OMB Control No.: XXXX-XXXX

Expiration Date: XX/XX/20XX

**Longitudinal Study of Unemployment Insurance Recipients (LS-UI)**

**First Interview – CATI Version**

***July 3, 2014***

**Frequently Used Fills**

In the boxes below, please list fills that are repeated frequently in your questionnaire requirements. These must come from a single source (whether from a preload or a question). The fills specified here do not need to be specified in the condition box each time they appear in a question.

|  |  |  |
| --- | --- | --- |
|  | **Source / Condition** | **First Used at Question #:** |
| **EXAMPLE 1:** **[PARENT]** | from Preload File: RespName | A2 |
| **EXAMPLE 2:** **[he / she]** | **he** IF A5 = 01; **she** IF A5 = 02 | E16 |
| IntvName | interviewer’s name | A1 |
| FullName | respondent’s **first and last name** from sample file | A1 |
| (His/Her), (Him/Her) and (He/She) | respondent’s gender from sample file | A2 |
| NAME | respondent’s **first** name from sample file | A2 |
| STATE | from UI records | A32 |
| Last 4 Digits of SSN | From UI records | A37 |
| UI CLAIM DATE | UI Claim date from UI records (Month, Day, and Year) or if C2=answer, fill C2 answer | C1 |
| UI CLAIM MONTH, YEAR | UI Claim month and year from UI records or if C2= answer, fill C2 answer | C4 |
| SEPARATION EMPLOYER | Employer name from UI records or if C4=answer, fill C4 answer. | C3 |
| JOB SEPARATION MONTH, YEAR | from UI records (Month and Year only) or if C11= answer, fill C11 answer | C10 |
| JOB SEPARATION MONTH | From UI records (Month only) or if C11= answer, fill C11 answer | D1 |
| STATE ONE STOP NAME | Fill state specific name from preloads | D9 |
| NEWJOB1 – NEWJOB5 | Employer names for post UI jobs | F1 |
| AND OTHER MEMBERS OF YOUR HOUSEHOLD | Fill if INT1 B2 gt 01 | G3 |
| OR ANYONE IN YOUR HOUSEHOLD | Fill if b2 gt 01 | G9 |
| SPOUSE/PARTNER/BOYFRIEND/ GIRLFRIEND  OR  SPOUSE’S/PARTNER’S/BOYFRIEND’S/ GIRLFRIEND’S | IF B1=01, FILL SPOUSE/SPOUSE’S  IF B3=01 OR 04, FILL PARTNER/PARTNER’S  IF B3=02, FILL BOYFRIEND  IF B3=03, FILL GIRLFRIEND | G10b |
| STATE TANF NAME | Every state has a TANF name associated with it, so this should be based on the state from A32 or A33. A list of state TANF names will be provided. | G12b |
| STATEMED | Every state has a Medicaid name associated with it, so this should based on the state from A32 or A33. A list of state Medicaid names will be provided. | G12e |

**CONTENTS**

**Section Page**

A. CASE MANAGEMENT 1

B. DEMOGRAPHIC AND HOUSEHOLD CHARACTERISTICS 22

c. PRE-UI EMPLOYMENT (SepARaTING JOB ONLY) AND UNEMPLOYMENT 26

d. JOB SEARCH and offers 40

e. re-employment expectations 49

f. re-employment 52

g. financial well-being 59

h. CUSTOMER SATISFACTION 71

I. CLOSING AND CONTACT INFORMATION 73

SECTION A: CASE MANAGEMENT

|  |
| --- |
| ALL |

A0. INTERVIEWER: WHICH OF THE FOLLOWING BEST DESCRIBES THIS CALL?

*Call Type*

CODE ONE ONLY

CALL OUT BY AN INTERVIEWER 01 A1

CALL-IN BY A SAMPLE MEMBER 02 A29

|  |
| --- |
| A0 = 01 |

A1. Hello, my name is [IntvName]. I am calling on behalf of the U.S. Department of Labor. May I please speak to [FullName]?

*Hello Q1*

CODE ONE ONLY

SPEAKING TO SAMPLE MEMBER 01 SampMemb, A23

SAMPLE MEMBER COMES TO THE PHONE 02 SampMemb, A23

PERSON ASKS WHAT CALL IS ABOUT 03 WhatAbout, A2

NEED TO CALLBACK 04 Callback

SAMPLE MEMBER HAS A HEALTH PROBLEM/ DECEASED 05 HealthProb, A3

SAMPLE MEMBER IS IN AN INSTITUTION 06 Institution, A10

SAMPLE MEMBER HAS MOVED 07 KnowWhere, A11

SAMPLE MEMBER DOES NOT SPEAK ENGLISH 08 Lang, A17

SAMPLE MEMBER HAS BEEN DEPLOYED BY MILITARY 09 A15

NEVER HEARD OF SAMPLE MEMBER/ WRONG NUMBER 10 Thanks,A38, Status 530

HUNG UP DURING INTRODUCTION 11 Status 640

REFUSED r Status 220

|  |
| --- |
| A1=03 |

A2. The U.S. Department of Labor recently sent [NAME] a letter inviting (him/her) to participate in a special study they are sponsoring. Mathematica Policy Research, an independent research company, is conducting the study on behalf of the U.S. Department of Labor. We are not selling anything or asking for contributions.

*WhatAbout Q2*

PROGRAMMER: ALLOW INTERVIEWER TO ACCESS FAQs FROM THIS SCREEN.

CODE ONE ONLY

SAMPLE MEMBER COMES TO THE PHONE 01 SampMemb, A23

NEED TO CALLBACK 02 Callback

SAMPLE MEMBER HAS A HEALTH PROBLEM/ DECEASED 03 HealthProb, A3

SAMPLE MEMBER IS IN AN INSTITUTION 04 Institution, A10

SAMPLE MEMBER MOVED 05 KnowWhere, A11

SAMPLE MEMBER DOES NOT SPEAK ENGLISH 06 Lang, A17

SAMPLE MEMBER DIDN'T RECEIVE LETTER 07 NoLetter, A24

SAMPLE MEMBER HAS BEEN DEPLOYED BY MILITARY 08 A15

HUNG UP DURING INTRODUCTION 09 Status 640

SUPERVISOR REVIEW 10 Status 380

NEVER HEARD OF SAMPLE MEMBER/ WRONG NUMBER 11 Thanks, A38, Status 530

REFUSED r Status 220

|  |
| --- |
| A1=05 or A2 = 03 |

A3. ENTER TYPE OF HEALTH PROBLEM

*HealthProb Q3*

CODE ONE ONLY

HEARING PROBLEM 01 AmpTTY, A4

SPEECH PROBLEM 02 AmpTTY, A4

PHYSICAL PROBLEM 03 CallLater, A8

COGNITIVE PROBLEM 04 Thanks, A38, Status 410

IN A COMA 05 Thanks, A38, Status 410

DECEASED 06 Deceased, A9

REFUSED r Status 220

|  |
| --- |
| A3=01 OR 02 |

A4. I was calling to conduct an interview with [NAME] for the U.S. Department of Labor. I can get on a phone that will amplify my voice or [NAME]’s voice, or we could use a TTY service. Would either of these enable (him/her) to complete the interview?

*AmpTTY Q4*

CODE ONE ONLY

YES – USE AMPLIFIER PHONE 01 RespAvail A5

YES – USE TTY CAPABILITY 02 RespAvail A5

NO 03 Thanks, A38, Status 410

DON’T KNOW d Callback

REFUSED r Status 220

|  |
| --- |
| A4=01 OR 02 |

A5. Is [NAME] available now?

*RespAvail Q5*

YES 01 if AmpTTY, (A4) = 01

then AmpPhone (A6)

else CallTTY (A7)

NO 00 Callback

|  |
| --- |
| A4=01 AND A5=01 |

A6. Please hold while I get the amplifier phone.

*AmpPhone Q6*

INTERVIEWER: SET UP AMPLIFIER/WEAK SPEECH EQUIPMENT AND ASK GATEKEEPER TO CALL [NAME] TO THE PHONE.

SAMPLE MEMBER COMES TO THE PHONE 01 SampMemb, A23

CALLBACK 02 Callback

|  |
| --- |
| A5=01 AND A4 =02 |

A7. I will call back in a few minutes after I have the help of the TTY operator.

*CallTTY Q7*

ARRANGE CALL WITH OPERATOR 01 SampMemb, A23

IF UNSUCCESSFUL SET CALLBACK 02 Callback

|  |
| --- |
| A3=03 |

A8. Will [NAME] be able to talk on the telephone if I call back next week?

*CallLater Q8*

YES/MAYBE – CALLBACK 01 Callback

NO 02 Thanks, A38, Status 380

DON’T KNOW d Callback

REFUSED r Status 220

|  |
| --- |
| A3=06 |

A9. I am sorry to hear that [NAME] has passed away. I was calling about a study we are conducting for the U.S. Department of Labor. You might have seen a letter we recently sent (him/her) explaining the study. When did (he/she) pass away?

*Deceased Q9*

| | | / | | | / | 2 | 0 | 1 | 4 |

MONTH DAY YEAR

01-12 01-31

DON’T KNOW d

REFUSED r STATUS 440—DECEASED

Thank you. Please accept my condolences. Good-bye.

|  |
| --- |
| A1=06 OR A2=04 |

A10. ENTER TYPE OF INSTITUTION

*Institution Q10*

CODE ONE ONLY

HOSPITAL 01 A15

NURSING HOME 02 A15

ASSISTED LIVING FACILITY 03 A15

GROUP HOME 04 A15

JAIL OR PRISON 05 Thanks, A38, Status 421

|  |
| --- |
| A1 =07, A2=05 |

A11. Do you or anyone there know how we can reach [NAME]?

*KnowWhere Q17*

YES 01 a12

NO 00 A27

DON’T KNOW d A27

REFUSED r A27

|  |
| --- |
| A11=01 |

A12. May I please have [his/her] telephone number?

*NewPhone Q18*

*Phone Number*

Please give me the telephone number, area code first.

| | | | - | | | | - | | | | | A12a

DON’T KNOW d NewAdd, A13

REFUSED r NewAdd, A13

|  |
| --- |
| SOFT CHECK: IF CONDITION (e.g. Exchange = 555); **Let me repeat that to you. REPEAT. Is that correct?** |
| HARD CHECK: IF CONDITION (e.g. Area code LE 200); **I’m sorry. My computer is indicating an error with that area code. Please give me the number again.** |

|  |
| --- |
| A12ne d or r |

A12a. Is this a home phone, business phone, or a cell phone?

*Phone Type*

CODE ONE ONLY

HOME PHONE 01

OFFICE PHONE 02

HOME AND OFFICE PHONE 03

CELL PHONE 04

PAGER 05

COMPUTER/FAX LINE 06

OTHER 07

DON’T KNOW d

REFUSED r

|  |
| --- |
| A12 ne d or r |

A12b. Should this number be used at only certain times?

*Time of Day*

CODE ONE ONLY

ANYTIME 01

DAYTIME ONLY 02

EVENING ONLY 03

SOME OTHER TIME (SPECIFY) 04

(STRING 100)

DON’T KNOW d

REFUSED r

|  |
| --- |
| a11 = 01 |

A13. May I please have [his/her] address?

(STRING 60)

*NewAddr*

*Q19*

ADDRESS 1

(STRING 60)

ADDRESS 2

(STRING 60)

CITY

(STRING 2)

STATE/TERRITORY

| | | | | | - | | | | |

ZIP CODE (+ 4 IF NEEDED)

DON’T KNOW d

REFUSED r

THANKS (A38) IF NEWPHONE EQ DK/RF THEN STATUS 530 ELSE STATUS 899

A14. PROGRAMMER: CHECK A13: IS STATE OUTSIDE THE UNITED STATES AND DC?

YES (OUTSIDE USA) 01 A15

NO (INSIDE USA) 00 Callback

|  |
| --- |
| A1=09 OR A2=08 OR A10=01-04 OR A14=01 |
| IF A1=09 OR A2=08 OR A10=01-04, “HOME”. IF A14=01, “TO LIVE IN THE U.S.”  IF A10=01, “I’M SORRY TO HEAR THAT.” |

A15. (I’m sorry to hear that.) When do you expect [NAME] to return (home/to live in the U.S.)?

| | | / | 2 | 0 | | |

MONTH YEAR

01-12 2014-2020

NEVER 00 Thanks, A38, Status 450

DON’T KNOW d A38, Status 380

REFUSED r A38, Status 380

A16. INTERVIEWER: IS DATE DURING FIELD PERIOD?

YES 01 Callback

NO, AFTER DECEMBER 2014 00 Thanks, A38, Status 450

|  |
| --- |
| A1 =08 OR A2=06 |

A17. CODE LANGUAGE NEEDED TO COMPLETE INTERVIEW IF KNOWN.

*Lang Q20*

CODE ONE ONLY

arABIC 01 A19

BOSNIAN 02 A19

CAMBODIAN 03 A19

CHINESE 04 A19

CREOLE 05 A19

GERMAN 06 A19

HINDI 07 A19

HMONG 08 A19

ITALIAN 09 A19

JAPANESE 10 A19

LAOTIAN 11 A19

POLISH 12 A19

PORTUGUESE 13 A19

RUSSIAN 14 A19

SOMALI 15 A19

SPANISH 16 A18

TAGALOG 17 A19

VIETNAMESE 18 A19

OTHER (SPECIFY) 99 A19

(STRING 20)

DON’T KNOW d Thanks, A38, Status 400

REFUSED r Thanks, A38, Status 400

|  |
| --- |
| A17=16 |

A18. (IF SPANISH NEEDED, SAY: A Spanish speaking interviewer will call you.) Thank you very much for your time.

