

SECTION A: INTRODUCTION/SCREENER

A1. Hello, may I please speak to (SAMPLE MEMBER). My name is (NAME) and I'm calling from IMPAQ International. Is this (SAMPLE MEMBER)?

SAMPLE MEMBER AVAILABLE.....01

SAMPLE MEMBER NOT AVAILABLE.....00→

When would be a good time to reach (SAMPLE MEMBER)?
RECORD INFORMATION ON CONTACT SHEET. THANK PERSON AND TERMINATE.

A2. Hello, my name is (NAME), and I'm calling from IMPAQ International in Columbia, Maryland. We are conducting a survey on behalf of the U.S. Department of Labor with people who applied to Project GATE. I would like to ask you some questions about your experiences with self-employment and self-employment services.

Your opinions and experiences are extremely important. We would appreciate your participation in this study, and in return can offer you \$15 for your time.

Your responses are private and will not be shared with the U.S. Department of Labor, Staff at Project GATE, or any other agency, except as required by law.

May we begin?

PROBE: You may remember that you became a participant in this study between 2009 and 2011.

OK TO CONTINUE.....01

NOT A GOOD TIME FOR SM.....00→

When would be a good time to do the interview? RECORD APPT. DATE AND TIME ON CONTACT SHEET. THANK SM AND TERMINATE.

REFUSED.....r

R. HESITATES TO DO SURVEY.....h

R. HAS QUESTIONS ABOUT THE STUDY.....q

→ GO TO INFORMATION SCREEN

A3. I just need to verify that I am speaking with the correct person. What is your date of birth?

(01-12) (01-31) (1900-1990)
|_____| / |_____| / |_____|-|_____|
MONTH DAY YEAR

REFUSED.....r

DON'T KNOW.....d

→ GO TO A5

A4.

PROGRAMMER: CHECK DOB. DOES THE DOB IN A3 MATCH THE DOB IN THE SAMPLE FILE?

YES.....01 → **GO TO B1**

NO/NO DOB.....00

A5.

And what are the last 4-digits of your Social Security number?

DON'T KNOW.....d → **GO TO A7**

REFUSED.....r → **GO TO A7**

A6.

PROGRAMMER: CHECK SSN. DO THE LAST 4 DIGITS OF THE SSN IN A5 MATCH THE SSN IN THE SAMPLE FILE?

YES.....01 → **GO TO B1**

NO/NO SSN.....00 → **GO TO A7**

A7.

I'm sorry. I need to check my records before I can interview you. Is this the best time to reach you in the future?

YES.....01 → **THANK SM AND TERMINATE.
RECORD TIME AND DATE ON
CONTACT SHEET.**

NO.....00 → **What is the best time to reach
you? RECORD TIME AND
DATE ON CONTACT SHEET.
THANK SM AND TERMINATE.**

INFORMATION SCREEN. READ ONLY IF SAMPLE MEMBER REQUESTS MORE INFORMATION.

Answers to Commonly Asked Questions¹

“I didn’t participate in GATE. I’m no longer in the GATE Program.”

We are calling individuals who applied for the GATE program, even if they never participated or are no longer participating. Your responses and views are important in that they help us gain perspective from those who no longer or never participated.

“I did not like the GATE Program.”

I understand. Your comments will be especially important to the study. The United States Department of Labor wants to have feedback from individuals who were both satisfied and not satisfied with their experiences in the GATE Program.

“I didn’t start my own business.”

That’s OK. Your responses and views are important to the study. The United States Department of Labor wants to have feedback from individuals who did not start their own business as well as those that did.

“How did you get my name?”

We are calling everyone who applied for the GATE Program. You might remember that the application materials you signed mentioned that we would be calling you for an interview.

“What happens if I don’t participate?”

Your participation is voluntary and will not affect your eligibility to receive any services or benefits. However, your experiences and opinions are very important to the success and improvement of programs like GATE.

“I don’t have the time.”

We can do the survey in more than one call, if necessary. I’d like to begin now and do as much as we can. Then, if you need to stop, I can call you back at your convenience to finish. Or, I can schedule a more convenient time to call you back. Which do you prefer?

“I’m not interested.”

Let me reassure you that we are not selling anything. We’re interested in your opinions and experiences. The information you provide will help address the special needs of individuals who want to start their own business. There are no right or wrong answers. Any information you give me will be held in the strictest confidence.

“Are my answers confidential?”

Any information you give me will be held in the strictest confidence and will be used only for the

¹ **Programmer:** These questions and answers should be available to interviewers any point in the questionnaire

purposes of the study. Your answers will be combined with those of others and your name will never be used in reporting the results of the study. All personally identifiable data will be kept private except as required by law. Your answer to questions will not affect your eligibility for any public program.

“How long will this take?”

The length of the interview is different for different people, but it usually takes 30 minutes.

“What is the purpose of the study?”

Our goal is to assess whether programs like GATE are successful in meeting the needs of individuals who want to start their own business. If the GATE Program is successful, the U.S. Department of Labor may decide to expand the program.

“What information do you intend to collect?

We will collect information about your experiences in receiving self-employment services, your experiences with self-employment and other employment, and your receipt of unemployment insurance and public assistance.

SECTION B: SELF-EMPLOYMENT SERVICES

This first series of questions is about self-employment services.

B0. **[FOR CONTROL GROUP MEMBERS ONLY]** Have you, a business partner, or a family member received any GATE services?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO B3**

B1. Prior to when you applied for the Growing America Through Entrepreneurship (GATE) program on (RANDOM ASSIGNMENT DATE), did you participate in any self-employment services or programs to help you start or grow your own business? Services or programs could include classes, workshops, seminars, one-on-one counseling or technical assistance, a peer support or networking group, or mentoring.

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO B3**

B2. Prior to applying for the GATE program on (RANDOM ASSIGNMENT DATE), what types of self-employment services or programs did you participate in? Did you participate in . . .

	YES	NO	DON'T KNOW	REFUSED
a. classes, workshops or seminars?.....	01	00	08	07
b. one-on-one counseling or technical assistance?.....	01	00	08	07
c. a peer support/networking group?.....	01	00	08	07
d. mentoring?.....	01	00	08	07
e. Any other types of self-employment programs? (SPECIFY).....	01	00	08	07

B3. Since (RANDOM ASSIGNMENT DATE), have you attended any classes, workshops, or seminars on topics related to your business?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO B6**

B4. How many individual sessions of these classes, workshops, or seminars did you attend?

|__|__| NUMBER OF CLASSES/SESSIONS

DON'T KNOW.....	98
REFUSED.....	97

B5. On average, how long were the individual sessions of these classes, workshops, or seminars?

|__|__|__| LENGTH

MINUTES.....	01
HOURS.....	02
DON'T KNOW.....	08
REFUSED.....	07

B5a. What organizations provided these classes, workshops, or seminars?
(Code all that apply) (Options/Drop down list for other responses work force centers)

NAME(S) _____

Other Specify.....	94
DON'T KNOW.....	98
REFUSED.....	97

B6. Since applying to the GATE Program in (RANDOM ASSIGNMENT DATE), have you received any **one-on-one** counseling or technical assistance on starting or expanding your business?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO B9**

B7. How many one-on-one counseling or technical assistance sessions have you attended since (RANDOM ASSIGNMENT DATE)?

 | | NUMBER OF SESSIONS

DON'T KNOW.....	98
REFUSED.....	97

→ **GO TO B8a**

B8. On average, how long did each one-on-one counseling or technical assistance session last?

 | | LENGTH

MINUTES.....	01
HOURS.....	02
DON'T KNOW.....	08
REFUSED.....	07

B8a. What organizations provided you with one-on-one counseling or technical assistance? (Code all that apply) (Options/Drop down list for other responses)
NAME(S) _____

Other Specify.....	94
DON'T KNOW.....	98
REFUSED.....	97

B9. Since (RANDOM ASSIGNMENT DATE), have you attended any peer support group for self-employed persons or persons interested in becoming self-employed?

PROBE: By this we mean groups of individuals who are self-employed or trying to start a business who meet to share ideas, strategies, and information.

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO B12**

B10. How many support group sessions have you attended since (RANDOM ASSIGNMENT DATE)?

|__|__| NUMBER OF SESSIONS

DON'T KNOW.....	98
REFUSED.....	97

→ **GO TO B11a**

B11. On average, how long did each of these sessions last?

|__|__| LENGTH

MINUTES.....	01
HOURS.....	02
DON'T KNOW.....	08
REFUSED.....	07

B11a. What organizations provided a peer support group?
(Code all that apply) (Options/Drop down list for other organizations for peer pressure groups)

NAME(S) _____

Other Specify.....	94
DON'T KNOW.....	98
REFUSED.....	97

B12. Since (RANDOM ASSIGNMENT DATE), have you worked with an experienced business-owner or someone else who could act as your mentor?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

] → **GO TO B15**

B13. About how many meetings, in total, have you had with a mentor since (RANDOM ASSIGNMENT DATE)?

|__|__| NUMBER OF MEETINGS

DON'T KNOW.....	98
REFUSED.....	97 → GO TO B14a

B14. On average, how long did each of these meetings last?

|__|__| LENGTH

MINUTES.....	01
HOURS.....	02
DON'T KNOW.....	08
REFUSED.....	07

B14a. What organizations provided you with a mentor?

(Code all that apply) (Options/Drop down list for other organizations that could provide mentor)

NAME(S) _____

Other Specify.....	94
DON'T KNOW.....	98
REFUSED.....	97

B15. Since (RANDOM ASSIGNMENT DATE), have you received any other types of self-employment services that we haven't already talked about?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO B17**

B16. What were they?

RECORD VERBATIM _____

B16a. What organizations provided you with these other services?
(Code all that apply) (Options/Drop down list for other organizations that could provide services)

NAME(S) _____

Other Specify	94
DON'T KNOW.....	98
REFUSED.....	97

B16b. **PROGRAMMER:**
IF B3, B6, B9, B12 or B15 = 1, GO TO B17.
OTHERWISE GO TO B20.

B17. Thinking about all the services you have received **since applying to the GATE Program** (RANDOM ASSIGNMENT DATE), about how much did you pay in total for these services?

