**U.S. Department of Labor FORM APPROVED:**

 **OMB No XXXX-XXXX**

 **APPROVAL EXPIRES: XX/XX/XXXX**

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| ***Welcome to the*** **Longitudinal Study of Unemployment Insurance Recipients** **(LS-UI)****Second Interview*****Current Date*****Sponsored by: Conducted by:****THIS IS A SECURE SITE****U.S. Department of Labor Mathematica Policy Research** |
| **To begin the survey, please refer to the letter you received to find your UserName and Password. Enter your UserName and Password in the fields below, then click the “Continue” button. If you do not have your UserName and Password, please call 1-800-xxx-xxxx, or email NLSUIstudy@mathematica-mpr.com****.** |
| **UserName: Password:**  |
| According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is xxxx-xxxx. Public reporting burden for this collection of information is estimated to average 25 minutes per respondent, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Name, Address |

**SECTION A: CASE MANAGEMENT**

**PROGRAMMER: IF THE SURVEY IS TERMINATED PRIOR TO COMPLETION, DISPLAY THE FOLLOWIG MESSAGE:**

**You have elected to stop the survey without completing. Thank you for responses so far. To complete the survey, log on again by using the same User Name and password.**

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| ALL |

**INTRODUCTION**

**Welcome back to the Longitudinal Study of Unemployment Insurance Recipients (LS-UI)! This is the second survey for the LS-UI. As you might recall, the U.S. Department of Labor (DOL) is sponsoring this special study to learn more about the experiences of people who applied for unemployment insurance (UI) benefits. The study is being conducted by Mathematica Policy Research, an independent research company, on behalf of DOL. As part of this important study, Mathematica will survey people who applied for UI benefits in your state. You have been scientifically selected from among people who recently filed for UI benefits to represent UI recipients in your state. Your participation is voluntary, but since you cannot be substituted with someone else, we need you to complete this important survey. Even if you did not receive or are no longer receiving UI benefits, your participation is needed.**

**Please complete the survey as soon as possible. The survey will take about 25 minutes to complete. Any information that we collect from you will be used for research purposes only and will be kept private to the extent permitted by law.**

**As a particpant in the LS-UI, you have already completed one survey.  You are being asked to complete your second survey at this time. In the next several months you will be asked to complete your third survey for this important study. You will receive $30 for completing the second survey and $30 for completing the third survey.**

**If you have any questions or prefer to complete the survey by telephone, please call 1‑800-xxx-xxxx toll-free to speak with an interviewer or send an email to** **NLSUIstudy@mathematica-mpr.com****.You may also contact the survey director, Julita Milliner-Waddell, at 609-275-2206.**

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| ALL |

A30. Please confirm that your name is correct as shown below.

 [FILL FIRST] [FILL MIDDLE] [FILL LAST]

🔾 Yes, name is correct as shown 1 GO TO A34

🔾 No, my name is misspelled or has changed 2 GO TO A31

|  |
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| HARD CHECK: IFA30 = NO RESPONSE; **Please provide an answer to this question and continue.** |

|  |
| --- |
| A30 = 2 |

**A31. Please enter your correct name below.**

PROGRAMMER: FILL FIELDS WITH PRELOADED NAME DATA

First name

 (STRING 20)

Middle name

 (STRING 20)

Last name

 (STRING 20)

|  |
| --- |
| HARD CHECK: IF A31\_FirstName = NO RESPONSE; **Please provide the correct spelling of your first name.** |
| HARD CHECK: IF A31\_LastName = NO RESPONSE; **Please provide the correct spelling of your last name.** |

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| ALL |

**A34. What is your date of birth?**

PROGRAMMER: INSERT DROPDOWNS WITH FOLLOWING RANGES

 Month Day Year

▼

▼

▼

 (1-12) (1-31) (1934 - 1996) Verification Box 1

NO RESPONSE M A35

|  |
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| SOFT CHECK: IF A34 = M; **Please provide an answer to this question and continue.*****To continue to the next question without providing a response, click the continue button.*** |

|  |
| --- |
| A34=M |

**A35. How old are you?**

 (18-80)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF A35 = M; **Please provide an answer to this question and continue.*****To continue to the next question without providing a response, click the continue button.*** |

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| PROGRAMMER VERIFICATION BOX a35.1SET DOB\_VERIFY:IF a34 DOB MATCHES PRELOADED DOB OR a35 CONVERTS TO PRELOADED DOB, SET DOB\_VERIFY = 1 AND SKIP TO BOX A37W.2;IF A34 = M AND A35=M; OR A34 DOB AND A35 AGE DOES NOT MATCH PRELOADED DOB, SET DOB\_VERIFY = 0 AND CONTINUE TO A37W. |

|  |
| --- |
| DOB\_VERIFY = 0 (DOB DOES NOT MATCH OR IS MISSING) |

**A37w. What are the last 4-digits of your Social Security Number?**

 (0000-9999)

NO RESPONSE M

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| --- |
| SOFT CHECK: IF A37W = M; **Please provide an answer to this question and continue.*****To continue to the next question without providing a response, click the continue button.*** |

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| HARD CHECK: IF A37W = LT OR GT 4 DIGITS; **Please provide only the last four digits of your Social Security number.** |

|  |
| --- |
| PROGRAMMER VERIFICATION BOX A37W.1SET SSN\_VERIFY:IF A37W SSN MATCHES PRELOADED DOB, SET SSN\_VERIFY = 1;IF A37W= M OR A37W SSN DOES NOT MATCH PRELOADED DOB, SET SSN\_VERIFY = 0;ALL RESPONSES CONTINUE TO BOX A37.2. |

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| PROGRAMMER VERIFICATION BOX A37.2IF DOB\_VERIFY = 1 OR SSN\_VERIFY = 1, GO TOA37b;IF DOB\_VERIFY = 0 AND SSN\_VERIFY = 0, CONTINUE TO A37a; |

|  |
| --- |
| (NAME\_VERIFY = 1 AND (DOB\_VERIFY = 0 AND SSN\_VERIFY = 0)) OR NAME\_VERIFY = 0 |

**A37a. There may be a problem with our records. A representative from Mathematica will give you a call to verify our information.**

 PROGRAMMER: DISPLAY THE FOLLOWING QUESTIONS ON THE SAME SCREEN.