Status 401

ENTER 1 TO CONTINUE

|  |
| --- |
| A17 NE 16, d, OR r |
| IF A1=08, TEXT IN PARENTHESES.  IF A2=06, DO NOT TEXT IN PARENTHESES. |

A19. (The U.S. Department of Labor recently sent [NAME] a letter saying that someone from Mathematica would be calling (him/her) to participate in a study they are conducting for the U.S. Department of Labor. Mathematica is an independent research company that is conducting the study on behalf of the Department of Labor. We are not selling anything or asking for contributions.) We are looking for someone who is 18 years or older who lives with [NAME] to help (him/her) by interpreting the interview for us. Are you 18 years of age or older and live with [NAME]?

*NeedAsst Q22*

IF YES: Would you be able to help [NAME] by interpreting the interview?

IF NO: Is there someone else 18 years or older who lives with [NAME] and could come to the phone and help with the interview?

CODE ONE ONLY

SPEAKING TO FAMILY MEMBER/FRIEND WHO WILL ACT AS INTERPRETER 01 Asst Name, A20

NO INTERPRETER AVAILABLE AT THIS TIME but maybe later 02 Asst Name, A20

NO INTERPRETER AVAILABLE 03 Callback

SUPERVISOR REVIEW 04 Status 380

DON’T KNOW d Callback

REFUSED r Status 210

|  |
| --- |
| A19=01 OR 02 |
| IF A19=01, “YOUR NAME” AND “BEFORE WE BEGIN”.  IF A19=02, “THE NAME OF THE PERSON…..” |

A20. (Before we begin), can you please tell me (your name/the name of the person who may be able to interpret the interview for [NAME])?

*Asst/ Proxy Name*

*Q23*

(STRING 50)

INTERPRETER NAME

DON’T KNOW d

REFUSED r

|  |
| --- |
| A19=01 OR 02 |
| IF A19=01, “ARE YOU”. IF A19=02, NAME FROM A20. |

A21. And how (are you/is [NAME FROM A20]) related to [NAME]?

*AsstRel*

*Q24*

CODE ONE ONLY

SPOUSE/PARTNER/BOYFRIEND/GIRLFRIEND 01

ADULT CHILD—18 OR OLDER 02

SIBLING 03

PARENT 04

NIECE/NEPHEW 05

Roommate/OTHER RELATIVE 06

GROUP/FOSTER HOME/ASSISTED LIVING FACILITY ADMINISTRATOR/CAREGIVER 07

OTHER RELATIVE 08

NOT RELATED 09

DON’T KNOW d

REFUSED r

|  |
| --- |
| PROGRAMMER: IF A19=02, GO TO CALLBACK |

|  |
| --- |
| A19=01 |

A22. Thank you for agreeing to interpret the interview for (him/her). Please repeat the questions to [NAME] exactly as I read them to you.

*[INTERPRETER INSTRUCTION (Q25a)*

SCREENER/SURVEY \*\*\* GO TO A30

|  |
| --- |
| A1=01 OR 02, A2=01, A6 OR A7=01 |
| IF HELLO (Q1) EQ <2> OR WHATABOUT (Q2) EQ <1> THEN] HELLO, MY NAME IS [INTVNAME]. I AM CALLING ON BEHALF OF ... [ENDIF] |

A23. [Hello, my name is [INTV NAME], calling on behalf of the U.S. Department of Labor.] Recently the U.S. Department of Labor sent you a letter saying that someone from Mathematica would be calling you to participate in a study about people who become unemployed or have their work hours reduced and the adjustments they make. Your participation is very important. The survey will take about 25 minutes to complete. In addition to the $5 that was included with your letter, Mathematica will send you $15 after you complete the survey today. All of your answers will be kept private to the extent permitted by law and used for research purposes only. Let’s get started.

IF NEEDED: By participating in this special study you can receive up to $80 as an incentive. Here’s how it works--in addition to the $5 that was included with your letter, Mathematica will send you $15 after you complete the survey today. We will ask you to complete two more surveys with us over the next six months or so. You can receive $30 for completing those two surveys using the web or by calling Mathematica.

PROGRAMMER: ALLOW INTERVIEWER TO ACCESS FAQs FROM THIS SCREEN.

CODE ONE ONLY

BEGIN INTERVIEW 01 Screener/Survey, A30

DID NOT RECEIVE OR DOES NOT RECALL LETTER 02 NoLetter, A24

NOT A GOOD TIME 03 Callback

HUNG UP DURING INTRODUCTION 04 Status 640

SUPERVISOR REVIEW 05 Status 380

[NAME] WILL CALL MPR BACK 06 A39

DID NOT RECEIVE PREPAYMENT, SEND FULL $20 07 A29a

WANTS MORE INFORMATION FAQ

REFUSED r Status 200

|  |
| --- |
| A2=07 OR A23=02 |
| IF A19=01, FILL “HIM/HER/HE/SHE”, ELSE FILL “YOU” |

A24. The letter was from the U.S. Department of Labor and said that someone from Mathematica would be calling (you/him/her) to participate in a study they are conducting about people who become unemployed or have their work hours reduced and the adjustments they make. Your participation is very important. The survey will take about 25 minutes to complete. In addition to the $5 that was included with your letter, Mathematica will send you $15 after you complete the survey today. All of your answers will be kept private to the extent permitted by law and used for research purposes only. Let’s get started.

*NoLetter Q32*

IF NEEDED: By participating in this special study you can receive up to $80 as an incentive. Here’s how it works--in addition to the $5 that was included with your letter, Mathematica will send you $15 after you complete the survey today. We will ask you to complete two more surveys with us over the next six months or so. You can receive $30 for completing those two surveys using the web or by calling Mathematica.

CODE ONE ONLY

BEGIN INTERVIEW 01 Screener/Survey, A30

WANTS ANOTHER LETTER/WANTS LETTER READ TO THEM 02 ReadLetter, A25

NOT A GOOD TIME 03 Callback

DID NOT RECEIVE PREPAYMENT, SEND FULL $20 04 A29a

WANTS MORE INFORMATION FAQ

REFUSED r Status 200

|  |
| --- |
| A24=02 |

A25. May I read the letter to you and then we can begin?

*ReadLetter Q34*

PROGRAMMER: LOAD TEXT OF LETTER HERE

YES, READ THE LETTER 01 A30

NO, WANTS ANOTHER LETTER FIRST 02 SendLetter, A26

REFUSED r Status 200

|  |
| --- |
| A25=02 |

A26. Okay, I'll mail another letter and will call back in a few days. To what address should we mail the letter?

*SendLetter Q35*

(STRING 60)

ADDRESS 1

(STRING 60)

ADDRESS 2

(STRING 60)

CITY

(STRING 2)

STATE/TERRITORY

| | | | | | - | | | | |

ZIP CODE (+ 4 IF NEEDED)

DON’T KNOW d

REFUSED r

THANKS (A38) STATUS 831—LETTER REQUESTED

|  |
| --- |
| A11=00, d, OR r |

A27. Is there someone else who might know how to reach [NAME]?

YES 01

NO 00 A40

DON’T KNOW d A40

REFUSED r A40

|  |
| --- |
| A27=01 |

A28. What’s that person’s name and phone number?

PROBE: If you don’t have all the information, please tell me what you can.

(STRING 50)

FIRST NAME

(STRING 50)

MIDDLE INITIAL/NAME

(STRING 50)

LAST NAME

Please give me the telephone number, starting with the area code first.

| | | | - | | | | - | | | | | A38, Status 530

DON’T KNOW d A38, Status 530

REFUSED r A38, Status 530

|  |
| --- |
| SOFT CHECK: IF CONDITION (e.g. Exchange = 555); **Let me repeat that to you. REPEAT. Is that correct?** |
| HARD CHECK: IF CONDITION (e.g. Area code LE 200); **I’m sorry. My computer is indicating an error with that area code. Please give me the number again.** |

|  |
| --- |
| PROGRAMMER: THIS INFORMATION NEEDS TO BE SENT TO LOCATING AS A LEAD |

|  |
| --- |
| a0=02 |

A29. Thank you for calling in to participate in a study we are conducting for the U.S. Department of Labor. The study is about people who become unemployed or have their work hours reduced and the adjustments they make. Your participation is very important. The survey will take about 25 minutes to complete. In addition to the $5 that was included with your letter, Mathematica will send you $25 after you complete the survey today. All of your answers will be kept private to the extent permitted by law and used for research purposes only. Let’s get started.

IF NEEDED: By participating in this special study you can receive up to $90 as an incentive. Here’s how it works--in addition to the $5 that was included with your letter, Mathematica will send you $25 after you complete the survey today. We will ask you to complete two more surveys with us over the next six months or so. You can receive $30 for completing those two surveys using the web or by calling Mathematica.

CODE ONE ONLY

BEGIN INTERVIEW 01 Screener/Survey, A30

NOT A GOOD TIME 02 Callback

HUNG UP DURING INTRODUCTION 03 Status 640

SUPERVISOR REVIEW 04 Status 380

SAMPLE MEMBER WILL CALL MATHEMATICA BACK 05 A39

DID NOT RECEIVE PREPAYMENT, SEND FULL $20 06 A29a

WANTS MORE INFORMATION FAQ

REFUSED r Status 200

|  |
| --- |
| A23=07, A24=04 OR A29=06 |

A29a. Since you did not receive the $5 advance payment, Mathematica will send you the full $20 after you complete the survey.

BEGIN INTERVIEW 01 Screener/Survey, A30

WANTS ANOTHER LETTER/WANTS LETTER READ TO THEM 02 ReadLetter, A25

NOT A GOOD TIME 03 Callback

WANTS MORE INFORMATION FAQ

REFUSED r Status 200

|  |
| --- |
| A23, A24, A25, OR A29=01 |

A30. To get started, I need to confirm that I am speaking with the correct person. Is your full name [FULL NAME]?

CODE ONE ONLY

YES 01 A32

NAME CHANGED 02 A31

NO 00 A31

DON’T KNOW d Thanks, A38, Status 380

REFUSED r Thanks, A38, Status 380

|  |
| --- |
| A30=00 or 02 |
| “NEW” IF A30=02 |

A31. For the record, what is your (new) name?

*NewName*

(STRING 50)

FIRST NAME

(STRING 50)

MIDDLE INITIAL/NAME

(STRING 50)

LAST NAME

NAME CONFIRMED 01

NAME NOT CONFIRMED 00 A41

DON’T KNOW d Thanks, A38, Status 380

REFUSED r Thanks, A38, Status 380

|  |
| --- |
| PROGRAMMER: STORE NAME CHANGE IN NAME UPDATE BLOCK |

|  |
| --- |
| A30 OR A31 = 01 |
| IF A19=01, “IS HE/SHE”, ELSE “ARE YOU”. [STATE] FROM UI CLAIM STATE IN SAMPLE FILE. |

A32. (Are you/Is [he/she]) now living in [STATE]?

*State\_Ask*

YES 01 A34

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| A32=00, D or r |
| IF A19=01, “ “IS HE/SHE”, ELSE “ARE YOU”. |

A33. In what state (are you/is [he/she]) now living?

*State*

| | | (TWO LETTER CODE)

DON’T KNOW d

REFUSED r

|  |
| --- |
| PROGRAMMER: STORE STATE CHANGE FOR USE IN FUTURE QUESTIONS AT STATE UPDATE BLOCK |

|  |
| --- |
| ALL |
| IF A19=01, “HIS/HER, ELSE “YOUR” |

A34. What is (your/his/her) date of birth?

| | | / | | | / | 1 | 9 | | | A36

MONTH DAY YEAR

(01–12) (01-31) (1934–1996)

DON’T KNOW d A35

REFUSED r A35

|  |
| --- |
| SOFT CHECK: IF YEAR IS LT 1949 OR GT 1996:  **I recorded ( A34 ANSWER). Is that correct?** |

|  |
| --- |
| A34=d or r |
| IF A19=01, “IS HE/SHE”, ELSE “ARE YOU”. |

A35. How old (are you/is [he/she])?

*Age*

| | | AGE

18-75

DON’T KNOW d A37

REFUSED r A37

|  |
| --- |
| SOFT CHECK: IF LT18 OR GT75: **I recorded (A35 ANSWER). Is that correct?** |

A36. PROGRAMMER: CHECK BIRTHDATE (A34) OR AGE (A35): IS MONTH, DAY, YEAR OF BIRTH AT A34=MONTH, DAY, AND YEAR OF BIRTH ON RECORD OR DOES AGE CONVERT TO DOB ON RECORD?

YES 01 A37a

NO 00

|  |
| --- |
| a36=00 |
| IF A19=01, “HIS/HER”, ELSE “YOUR”. |

A37. For verification, please tell me only the last four digits of (your/his/her) Social Security Number.

| | | | |

DON’T KNOW d

REFUSED r

A37a. PROGRAMMER: IS [NAME]’s IDENTITY VERIFIED—NAME, BIRTHDATE, AND/OR LAST FOUR SSN VERIFIED? NOTE: 2 OF 3 NEEDED.

YES (VERIFIED) 01

NO (FAILED VERIFICATION) 00 A41

|  |
| --- |
| A37A=01 |
| IF A19=01, “ARE YOU”, ELSE “IS [HE/SHE]”. |

A37b. CODE WITHOUT ASKING IF KNOWN, OTHERWISE, ASK: (Are you/Is [he/she]) male or female?

MALE 01

FEMALE 02

DON’T KNOW d

REFUSED r

|  |
| --- |
| A37A=01 |

A37c. INTERVIEWER: WHO ARE YOU SPEAKING WITH?

*Whom*

NAME 01 B1

INTERPRETER 02 B1

|  |
| --- |
| A1=10, A2=11, A3=04 OR 05, A4=03, A8=02, A10=05, A15=00, A17=d OR r, A28=d OR r, A30=d or r, A31=d OR r |

A38. Thank you very much for your time.

*Thanks Q36*

ENTER 1 TO CONTINUE

|  |
| --- |
| A23=06 |

A39. Thanks for offering to call back. Please write down our toll-free number. It is xxx-xxx-xxxx. We are available days, evenings, and weekends. Please ask for Nancy Long when you call. If you call after hours, please leave a message and we will get back to you the next day.