\$ |____|,|____|____|.____| TOTAL AMOUNT

Services were free.....	01
Paid for services.....	02
DON'T KNOW.....	08
REFUSED.....	07

B18. NO B18 IN THIS VERSION

B19. NO B19 IN THIS VERSION

B20. **PROGRAMMER: IF B3, B6, B9, B12 and B15 = 0, GO TO B21.
OTHERWISE GO TO B22.**

B21. Why didn't you participate in any self-employment services or programs?

CODE ALL THAT APPLY

DIDN'T THINK SERVICES WOULD BE HELPFUL.....	01
SERVICES LOCATED TOO FAR AWAY.....	02
TIMES INCONVENIENT.....	03
DIDN'T WANT TO WAIT FOR CLASSES TO BEGIN.....	04
DECIDED TO POSTPONE SELF-EMPLOYMENT.....	05
DECIDED NOT TO PURSUE SELF-EMPLOYMENT AT ALL.....	06
TOO BUSY.....	07
OTHER (SPECIFY).....	08

B22. Since (RANDOM ASSIGNMENT DATE), have you developed or revised a written business plan?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ GO TO B26

B23. Did you receive help writing your business plan from someone in a self-employment program? Please include a counselor, a mentor, or someone in a support group or workshop.

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ GO TO B26

B24. **PROGRAMMER:
IF SAMPLE MEMBER IS IN TREATMENT GROUP, GO TO B25.
IF SAMPLE MEMBER IS IN CONTROL GROUP, GO TO B26.**

B25. Did the GATE Program provide any help writing your business plan since (RANDOM ASSIGNMENT DATE)?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

B26. Since (RANDOM ASSIGNMENT DATE), have you applied for a business loan?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO B31a**

B27. To how many different institutions or programs have you applied for loans since (RANDOM ASSIGNMENT DATE)?

|__|__| NUMBER OF INSTITUTIONS

DON'T KNOW.....	98
REFUSED.....	97

B29. When applying for loans, did you receive any help from someone in a self-employment program?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO B31a**

B30.

PROGRAMMER:

**IF SAMPLE MEMBER IS TREATMENT GROUP, GO TO B31.
IF SAMPLE MEMBER IS NOT IN TREATMENT GROUP, GO TO B31a.**

B31. Did the GATE Program provide any of this help?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

B31a.

PROGRAMMER:

**IF B3, B6, B9, B12 AND B15 = 0, d OR r, GO TO B36.
OTHERWISE CONTINUE.**

**PROGRAMMER NOTE:
IF B23 = YES SKIP B32a**

B32. I am going to read a list of ways self-employment services may have helped you. Did self employment services help you a lot, somewhat, or not at all in . . .

	A LOT	SOME- WHAT	NOT AT ALL	DON'T KNOW	REFUSED
a. Developing a business plan.....	01.....02.....03.....08...				07
b. Applying for loans.....	01.....02.....03.....08...				07
c. Deciding whether to pursue self-employment.....	01.....02.....03.....08...				07
d. Refining your business idea.....	01.....02.....03.....08...				07
e. Dealing with credit issues.....	01.....02.....03.....08...				07
f. Developing your marketing strategy.....	01.....02.....03.....08...				07
g. Dealing with legal issues.....	01.....02.....03.....08...				07
h. Dealing with accounting issues.....	01.....02.....03.....08...				07
i. Hiring and dealing with employees.....	01.....02.....03.....08...				07
j. Networking.....	01.....02.....03.....08...				07
k. Using computers and other technology.....	01.....02.....03.....08...				07
l. Dealing with clients.....	01.....02.....03.....08...				07
m. Providing psychological support.....	01.....02.....03.....08...				07

B33. Did self-employment services help you in any other ways?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO B34**

B33a. In what other ways did these services help you?

RECORD VERBATIM: _____

B34. Thinking about **all** of the self-employment services that you have received since (RANDOM ASSIGNMENT DATE), how would you rate the overall usefulness of the services you have received? Were they . . .

Very useful,.....	01
Somewhat useful,.....	02
Not very useful, or.....	03
Not at all useful.....	04
DON'T KNOW.....	08
REFUSED.....	07

B34a. **PROGRAMMER:** HAS RESPONDENT RECEIVED MORE THAN ONE TYPE OF SELF-EMPLOYMENT SERVICE? DO AT LEAST TWO OF THE FOLLOWING QUESTIONS EQUAL "01" (B3, B6, B9, B12, OR B15)? IF SO, INSERT NAMES OF SERVICES INTO B35. IF NONE OR ONLY ONE SERVICE RECEIVED, GO TO B36.

B35. You mentioned previously that **since** applying to the GATE Program (RANDOM ASSIGNMENT DATE), you had received (NAMES OF SELF-EMPLOYMENT SERVICES RECEIVED – REFER TO QUESTIONS B3, B6, B9, B12 AND B 15). Please tell me which one service has been most useful to you.

CLASSES OR WORKSHOPS.....	01
ONE-ON-ONE COUNSELING OR TECHNICAL ASSISTANCE.....	02
PEER SUPPORT/NETWORKING GROUP.....	03
MENTORING.....	04
OTHER (SPECIFY).....	05
DON'T KNOW.....	08
REFUSED.....	07

B36. Are there any services that you didn't receive or didn't receive enough of that could have helped you in starting or growing your own business?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO C1**

B37. What services would have been useful to you?

CODE ALL THAT APPLY

CLASSES OR WORKSHOPS.....	01
ONE-ON-ONE COUNSELING OR TECHNICAL ASSISTANCE.....	02
PEER SUPPORT/NETWORKING GROUP.....	03
MENTORING	04
LOANS.....	05
OTHER (SPECIFY).....	06
DON'T KNOW.....	08
REFUSED.....	07

SECTION C: SELF-EMPLOYMENT EXPERIENCE

C1. The next series of questions are about your experiences with self-employment. Why were you interested in being self-employed?

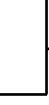
PROBE: Were there any other reasons?

CODE ALL THAT APPLY

TO INCREASE INCOME.....	01
COULD NOT GET A JOB WORKING FOR SOMEONE ELSE.....	02
WANTED TO BE MY OWN BOSS/ TIRED OF WORKING FOR SOMEONE ELSE.....	03
TO GET WORK NOT AVAILABLE ELSEWHERE IN THE JOB MARKET.....	04
FLEXIBILITY IN DAILY SCHEDULE.....	05
POTENTIAL TO CAPITALIZE ON ONE'S EXISTING SKILLS.....	06
TO HAVE MORE FREEDOM TO MEET FAMILY RESPONSIBILITIES.....	07
TO BRING NEW IDEAS TO THE MARKETPLACE/ TO MEET A NEED IN THE COMMUNITY.....	08
BEING SELF-EMPLOYED WAS ALWAYS MY DREAM.....	09
EARLY RETIREMENT.....	10
OTHER (SPECIFY).....	11
DON'T KNOW.....	98
REFUSED.....	97

C2. Prior to applying for the GATE Program in (RANDOM ASSIGNMENT DATE), had you been self-employed, that is, owned your own business?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07



GO TO C4

C2a. Prior to applying for the GATE Program in (RANDOM ASSIGNMENT DATE), how many businesses had you owned?

|__| NUMBER OF BUSINESSES

NONE.....	00
DON'T KNOW.....	98
REFUSED.....	97

C3. Thinking about the time you were self-employed before (RANDOM ASSIGNMENT DATE), about how long, in total, were you self-employed?

RECORD LENGTH AND CODE TIME UNIT.

|__| LENGTH

WEEKS.....	01
MONTHS.....	02
YEARS.....	03
DON'T KNOW.....	08
REFUSED.....	07

C4. **Since applying to the GATE Program** in (RANDOM ASSIGNMENT DATE) have you been self-employed, that is, owned your own business?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07



GO TO C55

C4a. Are you currently self-employed?

YES.....	01 ==> GO TO C4d
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

C4b. Would you like to start your own business?

YES.....	01
----------	----

NO.....	00 ==> GO TO C4d
DON'T KNOW.....	08
REFUSED.....	07

C4c. Are you taking any specific actions to start your own business?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

C4d. How many businesses have you owned since (RANDOM ASSIGNMENT DATE)?
Please include all businesses owned prior to (RANDOM ASSIGNMENT DATE) that
you still own and also include all businesses that you have owned since (RANDOM
ASSIGNMENT DATE)

|__|__| NUMBER OF BUSINESSES

NONE.....	00
DON'T KNOW.....	98
REFUSED.....	97

	CURRENT/MOST RECENT BUSINESS	SECOND BUSINESS
		NAME OF BUSINESS
C5. The next questions are about the business(es) you have owned since (RANDOM ASSIGNMENT DATE). Please tell me about your (most recent) self-employment experience. What was the name of the business? RECORD NAME OF BUSINESS ACROSS THE TOP OF THE GRID FIRST. THEN ASK C6-C20a DOWN FOR EACH BUSINESS. PROGRAMMER: IF C4a=01 DON'T ASK C7-C9 FOR EACH BUSINESS	DON'T KNOW.....08 REFUSED.....07	DON'T KNOW.....08 REFUSED.....07
C5a. What other businesses have you owned since (RANDOM ASSIGNMENT DATE)? RECORD AS NEXT BUSINESS IN COLUMN HEADER		
C6. In what month and year did you start operating (THIS BUSINESS) as the owner? IF DK PROBE FOR BEST ESTIMATE	MONTH / YEAR DON'T KNOW.....98/9998 REFUSED.....97/9997	MONTH / YEAR DON'T KNOW.....98/9998 REFUSED.....97/9997
C7. In what month and year did you stop operating (THIS BUSINESS) as the owner? IF DK, PROBE FOR ESTIMATE	MONTH / YEAR STILL OPERATING BUSINESS.....(GO TO C10).....96 DON'T KNOW.....98/9998 REFUSED.....97/9997	MONTH / YEAR STILL OPERATING BUSINESS.....(GO TO C10).....96 DON'T KNOW.....98/9998 REFUSED.....97/9997
C8. Why did you stop operating (THIS BUSINESS) as the owner?	CODE ALL THAT APPLY BUSINESS DID NOT MAKE ENOUGH INCOME.....01 GOT A BETTER OPPORTUNITY.....02 HOURS TOO LONG.....03 INCOME TOO UNCERTAIN.....04 ILLNESS/DISABILITY.....05 PERSONAL REASONS.....06 OTHER (SPECIFY).....07 DON'T KNOW.....98 REFUSED.....97	CODE ALL THAT APPLY BUSINESS DID NOT MAKE ENOUGH INCOME.....01 GOT A BETTER OPPORTUNITY.....02 HOURS TOO LONG.....03 INCOME TOO UNCERTAIN.....04 ILLNESS/DISABILITY.....05 PERSONAL REASONS.....06 OTHER (SPECIFY).....07 DON'T KNOW.....98 REFUSED.....97
C9. What did you do when you stopped operating (THIS BUSINESS) as the owner?	CODE ALL THAT APPLY TOOK JOB WORKING FOR SOMEONE ELSE.....01 STARTED ANOTHER BUSINESS.....02 LOOKED FOR WORK.....03 PARTICIPATED IN EDUCATION/ TRAINING PROGRAM.....04 TOOK CARE OF CHILD, FAMILY MEMBER, OR SICK RELATIVE.....05 RETIRIED.....06 WAS SICK.....07 OTHER (SPECIFY).....08 DON'T KNOW.....98 REFUSED.....97	CODE ALL THAT APPLY TOOK JOB WORKING FOR SOMEONE ELSE.....01 STARTED ANOTHER BUSINESS.....02 LOOKED FOR WORK.....03 PARTICIPATED IN EDUCATION/ TRAINING PROGRAM.....04 TOOK CARE OF CHILD, FAMILY MEMBER, OR SICK RELATIVE.....05 RETIRIED.....06 WAS SICK.....07 OTHER (SPECIFY).....08 DON'T KNOW.....98 REFUSED.....97

