

CENSUS OF POPULATION AND HOUSING - 1961

Stage A

STATE OF ISRAEL
PRIME MINISTER'S OFFICE
CENTRAL BUREAU OF STATISTICS
FAMILY QUESTIONNAIRE
STAGE A

CONFIDENTIAL - for statistical purposes only

(1-6)
No. of Enumeration District

(11-13)
No. of Questionnaire

Key letter for Stage "B"

ADDRESS: Town or settlement Quarter/Housing Estate Street Entrance No.

PART A Enter into this table the details of all members of the household who lived permanently in this dwelling on the night after Shavuot, the night of the 21-22 of May; list the appropriate code for each person in the appropriate columns.

Serial No.	First list the names of all household members in order and afterwards continue to fill in the remaining details	Serial No.	SEX	MARITAL STATUS	IS HE/SHE	DATE OF BIRTH		COUNTRY OF BIRTH (according to present boundaries)	YEAR OF IMMIGRATION		Serial No.
						Year	Month		For those born abroad, note year of Immigration	For those born in Israel, note XX	
1	<p>DON'T FORGET TO LIST:</p> <p>○ Babies, old persons</p> <p>○ Members of the family serving in the army</p> <p>○ Members of this household staying abroad for less than a year</p> <p>○ Lodgers who take their meals with the family</p> <p>RELATIONSHIP TO HEAD OF FAMILY</p>	1	1 Male	1 Married	1 Jewish?	1 Up to the 31st May	X Israel (Eretz Israel)				1
2		2 Female	2 Divorced	2 Moslem?	2 From the 1st June and afterwards	1 Turkey, Iran (Persia)				2	
3			3 Widowed	3 Christian?		2 Iraq				3	
4			4 Never Married	4 Druse?		3 Yemen, Aden				4	
5				5 Other (specify which e.g. "Karaites", "Samaritan", "Behai")		4 Morocco, Algeria, Tunis				5	
6						5 Egypt, Libya				6	
7						6 USSR, Poland				7	
8						7 Germany, Austria				8	
9						8 Czechoslovakia, Hungary				9	
10						9 Rumania				10	
Total permanent members											(14)
										Total No. Abroad	(15)

If there are more than 10 persons in the household, fill out an additional questionnaire and mark an x here . Put the same questionnaire number on the additional questionnaire. Instead of the address write "continuation" and correct the serial numbers.

NOTE: If the key letter is X copy the details of all the permanent members of the household into a Stage "B" questionnaire, and leave it with the family for self-enumeration.

(x) Examples of Christian denominations: Greek, Catholic, Greek Orthodox, Roman Catholic etc.

(Pocket for Register Cards)

PART B Enter into this table those who stayed overnight in this dwelling on the night after Shavuot, the night of the 21-22 of May, and who do not live here permanently.

Serial No.	SURNAME	FIRST NAME	If he is a resident of Israel, note x here	If he is not a resident of Israel, note x here
1				
2				
3				
4				
5				
Total				

Residents of Israel Not Residents of Israel

ENUMERATOR: ACT IN THIS ORDER:-

1. ASK FOR THE EXPLANATORY LETTER AND THE REGISTER CARDS.
2. START A NEW LINE IN THE ENUMERATOR'S LISTING BOOK.
3. FILL IN THE QUESTIONNAIRE.
4. CORRECT THE REGISTER CARDS; FOR PERSONS WITHOUT CARDS FILL IN REGISTER FORMS.
5. FINISH FILLING IN THE LINE IN THE ENUMERATOR'S LISTING BOOK.

CENSUS OF POPULATION AND HOUSING - 1961
Family Questionnaire
STAGE B

No. of Enumeration District
(1 - 6)

No. of Questionnaire
(11 - 13)

ADDRESS: Town or Settlement Quarter/Housing Estate Street No./Name of House Entrance No.
NAME OF HEAD OF FAMILY: Surname First Name No. OF PERMANENT MEMBERS OF THE HOUSEHOLD (family)

DEAR RESIDENT,

I would like to thank you for the details you have already given the enumerator. In order to complete the census we are interested in receiving some additional details from you, as requested in this questionnaire. We would ask you, therefore, to assist us also in this by filling in the questionnaire.

