 ☐ Year
 7 ☐ Other – Specify _____

CHECK ITEM B

Refer to 1, 2a, 3b, and 4a

- (076) 1 ☐ Labor Force Group A ("WK" in 1, or "Yes" in 2a or "Other" in 3b) – ASK 9a
 2 ☐ Labor Force Group B, ("LK" in 1, or "Layoff" or "New Job" in 3b, or "Yes" in 4a)
 3 ☐ Labor Force Group C (All others)
- } SKIP to Check Item C

9a. How do you feel about the job you have now?
Do you (read each answer category) -

- (077) 1 ☐ Like it very much?
2 ☐ Like it fairly well?
3 ☐ Dislike it somewhat?
4 ☐ Dislike it very much?

b. What are the things you like most about your job?

- (078)

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(079)

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(080)

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c. What are the things you don't like about your job?

- (081)

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(082)

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(083)

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CHECK ITEM C Refer to 5

- (084) 1 ☐ "Yes" in 5 - ASK 10a
2 ☐ All others - SKIP to Check Item D-1

10a. When did you stop working for (entry in 6a)?

- (085)

Month	Day	Year
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b. Why did you leave (entry in 6a)?

Involuntary reason

- (086) 1 ☐ Layoff, plant closed,
end of temporary job
2 ☐ Discharge
3 ☐ Compulsory retirement

Voluntary reason

- (086) 4 ☐ Found better job
5 ☐ Didn't like work, hours,
working conditions
6 ☐ Dissatisfied with wages
7 ☐ Interpersonal relations
8 ☐ Health; disability
9 ☐ Family or personal reasons
10 ☐ Didn't like location,
community
11 ☐ Return to school
12 ☐ Voluntary retirement
13 ☐ Other - Explain

CHECK ITEM D-1 Refer to R7 on Information Sheet

- (087) 1 ☐ Employer name or "Self-employed"
entered in R7 - Go to Check Item D-2
2 ☐ "Not employed in 1977" (box 1
in R7 marked) - SKIP to 12a

CHECK ITEM D-2 Refer to R7 and 6a

- (088) 1 ☐ Employer name in R7 is the same as
employer in 6a - SKIP to 12a
2 ☐ Employer name in R7 is different
from the employer in 6a - ASK 11a

11a. On (date in R8) you were working for (employer
in R7). Why did you leave that job?

- (089) 0 ☐ Did not leave job - SKIP to 12a

Involuntary reason

- (089) 1 ☐ Layoff, plant closed,
end of temporary job
2 ☐ Discharge
3 ☐ Compulsory retirement

Voluntary reason

- (089) 4 ☐ Found better job
5 ☐ Didn't like work, hours,
working conditions
6 ☐ Dissatisfied with wages
7 ☐ Interpersonal relations
8 ☐ Health; disability
9 ☐ Family or personal
reasons
10 ☐ Didn't like location,
community
11 ☐ Return to school
12 ☐ Voluntary retirement
13 ☐ Other - Explain

ASK
11b

b. When did you stop working for (employer in R7)?

- (090)

Month	Day	Year
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CHECK ITEM E

Refer to 10a

- (091) 1 ☐ Date in 10a is more than 12 months ago – Mark "None" in 12a and SKIP to 12b
- 2 ☐ 10a is blank
- 3 ☐ All others
- } ASK 12a

12a. In the last 12 months, how many different weeks did you work altogether? Count any weeks in which you did any work at all and weeks in which you were on paid vacation or paid sick leave.

- (092) _____ Weeks – Go to Check Item F
- 0 ☐ None – SKIP to 12b

CHECK ITEM F

Refer to 12a

- (093) 1 ☐ 52 weeks in 12a – SKIP to 12d
- 2 ☐ 1–51 weeks in 12a – ASK 12b

12b. You said you worked (entry in 12a) weeks in the last 12 months. How many of the remaining (52 minus entry in 12a) weeks were you looking for work or on layoff from a job?

- (094) _____ Weeks
- 0 ☐ None

CHECK ITEM G

Refer to 12a and 12b

- (095) 1 ☐ "None" in 12a AND "None" in 12b
- 2 ☐ Entry in 12a + entry in 12b = 1–51 weeks
- 3 ☐ Entry in 12a + entry in 12b = 52 weeks – SKIP to 12d
- } ASK 12c

12c. What was the main reason you were not working or looking for work during the remaining weeks in the last 12 months?

