

Research on Adult Education

2016

For official use

	Name	ID card	Signature
Interviewer			
Supervisor			
Coder			

Confidential when completed

Background information

Household Id	<input type="text"/>											
Locality	<input type="text"/>									MGC CODE		
Day of Interview	Day			Month			Year					
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.1 INFORMATION ON THE HOUSEHOLD

1. Indicate the number of persons living in your household/household, including yourself, for the following age groups:

Interviewer instruction, write total number of persons

Up to 13 years of age	<input type="text"/>	STOP
From 14 to 24 years of age	<input type="text"/>	STOP
From 25 to 64 years of age	<input type="text"/>	
65+ years of age	<input type="text"/>	STOP

2. Type of respondent's household:

Interviewer instruction!

One-person household over 25 years	<input type="checkbox"/>	1
A single parent with child(ren) aged less than 25	<input type="checkbox"/>	2
Couple without child(ren) aged less than 25 years	<input type="checkbox"/>	3
Couple with a child(ren) aged less than 25 years	<input type="checkbox"/>	4
Couple or single parent with a child(ren) aged less than 25 years and other people living in the same household (ex. If a married couple lives together with a brother or sister or one of them)	<input type="checkbox"/>	5
Other (ex. All other households in which there is no parent-child relationship or if a married couple lives together with a brother and sister of one of them)	<input type="checkbox"/>	6
No answer	<input type="checkbox"/>	99

Important! Type of household relating to the composition of household!

- | | |
|-------------------------------------------------------------------------------|---------------|
| e.g. - if a couple has one child aged 24 or under who lives in another city | Code 3 |
| - if a married couple living together with a brother or sister of one of them | Code 6 |
| - if that same couple has a child of 4 years or under | Code 5 |

IMPORTANT: while setting an appointment, interviewers must ask the number of household members aged between 25 and 64 years and try to set an appointment when all of these members are present to avoid proxies. However if survey is being carried out using PROXY please provide details of the person.

Person 1

What is your name? (Always write in CAPITALS)

--

What is your surname?

A 1. Indicate your sex?

- ₁ Male
₂ Female

A 2. Date of birth?
 (e.g. 20 November 1999 should read 20/11/1999)

D	D	M	M	Y	Y	Y	Y

- ₉₉ No answer

A 3. I.D. number

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- ₉₉ No answer

A 4. Citizenship
 (In case of dual citizenship, the respondent has to indicate the citizenship which the primary citizenship is to him/her).

- ₁ Maltese
₂ Other country
₉₉ No answer

Indicate other foreign citizenship

	ISCO

A 5. What is your country of birth?
 (Information on country of birth should be obtained in accordance with national boundaries existing at the time of data collection).

- ₁ Maltese
₂ Other country
₉₉ No answer

Indicate other foreign country of birth

	ISCO

A 6. For how many years have you been living in Malta and Gozo?
 (enter number of years in completed years)

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A 7. What is your de facto/ current marital status?
 • Legal basis means that the person qualifies for legal rights given to married persons and civil union
 • Respondents living with other relatives that are not partners, should answer that they have not have a partner (3)

- ₁ Living with a partner (un/married, spouse, life partner) on a legal basis
₂ Living with a partner but not on a legal basis
₃ A person does not live with partner
₉₉ No answer

<input type="checkbox"/> ₁ Male <input type="checkbox"/> ₂ Female	<input type="checkbox"/> ₁ Male <input type="checkbox"/> ₂ Female	<input type="checkbox"/> ₁ Male <input type="checkbox"/> ₂ Female	<input type="checkbox"/> ₁ Male <input type="checkbox"/> ₂ Female
D D M M Y Y Y Y 	D D M M Y Y Y Y 	D D M M Y Y Y Y 	D D M M Y Y Y Y
<input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₉₉ No answer
<input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₉₉ No answer
<input type="checkbox"/> ₁ Maltese <input type="checkbox"/> ₂ Other country <input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₁ Maltese <input type="checkbox"/> ₂ Other country <input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₁ Maltese <input type="checkbox"/> ₂ Other country <input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₁ Maltese <input type="checkbox"/> ₂ Other country <input type="checkbox"/> ₉₉ No answer
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<input type="checkbox"/> ₁ Living with a partner (un/married, spouse, life partner) ON a legal basis <input type="checkbox"/> ₂ Living with a partner but not on a legal basis <input type="checkbox"/> ₃ A person does not live with partner <input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₁ Living with a partner (un/married, spouse, life partner) ON a legal basis <input type="checkbox"/> ₂ Living with a partner but not on a legal basis <input type="checkbox"/> ₃ A person does not live with partner <input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₁ Living with a partner (un/married, spouse, life partner) ON a legal basis <input type="checkbox"/> ₂ Living with a partner but not on a legal basis <input type="checkbox"/> ₃ A person does not live with partner <input type="checkbox"/> ₉₉ No answer	<input type="checkbox"/> ₁ Living with a partner (un/married, spouse, life partner) on a legal basis <input type="checkbox"/> ₂ Living with a partner but not on a legal basis <input type="checkbox"/> ₃ A person does not live with partner <input type="checkbox"/> ₉₉ No answer

SECTION B – INFORMATION ON THE RESPONDENT (Achieved education)

B 1. What is your highest level of education/training successfully completed?
(The educational attainment level of an individual is the qualification successfully completed. The successful completion of an education programme should be officially recognised by the relevant national education authorities or recognised as equivalent to another qualification of formal education).

- | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----|
| No schooling/ Pre-Primary | <input type="checkbox"/> 1 | →B6 |
| Schools for persons with special needs | <input type="checkbox"/> 2 | →B3 |
| Primary (includes year 1-6; standard 1-7) | <input type="checkbox"/> 3 | →B3 |
| Secondary (general) (includes Junior Lyceums, area of secondary schools, lyceum and opportunity classes) | <input type="checkbox"/> 4 | |
| Secondary vocational
(e.g. Trade schools, apprentice school – Pre 2000) (includes trade schools at secondary level) | <input type="checkbox"/> 5 | |
| Foundation courses at MCAST/ Introductory courses at MCAST which last one year or less at MCAST
(Includes basic courses which are provided by MCAST. These courses give access to other learning programs which are of a more advanced level) | <input type="checkbox"/> 6 | |
| Post-secondary general
(e.g. Junior College) (includes sixth forms, Junior College, Higher Secondary, Upper Secondary, Matriculation certificate courses) | <input type="checkbox"/> 7 | |
| Post-secondary vocational – Pre 2000 (excluding ITS)
(Includes pre 2000 schools providing training in specific trades excluding Fellenberg Training Centre, School of hairdressing, Pre-vocational School, Secretarial School, Dockyard School, Technical Institute (includes ESTS and TAS schemes), Trade schools (post-secondary vocational institute), Industrial Training Centre, School for Kindergarten Assistants). | <input type="checkbox"/> 8 | |
| Post-secondary vocational (courses offered by MCAST/ITS) and private institutions of less than two (2) years
(Includes courses offered by MCAST or ITS with a duration of less than two (2) years (full-time equivalent). The duration of such courses should not include the time spent on Foundation and Introductory courses (e.g. MCAST first diploma and wireman license A&B)). | <input type="checkbox"/> 9 | |
| Post-secondary vocational (courses offered by MCAST/ITS) and private institutions of two (2) years or more/ MCAST National/Advanced/Extended Diploma/ITS Diploma
(Includes courses offered by MCAST or ITS with a duration of two (2) years or more (full-time equivalent) (including previous course(s) in the same area of study but excluding foundation and introductory courses)). | <input type="checkbox"/> 10 | |
| University undergraduate diploma or certificate of less than two (2) years
(e.g. Bachelor of Science Hons. In Software Development). | <input type="checkbox"/> 11 | |
| University undergraduate diploma certificate of two (2) years or more/ MCAST or ITS higher national diploma | <input type="checkbox"/> 12 | |
| First degree or equivalent/ MCAST Bachelor degree of four (4) years or less
(Includes professional qualifications equivalent to a first degree and qualifications from the Teacher's Training College). | <input type="checkbox"/> 13 | |
| Postgraduate diploma/certificate | <input type="checkbox"/> 14 | |
| Masters degree/ACCA/First degree of minimum five (5) years
(Includes professional qualifications from the Malta Institute of Accountants (MIA), Association of Chartered Certified Accountants (ACCA), Chartered Insurance Institute (ACII qualifications),Chartered Institute of Bankers (ACIB qualifications) and equivalent qualifications). | <input type="checkbox"/> 15 | |
| Ph. D. | <input type="checkbox"/> 16 | |
| Other level or qualification (please specify) | <input type="checkbox"/> 17 | |

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B 2. What is your highest qualification that you have achieved?

- No qualifications attained 1
- Secondary school leaving certificate 2
- SEC/GCE/O level (4 subjects or less) 3
- SEC/GCE/O level (5 subjects or more) 4
- MCAST/ITS introductory course 5
- MCAST/ITS foundation course 6
- Intermediate level/Advanced level (less than 2 A levels) 7
- Intermediate level/Advanced level (2 A levels or more) 8
- City and Guilds (Basic/Part one)/ Journeyman’s Certificate – Craft level 9
- City and Guilds (Part 2)/ Journeyman’s Certificate – Technical level/Wireman licence A&B 10
- City and Guilds (Part 3)/ Technical diploma/ Ordinary technical diploma (OTD)/Draughtsman certificate 11
- First diploma 12
- National diploma/ Advanced/ Extended 13
- Higher National Diploma (HND)/ Advanced Technician Diploma/ Full technological Diploma/ Higher Technician Diploma (HTD) 14
- University Diploma 15
- First degree/Bachelor of Honours 16
- Masters/Post graduate diploma/ Post graduate Certificate/ACCA 17
- PhD/Doctorate/DBA 18
- Other qualifications (Please Specify) 19
- No answer 99

B 3. At what age did you complete your highest level of education or training?
 (In case of double qualifications obtained at the same level, the year of the most recent qualification should be reported).

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99 No answer

B 4. Describe the area of study in which you specialised?
 (Important the main field of study corresponding to the highest achieved level of education, indicated in previous question, should be indicated).

99 No answer

<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3
<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5
<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6
<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7
<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8
<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9
<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10
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<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13
<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14
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<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99
<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99
<input type="checkbox"/> 99 No answer	<input type="checkbox"/> 99 No answer	<input type="checkbox"/> 99 No answer	<input type="checkbox"/> 99 No answer
<input type="checkbox"/> 99 No answer	<input type="checkbox"/> 99 No answer	<input type="checkbox"/> 99 No answer	<input type="checkbox"/> 99 No answer

B 5. What is the Orientation of your acquired highest level of education or training successfully completed. (i.e. general or vocational education)?
 (Important respondent might need to indicate the orientation of the institution in order to identify the orientation of the qualification).

- General education 1
- Vocational education 2
- Do not know (Please specify institution)
- No answer 99
- Not applicable 98

SECTION B – INFORMATION ON THE RESPONDENT (Incomplete education)

B 6. Have you ever started a formal educational program which you have not/never finished?
 (Formal education refers to education that is institutionalised, intentional and planned through public organisations and recognised private bodies and – in their totality – constitute the formal education system of a country. Formal education programmes are thus recognised as such by the relevant national education authorities or equivalent authorities, e.g. any other institution in cooperation with the national or sub-national education authorities).

- 1 Yes
- 2 No → B9

B 7. What was the level of education/training started?
 (If more than one formal educational programme has been abandoned, then indicate the one with highest level of qualification).

- No schooling/pre-primary 1 → B6
- Schools for persons with special needs 2 → B3
- Primary 3 → B3
- Secondary (general) 4
- Secondary vocational
 (e.g. Trade schools, apprentice school – Pre 2000) (includes trade schools at secondary level) 5
- Foundation courses at MCAST/ Introductory courses at MCAST which last one year or less at MCAST 6
- Post-secondary general (e.g. Junior College) 7
- Post-secondary vocational – Pre 2000 (excluding ITS) 8
- Post-secondary vocational (courses offered by MCAST/ITS) and private institutions of less than two (2) years 9
- Post-secondary vocational (courses offered by MCAST/ITS) and private institutions of two (2) years or more/ MCAST National/Advanced/Extended Diploma/ITS Diploma 10
- University undergraduate diploma or certificate of less than 2 years 11
- University undergraduate diploma or certificate of two (2) years or more/MCAST or ITS Higher National Diploma 12
- First degree or equivalent/MCAST Bachelor Degree of 4 years or less 13
- Post-graduate diploma/certificate 14
- Masters degree/ACCA/First degree of minimum 5 years 15
- Ph.D. 16
- Other level or qualifications (please specify) 17