Please look over the questionnaire and the attached example before you start to fill in the questionnaire. Please note that the questions about your family's dwelling unit are on the front page of the questionnaire, and that the questions relating to you and to your family are given in the pages inside - two pages for each person.

Please complete the questionnaire with all the details. Within a few days, an enumerator of the Central Bureau of Statistics will visit you in order to receive this questionnaire and he will be glad, on this occasion, to help you fill in the details which you find difficult to fill in.

The Statistical Ordinance which obligates residents to answer the census questions, assures them that the answers received from them will be kept completely confidential by the Central Bureau of Statistics.

Thanking you in advance for your co-operation
Yours sincerely,

Prof. R. Babbi
The Government Statistician

Instruction to the resident for filling the questionnaire

- PUT A ☒ IN THE SQUARE ☐ NEXT TO THE CORRECT ANSWER, OR WRITE THE ANSWER IN THE APPROPRIATE PLACE ON THE DOTTED LINE.
- THERE ARE ADDITIONAL INSTRUCTIONS NEXT TO THE QUESTIONS. PLEASE ACT ACCORDING TO THESE INSTRUCTIONS.
- LOOK OVER THE ATTACHED EXAMPLE OF A COMPLETED QUESTIONNAIRE BEFORE YOU BEGIN TO FILL IN THE QUESTIONNAIRE.
- THE COLUMN "FOR OFFICE USE ONLY" IS INTENDED FOR THE USE OF OUR CLERKS; PLEASE DO NOT WRITE ANYTHING IN IT.

HOUSING QUESTIONS - THE FOLLOWING QUESTIONS RELATE TO THE FLAT OR THE ROOM IN WHICH THE FAMILY LIVES.

For office use only	H ₁	For office use only (77)	H ₇
<input type="text"/>	H ₁ IN HOW MANY ROOMS DOES THE FAMILY LIVE? (include also half-room and hall, as a room; do not include kitchen, lavatory, bath room, passage, small corridor and rooms used only for business) Specify the number of rooms	1 <input type="checkbox"/> Central heating	
(71)	H ₂ IS THE FLAT OR ROOM RENTED OR OWNED BY THE FAMILY? X <input type="checkbox"/> Owned by the family 1 <input type="checkbox"/> Rented flat or room - main tenancy 2 <input type="checkbox"/> Rented flat or room - sub-tenancy	2 <input type="checkbox"/> Sun boiler	
(72 - 73)	H ₃ IN WHAT YEAR DID THE HEAD OF FAMILY TAKE UP RESIDENCE IN THIS FLAT? XX <input type="checkbox"/> From birth If not from birth, specify the year of entrance	3 <input type="checkbox"/> Electric boiler	
(74)	H ₄ IS THERE A LAVATORY AND IS IT INSIDE THE BUILDING? 1 <input type="checkbox"/> There is a lavatory - inside the building 2 <input type="checkbox"/> There is a lavatory - outside the building X <input type="checkbox"/> There is no lavatory	4 <input type="checkbox"/> Kerosine, wood, etc.	
(75)	H ₅ IS THE LAVATORY A FLUSH TOILET OR NOT? (with running water) 1 <input type="checkbox"/> Flush toilet 2 <input type="checkbox"/> Not a flush toilet X <input type="checkbox"/> No lavatory	5 <input type="checkbox"/> Other methods of heating	
(76)	H ₆ IS THERE A BATH OR SHOWER AND IS IT FOR USE ONLY BY THIS FAMILY? 1 <input type="checkbox"/> There is a bath or shower for use only by this family 2 <input type="checkbox"/> There is a bath or shower shared with others X <input type="checkbox"/> There is no bath or shower	6 <input type="checkbox"/> No methods of heating water	
		X <input type="checkbox"/> There is no bath or shower	
		(78)	H ₈ IS THERE A KITCHEN AND IS IT FOR USE ONLY BY THIS FAMILY? 1 <input type="checkbox"/> There is a kitchen - for use only by this family 2 <input type="checkbox"/> There is a kitchen - shared with others. 3 <input type="checkbox"/> There is a cooking corner or other cooking arrangements X <input type="checkbox"/> There are no cooking facilities
		(79)	H ₉ IS THERE A REFRIGERATOR OR AN ICE BOX FOR USE BY THIS FAMILY? 1 <input type="checkbox"/> Electric refrigerator (compressor or absorption) 2 <input type="checkbox"/> Ice-box X <input type="checkbox"/> No refrigerator or ice box

