

# Übersetzung – ENGLISCH

Personenfragebogen für alle

Household question form  
Individual question form

# Living in Germany

## Erläuterung:

Auch Befragte mit ausländischer Staatsangehörigkeit werden mit dem deutschsprachigen Fragebogen befragt.

Die fremdsprachige Fragebogenfassung dient nur als Übersetzungshilfe in Fällen, in denen Verständigungsschwierigkeiten auftreten.

Zum Ausfüllen des Fragebogens bitte **nur** die deutschsprachigen Fassungen verwenden.

Non-German respondents are interviewed using the regular German version of the questionnaire.

The foreign language versions of the questionnaire are used as an additional translation aid only and should not be written on to fill in answers.

Please use **only** the German version of the questionnaire to fill in your answers.

# Living in Germany

Survey 2010  
on the social situation  
of households

## Individual question form

This questionnaire booklet is directed towards the individual persons in the household.

Your cooperation is voluntary. However, the scientific meaningfulness of this investigation depends on the cooperation of all persons in all households.

Therefore, we ask that:

- You allow our representative to carry out this interview; **or**
- You carefully fill out the questionnaire booklet yourself.

**Before handing in please enter  
in accordance with the address log:**

Household number:

--	--	--	--	--	--	--	--

First name:

*Please print*

# How is it done?

Please fill in the questionnaire booklet by

- checking the box with an X

*Example:* Sex: male .....   
female .....


- entering numbers in the larger lines  
(flush right)

*Example:* Date of Birth: .....

- writing in the text boxes provided

*Example:* Other reason .....


***Change of Job***

A 'pointing finger'  symbol means that there is a further explanation to the question.

Please answer each question in turn.  
Skip questions only when expressly told to do so in the text.

*Example:*

**Are there children in your household?**

Yes .....   


No .....  


***Skip to Question . . . !***

*If you check off "yes" for this question  
then you should go to the next question.*

*If you check off "no" for this question,  
then proceed directly to the question indicated.*

# Your current life situation

## 1. How satisfied are you today with the following areas of your life?

 Please answer by using the following scale:  
**0** means **"totally unhappy"**,  
**10** means **"totally happy"**.


How satisfied are you with ...

**totally  
unhappy**

**totally  
happy**

– your health? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1	2	3	4	5	6	7	8	9	10
– your sleep? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1	2	3	4	5	6	7	8	9	10
<i>(if employed)</i>											
– your job? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1	2	3	4	5	6	7	8	9	10
<i>(if working in household)</i>											
– your housework? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1	2	3	4	5	6	7	8	9	10
– your household income? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1	2	3	4	5	6	7	8	9	10
– your personal income? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1	2	3	4	5	6	7	8	9	10
– your dwelling? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1	2	3	4	5	6	7	8	9	10
– your free time? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1	2	3	4	5	6	7	8	9	10
– your family life? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1	2	3	4	5	6	7	8	9	10
<i>(if you have small children)</i>											
– the child care available? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1	2	3	4	5	6	7	8	9	10
– democracy as it exists in Germany? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1	2	3	4	5	6	7	8	9	10

**2. The following statements apply to different attitudes towards life and the future.  
To what degree to you personally agree with the following statements?**


 Please answer according to the following scale:  
1 means: "**disagree completely**",  
7 means: "**agree completely**".

Disagree completely Agree completely

1 2 3 4 5 6 7

How my life goes depends on me .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compared to other people, I have not achieved what I deserve .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What a person achieves in life is above all a question of fate or luck .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If a person is socially or politically active, he/she can have an effect on social conditions .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I frequently have the experience that other people have a controlling influence over my life .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One has to work hard in order to succeed .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If I run up against difficulties in life, I often doubt my own abilities .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The opportunities that I have in life are determined by the social conditions .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inborn abilities are more important than any efforts one can make .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have little control over the things that happen in my life .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


**3. What does a typical weekday look like for you?  
How many hours per day do you spend on the following activities?**

 Please give only whole hours.  
Use zero if the activity does not apply!

Number of hours

Job, apprenticeship, second job (including travel time to and from work) .....	<input type="text"/>
Errands (shopping, trips to government agencies, etc.) .....	<input type="text"/>
Housework (washing, cooking, cleaning) .....	<input type="text"/>
Child care .....	<input type="text"/>
Care and support for persons in need of care .....	<input type="text"/>
Education or further training (also school, university) .....	<input type="text"/>
Repairs on and around the house, car repairs, garden work .....	<input type="text"/>
Hobbies and other free-time activities .....	<input type="text"/>

4. Have you been engaged in paid work during the last 7 days, even if this work was only for an hour or just a few hours?

 Please answer yes also if you normally would have worked in the last seven days, but because of holidays, sickness, bad weather, or other reasons did not do so.

Yes .....  No .....


5. Are you currently on maternity leave or legally established parental leave ("Elternzeit")?


Yes, maternity leave .....   
Yes, parental leave .....  No .....

6. Are you officially registered as unemployed at the Employment Office ("Arbeitsamt")?

Yes .....  No .....

7. Are you currently in some sort of education? In other words, do you attend a school or institution of higher education (including doctorate / Ph.D.), are you engaged in an apprenticeship or are you participating in further education or training?

Yes .....  No .....   Skip to question 9!



8. What type of education or continuing training is that?

**General school:**

- Secondary General School ("Hauptschule") ..
- Intermediate Second. School ("Realschule") .
- Upper Secondary School ("Gymnasium") .....
- Comprehensive School ("Gesamtschule") .....
- Evening Intermediate School ("Abendrealschule") .....
- "Fachoberschule" .....

**Vocational education:**


- Primary vocational training year, vocational preparatory year ("Berufsgrundbildungsjahr, Berufsvorbereitungsjahr") .....
- Vocational school without apprenticeship ..
- Apprenticeship .....
- Full-time vocational school ("Berufsfachschule, Handelsschule") .....
- School for health care professions .....
- Trade and technical school ("Fachschule", for example, "Meister-, Technikerschule") .....
- Education as public employee .....