<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂
<input type="checkbox"/> ₉₈	<input type="checkbox"/> ₉₈	<input type="checkbox"/> ₉₈	<input type="checkbox"/> ₉₈
<input type="checkbox"/> ₉₉	<input type="checkbox"/> ₉₉	<input type="checkbox"/> ₉₉	<input type="checkbox"/> ₉₉
<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₁ Yes
<input type="checkbox"/> ₂ No → B9	<input type="checkbox"/> ₂ No → B9	<input type="checkbox"/> ₂ No → B9	<input type="checkbox"/> ₂ No → B9
<input type="checkbox"/> ₁ → B6	<input type="checkbox"/> ₁ → B6	<input type="checkbox"/> ₁ → B6	<input type="checkbox"/> ₁ → B6
<input type="checkbox"/> ₂ → B3	<input type="checkbox"/> ₂ → B3	<input type="checkbox"/> ₂ → B3	<input type="checkbox"/> ₂ → B3
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<input type="checkbox"/> ₆	<input type="checkbox"/> ₆	<input type="checkbox"/> ₆	<input type="checkbox"/> ₆
<input type="checkbox"/> ₇	<input type="checkbox"/> ₇	<input type="checkbox"/> ₇	<input type="checkbox"/> ₇
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B 8. What was the orientation of the interrupted programme, i.e. general or vocational education?
(or which of the following categories does the interrupted education programme fall under).

General education

 1

Vocational education

 2

Do not know

 3

**INFORMATION ON THE RESPONDENT
(Employment Status)**

B 9. Which of the following categories best describes your current MAIN employment status **at the time of the interview?**
(this variable is to capture the respondent's own perception of his/her main activity **at the time of interview**).

Full-time employed or self-employed (include unpaid family worker)

 1

→ B11

Full-time employed with reduced hours (<30 hr)

 2

→ B11

Full-time employed with reduced hours (≥ 30 hr)

 3

→ B11

Part-time employed or self-employed (include unpaid family worker)

 4

→ B11

Unemployed

 5

Pupil, student, training, unpaid work experience

 6

The person in retirement or early retirement or gave up business

 7

Permanently disabled/unable to work due to certain disabilities

 8

In compulsory military service or civilian service

 9

Fulfilling domestic tasks

 10

Other inactive persons

 11

B 10. Did you carry out a job or profession at any time during the last 12 months, including unpaid work for a family business or holding, an apprenticeship or paid traineeship, etc.)?

(Respondent is to say yes if he/she feels that he/she has worked for a **relevant** period of time during the last 12 months).

 1 Yes

 2 No → C1

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₁ → B11
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₁ Yes
₂ No → C1

₁ Yes
₂ No → C1

₁ Yes
₂ No → C1

₁ Yes
₂ No → C1

**INFORMATION ON THE RESPONDENT
(The characteristics of the main job)**

B 11. What is your professional status (based on the main job)?
 (Important if respondent has more than one job, questions should be answered only for the main occupation. Employees are all those workers who hold implicit or explicit (written or oral) employment contracts which give them a basic remuneration which is not directly dependent upon the revenue of the employer for whom they work (this unit can be a corporation, a non-profit institution, a government unit or a household).

(Self-employment jobs are those jobs where the remuneration is directly dependent upon the profits (or the potential for profits) derived from the goods and services produced (where own consumption is considered to be part of profits).

(Unpaid family workers should not be confused with housekeepers).

- Owner/co-owner with employees – employers 1
- Owner/co-owner with no employees – self-employed 2
- An employee with a permanent employment contract for an indefinite period 3
- An employee with a temporary contract for a limited period 4
- Family worker (paid/unpaid or both) 5

B 12. Main occupation
 (Important! If respondent has more than one job, questions should be answered only for the main occupation).

B 12a. Job title (e.g. Machine operator, company director, bus driver, university lecturer, doctor etc.)

Job-ISCO	

B 12b. Describe you occupation.
 (e.g. operates production line equipment, responsible for the sales and marketing department etc.).

B 13. Economic activity
 (Respondent is to describe the main activity of the local unit where he/she is currently working).

(The 'local unit' to be considered is the geographical location where the job is mainly carried out; normally it consists of a single building, part of a building. The 'local unit' is therefore the group of employees of the enterprise who are geographically located at the same site).

B 13a. Company Name

B 13b. Description of activity of the local unit

Locname	

- 1
- 2
- 3
- 4
- 5

- 1
- 2
- 3
- 4
- 5

- 1
- 2
- 3
- 4
- 5

- 1
- 2
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- 5

Job-ISCO		Job-ISCO		Job-ISCO		Job-ISCO	
Locname		Locname		Locname		Locname	

B 14. How many people work in your local unit (including respondent)?
 (Important! The local unit is an enterprise or part thereof (e.g. a workshop, factory, warehouse, office, mine, depot) situated in a geographically identified place. The size of the local unit is determined by the number of people employed there, including the respondent).

- ₁ From 1 to 9
- ₂ From 10 to 19
- ₃ From 20 to 49
- ₄ From 50 to 249
- ₅ 250 or more
- ₇ The exact number is not known, but 10 people or more

B 15. What year did you start working in your current main job?

Y	Y	Y	Y

SECTION C
INFORMATION ON THE RESPONDENT
(Parent Education)

C 1. What is the highest level of education/training successfully completed by your parents/guardians?

Primary education and lower

Secondary education

Higher education

Father Mother

- | | |
|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> ₁ | <input type="checkbox"/> ₁ |
| <input type="checkbox"/> ₂ | <input type="checkbox"/> ₂ |
| <input type="checkbox"/> ₃ | <input type="checkbox"/> ₃ |

C 2. In which country was your father (male guardian) born?
 (Important information on country of birth should be obtained in accordance with the national boundaries existing at the time of data collection).

In Malta

In another country

- ₁ → C3
- ₂ _____

ISCO	

C 3. In which country was your mother (female guardian) born?
 (Important information on country of birth should be obtained in accordance with the national boundaries existing at the time of data collection).