	CURRENT/MOST RECENT BUSINESS	SECOND BUSINESS
C10. What is/was the main product or activity (OF THIS BUSINESS)? RECORD VERBATIM	_____	_____
	DON'T KNOW.....d REFUSED.....r	DON'T KNOW.....d REFUSED.....r
C11. Do/Did you work for just one client when you owned (THIS BUSINESS)?	YES.....01 NO.....00 DON'T KNOW.....08 REFUSED.....07	YES.....01 NO.....00 DON'T KNOW.....08 REFUSED.....07
C12. On average, how much are/were the monthly receipts or sales for (THIS BUSINESS)? IF DK, PROBE FOR ESTIMATE	\$ _____ , _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	\$ _____ , _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07
C13. On average, how much are/were the monthly expenses for (THIS BUSINESS)? Please include any payments to yourself or your family members. IF DK, PROBE FOR ESTIMATE	\$ _____ , _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	\$ _____ , _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07
C14. How many hours do/did you usually work in an average week at (THIS BUSINESS)? Please include any time you spend/spent working at home.	_____ NUMBER OF HOURS DON'T KNOW.....998 REFUSED.....997	_____ NUMBER OF HOURS DON'T KNOW.....998 REFUSED.....997
C15. What percent of your total household income is/was produced as a result of (THIS BUSINESS)? When thinking about your total household income please consider income from your spouse or other immediate family members living with you.	_____ PERCENT ALL.....100 DON'T KNOW.....998 REFUSED.....997	_____ PERCENT ALL.....100 DON'T KNOW.....998 REFUSED.....997
C16. Do/Did you pay yourself a regular salary from (THIS BUSINESS)?	YES.....01 NO.....(GO TO C18).....00 DON'T KNOW.....(GO TO C18).....08 REFUSED.....(GO TO C18).....07	YES.....01 NO.....(GO TO C18).....00 DON'T KNOW.....(GO TO C18).....08 REFUSED.....(GO TO C18).....07

<p>C17. Before taxes and other deductions, how much do/did you pay yourself from (THIS BUSINESS)? Do not include bonuses, profit distributions or any owner draws you may have taken.</p> <p>If R does not volunteer ASK: Was that per month, per year, or some other time period?</p>	\$ _____, _____ _____	\$ _____, _____ _____
	WEEK.....01	WEEK.....01
	MONTHLY.....02	MONTHLY.....02
	YEAR.....03	YEAR.....03
	EVERY TWO WEEKS.....04	EVERY TWO WEEKS.....04
	TWICE A MONTH (BI-MONTHLY).....05	TWICE A MONTH.....05
	DAY.....06	DAY.....06
	HOUR.....07	HOUR.....07
	OTHER (SPECIFY).....08	OTHER (SPECIFY).....08
	DON'T KNOW.....98	DON'T KNOW.....98
	REFUSED.....97	REFUSED.....97

THIRD BUSINESS	FOURTH BUSINESS	FIFTH BUSINESS
DON'T KNOW.....d REFUSED.....r	DON'T KNOW.....d REFUSED.....r	DON'T KNOW.....d REFUSED.....r
YES.....01 NO.....00 DON'T KNOW.....08 REFUSED.....0 7	YES.....01 NO.....00 DON'T KNOW.....08 REFUSED.....0 7	YES.....01 NO.....00 DON'T KNOW.....08 REFUSED.....0 7
\$ _____, _____	\$ _____, _____	\$ _____, _____
AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999.....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999.....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999.....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07
\$ _____, _____	\$ _____, _____	\$ _____, _____
AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999.....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999.....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999.....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07
_____ NUMBER OF HOURS	_____ NUMBER OF HOURS	_____ NUMBER OF HOURS
DON'T KNOW.....998 REFUSED.....99 7	DON'T KNOW.....998 REFUSED.....99 7	DON'T KNOW.....998 REFUSED.....99 7
_____ PERCENT	_____ PERCENT	_____ PERCENT
ALL.....100 DON'T KNOW.....998 REFUSED.....997	ALL.....100 DON'T KNOW.....998 REFUSED.....997	ALL.....100 DON'T KNOW.....998 REFUSED.....997
YES.....01 NO.....(GO TO C18).....00 DON'T KNOW.....(GO TO C18).....08 REFUSED.....(GO TO C18).....07	YES.....01 NO.....(GO TO C18).....00 DON'T KNOW.....(GO TO C18).....08 REFUSED.....(GO TO C18).....07	YES.....01 NO.....(GO TO C18).....00 DON'T KNOW.....(GO TO C18).....08 REFUSED.....(GO TO C18).....07
\$ _____, _____ ._____	\$ _____, _____ ._____	\$ _____, _____ ._____
WEEK.....01 MONTHLY.....02 YEAR.....03 EVERY TWO WEEKS.....04 TWICE A MONTH.....05 DAY.....06 HOUR.....07 OTHER (SPECIFY).....08	WEEK.....01 MONTHLY.....02 YEAR.....03 EVERY TWO WEEKS.....04 TWICE A MONTH.....05 DAY.....06 HOUR.....07 OTHER (SPECIFY).....08	WEEK.....01 MONTHLY.....02 YEAR.....03 EVERY TWO WEEKS.....04 TWICE A MONTH.....05 DAY.....06 HOUR.....07 OTHER (SPECIFY).....08

DON'T KNOW.....	98	DON'T KNOW.....	98	DON'T KNOW.....	98
REFUSED.....	97	REFUSED.....	97	REFUSED.....	97

	MOST RECENT BUSINESS	SECOND BUSINESS
C18. Have you taken or received any other income payments from (THIS BUSINESS), including bonuses, profit distribution, or owners draw?	YES.....01 NO.....(GO TO C18b).....00 DON'T KNOW.....(GO TO C18b).....08 REFUSED.....(GO TO C18b).....07	YES.....01 NO.....(GO TO C18b).....00 DON'T KNOW.....(GO TO C18b).....08 REFUSED.....(GO TO C18b).....07
C18a. Before taxes and other deductions, what was the total amount of these payments? IF DK, PROBE FOR ESTIMATE	\$ _____ , _____ . _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	\$ _____ , _____ . _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07
C18b. Do/Did you pay a spouse, domestic partner, or other relative living in your household a regular salary from (THIS BUSINESS)?	YES.....01 NO.....(GO TO C18d).....00 DON'T KNOW.....(GO TO C18d).....08 REFUSED.....(GO TO C18d).....07	YES.....01 NO.....(GO TO C18d).....00 DON'T KNOW.....(GO TO C18d).....08 REFUSED.....(GO TO C18d).....07
C18c. Before taxes and other deductions, how much do/did you pay them from (THIS BUSINESS)? Do not include bonuses, profit distributions, or any draws you may have given them. If R does not volunteer ask: Is/Was that per week, per month, per year, or some other time period?	\$ _____ , _____ . _____ WEEK.....01 MONTHLY.....02 YEAR.....03 EVERY TWO WEEKS.....04 TWICE A MONTH.....05 DAY.....06 HOUR.....07 OTHER (SPECIFY).....08 DON'T KNOW.....98 REFUSED.....97	\$ _____ , _____ . _____ WEEK.....01 MONTHLY.....02 YEAR.....03 EVERY TWO WEEKS.....04 TWICE A MONTH.....05 DAY.....06 HOUR.....07 OTHER (SPECIFY).....08 DON'T KNOW.....98 REFUSED.....97
C18d. Has a spouse, domestic partner, or other close relative living in your household received any other income payments from your business, including bonuses, profit distributions or owner's draw?	YES.....01 NO.....(GO TO C18f).....00 DON'T KNOW.....(GO TO C18f).....08 REFUSED.....(GO TO C18f).....07	YES.....01 NO.....(GO TO C18f).....00 DON'T KNOW.....(GO TO C18f).....08 REFUSED.....(GO TO C18f).....07
C18e. Before taxes and other deductions, what was the total amount of these payments? IF DK, PROBE FOR ESTIMATE	\$ _____ , _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	\$ _____ , _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07