Other:

**Higher Education:**

- "Fachhochschule" .....
- University, other higher education institution .....
- Promotion .....

**Do you receive a scholarship to pay for your undergraduate or graduate studies?**

 If so, from what organization?

- No .....
- Yes, BAföG .....
- Yes, other .....

**Further education ("Weiterbildung") / occupational retraining ("Umschulung"):**

- Professional or vocational retraining ("Umschulung") .....
- Further education in your profession .....
- Professional rehabilitation .....
- Further education in politics or general .....

Other:

**9. Are you currently in paid employment?  
Which of the following applies best to your status?**

 Pensioners with a job contract are considered employed.

- Full-time employed .....
- Part-time employed .....
- In occupational / professional education or retraining .....
- Marginally ("geringfügig") or irregularly employed .....
- In partial retirement  
with zero working hours .....
- Doing compulsory military service .....
- Doing community service as substitute for compulsory  
military service ("Zivildienst") / Voluntary social year .....
- Not employed .....

Skip to question 19!

Skip to question 61!

**10. Do you intend to engage in paid employment (again) in the future?**

- No, definitely not .....
- Probably not .....
- Probably .....
- Yes, definitely .....

Skip to question 64!

**11. When, approximately, would you like to start with paid employment?**

- As soon as possible .....
- Next year .....
- In the next two to five years .....
- In the distant future, in more than five years .....

**12. Are you interested in full-time or part-time employment, or would both suit you?**

- Full-time .....
- Part-time .....
- Either .....  I'm not sure yet .....

**13. If you were currently looking for a new job:  
Is it or would it be easy, difficult or almost impossible to find an appropriate position?**

- Easy .....
- Difficult .....
- Almost impossible .....

14. How high would your net income or salary have to be for you to take a position offered to you?

euros per month

Can't say, it depends ...  ➔

Skip to question 16!



15. In your opinion how many hours a week would you have to work to earn this net income?

hours per week

16. If someone offered you an appropriate position right now, could you start working within the next two weeks?

Yes .....

No .....

17. Have you actively looked for work within the last four weeks?

Yes .....

No .....  ➔

Skip to question 64!



18. Have you received a voucher ("Vermittlungsgutschein"), and if so what was the value?

Yes .....  ➔

value:

euros

No .....

Skip to question 64!

## Your current employment

19. Did you change your job or start a new one after December 31, 2008?

Please also answer if you have started working again after an interruption!

Yes .....

No .....  ➔

Skip to question 34!




20. When did you start your current position?

2009, in the month

2010, in the month



**24. What type of an employment change was that?**

 *In the case that you have changed positions several times, please pick the appropriate reason for the most recent change.*


- I have entered employment for the first time in my life .....
- I have now returned to a past employer after an interruption .....
- I have started a new position with a different employer (for temporary workers this includes working in an temporary workplace) .....
- I have been taken on by the company in which I did my apprenticeship / worked as part of a state employment program / was employed on a free-lance basis .....
- I have changed positions within the same company .....
- I have become self-employed .....

Sie springen auf Frage 24!

**22. Did you receive funds from any government programs to start your own business?**

- Yes, with a start-up grant or financial subsidy .....
- Yes, with other grants .....
- No .....

**23. What were the decisive reasons for you starting your own business?**

 *Please answer on the following scale.  
 1 means that the reason **does not apply at all**.  
 7 means that the reason **applies completely**.  
 With the values between 1 and 7, you can express where you lie between these two extremes.*


	Does not apply at all	1	2	3	4	5	6	7	Applies completely
I always wanted to be my own boss .....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
I didn't want to be unemployed any longer .....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other people advised me to start my own business .....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
I discovered a gap in the market .....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
I wanted to earn more money .....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
I wasn't able to find a (new) job .....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
I had a new idea that I wanted to try out .....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
I was disadvantaged in my previous position .....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**24. Were you actively looking for a job when you received your current position, or did it just come up?**

Actively looking for job .....

Just came up .....

**25. How did you find out about this job?**

 Please check just **one!**

Through the federal employment office  
("Arbeitsamt", "Agentur für Arbeit") .....

Through a Job-Center / ARGE / "Sozialamt" .....

Through a personnel service agency ("PSA") .....

Through a private recruitment agency .....

An advertisement in the newspaper .....

An advertisement in the internet .....

Through friends or relatives .....

I have returned to a former employer .....

Other or none of the above .....


**26. Was the Employment Office involved in finding the job?**

Yes, directly .....

Yes, provided a voucher ("Vermittlungsgutschein")  
for a private recruitment agency .....  ⇒ value  euros

No .....

**27. What is your current position/occupation?**

 Please give the exact title. For example, do not write "clerk", but "shipping clerk"; not "blue-collar worker", but "machine metalworker". If you are engaged in public employment, please give your official title in German, for example, "Polizeimeister" or "Studienrat". If you are an apprentice or in vocational training, please state the profession associated with your training.

Please write the German term only!

**28. Is this position the same as the profession for which you were educated or trained?**

Yes .....  Currently in education or training .....

No .....  I have not been trained or educated for a particular profession ....

**29. What type of education or training is usually necessary for this type of work?**

No completed vocational training/apprenticeship required .....

Completed vocational training/apprenticeship required .....

"Fachhochschule" degree required .....

Completed education at a university or other institution of higher education .....

**30. What type of introduction or introductory training is usually necessary for this type of work?**

Only a short introduction on the job .....

A longer training period in the company .....


Participation in special training or courses .....

**31. Does the company in which you are employed belong to the public sector?**

Yes .....

No .....

**32. In which branch of business or industry is your company or institution active for the most part?**

 Please state the branch as exactly as possible, for example, not "industry", but "electronics industry"; not "trade", but "retail trade"; not "public service", but "hospital".

Please write the German term only!

**33. Approximately how many people does the company employ as a whole?**

less than 5 people ...

from 5 up to 10 people ...

from 11 up to, but less than 20 people ...

from 20 up to, but less than 100 people ...

from 100 up to, but less than 200 people ...

from 200 up to, but less than 2,000 people ...