In Malta

In another country

- ₁ → D1
- ₂ _____

ISCO	

- ₁ From 1 to 9
- ₂ From 10 to 19
- ₃ From 20 to 49
- ₄ From 50 to 249
- ₅ 250 or more
- ₇ The exact number is not known, but 10 people or more

- ₁ From 1 to 9
- ₂ From 10 to 19
- ₃ From 20 to 49
- ₄ From 50 to 249
- ₅ 250 or more
- ₇ The exact number is not known, but 10 people or more

- ₁ From 1 to 9
- ₂ From 10 to 19
- ₃ From 20 to 49
- ₄ From 50 to 249
- ₅ 250 or more
- ₇ The exact number is not known, but 10 people or more

- ₁ From 1 to 9
- ₂ From 10 to 19
- ₃ From 20 to 49
- ₄ From 50 to 249
- ₅ 250 or more
- ₇ The exact number is not known, but 10 people or more

Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y

Father Mother

- ₁ ₁
- ₂ ₂
- ₃ ₃

- ₁ → C3
- ₂ _____

Father Mother

- ₁ ₁
- ₂ ₂
- ₃ ₃

- ₁ → C3
- ₂ _____

Father Mother

- ₁ ₁
- ₂ ₂
- ₃ ₃

- ₁ → C3
- ₂ _____

Father Mother

- ₁ ₁
- ₂ ₂
- ₃ ₃

- ₁ → C3
- ₂ _____

ISCO		ISCO		ISCO		ISCO	

- ₁ → D1
- ₂ _____

- ₁ → D1
- ₂ _____

- ₁ → D1
- ₂ _____

- ₁ → D1
- ₂ _____

ISCO		ISCO		ISCO		ISCO	

SECTION D
ACCESS TO INFORMATION ON LEARNING OPPORTUNITIES AND GUIDANCE

Is the survey being carried out by PROXY?

Yes → (if yes, indicate name of who is providing information)

No →

Mode of Interview

Face-to-face, non electronic version

₁

Face-to-face, electronic version

₂

Telephone, non electronic version

₃

Telephone, electronic version

₄

D 1. During the last 12 months, have you looked for any information concerning learning possibilities for yourself (either on formal or non-formal education and training?)

₁ Yes

₂ No

D 2. During the last 12 months, have you received any information or advice/help on learning possibilities from institutions/organisations? Include all types of services and all modes of service received: face to face, mail, phone, posters, leaflet, etc.

Yes

No

Yes, I received free of charge information or advice/help on learning opportunities from institutions/organisations

₁
₂

Yes, I paid for information or advice/help on learning opportunities from institutions/organisations

₁
₂

D 3. Did you receive this free of charge information or advice/help on learning opportunities from any of the following institutions/organisations?

(Mark all that apply)

(You can select more than one answer)

Yes

No

From education or training institutions (school, college, university, VET centre, institution for adult learning, validation centre)

₁
₂

From employment services

₁
₂

From employer or employer organisations

₁
₂

From trade unions or work council

₁
₂

From other institutions/organisations providing free information or advice/help on learning opportunities (other than mentioned before)

₁
₂

D 4. What kind of free information or advice/ help concerning learning possibilities have you received?

(Interviewer instruction. Show card type of free information. You can select more than one answer!)

Yes

No

Information or advice/help on learning possibilities

₁
₂

Assessment of skills and competences through tests, skills audits or interviews

₁
₂

Information or advice/help on procedure for validation/recognition of skills, competences or prior learning

₁
₂

Other type of information or advice/help

₁
₂

SECTION D
ACCESS TO INFORMATION ON LEARNING OPPORTUNITIES AND GUIDANCE

<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂
<input type="checkbox"/> ₃	<input type="checkbox"/> ₃	<input type="checkbox"/> ₃	<input type="checkbox"/> ₃
<input type="checkbox"/> ₄	<input type="checkbox"/> ₄	<input type="checkbox"/> ₄	<input type="checkbox"/> ₄
<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₁ Yes
<input type="checkbox"/> ₂ No	<input type="checkbox"/> ₂ No	<input type="checkbox"/> ₂ No	<input type="checkbox"/> ₂ No
Yes	No	Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Yes	No	Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Yes	No	Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

- D 5. How did you receive this free information or advice/help on learning opportunities?
- (Mark all that apply)** Yes No
- Personal (face-to-face) interview ₁ ₂
- Communication with a person via the internet, phone, email or any other media ₁ ₂
- Interaction with a computer based application for information or advice/help (including online self-assessment tools) ₁ ₂
- No interaction, only information through dedicated material (books, posters, websites, leaflet, TV programme, etc.) ₁ ₂

SECTION D
PARTICIPATION IN EDUCATION AND TRAINING
Formal Education

Formal Education:

Education that is institutionalised, intentional and planned through public organisations and recognised private bodies and – in their totality – constitute the formal education system of a country. Formal education programmes are thus recognised as such by the relevant national education authorities or equivalent authorities, e.g. any other institution in cooperation with the national or sub-national education authorities.

Formal education consists mostly in initial education. Vocational education, special needs education and some parts of adult education are often recognised as being part of the formal education system. A learning activity is considered to be formal when upon its completion it leads to a learning achievement (qualification or award) recognised by National Authorities.

Main criteria used to identify formal education and training include:

- The 'hierarchy-level' criterion: Formal learning activity can be seen as a complex 'ladder' of education that requires the successful completion of one level-grade before proceeding to the next one.
- Admission requirements: A formal learning activity is subject to admission requirements which have to be fulfilled to have access to training. These usually relate to age and prior education attainment while such requirements may not exist for admission to a non-formal education and training programme.
- Registration requirements: A formal education is typically subject to registration, i.e. the requirement or set of requirements that need to be filled to record formally the enrolment to learning. On the other hand, there is no need for such requirement in non-formal education.
- Duration: Formal education programmes have a minimum duration of one semester/ 6 months (full-time equivalent).

- D 6. During the last 12 months, have you been a student or apprentice in formal education or training? ₁ Yes
- ₂ No → D26

- D 7. In how many formal education/classroom-based or training activities did you participate in during the last 12 months?
(Important all activities that happened during the last 12 months should be counted, not only the most recent ones.)
- | | |
|--|--|
| | |
|--|--|

- D 8. What is the name of the most recent formal education or training activity that you participated in during the last 12 months?
(Interviewer instruction type a name for formal education programs)
- _____
- _____

- D 9. What year and month did you start this formal training activity?
(Name last formal education programs) (write the year and month)
- | | | | | | |
|---|---|---|---|---|---|
| Y | Y | Y | Y | M | M |
| | | | | | |

Yes	No	Yes	No	Yes	No	Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

Formal Education:

Education that is institutionalised, intentional and planned through public organisations and recognised private bodies and – in their totality – constitute the formal education system of a country. Formal education programmes are thus recognised as such by the relevant national education authorities or equivalent authorities, e.g. any other institution in cooperation with the national or sub-national education authorities.