(STATUS 830—RESPONDENT WILL CALL MATHEMATICA)

|  |
| --- |
| A27=00, d, OR r |

A40. Please write down the project’s toll free number and give it to [NAME] or someone who might know how to reach (him/her). The toll free number is xxx-xxx-xxxx. Thank you for your time.

|  |
| --- |
| a31=00 or A37a=00 |
| If A37a=00, text in parentheses |

A41. (INTERVIEWER: GO BACK AND CONFIRM DOB AND LAST 4 SSN BY SAYING:

Let me confirm that I have entered your date of birth and the last four digits of your social security number correctly. READ ENTRIES AND CORRECT IF NEEDED.)

Thanks for your patience. There seems to be a problem with my information. I need to check with my supervisor about what to do next. Someone from Mathematica will get back to you. Thanks again. Good-bye.

STATUS 380—SUPERVISOR REVIEW

**A42.** refusal module: THIS WILL DISPLAY WHEN BREAKOFF IS INDICATED IN BLAISE.

NOTE: A REFUSAL CAN OCCUR AT ANY POINT IN THE INTERVIEW.

INTERVIEWER: INDICATE WHO REFUSED.

*WHO REFUSED*

CODE ONE ONLY

SAMPLE MEMBER 01

GATEKEEPER 02

UNKNOWN PERSON 03

INTERVIEWER: INDICATE REFUSAL REASON TO BEST OF KNOWLEDGE.

*REFUSAL REASON*

CODE BEST

UNHAPPY WITH UI BENEFITS/UI BENEFITS ENDED 04

NO TIME 05

SAID NEVER COLLECTED BENEFITS/did not want to continue 06

NO INTEREST 07

DON’T TRUST GOVERNMENT/DOL 08

PRIVACY CONCERNS 09

NO reason GIVEN 10

OTHER (SPECIFY) 99

(STRING 200)

**FREQUENTLY ASKED QUESTIONS (FAQs)**

PROGRAMMER: ALLOW INTERVIEWER TO VIEW FAQS AT ANY TIME.

**WHO OR WHICH AGENCY IS SPONSORING THE STUDY?**

This study is being sponsored by the U.S. Department of Labor and has been approved by the U.S. Office of Management and Budget under OMB Control Number xxxx-xxxx. Without this approval we would not be able to conduct this survey.

**WHO IS CONDUCTING THE STUDY?**

Mathematica, an independent research company is conducting the study on behalf of the U.S. Department of Labor. Mathematica has more than 40 years of policy research and program evaluation experience. You can learn more about Mathematica by visiting our website at www.mathematica-mpr.com.

**WHAT IS THE PURPOSE OF THE STUDY?**

This study is to learn about the adjustments that people make after they become unemployed or have their work hours reduced and file for unemployment insurance benefits. This information will help policymakers to assess how well the UI program is serving the nation’s workers and refine it to better meet their needs.

**WHO IS ELIGIBLE TO PARTICIPATE IN THE STUDY?**

The U.S. Department of Labor is interested in hearing from people in your state who recently filed for unemployment insurance benefits. You were scientifically selected to participate in the study from among persons who filed for benefits around the same time and from the same geographic area as you.

**I DON’T COLLECT UNEMPLOYMENT BENEFITS ANY MORE/I COLLECTED THEM FOR A VERY SHORT TIME.**

We want to interview people who filed for unemployment insurance benefits in your state in the past year. Even if you no longer receive or never collected unemployment benefits, your experience and input is very important to the study. Hearing from people with different experiences helps us learn more about people who file for unemployment insurance benefits.

**I AM DISSATISFIED WITH MY UNEMPLOYMENT BENEFITS/LOCAL AGENCIES**.

Your comments will be especially important to the research. The U.S. Department of Labor needs to learn about the experiences of people who were satisfied and people who were dissatisfied with their experiences.

**HOW DID YOU GET MY NAME?**

Your name was scientifically selected from among persons in your state who filed for unemployment insurance benefits within the past year.

**FAQs – (continued)**

**WILL MY ANSWERS BE KEPT PRIVATE?**

Yes. All of the information we collect in the survey will be kept private to the extent permitted by federal law and will be used for research purposes only. Your answers will be combined with those of others and your name will never be used in reporting the results of the study. Your answers 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 about 25 minutes.

**WHY DO YOU WANT TO INTERVIEW ME THREE TIMES?**

The Department of Labor is interested in capturing how the experiences of unemployed workers and workers who have their work hours reduced change over time. By interviewing you three times, we will be able to learn more about the adjustments that unemployment insurance recipients make. You will be paid for each interview you complete.

**WHEN WILL I BE CONTACTED FOR THE NEXT SURVEY?**

Mathematica will contact you by email, phone or letter approximately XX weeks from the time you complete your first interview to provide instructions for completing the second interview, and again about XX months later for the third interview.

**HOW CAN I RECEIVE THE MAXIMUM PAYMENT FOR PARTICIPATION?**

You can receive the maximum payment of $90 if you complete all three surveys using the web or calling in and completing the survey with a Mathematica interviewer. If you do not use the web to complete the survey and Mathematica calls you to complete the survey, you will receive $20 for each survey you complete.

**I DON’T HAVE THE TIME.**

We can schedule a call to do the survey at your convenience. Our interviewers are available to speak with you seven days a week as follows: on Mondays through Thursdays from 9:00 a.m. to 12:00 midnight, on Fridays from 9:00 a.m. to 10:00 p.m., Saturdays from 9:00 a.m.-8:00 p.m. and Sundays from 1:00 p.m. to 9:00 p.m. Eastern Standard Time. We can also complete the survey in more than one call, if necessary.

**I DON’T HAVE THE TIME NOW. I’LL DO IT ONLINE.**

We can begin the survey now and see how far we get. I can call you at your convenience if we are not able to complete it. **INSISTS ON WEB**: Please let me know when you are ready to write down your log in information. PAUSE. To complete the survey using the web, please log on to ***https://www.xxxxxsurvey.xxx*** Your username and password are: **INTERVIEWER PROVIDE USERNAME AND PIN INFORMATION.** You can log on to complete the survey 24 hours per day, seven days per week.

**WHAT HAPPENS IF I DON’T PARTICIPATE IN THE SURVEY?**

Your participation is voluntary and will not affect your eligibility to receive any services or benefits. Your selection for the survey was done scientifically. You were chosen to represent other people who filed for unemployment insurance benefits in your area. Your answers will help the U.S. Department of Labor improve services to people who become unemployed or have their work hours reduced. There are no right or wrong answers. We’re interested in your experiences and opinions.

**FAQs – (continued)**

**I’M NOT INTERESTED.**

Let me reassure you that we are not selling anything. The questions we ask will help the U.S. Department of Labor improve services to people who are unemployed or have their work hours reduced. There are no right or wrong answers. We’re interested in your experiences and opinions. Your answers will be combined with those of others and reported in summary form. Your name will never be included in any report. If you complete the survey, you will receive a total of $20 as an incentive. Mathematica will send you 15 more dollars in addition to the $5 that was included with your letter of invitation.

**WILL I BE PAID?**

Yes, by participating in this special study you can receive up to ($80/($90) as an incentive payment. Here’s how it works--in addition to the $5 that was included with your letter, Mathematica will send you ($15/$25) after you complete the survey today. We will ask you to complete two more surveys with us over the next six months or so. You can receive $30 for completing those two surveys using the web or by calling Mathematica.

**I DID NOT RECEIVE $5 WITH MY LETTER/DID NOT GET THE LETTER OR THE MONEY**

I’m sorry about that. Since you did not receive the $5 advance payment, Mathematica will send you the full $20 after you complete the survey.

**WHAT ARE YOU GOING TO DO FOR ME NOW? ARE YOU GOING TO HELP ME FIND A JOB?**

Mathematica is a private, independent research firm. Our company is conducting this study for the U.S. Department of Labor, and this survey is part of the study. We cannot provide assistance finding jobs. Mathematica will send you 15 more dollars in appreciation for completing the survey. This is in addition to the $5 that was included with your letter of invitation.

**I’M ON THE NATIONAL “DO NOT CALL LIST/REGISTRY.” WHY ARE YOU CALLING ME?**

The do not call list or registry applies to telemarketing calls, not to calls like this one that are approved by the government. Lawmakers recognize the need for the public to participate in studies like this to learn how government programs are working and how to improve them. We will not sell you anything, nor will we ask for money. Your privacy will be respected, and your cooperation is appreciated. For more information on who is included and excluded on the do not call list, you can visit the website at www.donotcall.gov.

**DOES THE MONEY I RECEIVE FOR COMPLETING THIS SURVEY COUNT TOWARDS MY INCOME FOR THIS YEAR?**

Mathematica cannot give tax advice.

**WHO CAN I CONTACT FOR MORE INFORMATION?**

For more information about the study, you can visit the U.S. Department of Labor (DOL) website at http://www.dol.gov/asp/evaluation/ongoing. For questions about the survey you can call Mathematica’s Survey Director, Julita Milliner-Waddell at 609-275-2206.

SECTION B: DEMOGRAPHIC AND HOUSEHOLD CHARACTERISTICS

First I have some general questions about you and your household. By household we mean people who live together and share household finances.

|  |
| --- |
| ALL |

B1. What is your current marital status—are you now married, separated, divorced, widowed, or have you never been married?

*CPS*

*modified*

CODE ONE ONLY

MARRIED 01

SEPARATED 02

DIVORCED 03

WIDOWED 04

NEVER MARRIED 05

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

B2. How many people, including yourself, are currently part of your household? Please include people who are temporarily away, for example, at school or in the hospital and people not related to you.

*UCP K5*

| | | # OF CURRENT HOUSEHOLD MEMBERS

(01-20)

DOES NOT RESIDE IN A HOUSE/HOMELESS 98

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF GT 10; **SAY: I recorded B2 answer, is that correct?** |
| SOFT CHECK: IF B1=01 MARRIED, AND B2=01, SAY: **Please include yourself in your count.** |

|  |
| --- |
| B1 NE 01 AND B2 GT 01 |

B3. Do you have a partner, boyfriend, or girlfriend who is currently part of your household?

*CPS MODIFIED*

PROBE: By household we mean people who live together and share household finances.

CODE ONE ONLY

YES, MENTIONED PARTNER 01

YES, MENTIONED BOYFRIEND 02

YES, MENTIONED GIRLFRIEND 03

YES, but did not specify relationship 04

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| (b1=01 and b2 gt 02) **or** (b3=01,02, 03 or 04 and b2 gt 02) **or** (b3=00, d or r and b2 gE 02) |

B4. How many people in your household are children under 18 years old?

| | | # OF CHILDREN UNDER 18

(00-20)

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF GT 10; **SAY: I recorded B4 answer, is that correct?** |

|  |
| --- |
| ALL |

B5. When your job with [SEPARATION EMPLOYER] ended, what was the highest level of school you had completed or the highest degree you had received at the time?

*COBRA J3*

INTERVIEWER: IF RESPONDENT SAYS THEY WERE HOME SCHOOLED, PROBE FOR HIGHEST YEAR, GRADE, DEGREE, OR CERTIFICATE COMPLETED.

INTERVIEWER: IF RESPONDENT SAYS HIGH SCHOOL, PROBE: **Did you receive a diploma, GED, or certificate of completion?**

CODE ONE ONLY

DID NOT COMPLETE HIGH SCHOOL OR GED 01

HIGH SCHOOL: DIPLOMA 02

HIGH SCHOOL: GED 03

CERTIFICATE OF COMPLETION 04

SOME COLLEGE/SOME POSTSECONDARY VOCATIONAL COURSES 05

2-YEAR OR 3-YEAR COLLEGE DEGREE (ASSOCIATE’S DEGREE) OR VOCATIONAL SCHOOL DIPLOMA 06

4-YEAR COLLEGE DEGREE (BACHELOR’S DEGREE) 07

SOME GRADUATE WORK/NO GRADUATE DEGREE 08

GRADUATE OR PROFESSIONAL DEGREE (e.g., MA, MBA, Ph.D., JD, MD) 09

NEVER ATTENDED SCHOOL 10

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

B6. Are you a veteran of any branch of the United States Armed Forces?

**NEW**

INTERVIEWER: IF THE RESPONDENT VOLUNTEERS THAT THEY WERE DISHONORABLY DISCHARGED, CODE NO.

YES 01

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| All |

B7. In general, would you say your health is excellent, good, fair, or poor?

*COBRA G1 mod*

CODE ONE ONLY

EXCELLENT 01

GOOD 02

FAIR 03

POOR 04

DON’T KNOW d

REFUSED r

SECTION C: PRE-UI EMPLOYMENT (SEPARATING JOB ONLY) AND UNEMPLOYMENT

|  |
| --- |
| ALL |

C1. My next questions are about the unemployment insurance claim you filed recently and about the job you had just before you filed that claim. According to [STATE’s] Unemployment Insurance Agency records, you filed for unemployment insurance benefits on or about [UI CLAIM DATE]. Is that correct?

*UCP*

YES 01 C2a

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| C1=00, d, OR r |

C2. When in [UI CLAIM MONTH, YEAR], did you file for unemployment insurance benefits?

*UCP*

PROBE: If you filed more than once during that period, please tell me about the most recent time that you filed for benefits.

PROBE IF NEVER COLLECTED: Even if you never collected benefits, please tell me when around [UI CLAIM DATE] you filed for unemployment insurance benefits.

PROBE, IF NECESSARY: Did you file for or start collecting unemployment insurance benefits in [UI CLAIM YEAR]?

RECORD MONTH AND YEAR.

| | | / | 2 | 0 | | |

MONTH YEAR

(01-12) (2013-2014)

PROBE: IF DATE IS MORE THAN SIX WEEKS BEFORE THE UI CLAIM DATE, SAY, “I’m sorry, I need to check with my supervisor to see if we are interviewing people with this filing date.