THE ENUMERATOR IS TO COPY HERE THE APPROPRIATE LINE FROM THE STAGE A FAMILY QUESTIONNAIRE										(14)		(15)			
										Relation to Head of Family					
SURNAME	FIRST NAME	RELATIONSHIP TO HEAD OF FAMILY	SEX	MARITAL STATUS	IS HE/SHE: 1 Jewish? 2 Moslem? 3 Christian? (state which denomination) 4 Druze? 5 Other (specify which, e.g. "Karaites" "Samaritan" "Bahai")	YEAR OF BIRTH		COUNTRY OF BIRTH	YEAR OF IMMIGRATION						
			1 Male 2 Female	1. Married 2. Divorced 3. Widowed 4. Never married		Year	Month								
			(24)	(23)	(22)	(20-21)	(19)	(18)		(16-17)					
THE QUESTIONS IN THIS AND THE FOLLOWING COLUMNS REFER TO THE PERSON WHOSE NAME APPEARS ABOVE															
For office use only		1. PLACE OF BIRTH				For office use only (40)		THE QUESTIONS FROM HERE ONWARDS APPLY TO EVERY PERSON AGED 14 AND OVER							
(25-26)		<input type="checkbox"/> Abroad. State where Name of country according to present boundaries Name of town or settlement <input type="checkbox"/> In Israel (or Eretz Israel) state IN WHICH COUNTRY HIS FATHER WAS BORN The name of the country in which his father was born, according to present boundaries				<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2		5. HAS HE ATTENDED OR IS HE ATTENDING SCHOOL? <input type="checkbox"/> Never attended <input type="checkbox"/> Is at present attending school <input type="checkbox"/> Has attended school in the past ("Heder", "Yeshiva", University, evening school should be included. Vocational training courses, language and music lessons, correspondence courses, or home study should not be included)							
(27-28)		2. IN WHICH YEAR DID HE MOVE INTO THE TOWN OR SETTLEMENT IN WHICH HE NOW LIVES?				XX <input type="checkbox"/> From birth <input type="checkbox"/> If not from birth, state year he moved in		(41-42)		6. NUMBER OF YEARS AT SCHOOL (including the present school year. Excluding kindergarten) <input type="checkbox"/> Never attended school State number of years					
(29-30)		3. WHAT WAS HIS PERMANENT PLACE OF RESIDENCE IN MAY 1956 i.e. 5 YEARS AGO?				<input type="checkbox"/> Present place of residence <input type="checkbox"/> Abroad <input type="checkbox"/> Had not yet been born Elsewhere in Israel. Specify Name of town or settlement		(43)		7. WHAT IS THE LAST SCHOOL HE ATTENDED OR IS ATTENDING? <input type="checkbox"/> Never attended school <input type="checkbox"/> Elementary school <input type="checkbox"/> Heder <input type="checkbox"/> Yeshiva <input type="checkbox"/> Vocational school (for example, school for mechanics or sewing, secretarial course, etc.) <input type="checkbox"/> Agricultural school <input type="checkbox"/> Secondary school (including external matriculation) <input type="checkbox"/> Teachers' College (incl. Kindergarten teachers) <input type="checkbox"/> Higher education (e.g. University, Technion) <input type="checkbox"/> Other, specify e.g. Nursing School, etc.					
(31-32)		4. WHICH LANGUAGE OR LANGUAGES DOES HE SPEAK DAILY? (Note them in order of use)				0 1 2 3 4 5 6 7 8 X		(44)		8. CAN HE READ AND WRITE? (Can he at present write at least a simple letter?) <input type="checkbox"/> Not at all <input type="checkbox"/> Only in Hebrew <input type="checkbox"/> Only in another language <input type="checkbox"/> In Hebrew and in another language					
(33-35)		FOR THOSE UNDER AGE OF 14, END HERE AND CONTINUE TO FILL IN THE DETAILS ON THE NEXT PERSON				(45) X 1 2		(46-47)		9. HAS HE BEEN MARRIED ONCE OR MORE THAN ONCE? <input type="checkbox"/> Never married <input type="checkbox"/> Married once <input type="checkbox"/> Married more than once					
		Observations						(48)		10. WHEN DID HE MARRY (FOR THE FIRST TIME)? <input type="checkbox"/> Never married <input type="checkbox"/> Married (for the first time) in the year					
(36)		No. Persons						(49)		11. FOR ALL MARRIED, DIVORCED OR WIDOWED WOMEN HOW MANY CHILDREN HAS SHE BORN (include all children born alive even though they have subsequently died)? Specify number (0, 1, 2, etc.)					
(37)		No. Rooms						(50)		12. HOW MANY CHILDREN HAS SHE BORN ABROAD? Specify number (0, 1, 2, etc.)					
(38)		Education of Head of Family								13. AMONG THOSE BORN ABROAD - HOW MANY DIED UNDER THE AGE OF 5? (Whether they died abroad or in Israel) Specify number (0, 1, 2, etc.)					
(39)		Immigration Group of Head of Family													