Formal education consists mostly in initial education. Vocational education, special needs education and some parts of adult education are often recognised as being part of the formal education system. A learning activity is considered to be formal when upon its completion it leads to a learning achievement (qualification or award) recognised by National Authorities.

Main criteria used to identify formal education and training include:

- The 'hierarchy-level' criterion: Formal learning activity can be seen as a complex 'ladder' of education that requires the successful completion of one level-grade before proceeding to the next one.
- Admission requirements: A formal learning activity is subject to admission requirements which have to be fulfilled to have access to training. These usually relate to age and prior education attainment while such requirements may not exist for admission to a non-formal education and training programme.
- Registration requirements: A formal education is typically subject to registration, i.e. the requirement or set of requirements that need to be filled to record formally the enrolment to learning. On the other hand, there is no need for such requirement in non-formal education.
- Duration: Formal education programmes have a minimum duration of one semester/ 6 months (full-time equivalent).

<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₁ Yes	<input type="checkbox"/> ₁ Yes
<input type="checkbox"/> ₂ No → D26	<input type="checkbox"/> ₂ No → D26	<input type="checkbox"/> ₂ No → D26	<input type="checkbox"/> ₂ No → D26
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Y Y Y Y M M	Y Y Y Y M M	Y Y Y Y M M	Y Y Y Y M M

D 10. What was the level of the most recent formal education or training activity?
(Level of education)

No schooling/pre-primary

 1

Schools for persons with special needs

 2

Primary

 3

Secondary (general)

 4

Secondary vocational

(e.g. Trade schools, apprentice school – Pre 2000) (includes trade schools at secondary level)

 5

Foundation courses at MCAST/ Introductory courses at MCAST which last one year or less at MCAST

 6

Post-secondary general (e.g. Junior College)

 7

Post-secondary vocational – Pre 2000 (excluding ITS)

 8

Post-secondary vocational (courses offered by MCAST/ITS) and private institutions of less than two (2) years

 9

Post-secondary vocational (courses offered by MCAST/ITS) and private institutions of two (2) years or more/ MCAST National/Advanced/Extended Diploma/ITS Diploma

 10

University undergraduate diploma or certificate of less than 2 years

 11

University undergraduate diploma or certificate of two (2) years or more/MCAST or ITS Higher National Diploma

 12

First degree or equivalent/MCAST Bachelor Degree of 4 years or less

 13

Post-graduate diploma/certificate

 14

Masters degree/ACCA/First degree of minimum 5 years

 15

Ph.D.

 16

Other level or qualifications (please specify)

 17

D 11. Have you completed this programme?
(name last formal education programmes)

No, I dropped out before the expected end

 1

No, it is still on-going

 2

Yes, I completed it

 3

D 12. What was the area of the most recent formal education or training activity?

1

2

3

4

5

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9

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17

1

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2

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11

12

13

14

15

16

17

1

2

3

D 13. What was the orientation of this most recent formal education or training?

General education

 ₁

Vocational education

 ₂

Do not know (specify institution)

D 14. Was the formal education or training mainly organised in the form of distance learning?

- Distance learning: learning that takes place via postal correspondence or electronic media, linking instructors or students who are not together in a classroom.
- For this there is interaction between the teacher and the student, although it doesn't happen immediately but with a delay.
- Respondents should consider that the learning was mainly organised as distance learning when this particular mode of learning was used at least 50% of the instruction time.

 ₁ Yes ₂ No → D16

D 15. Was this distance learning for the most recent education or training **mainly** organised as an online course? (Name last formal education programs)

- Doing an online course reflects learning courses distant from the location of education and training organisations or employer where courses can be attended in person (often but not necessarily done at home)
- Interaction with teachers, trainers and/or learning material is done via the internet. The use of e-learning software programmes can play a role. Online course is a form of instruction that involves a prescribed number of lessons or learning modules.
- The learning content of the course is focused around a specific main topic which is then structured in to a variety of multimedia elements such as presentations, interactive content, graphics, audio, and video to form the complete course.
- Respondents should consider that the learning was mainly organised online when this particular mode of learning was used at least 50% of the instruction time.

 ₁ Yes ₂ No

D 16. Have you used any online educational resources for this course (for instance audio-visual materials, online learning software, electronic textbooks, etc.)?

 ₁ Very frequently ₂ Frequently ₃ Sometimes ₄ Never

D 17. Did you interact with other people (e.g. teachers, learners) through educational websites/portals for this course?

 ₁ Yes ₂ No

₁

₂

₁ Yes

₂ No → D16

₁ Yes

₂ No

₁ Very frequently

₂ Frequently

₃ Sometimes

₄ Never

₁ Yes

₂ No

₁

₂

₁ Yes

₂ No → D16

₁ Yes

₂ No

₁ Very frequently

₂ Frequently

₃ Sometimes

₄ Never

₁ Yes

₂ No

₁

₂

₁ Yes

₂ No → D16

₁ Yes

₂ No

₁ Very frequently

₂ Frequently

₃ Sometimes

₄ Never

₁ Yes

₂ No

₁

₂

₁ Yes

₂ No → D16

₁ Yes

₂ No

₁ Very frequently

₂ Frequently

₃ Sometimes

₄ Never

₁ Yes

₂ No

D 18. What were the reasons for participating in this course? (Name last formal education programmes)	Yes	No
To do my job better	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
In order to improve my career prospects	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To be less likely to lose my job	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To increase the possibility of getting a job or a change of job	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To start my own business	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Participation was mandatory	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To gain knowledge/skills useful in everyday life	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To increase my knowledge/skills on a subject that interest me	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To obtain a certificate	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To meet new people/ have a good time	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Other reason		

D 19. Did this course take place during paid working hours (including paid leave or recuperation)?

IMPORTANT

- This question refers to the degree where the activity takes place during paid working hours meaning that the working hours are used to attend the activity instead of working.
- It also includes the case where a number of working hours are being replaced by the learning activity even if the activity itself takes place outside normal working time of the respondent.
- The answer should only reflect the participation in the course itself and not for homework.
- Self-employed should be treated the same as employees.
- Unpaid family workers will be coded as 'outside paid hours', since there are no paid working hours.
- If at the time of attending formal education, the respondent does not have a job, then the answer should reflect the longest period of the course (during within the reference period).