- (096) 1 ☐ Personal, family reasons
- 2 ☐ Own illness
- 3 ☐ Child care problems
- 4 ☐ Pregnancy
- 5 ☐ Layoff
- 6 ☐ Labor dispute
- 7 ☐ Did not want to work
- 8 ☐ Vacation
- 9 ☐ No suitable jobs available, would not have done any good to look
- 10 ☐ School
- 11 ☐ Other – Specify _____

d. We've just been talking about the last 12 months. Now I'd like you to think back about the 12 months before that, in other words, the time from 2 years ago to 1 year ago. During that 12-month period, did you (read each answer category) –

- (097) 1 ☐ Work most of the year, that is, 46–52 weeks?
- 2 ☐ Work more than half the year, that is, 26–45 weeks?
- 3 ☐ Work less than half the year, that is, 1–25 weeks?
- 4 ☐ Not work at all?

CHECK ITEM H

Refer to item I

- (098) 1 ☐ "Unable to work" in item I – SKIP to 13c
- 2 ☐ All others – ASK 13a

13a. Does your health or physical condition limit the AMOUNT of work you can do (other than housework)?

- (099) 1 ☐ Yes
- 2 ☐ No

b. Does your health or physical condition limit the KIND of work you can do (other than housework)?

- (100) 1 ☐ Yes
- 2 ☐ No

Notes

101 1 ☐ Yes
2 ☐ No

1 ☐ Yes – ASK 14b

2 ☐ No – SKIP to Check Item I-1

103 *

1 ☐ Husband

2 ☐ Son or daughter

3 ☐ Respondent's parent(s)

4 ☐ Husband's parent(s)

5 ☐ Sister or brother

6 ☐ Other relative – *Specify* _____

104

1 ☐ Respondent married,
spouse present

2 ☐ Respondent married,
spouse absent

3 ☐ All others – *SKIP* to 16a

} ASK
15

105 1 ☐ Yes
2 ☐ No

1 ☐ Yes — ASK 16b

2 ☐ No — SKIP to 19

(107) _____ Weeks

(108) Hours per week

109

- 1 ☐ Hospital or clinic
- 2 ☐ School
- 3 ☐ Church
- 4 ☐ Political organization
- 5 ☐ Groups such as Community Chest,
United Fund, Heart Fund
- 6 ☐ Boy Scouts, Girl Scouts,
Little League, etc.
- 7 ☐ Civic or community action
- 8 ☐ Social and welfare
- 9 ☐ Other — Specify ☐

110 1 ☐ Yes – ASK 18b
2 ☐ No – SKIP to 18c

111

112

- ☐ Like them very much?
- ☐ Like them fairly well?
- ☐ Dislike them somewhat?
- ☐ Dislike them very much?

113

- 1 ☐ Like it very much?
- 2 ☐ Like it somewhat?
- 3 ☐ Dislike it somewhat?
- 4 ☐ Dislike it very much?

(115) No. family members

116 No. household members

20. Now I have a few questions about the education and work experience of the other members of your family living here.										
Refer to Household Record Card. List below all household members who are related to respondent. Do not list respondent. Enter in column 20a the line number from the record card.			AGE How old was ... on APRIL 1, 1979?	Persons 6-24 years old		How many weeks did ... work full time or part time in the last 12 months (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?	Persons 14 years old and older	
				Was ... enrolled in school at any time in the last 12 months?	Circle 1 - Yes 2 - No				If the person worked at all in the last 12 months, ask 20g and 20h.	If more than one, record the longest
Line number	NAME Transcribe names from record card column 4.	RELATIONSHIP TO RESPONDENT Transcribe from record card column 5.	20d.	20e.	20f.	20g.	20h.			
			(117)	(118) 1 2	(120)	(121)	(122)			
			(123)	(124) 1 2	(126)	(127)	(128)			
			(129)	(130) 1 2	(132)	(133)	(134)			
			(135)	(136) 1 2	(138)	(139)	(140)			
			(141)	(142) 1 2	(144)	(145)	(146)			
			(147)	(148) 1 2	(150)	(151)	(152)			
			(153)	(154) 1 2	(156)	(157)	(158)			
			(159)	(160) 1 2	(162)	(163)	(164)			
			(165)	(166) 1 2	(168)	(169)	(170)			
			(171)	(172) 1 2	(174)	(175)	(176)			
			(177)	(178) 1 2	(180)	(181)	(182)			
			(183)	(184) 1 2	(186)	(187)	(188)			
			(189)	(190) 1 2	(192)	(193)	(194)			
			(195)	(196) 1 2	(198)	(199)	(200)			

21a. How many persons, not counting yourself (and your husband), are dependent upon you (and your husband) for at least one-half of their support?