2,000 or more people .....

Not applicable, because I am self-employed without further employees ....

**34. Since when have you been working for your current employer?**

 If you are self-employed, please indicate when you started your current job.

Since 

--	--


--	--	--	--

  
 month year

**35. Is this job temporary or on a contractual basis?**

Yes .....  No .....


**36. Is your contract of employment for an unlimited or limited period?**

Unlimited period .....   Skip to question **38!**  
 Limited period .....   
 Not applicable, do not have an employment contract .....

**37. Is it an "ABM" Job (created through the government employment program) or a "1 Euro Job" (for non-profit work)?**

Yes, an ABM job (government employment program) ....   
 Yes, a 1 Euro job (non-profit work) .....   
 No .....

**38. What is your current occupational status?**

 If you are employed in more than one position, please answer the following questions for your **main** position only.

**Blue-collar worker:**

Untrained worker .....   
 Trained worker ("angelernt") .....   
 Trained and employed as skilled worker .....   
 Foreman ("Vorarbeiter") .....   
 Master craftsman ("Meister") .....

**White-collar worker:**

Industry and works foreman in a salaried position .....   
 Employee with simple duties, without training/education certificate .....   
 Employee with simple duties, with training/education certificate .....   
 Employee with qualified duties (e.g. executive officer, bookkeeper, technical draftsman) .....   
 Employee with highly qualified duties or managerial function (e.g. scientist, attorney, head of department) .....   
 Employee with extensive managerial duties (e.g. managing director, manager, head of a large firm or concern) .....

**Self-employed** (including family members working for the self-employed)

	Number of employees		
	None	1 – 9	10 and more
Self-employed farmer .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Free-lance professional, independent scholar .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other self-employed .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family member working for self-employed relative .....	<input type="checkbox"/>		

**Apprentices / trainees and interns:**

Apprentice / trainee in industry of technology .....   
 Apprentice / trainee in trade and commerce .....   
 Volunteer, intern, etc. ....

**Civil servant**

(including judges and professional soldiers)  
 Lower level .....   
 Middle level .....   
 Upper level .....   
 Executive level .....

39. How was it in the previous twelve months in your occupational area:  
Has the number of employees increased, decreased, or remained the same?

- Increased .....   
Decreased .....   
No change .....  Don't know .....

40. If you lost your job today, would it be easy, difficult, or almost impossible for you to find a new position which is at least as good as your current one?

- Easy .....   
Difficult .....   
Almost impossible .....

41. Income earned varies in Germany. Therefore we would like to ask you where your place of work lies: Is it ...

- in one of the old federal states .....
- in one of the new federal states ...
- in the west of Berlin .....
- in the east of Berlin .....
- or abroad? .....

42. Is your current job in the city where you live?

- Yes .....  ➔ Skip to question 44!  
No .....   
⚡

43. How often do you commute from your apartment to your place of work?

- Every day .....   
Once a week .....   
Less often .....


44. How far (in kilometers) is your job from your place of residence?

- km      Difficult to say, location of workplace varies .....   
Workplace and home are in the same building ...

45. How many paid vacation days do you receive per year?

- days      I don't get any paid vacation .....

46. How many days of paid vacation did you take last year?

 If you don't know exactly, **please estimate!**

- days      I didn't get any paid vacation .....  ➔ Skip to question 50!

47. Last year, did you forfeit any unused vacation days left over from the year 2008 or before?  
If so, how many days?

- Yes .....  ➔  days  
No .....

48. Did you carry over any unused vacation days from previous years into the current year?

Yes .....   
↓

No .....  →

Skip to question 50!

49. What will you do with the unused vacation days carried over from the previous year / what have you already done with them?

Taken them as vacation days .....

Take cash compensation for the unused vacation days .....

Forfeit them .....

Have them credited to my working hours account .....

50. How many hours are stipulated in your contract (excluding overtime)?

.  hours per week

No set hours .....

51. And how many hours do your actual working-hours consist of including possible over-time?

.  hours per week

If less than 30 hours:

If 30 hours or more: →

Skip to question 54!



52. Is it a marginal job in accordance with the 400/800 euros Rule (mini-/midi-job)?

Yes, mini-Job (up to 400 euros) .....

Yes, midi-Job (400 to 800 euros) .....

No .....

53. Is this part-time occupation in accordance with the latest law concerning parental part-time (Federal Child Benefit Law)?

Yes .....

No .....

54. Are you currently participating in one of the legally established programs of progressive retirement?

Yes .....  → Reduced working hours .....

No .....  Reduced salary for temporarily unchanged working hours (in saving phase) .....

55. Did you do any temp work in the last month?

Yes .....


No .....

56. If you could choose your own number of working hours, taking into account that your income would change according to the number of hours:

How many hours would you want to work?

.  hours per week


57. Do you work overtime?

Yes .....  

No .....   
Not applicable, because I am self-employed .....

**Skip to Question 61!**


58. Can you also collect this overtime in a so-called working-hours account, which allows you time off to be taken within a year or longer?

Yes .....   with the collected hours to be used . . .  
No .....   
● by the end of the year .....   
● within a shorter period of time .....   
● within a longer period of time .....



59. If you do work overtime, is the work paid, compensated with time off, or not compensated at all?

Compensated with time off ..  Partly paid, partly compensated with time off .....   
Paid .....  Not compensated at all .....

60. How was your situation with regards to overtime last month? Did you work overtime? If yes, how many hours?

Yes .....    hours, of which:  hours were paid  
No .....   
*Please enter "00" if unpaid*

61. How high was your income from employment last month?

 If you received extra income such as vacation pay or back pay, please do **not** include this. Please do include overtime pay.  
 If you are self-employed: Please estimate your monthly income before and after tax.


Please fill in both:

- **gross** income, which means wages or salary before deduction of taxes and social security
- **net** income, which means the sum after deduction of taxes, social security, and unemployment and health insurance.