Only during paid working hours	<input type="checkbox"/> ₁
Most of the time (50% or more) during paid working hours	<input type="checkbox"/> ₂
Mostly outside paid working hours	<input type="checkbox"/> ₃
Only outside paid working hours	<input type="checkbox"/> ₄
Not working at that time	<input type="checkbox"/> ₅

D 20. How many hours of instructions did you receive for the most recent formal education or training activity during the past 12 months?
(Write total number of classes/ (Number of hours per week *number of weeks)

Number of weeks during the past 12 months	No. of weeks	
The number of teaching hours per week	No. of hours	
The total number of hours (no. of weeks multiplied by no. of hours)	Total	

multiplied

Yes	No
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

Yes	No
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

Yes	No
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

Yes	No
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

 1
 2
 3
 4
 5

 1
 2
 3
 4
 5

 1
 2
 3
 4
 5

 1
 2
 3
 4
 5

No. of weeks

No. of hours

Total

No. of weeks

No. of hours

Total

No. of weeks

No. of hours

Total

No. of weeks

No. of hours

Total

D 21. Which one of the following cases best describes the payment for tuition, registration, exam fees, and expenses for books or technical study means, regarding your studies for the most recent formal education or training activity?

- This question mainly refers to the last 12 months. But payments made for the same course during the previous months, should be considered as well, as they affect the training course received by the respondent during the reference period.
- 'Somebody else' can be a relative, friend, or even the employer
- If the respondent was employed by a household member who has paid the cost of tuition, consider that tuition as paid by employer.
- If the interviewee was self-employed and tuition costs were financed from his/her own company, consider these costs to be paid by the employer.

- Fully paid by yourself ₁ → D23
- Partly paid by yourself and partly paid by somebody else ₂
- Completely paid by someone else ₃
- Free activity ₄ → D23
- You do not know ₅

D 22. Which one of the entities paid in-part or in-full for tuition, registration, exam fees, and expenses for books or technical study means, regarding your studies for the most recent formal education or training activity?

- Doing an online course reflects learning courses distant from the location of education and training organisations or employer where courses can be attended in person (often but not necessarily done at home)
- Interaction with teachers, trainers and/or learning material is done via the internet. The use of e-learning software programmes can play a role. Online course is a form of instruction that involves a prescribed number of lessons or learning modules.
- The learning content of the course is focused around a specific main topic which is then structured in to a variety of multimedia elements such as presentations, interactive content, graphics, audio, and video to form the complete course.
- Respondents should consider that the learning was mainly organised online when this particular mode of learning was used at least 50% of the instruction time.

(Mark all that apply)

- | | Yes | No |
|--------------------------------------------|---------------------------------------|---------------------------------------|
| The employer or prospective employer | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| Public employment services (ETC, JobsPLUS) | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| Other public institutions | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| A household member or relative | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| None of the above | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |

D 23. How much are you currently using the skills or knowledge that you acquired from the most recent formal education or training activity?
(Name last formal education programs)

- A lot ₁
- A fair amount ₂
- Very little ₃
- Not at all ₄

₁ → D23
₂
₃
₄ → D23
₅

₁ → D23
₂
₃
₄ → D23
₅

₁ → D23
₂
₃
₄ → D23
₅

₁ → D23
₂
₃
₄ → D23
₅

(Mark all that apply)

Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

₁
₂
₃
₄

(Mark all that apply)

Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

₁
₂
₃
₄

(Mark all that apply)

Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

₁
₂
₃
₄

(Mark all that apply)

Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

₁
₂
₃
₄

D 24. How much are you expecting to use the skills or knowledge that you acquired from this course?
(Name last formal education programs)

- A lot 1
- A fair amount 2
- Very little 3
- Not at all 4

D 25. Have the new skills/knowledge acquired through the most recent formal education or training activity helped you in any of the following ways?

- | | Yes | No |
|---------------------------------------------------------------------------------------------|----------------------------|----------------------------|
| Getting a new job | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| Getting a higher salary | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| Promotion in the job | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| New tasks | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| Better performance in present job | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| Personal-related reasons (meet other people, refresh your skills on general subjects, etc.) | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| No outcome yet | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |

- 1
- 2
- 3
- 4

Yes

No

- 1
- 1
- 1
- 1
- 1

- 1
- 1

- 2
- 2
- 2
- 2
- 2

- 2
- 2

- 1
- 2
- 3
- 4

Yes

No

- 1
- 1
- 1
- 1
- 1

- 1
- 1

- 2
- 2
- 2
- 2
- 2

- 2
- 2

- 1
- 2
- 3
- 4

Yes

No

- 1
- 1
- 1
- 1
- 1

- 1
- 1

- 2
- 2
- 2
- 2
- 2

- 2
- 2

- 1
- 2
- 3
- 4

Yes

No

- 1
- 1
- 1
- 1
- 1

- 1
- 1

- 2
- 2
- 2
- 2
- 2

- 2
- 2

NON-FORMAL EDUCATION

Any organised and sustained educational activities that do not correspond exactly to the definition of formal education.

Non-formal education may therefore take place both within and outside educational institutions, and cater for persons of all ages. It may cover educational programmes to impart adult literacy, basic education for out of school children, life-skills, work-skills, and general culture. Non formal education programmes do not necessarily follow the 'ladder' system and may have a differing duration.

Non-formal education:

- Seminars: an occasion when a teacher or expert and a group of people meet to study and discuss something.
- Guided-on-the-job training, which means planned periods of education, instruction or training directly at the workplace, organised by the employer with the aid of a designated teacher/instructor.
- Workshops: an educational seminar or series of meetings emphasizing interaction and exchange of information among a usually small number of participants, and are usually engaged in intensive study or work in a creative or practical field.
- Private lessons: planned series of learning experience offered by experts or others who act as experts, selected to deepen knowledge or skills, to learn more intensively, undertaken by one or very few learners.

