

Living in Germany

Survey 2008
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: ...

1	9	4	5
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- 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?

= = = = = = = = = = =

0 1 2 3 4 5 6 7 8 9 10

– your sleep?

= = = = = = = = = = =

0 1 2 3 4 5 6 7 8 9 10

(if employed)

– your job?

= = = = = = = = = = =

0 1 2 3 4 5 6 7 8 9 10

(if working in household)

– your housework?

= = = = = = = = = = =

0 1 2 3 4 5 6 7 8 9 10

– your household income?

= = = = = = = = = = =

0 1 2 3 4 5 6 7 8 9 10

– your personal income?

= = = = = = = = = = =

0 1 2 3 4 5 6 7 8 9 10

– your schooling and professional
education?

= = = = = = = = = = =

0 1 2 3 4 5 6 7 8 9 10

– your place of dwelling?

= = = = = = = = = = =

0 1 2 3 4 5 6 7 8 9 10

– your free time?

= = = = = = = = = = =

0 1 2 3 4 5 6 7 8 9 10

– your family life?

= = = = = = = = = = =

0 1 2 3 4 5 6 7 8 9 10

(if you have small children)

– the child care available?

= = = = = = = = = = =

0 1 2 3 4 5 6 7 8 9 10

2. 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"/>

3. What is your opinion on the following three statements?

Please tick one of the boxes for each statement.

	Totally agree	Agree slightly	Disagree slightly	Totally disagree
On the whole one can trust people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nowadays one can't rely on anyone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If one is dealing with strangers, it is better to be careful before one can trust them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Do you believe that most people ...

- would exploit you if they had the opportunity

- or would attempt to be fair towards you?

5. Would you say that for most of the time, people ...

- attempt to be helpful?

- or only act in their own interests?

6. What would you say: How many close friends do you have?

close friends

7. How often does it occur that, ...

Please enter one answer in every row!

	Very often	Often	Some-times	Seldom	Never
- that you lend your friends your personal belongings (i.e. CDs, books, car, bicycle)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- that you lend your friends money?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- that you leave the door to your apartment unlocked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. How ever have you profited from the generosity of a person, who you had not previously met?

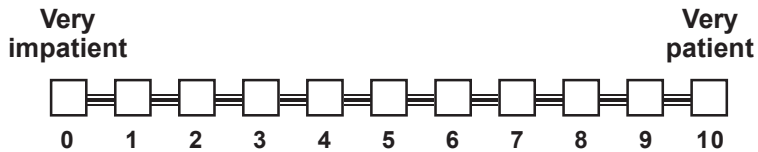
Yes No

9. How would you describe yourself:

Are you generally an impatient person, or someone who always shows great patience?

Please tick a box on the scale, where the value 0 means: "very impatient" and the value 10 means: "very patient".

You can use the values in between to make your estimate.

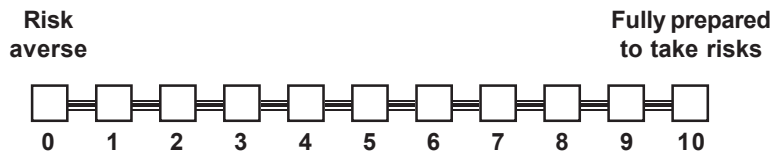


10. How would you describe yourself:

Are you generally willing to take risks, or do you try to avoid 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.

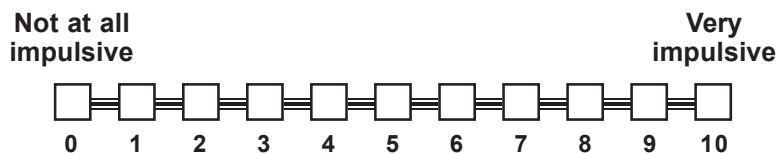


11. How would you describe yourself:

Do you generally think things over for a long time before acting – in other words, are you not impulsive at all? Or do you generally act without thinking things over for long time – in other words, are you very impulsive?

Please tick a box on the scale, where the value 0 means: "not at all impulsive" and the value 10 means: "very impulsive".

You can use the values in between to make your estimate.



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

13. 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

14. Are you currently under maternity protection or in the legally regulated "Elternzeit"?

Yes, maternity leave
Yes, Elternzeit No

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

Yes No

16. Are you currently in some sort of education? In other words, do you attend a school or institution of higher education, are you engaged in an apprenticeship or are you participating in further education or training?