 PROGRAMMER: DROPDOWN OPTIONS INCLUDE: Anytime, Weekday mornings, Weekday afternoons, Weekday evenings, Weekend mornings, Weekend afternoons, Weekend evenings

 **Please provide the best phone number at which you can be reached.**

 □ Check here if you cannot provide a phone number 1

 **Please select the best time to reach you below.**

▼

 **Please enter your email address below.**

 □ Check here if you don’t have an email address 1

|  |
| --- |
| SOFT CHECK: IF A37a\_phone = NO RESPONSE; **Please provide a phone number so we can help you complete the survey. If you cannot provide a phone number, please check the box and call 1‑xxx-xxx-xxxx to speak with an interviewer.** |

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| PROGRAMMER VERIFICATION BOX a37a.1SEND CASE TO SUPERVISOR REVIEW.SEND ALERT WITH THE INFORMATION COLLECTED AT A37a. |

|  |
| --- |
| DOB\_VERIFY = 1 OR SSN\_VERIFY = 1 |

**A37b. Are you male or female?**

*Select one response*

🔾 Male 01

🔾 Female 02

|  |
| --- |
| SOFT CHECK: IF A37b = NO RESPONSE; **Please provide an answer to this question and continue.*****To continue to the next question without providing a response, click the continue button.*** |

**FREQUENTLY ASKED QUESTIONS (FAQs)**

PROGRAMMER: ALLOW R 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 OR 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.

**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.

**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.

**FAQs – (continued)**

**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.

**WILL I BE PAID?**

Yes, by participating in this special study you can receive up to $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 $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.

**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**

|  |
| --- |
| ALL |

**B1. The next questions are about you and your household. By household we mean people who live together and share household finances.**

 **What is your current marital status?**

*Select one response*

🔾 Married 01

🔾 Separated 02

🔾 Divorced 03

🔾 Widowed 04

🔾 Never married 05

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B1 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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.*

 # of current household members

 (RANGE 01-20)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B2= M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

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

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

*Select one response*

🔾 Yes, a partner 01

🔾 Yes, a boyfriend 02

🔾 Yes, a girlfriend 03

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B3 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| (b1=01 and b2 gt 02) **or** (b3=01,02 OR 03 and b2 gt 02) **or** (b3=00, M and b2 gE 02) |

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

 Children under 18

 (00-20)

NO RESPONSE M

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| --- |
| SOFT CHECK: IF B4 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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| --- |
| 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?**

*If you were home schooled, please select the highest year, grade, degree, or certificate completed.*

*Select one response*

🔾 Did not complete high school or GED 01

🔾 High School: Received Diploma 02

🔾 High School: Received GED 03

🔾 Certificate of completion 04

🔾 Some college or 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 ( MA, MBA, PH.D., JD, MD) 09

🔾 Never attended school 10

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B5 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

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

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B6 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| All |

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

*Select one response*

🔾 Excellent 01

🔾 Good 02

🔾 Fair 03

🔾 Poor 04

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B5 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

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| ALL |

**C1. The 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?**

🔾 Yes 01 C2a

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C1 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| C1=00 or M |

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

*If you filed more than once during that period, please enter the most recent time that you filed for benefits.*

*Even if you never collected benefits, please enter when around [UI CLAIM DATE] you filed for unemployment insurance benefits.*

PROGRAMMER: INSERT DROP DOWN FIELDS

 Date filed

▼

▼

Month Year

(01-12) (2013-2014)

*Select one response*

🔾 I did not file 98 STATUS 380

🔾 I did not collect benefits/have not collected yet 99

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF DATE IS MORE THAN SIX WEEKS BEFORE THE UI CLAIM DATE; **I’m sorry, we need to confirm that we are interviewing people with this filing date.** |
| HARD CHECK: IF ANSWER =98, There seems to be a problem with our records. Please call 1-xxx-xxx-xxxx to speak with an interviewer at Mathematica and enter your telephone number below. [INSERT FIELD FOR PHONE NUMBER] |
| HARD CHECK: IF C2 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| PROGRAMMER BOX C2.1REPLACE 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 CHECK AND STATUS FOR SUPERVISOR REVIEW (Status 380) |

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

**C2a. How did you file for unemployment insurance benefits?**

*Select one response*

🔾 Online using the state website 01

🔾 Through an automated telephone system 02

🔾 Over the phone with a staff person 03

🔾 In person 04

🔾 In some other way 99

 (STRING 50)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C2a = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| IF OTHER SPECIFY (99): **How did you file for unemployment insurance benefits?** |

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

C2b. Are you currently receiving unemployment insurance benefits?

🔾 Yes 01 C3

🔾 No 00

NO RESPONSE M C3

|  |
| --- |
| SOFT CHECK: IF C2b = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**C2c. When did you stop receiving unemployment insurance benefits?**

 C3

▼

▼

▼

Month Day Year

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

🔾 NEVER COLLECTED 99 C3

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C2c = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

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

*Select one response*

New Income Sources

🔾 I was re-employed/found a job; started a job; or started my own business 01

Benefit Restriction Issues

🔾 My benefits ran out/were exhausted 02

🔾 I was disqualified 03

🔾 I received workmen’s compensation/had case pending 04

🔾 I was not eligible for UI in the first place; I was denied benefits 05

**Not Available To Work**

🔾 I had an illness or disability 06

🔾 I voluntarily dropped out of the labor force/went to school 07

🔾 I got back my immigration papers/had lost my immigration papers 08

🔾 I went into the military 09

🔾 I retired or received social security 10

🔾 I moved 11

**Other**

🔾 I had too much trouble dealing with or reaching the UI office 12

🔾 I did not want unemployment insurance anymore 13

🔾 I never collected 14

🔾 Some other reason 99

 (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C2d = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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?**

🔾 Yes 01 C5

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C3 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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]?**

*If you worked for a temporary agency, please enter the name of the agency, not the employer who contracted with the temporary agency.*

 Employer name

(STRING 50)

NO RESPONSE M

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

|  |
| --- |
| SOFT CHECK: IF C4 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

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

*What was the major product or service of [SEPARATION EMPLOYER ]?*

 Kind of company

(STRING 255)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C5 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

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

*What was your occupation?*

 Occupation

(STRING 255)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C6 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

C7. Was your job with [SEPARATION EMPLOYER ] 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?

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C7 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

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

*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.*

PROGRAMMER: INSERT DROP DOWN FIELDS

 Start date C10

▼

▼

Month Year

 (01-12) (1964-2014)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C8 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| HARD CHECK: IF C8 = BEFORE UI CLAIM DATE; **Your start date at [SEPARATION EMPLOYER ] should come before the date you applied for UI in [UI CLAIM DATE].****Please update your response and click the continue button.** |

|  |
| --- |
| C8 = M |

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

▼

▼

 Years Months

 (0-99) (0-99)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C9 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

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

🔾 Yes 01 C12

🔾 No 00

🔾 No, my work hours were reduced 02

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C10 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| C10 = 00, 02, M |
| 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)?**

PROGRAMMER: INSERT DROP DOWN FIELDS

 Date hours reduced

▼

▼

Month Year

(01-12) (2013-2014)

🔾 My (job did not end/work hours were not reduced). I am still employed at [SEPARATION EMPLOYER ] 98 Status 380 (Sup Review)