	Yes	No	If so, how many?
D 26. In the last 12 months, have you participated in any of the following activities with the intention of improving your knowledge and skills in any field, including hobbies?			
Courses in the workplace or in your free time (e.g. A language course, IT course, driving, management, cooking, gardening or painting)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	
Workshop or seminars in the workplace or in your free time (e.g. workshop on data processing, motivational seminars, thematic days, motivational workshops, a seminar on business information, a seminar on health).	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	
Guided-on-the-job training, which means planned periods of education, instruction or training directly at the workplace, organised by the employer with the aid of a designated teacher/instructor (e.g. training on new working machine or learning of the new software from one or two workers).	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	
Private lessons with the aid of a teacher or a tutor for whom this is a paid activity (e.g. private lessons in mathematics, or piano lessons). <u>Lessons should be included if it involves a professional tutor but they should be excluded if taught from a friend, family member or colleague.</u>	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	

If all answers for D26 = 2 (NO), → E1

If D6 and all D26 = 2 (NO), → E3

D 27. Please include ALL courses, workshops or seminars, practical training in the workplace or in your free time, as well as paid private lessons with the help of a teacher or instructor outside the non formal education system in which you have participated in the last 12 months. If you have attended more than 7 activities, then indicate only the last 7 activities which you participated in? (List all the activities)

- 1 - _____
- 2 - _____
- 3 - _____
- 4 - _____
- 5 - _____
- 6 - _____
- 7 - _____

Yes	No	If so, how many?	Yes	No	If so, how many?	Yes	No	If so, how many?	Yes	No	If so, how many?
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	
If all answers for D26 = 2 (NO), → E1 If D6 and all D26 = 2 (NO), → E3											

D 28. What kind of activities of non-formal education did you take part in?
(You can accept more than one answer)

	Courses	Workshops and seminars	Guided-on-the-job training	Private lessons
Activity 1 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Activity 2 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Activity 3 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Activity 4 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Activity 5 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Activity 6 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Activity 7 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

D 29. Were the non-formal learning activities mentioned above mainly job-related?
(Do not ask if selected activity is 'practical training in the workplace', but an answer 1)

An activity is regarded as job-related if it serves to obtain knowledge and/or learn new skills for a current or a future job, increase earnings, improve job-and/or carrier opportunities in a current or another field and generally improve his/her opportunities for advancement and promotion.

It is non job-related (personal/social) if the respondent takes part in this activity in order to develop competencies required for personal, community, domestic, social or recreational purposes.

(Give an answer for each activity)

	Mostly it was related to job	Mainly personal/ non-job related reasons
Activity 1 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2
Activity 2 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2
Activity 3 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2
Activity 4 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2
Activity 5 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2
Activity 6 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2
Activity 7 _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2

Courses	Workshops and seminars	Guided-on-the-job training	Private lessons
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

Courses	Workshops and seminars	Guided-on-the-job training	Private lessons
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

Courses	Workshops and seminars	Guided-on-the-job training	Private lessons
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

Courses	Workshops and seminars	Guided-on-the-job training	Private lessons
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

(Give an answer for each activity)

Mostly it was related to job	Mainly personal/non-job related reasons
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

(Give an answer for each activity)

Mostly it was related to job	Mainly personal/non-job related reasons
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

(Give an answer for each activity)

Mostly it was related to job	Mainly personal/non-job related reasons
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

(Give an answer for each activity)

Mostly it was related to job	Mainly personal/non-job related reasons
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

D 30. Did the non-formal activity take place mostly or fully during paid working hours (including paid leave or recuperation)?

- This question refers to the degree where the activity takes place during paid working hours meaning that the working hours are used to attend the activity instead of working.
- It also includes the case where a number of working hours are being replaced by the learning activity even if the activity itself takes place outside normal working time of the respondent.
- The answer should only reflect the participation in the course itself and not for homework.
- Self-employed should be treated the same as employees.
- Unpaid family workers will be coded as 'outside paid hours', since there are no paid working hours.
- If at the time of attending formal education, the respondent does not have a job, then the answer should reflect the longest period of the course (during within the reference period).
- In case when at least 50% of instruction hours of the activity took place during paid working hours.

Do not ask if selected activity is 'practical training in the workplace' but an answer 1.

Yes
(more than
50%)

No,
(including if
the person
did not work
at that time)

Activity 1 _____

₁

₂

Activity 2 _____

₁

₂

Activity 3 _____

₁

₂

Activity 4 _____

₁

₂

Activity 5 _____

₁

₂

Activity 6 _____

₁

₂

Activity 7 _____

₁

₂

D 31. Did your employer pay partially or fully the non-formal learning activities?

You can accept more than one answer

- In case the respondent is self-employed and training is funded by his/her business than the answer should be yes.
- In case a respondent is self-employed and works for one company only, and he/she participated in a course organised and partially or fully paid by the latter company then variable the respondent should select 'Paid by the employer or prospective employer' should be selected.

Yes

No
(including if
the person
did not work
at that time)

Activity 1 _____

₁

₂

Activity 2 _____

₁

₂

Activity 3 _____

₁

₂

Activity 4 _____

₁

₂

Activity 5 _____

₁

₂

Activity 6 _____

₁

₂

Activity 7 _____

₁

₂

Yes (more than 50%)	No, (including if the person did not work at that time)
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

Yes (more than 50%)	No, (including if the person did not work at that time)
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

Yes (more than 50%)	No, (including if the person did not work at that time)
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

Yes (more than 50%)	No, (including if the person did not work at that time)
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

Yes	No, (including if the person did not work at that time)
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

Yes	No, (including if the person did not work at that time)
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

Yes	No, (including if the person did not work at that time)
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

Yes	No, (including if the person did not work at that time)
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2

PARTICIPATION IN EDUCATION AND TRAINING

Non-formal education

Detailed information about two randomly selected activities

- After listing all the activities the respondent has participated in during the last 12 months (a maximum of 7), 2 activities should be randomly selected for further interviewing among them (see 'Survey Guidelines' in AES manual for details on the random selection).

D 32. Random events:
Should this part be filled manually, write the code list of the two selected activities from D27.

Activity A		
Activity B		

D 33. Specify the type of the first and/or other selected activities of non-formal learning:

You can select more than one answer

	Activity A	Activity B
Courses	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
Workshops and seminars	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂
Guided-on-the-job	<input type="checkbox"/> ₃	<input type="checkbox"/> ₃
Private lessons	<input type="checkbox"/> ₄	<input type="checkbox"/> ₄

D 34. Indicate the area of education of the listed non-formal learning activities?

Activity 1	
Activity 2	

D 35. Were the selected non-formal learning activities mainly organised in the form of distance learning?

You can select more than one answer.