Yes No Skip to question 18!

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

General school:

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

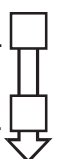
Vocational education:

- 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



Are you receiving a scholarship for these 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:

18. Now some questions about your free-time.

**Please indicate how often you take part in each activity:
daily, at least once a week, at least once a month, seldom or never?**

	Daily	At least once a week	At least once a month	Seldom	Never
Go out for a drink or for a meal (café, bar pub, restaurant)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social intercourse with friends, relatives or neighbors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visits to and from family members and relatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contact to friends or relatives abroad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Go on a trip or short holidays	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participation in public initiatives, in political parties, local government	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honorary office participation in clubs, associations or social services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Church-going, visits to religious events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TV / Video	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PC usage outside of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet usage outside of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Artistic and musical activities (painting, photography, theatre, dance)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handicrafts / domestic repairs / gardening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Car/motorcycle repairs or maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Take part in active sport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visit sporting events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cinema visits, visits to pop concerts, dance events, clubs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visits to cultural events e.g. concerts, theatre, exhibitions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**19. Are you currently engaged 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
- Skip to question 29!**
-
- Approaching retirement part-time employment
with zero working hours
- Skip to question 68!**
-
- Doing your compulsory military service
 - Doing community service as substitute for compulsory
military service ("Zivildienst") / Voluntary social year
 - Not employed

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

- No, definitely not
 - Probably not
 - Probably
 - Yes, definitely
- Skip to question 71!**

21. 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

22. 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

**23. 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

24. 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 26!

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

hours per week

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

Yes

No

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

Yes
↓

No



Skip to question 71!

28. Have you received a voucher „Vermittlungsgutschein“, and if so what was the value?

Yes



value:

euros

No

Skip to question 71!

Your current employment

29. Did you change your job or start a new one after December 31, 2006?

Yes
↓

No


Skip to question 42!

30. When did you start your current position?

2007, in the month

2008, in the month

**31. Now a few questions about your new position.
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 started up with paid employment again
after not having been employed for a while

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 

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

Yes, as an one-person company
("Ich-AG")


Yes, from other public programs

No

**32. 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

33. 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


34. Was the Employment Office involved in finding the job?

Yes, directly

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

No

35. 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, for example, "police chief" 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!

36. 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

37. 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

38. 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

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

Yes

No

40. 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!

41. 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

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

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

Since

--	--


--	--	--	--

 month year

43. Is this work temporary or on a contractual basis?

Yes No


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

Unlimited period  Skip to question 46!
 Limited period
 Not applicable, do not have an employment contract

45. 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

46. 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")

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

Number of employees
 None 1 – 9 10 and more

Self-employed farmer
 Free-lance professional, independent scholar
 Other self-employed
 Family member working for self-employed relative

Apprentices / trainees and interns:

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

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)

Civil servant

(including judges and professional soldiers)

Lower level
 Middle level
 Upper level
 Executive level

47. Is your own performance regularly assessed by a superior as part of an agreed procedure?

Yes

No ➔

Skip to question 49!

48. Does this performance assessment influence ...

Yes

No

Don't know

- your monthly gross salary?
- a yearly bonus?
- future salary increases?
- potential promotion?

49. How was it in the previous twelve months in your occupational area:
Has the labor force increased, decreased, or remained the same?

Increased

Decreased

No change

Don't know

50. 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

51. 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?

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

Yes ➔

Skip to question 54!

No



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

Every day

Once a week

Less often

54. 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

55. 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

56. How many days do you usually work per week?

days

Not applicable, because ...

- the number of days is not fixed
- the number of days changes from week to week ..

57. And how many hours do you work on a typical workday?

, hours Varying, irregular

58. At what time do you generally start work?

 Varying
Hour Minute

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

, hours per week No set hours

60. 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 63!



61. 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

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

Yes

No

63. Are you currently observing the legal regulation concerning part-time work while approaching retirement?

Yes ⇨ Reduced working-hours

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


64. Do you work overtime?

Yes


No
 Not applicable, because I am self-employed

Skip to Question 68!


65. Can you also collect this over-time 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



66. 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

67. 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

68. 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

69. 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:

70. 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!

71. 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 77!

72. Which occupation is that? Please be as specific as possible.

Please write the German term only!