EVERYONE AGED 14 AND OVER SHOULD ALSO ANSWER THE QUESTIONS ON THE FOLLOWING PAGE

THE QUESTIONS OF THIS PAGE APPLY TO EVERY PERSON AGED 14 AND OVER

For office use only (51)	14. DID HE WORK AT ALL DURING THE LAST WEEK? (Include as work - part time work and unpaid work of member of family in a family business - including agriculture. Housewife's work in the house is not to be included as work)	For office use only (65)	19. STATUS AT WORK
X	<input type="checkbox"/> Was on regular military service the entire week	X	<input type="checkbox"/> Wage or salary earner
1	<input type="checkbox"/> Was on reserve military service the entire week	1	<input type="checkbox"/> Employs 1 - 2 workers
2	<input type="checkbox"/> Did not work at all during the last week	2	<input type="checkbox"/> Employs 3 or more workers
3	<input type="checkbox"/> Worked 1-14 hours during that week	3	<input type="checkbox"/> Self employed
4	<input type="checkbox"/> Worked 15-34 " " " "	4	<input type="checkbox"/> Member of co-operative
5	<input type="checkbox"/> Worked 35-44 " " " "	5	<input type="checkbox"/> Member of kibbutz
6	<input type="checkbox"/> Worked 45-49 " " " "	6	<input type="checkbox"/> Family member working without payment in the family business
7	<input type="checkbox"/> Worked 50 hours or more " " " "	(66)	20. IN HOW MANY WEEKS DURING THE PAST TWELVE MONTHS DID HE WORK IN ISRAEL (Include the weeks worked at all places of work; include as weeks in which he worked also weeks in which he worked part time, annual holidays, sick leave, reserve duty)
(52)	15. DID HE ACTIVELY SEEK WORK DURING THE LAST WEEK?	1	<input type="checkbox"/> 49-52 weeks (all the year)
1	<input type="checkbox"/> Yes	2	<input type="checkbox"/> 40-48 " (more than three quarters of a year but less than a year)
2	<input type="checkbox"/> No	3	<input type="checkbox"/> 27-39 " (from half a year to three quarters of a year)
(53)	16. WAS HE ABSENT FROM HIS WORK OR BUSINESS (including agricultural work) DURING THE LAST WEEK FOR REASONS OF HOLIDAY, SICKNESS, RESERVE MILITARY SERVICE OR OTHER REASONS?	4	<input type="checkbox"/> 14-26 " (from a quarter of a year to half a year)
1	<input type="checkbox"/> Yes	5	<input type="checkbox"/> 1-13 " (up to a quarter of a year)
2	<input type="checkbox"/> No	(67)	21. WHILE WORKING IN ISRAEL DURING THE LAST TWELVE MONTHS DID HE NORMALLY WORK 35 HOURS OR MORE A WEEK?