My income was: gross  euros  
net  euros


62. Have you received the following types of special payments or bonuses during the last month?

 Please check all that apply!

Shift premium/late work bonus/weekend work bonus .....   
Overtime pay .....   
Bonus for work under difficult conditions .....   
Additional regular payment due to the tasks / responsibilities of the position, or personal bonus .....   
Tips .....   
Other special payments / bonuses .....    
None of the above .....

please state:

**63. Do you receive other benefits from your employer besides your pay?**

 Please check all that apply!

Discounted lunch in the company lunchroom or a meal stipend .....

Company vehicle for private use .....

Cellular phone for personal use, or reimbursement of telephone costs .....

Expense payments covering more than minimum costs .....


Personal computer or laptop for use at home .....

Other forms of additional benefits .....

None of the above .....

*Now questions which apply to everyone!*

**64. It is possible to work in addition to regular employment, household work, education and also as pensioner. Do you engage in any of the following activities?**

 Your main employment activity described in the previous sections should not be included!

Work in family business .....

No, none of these .....

Regularly paid secondary employment .....

Occasional paid work .....

**Skip to question 70!**

**65. Which occupation is that? Please be as specific as possible.**

*Please write the German term only!*

**66. How many days a month do you engage in this additional employment?**

days a month

**67. How many hours on average on these days?**

hours a day

**68. How many months a year do you engage in this additional employment?**


months a year

**69. How much was your gross income for this job for last month?**

euros




**70. From which of the following income sources do you personally receive money at this time?**

 Please check all that apply!

**For all the applicable sources of income, please indicate how large an amount is each month.**


**If you are unable to state the exact amount, please estimate.**


Source of income	Yes	Gross amount per month * )
Own pension <i>If you have more than one, please add them together! .....</i>	<input type="checkbox"/> ➔	<input style="width: 150px; height: 25px;" type="text"/> euros
Widower's pension, orphan's pension <i>If you have more than one, please add them together! .....</i>	<input type="checkbox"/> ➔	<input style="width: 150px; height: 25px;" type="text"/> euros
Unemployment pay ("Arbeitslosengeld") .....	<input type="checkbox"/> ➔	<input style="width: 150px; height: 25px;" type="text"/> euros
Unemployment pay II / social assistance payments ("Arbeitslosengeld II / Sozialgeld") .....	<input type="checkbox"/> ➔	<b><i>Please include the amount in the household questionnaire!</i></b>
Support for further training and education ("Unterhaltsgeld bei Fortbildung") / Transition pay ("Übergangsgeld") .....	<input type="checkbox"/> ➔	<input style="width: 150px; height: 25px;" type="text"/> euros
Early retirement pay from the former employer .....	<input type="checkbox"/> ➔	<input style="width: 150px; height: 25px;" type="text"/> euros
Maternity benefit during maternity leave ("Elterngeld", "Erziehungsgeld") .....	<input type="checkbox"/> ➔	<input style="width: 150px; height: 25px;" type="text"/> euros
BAföG (state support for higher education), grants, vocational training support .....	<input type="checkbox"/> ➔	<input style="width: 150px; height: 25px;" type="text"/> euros
Pay for compulsory military service, community service in place of military service ("Zivildienst") .....	<input type="checkbox"/> ➔	<input style="width: 150px; height: 25px;" type="text"/> euros
Legal spousal support, child support, child care support .....	<input type="checkbox"/> ➔	<input style="width: 150px; height: 25px;" type="text"/> euros
Support payment paid through a ending program for support payments .....	<input type="checkbox"/> ➔	<input style="width: 150px; height: 25px;" type="text"/> euros
Other types of financial assistance from persons who do not live in the household .....	<input type="checkbox"/> ➔	<input style="width: 150px; height: 25px;" type="text"/> euros
None of these .....	<input type="checkbox"/>	

**★)  The gross amount means before any deductions for taxes, social security, etc.  
This is only of relevance to pensioners and potentially to those on company pensions.**

# How were things last year?

71. Did you end school, vocational training, or university education after December 31, 2008?

 Here we also mean higher academic degrees!

Yes .....   


No .....  


Skip to question 75!

When?

2009, in the month

2010, in the month

72. Did you conclude this education with a degree, certificate or diploma?

Yes .....   


No .....  

Skip to question 75!

73. Did you complete this degree / certificate / diplome in Germany or in another country?

In Germany .....

In another country .....

74. What kind of a degree was that?

**General school certificate:**

Secondary general school leaving certificate ("Hauptschulabschluss") .....

Intermediate school leaving certificate ("Mittlere Reife", "Realschulabschluss") .....

Leaving certificate from a Fachoberschule ("Fachhochschulreife" – qualification for studies at a Fachhochschule) .....

Upper secondary leaving certificate ("Abitur") .....

Other school leaving certificate .....

**Higher Education Degree**

Fachhochschule .....

University, technical university, other higher education institution .....

Promotion / Habilitation .....

Please state degree:

Please also state major field of study:

**Vocational Degree**

**Name of the vocation:**

**Type of education or training:**

Apprenticeship .....

Full-time vocational school ("Berufsfachschule, Handelsschule") .....

School for health care professions .....


Trade and technical school for vocational education ("Meister-, Technikerschule" etc.) .....

Training for public employees .....

Company retraining .....

Other, for example further training .....

75. Did you leave a job after December 31, 2008 (one which you also had before this date)?

Yes .....    
 

No .....  

**Skip to question 81!**

76. When did you leave the last job?

2009, in the month


2010, in the month

77. How long were you employed in that position?

years

months

78. How was this job terminated?

 Please check only **one!**

Because your place of work or office has closed .....

My resignation .....

Dismissal .....

Mutual agreement .....

A temporary job or apprenticeship had been completed .....

Reaching retirement age / pension .....

Suspension .....

Purpose of your self-employment / business .....

79. Did you receive any sort of compensation or severance package from the company?

Yes .....  

How much in total?

euros

No .....

80. Did you have a new contract or a prospective job before you left your last position?

Yes, a prospective job .....

Yes, a new contract .....