(201) _____ Number

0 ☐ None – SKIP to Check Item J-1

b. How many of these persons are attending college?

(202) _____ Number

0 ☐ None

CHECK ITEM J-1 Refer to R1 on Information Sheet

(203) 1 ☐ Respondent is married, spouse present – GO to Check Item J-2

2 ☐ All others – SKIP to 23

CHECK ITEM J-2 Refer to item 20f, page 9

(204) 1 ☐ Husband worked 52 weeks in last 12 months – SKIP to 23

2 ☐ All others – ASK 22a

22a. You said your husband worked (entry for husband in item 20f) weeks in the last 12 months. How many of the remaining (52 minus entry in item 20f) weeks was he looking for work or on layoff from a job?

(205) _____ Weeks – ASK 22b

0 ☐ None – SKIP to 23

b. As a result of your husband's not working, did you start working or looking for work?

(206) 1 ☐ Yes

2 ☐ No

c. During the time he was not working, did your husband take over more of the housekeeping activities?

(207) 1 ☐ Yes

2 ☐ No

☐ No other family member 14 years or older listed in 20b – SKIP to 23

d. As a result of your husband's not working, did any other family member start working or looking for work?

(208) 1 ☐ Yes

2 ☐ No

23. Now I would like to ask a few questions about your income in the last 12 months.

a. How much did you receive from wages, salary, commissions, or tips from all jobs, before deductions for taxes or anything else?

(209) \$ _____ . 00

0 ☐ None

b. During the last 12 months, did you receive any income from working on your own or in your own business, professional practice, partnership, or farm?

(210) 0 ☐ No – SKIP to 23c

1 ☐ Yes – How much? (Obtain net income)

\$ _____ less \$ _____ =
Gross income Expenses

(211) \$ _____ . 00
Net income

c. During the past 12 months, did you receive any unemployment compensation?

(212) 0 ☐ No – SKIP to 23d

1 ☐ Yes

(1) How many weeks?

(213) _____ Weeks

(2) How much did you receive per week on the average?

(214) \$ _____ . 00

d. During the past 12 months did you receive any alimony?

(215) 0 ☐ No – SKIP to 23e

1 ☐ Yes – How much?

(216) \$ _____ . 00

e. During the past 12 months did you receive any child support?

(217) 0 ☐ No – SKIP to Check Item K

1 ☐ Yes – How much?

(218) \$ _____ . 00

CHECK ITEM K

Refer to R1 on Information Sheet

- (219) 1 ☐ Respondent is married, spouse present – ASK 24
2 ☐ All others – SKIP to 25a

24. Now I would like to ask a few questions about your husband's income in the last 12 months.

a. How much did your husband receive from wages, salary, commissions, or tips from all jobs, before deductions for taxes or anything else?

(220) \$ _____ . 00
0 ☐ None

b. During the last 12 months, did your husband receive any income from working on his own or in his own business, professional practice, partnership or farm?

- (221) 0 ☐ No – SKIP to 24c
1 ☐ Yes – How much? (Obtain net income)

\$ _____ less \$ _____ =
Gross income Expenses

(222) \$ _____ . 00
Net income

c. During the past 12 months, did your husband receive any unemployment compensation?

- (223) 0 ☐ No – SKIP to 25a
1 ☐ Yes ✓

(1) How many weeks?

(224) _____ Weeks

(2) How much did he receive per week on the average?

(225) \$ _____ . 00

25a. In the past 12 months, did you (or your husband) buy any food stamps under the Government's Food Stamp Plan?

- (226) 1 ☐ Yes – ASK 25b
2 ☐ No – SKIP to 26a

b. In how many months did you (or your husband) buy stamps?

(227) _____ Months

c. In the most recent month food stamps were bought, what was the total face value of the food stamps purchased?

(228) \$ _____ . 00

d. How much was paid for these food stamps?

(229) \$ _____ . 00

26a. In the past 12 months, did you (or your husband) receive any other public welfare or public assistance?

- (230) 1 ☐ Yes – ASK 26b
2 ☐ No – SKIP to 27

b. How many months?

(231) _____ Months

c. How much did you receive per month on the average?