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

days a month

74. How many hours on average on these days?

hours a day

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

months a year


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


euros

77. 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 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 type="text"/> euros
Unemployment pay ("Arbeitslosengeld")	<input type="checkbox"/>	<input type="text"/> euros
Unemployment pay II / social assistance payments ("Arbeitslosengeld II / Sozialgeld")	<input type="checkbox"/>	 Please include the amount in the household questionnaire!
Support for further training and education ("Unterhaltsgeld bei Fortbildung") / Transition pay ("Übergangsgeld")	<input type="checkbox"/>	<input type="text"/> euros
Early retirement pay from the former employer	<input type="checkbox"/>	<input type="text"/> euros
Maternity benefit during maternity leave ("Elterngeld", "Erziehungsgeld")	<input type="checkbox"/>	<input type="text"/> euros
BAföG (state support for higher education), grants, vocational training support	<input type="checkbox"/>	<input type="text"/> euros
Pay for compulsory military service, community service in place of military service ("Zivildienst")	<input type="checkbox"/>	<input type="text"/> euros
Alimony or child support from your former partner (including temporary child support from the state before the question of child support is decided)	<input type="checkbox"/>	<input type="text"/> euros
Other types of financial assistance from persons who do not live in the household	<input type="checkbox"/>	<input 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.

78. Various things can be important for various people.

Are the following things currently ... for you?

Very important, important, less important or not at all important?

Very Important Important Less important Not at all important


Afford to buy something for yourself	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>
Be there for others	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>
Be self-fulfilled	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>
Be successful in ones career	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>
Own a house	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>
Have a happy marriage / relationship	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>
Have children	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>
Be politically and/or socially involved	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>
See the world and/or travel extensively	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>


79. To what extent do the following statements apply to you?

Completely More or less Not so much Not at all

When I think about the future, I'm actually quite optimistic	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>
I often feel lonely	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>
I don't really enjoy my work	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>
Things have gotten so complicated that I almost can't manage anymore	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>	=====	<input type="checkbox"/>

80. The following questions deal with further education for your work or profession for people under 65.


Are you 65 or older?  Skip to question 88!

under 65? 


81. There are different opportunities available if one wants to educate himself further. Think back on the last three years. Have you in that time period done any of the following to further your professional education?

	Yes	No	
Regularly read scientific or professional publications	<input type="checkbox"/>	<input type="checkbox"/>	
Attended professional conventions or congresses	<input type="checkbox"/>	<input type="checkbox"/>	
Participated in professionally oriented courses, including those which are still in progress	<input type="checkbox"/>	<input type="checkbox"/>	 Skip to question 84!

82. How many courses for further professional education have you attended in the last three years?

 *Include also those courses which were completed within the last three years, even if they began before that time. Further information in question 83.*

Number:



Continue with question 83!

83. We would now like to know more about the courses you attended.
 If you have attended several courses in the last three years,
 please give information for the last three only.

Most recent (or current) course 1	The course before that 2	The course before that 3
--------------------------------------------	-----------------------------------	-----------------------------------

a) In what year and what month did the course start?

Year:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Month:	<input type="text"/>	<input type="text"/>	<input type="text"/>

b) How long did (does) the course last?

Days:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Weeks:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Months:	<input type="text"/>	<input type="text"/>	<input type="text"/>

c) About how many hours of instructions took place each week?

Number of hours:	<input type="text"/>	<input type="text"/>	<input type="text"/>
------------------	----------------------	----------------------	----------------------

It was a correspondence course

d) What was the purpose of this instruction?

 Check all that apply!

Retraining for a different profession or job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Introduction to a new job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Qualification for professional advancement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adjusting to new demands in my current job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

e) Did the course take place during working hours?

Yes, during working hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, outside of working hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable, because I was unemployed or not in gainful employment at the time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

f) How high were the costs that you had to pay yourself?

Amount	Euros	<input type="text"/>	<input type="text"/>	<input type="text"/>
I didn't have to pay anything myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Most recent (or current) course 1	The course before that 2	The course before that 3
--------------------------------------------	-----------------------------------	-----------------------------------

g) Who held the course?

My employer, company, office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A special training institution belonging to the company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adult Education Center ("Volkshochschule")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional organization, trade guild	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trade Union	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Church	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A private training institution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

h) Did you receive financial support from your employer, from the Employment Office ("Arbeitsamt"), or from another source for this instruction?