No, I didn't have anything lined up .....

I didn't look for a new job .....

**81. And now think back on all of 2009.**

**We've drawn up a type of calendar below. Listed on the left are various employment characteristics that may have applied to you last year.**

**Please go through the various months and check all the months in which you were employed, unemployed, etc.**

 *Please note that at least one must be checked for each month!  
Even if you were unemployed for less than one month, please check off that month.*

I was ...	2009											
	Jan.	Febr.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
full-time employed (including state employment programs "ABM" / "SAM") .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
in temp work .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
part-time employed .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I held a Mini-Job (up to 400 €) ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
in first-time company training / apprenticeship .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
in further training, retraining, further professional education ..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
registered as unemployed .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
in retirement or early retirement "Vorruhestand" .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
on maternity leave / child rearing leave / "Elternzeit" .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
in school, at university or "Fachschule" .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Military Service / Reserve Duty Training Exercise ..... <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Service ..... <input type="checkbox"/>												
Voluntary Social Year ..... <input type="checkbox"/>												
housemaker .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify): <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# Income in 2009

82. We have already asked for your current income.

In addition, please state what sources of income you received in the past calendar year 2009, independent of whether the income was received all year or only in certain months.

Look over the list of income sources and check all that apply.

For all sources that apply please indicate how many months you received this income in 2009 and how much this was on average per month.

(Please state the gross amount which means not including deductions for taxes or social security).

 Please answer all the questions on this page and if necessary, the additional questions.

Source of income	Received in 2009	Months in 2009	Gross amount per month euros	
Wages or salary as employee (including wages for training, "Vorruhestand", wages for sick time ("Lohnfortzahlung") .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	<b>Additional questions 83 - 85</b>
Income from self-employment, free-lance work .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	
Additional employment .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	
Own pension .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	<b>Additional question 86</b>
Widower's pension, orphan's pension .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	<b>Additional question 86</b>
Unemployment pay ("Arbeitslosengeld") .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	
Unemployment pay II / social assistance payments ("Arbeitslosengeld II" / Sozialgeld) .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	<b>Please include the amount in the household questionnaire!</b>
Support for further training and education ("Unterhaltsgeld bei Fortbildung") / Transition pay ("Übergangsgeld") .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	
Maternity benefit during maternity leave ("Elterngeld", "Erziehungsgeld") .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	
BAföG (state support for higher education), grants, vocational training support .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	
Pay for compulsory military service, community service in place of military service ("Zivildienst") .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	
Legal spousal support, child support, child care support .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	
Support payment paid through a ending program for support payments .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	
Other types of financial assistance from persons who do not live in the household .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	
I received no income from the sources named in 2009 .....	<input type="checkbox"/> →	<input type="text"/>	<input type="text"/>	<b>Skip to question 87!</b>

### Additional questions for employed persons

83. Did you receive any of the following additional payments from your employer last year (2009)?

If yes, please state the gross amount.

13th month salary .....	<input type="checkbox"/>	in total	<input type="text"/>	euros
14th month salary .....	<input type="checkbox"/>	in total	<input type="text"/>	euros
Additional Christmas bonus .....	<input type="checkbox"/>	in total	<input type="text"/>	euros
Vacation pay .....	<input type="checkbox"/>	in total	<input type="text"/>	euros
Profit-sharing, premiums, bonuses .....	<input type="checkbox"/>	in total	<input type="text"/>	euros
Other .....	<input type="checkbox"/>	in total	<input type="text"/>	euros
No, I received none of these ..... <input type="checkbox"/>				

84. Last year (2009), did you receive money to cover traveling expenses or an allowance for use of local public transit (e.g. "Jobticket")? If so, please indicate the value thereof:

Yes .....  ⇨ please state:  euros

No .....


85. Did you receive short-time compensation ("Kurzarbeitergeld") in 2009? If yes, for how many weeks?

Yes, short-time compensation ("Kurzarbeitergeld") ...  for  weeks

No .....

### Additional question for retirees, pensioners

86. Who pays your pension and how high were the monthly payments in 2009?

 Please state the gross amount, **excluding** taxes. If you receive more than one pension, please check each that applies. If you do not know the exact amount, please estimate.

	Own pension		Widower's pension, orphan's pension
German Pension Insurance (formerly LVA, BfA, Knappschaft) .....	<input type="text"/>	euros	<input type="text"/> euros
Civil servants pension .....	<input type="text"/>	euros	<input type="text"/> euros
Supplementary pension for public employees (e.g. VBL) .....	<input type="text"/>	euros	<input type="text"/> euros
Company pension (e.g. "Werkspension") .....	<input type="text"/>	euros	<input type="text"/> euros
Private pension scheme (including Arbeitgeberdirektversicherung) .....	<input type="text"/>	euros	<input type="text"/> euros
Accident insurance (e.g. "Berufsgenossenschaft") .....	<input type="text"/>	euros	<input type="text"/> euros
War injury pension .....	<input type="text"/>	euros	<input type="text"/> euros
Other: <input type="text"/>	<input type="text"/>	euros	<input type="text"/> euros

# Health and Illness

87. How would you describe your current health?

- Very good .....
- Good .....
- Satisfactory .....
- Poor .....
- Bad .....

88. When you ascend stairs, i.e. go up several floors on foot:  
Does your state of health affect you greatly, slightly or not at all?

- Greatly .....
- Slightly .....
- Not at all .....

89. And what about having to cope with other tiring everyday tasks,  
i.e. when one has to lift something heavy or when one requires agility:  
Does your state of health affect you greatly, slightly or not at all?

- Greatly .....
- Slightly .....
- Not at all .....