(232) \$ _____ . 00

27. During the last 12 months, did you (or your husband) receive any income from Social Security retirement or Railroad Retirement benefits from the U.S. Government, or any pension provided by a private employer, union, Federal, State, or local government?

- (233) 0 ☐ No – SKIP to 28a
1 ☐ Yes – How much?

(234) \$ _____ . 00

28a. Did you (or your husband) receive any other income such as rent, interest, dividends, disability income, etc.?

- (235) 1 ☐ Yes – ASK 28b
2 ☐ No – SKIP to Check Item L

b. How much did you receive during the past 12 months?

(236) \$ _____ . 00

CHECK ITEM L

Refer to 20, page 9

- (237) 1 ☐ Item 20 is blank – SKIP to Check Item M
2 ☐ Only husband and/or children under 14 listed in 20 – SKIP to Check Item M
3 ☐ Other family members 14+ listed in 20 – ASK 29

29. During the last 12 months, what was the total income of all family members living here, other than yourself (and your husband)?

(238) \$ _____ . 00
0 ☐ None

30. Which of these four statements best describes your (family's) ability to get along on your (its) income?

Read each answer category

- (239) 1 ☐ I (We) always have money left over
2 ☐ I (We) have enough with a little extra sometimes
3 ☐ I (We) have just enough, no more
4 ☐ I (We) can't make ends meet

CHECK ITEM M

Refer to Check Item B, page 5

- (240) 1 ☐ Respondent in Labor Force Group A ("1" in Check Item B) } SKIP to 32
- 2 ☐ Respondent in Labor Force Group B ("2" in Check Item B) }
- 3 ☐ Respondent in Labor Force Group C ("3" in Check Item B) – ASK 31

31. Do you expect to take a job for pay at some time in the future?

- (241) 1 ☐ Yes – ASK 32
- 2 ☐ No – SKIP to Check Item P

32. At what age do you expect to stop working at a regular job?

- (242) _____ Age
- 1 ☐ Don't know
- 2 ☐ Already stopped
- 3 ☐ Don't plan to stop
- 4 ☐ At same time as husband

33. When you reach retirement age will you be eligible on the basis of your own work experience to receive Social Security or Railroad Retirement benefits?

- (243) 1 ☐ Yes
- 2 ☐ No
- 3 ☐ Already receiving benefits
- 4 ☐ Don't know

CHECK ITEM N

Refer to Check Item B, page 5

- (244) 1 ☐ Respondent is in Labor Force Group A ("1" in Check Item B) – GO to Check Item O
- 2 ☐ All others – SKIP to Check Item P

CHECK ITEM O

Refer to 6e

- (245) 1 ☐ "P" or "G" in 6e – ASK 34a
- 2 ☐ All others – SKIP to Check Item P

34a. Does your employer or union have a pension plan other than Social Security or Railroad Retirement benefits?

- (246) 1 ☐ Yes – ASK 34b
- 2 ☐ No } SKIP to Check Item P
- 3 ☐ Don't know }

34b. If you stay on this job, at what age will you be eligible to receive FULL benefits from this plan?

- (247) _____ Age } SKIP to 34d
- 1 ☐ Don't know }
- 2 ☐ Already eligible – ASK 34c
- 3 ☐ Never – SKIP to 34j

c. At what age did you become eligible?

- (248) _____ SKIP to Check Item P

d. Is there any earlier age at which you would be eligible to receive REDUCED benefits from this plan?

- (249) 1 ☐ Yes – ASK 34e
- 2 ☐ No } SKIP to 34g
- 3 ☐ Don't know }
- 4 ☐ Already eligible – SKIP to 34f

e. At what age?

- (250) _____ Age – SKIP to 34g

f. At what age did you become eligible?

- (251) _____ Age – SKIP to Check Item P

g. If you left this job today, could you later start drawing a benefit?

- (252) 1 ☐ Yes – ASK 34h
- 2 ☐ No } SKIP to 34i
- 3 ☐ Don't know }

h. At what age could you draw this benefit?

- (253) _____ Age
- 1 ☐ Don't know

i. Do you expect to work for this employer until you are eligible for a pension?

- (254) 1 ☐ Yes } SKIP to Check Item P
- 2 ☐ No }
- 3 ☐ Don't know }

j. Why will you never be eligible for FULL benefits?