Yes, from my employer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, from the Employment Office ("Arbeitsamt")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, from the social welfare office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, from another source	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

j) Did you receive a participation certificate which you would include in job applications in the future?

Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

k) Looking back, was this further education worth it for you professionally?


Very much so	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Somewhat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not at all	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I don't know, can't tell yet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

l) To what extent could you use the newly acquired skills if you got a new job in a different company?

Not at all	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Only to a limited extent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For the most part	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How were things last year?

84. Did you end school, vocational training, or university education after December 31, 2006?

Yes


No 


Skip to question 88!

When?

2007, in the month

2008, in the month

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

Yes


No 

Skip to question 88!

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

In Germany

In another country

87. 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

Please specify:

Higher Education Degree

Fachhochschule

University, technical university, other higher education institution

Please also state the degree and subject:

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

88. Did you leave a job after December 31, 2006 (one which you also had before this date)?

Yes 

No 

Skip to question 94!

89. When did you leave the last job?

2007, in the month

2008, in the month

90. How long were you employed in that position?

years months

91. 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

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

Yes 

How much in total?

euros

No

93. 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

94. And now think back on all of 2007.

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 ...	2007											
	Jan.	Febr.	Mar.	April	May	June	July	Aug.	Sept.	Okt.	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"/>
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												
Voluntary Social Year												
housewife, houseman	<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 2007

95. We have already asked for your current income.

In addition, please state what sources of income you received in the past calendar year 2007, 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 2007 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 2007	Months in 2007	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"/>	<input type="text"/>
Income from self-employment, free-lance work	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
Additional employment	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
Own pension	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
Widower's pensin, orphan's pension	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
Unemployment pay ("Arbeitslosengeld")	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
Unemployment pay II / social assistance payments ("Arbeitslosengeld II" / Sozialgeld")	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
Support for further training and education ("Unterhaltsgeld bei Fortbildung") / Transition pay ("Übergangsgeld")	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
Maternity benefit during maternity leave ("Elterngeld", "Erziehungsgeld")	<input type="checkbox"/>	<input type="text"/> <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"/>	<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"/>	<input type="text"/>
Alimony or child support from your former partner (including temporary child support from the state before the question of child support is decided)	<input type="checkbox"/>	<input type="text"/> <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"/>	<input type="text"/>

Additional questions 96 - 97

Additional question 98

Additional question 98

Please include the amount in the household questionnaire!

I received no income from the sources named in 2007

Skip to question 99!

Additional questions for employed persons

96. Did you receive any of the following additional payments from your employer last year (2007)?
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"/>		


97. Last year (2007), 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

Additional question for retirees, pensioners

98. Who pays your pension and how high were the monthly payments in 2007?

 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	
Deutsche Rentenversicherung (formerly LVA, BfA, Knappschaft)	<input type="text"/>	euros	<input type="text"/>	euros
Beamtenversorgung	<input type="text"/>	euros	<input type="text"/>	euros
Kriegsopferversorgung	<input type="text"/>	euros	<input type="text"/>	euros
Unfallversicherung (z.B. der Berufsgenossenschaft)	<input type="text"/>	euros	<input type="text"/>	euros
Zusatzversorgung des öffentlichen Dienstes (z.B. VBL)	<input type="text"/>	euros	<input type="text"/>	euros
Betriebliche Altersversorgung (z.B. Werkspension)	<input type="text"/>	euros	<input type="text"/>	euros
Private pension scheme	<input type="text"/>	euros	<input type="text"/>	euros
Other: <input type="text"/>	<input type="text"/>	euros	<input type="text"/>	euros

Health and Illness

99. How would you describe your current health?

- Very good
- Good
- Satisfactory
- Poor
- Bad

100. 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

101. 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

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

Always Often Some-
times Almost Never

- 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? =====

**103. 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

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

Very much

Much

Not so much

Not at all

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

	Regularly	Occasio- nally	Seldom	Never
Beer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wine, Champagne	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spirits (schnaps, brandy etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mixed drinks (alcopops, cocktails etc.).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

106. 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

107. How tall are you?

If you don't know, please estimate.

cm

108. How many kilograms do you currently weigh?

If you don't know, please estimate.

kg

109. 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?