90. Please think about the last four weeks.  
How often did it occur within this period of time, ...

Always    Often    Some-    Almost    Never  
   times

- that you felt rushed or pressed for time? ..... =====
- that you felt run-down and melancholy? ..... =====
- that you felt relaxed and well-balanced? ..... =====
- that you used up a lot of energy? ..... =====
- that you had strong physical pains? ..... =====
- that due to physical health problems
  - you achieved less than you wanted to at work or in everyday tasks? ..... =====
  - you were limited in some form at work or in everyday tasks? ..... =====
- that due to mental health or emotional problems
  - you achieved less than you wanted to at work or in everyday tasks? ..... =====
  - you carried out your work or everyday tasks less thoroughly than usual? ..... =====
- that due to physical or mental health problems you were limited socially, i.e. in contact with friends, acquaintances or relatives? ..... =====

91. Are you suffering for at least one year, or as a chronic condition, from certain complaints or illnesses

Yes .....

No .....

92. How many hours of sleep do you average on a normal day during the working week?  
How many hours on a normal weekend day?

Please give only whole hours.

Normal working day .....  hours

Normal weekend day .....  hours

93. To what extent do you follow a health-conscious diet?

Very much .....

Much .....

Not so much ....

Not at all .....

94. How often do you drink the following alcoholic beverages?

Regularly    Occasio-    Seldom    Never  
                         nally

Beer .....  .....  .....  .....

Wine, Champagne .....  .....  .....  .....

Spirits (schnaps, brandy etc.) .....  .....  .....  .....

Mixed drinks (alcopops, cocktails etc.) .....  .....  .....  .....

95. Do you currently smoke, be it cigarettes, a pipe or cigars?

No .....

Yes .....

**How many cigarettes, pipes or cigars do you smoke per day?**

Please give the daily average of the previous week.

Cigarettes .....  per day

Pipes .....  per day

Cigars/Cigarillos .....  per day

96. How tall are you?

If you don't know, please estimate.

cm

97. How many kilograms do you currently weigh?

If you don't know, please estimate.

kg



98. Are you legally classified as handicapped or capable of gainful employment only to a reduced extent due to medical reasons?

Yes .....  ➔

What is the extent of this capability reduction or handicap according to the most recent diagnosis? .....  %

No .....

What type of handicap is that?

99. Have you gone to a doctor within the last three months?  
If yes, please state how often.

Number of trips to the doctor's in the last three months .....

I haven't gone to the doctor's in the last three months .....

100. And how was that with regards to stays in the hospital?  
Were you ever admitted to a hospital for at least one night in 2009?

Yes .....  ⚡

No .....  ➔

Skip to question 102!

101. How many nights altogether did you spend in the hospital last year?

nights

And how often were you admitted to a hospital in the year 2009?

times

102. Were you sick from work for more than six weeks at one time last year?

Yes, once .....

Yes, several times .....

No .....

I was not employed in 2009 .....  ➔

Skip to question 105!

103. How many days were you not able to work in 2009 because of illness?

☞ Please state all the days, not just those for which you had an official note from your doctor.

None .....

A total of .....  days

104. Leaving aside sick leave and vacation:

Did you not work at some point during 2009 for other personal reasons?

☞ Possible reasons may include, for example, a sick child, having to take care of business with the authorities that could not be postponed, or important family celebrations.

Yes, because of a sick child .....  How many days en total?  days

Yes, for other reasons .....  How many days en total?  days

No .....

**105. Now some questions about your health insurance. First the question:**

**Do you qualify for additional allowances (such as "Beihilfe" or "Heilvorsorge") for public employees?**


Yes .....  No .....


**106. Have you changed to a different health insurance provider since December 31, 2008?**


Yes .....  No .....

**107. How are you insured for sickness:**

**Do you have state health insurance or are you almost exclusively privately insured?**


 Please answer also if you do not pay for the insurance yourself, but are covered by another family member. Compulsory health insurance providers are listed in Question 108.

In compulsory health insurance .....  Almost exclusively privately insured .....   Skip to question 114!



**108. Which of the following is your health insurance provider?**

AOK .....  DAK .....  IKK .....  Knappschaft ...   
Barmer/GEK ....  TK .....  KKH .....  LKK .....

Company health insurance ...   please state:  
Other .....

**109. Are you personally in this health insurance ...**



- a mandatory paying member .....
- a voluntary paying member .....
- covered by the insurance of a family member .....
- insured as pensioner, unemployed, student, or draft soldier or through your community service work ("Zivildienst")? .....

**110. The state health insurance system offers you the choice of a number of different rate options in addition to the normal rate.**

**Are you personally insured at the normal rate or under a different rate option?**

The normal rate .....   Skip to question 111!

A different rate option (please specify) .....

 Please check all appropriate answers! 

- Bonus program / premium reimbursement rate (in the case that health care services were not utilized) .....
- Personal deductible rate .....
- Cost reimbursement rate .....
- Family practitioner rate .....
- Rate for special health care forms (integrated care) .....
- Chronic illness program .....
- Medication rate .....
- Other rate .....

111. Do you have additional private health insurance?

Yes .....   
↓

No .....  →

Skip to question 119!

112. What do you pay for private insurance per month?

euros per month

Don't know ....

113. Which of the following are covered by your additional health insurance?

☞ Please check all that apply!

Hospital stay .....

Dentures .....

Corrective devices  
(glasses, for examples) .....

Coverage abroad .....

Other .....

Don't know ....

Skip to question 119!

114. In whose name is your private health insurance:  
another family member's or your own?

Other family member .....  →

Skip to question 119!

Your own .....   
↓

115. What do you pay per month for health insurance?

euros per month

Don't know ....

116. Is that amount just for you or are other people covered?

Just for me .....

In additional to myself  persons are covered  
Number

117. Is it health insurance with a deductible or co-payment?

Yes .....   
↓

No .....  →

Skip to question 119!

118. What type of deductible or co-payment do you have?

Co-payment of .....  %


General deductible in the amount of .....  euros

119. Now for a question concerning your provisions for old age:  
 Did you sign a contract for a Riester pension plan after 31.12.2001?

Yes .....  No .....

120. And now a question about your donations. We understand donations here as giving money for social, church, cultural, community, and charitable aims, without receiving any direct compensation in return. These donations can be large sums of money but also smaller sums, for example, the change one puts into a collection box. We also count church offerings.