THIRD BUSINESS	FOURTH BUSINESS	FIFTH BUSINESS
YES.....01 NO.....(GO TO C18b).....00 DON'T KNOW.....(GO TO C18b).....08 REFUSED.....(GO TO C18b).....07	YES.....01 NO.....(GO TO C18b).....00 DON'T KNOW.....(GO TO C18b).....08 REFUSED.....(GO TO C18b).....07	YES.....01 NO.....(GO TO C18b).....00 DON'T KNOW.....(GO TO C18b).....08 REFUSED.....(GO TO C18b).....07
\$, . AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	\$, . AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	\$, . AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07
YES.....01 NO.....(GO TO C18d).....00 DON'T KNOW.....(GO TO C18d).....08 REFUSED.....(GO TO C18d).....07	YES.....01 NO.....(GO TO C18d).....00 DON'T KNOW.....(GO TO C18d).....08 REFUSED.....(GO TO C18d).....07	YES.....01 NO.....(GO TO C18d).....00 DON'T KNOW.....(GO TO C18d).....08 REFUSED.....(GO TO C18d).....07
\$, . WEEK.....01 MONTHLY.....02 YEAR.....03 EVERY TWO WEEKS.....04 TWICE A MONTH.....05 DAY.....06 HOUR.....07 OTHER (SPECIFY).....08 DON'T KNOW.....98 REFUSED.....97	\$, . WEEK.....01 MONTHLY.....02 YEAR.....03 EVERY TWO WEEKS.....04 TWICE A MONTH.....05 DAY.....06 HOUR.....07 OTHER (SPECIFY).....08 DON'T KNOW.....98 REFUSED.....97	\$, . WEEK.....01 MONTHLY.....02 YEAR.....03 EVERY TWO WEEKS.....04 TWICE A MONTH.....05 DAY.....06 HOUR.....07 OTHER (SPECIFY).....08 DON'T KNOW.....98 REFUSED.....97
YES.....01 NO.....(GO TO C18f).....00 DON'T KNOW.....(GO TO C18f).....08 REFUSED.....(GO TO C18f).....07	YES.....01 NO.....(GO TO C18f).....00 DON'T KNOW.....(GO TO C18f).....08 REFUSED.....(GO TO C18f).....07	YES.....01 NO.....(GO TO C18f).....00 DON'T KNOW.....(GO TO C18f).....08 REFUSED.....(GO TO C18f).....07
\$, AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	\$, AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07	\$, AMOUNT GIVEN (LESS THAN OR EQUAL TO \$999,999).....01 MORE THAN 999,999.....02 DON'T KNOW.....08 REFUSED.....07

		MOST RECENT BUSINESS	SECOND BUSINESS
		YES.....(GO TO C20a).....01 NO.....00	YES.....(GO TO C20a).....01 NO.....00
C18f. PROGRAMMER: CHECK QUESTION C7, P. 15. IS SM STILL OPERATING BUSINESS?		YES.....(GO TO C20a).....01 NO.....(GO TO C20a).....00 DON'T KNOW.....(GO TO C20a).....08 REFUSED.....(GO TO C20a).....07	YES.....(GO TO C20a).....01 NO.....(GO TO C20a).....00 DON'T KNOW.....(GO TO C20a).....08 REFUSED.....(GO TO C20a).....07
C19. Did you sell (THIS BUSINESS?)		YES.....01 NO.....(GO TO C20a).....00 DON'T KNOW.....(GO TO C20a).....08 REFUSED.....(GO TO C20a).....07	YES.....01 NO.....(GO TO C20a).....00 DON'T KNOW.....(GO TO C20a).....08 REFUSED.....(GO TO C20a).....07
C20. How much did you sell (THIS BUSINESS) for?		\$ _____ , _____ , _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$99,999,999.....01 MORE THAN \$99,999,999.....02 DON'T KNOW.....08 REFUSED.....07	\$ _____ , _____ , _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$99,999,999.....01 MORE THAN \$99,999,999.....02 DON'T KNOW.....08 REFUSED.....07
C20a. PROGRAMMER: CHECK QUESTION C4b, IS THERE ANOTHER PERIOD OF SELF- EMPLOYMENT?		YES.....(GO TO C6, P.15, COLUMN 2).....01 NO.....(CONTINUE).....00	YES.....(GO TO C6, P. 16, COLUMN 3).....01 NO.....(CONTINUE).....00

THIRD BUSINESS	FOURTH BUSINESS	FIFTH BUSINESS
YES.....(GO TO C20a).....01 NO.....00	YES.....(GO TO C20a).....01 NO.....00	YES.....(GO TO C20a).....01 NO.....00
YES.....01 NO.....(GO TO C20a).....00 DON'T KNOW...(GO TO C20a).....08 REFUSED....(GO TO C20a).....07	YES.....01 NO.....(GO TO C20a).....00 DON'T KNOW...(GO TO C20a).....08 REFUSED....(GO TO C20a).....07	YES.....01 NO.....(GO TO C20a).....00 DON'T KNOW...(GO TO C20a).....08 REFUSED....(GO TO C20a).....07
\$ _____ , _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$99,999,999.....01 MORE THAN \$99,999,999.....02 DON'T KNOW.....08 REFUSED.....07	\$ _____ , _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$99,999,999.....01 MORE THAN \$99,999,999.....02 DON'T KNOW.....08 REFUSED.....07	\$ _____ , _____ AMOUNT GIVEN (LESS THAN OR EQUAL TO \$99,999,999.....01 MORE THAN \$99,999,999.....02 DON'T KNOW.....08 REFUSED.....07
YES.....(GO TO C6, P. 16, COLUMN 4).....01 NO.....(CONTINUE).....00	YES.....(GO TO C6, P. 16, COLUMN 5).....01 NO.....(CONTINUE).....00	CONTINUE

C21. The next questions are about your most recent business that is [NAME OF BUSINESS IN C5, P. 15, FIRST COLUMN]. Is/Was your business structured as a sole proprietorship, a partnership, a corporation, or a cooperative?

SOLE PROPRIETORSHIP.....	01	→ GO TO C23
PARTNERSHIP.....	02	
CORPORATION.....	03	
COOPERATIVE.....	04	
OTHER (SPECIFY).....	05	
<hr/>		
DON'T KNOW.....	08	
REFUSED.....	07	

C22. What percent of (THIS BUSINESS) do/did you own?

PERCENT

ALL.....	100	→ GO TO C23
DON'T KNOW.....	998	
REFUSED.....	997	

C22a. Do/Did any members of your immediate family own part of (THIS BUSINESS)?

YES.....	01	
NO.....	00	
DON'T KNOW.....	08	→ GO TO C23
REFUSED.....	07	

C22b. What percent of (THIS BUSINESS) do/did they own?

PERCENT

DON'T KNOW.....	998	
REFUSED.....	997	

C23. Did you start (THIS BUSINESS) from scratch, or did you acquire it from someone else?

STARTED FROM SCRATCH.....01 → **GO TO C27**
ACQUIRED FROM SOMEONE ELSE/
OTHER ENTITY.....02
DON'T KNOW.....08
REFUSED.....07

C24. Did you buy (THIS BUSINESS)?

YES.....01
NO.....00
DON'T KNOW.....08
REFUSED.....07



→ **GO TO C26**

C25. How much did you pay for it?

\$|____|,|____|,|____|,|____|

Amount Given (Less THAN OR EQUAL TO \$99,999,999.).....01
More than \$99,999,999.).....02
DON'T KNOW.....08
REFUSED.....07

GO TO C27

C26. How did you acquire ownership of (THIS BUSINESS)?

RECEIVED TRANSFER OF
OWNERSHIP/GIFT.....01
INHERITED.....02
OTHER (SPECIFY).....03

DON'T KNOW.....08
REFUSED.....07

C27. Have you invested any of your own money into (THIS BUSINESS) since (RANDOM ASSIGNMENT DATE)? Please do not include money borrowed or otherwise received from relatives.

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07



C28. Since (RANDOM ASSIGNMENT DATE), how much of your own money have you invested in (THIS BUSINESS)?

IF DK, PROBE FOR ESTIMATE

\$ |____|,|____|____|,|____|____|

Amount Given (Less THAN OR EQUAL TO \$99,999,999.).....	01
More than \$99,999,999.).....	02
DON'T KNOW.....	08
REFUSED.....	07

C29. Since (RANDOM ASSIGNMENT DATE), did you borrow any money for (THIS BUSINESS)?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07



C30. How much have you borrowed for (THIS BUSINESS)?

\$|____|,|____|____|,|____|____|

Amount Given (Less THAN OR EQUAL TO \$99,999,999.).....	01
More than \$99,999,999.).....	02
DON'T KNOW.....	08
REFUSED.....	07

C31. Did you obtain a personal loan, a business loan, or both?

PERSONAL LOAN.....	01
BUSINESS LOAN.....	02 → GO TO C33
BOTH.....	03
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO C36a**

C32. What was the source of your personal loan? Was it . . .(READ CATEGORIES)

CODE ALL THAT APPLY

A credit card,.....	01
A home mortgage or home equity line of credit,.....	02
A family member, or.....	03
A friend?.....	04
OTHER (SPECIFY).....	05
<hr/>	
DON'T KNOW.....	08
REFUSED.....	07

C32a. What was the total amount of (this personal loan/these personal loans)?

\$ |____|,|____|____|,|____|____| AMOUNT

Amount Given (Less THAN OR EQUAL TO \$99,999,999.).....	01
More than \$99,999,999.).....	02
DON'T KNOW.....	08
REFUSED.....	07

C32b. What was the interest rate for (this loan/the largest loan you obtained)?

|____|.|____|____| PERCENT (ALLOW ZERO)

DON'T KNOW.....	98
REFUSED.....	97

C32c. What was the length of (this loan/the largest loan you obtained)? **RECORD LENGTH AND CODE TIME UNIT.**

|_____| LENGTH

WEEKS.....01
MONTHS.....02
YEARS.....03
DON'T KNOW.....08
REFUSED.....07

C32d. **IF C31=01 GO TO C36a; OTHERWISE CONTINUE**

C33. From what source did you receive your business loan?

CODE ALL THAT APPLY

A BANK OR CREDIT UNION.....01
SMALL BUSINESS ADMINISTRATION (SBA).....02
ANOTHER GOVERNMENT LOAN.....03
INVESTMENT COMPANY.....04
OTHER (SPECIFY).....05

DON'T KNOW.....08
REFUSED.....07

C33a. **PROGRAMMER:**
IF C33=02, CONTINUE; OTHERWISE, GO TO C34a.

C34. Was the Small Business Administration loan an SBA Microloan, an SBA-guaranteed loan, a 504 Certified Development Company loan, or a Small Business Investment Companies loan?