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX C11.1 REPLACE SAMPLE DATA JOB SEPARATION MONTH, YEAR WITH THIS DATE FOR SUBSEQUENT QUESTIONS |

|  |
| --- |
| HARD CHECK: IF ANSWER =98, **There seems to be a problem with our records. Please call 1-xxx-xxx-xxxx to speak with an interviewer at Mathematica and enter your telephone number below.** [INSERT FIELD FOR PHONE NUMBER] |

|  |
| --- |
| SOFT CHECK: IF C11 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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 ]?**

 *Select “yes” if the benefits (are/were) available, but not used. If the benefits were or will be available to you after a standard probationary period, select “yes”, even if not used.*

*Select one response for each row*

|  | YES | NO |
| --- | --- | --- |
| a. health insurance benefits?  | 01 🔾 | 00 🔾 |
| b. paid sick days?  | 01 🔾 | 00 🔾 |
| c. a retirement savings or pension plan?  | 01 🔾 | 00 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **Please review your entries and provide the missing response.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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)?**

*On average--your best estimate is fine.*

 Hours per week

 (RANGE 1-80)

🔾 Varies v

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C13 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| C13=M |

**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 ]?**

*On average--your best estimate is fine.*

*Select one response*

🔾 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

NO RESPONSE M

PROGRAMMER BOX C14.1

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

|  |
| --- |
| SOFT CHECK: IF C14 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

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

*On average--your best estimate is fine.*

 Hours per week

 (RANGE 1-80)

🔾 Varies v

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C14a = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| C14a=M |

**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 ]?**

 *On average--your best estimate is fine.*

 *Select one response*

🔾 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

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C14b = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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)?**

*Your best estimate is fine.*

PROGRAMMER: ADD DOLLAR SIGN TO FIELD

 Amount Pay Period

 PER C16d

▼

 ($5.00 - $500,000.00)

PROGRAMMER: USE PAY PERIOD OPTIONS BELOW

 *Select one response*

🔾 Per hour 01

🔾 Per week 02

🔾 Once every two weeks 03

🔾 Twice a month 04

🔾 Per month 05

🔾 Per year 06

🔾 Some other pay period 99

Write in pay period (STRING 250)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C15 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| IF OTHER SPECIFY (99): **What category would best 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)?** |

|  |
| --- |
| SOFT CHECKS: OUT OF RANGE PER RESPONSE: **You indicated [dollar amount] per [range]. Is this correct?**PER HOUR: >$50; PER WEEK: >$2,000; PER YEAR: >$100,000; ONCE EVERY TWO WEEKS: $4,000; TWICE PER MONTH: >$4,000; PER MONTH: >$8,000 |

|  |
| --- |
| C15=M |

**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?**

 🔾 Less than $30,000 01 C16c

 🔾 $30,000 or more 02

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C16a = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**C16b. Would you say they were…**

*Select one response*

🔾 $30,000 to under $45,000, 01

🔾 $45,000 to under $60,000, 02

🔾 $60,000 to under $75,000, 03

🔾 $75,000 to under $90,000, 04

🔾 $90,000 to under $105,000, OR 05

🔾 $105,000 or more? 06

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C16b = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**C16c. Would you say they were…**

*Select one response*

🔾 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

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C16c = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

PROGRAMMER BOX C16C.1

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?**

*Your best estimate is fine.*

PROGRAMMER: ADD DOLLAR SIGN TO FIELD

Amount Pay Period

 PER C17

▼

 ($5.00 - $500,000.00)

PROGRAMMER: USE PAY PERIOD OPTIONS BELOW

🔾 Per hour 01

🔾 Per week 02

🔾 Once every two weeks 03

🔾 Twice a month 04

🔾 Per month 05

🔾 Per year 06

🔾 Some other pay period 99

Write in pay period (STRING 250)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C16d = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| IF OTHER SPECIFY (99): **What category would best describe usual pay now?** |

|  |
| --- |
| SOFT CHECKS: OUT OF RANGE PER RESPONSE: **You indicated [dollar amount] per [range]. Is this correct?**PER HOUR: >$50; PER WEEK: >$2,000; PER YEAR: >$100,000; ONCE EVERY TWO WEEKS: $4,000; TWICE PER MONTH: >$4,000; PER MONTH: >$8,000 |

|  |
| --- |
| C16d=M |

**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?**

🔾 Less than $30,000 01 C16g

🔾 $30,000 or more 02

NO RESPONSE M C18

|  |
| --- |
| SOFT CHECK: IF C16e = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**C16f. Would you say they were…**

*Select one response*

🔾 $30,000 to under $45,000, 01

🔾 $45,000 to under $60,000, 02

🔾 $60,000 to under $75,000, 03

🔾 $75,000 to under $90,000, 04

🔾 $90,000 to under $105,000, OR 05

🔾 $105,000 or more? 06

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C16f = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**C16g. Would you say they were…**

*Select one response*

🔾 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

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C16g = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

PROGRAMMER BOX C16G.1

 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…**

*Select one response*

🔾 You were laid off 01 C18

PROGRAMMER:SHOW IN HOVER/LINK: *(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 or position eliminated)*

🔾 You retired 02 C21

🔾 You were discharged or fired 03 C21

🔾 You quit 04 C21

🔾 Or was there some other reason? 99 C18

 (STRING 250)

NO RESPONSE M C21

|  |
| --- |
| SOFT CHECK: IF C17 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| IF OTHER SPECIFY (99): **What was the main reason your job at [SEPARATION EMPLOYER ] ended?** |

|  |
| --- |
| 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)?**

🔾 Yes 1

🔾 No 0 C21

NO RESPONSE M C21

|  |
| --- |
| SOFT CHECK: IF C18 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

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

🔾 Yes 01

🔾 No 00 C21

NO RESPONSE M C21

|  |
| --- |
| SOFT CHECK: IF C19 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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)?**

PROGRAMMER: INSERT DROP DOWN FIELDS

 Date

▼

▼

▼

Month Day Year

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

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C20 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| all |

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

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C21= M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

**SECTION D: JOB SEARCH AND OFFERS**

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

**D1. The next questions ask 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…**

|  |
| --- |
| PROGRAMMER BOX D1.1 IF INTERVIEW DATE MINUS UI CLAIM DATE IS FEWER THAN SEVEN WEEKS, SHOW CHOICES 01 THROUGH 04 ONLY. IF FEWER THAN 9 WEEKS, SHOW CHOICES 01 THROUGH 05. |

*Select one response*

🔾 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 05

🔾 More than 8 weeks later 06

🔾 I began looking for work prior to losing my job/my hour reduction 98

🔾 I have not begun to look for work 99 D4

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF D1 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

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

🔾 Yes 1

🔾 No 0 D4

NO RESPONSE M D4

|  |
| --- |
| SOFT CHECK: IF D2 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

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

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF D3 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

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

*If you were recalled to your old job, select “yes.”*

🔾 Yes 01

🔾 No 00 D9

NO RESPONSE M D9

|  |
| --- |
| SOFT CHECK: IF D4 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