DID NOT FILE 98 STATUS 380

HAS NOT COLLECTED BENEFITS/HAS NOT COLLECTED YET 99

DON’T KNOW d STATUS 380

REFUSED r THANKS AND END

|  |
| --- |
| PROGRAMMER: REPLACE SAMPLE DATA UI CLAIM DATE WITH THIS DATE FOR SUBSEQUENT QUESTIONS.  PROGRAMMER: DATE MUST BE PRIOR TO INTERVIEW DATE.  PROGRAMMER: IF DATE IS MORE THAN SIX WEEKS BEFORE THE UI CLAIM DATE, SHOW PROBE AND STATUS FOR SUPERVISOR REVIEW (Status 380) |

|  |
| --- |
| C1=01 OR C2=99 |

C2a. How did you file for your unemployment insurance benefits—was it on-line using your state’s website, using an automated telephone system, over the telephone with a staff person, or in person?

**NEW**

CODE ONE ONLY

ONLINE using state WEBSITE 01

automated TELEPHONE system 02

by telephone with a staff person 03

IN PERSON 04

OTHER (SPECIFY) 99

(STRING 50)

DON’T KNOW d

REFUSED r

|  |
| --- |
| c1=01 or c2=date provided |

C2b. Are you currently receiving unemployment insurance benefits?

INTERVIEWER: IF RESPONDENT EXPECTS TO, BUT HAS NOT YET RECEIVED A CHECK, CODE YES.

YES 01 C3

NO 00

DON’T KNOW d C3

REFUSED r C3

|  |
| --- |
| C2b=00 |

C2c. When did you stop receiving unemployment insurance benefits?

INTERVIEWER: RECORD MONTH, DAY, AND YEAR. IF SAMPLE MEMBER CANNOT GIVE EXACT DATE, PROBE FOR BEGINNING (CODE DAY 1), MIDDLE (CODE DAY 15), OR END OF MONTH (CODE DAY 30).

| | | / | | | / | 2 | 0 | | | C3

MONTH DAY YEAR

(01-12) (01-31) (2014-2015)

NEVER COLLECTED 99 C3

DON’T KNOW d

REFUSED r

|  |
| --- |
| C2b=00 |

C2d. Why did you stop receiving unemployment insurance benefits from your claim filed around [UI CLAIM DATE]?

CODE ONE ONLY

NEW INCOME SOURCES

RE-EMPLOYED/FOUND A JOB/STARTED OWN BUSINESS 1

BENEFIT RESTRICTION ISSUES

BENEFITS RAN OUT/EXHAUSTED 2

DISQUALIFIED 3

RECEIVED WORKMAN’S COMP/HAD CASE PENDING 4

WAS NOT ELIGIBLE FOR UI IN THE FIRST PLACE/DENIED BENEFITS 5

NOT AVAILABLE TO WORK

ILLNESS/DISABILITY 6

VOLUNTARILY OUT OF LABOR FORCE/WENT TO SCHOOL 7

GOT BACK IMMIGRATION PAPERS/HAD LOST THEM 8

WENT INTO MILITARY 9

RETIRED/RECEIVED SOCIAL SECURITY 10

MOVED 11

OTHER

TOO MUCH TROUBLE/HASSLE DEALING WITH/REACHING UI OFFICE 12

DID NOT WANT UI ANYMORE 13

NEVER COLLECTED 14

BENEFITS/CHECKS STOPPED – NO REASON SPECIFIED 15

OTHER (SPECIFY) 99

DON’T KNOW d

REFUSED r

|  |
| --- |
| IF OTHER SPECIFY (99): **What was the reason you stopped receiving unemployment insurance benefits?** |

|  |
| --- |
| all |
| IF C2=99, READ SENTENCE IN parentheses. |

C3. (Even though you have not received benefits, we are very interested in learning about your experience since you filed for benefits.) [STATE’s] Unemployment Insurance Agency records indicates that you worked at [SEPARATION EMPLOYER] around [UI CLAIM DATE]. Is this correct?

*UCP C1 MOD*

YES 01 C5

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| C3 = 00, d, OR r |

C4. What was the name of the employer you worked for just before you filed for unemployment benefits in [UI CLAIM MONTH/YEAR]?

*UCP C2*

INTERVIEWER: IF RESPONDENT INDICATES HE/SHE WORKED FOR A TEMPORARY AGENCY, CLARIFY THAT WE ARE INTERESTED IN THE AGENCY NAME AND NOT THE EMPLOYER WHO CONTRACTED THE TEMPORARY AGENCY.

NOTE: PROBE FOR SPECIFIC DIVISION OR BRANCH OF OPERATION FOR THIS EMPLOYER. For example, the manufacturing, retail or wholesale part of a company.

(SPECIFY) 99

(STRING 50)

DON’T KNOW d

REFUSED r

|  |
| --- |
| PROGRAMMER BOX C4.1  PROGRAMMER: REPLACE SAMPLE DATA SEPARATION EMPLOYER WITH THIS SEPARATION EMPLOYER FOR SUBSEQUENT QUESTIONS. |

|  |
| --- |
| ALL |

C5. What kind of company is [SEPARATION EMPLOYER]--what do they make, do, or sell?

*UCP C3*

PROBE, IF NECESSARY: What was the major product or service of [SEPARATION EMPLOYER NAME]?

(SPECIFY) 99

(STRING 50)

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

C6. What kind of work did you do or duties did you have [SEPARATION EMPLOYER]?

*UCP*

*C4*

PROBE: That is, what was your occupation?

NOTE: PROBE FOR VERBS, E.G., I INSTALLED DOORS; I OPERATEd A FORK LIFT, I DROVE A TRACTOR TRAILER, I STOCKED SHELVES IN A DISCOUNT STORE.

(SPECIFY) 99

(STRING 50)

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

C7. Was your job with [EMPLOYER NAME] a seasonal or temporary job?That is, was this a job that you knew from the beginning might only last a few weeks or months?

*COBRA C6*

YES 01

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

C8. In what month and year did you first start working at [SEPARATION EMPLOYER]?

*UCP C6*

PROBE: If you are regularly laid off at the same time each year such as when the company closes for maintenance or other reasons, please provide the month and year you first started, not the last time you started after your most recent layoff.

ADJUST DATE IF NECESSARY

| | | / | | | | | C10

MONTH YEAR

(01-12) (1964-2014)

DON’T KNOW d

REFUSED r

|  |
| --- |
| PROGRAMMER: DATE MUST BE BEFORE UI CLAIM DATE. |

|  |
| --- |
| C8 = d OR r |

C9. How many total years and months did you work at [SEPARATION EMPLOYER]?

*COBRA C8 MOD*

PROBE: Your best estimate is fine.

| | | YEARS | | | MONTHS

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

C10. According to [STATE’s] Unemployment Insurance Agency records, your job at [SEPARATION EMPLOYER] ended in [JOB SEPARATION MONTH, YEAR]. Is that correct?

*COBRA C9*

YES 01 C12

NO 00

NO, MY WORK HOURS WERE REDUCED 02

DON’T KNOW d

REFUSED r

|  |
| --- |
| C10 = 00, 02, d, OR r |
| IF C10 = 02, “WERE YOUR WORK HOURS REDUCED”. |

C11. In what month and year (did your job at [SEPARATION EMPLOYER] end/were your work hours reduced)?

*COBRA C9*

INTERVIEWER: IF RESPONDENT HAD A REDUCTION IN WORK HOURS, ENTER DATE REDUCTION IN work HOURS BEGAN.

| | | / | 2 | 0 | | |

MONTH YEAR

(1-12) (2013 - 2014)

JOB DID NOT END/WORK HOURS WERE NOT REDUCED/still employed at employer 98 Status 380 (Sup Review)

DON’T KNOW d

REFUSED r

|  |
| --- |
| PROGRAMMER: REPLACE SAMPLE DATA JOB SEPARATION MONTH, YEAR WITH THIS DATE FOR SUBSEQUENT QUESTIONS. |

|  |
| --- |
| all |
| IF C10=02, “do” and “are”. |

C12. Even if you (did/do) not use them, (were/are) any of the following benefits available to you through your job at [SEPARATION EMPLOYER]? (READ a-c)

*TAA C12*

INTERVIEWER: CODE “YES” IF AVAILABLE, BUT NOT USED. IF BENEFITS WERE OR WILL BE AVAILABLE TO SAMPLE MEMBER AFTER A STANDARD PROBATIONARY PERIOD, CODE YES, EVEN IF NOT USED.

|  | CODE ONE PER ROW | | | |
| --- | --- | --- | --- | --- |
|  | YES | NO | DON’T KNOW | REFUSED |
| a. health insurance benefits? | 01 | 00 | d | r |
| b. paid sick days? | 01 | 00 | d | r |
| c. a retirement savings or pension plan? | 01 | 00 | d | r |

|  |
| --- |
| all |
| IF C10=02, “WORK HOURS WERE REDUCED” |

C13. How many hours per week, including regular overtime hours, did you usually work at [SEPARATION EMPLOYER] before your (job ended/work hours were reduced)?

*COBRA C14*

PROBE: On average. Your best estimate is fine.

| | | C14a

(1-80)

VARIES v

DON’T KNOW d

REFUSED r

|  |
| --- |
| C13=v, d, or r |

C14. Would you say you worked less than 20 hours per week, between 20 and 29 hours per week, between 30 and 34 hours per week, or 35 or more hours per week at [SEPARATION EMPLOYER]?

*COBRA C14a*

PROBE: On average. Your best estimate is fine.

CODE ONE ONLY

LESS THAN 20 HOURS PER WEEK 01

BETWEEN 20 AND 29 HOURS PER WEEK 02

BETWEEN 30 AND 34 HOURS PER WEEK 03

35 OR MORE HOURS PER WEEK 04

DON’T KNOW d

REFUSED r

PROGRAMMER: IF C10 = 02 (HOURS REDUCED), GO TO C14a. OTHERWISE GO TO C15.

|  |
| --- |
| C10=02 |

C14a. How many hours per week did you usually work at [SEPARATION EMPLOYER] after your work hours were reduced)?

*COBRA C14*

PROBE: On average. Your best estimate is fine.

| | | C15

(1-80)

VARIES v

DON’T KNOW d

REFUSED r

|  |
| --- |
| C14a = v, d, OR r |

C14b. Would you say that after your work hours were reduced you usually worked less than 20 hours per week, between 20 and 29 hours per week, between 30 and 34 hours per week, or 35 or more hours per week at [SEPARATION EMPLOYER]?

*COBRA C14a*

PROBE: On average. Your best estimate is fine.

CODE ONE ONLY

LESS THAN 20 HOURS PER WEEK 01

BETWEEN 20 AND 29 HOURS PER WEEK 02

BETWEEN 30 AND 34 HOURS PER WEEK 03

35 OR MORE HOURS PER WEEK 04

DON’T KNOW d

REFUSED r

|  |
| --- |
| all |
| IF C10=02, “WORK HOURS WERE REDUCED” |

C15. What was your usual pay, including tips, bonuses and commissions at this job before taxes or other deductions were taken before your (job ended/work hours were reduced)?

*COBRA C15a*

PROBE: Your best estimate is fine.

INTERVIEWER: ACCEPT MOST CONVENIENT PAY PERIOD. IF NECESSARY, CONFIRM PAY PERIOD.

$ | | | | , | | | | . | | | C16d

5.00 – 500,000.00

CODE ONE ONLY

PER HOUR (>$50) 01

PER WEEK (>$2000) 02

ONCE EVERY TWO WEEKS (>$4000) 03

TWICE A MONTH (>$4000) 04

PER MONTH (>$8000) 05

PER YEAR (>$100,000) 06

OTHER (SPECIFY) 99

(STRING 250)

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF OUT OF RANGE, SAY **“I recorded [C15 ANSWER]. Is that correct?”** |

|  |
| --- |
| C15=d OR r |

C16a. Please try to estimate your annual pay at [SEPARATION EMPLOYER]. Would you say your annual earnings were less than $30,000 or $30,000 or more?

*UCP C12aa*

LESS THAN $30,000 01 C16c

$30,000 OR MORE 02

DON’T KNOW d C17

REFUSED r C17

|  |
| --- |
| C16a=02 |

C16b. Would you say they were…

**$30,000 to under $45,000,** 01

*UCP C12ba*

**$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 $105,000, or** 05

**$105,000 or more?** 06

DON’T KNOW d

REFUSED r

|  |
| --- |
| C16a=01 |

C16c. Would you say they were…

*UCP C12ca*

**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, or** 05

**$25,000 to under $30,000?** 06

DON’T KNOW d

REFUSED r

PROGRAMMER: IF C10 = 02 (HOURS REDUCED), GO TO C16d. OTHERWISE GO TO C17.

|  |
| --- |
| C10=02 |

C16d. And what is your usual pay now--including tips, bonuses and commissions at this job before taxes or other deductions are taken?

*COBRA C15a*

PROBE: Your best estimate is fine.

INTERVIEWER: ACCEPT MOST CONVENIENT PAY PERIOD. IF NECESSARY, CONFIRM PAY PERIOD.

$ | | | | , | | | | . | | | C17

5.00 – 500,000.00

CODE ONE ONLY

PER HOUR (>$50) 01

PER WEEK (>$2000) 02

ONCE EVERY TWO WEEKS (>$4000) 03

TWICE A MONTH (>$4000) 04

PER MONTH (>$8000) 05

PER YEAR (>$100,000) 06

OTHER (SPECIFY) 99

(STRING 250)

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF OUT OF RANGE, SAY **“I recorded [C16d ANSWER]. Is that correct?”** |

|  |
| --- |
| C16d=d OR r |

C16e. Please try to estimate your current annual pay at [SEPARATION EMPLOYER]. Would you say your annual earnings are less than $30,000 or $30,000 or more?