SBA MICROLOAN.....01
SBA-GUARANTEED LOAN.....02
504 CERTIFIED DEVELOPMENT
COMPANY LOAN.....03
SMALL BUSINESS INVESTMENT
COMPANIES LOAN.....04
OTHER (SPECIFY).....05

DON'T KNOW.....08

REFUSED.....07

C34.0. **PROGRAMMER:**
IF C31 ≠ 3 then skip to C35. OTHERWISE CONTINUE.

C34a. What was the total amount of this business loan or these loans?
(IF MULTIPLE LOANS FOR THIS BUSINESS, REPORT SUM OF ALL LOANS BELOW.)

\$|____|,|____|____|,|____|____| AMOUNT

Amount Given (Less THAN OR EQUAL TO \$99,999,999.).....01

More than \$99,999,999.).....02

DON'T KNOW.....08

REFUSED.....07

C35. What was the interest rate for (this loan/the largest loan you obtained)?

|____|.|____| PERCENT (ALLOW ZERO)

DON'T KNOW.....98

REFUSED.....97

C36. What was the length of (the loan/the largest loan you obtained)? **RECORD LENGTH AND CODE TIME UNIT.**

|____| LENGTH

WEEKS.....01

MONTHS.....02

YEARS.....03

DON'T KNOW.....08

REFUSED.....07

C36a. Did you receive any grants to start your business?

YES.....01

NO.....00

DON'T KNOW.....08

REFUSED.....07



C36b. What was the total amount of these grants?

\$ |____|,|____|____|,|____|____|

Amount Given (Less THAN OR EQUAL TO \$99,999,999.).....01
More than \$99,999,999.).....02
DON'T KNOW.....08
REFUSED.....07

C36c. What was the source of these grants?

RECORD VERBATIM: _____

C37. Apart from any of your own money, money you borrowed, or grants you received since (RANDOM ASSIGNMENT DATE), did you use any other sources of capital, such as gifts from family members or friends, or the sale of another business, to start or grow (THIS BUSINESS)?

YES.....01
NO.....00
DON'T KNOW.....08
REFUSED.....07

→ **GO TO C40**

C38. Altogether, how much did you receive from these sources since (RANDOM ASSIGNMENT DATE)?

\$ |____|,|____|____|,|____|____|

Amount Given (Less THAN OR EQUAL TO \$99,999,999.).....01
More than \$99,999,999.).....02
DON'T KNOW.....08
REFUSED.....07

C39. What were these other sources of capital?

CODE ALL THAT APPLY

GIFTS FROM FAMILY MEMBERS.....01
GIFTS FROM FRIENDS.....02
SALE OF ANOTHER BUSINESS.....03
OTHER (SPECIFY).....04

DON'T KNOW.....08

REFUSED.....07

C40. Where is your (current/most recent) business located, in your home, an incubator, a commercially available space, or some other place?

(IF ASKED): An incubator is space provided to start-up young entrepreneurs by self-employment assistance organizations.

HOME.....01

INCUBATOR.....02

COMMERCIALY AVAILABLE SPACE.....03

SOME OTHER PLACE (SPECIFY).....04

DON'T KNOW.....08

REFUSED.....07

C41. What is the zip code where your business, (THIS BUSINESS), is/was located?

|_____|

DON'T KNOW.....99998

REFUSED.....99997

C42.

PROGRAMMER:

IF C4a=01, P. 14, CONTINUE; OTHERWISE, GO TO C52.

C43. The next questions, are about (all of) the business(es) that you **currently own**. What is the total number of employees that currently work in your business(es)? Please exclude yourself, but include paid family members.

|_____| NUMBER OF EMPLOYEES

NONE.....00

DON'T KNOW.....98

REFUSED.....97



→ GO TO C49

C44. How many of these employees are working 35 or more hours per week, and how many are working less than 35 hours per week in (this business/these businesses)?
IF RESPONDENT SAYS "NONE," CODE 00.

|_____| NUMBER OF FULL-TIME EMPLOYEES

|_____| NUMBER OF PART-TIME EMPLOYEES

DON'T KNOW.....98

REFUSED.....97

C45. How many of your immediate family members work in this business? Please do not include yourself.

|_____| NUMBER

NONE.....00

DON'T KNOW.....98

REFUSED.....97

C46. What is this business's current monthly payroll?

\$ |_____|,|_____| PAYROLL AMOUNT

Amount Given (Less THAN OR EQUAL TO \$999,999.).....01

More than \$999,999.).....02

DON'T KNOW.....08

REFUSED.....07

C47. Does this amount include payments to yourself?

YES.....01

NO.....00

DON'T KNOW.....08

REFUSED.....07

C48. Next, I will read a list of benefits that some people get through their jobs. Do all of your employees, some of your employees, or none of your employees currently receive . . .

CODE ALL, SOME, OR NONE FOR EACH

	ALL	SOME	NONE	DON'T KNOW	REFUSED
--	------------	-------------	-------------	-------------------	----------------

- a. paid sick leave?..... 01 02 03 08 07
- b. paid vacation?..... 01 02 03 08 07
- c. paid holidays?..... 01 02 03 08 07
- d. health insurance or membership in an HMO or PPO plan?..... 01 02 03 08 07
- e. retirement or pension benefits, a 401K plan?..... 01 02 03 08 07
- f. life insurance?..... 01 02 03 08 07
- g. any other benefits? (SPECIFY)..... 01 02 03 08 07

C49. Now, please tell me if **you** receive these benefits through your business . . .

CODE YES OR NO FOR EACH

	YES	NO	DON'T KNOW	REFUSED
--	------------	-----------	-------------------	----------------

- a. paid sick leave?..... 01 00 08 07
- b. paid vacation?..... 01 00 08 07
- c. paid holidays?..... 01 00 08 07
- d. health insurance or membership in an HMO or PPO plan?..... 01 00 08 07
- e. retirement or Pension benefits, a 401K plan?..... 01 00 08 07
- f. life insurance?..... 01 00 08 07
- g. any other benefits? (SPECIFY)..... 01 00 08 07

C50.

PROGRAMMER:

IF C49d=00 GO TO C51. OTHERWISE, GO TO C52

C51. Do you have health insurance?

- YES..... 01
- NO..... 00
- DON'T KNOW..... 08
- REFUSED..... 07

→ **GO TO C52**

C51a. What is the source of that insurance?

THROUGH SPOUSE'S INSURER.....	01
THROUGH YOUR EMPLOYER'S INSURER.....	02
THROUGH TRADE ASSOCIATION'S INSURER.....	03
THROUGH MEDICAID OR OTHER PUBLIC HEALTH INSURANCE.....	04
THROUGH A PRIVATE INSURER.....	05
THROUGH SOME OTHER SOURCE (SPECIFY).....	06
<hr/>	
DON'T KNOW.....	08
REFUSED.....	07

C52. When you started this business, did you have health insurance coverage?

YES.....	01
NO.....	00
DON'T KNOW.....	98
REFUSED.....	97

C53. When you started this business, did other household members have any earnings?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

C54. What would you say were the most difficult challenges you faced when you started this business?

CODE ALL THAT APPLY

PROBE: Any others?

LACK OF CAPITAL OR START-UP FUNDS.....	01
AMOUNT OF TIME/WORK INVOLVED.....	02
INSUFFICIENT SALES.....	03
INSUFFICIENT CASH FLOW.....	04
DIFFICULTIES HIRING QUALIFIED STAFF.....	05
LOCAL COMPETITION.....	06
BECOMING KNOWN/GETTING EXPOSURE.....	07
TAXES.....	08
INSURANCE.....	09
REGULATIONS/LICENSES.....	10
DEALING WITH CLIENTS.....	11
UNCERTAINTY/CHANGING ECONOMY.....	12
FINDING A LOCATION.....	13
PROBLEMS WITH SUPPLY OF PRODUCT OR MATERIAL AVAILABILITY.....	14
PERSONAL/FAMILY BARRIERS.....	15
FINDING CLIENTS.....	16
OTHER (SPECIFY).....	17
<hr/>	
DON'T KNOW.....	98
REFUSED.....	97

GO TO D0a

C55. At any time since (RANDOM ASSIGNMENT DATE) have you tried to start a business?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

GO TO D0a

C56. What would you say were the most difficult challenges you faced trying to start your own business?

CODE ALL THAT APPLY

LACK OF CAPITAL OR START-UP FUNDS.....	01
AMOUNT OF TIME/WORK INVOLVED.....	02
INSUFFICIENT SALES.....	03
INSUFFICIENT CASH FLOW.....	04
DIFFICULTIES HIRING QUALIFIED STAFF.....	05
LOCAL COMPETITION.....	06
BECOMING KNOWN/GETTING EXPOSURE.....	07
TAXES.....	08
INSURANCE.....	09
REGULATIONS/LICENSES.....	10
DEALING WITH CLIENTS.....	11
UNCERTAINTY/CHANGING ECONOMY.....	12
FINDING A LOCATION.....	13
PROBLEMS WITH SUPPLY OF PRODUCT OR MATERIAL AVAILABILITY.....	14
PERSONAL/FAMILY BARRIERS.....	15
FINDING CLIENTS.....	16
OTHER (SPECIFY).....	17
<hr/>	
DON'T KNOW.....	98
REFUSED.....	97

SECTION D: EMPLOYMENT, WORKING FOR SOMEONE ELSE

D0a. The next questions are about jobs you have had where you worked for someone else.

Prior to (RANDOM ASSIGNMENT DATE), did you ever have a job where **you worked for someone else?** Please include part-time and full-time jobs, and military service.

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO D3**

D1. Prior to (RANDOM ASSIGNMENT DATE), approximately, how long did you work, **in total**, on **all** jobs where you worked for someone else?

RECORD LENGTH AND CODE TIME UNIT

|__|__| LENGTH

WEEKS.....	01
MONTHS.....	02
YEARS.....	03
DON'T KNOW.....	08
REFUSED.....	07

D2. How much of the (TIME IN D1) you worked for someone else prior to (RANDOM ASSIGNMENT DATE) were you working as a manager?

IF Asked: By manager we mean anyone who supervises other staff or oversees parts of a business. **RECORD LENGTH AND CODE TIME UNIT.**

|__|__| LENGTH

NONE.....	00
WEEKS.....	01
MONTHS.....	02
YEARS.....	03
DON'T KNOW.....	08
REFUSED.....	07

D3. The next questions are about full and part-time jobs, including military service, that you may have held since (RANDOM ASSIGNMENT DATE) where you were working for someone else.