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

 Enter Number of Job Offers Received

 (01-10)

 NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF D4a = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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)?**

🔾 Yes 01 D9

🔾 No 00 D5

🔾 I have not decided d D5

NO RESPONSE M D5

|  |
| --- |
| SOFT CHECK: IF D4ba = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| D4b=00, d OR M |
| 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?**

*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.*

*Your best estimate is fine.*

 Amount Pay Period

 per

▼

 ($5.00 - $500,000.00)

PROGRAMMER: USE PAY PERIOD OPTIONS BELOW

🔾 Per hour 01

🔾 Per week 02

🔾 Once every two weeks 03

🔾 Twice a month 04

🔾 Per month 05

🔾 Per year 06

🔾 Some other pay period 99

Specify (STRING 250)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF D5 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| IF OTHER SPECIFY (99): **What category would best describe (your total income/the total income for you and all the members of your household) just before your (job ended/work hours were reduced) in [JOB SEPARATION MONTH]?** |
| SOFT CHECKS: OUT OF RANGE PER RESPONSE: **You indicated [dollar amount] per [range]. Is this correct?**PER HOUR: >$50; PER WEEK: >$2,000; PER YEAR: >$100,000; ONCE EVERY TWO WEEKS: $4,000; TWICE PER MONTH: >$4,000; PER MONTH: >$8,000 |

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

**D6. Were any of the following benefits included in that job offer?**

PROGRAMMER: CODE ONE PER ROW

*Select one response per row*

|  | YES | NO |
| --- | --- | --- |
| a. health insurance benefits?  | 01 🔾 | 00 🔾 |
| b. paid sick days?  | 01 🔾 | 00 🔾 |
| c. a retirement savings or pension plan?  | 01 🔾 | 00 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **You have missed one or more questions on this page. Please review your answers and provide the missing response(s).*To continue to the next question without making changes, click the continue button.*** |

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

**D7. Did the job offered require relocation?**

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF D7 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| d4b=00, d OR M |
| 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?**

 (STRING 250)

|  |
| --- |
| SOFT CHECK: IF D8 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

**D9. The next questions 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…**

PROGRAMMER: CODE ONE PER ROW

|  | CODE ONE PER ROW |
| --- | --- |
|  | YES | NO |
| a. used a resource room?PROGRAMMER:SHOW IN HOVER/LINK: *Each American Job Center 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 🔾 |
| b. attended any workshops?PROGRAMMER:SHOW IN HOVER/LINK: *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 🔾 |
| c. taken either tests or assessments? | 01 🔾 | 00 🔾 |
| d. attended meetings for either job clubs or job groups?PROGRAMMER:SHOW IN HOVER/LINK:*These groups involve getting together with other job seekers for support and to talk about job leads and ways to find jobs.* | 01 🔾 | 00 🔾 |
| e. received either career counseling or one-on-one assistance to support you in your job search or training? | 01 🔾 | 00 🔾 |
| f. received labor market information about what occupations were in demand in your local area? | 01 🔾 | 00 🔾 |
| g. received information on education or job training programs? | 01 🔾 | 00 🔾 |
| h. registered with either the Employment Service or your state’s job bank? | 01 🔾 | 00 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **You have missed one or more questions on this page. Please review your answers and provide the missing response(s).*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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?**

*Select one response*

🔾 Very useful 01

🔾 Somewhat useful 02

🔾 Not very useful 03

🔾 Not at all useful 04

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF D10 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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.**

🔾 Yes 01 F2

🔾 No 00

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF D11 = M; **Your response to this question is important. Please provide a response and continue.** |

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

**D12. Did you look for work last week?**

🔾 Yes 01 D13

🔾 No 00 D15

NO RESPONSE M D15

|  |
| --- |
| SOFT CHECK: IF D12 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**D13. Below is a list of things people sometimes do when looking for work. Please indicate whether you did any of these things to look for work last week.**

 **Last week, did you…**

PROGRAMMER:SHOW IN HOVER/LINK: *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.*

*Select one response per row*

|  |  |  |
| --- | --- | --- |
|  | YES | NO |
| a. Contact either a private employment or placement agency? | 01 🔾 | 00 🔾 |
| b. Use services from [STATE ONE STOP CENTER NAME] or another American Job Center? | 01 🔾 | 00 🔾 |
| c. Contact your former employer? | 01 🔾 | 00 🔾 |
| d. Contact friends, relatives or professional associates about job openings? | 01 🔾 | 00 🔾 |
| e. Use the internet, including social media sites either to look for or apply for work? | 01 🔾 | 00 🔾 |
| f. Answer any want ads in newspapers or other publications? | 01 🔾 | 00 🔾 |
| g. Apply directly to places that you might want to work? | 01 🔾 | 00 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **You have missed one or more questions on this page. Please review your answers and provide the missing response(s).*To continue to the next question without making changes, click the continue button.*** |

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

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

*Your best estimate is fine.*

 Hours spent looking for work last week E1

 (01-80)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF D14 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| D14=M |

**D14a. Would you say you spent between…**

*Select one response*

🔾 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? 06

NO RESPONSE M

PROGRAMMER BOX D14A.1

 GO TO E1.

|  |
| --- |
| d1=99 OR D12=00 or M |
| 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)?**

 Please write in your main reason below 99

 (STRING 100)

NO RESPONSE M

|  |
| --- |
| 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)?** |

|  |
| --- |
| SOFT CHECK: IF D15 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

**SECTION E: RE-EMPLOYMENT EXPECTATIONS**

|  |
| --- |
| PROGRAMMER SKIP BOX D15.1 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)?**

*Your best estimate is fine.*

 Number Period

 E2

▼

PROGRAMMER: USE PERIOD OPTIONS BELOW

🔾 Weeks 01

🔾 Months 02

🔾 Years 03

🔾 I do not want to work 98 F1

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF E1 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| E1=M |

**E1a. Do you think it would take…**

*Select one response*

🔾 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

🔾 I do not want to work 98 F1

NO RESPONSE M

PROGRAMMER BOX E1A.1

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

|  |
| --- |
| SOFT CHECK: IF E1a = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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.