(54)	17. IN THE LAST TWELVE MONTHS - DID HE WORK IN THIS COUNTRY AT LAST ONE DAY?	1	<input type="checkbox"/> Normally worked 35 hours OR MORE a week
1	<input type="checkbox"/> Yes	2	<input type="checkbox"/> Normally worked LESS than 35 hours a week
2	<input type="checkbox"/> No - CONTINUE TO QUESTION 22	(68)	22. WHAT WAS HIS MAIN OCCUPATION IN THOSE WEEKS WHICH HE DID NOT WORK DURING THE PAST YEAR?
	IN QUESTIONS 18 and 19 FOR THOSE WHO WORKED LAST WEEK - FILL IN THE DETAILS OF HIS PRINCIPAL WORK IN THE SAME WEEK. FOR THOSE WHO DID NOT WORK DURING THE LAST WEEK FILL IN THE DETAILS OF HIS LAST WORK IN THE PAST TWELVE MONTHS.	X	<input type="checkbox"/> Worked all the year (include annual holiday, sick leave, reserve duty)
(55-56)	18. WHERE DID HE WORK DURING THE LAST WEEK? For those who did not work last week - WHERE DID HE LAST WORK? A. Specify the NAME OF THE PLACE OF WORK, ENTERPRISE, BUSINESS, INSTITUTION OR EMPLOYER. For example: The "Habeged" factory, D. Kidan's Grocery shop, Ministry of Labour, "Tel Or" farm, etc.	1	<input type="checkbox"/> Sought employment
	B. Note the NAME OF THE TOWN OR SETTLEMENT IN WHICH HE WORKED Name of town or settlement	2	<input type="checkbox"/> Housewife
(57-58)	C. Note the PRINCIPAL ACTIVITY OF THE ENTERPRISE, BUSINESS, INSTITUTION OR EMPLOYER For example: manufacturing of clothes, retail sale of groceries, Ministry of Labour, mixed farming	3	<input type="checkbox"/> Studied
(59-61)	D. Note BRANCH OR DEPARTMENT (if any) IN WHICH HE WORKED AT THIS PLACE OF EMPLOYMENT For example: weaving department, housing division, dairy branch, sale department	4	<input type="checkbox"/> Was in the army (regular service)
	E. Note in detail WHICH WORK HE DID PRINCIPALLY IN THIS PLACE OF EMPLOYMENT For example: weaver, retail grocery salesman, dairyman, nurse, grade 3 teacher, filing clerk, doctor who is division head in the Ministry of Health, etc.	5	<input type="checkbox"/> Was abroad
(62-64)		6	<input type="checkbox"/> Received a pension or unearned income
		7	<input type="checkbox"/> Other. Specify here
		(69-70)	23. WHAT WAS HIS PRINCIPAL OCCUPATION ABROAD? <input type="checkbox"/> Worked. Specify in which work he was mainly occupied For example: tailor, cloth merchant, lawyer, etc.
			<input type="checkbox"/> Housewife
			<input type="checkbox"/> Was under the age of 14
			<input type="checkbox"/> Studied (above the age of 14)
			<input type="checkbox"/> Other. Specify what he did.

CONTINUE TO FILL IN INFORMATION FOR THE REMAINING MEMBERS OF THE FAMILY