110. 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

111. And how was that with regards to stays in the hospital?
Were you ever admitted to a hospital for at least one night in 2007?

Yes
↓

No ➔

Skip to question 113!

112. 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 2007?

times

113. If you were employed in 2007:

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 2007 ➔

Skip to question 115!

114. How many days were you not able to work in 2007 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

115. 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

116. Have you changed to a different health insurance provider after December 31, 2006?

Yes No

117. 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 118.

In compulsory health insurance Almost exclusively privately insured **Skip to question 124!**

118. Which of the following is your health insurance provider?

AOK TKK GEK
Barmer IKK Knappschaft...
DAK KKH LKK

Company health insurance .. Other please state:

119. 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")?

120. 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 121!**

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

121. Do you have additional private health insurance?

Yes 

No 

Skip to question 129!

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

euros per month

Don't know

123. 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 129!

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

Other family member 

Skip to question 129!

Your own 

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

euros per month


Don't know

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

Just for me

In additional to myself persons are covered
Number

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

Yes 

No 

Skip to question 129!

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

Co-payment of %

General deductible in the amount of euro

Attitude and opinions

129. Generally speaking, how much are you interested in politics?

- Very much
- Much
- Not so much
- Not at all

130. 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 132!

131. Toward which party do you lean?

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

And to what extent?

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

132. 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"/> |
| Your health | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Environmental protection | <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"/> |
| Consequences of the expanding the EU to the east | <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

133. 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 136!

134. How is it for you personally:

How well do you speak and write German?

How well do you speak and write the language of your country of origin, or the language of your parents?

Speaking Writing

Speaking Writing

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

135. 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

136. Were you born in Germany?

Yes

No

137. Is your nationality German?

Yes ⚡

No ➔

Skip to question 140!

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

Yes ➔ please state:

No

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

Since birth ➔

Skip to question 148!

At a later date ➔

Skip to question 142!

140. What is your citizenship? please state:

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

- Yes, definitely
- Yes, probably
- Probably not
- Definitely not



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

- Often
- Seldom
- Never

143. 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 ..



144. Do you want to stay in Germany forever?

- Yes  Skip to question 146!
- No 

145. 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

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

- Yes 
- No  Skip to question 148!

147. 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

148. Your sex and year of birth:

male

female

Year of birth:

1	9		
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149. What is your marital status?

Married, living together with my spouse →

Skip to question 151!

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

Single

Divorced

Widowed

150. Are you in a serious/permanent relationship?

Yes
↓

No →

Skip to question 153!

Does your partner live in the same household?

Yes ⇒

First name:

No

151. 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

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

Me

My partner

Both of us equally

153. Have you personally given payments or support during the last year (2007) to relatives or other persons outside of your household?

☞ Please check all appropriate answers!

			Where does the recipient live?	
			Ger- many	Abroad
To parents / step parents	<input type="checkbox"/> ⇒	<input style="width: 100px;" type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
To my children (also step children)	<input type="checkbox"/> ⇒	<input style="width: 100px;" type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
To spouse or ex-spouse	<input type="checkbox"/> ⇒	<input style="width: 100px;" type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
To other relatives	<input type="checkbox"/> ⇒	<input style="width: 100px;" type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
To other persons not related to me	<input type="checkbox"/> ⇒	<input style="width: 100px;" type="text"/> euros	<input type="checkbox"/>	<input type="checkbox"/>
No, I have not given any payment or support	<input type="checkbox"/>			


154. Has your family situation changed after December 31, 2006?

Please indicate if any of the following apply to you and if so, when this change occurred.

Yes in 2007 in 2008
 in month in month

I married	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
I moved in with my partner	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Had a child	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
A child moved in	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
My son or daughter left the household	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
I separated from my spouse / partner	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
I got divorced	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
My spouse / partner died	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Father deceased	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Mother deceased	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Child deceased	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Other: <input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
There have been no changes in my family	<input type="checkbox"/>		

155. 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?

=
=
=
=
=
=
=
=
=
=
=

0 1 2 3 4 5 6 7 8 9 10

completely dissatisfied completely satisfied

And how do you think you will feel in one year?

=
=
=
=
=
=
=
=
=
=
=

0 1 2 3 4 5 6 7 8 9 10

completely dissatisfied completely satisfied

And how do you think you will feel in five years?

=
=
=
=
=
=
=
=
=
=
=

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