 Which of the following benefits must be offered by a job for you to take it? Must the job offer adequate…

PROGRAMMER:SHOW IN HOVER/LINK: *Adequate for your needs.*

PROGRAMMER: CODE ONE PER ROW

*Select one response per row*

|  | YES | NO |
| --- | --- | --- |
| a. health insurance benefits?  | 01 🔾 | 00 🔾 |
| b. paid sick days?  | 01 🔾 | 00 🔾 |
| c. a retirement savings or pension plan?  | 01 🔾 | 00 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **You have missed one or more questions on this page. Please review your answers and provide the missing response(s).*To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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?**

 Amount Pay Period

 per

▼

 ($5.00 - $500,000.00)

PROGRAMMER: USE PAY PERIOD OPTIONS BELOW

🔾 Per hour 01

🔾 Per week 02

🔾 Once every two weeks 03

🔾 Twice a month 04

🔾 Per month 05

🔾 Per year 06

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF E3 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| SOFT CHECKS: OUT OF RANGE PER RESPONSE: **You indicated [dollar amount] per [range]. Is this correct?**PER HOUR: >$50; PER WEEK: >$2,000; PER YEAR: >$100,000; ONCE EVERY TWO WEEKS: $4,000; TWICE PER MONTH: >$4,000; PER MONTH: >$8,000 |

|  |
| --- |
| ALL |

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

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF E4 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

**SECTION F: RE-EMPLOYMENT**

|  |
| --- |
| PROGRAMMER SKIP BOX E4.1 IF D11=01, GO TO F2 |

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

**F1. The next questions are 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.*

🔾 Yes 01 F4

🔾 No 00 G1

NO RESPONSE M G1

|  |
| --- |
| SOFT CHECK: IF F1=NO RESPONSE; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without providing a response, click the continue button.*** |

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

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

🔾 Yes 01 F4

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F2=NO RESPONSE; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without providing a response, click the continue button.*** |

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

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

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F3=NO RESPONSE; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without providing a response, click the continue button.*** |

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

**F4. (Including your current job) how many different jobs have you had since [JOB SEPARATION MONTH]?**

*Please include both part time and full-time jobs, as well as any self-employment jobs or business ventures held for pay or profit.*

PROGRAMMER:SHOW TWO BULLETS BELOW IN HOVER/LINK:

* + *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.*
	+ *Treat jobs with temporary agencies and self-employed consulting jobs as one job, regardless of the number of assignments.*

 Number of jobs

▼

 (01-05)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F4 = 01 – 05; **You reported that you currently have [FILL F4] paid jobs. Please check that this is correct and either keep your answer or change your answer below.*****To keep your answer without making changes, click the continue button.*** |
| HARD CHECK: IF F4 = M; **You mentioned in a previous question that you are currently working. You just mentioned that you have 0 jobs. Click here to go back and change your answer about currently working. You may also change your answer below.*****To continue to the next question, click the continue button.*** |

|  |
| --- |
| PROGRAMMER LOOP BOX F4.1ALLOW 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”  |

F5. JOB [1]: Starting with the first job, please enter the names of all of the companies you worked for after your (job ended/work hours were reduced) in [JOB SEPARATION MONTH, YEAR].

 JOB 1 (STRING 50)

 JOB 2 (STRING 50)

 JOB 3 (STRING 50)

 JOB 4 (STRING 50)

 JOB 5 (STRING 50)

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF F5=NO RESPONSE; **Your response to this question is important. Please provide a response and continue. If you have not had [FILL NUMBER AT F4] jobs, please click here to return to that question and update the number of jobs.** PROGRAMMER: PROVIDE LINK TO F4 SO THAT RESPONDENT CAN UPDATE RESPONSE |

|  |
| --- |
| all |

F6. Please confirm that since [JOB SEPARATION MONTH, YEAR] you worked at [FILL F5 NAMES FOR NEWJOB 1-NEWJOB5]. Is this correct?

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX F6.1IF F6=00, GO BACK TO F4 AND F5 AND ALLOW RESPONDENT TO UPDATE THE NUMBER AND NEWJOB1-NEWJOB5 NAMES. |

|  |
| --- |
| SOFT CHECK: IF F6=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without providing a response, click the continue button.*** |

|  |
| --- |
| ALL |

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

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F6a=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without providing a response, click the continue button.*** |

|  |
| --- |
| ALL |

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

 *Your best estimate is fine.*

 PROGRAMMER: INSERT DROPDOWNS WITH FOLLOWING RANGES

 Month Day Year

 F9

▼

▼

▼

 (1-12) (1-31) (1964 - 2014)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F7 MONTH OR F7 YEAR = NO RESPONSE; **Please provide an answer to this question and continue.*****To continue to the next question without providing a response, click the continue button.***  |

|  |
| --- |
| HARD CHECK: IF THE DATE IS PRIOR TO UI CLAIM DATE: **Your start date at [EMPLOYER NAME should come after the date you applied for unemployment insurance benefits in [UI CLAIM DATE].****Please update your response and click the continue button.** |

|  |
| --- |
| F7 = M |

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

 *Your best estimate is fine.*

Number Period

▼

 (0-99)

PROGRAMMER: USE PERIOD OPTIONS BELOW

🔾 Weeks 01

🔾 Months 02

 NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F8 = NO RESPONSE; **Please provide an answer to this question and continue.*****To continue to the next question without providing a response, click the continue button.*** |

|  |
| --- |
| ALL |

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

 *Your best estimate is fine.*

PROGRAMMER: INSERT DROPDOWNS WITH FOLLOWING RANGES

 Month Day Year

 F14

▼

▼

▼

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

□ Check here if you are still at [EMPLOYER NAME] 98 F11

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F9 MONTH OR F9 YEAR = NO RESPONSE; **Please provide an answer to this question and continue.*****To continue to the next question without providing a response, click the continue button.*** |

|  |
| --- |
| F9 = m |

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

 *Your best estimate is fine.*

*Select one response*

🔾 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

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F10 = NO RESPONSE; **Please provide an answer to this question and continue.*****To continue to the next question without providing a response, click the continue button.*** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| HARD CHECK: AFTER ASKING ABOUT THE LAST JOB, 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**: Earlier you indicated that you are currently working, but reported an end date for each of your jobs. In order to continue, please select the question that needs to be corrected and update your response.**PROGRAMMER: SHOW QUESTION AND RESPONSE FOR C10, D11, F9 (FOR NEWJOB 1-NEWJOB5). E.G.:

|  |  |
| --- | --- |
| **Question** | **Response** |
| 🔾 According to [STATE’s] Unemployment Insurance Agency records, your job at [SEPARATION EMPLOYER] ended in [JOB SEPARATION MONTH, YEAR]. Is that correct? | [FILL YES, NO, NO MY HOURS WERE REDUCED, RESPONSE MISSING] |
| 🔾 (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. | [FILL YES, NO, RESPONSE MISSING] |
| 🔾 On what date did your job at [NEWJOB1] end? | [FILL F9 DATE FOR NEWJOB1] |
| 🔾 On what date did your job at [NEWJOB 2] end? | [FILL F9 DATE FOR NEWJOB 2] |
| 🔾 On what date did your job at [NEWJOB 3] end? | [FILL F9 DATE FOR J NEWJOB 3] |
| 🔾 On what date did your job at [NEWJOB 4] end? | [FILL F9 DATE FOR NEWJOB 4] |
| 🔾 On what date did your job at [NEWJOB 5] end? | [FILL F9 DATE FOR NEWJOB 5] |

 |

|  |
| --- |
| f9 =98 |

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

*What (is/was) your occupation?*

 (STRING 250)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F11=NO RESPONSE; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without providing a response, click the continue button.*** |

|  |
| --- |
| f9=98 |

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

 (STRING 250)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F12=NO RESPONSE; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without providing a response, click the continue button.*** |

|  |
| --- |
| f9=98 |

ALL JOBS:

F13. Are any of the following benefits available to you at [NEWJOB1-NEWJOB5]?