Are you **currently** working for someone else?

YES.....	01 → GO TO D6
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

D3a. Do you want to have a job where you work for someone else?

YES.....	01
NO.....	00 → GO TO D4
DON'T KNOW.....	08
REFUSED.....	07

D3b. Are you actively looking for a job where you work for someone else?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

D4. Are you currently doing any of the following? Are you...

A. Participating in an education or training program.....	Y / N
B. Taking care of a relative.....	Y / N
C. Retired.....	Y / N
D. Currently ill.....	Y / N
DON'T KNOW.....	98
REFUSED.....	97

D5. Since (RANDOM ASSIGNMENT DATE) have you had a job that lasted two weeks or longer? Please include part-time and full-time jobs, and military service.

YES.....	01 → GO TO D7
NO.....	00
DON'T KNOW.....	08 → GO TO D22
REFUSED.....	07

D6. **Currently**, how many different full- and part-time jobs do you have where you work for someone else?

ONE.....	01
TWO OR MORE.....	02
DON'T KNOW.....	08
REFUSED.....	07

		CURRENT/MOST RECENT JOB 01	SECOND MOST RECENT JOB 02
D7.	<p>What is the name of the employer for whom you work the most hours/for whom you worked more than two weeks since (RANDOM ASSIGNMENT DATE)?</p> <p>INTERVIEWER: RECORD EMPLOYER/BUSINESS NAME FOR THIS JOB IN D7, COLUMN 1, AS JOB 1. THEN GO TO D7a.</p> <p>RECORD EMPLOYER NAME(S) ACROSS THE TOP OF THE GRID FIRST. THEN ASK D8-D21 DOWN FOR EACH JOB.</p>		
D7a.	<p>Where else have you worked since (RANDOM ASSIGNMENT DATE)? Please include any (other current jobs whether), part-time or full-time jobs.</p> <p>PROBE: Where did you work before (LAST JOB)?</p> <p>MANDATORY PROBE: Where else have you worked?</p> <p>RECORD AS NEXT JOB IN COLUMN HEADER.</p>		
D8.	<p>In what month and year did you start working for (EMPLOYER)?</p> <p>RECORD MONTH AND YEAR. START DATE CAN BE BEFORE (RANDOM ASSIGNMENT DATE)</p>	<p>START: _____ / _____ - _____ MONTH YEAR</p> <p>DON'T KNOW.....98/9998 REFUSED.....97/9997</p>	<p>START: _____ / _____ - _____ MONTH YEAR</p> <p>DON'T KNOW.....98/9998 REFUSED.....97/9997</p>
D9.	<p>In what month and year did you stop working for (EMPLOYER)?</p> <p>RECORD MONTH AND YEAR. STOP DATE MUST COME AFTER (RANDOM ASSIGNMENT DATE).</p>	<p>STOP: _____ / _____ - _____ MONTH YEAR</p> <p>STILL AT JOB.....96 DON'T KNOW.....98/9998 REFUSED.....97/9997</p>	<p>STOP: _____ / _____ - _____ MONTH YEAR</p> <p>STILL AT JOB.....96 DON'T KNOW.....98/9998 REFUSED.....97/9997</p>

JOB 03 	JOB 04 	JOB 05
START: ____/ ____ ____ MONTH YEAR DON'T KNOW.....98/9998 REFUSED.....97/9997	START: ____/ ____ ____ MONTH YEAR DON'T KNOW.....98/9998 REFUSED.....97/9997	START: ____/ ____ ____ MONTH YEAR DON'T KNOW.....98/9998 REFUSED.....97/9997
STOP: ____/ ____ ____ MONTH YEAR STILL AT JOB.....96 DON'T KNOW.....98/9998 REFUSED.....97/9997	STOP: ____/ ____ ____ MONTH YEAR STILL AT JOB.....96 DON'T KNOW.....98/9998 REFUSED.....97/9997	STOP: ____/ ____ ____ MONTH YEAR STILL AT JOB.....96 DON'T KNOW.....98/9998 REFUSED.....97/9997

D10. What kind of company is/was (EMPLOYER)? What do/did they make, sell, or do? PROBE FOR TYPE OF PRODUCT OR SERVICE	CURRENT/MOST RECENT JOB 01 		SECOND MOST RECENT JOB 02 	
	DON'T KNOWD		DON'T KNOWD	
D11. What do/did you do there? PROBE: What is/was your job title? PROBE FOR CLEAR AND DESCRIPTIVE ACTIVITIES AND JOB TITLE				
	DON'T KNOWD		DON'T KNOWD	
D12. Which of the following best describes your employment status at this job? Are/Were you . . . READ CATEGORIES	an employee, working for pay at a private company,.....01		an employee, working for pay at a private company,.....01	
	a local, state, federal government employee,.....02		a local, state, federal government employee,.....02	
	on active military duty, or.....03		on active military duty, or.....03	
	working without pay.....04		working without pay.....04	
D13. How many hours do/did you usually work in an average week at (EMPLOYER)? IF DK, PROBE FOR ESTIMATE	 HOURS PER WEEK		 HOURS PER WEEK	
	DON'T KNOW.....998		DON'T KNOW.....998	
	REFUSED.....997		REFUSED.....997	

JOB 03 	JOB 04 	JOB 05
DON'T KNOWD	DON'T KNOWD	DON'T KNOWD
REFUSEDR	REFUSEDR	REFUSEDR
DON'T KNOWD	DON'T KNOWD	DON'T KNOWD
REFUSEDR	REFUSEDR	REFUSEDR
an employee, working for pay at a private company,.....01	an employee, working for pay at a private company,.....01	an employee, working for pay at a private company,.....01
a local, state, federal government employee,.....02	a local, state, federal government employee,.....02	a local, state, federal government employee,.....02
on active military duty, or.....03	on active military duty, or.....03	on active military duty, or.....03
working without pay.....04	working without pay.....04	working without pay.....04
OTHER (SPECIFY).....05	OTHER (SPECIFY).....05	OTHER (SPECIFY).....05
DON'T KNOW.....08	DON'T KNOW.....08	DON'T KNOW.....08
REFUSED.....07	REFUSED.....07	REFUSED.....07
 HOURS PER WEEK	 HOURS PER WEEK	 HOURS PER WEEK
DON'T KNOW.....998	DON'T KNOW.....998	DON'T KNOW.....998
REFUSED.....997	REFUSED.....997	REFUSED.....997

	CURRENT/MOST RECENT JOB 01	SECOND MOST RECENT JOB 02
	D14. INTERVIEWER: CHECK D12. IS CODE 04, "WORKING WITHOUT PAY," CODED?	YES.....(GO TO D18).....01 NO.....00
D15a. Not counting tips, bonuses, or commissions, how often are/were you usually paid?	ONCE A DAY.....01 ONCE A WEEK.....02 ONCE EVERY TWO WEEKS.....03 TWICE A MONTH.....04 ONCE A MONTH.....05 ONCE A YEAR.....06 DON'T KNOW.....08 REFUSED.....07	ONCE A DAY.....01 ONCE A WEEK.....02 ONCE EVERY TWO WEEKS.....03 TWICE A MONTH.....04 ONCE A MONTH.....05 ONCE A YEAR.....06 DON'T KNOW.....08 REFUSED.....07
D15b. Not counting tips, bonuses, or commissions, how much are/were you usually paid each time you receive/received payment?	\$ _____ _____ , _____ ____ .____	\$ _____ _____ , _____ ____ .____
D16a. Do/did you receive any additional payment as tips? [IF NO, GO TO D16c]	YES.....01 NO.....00	YES.....01 NO.....00
D16b. How much do you think those tips add/added up to in a year?	\$ _____ _____ , _____ ____ .____	\$ _____ _____ , _____ ____ .____
D16c. Do/did you receive any additional payment as bonuses? [IF NO, GO TO D16e]	YES.....01 NO.....00	YES.....01 NO.....00
D16d. Usually, how much is/was the total amount of those bonuses each year?	\$ _____ _____ , _____ ____ .____	\$ _____ _____ , _____ ____ .____
D16e. Do/did you receive any additional payment as commissions? [IF NO, GO TO D17]	YES.....01 NO.....00	YES.....01 NO.....00
D16f. Usually, how much is/was the total amount of those commissions each year?	\$ _____ _____ , _____ ____ .____	\$ _____ _____ , _____ ____ .____
D17. Are/Were the following benefits available to you on your job at (EMPLOYER)? READ CATEGORIES. CODE YES OR NO FOR EACH.	YES <u>NO</u> a. Paid sick leave?.....01 00 b. Paid vacation?.....01 00 c. Paid holidays?.....01 00 d. Health insurance, or membership in an HMO or PPO plan?.....01 00 e. Retirement, or pension benefits or a 401K plan?.....01 00 f. Life insurance?.....01 00 g. Any other benefits? (SPECIFY).....01 00	YES NO a. Paid sick leave?.....01 00 b. Paid vacation?.....01 00 c. Paid holidays?.....01 00 d. Health insurance, or membership in an HMO or PPO plan?.....01 00 e. Retirement, or pension benefits or a 401K plan?.....01 00 f. Life insurance?.....01 00 g. Any other benefits? (SPECIFY).....01 00