*UCP C12aa*

LESS THAN $30,000 01 C16g

$30,000 OR MORE 02

DON’T KNOW d C18

REFUSED r C18

|  |
| --- |
| C16e=02 |

C16f. Would you say they were…

**$30,000 to under $45,000,** 01

*UCP C12ba*

**$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 $105,000, or** 05

**$105,000 or more?** 06

DON’T KNOW d

REFUSED r

|  |
| --- |
| C16e=01 |

C16g. Would you say they were…

*UCP C12ca*

**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, or** 05

**$25,000 to under $30,000?** 06

DON’T KNOW d

REFUSED r

PROGRAMMER: IF C10 = 02, GO TO C18.

|  |
| --- |
| C10 NE 02 |

C17. What was the main reason that your job at [SEPARATION EMPLOYER] ended? Was it because…

*COBRA C17*

INTERVIEWER: INCLUDE REORGANIZATION/DOWNSIZING/ COMPANY SOLD/COMPANY MOVED/COMPANY WENT OUT OF BUSINESS/PLANT OR FACILITY MOVED OR CLOSED/REDUCTION IN FORCE OR RIF’ED/JOB/POSITION ELIMINATED AS LAID OFF.

CODE ONE ONLY

**You were laid off,** 01 C18

**You retired,** 02 C21

**You were discharged or fired,** 03 C21

**You quit,** 04 C21

**Or was there some other reason?** (SPECIFY) 99 C18

(STRING 250)

got a better job 05 C21

moved 06 C21

had health problems 07 C21

returned to school 08 C21

needed to take care of A family member 09 C21

JOB COMPLETED/TEMP. WORK/SEASONAL WORK/WORK PERIOD ENDED/END OF TERM IN SERVICE/ENLISTMENT UP 10 C18

DON’T KNOW d C21

REFUSED r C21

|  |
| --- |
| c17=01, 10, or 99 |
| IF C10=02 “WORK HOURS WERE REDUCED, DID YOU EXPECT THAT TO BE TEMPORARY” |

C18. At the time that your (job at [SEPARATION EMPLOYER] ended, did you expect your job separation to be temporary--that is, did you think you would be recalled/work hours were reduced, did you expect that to be temporary)?

*COBRA C17a MOD*

YES 01

NO 00 C21

DON’T KNOW d C21

REFUSED r C21

|  |
| --- |
| C18=01 |
| IF C10=02, “WORK HOURS WERE REDUCED” AND “WHEN YOUR REGULAR HOURS WOULD BE REINSTATED” |

C19. When your (job at [EMLOYER NAME] ended/work hours were reduced), were you given a specific date (to return to work/when your regular hours would be reinstated)?

*TAA C16*

YES 01

NO 00 c21

DON’T KNOW d c21

REFUSED r C21

|  |
| --- |
| C19=01 |
| IF C10=02, “TOLD YOUR HOURS WOULD BE REINSTATED” |

C20. What was the date you were (given to return to work/told your hours would be reinstated)?

**NEW**

| | | / | | | / | 2 | 0 | | |

MONTH DAY YEAR

(1-12) (1-31) (2014 - 2015)

DON’T KNOW d

REFUSED r

|  |
| --- |
| all |

C21. Prior to the claim filed in [UI CLAIM DATE], had you received unemployment insurance benefits within the past ten years?

**NEW**

YES 01

NO 00

DON’T KNOW d

REFUSED r

SECTION D: JOB SEARCH AND OFFERS

|  |
| --- |
| all |
| IF C10=02, “WORK HOURS WERE REDUCED” |

D1. Now I’d like to ask some questions about what you may have done to look for work after your (job with [SEPARATION EMPLOYER] ended/work hours were reduced). How soon after your (job ended in [JOB SEPARATION MONTH]/work hours were reduced) did you begin to look for work? Would you say it was…

*UCP D1 MOD*

|  |
| --- |
| PROGRAMMER: IF INTERVIEW DATE MINUS UI CLAIM DATE IS FEWER THAN SEVEN WEEKS, READ CHOICES 01 THROUGH 04 ONLY. IF FEWER THAN 9 WEEKS, READ CHOICES 01 THROUGH 05. |

CODE ONE ONLY

**Immediately,** 01

**Within 1 to 2 weeks,** 02

**Within 3 to 4 weeks,** 03

**Within 5 to 6 weeks,** 04

**Within 7 to 8 weeks, or** 05

**More than 8 weeks later?** 06

BEGAN LOOKING FOR WORK PRIOR TO JOB LOSS/hours reduction 98

HAS NOT BEGUN TO LOOK/have not looked FOR WORK 99 D4

DON’T KNOW d

REFUSED r

|  |
| --- |
| D1 NE 99 |

D2. Since [JOB SEPARATION MONTH], have you applied for a job?

**NEW**

YES 01

NO 00 d4

DON’T KNOW d D4

REFUSED r D4

|  |
| --- |
| D2=01 |

D3. Since [JOB SEPARATION MONTH], did you apply for any jobs that would require you to relocate?

**NEW**

YES 01

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

D4. Have you received any job offers since [JOB SEPARATION MONTH]?

*UCP   
D5 MOD*

INTERVIEWER: IF RECALLED TO OLD JOB, CODE YES.

YES 01

NO 00 D9

DON’T KNOW d D9

REFUSED r D9

|  |
| --- |
| D4=01 |

D4a. How many job offers have you received since [JOB SEPARATION MONTH]?

*UCP   
D6*

*MOD*

| | | OFFERS

(01-10)

DON’T KNOW d

REFUSED r

|  |
| --- |
| D4=01 |
| IF d4a=01, “THAT JOB OFFER”; IF D4a GT 01, “ANY OF THOSE JOB OFFERS” |

D4b. Did you accept (that job offer/any of those job offers)?

*UCP   
D6 MOD*

YES 01 D9

NO 00

DON’T KNOW/HAVEN’T DECIDED d

REFUSED r

|  |
| --- |
| D4b=00, d OR r |
| IF D4a gt 1, “OFFERS “AND read sentence in parentheses and “BEST” |

D5. To help us better understand the job market, we’d like to ask a few questions about the job offer(s) you received. (If you received more than one job offer, please think about the best job offer you received.) What was the offered pay rate, including tips, bonuses and commissions for the (best) job offer you received?

**NEW**

PROBE: The best job offer is what that means to you. You can think about things like the salary offered, benefits, location, and other factors that are important to you.

PROBE: Your best estimate is fine.

INTERVIEWER: ACCEPT MOST CONVENIENT PAY PERIOD. IF NECESSARY, CONFIRM PAY PERIOD.

$ | | | | , | | | | . | | |

5.00 – 500,000.00

CODE ONE ONLY

PER HOUR (>$50) 01

PER WEEK (>$2000) 02

ONCE EVERY TWO WEEKS (>$4000) 03

TWICE A MONTH (>$4000) 04

PER MONTH (>$8000) 05

PER YEAR (>$100,000) 06

OTHER (SPECIFY) 99

(STRING 250)

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF OUT OF RANGE, SAY **“I recorded [D5 ANSWER]. Is that correct?”** |

|  |
| --- |
| D4b=00, d OR r |

D6. Were any of the following benefits included in that job offer? (READ a-c)

**NEW**

|  | CODE ONE PER ROW | | | |
| --- | --- | --- | --- | --- |
|  | YES | NO | DON’T KNOW | REFUSED |
| a. health insurance benefits? | 01 | 00 | d | r |
| b. paid sick days? | 01 | 00 | d | r |
| c. a retirement savings or pension plan? | 01 | 00 | d | r |

|  |
| --- |
| D4b=00, d or r |

D7. Did the job offered require relocation?

**NEW**

YES 01

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| d4b=00, d or r |
| IF D4b=d, “IS” AND “HAVE NOT DECIDED WHETHER TO ACCEPT” |
| IF D4a GT1, “BEST” |

D8. There are many reasons why people sometimes do not accept a job offer. What (was/is) the main reason why you (did not accept/have not decided whether to accept) the (best) job that you were offered?

*COBRA C23*

INTERVIEWER: RECORD VERBATIM, THEN CODE AT END.

(STRING 250)

CODE ONE ONLY

It did not pay enough 01

It did not offer adequate health insurance benefits 02

I expected to be called back to MY former job 03

IT DID NOT OFFER OTHER FRINGE BENEFITS (nON-HEALTH INSURANCE BENEFITS) 04

THE JOB WAS NOT IN MY USUAL OCCUPATION 05

STARTED OWN BUSINESS/SELF-EMPLOYED 06

COMMUTE WAS TOO LONG 07

FAMILY RESPONSIBILITIES 08

IN SCHOOL OR OTHER TRAINING 09

ILL HEALTH OR PHYSICAL DISABILITY 10

REQUIRES/REQUIRED relocatION 11

HAVEN’T DECIDED YET 12

other reason 99

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

D9. Now I’m going to ask about services you may have received or used at [STATE One Stop Center NAME] or another American Job Center. Please include services received in person as well as on-line or by telephone. Since [JOB SEPARATION MONTH, YEAR], have you (READ a–h)?

*TAA WIA MOD*

INTERVIEWER: READ STEM FIRST TIME, THEN AS NECESSARY.

PROBE: At [STATE ONE STOP CENTER NAME] or another American Job Center?

|  | CODE ONE PER ROW | | | |
| --- | --- | --- | --- | --- |
|  | YES | NO | DON’T KNOW | REFUSED |
| a. used a resource room?  IF NEEDED: Each American Job Center or [STATE ONE STOP CENTER NAME] usually has an area open to anyone, typically called a resource room. In these areas, you can use computers and the Internet to look for a job, and you can get information about specific jobs, different careers, and services available in the community. | 01 | 00 | d | r |
| b. attended any workshops?  IF NEEDED: A workshop involves a small group of people coming together with a leader or instructor to learn how to do something, like use a computer, write a resume, or conduct a job search. | 01 | 00 | d | r |
| c. taken either tests or assessments? | 01 | 00 | d | r |
| d. attended meetings for either job clubs or job groups?  IF NEEDED: These groups involve getting together with other job seekers for support and to talk about job leads and ways to find jobs. | 01 | 00 | d | r |
| e. received either career counseling or one-on-one assistance to support you in your job search or training? | 01 | 00 | d | r |
| f. received labor market information about what occupations were in demand in your local area? | 01 | 00 | d | r |
| g. received information on education or job training programs? | 01 | 00 | d | r |
| h. registered with either the Employment Service or your state’s job bank? | 01 | 00 | d | r |

|  |
| --- |
| ANY OF D9a TO D9h=01 |

D10. How useful were the services you received through [STATE ONE STOP CENTER NAME] or another American Job Center in helping you to search for a job? Would you say that they were very useful, somewhat useful, not very useful, or not at all useful?

**NEW**

CODE ONE ONLY

VERY USEFUL 01

SOMEWHAT USEFUL 02

NOT VERY USEFUL 03

NOT AT ALL USEFUL 04

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |
| if d4b =01, “including the job offer you accepted” |

D11. (Including the job offer you accepted), Are you currently working at a job for pay? Please include both part-time and full-time jobs, as well as any self-employment jobs held for pay or profit.

*COBRA C2*

YES 01 F2

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| d11 ne 01 |

D12. Did you look for work last week?

*COBRA C26*

YES 01 D13

NO 00 D15

DON’T KNOW d D15

REFUSED r D15

|  |
| --- |
| D12=01 |

D13. I’m going to read a list of things people sometimes do when looking for work. Please tell me whether you did any of these things to look for work last week. Last week, did you (READ a-g).

*UI Ex C4a MOD*

IF NEEDED: Your responses will be combined with those of others. Your specific responses will not be shared with the Department of Labor or any other agency.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | CODE ONE PER EACH ROW | | | |
|  | YES | NO | DON’T KNOW | REFUSED |
| a. contact either a private employment or placement agency? | 01 | 00 | d | r |
| b. use services from [STATE ONE STOP CENTER NAME] or another American Job Center? | 01 | 00 | d | r |
| c. contact your former employer? | 01 | 00 | d | r |
| d. contact friends, relatives or professional associates about job openings? | 01 | 00 | d | r |
| e. use the internet, including social media sites either to look for or apply for work? | 01 | 00 | d | r |
| f. answer any want ads in newspapers or other publications? | 01 | 00 | d | r |
| g. apply directly to places that you might want to work? | 01 | 00 | d | r |

|  |
| --- |
| D12=01 |

D14. About how many hours did you spend looking for work last week?

*UCP D12MOD*

PROBE: Your best estimate is fine.

| | | HOURS SPENT LOOKING LAST WEEK E1

(01-80)

DON’T KNOW d

REFUSED r

|  |
| --- |
| D14=d OR r |

D14a. Would you say you spent between…

*UCP D2a MOD*

CODE ONE ONLY

**1 and 5 hours,** 01

**6 and 10 hours,** 02

**11 and 20 hours,** 03

**21 and 30 hours,** 04

**31 and 40 hours, or** 05

**More than 40 hours looking for work last week?** 06

DON’T KNOW d

REFUSED r

PROGRAMMER: GO TO E1.

|  |
| --- |
| d1=99 OR D12=00, d, OR r |
| if d1=99, “have not begun to look for work” |

D15. People have different reasons for not looking for work. What is the main reason that you (have not begun to look for work/did not look for work last week)?