 *Select “yes” if the benefits are available, but not used. If the benefits were or will be available to you after a standard probationary period, select “yes”, even if not used.*

*Select one per row*

|  | YES | NO |
| --- | --- | --- |
| a. Health insurance benefits | 01 🔾 | 00 🔾 |
| b. Paid sick days | 01 🔾 | 00 🔾 |
| c. A retirement savings or pension plan | 01 🔾 | 00 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **You have missed one or more questions on this page. Please review your answers and provide the missing response(s).*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

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

 *On average. Your best estimate is fine.*

 Hours per week

 (01-80)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F14=NO RESPONSE; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without providing a response, click the continue button.*** |

|  |
| --- |
| f14 =m |

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?

 *On average. Your best estimate is fine.*

*Select one response*

🔾 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

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F15=NO RESPONSE; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without providing a response, click the continue button.*** |

|  |
| --- |
| ALL |

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

 *Your best estimate is fine.*

 Amount Pay Period

 per F18

▼

 ($5.00 - $500,000.00)

PROGRAMMER: USE PAY PERIOD OPTIONS BELOW

🔾 Per hour 01

🔾 Per week 02

🔾 Once every two weeks 03

🔾 Twice a month 04

🔾 Per month 05

🔾 Per year 06

🔾 Other 99

Please write in your usual pay period here.

 (STRING 250)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F16=NO RESPONSE; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without providing a response, click the continue button.*** |

|  |
| --- |
| SOFT CHECKS: OUT OF RANGE PER RESPONSE: **You indicated [dollar amount] per [range]. Is this correct?**PER HOUR: >$50; PER WEEK: >$2,000; PER YEAR: >$100,000; ONCE EVERY TWO WEEKS: $4,000; TWICE PER MONTH: >$4,000; PER MONTH: >$8,000 |

|  |
| --- |
| F16=m |

F17. Please try to estimate your annual pay at [NEWJOB1-NEWJOB5]. Would you say your annual earnings are…

 *Select one response*

🔾 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

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F17= M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| PROGRAMMER SKIP BOX F17.1IF F9=98, GO TO PROGRAMMER BOX F18.1, ELSE CONTINUE |

|  |
| --- |
| F9 ne 98 |

F18. What was the main reason this job ended?

*Select one response*

🔾 You were laid off 01

PROGRAMMER:SHOW IN HOVER/LINK: *(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 or position eliminated)*

🔾 You retired 02

🔾 You were discharged or fired 03

🔾 You quit 04

🔾 Some other reason? 99

 (STRING 250)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF F17= M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| PROGRAMMER LOOP BOX F18.1RETURN 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. The 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…**

*Select one response*

🔾 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

NO RESPONSE M G3

|  |
| --- |
| SOFT CHECK: IF G1 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**G1a. Did you have a mortgage on your home?**

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G1a = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| Programmer skip box g1aGO TO G3 |

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

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

 Living arrangement

(STRING 250)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G2 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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).**

*Your best estimate is fine.*

PROGRAMMER: ADD DOLLAR SIGN TO FIELD

 Total debt at job separation

(0-999,999) G5

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF GT $100,000: **You indicated [G3 dollar amount]. Is this correct?** |
| SOFT CHECK: IF G3 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| G3=M |

**G4. Would you say it was…**

 *Select one response*

🔾 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, or 06

🔾 More than $100,000? 07

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G4 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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?**

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G5 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**G6. How important (are/were) your unemployment insurance payments in helping you meet your financial obligations?**

*Select one response*

🔾 Very important 01

🔾 Somewhat important 02

🔾 Somewhat unimportant 03

🔾 Very unimportant 04

🔾 I did not receive benefits/have not received benefits yet N

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G6 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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)?**

*Select one response*

🔾 I had enough of the kinds of food I wanted to eat. 01

🔾 I had enough but not always the kind of food I wanted to eat. 02

🔾 I sometimes did not have enough to eat. 03

🔾 I often did not have enough to eat. 04

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G6a = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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?**

PROGRAMMER: CODE ONE PER ROW

*Select one response per row*

|  |  |  |
| --- | --- | --- |
|  | YES | NO |
| a. Savings accounts? | 01 🔾 | 00 🔾 |
| b. Credit card accounts? | 01 🔾 | 00 🔾 |
| c. Home equity lines of credit or HELOCs? | 01 🔾 | 00 🔾 |
| d. Investment accounts such as certificates of deposits, money market accounts, stocks, or bonds? | 01 🔾 | 00 🔾 |
| e. 401(k), 403(b), or Individual Retirement Accounts or IRAs? | 01 🔾 | 00 🔾 |
| f. Pension plans? | 01 🔾 | 00 🔾 |
| g. Rental properties? | 01 🔾 | 00 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **You have missed one or more questions on this page. Please review your answers and provide the missing response(s).*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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.*

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

*Select one response*

🔾 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

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G8 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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)…**

PROGRAMMER: CODE ONE PER ROW

*Select one response per row*

|  |  |  |
| --- | --- | --- |
|  | YES | NO |
| a. (G7a = 01) withdraw money from savings accounts? | 01 🔾 | 00 🔾 |
| b. (G7b = 01) access cash from credit card accounts? | 01 🔾 | 00 🔾 |
| c. (G7c= 01) access money from a home equity line of credit? | 01 🔾 | 00 🔾 |
| d. (G7d=01) access funds from investment accounts such as certificates of deposits, money market accounts, stocks, or bonds? | 01 🔾 | 00 🔾 |
| e. (G7e=01) make an early withdrawal from a retirement savings investment account such as a 401(k), 403(b), or IRA? | 01 🔾 | 00 🔾 |
| f. (G7f=01) take early retirement to get benefits from a pension plan? | 01 🔾 | 00 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **You have missed one or more questions on this page. Please review your answers and provide the missing response(s).*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| B1=01 OR B3=01, 02, 03,  |
| If b2 gt 01, “OR ANYONE IN YOUR HOUSEHOLD” |
| IF B1=01, FILL “SPOUSE”, B3=01, 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].**

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

PROGRAMMER:SHOW IN HOVER/LINK: *By household we mean people who live together and share finances.*

🔾 Yes 01

🔾 No 00 G11

NO RESPONSE M G11

|  |
| --- |
| SOFT CHECK: IF G10 = M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| G10=01 |
| IF B1=01, FILL “SPOUSE,” IF B3=01 , 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?**