- (255) 1 ☐ Won't have worked long enough
- 2 ☐ Will get lump sum
- 3 ☐ Other reasons related to company rules
- 4 ☐ Other – Specify _____
- o ☐ Don't know

<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">CHECK ITEM P Refer to R1 on Information Sheet</div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(256)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Respondent is married, spouse present</div> <div style="margin-right: 10px;">2 <input type="checkbox"/> Respondent is married, spouse absent</div> <div style="margin-right: 10px;">3 <input type="checkbox"/> All others – SKIP to Check Item Q</div> <div style="font-size: 3em; margin-right: 10px;">}</div> <div style="text-align: center;">ASK 35a</div> </div> </div> <div> 35a. At what age does your husband expect to stop working at a regular job? <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(257)</div> <div style="margin-right: 10px;">_____ Age – SKIP to 35d</div> </div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">1 <input type="checkbox"/> Does not plan to retire</div> <div style="margin-right: 10px;">2 <input type="checkbox"/> Don't know</div> <div style="margin-right: 10px;">3 <input type="checkbox"/> Already retired – ASK 35b</div> <div style="font-size: 3em; margin-right: 10px;">}</div> <div style="text-align: center;">SKIP to 35d</div> </div> </div> <div> b. Is he eligible for Social Security or Railroad Retirement benefits? <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(258)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Yes</div> <div style="margin-right: 10px;">2 <input type="checkbox"/> No</div> <div style="margin-right: 10px;">3 <input type="checkbox"/> Don't know</div> </div> </div> <div> c. Is he eligible for any other retirement benefits, such as personal plans, private employee, government employee or military retirement plans? <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(259)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Yes – SKIP to 35f</div> <div style="margin-right: 10px;">2 <input type="checkbox"/> No</div> <div style="margin-right: 10px;">3 <input type="checkbox"/> Don't know</div> <div style="font-size: 3em; margin-right: 10px;">}</div> <div style="text-align: center;">SKIP to Check Item Q</div> </div> </div> <div> d. When your husband reaches retirement age will he be eligible for Social Security or Railroad Retirement benefits? <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(260)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Yes</div> <div style="margin-right: 10px;">2 <input type="checkbox"/> No</div> <div style="margin-right: 10px;">3 <input type="checkbox"/> Already receiving benefits</div> <div style="margin-right: 10px;">4 <input type="checkbox"/> Don't know</div> </div> </div> <div> e. Will your husband be eligible for any other retirement benefits, such as personal plans, private employee, government employee or military retirement plans? <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(261)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Yes – ASK 35f</div> <div style="margin-right: 10px;">2 <input type="checkbox"/> No – SKIP to Check Item Q</div> <div style="margin-right: 10px;">3 <input type="checkbox"/> Already receiving benefits – ASK 35f</div> <div style="margin-right: 10px;">4 <input type="checkbox"/> Don't know – SKIP to Check Item Q</div> </div> </div> <div> f. Which ones? Mark (X) all that apply <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(262)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Personal plan</div> </div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">2 <input type="checkbox"/> Private employee</div> </div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">3 <input type="checkbox"/> Government employee (civilian)</div> </div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">4 <input type="checkbox"/> Military</div> </div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">5 <input type="checkbox"/> Other – Specify</div> <div style="border-bottom: 1px solid black; width: 150px; margin-left: 10px;"></div> </div> </div> </div> </div> </div> </div></div></div></div></div></div></div></div>	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">CHECK ITEM Q Refer to 32</div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(263)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Box 3 (Don't plan to stop) marked in 32 – SKIP to 37a</div> <div style="margin-right: 10px;">2 <input type="checkbox"/> All others – GO to Check Item R</div> </div> </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">CHECK ITEM R Refer to 35a</div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(264)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Box 1 (Does not plan to retire) marked in 35a – SKIP to 37a</div> <div style="margin-right: 10px;">2 <input type="checkbox"/> All others – ASK 36</div> </div> </div> <div> 36. In the order of their amounts, what would you say will be the three largest sources of income for you (and your husband) during retirement? <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(265)</div> <div style="border: 1px solid black; width: 100px; height: 20px; margin-right: 10px;"></div> <div style="margin-right: 10px;">(1)</div> </div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(266)</div> <div style="border: 1px solid black; width: 100px; height: 20px; margin-right: 10px;"></div> <div style="margin-right: 10px;">(2)</div> </div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(267)</div> <div style="border: 1px solid black; width: 100px; height: 20px; margin-right: 10px;"></div> <div style="margin-right: 10px;">(3)</div> </div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(268)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Don't know</div> </div> </div> </div> <div> 37a. Since (date in R8), have you taken any on-the-job training courses? <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(269)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Yes – ASK 37b</div> <div style="margin-right: 10px;">2 <input type="checkbox"/> No – SKIP to 38a</div> </div> </div> <div> b. How many weeks have you spent in on-the-job training courses? <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(270)</div> <div style="margin-right: 10px;">_____ Weeks</div> </div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">o <input type="checkbox"/> Less than 1 week</div> </div> </div> <div> c. How many hours per week have you spent in this training? <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(271)</div> <div style="margin-right: 10px;">_____ Hours</div> </div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">o <input type="checkbox"/> Less than 1 hour</div> </div> </div> <div> d. Did you complete this training? <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(272)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Yes</div> <div style="margin-right: 10px;">2 <input type="checkbox"/> No – Dropped out</div> <div style="margin-right: 10px;">3 <input type="checkbox"/> No – Still attending</div> </div> </div> </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">38a. Have you attended college since (date in R8)?</div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(273)</div> <div style="margin-right: 10px;">1 <input type="checkbox"/> Yes – ASK 38b</div> <div style="margin-right: 10px;">2 <input type="checkbox"/> No – SKIP to 39a</div> </div> </div> <div> b. How many weeks did you attend college? <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">(274)</div> <div style="margin-right: 10px;">_____ Weeks</div> </div> <div style="margin-bottom: 10px;"> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">o <input type="checkbox"/> Less than 1 week</div> </div> </div> </div> </div></div></div></div></div></div></div></div></div>
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38c. How many hours per week did you usually spend on college education?