Did you donate money last year, in 2009 – not counting membership fees?

Yes .....   How high was the total sum of money that you donated last year? ...  euros  
 No .....

121. There are also donations of a non-financial nature, for example, blood donations.  
 Have you donated blood in the last 10 years?

Yes .....   No .....  

Did you donate blood at least once last year, that is, in 2009?

Yes .....   
 No .....


Are there medical reasons why you cannot donate blood?

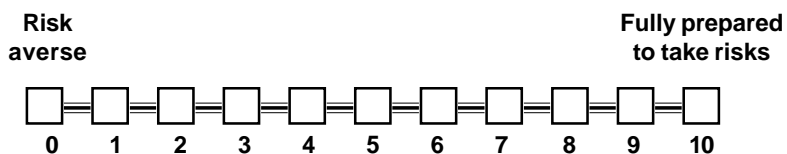
Yes .....   
 No .....

122. Imagine that you unexpectedly received a gift of 10,000 euros.  
 How would you use this money? How much would you save, how much would you give away, and how much would you spend?  
 You can either split up the money into the categories below or use the entire sum for one purpose.


Save .....  euros  
 Give away .....  euros  
 Spend .....  euros  
 Total: .....  euros

123. How do you see yourself:  
 Are you generally a person who is fully prepared to take risks or do you try to avoid taking risks?

 Please tick a box on the scale, where the value 0 means: "risk averse" and the value 10 means: "fully prepared to take risks".  
 You can use the values in between to make your estimate.



**124. To what degree do the following statements apply to you personally?**

 Please answer according to the following scale:  
**1** means: "**does not apply to me at all**",  
**7** means: "**applies to me perfectly**".

**Does not apply to me at all** **Applies to me perfectly**

1 2 3 4 5 6 7

If someone does me a favor, I am prepared to return it ..... = = = = = =

If I suffer a serious wrong, I will take revenge as soon as possible, no matter what the cost ..... = = = = = =

If somebody puts me in a difficult position, I will do the same to him/her ..... = = = = = =

I go out of my way to help somebody who has been kind to me before ..... = = = = = =

If somebody offends me, I will offend him/her back ..... = = = = = =

I am ready to undergo personal costs to help somebody who helped me before ..... = = = = = =

I get over it relatively quickly when someone hurts my feelings ..... = = = = = =

When somebody has wronged me I often think about it for quite a while ..... = = = = = =

I tend to bear grudges ..... = = = = = =

When other people wrong me I try to just forgive and forget ..... = = = = = =

I have a positive attitude toward myself ..... = = = = = =

**125. I will now read to you a number of feelings. Please indicate for each feeling how often or rarely you experienced this feeling in the last four weeks.**

How often have you felt ...	Very rarely	Rarely	Occasionally	Often	Very often
- angry? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- worried? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- happy? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- sad? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**126. Did you vote in the last German parliamentary election on September 27, 2009?**

Yes .....


No .....  Does not apply, was not eligible to vote ....


# Attitude and opinions

127. Generally speaking, how interested are you in politics?

- Very interested .....
- interested .....
- Not so interested .....
- Not at all interested....


128. Many people in Germany lean towards one party in the long term, even if they occasionally vote for another party. Do you lean towards a particular party?

Yes .....   


No .....  

Skip to question 130!

129. Toward which party do you lean?

- SPD .....
  - CDU .....
  - CSU .....
  - FDP .....
  - Bündnis 90/Die Grünen .....  
  - Die Linke .....
  - DVU/Republikaner/NPD .....
  - Other .....
- 

And to what extent?

- Very strongly .....
- Rather strongly .....
- Somewhat .....
- Weakly .....
- Very weakly .....

130. What is your attitude towards the following areas – are you concerned about them?

**Very concerned**      **Somewhat concerned**      **Not concerned at all**

- |   |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|
| General economic development .....                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Your own economic situation .....                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The stability of the financial markets .....                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Your health .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Environmental protection .....                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The impacts of climate change .....                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maintaining peace .....                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Global terrorism .....                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Crime in Germany .....                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Immigration to Germany .....                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Hostility towards foreigners or minorities in Germany ..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>If you are employed:</i> Your job security .....         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Or what else are you concerned about?**

*Please state:*

# Family situation and background

131. Now some questions on your native language, the language spoken by the family you grew up in. Is German the native language of you and **both** of your parents?

No .....

Yes .....  ➔

**Skip to question 134!**

132. What's the case with you personally:

How well do you know German?

How well do you know the language of your country of origin, or your parents' language?

Speaking Writing Reading Speaking Writing Reading

Very well .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Okay .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poorly .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not at all .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

133. What language do you speak here ...

- mostly German .....
- mostly the language of my native country .....
- German half of the time and my native language half of the time .....

134. Were you born in Germany?

Yes .....

No .....

135. Is your nationality German?

Yes .....  ⚡

No .....  ➔

**Skip to question 138!**

136. Do you have a second citizenship in addition to your German?

Yes .....  ➔ please state:

No .....

137. Have you had German nationality since birth or did you acquire it at a later date?

Since birth .....  ➔

**Skip to question 150!**

At a later date .....  ➔

**Skip to question 140!**

138. What is your citizenship?

*please state:*

139. Do you intend to apply for Germany citizenship in the next two years?

Yes, definitely .....

Yes, probably .....

Probably not .....

Definitely not.....

140. How often have you experienced disadvantages in the last two years because of your origins?

Often .....

Seldom .....

Never .....

141. When you read the newspaper: do you read ...

– only newspapers from your country of origin? .....

– mostly newspapers from your country of origin? .....

– both German newspapers and newspapers from your country of origin about equally? .....

– mostly German newspapers? .....

– only German newspapers? .....

Doesn't apply, I don't read newspapers .....

142. To what extent do you view yourself as a German?

Completely .....

For the most part .....

In some respects .....

Hardly at all .....

Not at all .....

143. To what extent do you feel that you belong to the culture of the country where you or your family comes from?

To a very large extent .....

To a large extent .....

In some respects .....