*UCP   
D4 MOD*

CODE ONE ONLY

EXPECTs NEW JOB TO START 01

DID NOT WANT TO WORK/DID NOT WANT TO LOOK FOR WORK 02

BELIEVES NO WORK AVAILABLE IN LINE OF WORK OR AREA 03

EXPECTs TO BE RECALLED 04

EXPECTS PRE-CLAIM HOURS TO BE RE-INSTATED 05

EXPECTs UNION TO PROVIDE JOB 06

RETIRED 07

CAN’T ARRANGE CHILD CARE 08

FAMILY RESPONSIBILITIES 09

IN SCHOOL OR OTHER TRAINING 10

ILL HEALTH OR PHYSICAL DISABILITY 11

PREGNANCY 12

TRANSPORTATION PROBLEMS 13

TOOK A BREAK/FEELING DISCOURAGED 14

OTHER (SPECIFY) 99

(STRING 50)

DON’T KNOW d

REFUSED r

|  |
| --- |
| IF OTHER SPECIFY (99): **What is the main reason that you (have not begun to look for work/did not look for work last week)?** |

SECTION E: RE-EMPLOYMENT EXPECTATIONS

|  |
| --- |
| PROGRAMMER: IF D11=01 (CURRENTLY WORKING) - GO TO F1. |

|  |
| --- |
| D11 NE 01 |
| IF D15=04, “BE RECALLED TO YOUR old JOB”.  IF D15=05, “HAVE YOUR work HOURS REINSTATED”. OTHERWISE, “START A NEW JOB”. |

E1. These next questions ask about your outlook on your employment situation. As of today, how many weeks or months do you think it will take you to (start a new job/be recalled to your old job/have your work hours reinstated)?

**NEW**

PROBE: Your best estimate is fine.

| | | WEEKS

(1-52)

| | | MONTHS

(1-24)

| | | YEARS

(1-5)

CODE ONE ONLY

WEEKS 01 E2

MONTHS 02 E2

YEARS 03 E2

DOES NOT WANT TO WORK 98 F1

DON’T KNOW d

REFUSED r

|  |
| --- |
| E1=d OR r |

E1a. Do you think it would take…

**NEW**

CODE ONE ONLY

**Two weeks or less,** 01

**More than 2 weeks up to 1 month,** 02

**More than 1 month, up to 2 months,** 03

**More than 2 months, up to 3 months,** 04

**More than 3 months, up to 6 months,** 05

**More than 6 months, up to 9 months,** 06

**More than 9 months, up to one year, or** 07

**More than one year?** 08

DOES NOT WANT TO WORK 98 f1

DON’T KNOW d

REFUSED r

IF D4b=01—ACCEPTED JOB OFFER--SKIP TO F1

|  |
| --- |
| ALL |

E2. When looking for a job, people have different needs and requirements. For these next questions, please suppose someone offered you a job today and think about what is most important to you. For example, you might think about things like salary, work schedule, fringe benefits, location, how interested you are in the work, the costs of taking a job, which might include child care and transportation expenses, and other job attributes.

**NEW**

Which of the following benefits must be offered by a job for you to take it? Must the job offer adequate (READ a-c)

PROBE IF ASKED: Adequate for your needs.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | CODE ONE PER EACH ROW | | | |
|  | YES | NO | DON’T KNOW | REFUSED |
| a. health insurance benefits? | 01 | 00 | d | r |
| b. paid sick days? | 01 | 00 | d | r |
| c. a retirement savings or pension plan? | 01 | 00 | d | r |

|  |
| --- |
| ALL |

E3. What is the lowest wage or salary you are willing to accept, before deductions, for the type of work you are looking for?

*Green Jobs/ Survey of Unemployed Workers in NJ Mod*

INTERVIEWER: Allow respondent to indicate a weekly, monthly, or yearly salarY if they prefer.

$| | | | , | | | | . | | |

5.00 – 500,000.00

CODE ONE ONLY

PER HOUR (>$50) 01

PER WEEK (>$2000) 02

ONCE EVERY TWO WEEKS (>$4000) 03

TWICE A MONTH (>$4000) 04

PER MONTH (>$8000) 05

PER YEAR (>$100,000) 06

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF OUT OF RANGE, SAY **“I recorded [E3 ANSWER]. Is that correct?”** |

|  |
| --- |
| ALL |

E4. Do you think you will need to relocate for a job that meets your requirements?

**NEW**

YES 01

NO 00

DON’T KNOW d

REFUSED r

SECTION F: RE-EMPLOYMENT

|  |
| --- |
| PROGRAMMER: IF D11=01, GO TO F2 |

|  |
| --- |
| D11 NE 01 OR C10=02 |
| IF C10=02, “WORK HOURS WERE REDUCED” and “another” |

F1. Now I’d like to ask some questions about any jobs you may have had since your (job with [SEPARATION EMPLOYER] ended/work hours were reduced). Since your (job with [SEPARATION EMPLOYER] ended/work hours were reduced) in [JOB SEPARATION MONTH], have you worked at (a/another) job for pay? Include both part-time and full-time jobs, as well as any self-employment jobs or business ventures held for pay or profit, even if you held them for only a short time.

*COBRA C1*

YES 01 F4

NO 00 G1

DON’T KNOW d G1

REFUSED r G1

|  |
| --- |
| D11=01 |

F2. You mentioned earlier that you are currently working. Do you currently work 35 hours or more per week)?

YES 01 f4

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| F2 ne 01 |

F3. Do you want to work a full-time workweek of 35 hours or more per week?

YES 01

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| F1=01 OR D11=01 |
| IF D11=01, “INCLUDING YOUR CURRENT JOB” |

F4. (Including your current job) how many different jobs have you worked at since [JOB SEPARATION MONTH]? Again, please include both part time and full-time jobs, as well as any self-employment jobs or business ventures held for pay or profit.

*COBRA C3*

INTERVIEWER: IF A JOB THAT WAS INTERRUPTED BY TWO OR MORE UNPAID WEEKS, COUNT AS SEPARATE JOBS, EVEN IF IT IS WITH THE SAME EMPLOYER. IF THE SEPARATION WAS LESS THAN TWO WEEKS, COUNT IT AS ONE JOB.

INTERVIEWER: TREAT JOBS WITH TEMPORARY AGENCIES AND SELF-EMPLOYED CONSULTING JOBS AS ONE JOB, REGARDLESS OF THE NUMBER OF ASSIGNMENTS.

| | NUMBER OF JOBS

(1-5)

DON’T KNOW d

REFUSED r

|  |
| --- |
| PROGRAMMER LOOP BOX F4.1  ALLOW FOR NUMBER OF JOBS REPORTED AT F4.  ASK F5 ACROSS ALL JOBS FIRST, THEN ASK F6, THEN ASK F6a-F18 FOR ALL JOBS. |

|  |
| --- |
| F1=01 OR D11=01 |
| IF C10=02, “WORK HOURS WERE REDUCED” |

My next questions ask about the jobs you’ve had since [JOB SEPARATION MONTH, YEAR].

F5. NEWJOB [1]: Please tell me the name of the first company you worked for after your (job ended/work hours were reduced) in [JOB SEPARATION MONTH, YEAR].

*COBRA*

*C4 MOD*

NEWJOB [2], [3], [4], [5}: What was the name of the company you worked for after that?

PROGRAMMER: THE NUMBER OF JOBS LISTED SHOULD MATCH NUMBER AT F4.

OTHER (SPECIFY) 99

(STRING 50)

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

F6. Let me verify. Since [JOB SEPARATION MONTH, YEAR] you worked at [FILL F5 NAMES FOR NEWJOB1-NEWJOB5]. Is this correct?

*COBRA*

*C5*

IF CORRECT, ENTER “1” AND CONTINUE TO F7 IF NOT CORRECT. GO BACK TO F4 AND F5 TO ENTER CORRECT NUMBER AND NAMES OF JOBS HELD.

YES 01

no - add jobs 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

F6a. Is [NEWJOB1-NEWJOB5] the same employer you worked for in [JOB SEPARATION MONTH, YEAR]?

YES 01

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

F7. In what month and year did you first start working at [NEWJOB1 -NEWJOB5]?

IF DON’T KNOW OR REFUSED, PROBE: What month was it? Was it early in the month, in the middle of the month, or late in the month? Your best estimate is fine.

*COBRA*

*C7*

PROBE: Since [JOB SEPARATION MONTH, YEAR].

PROGRAMMER: IF RESPONDENT RETURNED TO THE SAME EMPLOYER, DATE MUST BE AFTER UI CLAIM DATE.

| | | / | | | / | 1 | 9 | | | F9

MONTH DAY YEAR

(01–12) (01-31) (1964–2014)

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF OUT OF RANGE, SAY IF THE DATE IS PRIOR TO UI CLAIM DATE, CONFIRM BY SAYING: “**I recorded [date]. Did you start this job prior to UI claim date?”** |

|  |
| --- |
| f7 = d or r |

F8. About how many weeks or months ago did you start working at [NEWJOB1-NEWJOB5]?

PROBE: Your best estimate is fine.

| | | WEEKS

(RANGE)

| | | MONTHS

(RANGE)

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

F9. On what date did your job at [NEWJOB1-NEWJOB5] end?

IF DON’T KNOW OR REFUSED, PROBE: What month was it? Was it early in the month, in the middle of the month, or late in the month? Your best estimate is fine.

*COBRA*

*C9 MOD*

| | | / | | | / | 2 | 0 | 1 | 4 | F14

MONTH DAY YEAR

(01–12) (01-31)

STILL AT JOB 98 f11

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF D11=01 (CURRENTLY WORKING) AND C10 NE 02 (HOURS REDUCED), CHECK THAT AT LEAST ONE OF NEWJOB1-NEWJOB5=98 (STILL AT JOB). IF NO, SAY: “**I recorded that you are currently working. Is that correct?”** |

|  |
| --- |
| F9 = d or r |

F10. Would you say your job at [NEWJOB1-NEWJOB5] ended…

PROBE: Your best estimate is fine.

*COBRA*

*C9a*

CODE ONE ONLY

**Within the past two weeks,** 01

**Between 3 and 4 weeks ago,** 02

**Between 5 and 6 weeks ago,** 03

**Between 7 and 8 weeks ago, or** 04

**More than 8 weeks ago?** 05

DON’T KNOW d

REFUSED r

|  |
| --- |
| F9=98 |

F11. What kind of work do you do or duties do you have at [NEWJOB1-NEWJOB5]?

*COBRA*

*C10*

(STRING 250)

DON’T KNOW d

REFUSED r

|  |
| --- |
| F9=98 |

F12. What kind of company is this—what do they make, sell, or do?

*COBRA*

*C11*

(STRING 250)

DON’T KNOW d

REFUSED r

|  |
| --- |
| F9=98 |

F13. Are any of the following benefits available to you at [NEWJOB1-NEWJOB5]? (READ a-c)

*COBRA*

*C10*

INTERVIEWER: IF BENEFITS WERE OR WILL BE AVAILABLE TO SAMPLE MEMBER AFTER A STANDARD PROBATIONARY PERIOD, CODE YES, EVEN IF NOT USED.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | CODE ONE PER EACH ROW | | | |
|  | YES | NO | DON’T KNOW | REFUSED |
| a. health insurance benefits? | 01 | 00 | d | r |
| b. paid sick days? | 01 | 00 | d | r |
| c. a retirement savings or pension plan? | 01 | 00 | d | r |

|  |
| --- |
| ALL |

F14. How many hours per week, including regular overtime hours do you usually work at [NEWJOB1-NEWJOB5]?

*COBRA*

*C14*

PROBE: On average. Your best estimate is fine.

| | | HOURS F16

(1-80)

VARIES v

DON’T KNOW d

REFUSED r

|  |
| --- |
| F14=v, d, OR r |

F15. Would you say you work less than 20 hours per week, between 20 and 29 hours per week, between 30 and 34 hours per week, or 35 or more hours per week?

*COBRA*

*C14a*

PROBE: On average. Your best estimate is fine.

CODE ONE ONLY

LESS THAN 20 HOURS PER WEEK 01

BETWEEN 20 AND 29 HOURS PER WEEK 02

BETWEEN 30 AND 34 HOURS PER WEEK 03

35 OR MORE HOURS PER WEEK 04

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

F16. What is your usual pay, including tips, bonuses and commissions at [NEWJOB1-NEWJOB5] before taxes or other deductions (were/are) taken?

*COBRA*

*C15a*

PROBE: Your best estimate is fine.

INTERVIEWER: ACCEPT MOST CONVENIENT PAY PERIOD. IF NECESSARY, CONFIRM PAY PERIOD.

$ | | | | , | | | | . | | |

5.00 – 500,000.00 F18

CODE ONE ONLY

PER HOUR (>$50) 01

PER WEEK (>$2,000) 02

ONCE EVERY TWO WEEKS (>$4,000) 03

TWICE A MONTH (>$4,000) 04

PER MONTH (>$8,000) 05

PER YEAR (>$100,000) 06

OTHER (SPECIFY) 99

(STRING 250)

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF OUT OF RANGE, SAY **“I recorded [F16 ANSWER]. Is that correct?”** |

|  |
| --- |
| F16 = D OR R |

F17. I’ll read some ranges. Please try to estimate your annual pay at [NEWJOB1-NEWJOB5]. Would you say your annual earnings are…

*COBRA*

*C15b*

PROBE: (Did/Does) this include tips and commissions?