 Amount Pay Period

 PER

▼

 ($5.00 - $500,000.00)

PROGRAMMER: USE PAY PERIOD OPTIONS BELOW

🔾 Per hour 01

🔾 Per week 02

🔾 Once every two weeks 03

🔾 Twice a month 04

🔾 Per month 05

🔾 Per year 06

🔾 Some other pay period 99

 (STRING 250)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G10a=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |
| IF OTHER SPECIFY (99): **What category would best describe your (spouse’s/partner’s/ boyfriend’s/girlfriend’s) earnings at the time your (job ended/work hours were reduced) in [JOB SEPARATION MONTH]?** |
| SOFT CHECKS: OUT OF RANGE PER RESPONSE: **You indicated [dollar amount] per [range]. Is this correct?**PER HOUR: >$50; PER WEEK: >$2,000; PER YEAR: >$100,000; ONCE EVERY TWO WEEKS: $4,000; TWICE PER MONTH: >$4,000; PER MONTH: >$8,000 |

|  |
| --- |
| G10=01 |
| IF B1=01, FILL “SPOUSE”, IF B3=01, 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 G11

 (10-80)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G10b=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |
| SOFT CHECK: IF LT 10 OR GT 80: **You indicated [G10b hour]. Is this correct?** |

|  |
| --- |
| G10b=M |

**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?**

*Select one response*

🔾 Less than $30,000 01 G10e

🔾 $30,000 or more 02

NO RESPONSE M G11

|  |
| --- |
| SOFT CHECK: IF G10c=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**G10d. Would you say it was…**

*Select one response*

🔾 $30,000 to under $45,000, 01

🔾 $45,000 to under $60,000, 02

🔾 $60,000 to under $75,000, 03

🔾 $75,000 to under $90,000, 04

🔾 $90,000 to under $105,000, or 05

🔾 $105,000 or more? 06

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G10d=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**G10e. Would you say it was…**

*Select one response*

🔾 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

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G10e=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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 unemployment insurance compensation benefits here.*

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G11=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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?**

PROGRAMMER: CODE ONE PER ROW

*Select one response per row*

|  |  |  |
| --- | --- | --- |
| PROGRAMS | YES | NO |
| a. Food Stamp or SNAP benefits? | 01 🔾 | 00 🔾 |
| b. Welfare benefits such as [STATE TANF NAME] or General Assistance? | 01 🔾 | 00 🔾 |
| c. SSI, SSDI, or other disability benefits? | 01 🔾 | 00 🔾 |
| d. Social Security or Pension benefits? | 01 🔾 | 00 🔾 |
| e. Medicaid or [STATEMED]? | 01 🔾 | 00 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **You have missed one or more questions on this page. Please review your answers and provide the missing response(s).*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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.*

PROGRAMMER:SHOW IN HOVER/LINK: *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.*

 Amount Pay Period

 per

▼

 ($5.00 - $500,000.00)

PROGRAMMER: USE PAY PERIOD OPTIONS BELOW

🔾 Per hour 01

🔾 Per week 02

🔾 Once every two weeks 03

🔾 Twice a month 04

🔾 Per month 05

🔾 Per year 06

🔾 Some other pay period 99

Specify (STRING 250)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G13=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |
| IF OTHER SPECIFY (99): **What category would best describe (your total income/the total income for you and all the members of your household) just before your (job ended/work hours were reduced) in [JOB SEPARATION MONTH]?** |
| SOFT CHECKS: OUT OF RANGE PER RESPONSE: **You indicated [dollar amount] per [range]. Is this correct?**PER HOUR: >$50; PER WEEK: >$2,000; PER YEAR: >$100,000; ONCE EVERY TWO WEEKS: $4,000; TWICE PER MONTH: >$4,000; PER MONTH: >$8,000 |

|  |
| --- |
| G13=M |

**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?**

*Your best estimate is fine.*

*Select one response*

🔾 Less than $3,000 per month 01 G14b

🔾 $3,000 or more per month 02

NO RESPONSE M G15

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

**G14a. Would you say it was…**

*Select one response*

🔾 $3,000 to under $4,000 per month, 01

🔾 $4,000 to under $5,000 per month, 02

🔾 $5,000 to under $6,000 per month, 03

🔾 $6,000 to under $7,000 per month , 04

🔾 $7,000 to under $8,000 per month , 05

🔾 $8,000 to under $9,000 per month, 06

🔾 $9,000 to under $10,000 per month, or 07

🔾 $10,000 or more per month? 08

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G14a=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| PrOGRAMMER SKIP BOX G14AGO TO G15 |

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

**G14b. Would you say it was…**

*Select one response*

🔾 Less than $1,000 per month, 01

🔾 $1,000 to under $2,000 per month, or 02

🔾 $2,000 to under $3,000 per month? 03

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G14b=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**G15. The previous questions have asked 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 unemployment insurance compensation benefits here.*

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G15=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**G16. (The previous questions have asked 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…**

PROGRAMMER: CODE ONE PER ROW

*Select one response per row*

|  |  |  |
| --- | --- | --- |
|  | YES | NO |
| a. Food Stamp or SNAP benefits? | 01 🔾 | 00 🔾 |
| b. Welfare benefits such as [STATE TANF NAME] or General Assistance? | 01 🔾 | 00 🔾 |
| c. SSI, SSDI, or other disability benefits? | 01 🔾 | 00 🔾 |
| d. Social Security or Pension benefits? | 01 🔾 | 00 🔾 |
| e. Medicaid or [STATEMED]? | 01 🔾 | 00 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **You have missed one or more questions on this page. Please review your answers and provide the missing response(s).*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| b1=01 or b3=01,02, 03 or 04 |
| IF B1=01, FILL “SPOUSE,” IF B3=01, 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)

NO RESPONSE M G11

|  |
| --- |
| SOFT CHECK: IF G17=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |
| SOFT CHECK: IF LT 10 OR GT 80: **You indicated [G17 hour amount]. Is this correct?** |

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

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

🔾 Yes 01

🔾 No 00

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G18=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

**SECTION H: CUSTOMER SATISFACTION**

|  |
| --- |
| ALL |

**H1. This section asks about your satisfaction with different aspects of your experience related to the unemployment insurance claim you filed in [UI CLAIM DATE].**

 **How satisfied or dissatisfied are you with your experience filing your initial claim?**

*Select one response*

🔾 Very satisfied 01

🔾 Somewhat satisfied 02

🔾 Somewhat dissatisfied 03

🔾 Very dissatisfied 04

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF H1=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