(275) _____ Hours per week

d. Have you received a college degree since (date in R8)?

- (276) 1 ☐ Yes – ASK 38e
2 ☐ No – SKIP to 39a

e. What degree was it?

- (277) 1 ☐ Associate (2- or 3-year course)
2 ☐ Bachelor's (B.A., B.S., A.B., etc.)
3 ☐ Master's (M.A., M.S., M.B.A., etc.)
4 ☐ Doctorate (Ph.D., M.D., LLB, J.D., etc.)
5 ☐ Other – Specify _____

39a. Since (date in R8) have you taken any other training or educational programs other than on-the-job or college courses?

- (278) 1 ☐ Yes – ASK 39b
2 ☐ No – SKIP to 40

b. What kind of training course or educational program did you take?

- (279) 1 ☐ Professional, technical
2 ☐ Managerial
3 ☐ Clerical
4 ☐ Skilled manual
5 ☐ Other – Specify _____

c. Where did you take (are you taking) this training?
(Specify below and then mark the appropriate box)

- (280) 1 ☐ Business college, technical institute
2 ☐ Company training school
3 ☐ Correspondence school
4 ☐ High school (including night school)
5 ☐ Community or junior college
6 ☐ Regular four-year college or university
7 ☐ Area vocational school
8 ☐ Nursing school, hospital or medical school or college
9 ☐ Government agency (Federal, State or local)
10 ☐ Other – Specify _____

39d. How long did you attend (have you been attending) this training?

(Record the number of weeks and mark "Still attending" box if applicable)

(281) _____ Weeks

(282) 0 ☐ Less than 1 week

(283) 1 ☐ Still attending

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

(284) _____ Hours

0 ☐ Less than 1 hour

CHECK ITEM S

Refer to Check Item B, page 5

(285) 1 ☐ Respondent is in Labor Force Group A ("I" in Check Item B) – ASK 39f

2 ☐ All others – SKIP to 39g

39f. Do you use this training on your present job?

(286) 1 ☐ Yes

2 ☐ No

g. Did you receive a certificate for this training?

(287) 1 ☐ Yes – ASK 39h

2 ☐ No – SKIP to 40

h. What kind of certificate?

(288) ☐ ☐ _____

40. Taking things altogether, would you say you're very happy, somewhat happy, somewhat unhappy, or very unhappy these days?

(289) 1 ☐ Very happy

2 ☐ Somewhat happy

3 ☐ Somewhat unhappy

4 ☐ Very unhappy

Refer to record card items 14 and 15

41. When you were last contacted, you gave us the names of . . . and . . . as persons who would always know where you could be reached even if you moved away. Is this information still correct?

☐ Yes – Verify addresses and telephone numbers of two contacts.

☐ No – Obtain information for one or two contacts as necessary. Draw a single line through old name(s) to be deleted. If one new contact, enter new information in item 16. If two new contacts, use item 16 and margin of record card.

(290)

(291)

(292)

(293)

(294)

Notes