Hardly .....

Not at all .....





144. When one lives as foreigner or immigrant in Germany, he can sometimes have the feeling of not having a homeland. Some people feel like they aren't really members of their country of origin or of Germany. One doesn't really belong to one or the other.


How often do you have such feelings?

- Very often .....
- Often .....
- Now and then .....
- Seldom .....
- Never .....



145. Do you want to stay in Germany forever?

- Yes .....   Skip to question 147!
- No .....  

146. How long do you want to remain in Germany?

- A year at the most .....
- A few years more .....   How many years?  years      Don't know

147. Since you have come to Germany to live, have you ever gone back to your country of origin?

- Yes .....  
- No .....   Skip to question 150!

148. How long were you there in the last two years?

- Not at all .....
- Up to three weeks .....
- One to three months ....
- Four to six months .....
- Longer .....

149. When some people have lived for a long time in Germany and visit their (former) home country, things may have changed.

How is that for you? How do you feel in that situation?

- I feel at home right away on the first day, as if I hadn't even been away .....
- I feel at home within a short time .....
- At first I feel like a stranger, but after a few days I feel at home .....
- It takes quite a long time until I feel more or less at home .....
- I feel like a stranger in my own land .....

**150. Your sex and year of birth:**

male .....

female .....

**Year of birth:**

1	9		
---	---	--	--

**151. What is your marital status?**

Married, living together with my spouse .....  →

**Skip to question 153!**

Married, living (permanently) separated from my spouse .....

Single .....

Divorced .....

Widowed .....

**152. Are you in a serious/permanent relationship?**

Yes .....   
↓

No .....  →

**Skip to question 155!**

**Does your partner live in the same household?**

Yes .....  →

*First name:*

No .....

**153. How do you and your partner (or spouse) decide what to do with the income that either you or they or both of you receive?**

Everyone looks after their own money .....

I look after the money and provide my partner with a share of it .....

My partner looks after the money and provides me with a share of it .....

We put the money together and both of us take what we need .....

We put a share of the money in together, and both of us keep a share of it for ourselves .....

**154. Who has the last word in your relationship / marriage when making important financial decisions?**

Me .....

My partner .....

Both of us equally .....

**155. In the last year, that is, in 2009, have you personally given financial support to relatives or other people outside this household?**

Please check all appropriate answers!

			How much in the year as a whole?	Where does the recipient live?	
				Germany	Abroad
To parents / parents-in-law .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
To children (also son-inlaw/daughter-in-law) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
To spouse or divorced spouse .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
To other relatives .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
To unrelated persons .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
No, I have not given any financial support of this kind .....	<input type="checkbox"/>				

**156. In the last year, that is, in 2009, have you personally received financial support from relatives or other people outside this household?**

Please check all appropriate answers!

			How much in the year as a whole?	Where does the giver live?	
				Germany	Abroad
From parents / parents-in-law .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
From children (also son-inlaw/daughter-in-law) .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
From spouse or divorced spouse .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
From other relatives .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
From unrelated persons .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
No, I have not received any financial support of this kind .....	<input type="checkbox"/>				

**157. Private support can be provided in the form of benefits in kind, e.g., clothing, gifts, vacation, or restaurant visits. Did you personally provide in-kind support last year, in 2009, to relatives or other individuals outside your household?**

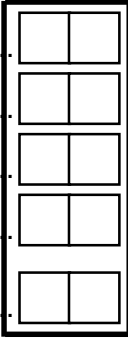
			Approximately how high was the total value of in-kind support in 2009?	Where does the recipient live?	
				Germany	Abroad
Yes .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
No .....	<input type="checkbox"/>				

**158. Did you personally receive in-kind support last year, in 2009, from relatives or other individuals outside your household?**

			Approximately how high was the total value of in-kind support in 2009?	Where does the giver live?	
				Germany	Abroad
Yes .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
No .....	<input type="checkbox"/>				

**159. Has your family situation changed since December 31, 2008?**  
 Please indicate if any of the following apply to you and if so, when this change occurred.

	Yes	in 2010 in month	in 2009 in month
I married .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
I moved in with my partner .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Had a child .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
A child moved in .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
My son or daughter left the household .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
I separated from my spouse / partner .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
I got divorced .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
My spouse / partner has died .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Father has died .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Mother has died .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Child has died .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Another person who lived here in the household has died .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Other family changes .....	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<div style="border: 1px solid black; height: 30px; width: 100%;"></div>			
There have been no changes in my family .....	<input type="checkbox"/>		



*Please complete the questionnaire "The deceased person"*

**160. In conclusion, we would like to ask you about your satisfaction with your life in general.**

Please answer according to the following scale:  
 0 means "completely dissatisfied", 10 means "completely satisfied".

How satisfied are you with your life, all things considered?

<input type="checkbox"/>	=	<input type="checkbox"/>	=	<input type="checkbox"/>	=	<input type="checkbox"/>	=	<input type="checkbox"/>	=	<input type="checkbox"/>	=	<input type="checkbox"/>	=	<input type="checkbox"/>	=	<input type="checkbox"/>	=	<input type="checkbox"/>	=	<input type="checkbox"/>
0		1		2		3		4		5		6		7		8		9		10
completely dissatisfied										completely satisfied										

**Thank you for your cooperation!**

# Durchführung des Interviews

## A Wie wurde die Befragung durchgeführt?

Mündliches Interview .....

Befragter hat den Fragebogen selbst ausgefüllt,  
und zwar:

– in Anwesenheit des Interviewers .....

– in Abwesenheit des Interviewers .....

Teils mündlich, teils selbst ausgefüllt .....

## B Interviewdauer:

Das mündliche (Teil-)Interview dauerte .....  Minuten

Befragter brauchte zum Selbstausfüllen .....  Minuten

*(bitte erfragen)*

## C Sonstige Hinweise:

Listen-Nr.

Lfd. Nr.

Ich bestätige die korrekte Durchführung  
des Interviews:

Tag

Monat

Abrechnungs-Nummer

Unterschrift des Interviewers