CODE ONE ONLY

**Less than $10,000 per year,** 01

**$10,000 or more, but less than $20,000 per year,** 02

**$20,000 or more but less than $30,000 per year,** 03

**$30,000 or more but less than $40,000 per year,** 04

**$40,000 or more but less than $50,000 per year,** 05

**$50,000 or more but less than $75,000 per year,** 06

**$75,000 or more but less than $100,000 per year, or** 07

**More than $100,000 per year?** 08

DON’T KNOW d

REFUSED r

|  |
| --- |
| f9 ne 98 |

F18. What was the main reason this job ended? Was it because…

*COBRA C17*

INTERVIEWER:LAID-OFF INCLUDES REORGANIZATION/ DOWNSIZING/ COMPANY SOLD/ COMPANY MOVED/ COMPANY WENT OUT OF BUSINESS/ PLANT OR FACILITY MOVED OR CLOSED/ END OF TERM IN SERVICE/ENLISTMENT UP/REDUCTION IN FORCE OR RIF’ED/ JOB/POSITION ELIMINATED

**You were laid off,** 01

**You retired,** 02

**You were discharged or fired,** 03

**You quit,** 04

**Or was there some other reason?** (SPECIFY) 99

(STRING 250)

GOT A BETTER JOB 05

MOVED 06

HAD HEALTH PROBLEMS 07

RETURNED TO SCHOOL 08

NEEDED TO TAKE CARE OF A FAMILY MEMBER 09

JOB COMPLETED/ TEMP. WORK/ SEASONAL WORK/ WORK PERIOD ENDED 10

DON’T KNOW d

REFUSED r

|  |
| --- |
| PROGRAMMER LOOP BOX F18.1  RETURN TO F6a FOR NEXT JOB. IF NO OTHER JOB OR END OF LOOP, CONTINUE TO G1 |

SECTION G: FINANCIAL WELL-BEING

|  |
| --- |
| all |
| IF C10=02, “ HAVE THEIR WORK HOURS REDUCED” AND “WORK HOURS WERE REDUCED” |

G1. We understand that many people who (become unemployed/have their work hours reduced) face difficulty paying their bills and meeting their financial commitments. My next questions are about financial obligations you had when your (job ended/work hours were reduced) in [JOB SEPARATION MONTH]. At that time did you…

*COBRA I1*

CODE ONE ONLY

**Own your home,** 01

**Rent your home,** 02 G3

**Live with family or friends and pay part of the rent or mortgage,** 03 G3

**Live with family or friends and not pay, or** 04 G3

**Live in some other housing arrangement?** 05 G2

LIVE IN A GROUP SHELTER 06 G3

LIVE IN AN ASSISTED LIVING FACILITY 07 G3

DON’T KNOW d G3

REFUSED r G3

|  |
| --- |
| G1=01 |

G1a. Did you have a mortgage on your home?

*COBRA I1a*

YES 01

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| PROGRAMMER SKIP BOX G1  GO TO G3 |

|  |
| --- |
| G1=05 |

G2. What was your living arrangement in [JOB SEPARATION MONTH, YEAR]?

*COBRA I1b*

*MOD*

(STRING 250)

RECORD VERBATIM

PAYING A MORTGAGE 01

DON’T KNOW d

REFUSED r

|  |
| --- |
| all |
| IF b2 GT 01, ”AND other MEMBERS OF YOUR HOUSEHOLD” |
| If G1a=1 OR G2=01, “ BUT do not include your mortgage here” |

G3. What was the total amount of debt and loans you (and other members of your household) owed in [JOB SEPARATION MONTH]? Please include automobile loans, student loans, balances on credit cards, medical bills, and personal loans owed to individuals (but do not include your mortgage here).

*COBRA I3*

PROBE: Your best estimate is fine.

INTERVIEWER: IF RESPONDENT GIVES A MONTHLY AMOUNT, REPEAT THE QUESTION AND EMPHASIZE THE WORD TOTAL.

$ | | | | **,** | | | | 1-999,999 G5

TOTAL DEBT AT JOB SEPARATION (>$100,000)

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF OUT OF RANGE: **I recorded (G3 ANSWER). Is that correct?** |

|  |
| --- |
| G3=d OR r |

G4. Would you say it was…

CODE ONE ONLY

*COBRA I3a*

**Less than $5,000,** 01

**Between $5,000 to under $10,000,** 02

**Between $10,000 to under $20,000,** 03

**Between $20,000 to under $30,000,** 04

**Between $30,000 to under $50,000,** 05

**Between $50,000 to under $100,000,** 06

**Or more than $100,000?** 07

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |
| IF C10=02, “WORK HOURS WERE REDUCED” |
| If INT1 B2 gt 01, “OR OTHER MEMBERS OF YOUR HOUSEHOLD” |

G5. Since your (job with [SEPARATION EMPLOYER] ended/work hours were reduced), have you (or other members of your household) been 60 or more days late paying any of your bills?

**NEW**

YES 01

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| all |
| IF C2b = 01, “ARE”, ELSE “WERE”. |

G6. How important (are/were) your unemployment insurance payments in helping you meet your financial obligations? Would you say these benefits (are/were) very important, somewhat important, somewhat unimportant, or very unimportant in helping you meet your financial obligations?

**NEW**

CODE ONE ONLY

VERY IMPORTANT 01

SOMEWHAT IMPORTANT 02

SOMEWHAT UNIMPORTANT 03

VERY UNIMPORTANT 04

did not receive benefits/HAS not receiveD benefits yet n

DON’T KNOW d

REFUSED r

|  |
| --- |
| all |
| IF C10=02, “WORK HOURS WERE REDUCED” |

G6a. In addition to financial adjustments, people sometimes make adjustments in their eating habits following the loss of a job. Which of the following statements best describes the food eaten in your household since your (job with [SEPARATION EMPLOYER] ended/work hours were reduced). Would you say that you had enough of the kinds of food you wanted to eat, enough but not always the kinds of food you wanted to eat, sometimes not enough to eat, or often not enough to eat?

*COBRA*

*I12   
MOD*

CODE ONE ONLY

ENOUGH OF THE KINDS WANTED TO EAT 01

ENOUGH BUT NOT ALWAYS THE KIND OF FOOD WANTED TO EAT 02

SOMETIMES NOT ENOUGH TO EAT 03

OFTEN NOT ENOUGH TO EAT 04

DON’T KNOW d

REFUSED r

|  |
| --- |
| all |
| IF C10=02, “WORK HOURS WERE REDUCED” |

G7. When your (job with [SEPARATION EMPLOYER] ended/work hours were reduced) in [JOB SEPARATION MONTH] did you have any of the following types of accounts or investments? (READ a-g)

*UCP   
G7 MOD*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | CODE ONE PER ROW | | | |
|  | YES | | NO | DON’T KNOW | REFUSED | |
| a. Savings accounts? | 01 | | 00 | d | r | |
| b. Credit card accounts? | 01 | | 00 | d | r | |
| c. Home equity lines of credit or HELOCs? | 01 | | 00 | d | r | |
| d. Investment accounts such as certificates of deposits, money market accounts, stocks, or bonds? | 01 | | 00 | d | r | |
| e. 401(k), 403(b), or Individual Retirement Accounts or IRAs? | 01 | | 00 | d | r | |
| f. Pension plans? | 01 | | 00 | d | r | |
| g. Rental properties? | 01 | | 00 | d | r | |

|  |
| --- |
| G7a=01 |
| IF C10=02, “WORK HOURS WERE REDUCED” |

G8. When your (job ended/work hours were reduced) in [JOB SEPARATION MONTH], about how much savings did you have? Please think about savings you could easily access and do not include money you may have had in retirement savings accounts. Would you say you had less than $5,000, $5,000 to $10,000, $10,000 to $15,000, $15,000 to $20,000, or more than $20,000 in savings?

*COBRA I16 MOD*

PROBE: By easily access we mean money you could retrieve and use quickly. Your best estimate is fine.

CODE ONE ONLY

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

MORE THAN $20,000 05

DON’T KNOW d

REFUSED r

|  |
| --- |
| G7a, G7b, G7c, G7d, G7e, OR G7f=01 |
| If b2 gt 01, “OR ANYONE IN YOUR HOUSEHOLD” |

G9. Since [JOB SEPARATION MONTH, YEAR], did you (or anyone in your household)… (READ a-f)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *UCP G12 MOD* | CODE ONE PER ROW | | | |
|  | YES | NO | DON’T KNOW | REFUSED |
| a. (G7a = 01) withdraw money from savings accounts? | 01 | 00 | d | r |
| b. (G7b = 01) access cash from credit card accounts? | 01 | 00 | d | r |
| c. (G7c= 01) access money from a home equity line of credit? | 01 | 00 | d | r |
| d. (G7d=01) access funds from investment accounts such as certificates of deposits, money market accounts, stocks, or bonds? | 01 | 00 | d | r |
| e. (G7e=01) make an early withdrawal from a retirement savings investment account such as a 401(k), 403(b), or IRA? | 01 | 00 | d | r |
| f. (G7f=01) take early retirement to get benefits from a pension plan? | 01 | 00 | d | r |

|  |
| --- |
| B1=01 OR B3 = 01, 02, 03, OR 04 |
| If b2 gt 01, “OR ANYONE IN YOUR HOUSEHOLD” |
| IF B1=01, FILL “SPOUSE”, B3=01 OR 04, FILL “PARTNER”. IF B3=02, FILL “BOYFRIEND”. IF B3=03, FILL “GIRLFRIEND”. |
| IF C10=02, “WORK HOURS WERE REDUCED” |

G10. The next questions are about sources of income and other support that you (or anyone in your household) may have been receiving at the time your (job ended/work hours were reduced) in [JOB SEPARATION MONTH].

*COBRA*

*H3*

*MOD*

At the time your job at [SEPARATION EMPLOYER] ended, was your (spouse/partner/boyfriend/ girlfriend) working at a job for pay, including self-employment?

PROBE: By household we mean people who live together and share finances.

YES 01

NO 00 G11

DON’T KNOW d G11

REFUSED r G11

|  |
| --- |
| G10=01 |
| IF B1=01, FILL “SPOUSE”, IF B3=01 OR 04, FILL “PARTNER”. IF B3=02, FILL “BOYFRIEND”. IF B3=03, FILL “GIRLFRIEND”. |

G10a. What were your (spouse’s/partner’s/boyfriend’s/girlfriend’s) earnings at that time?

INTERVIEWER: ACCEPT MOST CONVENIENT PAY PERIOD. IF NECESSARY, CONFIRM PAY PERIOD.

$ | | | | , | | | | . | | |

5.00 – 500,000.00

CODE ONE ONLY

PER HOUR (>$50) 01

PER WEEK (>$2000) 02

ONCE EVERY TWO WEEKS (>$4000) 03

TWICE A MONTH (>$4000) 04

PER MONTH (>$8000) 05

PER YEAR (>$100,000) 06

OTHER (SPECIFY) 99

(STRING 250)

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF OUT OF RANGE, SAY, “**I recorded [G10a answer]. Is that correct?”** |

|  |
| --- |
| G10=01 |
| IF B1=01, FILL “SPOUSE”, IF B3=01 OR 04, FILL “PARTNER”. IF B3=02, FILL “BOYFRIEND”. IF B3=03, FILL “GIRLFRIEND”. |
| IF C10=02, “WORK HOURS WERE REDUCED” |

G10b. On average, how many hours per week did your (spouse/partner/boyfriend/girlfriend) usually work at the time your (job ended/work hours were reduced) in [JOB SEPARATION MONTH]?

| | | HOURS PER WEEK

(10-80)

DON’T KNOW d G11

REFUSED r G11

|  |
| --- |
| G10b=d OR r |

G10c. Please try to estimate your (spouse’s/partner’s/boyfriend’s/girlfriend’s) annual pay just before [JOB SEPARATION MONTH, YEAR]. Would you say your (spouse’s/partner’s/ boyfriend’s/girlfriend’s) annual earnings were less than $30,000 or $30,000 or more at that time?

*UCP C12aa*

LESS THAN $30,000 01 G10e

$30,000 OR MORE 02

DON’T KNOW d G11

REFUSED r G11

|  |
| --- |
| G10c=02 |

G10d. Would you say it was…

CODE ONE ONLY

**$30,000 to under $45,000,** 01

*UCP C12ba*

**$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 $105,000, or** 05

**$105,000 or more?** 06

DON’T KNOW d

REFUSED r

|  |
| --- |
| G10c=01 |

G10e. Would you say it was…

*UCP C12ca*

CODE ONE ONLY

**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, or** 05

**$25,000 to under $30,000?** 06

DON’T KNOW d

REFUSED r

|  |
| --- |
| B2 GT 01 |
| IF C10=02, “WORK HOURS WERE REDUCED” |

G11. At the time your (job at [SEPARATION EMPLOYER] ended/work hours were reduced), was anyone in your household receiving unemployment insurance compensation benefits? Please do not include your benefits here.

YES 01

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| all |
| If b2 gt 01, “at that same time” and “OR ANYONE IN YOUR HOUSEHOLD” |
| IF C10=02, “WORK HOURS WERE REDUCED” |

G12. (At that same time)--when your (job at [SEPARATION EMPLOYER] ended/work hours were reduced)--were you (or anyone in your household) receiving benefits or income from the following sources? (READ a-e)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | CODE ONE PER ROW | | | |
| PROGRAMS | YES | NO | DON’T KNOW | REFUSED |
| a. Food Stamp or SNAP benefits? | 01 | 00 | d | r |
| b. Welfare benefits such as [STATE TANF NAME] or General Assistance? | 01 | 00 | d | r |
| c. SSI, SSDI, or other disability benefits? | 01 | 00 | d | r |
| d. Social Security or Pension benefits? | 01 | 00 | d | r |
| e. Medicaid or [STATEMED]? | 01 | 00 | d | r |

|  |
| --- |
| ALL |
| IF C10=02, “WORK HOURS WERE REDUCED” |
| IF B2 GT 01, “THE TOTAL INCOME FOR YOU AND ALL THE MEMBERS OF YOUR HOUSEHOLD” |

G13. What was (your total income/the total income for you and all the members of your household), before taxes and other deductions just before your (job ended/work hours were reduced) in [JOB SEPARATION MONTH]? Please include all of the sources of income we’ve talked about, plus any others you may have had.

*COBRA*

*H4*

PROBE, IF NEEDED: Include sources such as self-employment, regular jobs, and earnings from odd side jobs, under-the-table jobs, and other activities, Social Security, pensions, rent, interest and dividends, unemployment compensation, welfare, other public assistance, food stamps, child support, and money from any other sources. Your best estimate is fine.

INTERVIEWER: ACCEPT A “DON’T KNOW” ANSWER WITHOUT PRESSING RESPONDENT. GO TO RANGES IN G14 TO GET INCOME AMOUNT.