	DON'T KNOW.....	08
	REFUSED.....	07

<u>JOB 03 </u>	<u>JOB 04 </u>	<u>JOB 05 </u>
YES.....(GO TO D18).....01	YES.....(GO TO D18).....01	YES.....(GO TO D18).....01
NO.....00	NO.....00	NO.....00
ONCE A DAY.....01	ONCE A DAY.....01	ONCE A DAY.....01
ONCE A WEEK.....02	ONCE A WEEK.....02	ONCE A WEEK.....02
ONCE EVERY TWO WEEKS.....03	ONCE EVERY TWO WEEKS.....03	ONCE EVERY TWO WEEKS.....03
TWICE A MONTH.....04	TWICE A MONTH.....04	TWICE A MONTH.....04
ONCE A MONTH.....05	ONCE A MONTH.....05	ONCE A MONTH.....05
ONCE A YEAR.....06	ONCE A YEAR.....06	ONCE A YEAR.....06
DON'T KNOW.....08	DON'T KNOW.....08	DON'T KNOW.....08
REFUSED.....07	REFUSED.....07	REFUSED.....07
\$ _____ _____ _____ _____ _____ _____	\$ _____ _____ _____ _____ _____	\$ _____ _____ _____ _____ _____
YES.....01	YES.....01	YES.....
NO.....00	NO.....00	NO.....
\$ _____ _____ _____ _____ _____	\$ _____ _____ _____ _____ _____	\$ _____ _____ _____ _____ _____
YES.....01	YES.....01	YES.....01
NO.....00	NO.....00	NO.....00
\$ _____ _____ _____ _____ _____	\$ _____ _____ _____ _____ _____	\$ _____ _____ _____ _____ _____
YES.....01	YES.....01	YES.....01
NO.....00	NO.....00	NO.....00
\$ _____ _____ _____ _____ _____	\$ _____ _____ _____ _____ _____	\$ _____ _____ _____ _____ _____
<u>NO</u>	<u>YES</u>	<u>YES</u> <u>NO</u>
a. Paid sick leave?.....01 00	a. Paid sick leave?.....01 00	a. Paid sick leave?.....01 00
b. Paid vacation?.....01 00	b. Paid vacation?.....01 00	b. Paid vacation?.....01 00
c. Paid holidays?.....01 00	c. Paid holidays?.....01 00	c. Paid holidays?.....01 00
d. Health insurance, or membership in an HMO or PPO plan?.....01 00	d. Health insurance, or membership in an HMO or PPO plan?.....01 00	d. Health insurance, or membership in an HMO or PPO plan?.....01 00
e. Retirement, or pension benefits or a 401K plan?.....01 00	e. Retirement, or pension benefits or a 401K plan?.....01 00	e. Retirement, or pension benefits or a 401K plan?.....01 00
f. Life insurance?.....01 00	f. Life insurance?.....01 00	f. Life insurance?.....01 00
g. Any other benefits? (SPECIFY).....01 00	g. Any other benefits? (SPECIFY).....01 00	g. Any other benefits? (SPECIFY).....01 00
	DON'T KNOW.....08	DON'T KNOW.....08
	REFUSED.....07	REFUSED.....07

DON'T KNOW.....	08	
REFUSED.....	07	

	CURRENT/MOST RECENT JOB 01	SECOND MOST RECENT JOB 02
D18. INTERVIEWER: CHECK D9. IS CODE, "STILL AT THIS JOB," CODED?	YES.....(GO TO D21a).....01 NO.....00	YES.....(GO TO D21a).....01 NO.....00
D19. Why did you stop working at (EMPLOYER)? Did you quit, retire, were you laid off or fired, or did the period you were scheduled to work there end? PROBE: What reason were you given by your employer? SELECT <u>ONE</u> CODE ONLY.	QUIT.....01 RETIRE.....02 LAID OFF.....03 FIRED.....04 WORK PERIOD/TEMPORARY JOB ENDED.....05 OTHER (SPECIFY).....06 DON'T KNOW.....08 REFUSED.....07	QUIT.....01 RETIRE.....02 LAID OFF.....03 FIRED.....04 WORK PERIOD/TEMPORARY JOB ENDED.....05 OTHER (SPECIFY).....06 DON'T KNOW.....08 REFUSED.....07
D20. When that job ended, did you receive severance pay?	YES.....01 NO.....00 DON'T KNOW.....08 REFUSED.....07	YES.....01 NO.....00 DON'T KNOW.....08 REFUSED.....07
D21. When that job ended, what did you do? CODE ALL THAT APPLY.	TOOK ANOTHER JOB WORKING FOR SOMEONE ELSE.....01 STARTED A BUSINESS.....02 WORKED ON STARTING MY OWN BUSINESS.....03 LOOKED FOR WORK.....04 PARTICIPATED IN EDUCATION/ TRAINING PROGRAM.....05 TOOK CARE OF CHILD/FAMILY MEMBER/SICK RELATIVE.....06 RETIRIED.....07 WAS SICK.....08 OTHER (SPECIFY).....09 DON'T KNOW.....98 REFUSED.....97	TOOK ANOTHER JOB WORKING FOR SOMEONE ELSE.....01 STARTED A BUSINESS.....02 WORKED ON STARTING MY OWN BUSINESS.....03 LOOKED FOR WORK.....04 PARTICIPATED IN EDUCATION/ TRAINING PROGRAM.....05 TOOK CARE OF CHILD/FAMILY MEMBER/SICK RELATIVE.....06 RETIRIED.....07 WAS SICK.....08 OTHER (SPECIFY).....09 DON'T KNOW.....98 REFUSED.....97
D21a. INTERVIEWER: IS THERE ANOTHER JOB? CHECK D7.	YES.....(GO TO D8, COLUMN 2).....01	YES.....(GO TO D8, COLUMN 3).....01

NO.....	00	NO.....	00
---------	----	---------	----

JOB 03 	JOB 04 	JOB 05
YES.....(GO TO D21a).....01	YES.....(GO TO D21a).....01	YES.....(GO TO D21a).....01
NO.....00	NO.....00	NO.....00
QUIT.....01	QUIT.....01	QUIT.....01
RETIRE.....02	RETIRE.....02	RETIRE.....02
LAID OFF.....03	LAID OFF.....03	LAID OFF.....03
FIRED.....04	FIRED.....04	FIRED.....04
WORK PERIOD/TEMPORARY JOB ENDED.....05	WORK PERIOD/TEMPORARY JOB ENDED.....05	WORK PERIOD/TEMPORARY JOB ENDED.....05
OTHER (SPECIFY).....06	OTHER (SPECIFY).....06	OTHER (SPECIFY).....06
DON'T KNOW.....98	DON'T KNOW.....98	DON'T KNOW.....98
REFUSED.....97	REFUSED.....97	REFUSED.....97
YES.....01	YES.....01	YES.....01
NO.....00	NO.....00	NO.....00
DON'T KNOW.....08	DON'T KNOW.....08	DON'T KNOW.....08
REFUSED.....07	REFUSED.....07	REFUSED.....07
TOOK ANOTHER JOB WORKING FOR SOMEONE ELSE.....01	TOOK ANOTHER JOB WORKING FOR SOMEONE ELSE.....01	TOOK ANOTHER JOB WORKING FOR SOMEONE ELSE.....01
STARTED A BUSINESS.....02	STARTED A BUSINESS.....02	STARTED A BUSINESS.....02
WORKED ON STARTING MY OWN BUSINESS.....03	WORKED ON STARTING MY OWN BUSINESS.....03	WORKED ON STARTING MY OWN BUSINESS.....03
LOOKED FOR WORK.....04	LOOKED FOR WORK.....04	LOOKED FOR WORK.....04
PARTICIPATED IN EDUCATION/ TRAINING PROGRAM.....05	PARTICIPATED IN EDUCATION/ TRAINING PROGRAM.....05	PARTICIPATED IN EDUCATION/ TRAINING PROGRAM.....05
TOOK CARE OF CHILD/FAMILY MEMBER/SICK RELATIVE.....06	TOOK CARE OF CHILD/FAMILY MEMBER/SICK RELATIVE.....06	TOOK CARE OF CHILD/FAMILY MEMBER/SICK RELATIVE.....06
RETired.....07	RETired.....07	RETired.....07
WAS SICK.....08	WAS SICK.....08	WAS SICK.....08
OTHER (SPECIFY).....09	OTHER (SPECIFY).....09	OTHER (SPECIFY).....09
DON'T KNOW.....98	DON'T KNOW.....98	DON'T KNOW.....98
REFUSED.....97	REFUSED.....97	REFUSED.....97
YES.....(GO TO D8, COLUMN 4).....01	YES.....(GO TO D8, COLUMN 5).....01	
NO.....00	NO.....00	CONTINUE

D22. Thinking about all the work you do, whether for yourself or for someone else, how would you rate your overall satisfaction with your work? Would you say you are very satisfied, somewhat satisfied, somewhat dissatisfied or very dissatisfied with your work?

VERY SATISFIED.....	01
SOMEWHAT SATISFIED.....	02
SOMEWHAT DISSATISFIED.....	03
VERY DISSATISFIED.....	04
DON'T KNOW.....	08
REFUSED.....	07

D23. Thinking about all aspects of your life, how would you rate your overall satisfaction with your life? Would you say you are very satisfied, somewhat satisfied, somewhat dissatisfied or very dissatisfied with your life?

VERY SATISFIED.....	01
SOMEWHAT SATISFIED.....	02
SOMEWHAT DISSATISFIED.....	03
VERY DISSATISFIED.....	04
DON'T KNOW.....	08
REFUSED.....	07

D24. Next, I'd like you to look back to before you applied for the GATE program to when you first lost your job. How long did you think it would take to find a job in your same line of work?

RECORD LENGTH AND CODE TIME UNIT

|__|__| LENGTH

WEEKS.....	01
MONTHS.....	02
YEARS.....	03
DON'T KNOW.....	08
REFUSED.....	07

D25. At that time, how long did you think it would take to find **any job at all?**

RECORD LENGTH AND CODE TIME UNIT

|__|__| LENGTH

WEEKS.....	01
MONTHS.....	02
YEARS.....	03
DON'T KNOW.....	08
REFUSED.....	07

D26. Now, please think about the six months after you first lost your job. Did you have any trouble making

payments on any of your monthly bills or loan payments during that period?

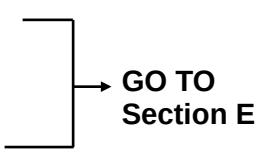
YES.....01
NO.....00 → **GO TO D28a**
DON'T KNOW.....08
REFUSED.....07

D27. Which bills or payments did you have trouble making in the six months following your job loss? Did you have trouble paying (READ a-g)...**CODE ONE FOR EACH**

D27	YES	NO	DON'T HAVE	DON'T KNOW	REFUSED
a. Your rent or mortgage?	01	00	03	08	07
b. utility bills?	01	00	03	08	07
c. credit card bills?	01	00	03	08	07
d. automobile loans?	01	00	03	08	07
e. school loans?	01	00	03	08	07
f. medical bills?	01	00	03	08	07
g. some other bills or loans? (SPECIFY)	01	00	03	08	07

D28a. During this period of unemployment prior to the GATE program, did you move to a new place to live because you were unable to pay your rent, mortgage or other bills?