**H2. How satisfied or dissatisfied are you with…**

PROGRAMMER: CODE ONE PER ROW

*Select one response per row*

|  | VERY SATISFIED | SOMEWHAT SATISFIED | SOMEWHAT DISSATISFIED | VERY DISSATISFIED |
| --- | --- | --- | --- | --- |
| a. how easy the filing instructions were to understand and follow? | 01 🔾 | 02 🔾 | 03 🔾 | 04 🔾 |
| b. the clarity of the explanation of your rights and responsibilities? | 01 🔾 | 02 🔾 | 03 🔾 | 04 🔾 |
| c. the explanation of the benefits and services you could receive? | 01 🔾 | 02 🔾 | 03 🔾 | 04 🔾 |
| d. the length of time it took to file your initial claim? | 01 🔾 | 02 🔾 | 03 🔾 | 04 🔾 |
| e. the speed or timeliness of receiving your benefit checks or deposits? | 01 🔾 | 02 🔾 | 03 🔾 | 04 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **You have missed one or more questions on this page. Please review your answers and provide the missing response(s).*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| 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

NO RESPONSE M I1

|  |
| --- |
| SOFT CHECK: IF H3=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

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

**H4. Thinking about the service you received from staff members at the unemployment insurance office, how satisfied or dissatisfied were you with…**

PROGRAMMER: CODE ONE PER ROW

*Select one response per row*

|  | VERY SATISFIED | SOMEWHAT SATISFIED | SOMEWHAT DISSATISFIED | VERY DISSATISFIED |
| --- | --- | --- | --- | --- |
| a. the help you received to complete the filing process? | 01 🔾 | 02 🔾 | 03 🔾 | 04 🔾 |
| b. their knowledge of laws and policies? | 01 🔾 | 02 🔾 | 03 🔾 | 04 🔾 |
| c. the level of respect and courtesy you received? | 01 🔾 | 02 🔾 | 03 🔾 | 04 🔾 |

|  |
| --- |
| SOFT CHECK: IF ANY ROWS ARE EMPTY; **You have missed one or more questions on this page. Please review your answers and provide the missing response(s).*To continue to the next question without making changes, click the continue button.*** |

**SECTION I: CLOSING AND CONTACT INFORMATION**

|  |
| --- |
| ALL |

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.

 **That was the last survey question. Please verify your current mailing information so that we can send your check for $25. Is your name, current address and phone number… [FILL FROM PRELOADS]?**

*Please include an apartment number, if applicable.*

*Select one response*

🔾 Yes, all of the information is correct 00 I2a

🔾 No, I need to update the information 01

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF I1=M; **Please verify your contact information so we can send your payment.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| I1=01 |

I2. Please update your name, current mailing address and phone number below.

First Name: (STRING 50)

Middle Initial: (STRING 50)

Last Name: (STRING 50)

Mailing Address 1: (STRING 60)

Mailing Address 2: (STRING 60)

Apartment #: (STRING 10)

City: STRING 60)

State: (STRING 2)

Zip: (STRING (NUM))

Phone Number: (STRING 10)

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF MAILING ADDRESS 1 IS MISSING; **Please enter your mailing address so we can send your payment. *To continue to the next question without providing a response, click the continue button.*** |
| HARD CHECK: IF CITY IS MISSING; **Please enter your city so we can send your payment. *To continue to the next question without providing a response, click the continue button.*** |
| HARD CHECK: IF PHONE NUMBER HAS DATA ENTERED, BUT IS NOT 10 NUM DIGITS; **The phone number should be 10 digits. Please correct the number below.** |

|  |
| --- |
| ALL |

**I2b. What is your cell phone number?**

 □ Check here if you don’t have a cell phone

 Phone number

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF PHONE NUMBER HAS DATA ENTERED, BUT IS NOT 10 NUM DIGITS; **The phone number should be 10 digits. Please correct the number below.** |
| SOFT CHECK: IF I2b=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

**I4. What is your email address?**

E-Mail (STRING 50)

 □ Check here if you don’t have an email address

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF E-MAIL DOES NOT HAVE A “@” OR “.”; **Please enter a valid e-mail address.**  |
| SOFT CHECK: IF I4=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

**I5. We will mail the check for $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 will only contact these persons if we have trouble getting in touch with you directly.**

 **What is your first contact person’s name?**

First Name: (STRING 50)

Middle Initial: (STRING 50)

Last Name: (STRING 50)

NO RESPONSE M Thanks.

|  |
| --- |
| SOFT CHECK: IF I5=M; **It is important you provide at least one person to help us reach you in the future.*****If there is no one who will know how to contact you, click the continue button.*** |

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

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

*Please include an apartment number, if applicable.*

First Name: (STRING 50)

Middle Initial: (STRING 50)

Last Name: (STRING 50)

Street Address 1: (STRING 60)

Street Address 2: (STRING 60)

Apartment #: (STRING 10)

City: STRING 60)

State: (STRING 2)

Zip: (STRING 5)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF CITY AND STATE ARE MISSING; **Please enter just the city and state if you can.** ***To continue to the next question, click the “next” button below.*** |
| SOFT CHECK: IF I6=M; **Your response to this question is important. Please provide a response and continue.**To continue to the next question without making changes, click the continue button. |

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

**I7. What is [NAME FROM I6]’s phone number?**

 Phone number

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF I7=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |
| HARD CHECK: IF PHONE NUMBER HAS DATA ENTERED, BUT IS NOT 10 NUM DIGITS; **The phone number should be 10 digits. Please correct the number below.** |

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

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

*Select one response*

🔾 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

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF I8=M; **Your response to this question is important. Please provide a response and continue.**To continue to the next question without making changes, click the continue button. |

|  |
| --- |
| ALL |

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

First Name: (STRING 50)

Middle Initial: (STRING 50)

Last Name: (STRING 50)

 NO RESPONSE M Thanks

|  |
| --- |
| SOFT CHECK: IF I9=M; **It is important you provide at least one person to help us reach you in the future.*****If there is no one else who will know how to contact you, click the continue button.*** |

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

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

Street Address 1: (STRING 60)

Street Address 2: (STRING 60)

Apartment #: (STRING 10)

City: STRING 60)

State: (STRING 2)

Zip: (STRING 5)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF CITY AND STATE ARE MISSING; **Please enter just the city and state if you can.** ***To continue to the next question, click the “next” button below.*** |
| SOFT CHECK: IF I10=M; **Your response to this question is important. Please provide a response and continue.**To continue to the next question without making changes, click the continue button. |

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

**I11. What is [NAME FROM I9]’s phone number?**

 Phone number

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF I11=M; **Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |
| HARD CHECK: IF PHONE NUMBER HAS DATA ENTERED, BUT IS NOT 10 NUM DIGITS; **The phone number should be 10 digits. Please correct the number below.** |

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

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

*Select one response*

🔾 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

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF I12=M;**Your response to this question is important. Please provide a response and continue.*****To continue to the next question without making changes, click the continue button.*** |

|  |
| --- |
| ALL |

**Thanks. That was the last survey 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. You will be paid $30 for completing that survey on the web or by calling in to complete it. Thanks again and best wishes.**