INTERVIEWER: ACCEPT MOST CONVENIENT PAY PERIOD. IF NECESSARY, CONFIRM PAY PERIOD.

$ | | | | , | | | | . | | | G15

(5.00 – 500,000.00)

CODE ONE ONLY

PER HOUR (>$50) 01

PER WEEK (>$2000) 02

ONCE EVERY TWO WEEKS (>$4000) 03

TWICE A MONTH (>$4000) 04

PER MONTH (>$8000) 05

PER YEAR (>$100,000) 06

OTHER (SPECIFY) 99

(STRING 250)

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF OUT OF RANGE, SAY, **“I recorded [G13 answer]. Is that correct?”** |

|  |
| --- |
| G13=d OR r |

G14. Please try to estimate your monthly household income. Would you say your monthly household income just before [JOB SEPARATION MONTH, YEAR] was less than $3,000 or $3,000 or more?

*COBRA*

*H5*

PROBE: Your best estimate is fine.

INTERVIEWER: IF RESPONDENT STILL SAYS “DON’T KNOW,” RECORD “DON’T KNOW” AS THEIR ANSWER AND MOVE ON WITHOUT PRESSING RESPONDENT FURTHER.

CODE ONE ONLY

LESS THAN $3,000 01 G14b

$3,000 OR MORE 02

DON’T KNOW d G15

REFUSED r G15

|  |
| --- |
| G14=02 |

G14a. Would you say it was…

*COBRA*

*H5a*

CODE ONE ONLY

**$3,000 to under $4,000,** 01

**$4,000 to under $5,000,** 02

**$5,000 to under $6,000,** 03

**$6,000 to under $7,000,** 04

**$7,000 to under $8,000,** 05

**$8,000 to under $9,000,** 06

**$9,000 to under $10,000, or** 07

**$10,000 or more?** 08

DON’T KNOW d

REFUSED r

|  |
| --- |
| GO TO G15 |

|  |
| --- |
| G14=01 |

G14b. Would you say it was…

CODE ONE ONLY

*COBRA*

*H5b MOD*

**Less than $1,000,** 01

**$1,000 to under $2,000, or** 02

**$2,000 to under $3,000?** 03

DON’T KNOW d

REFUSED r

|  |
| --- |
| B2 GT 01 |
| IF C2b=01--CURRENTLY RECEIVING UI BENEFITS--“ELSE”. |

G15. We have been talking about finances and income support at the time your job ended. For these next questions, please answer in terms of what is happening *now*. Is anyone (else) in your household *now* receiving unemployment insurance compensation benefits? Please do not include your benefits here.

YES 01

NO 00

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |
| IF B2=1 (LIVES ALONE), READ SENTENCE IN PARENTHESES. |
| If b2 gt 01, “OR ANYONE IN YOUR HOUSEHOLD” |

G16. (We have been talking about finances and income support at the time your job ended. For these next questions, please answer in terms of what is happening *now*.) Are you (or anyone else in your household) *now* receiving… (READ a-e)

*COBRA*

*H6*

*MOD*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | CODE ONE PER ROW | | | |
| PROGRAMS | YES | NO | DON’T KNOW | REFUSED |
| a. Food Stamp or SNAP benefits? | 01 | 00 | d | r |
| b. Welfare benefits such as [STATE TANF NAME] or General Assistance? | 01 | 00 | d | r |
| c. SSI, SSDI, or other disability benefits? | 01 | 00 | d | r |
| d. Social Security or Pension benefits? | 01 | 00 | d | r |
| e. Medicaid or [STATEMED]? | 01 | 00 | d | r |

|  |
| --- |
| b1=01 or b3=01,02, 03 or 04 |
| IF B1=01, FILL “SPOUSE”, IF B3=01 OR 04, FILL “PARTNER”. IF B3=02, FILL “BOYFRIEND”. IF B3=03, FILL “GIRLFRIEND” |

G17. On average, how many hours per week does your (spouse/partner/boyfriend/girlfriend) usually work *now*?

| | | HOURS PER WEEK

(10-80)

DON’T KNOW d

REFUSED r

|  |
| --- |
| B2 GT 02 |

G18. Since (JOB SEPARATION MONTH), did anyone else in your household besides you begin working or begin working more hours?

*COBRA*

*H12*

YES 01

NO 00

DON’T KNOW d

REFUSED r

SECTION H: CUSTOMER SATISFACTION

|  |
| --- |
| ALL |

H1. Now I’d like to ask about your satisfaction with different aspects of your experience related to the unemployment insurance claim you filed in [UI CLAIM DATE].

**NEW**

How satisfied or dissatisfied are you with your experience filing your initial claim? Would you say you are very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

CODE ONE ONLY

Very satisfied 01

Somewhat satisfied 02

Somewhat dissatisfied 03

Very dissatisfied 04

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

H2. How satisfied or dissatisfied areyou with (READ a-e)?

**NEW**

PROBE: Would you say you are very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

|  | CODE ONE PER ROW | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
|  | VERY SATISFIED | SOMEWHAT SATISFIED | SOMEWHAT DISSATISFIED | VERY DISSATISFIED | DON’T KNOW | REFUSED |
| a. how easy the filing instructions were to understand and follow | 01 | 02 | 03 | 04 | d | r |
| b. the clarity of the explanation of your rights and responsibilities | 01 | 02 | 03 | 04 | d | r |
| c. the explanation of the benefits and services you could receive | 01 | 02 | 03 | 04 | d | r |
| d. the length of time it took to file your initial claim | 01 | 02 | 03 | 04 | d | r |
| e. the speed or timeliness of receiving your benefit checks or deposits | 01 | 02 | 03 | 04 | d | r |

|  |
| --- |
| ALL |

H3. Since [JOB SEPARATION MONTH, YEAR] have you had any direct contact, either in person, by telephone, or by email with a staff person from the unemployment insurance office?

YES 01

NO 00 I1

DON’T KNOW d I1

REFUSED r I1

|  |
| --- |
| H3=01 |

H4. Thinking about the service you received from staff members at the unemployment insurance office, how satisfied or dissatisfied were you with (READ a-c)?

*DOL-CSS Q28*

*MOD*

PROBE: Would you say you were very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

|  | CODE ONE PER ROW | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
|  | VERY SATISFIED | SOMEWHAT SATISFIED | SOMEWHAT DISSATISFIED | VERY DISSATISFIED | DON’T KNOW | REFUSED |
| a. the help you received to complete the filing process | 01 | 02 | 03 | 04 | d | r |
| b. their knowledge of laws and policies | 01 | 02 | 03 | 04 | d | r |
| c. the level of respect and courtesy you received | 01 | 02 | 03 | 04 | d | r |

**SECTION I: CLOSING AND CONTACT INFORMATION**

|  |
| --- |
| ALL |
| IF A0 = 02, FILL $25. |

**I1.** PROGRAMMER: IF WE HAVE NAME, ADDRESS, AND PHONE NUMBER FROM EITHER THE SCREENER OR FROM THE OTHER PRELOADED INFORMATION DISPLAY THAT NAME, ADDRESS, AND PHONE NUMBER.

*COBRA K1*

That was my last survey question. Now, please verify your current mailing information so that we can send your check for ($15/$25). Is your name, current address and phone number… [FILL FROM PRELOADS]?

PROBE: Is there an apartment number?

CODE ONE ONLY

SAME AS PROVIDED 00 I2a

INCORRECT INFORMATION ABOVE, NEED TO ENTER NEW INFORMATION 01

DON’T KNOW d

REFUSED r

|  |
| --- |
| I1=01, d, OR r |

I2. UPDATE INFORMATION BELOW

What is the correct spelling of your name and your current mailing address and phone number?

*COBRA K2*

PROBE: Is there an apartment number?

(STRING 50)

FIRST NAME

(STRING 50)

MIDDLE INITIAL/NAME

(STRING 50)

LAST NAME

(STRING 60)

ADDRESS 1

(STRING 60)

ADDRESS 2

(STRING 10)

APARTMENT NUMBER

(STRING 60)

CITY

(STRING 2)

STATE/TERRITORY

| | | | | | - | | | | |

ZIP CODE (+ 4 IF NEEDED)

| | | | - | | | | - | | | | |

INTERNATIONAL PHONE (STRING 50)

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF CONDITION (e.g. Exchange = 555); **Let me repeat that to you. REPEAT. Is that correct?** |
| HARD CHECK: IF CONDITION (e.g. Area code LE 200); **I’m sorry. My computer is indicating an error with that area code. Please give me the number again.** |

|  |
| --- |
| ALL |

I2a. Do you have a cell phone number?

*COBRA K2a*

YES 01

NO 00 i3

DON’T KNOW d i3

REFUSED r I3

|  |
| --- |
| I2a=01 |

I2b. What is your cell phone number?

*COBRA K2b*

RECORD VERBATIM

| | | | - | | | | - | | | | |

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF CONDITION (e.g. Exchange = 555); **Let me repeat that to you. REPEAT. Is that correct?** |
| HARD CHECK: IF CONDITION (e.g. Area code LE 200); **I’m sorry. My computer is indicating an error with that area code. Please give me the number again.** |

|  |
| --- |
| ALL |

I3. Do you have an email address?

YES 01

*COBRA K3*

NO 00 i5

DON’T KNOW d i5

REFUSED r I5

|  |
| --- |
| I3=01 |

I4. What is your email address?

*COBRA K4*

RECORD VERBATIM

(STRING 50)

DESCRIPTION

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |
| IF A0 = 02, A29=06, FILL $25. |

I5. We will mail the check for ($15/$25) to you at [fill ADDRESS] within the next two weeks. As part of our study, we would like to interview you two more times to see how things are going. We will send you $30 for each interview you complete online, which is a total of $60 for completing the next two interviews with us over the next six months. Someone from Mathematica will contact you when it is time for your next interview. In case you move, we would like to have the name, address, and phone number of two people who do not live with you who will know how to reach you. We would only contact these persons if we have trouble getting in touch with you directly.

*WIA 15  
G11*

What is your first contact person’s name?

(STRING 50)

FIRST NAME

(STRING 50)

MIDDLE INITIAL/NAME

(STRING 50)

LAST NAME

DON’T KNOW d

REFUSED r

|  |
| --- |
| I5 CONTACT PROVIDED |

I6. What is [FIRST NAME FROM I6]’s address?

*COBRA K9a*

PROBE: Is there an apartment number?

(STRING 60)

ADDRESS 1

(STRING 60)

ADDRESS 2

(STRING 10)

APARTMENT NUMBER

(STRING 60)

CITY

(STRING 2)

STATE/TERRITORY

| | | | | | - | | | | |

ZIP CODE (+ 4 IF NEEDED)

DON’T KNOW d

REFUSED r

|  |
| --- |
| I5 CONTACT PROVIDED |

I7. What is [NAME FROM I6]’s phone number? Please give me the telephone number, area code first.

*COBRA K9b*

| | | | - | | | | - | | | | |

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF CONDITION (e.g. Exchange = 555); **Let me repeat that to you. REPEAT. Is that correct?** |
| HARD CHECK: IF CONDITION (e.g. Area code LE 200); **I’m sorry. My computer is indicating an error with that area code. Please give me the number again.** |

|  |
| --- |
| i5 CONTACT PROVIDED |

I8. How is [NAME FROM I6] related to you?

*COBRA K10*

CODE ONE ONLY

SPOUSE/PARTNER/BOYFRIEND/GIRLFRIEND 01

MOTHER 02

FATHER 03

SON OR DAUGHTER 04

GRANDPARENT 05

BROTHER/SISTER 06

AUNT/UNCLE 07

OTHER RELATIVE 08

FRIEND 09

NOT RELATED 10

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

I9. What is your second contact person’s name?

*COBRA K9*

(STRING 50)

FIRST NAME

(STRING 50)

MIDDLE INITIAL/NAME

(STRING 50)

LAST NAME

DON’T KNOW d Thanks

REFUSED SECOND CONTACT r Thanks

|  |
| --- |
| I9 CONTACT PROVIDED |

I10. What is [SECOND NAME FROM I9]’s address?

PROBE: Is there an apartment number?

*COBRA K9a*

(STRING 60)

ADDRESS 1

(STRING 60)

ADDRESS 2

(STRING 10)

APARTMENT NUMBER

(STRING 60)

CITY

(STRING 2)

STATE/TERRITORY

| | | | | | - | | | | |

ZIP CODE (+ 4 IF NEEDED)

DON’T KNOW d

REFUSED r

|  |
| --- |
| I9 CONTACT PROVIDED |

I11. What is [NAME FROM I9]’s phone number? Please give me the telephone number, area code first.

*COBRA K9b*

| | | | - | | | | - | | | | |

DON’T KNOW d

REFUSED r

|  |
| --- |
| SOFT CHECK: IF CONDITION (e.g. Exchange = 555); **Let me repeat that to you. REPEAT. Is that correct?** |
| HARD CHECK: IF CONDITION (e.g. Area code LE 200); **I’m sorry. My computer is indicating an error with that area code. Please give me the number again.** |

|  |
| --- |
| I9 CONTACT PROVIDED |

I12. How is [NAME FROM I9] related to you?

*COBRA K10*

CODE ONE ONLY

SPOUSE/PARTNER/BOYFRIEND/GIRLFRIEND 01

MOTHER 02

FATHER 03

SON OR DAUGHTER 04

GRANDPARENT 05

BROTHER/SISTER 06

AUNT/UNCLE 07

OTHER RELATIVE 08

FRIEND 09

NOT RELATED 10

DON’T KNOW d

REFUSED r

|  |
| --- |
| ALL |

Thanks. That was my last question. We really appreciate you taking the time to complete the first survey as part of this important study. We will be contacting you again in approximately XX weeks to complete a second survey with you. Thanks again and best wishes.

*COBRA THNX*

INTERVIEWER: GO BACK AND CODE D8.

PROGRAMMER: DO NOT ALLOW INTERVIEWER TO CLOSE UNTIL D8 IS CODED.