YES.....01
NO.....00
DON'T KNOW.....08
REFUSED.....07



→ **GO TO
Section E**

D28b. Did this occur in the first six months of your unemployment?

YES.....01
NO.....00
DON'T KNOW.....08
REFUSED.....07

SECTION E: INCOME SOURCES AND AMOUNTS

E1. Now I'd like you to think about your household's total income during the past twelve months. When answering these next questions please include income from self-employment, regular jobs and odd jobs, under-the-table jobs, Social Security, pensions, rent, interest, dividends, unemployment compensation, welfare, from food stamps, child support, and money from any other sources.

What was the total income of all members of your household, including yourself, from all sources before taxes and deductions during the past twelve months?

IF DK, PROBE FOR ESTIMATE

\$ |____|____|____|,|____|____| → **GO TO E5a**

DON'T KNOW.....08

REFUSED.....07

E2. During the past twelve months, would you say your household income was less than \$30,000, or \$30,000 or more?

LESS THAN \$30,000.....01 → **GO TO E4**

\$30,000 OR MORE.....02

DON'T KNOW.....08

REFUSED.....07 → **GO TO E5a**

E3. Would you say it was . . .

from \$30,000 to under \$45,000.....01

\$45,000 to under \$60,000.....02

\$60,000 to under \$75,000.....03

\$75,000 to under \$90,000.....04

\$90,000 to under \$105,00005

more than \$105,000.....06

DON'T KNOW.....08

REFUSED.....07

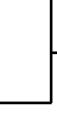
GO TO E5a

E4. Would you say it was . . .

less than \$5,000.....	01
\$5,000 to under \$10,000.....	02
\$10,000 to under \$15,000.....	03
\$15,000 to under \$20,000.....	04
\$20,000 to under \$25,000.....	05
\$25,000 to under \$30,000.....	06
DON'T KNOW.....	08
REFUSED.....	07

E5a. Since (RANDOM ASSIGNMENT DATE), have you or anyone else in your household received Unemployment Compensation benefits?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07



→ GO TO E6a

E5b. When was the first date you received those Unemployment Compensation benefits, after (RANDOM ASSIGNMENT DATE)?

Month: _____
Day: _____
Year: _____

DON'T KNOW.....	08
REFUSED.....	07

E5c. When you first applied for those benefits, you were determined to be eligible to receive a certain total amount of benefits, spread out over a period of a certain number of weeks. Did you eventually receive that entire total amount of benefit payments?

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

E5d. After receiving the total amount of benefits allowed, some people are eligible to receive additional Unemployment Compensation benefits for additional weeks. These are called "Extended Benefits". Did you receive any Extended Benefits?

YES.....01
NO.....00
DON'T KNOW.....08
REFUSED.....07

E5e. Are you currently receiving Unemployment Compensation benefits?

YES.....01 → **GO TO E5g**
NO.....00
DON'T KNOW.....08
REFUSED.....07

E5f. When was the last date you received Unemployment Compensation benefits?

Month: _____
Day: _____
Year: _____

DON'T KNOW.....08
REFUSED.....07

E5g. Between the first date after [RANDOM ASSIGNMENT DATE] that you received benefits and the last date after [RANDOM ASSIGNMENT DATE] that you received benefits, were there any periods when you did not receive any benefits?

YES.....01
NO.....00
DON'T KNOW.....08
REFUSED.....07



E5h. How many weeks did those periods last, altogether?

Weeks: _____
DON'T KNOW.....08
REFUSED.....07

E5i. On average, since (RANDOM ASSIGNMENT DATE), when your household received Unemployment Compensation benefits, how much did your household receive each week?

\$ |____|,|____|

DON'T KNOW.....08

REFUSED.....07

E6a. Since (RANDOM ASSIGNMENT DATE), have you or anyone else in your household received Trade Readjustment Allowances or Trade Adjustment Assistance?

YES.....01

NO.....00

DON'T KNOW.....08

REFUSED.....07

→ GO TO E7

E6b. Altogether, since (RANDOM ASSIGNMENT DATE), how many weeks has your household received Trade Readjustment Allowances or Trade Adjustment Assistance?

|____| NUMBER OF WEEKS

DON'T KNOW.....08

REFUSED.....07

E6c. On average, since (RANDOM ASSIGNMENT DATE), how much Trade Readjustment Allowances or Trade Adjustment Assistance did your household receive each week?

\$ |____|,|____|

DON'T KNOW.....08

REFUSED.....07

E7. Next I am going to ask you if you or your household have received income from a variety of sources since (RANDOM ASSIGNMENT DATE).

Have you or has anyone in your household received income **since** (RANDOM ASSIGNMENT DATE)? **ASK AND RECORD RESPONSES. THEN ASK E7b-E7c FOR EACH "YES" RESPONSE IN E7a. If E7a=2 (ONE TIME PAYMENT ASK E7d. GO TO NEXT PAGE.**

E7a. OTHER SOURCES OF HOUSEHOLD INCOME						E7b. Since (RANDOM ASSIGNMENT DATE), how many months did you or your household receive (SOURCE)?	E7c. On average, how much (SOURCE) per month did you or your household receive since (RANDOM ASSIGNMENT DATE)? PLEASE ENTER WHOLE DOLLAR AMOUNT ONLY	E7d. How much did you or someone in your household receive in (source) payments? PLEASE ENTER WHOLE DOLLAR AMOUNT ONLY
Social Security Retirement, Disability, or Survivors' benefits?	01	00	02	08	07	____ NUMBER OF MONTHS DON'T KNOW.....98 REFUSED.....97	If E7b=0 or Refused then skip \$ ____ , ____ DON'T KNOW999998 REFUSED.....999997	\$ ____ , ____ DON'T KNOW999998 REFUSED.....999997
Since applying to the GATE program in (RA Date) Other pensions, annuities, or other disability or retirement programs?	01	00	02	08d	07	____ NUMBER OF MONTHS DON'T KNOW.....98 REFUSED.....97	If E7b=0 or Refused then skip \$ ____ , ____ DON'T KNOW999998 REFUSED.....999997	\$ ____ , ____ DON'T KNOW999998 REFUSED.....999997
Cash welfare, including TANF (Minnesota Family Investment Program [MFIP]) benefits, General Assistance and Supplemental Security Income (SSI)?	01	00	02	08d	07	____ NUMBER OF MONTHS DON'T KNOW.....98 REFUSED.....97	If E7b=0 or Refused then skip \$ ____ , ____ DON'T KNOW999998 REFUSED.....999997	\$ ____ , ____ DON'T KNOW999998 REFUSED.....999997
Veteran's payments?	01	00	02	08	07	____ NUMBER OF MONTHS DON'T KNOW.....98 REFUSED.....97	If E7b=0 or Refused then skip \$ ____ , ____ DON'T KNOW999998 REFUSED.....999997	\$ ____ , ____ DON'T KNOW999998 REFUSED.....999997
Food Stamps?	01	00	02	08	07	____ NUMBER OF MONTHS DON'T KNOW.....98 REFUSED.....97	If E7b=0 or Refused then skip \$ ____ , ____ DON'T KNOW999998 REFUSED.....999997	\$ ____ , ____ DON'T KNOW999998 REFUSED.....999997

SECTION F: HOUSEHOLD COMPOSITION, MARITAL STATUS, AND SPOUSE EMPLOYMENT

F1. Now, we'd like to ask a few general questions. What is your marital status?

MARRIED/COMMON LAW.....	01
LIVING TOGETHER UNMARRIED.....	02
SEPARATED.....	03
DIVORCED.....	04
WIDOWED.....	05
NEVER MARRIED.....	06
DON'T KNOW.....	08
REFUSED.....	07

→ GO TO F5

F2. Is your (husband/wife/partner) currently working, either part-time or full-time, for pay? Please exclude any work (he/she) does for your business.

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ GO TO F5

F3. How much does (he/she) usually make **per week** before taxes and other deductions? Please include tips, commissions, and regular overtime.

INTERVIEWER: ACCEPT MOST CONVENIENT PAY PERIOD. IF NECESSARY, CONFIRM PAY PERIOD. ENTER AMOUNT, THEN CODE TIME PERIOD.

\$|_____|,|_____|.|_____| AMOUNT

PER WEEK.....	01
ONCE EVERY TWO WEEKS.....	02
TWICE A MONTH.....	03
PER MONTH.....	04
PER YEAR.....	05
IN-KIND ONLY.....	06

DON'T KNOW.....	08
REFUSED.....	07

F4. How many hours a week on average does (she/he) work?

|_____| HOURS

DON'T KNOW.....	998
REFUSED.....	997

F5. Including yourself, how many people are currently living in your household? Please include babies, small children, people who are not related to you and people who are temporarily away.

|_____| NUMBER OF PEOPLE

LIVES ALONE.....	95	→ Finish: GO TO SECTION G
DON'T KNOW.....	98	
REFUSED.....	97	

F5a. Do you have any children under 18 years of age who live with you over half the time? Please include your own and adopted children, foster-step-, or grandchildren.

YES.....	01
NO.....	00
DON'T KNOW.....	08
REFUSED.....	07

→ **GO TO SECTION G**

F5b. How many children under 18 years of age live with you?

|_____| NUMBER

DON'T KNOW.....	98
REFUSED.....	97

SECTION G: CONTACT INFORMATION

Thank you very much for your help. That completes the interview. Your answers, together with the answers of other participants, will be used to study self-employment programs.

So that we can send you a \$15 check for your participation, I would like to confirm your contact information.

G1. First, just to make sure I have it right, the correct spelling of your name and address is . . .

YES, NAME AND ADDRESS CORRECT.....01

NO.....00

RECORD CORRECT NAME AND/OR ADDRESS:

NAME: _____

ADDRESS: _____

G2a. Do you have an e-mail address?

YES.....01

NO.....00 → GO TO G3

G2b. Please spell your e-mail address for me.

G3. Is there another number where you usually can be reached?

YES.....01

RECORD OTHER NUMBER:

NO.....00

G4. In whose name is that phone listed?

G4a. And where is that (e.g., neighbor, work)?

G5. That completes the survey. Thank you for your time and cooperation.