	Activity A	Activity B
Yes	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
No	<input type="checkbox"/> ₂ → D37	<input type="checkbox"/> ₂ → D37

D 36. Was this distance learning mainly organised as an online course?
Important the term 'mainly' applies to distance learning for a term of at least 50% of classes.

You can select more than one answer.

	Activity A	Activity B
Yes	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
No	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂

D 37. Have you used online educational resources for these non-formal learning activities?

You can select more than one answer.

	Activity A	Activity B
Yes	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
No	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂

Activity A	Activity B	Activity A	Activity B	Activity A	Activity B	Activity A	Activity B
<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂
<input type="checkbox"/> ₃	<input type="checkbox"/> ₃	<input type="checkbox"/> ₃	<input type="checkbox"/> ₃	<input type="checkbox"/> ₃	<input type="checkbox"/> ₃	<input type="checkbox"/> ₃	<input type="checkbox"/> ₃
<input type="checkbox"/> ₄	<input type="checkbox"/> ₄	<input type="checkbox"/> ₄	<input type="checkbox"/> ₄	<input type="checkbox"/> ₄	<input type="checkbox"/> ₄	<input type="checkbox"/> ₄	<input type="checkbox"/> ₄

Activity A	Activity B	Activity A	Activity B	Activity A	Activity B	Activity A	Activity B
<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
<input type="checkbox"/> ₂ → D37	<input type="checkbox"/> ₂ → D37	<input type="checkbox"/> ₂ → D37	<input type="checkbox"/> ₂ → D37	<input type="checkbox"/> ₂ → D37	<input type="checkbox"/> ₂ → D37	<input type="checkbox"/> ₂ → D37	<input type="checkbox"/> ₂ → D37

Activity A	Activity B	Activity A	Activity B	Activity A	Activity B	Activity A	Activity B
<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂

Activity A	Activity B	Activity A	Activity B	Activity A	Activity B	Activity A	Activity B
<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂

D 38. Did you interact with other people (e.g. teachers, learners) through educational websites/portals for these non-formal learning activities?

You can select more than one answer.

	Activity A	Activity B
Yes	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
No	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂

D 39. What were the reasons for participating in these non-formal learning activities? (mark all that apply)

Multiple answers for every action.

	Activity A		Activity B	
	Yes	No	Yes	No
To do my job better	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To improve my career prospects	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To be less likely to lose my job	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To increase my possibilities of getting a job, or changing a job/profession	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To start my own business	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Due to organizational and/or technological changes in the workplace	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Required by the employer or by law	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To gain knowledge/skills useful in everyday life	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To broaden my knowledge/skills on the subject that interests me	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To obtain a certificate	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To meet new people/for fun	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
For health reasons	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
To do voluntary work better	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Other (please specify)	_____		_____	

D 40. How many instruction hours have you received during the past 12 months, on these two non-formal learning activities?

Write the total number of teaching hours for each activity.

(Number of hours per week * number of weeks)

	Activity A	Activity B
Number of weeks during the past 12 months	No. of weeks <input type="text"/>	No. of weeks <input type="text"/>
The number of teaching hours per week	No. of hours <input type="text"/>	No. of hours <input type="text"/>
The total number of hours (no. of weeks multiplied by no. of hours)	Total <input type="text"/>	Total <input type="text"/>

multiplied

Activity A	Activity B
<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
<input type="checkbox"/> ₂	<input type="checkbox"/> ₂

Activity A	Activity B
<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
<input type="checkbox"/> ₂	<input type="checkbox"/> ₂

Activity A	Activity B
<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
<input type="checkbox"/> ₂	<input type="checkbox"/> ₂

Activity A	Activity B
<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
<input type="checkbox"/> ₂	<input type="checkbox"/> ₂

Activity A		Activity B	
Yes	No	Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

Activity A		Activity B	
Yes	No	Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

Activity A		Activity B	
Yes	No	Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

Activity A		Activity B	
Yes	No	Yes	No
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

Activity A		Activity B	
No. of weeks		No. of weeks	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
No. of hours		No. of hours	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		Total	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Activity A		Activity B	
No. of weeks		No. of weeks	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
No. of hours		No. of hours	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		Total	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Activity A		Activity B	
No. of weeks		No. of weeks	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
No. of hours		No. of hours	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		Total	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Activity A		Activity B	
No. of weeks		No. of weeks	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
No. of hours		No. of hours	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total		Total	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

D 41. Who was the provider of these non-formal learning activities?

You can select more than one answer.

	Activity A	Activity B
Formal education institution	<input type="checkbox"/> 1	<input type="checkbox"/> 1
Non formal education and training institutions	<input type="checkbox"/> 2	<input type="checkbox"/> 2
Commercial institution where education and training is not the main activity (e.g. equipment suppliers)	<input type="checkbox"/> 3	<input type="checkbox"/> 3
Employer	<input type="checkbox"/> 4	<input type="checkbox"/> 4
Employers' organisations, Chamber of Commerce	<input type="checkbox"/> 5	<input type="checkbox"/> 5
Trade Unions	<input type="checkbox"/> 6	<input type="checkbox"/> 6
Non-profit associations, e.g. cultural society, political party	<input type="checkbox"/> 7	<input type="checkbox"/> 7
Individual (e.g. students giving private lessons)	<input type="checkbox"/> 8	<input type="checkbox"/> 8
Non-commercial institutions where education and training is not the main activity (e.g. libraries, museums, ministers)	<input type="checkbox"/> 9	<input type="checkbox"/> 9
Other	<input type="checkbox"/> 10	<input type="checkbox"/> 10

D 42. Does the non-formal learning activities lead to a certificate? If yes, was this certificate required by the employer or professional body for the execution of current or planned activity as employer or employee? (mark all that apply)

To answer for each activity

	Activity A	Activity B
Yes, certificate is required by the employer or a professional body or by law	<input type="checkbox"/> 1	<input type="checkbox"/> 1
Yes, certificate not required by the employer or a professional body or by law	<input type="checkbox"/> 2	<input type="checkbox"/> 2
No (acknowledgement of attendance/participation only)	<input type="checkbox"/> 3	<input type="checkbox"/> 3

D 43. Which one of the following cases best describes the payment for tuition, registration, exam fees, and expenses for books or technical study means, regarding your studies for these non-formal learning activities?

- If respondent is employed with a household member who has paid the cost of tuition, consider the tuition as paid by somebody else.
- If the interviewee was self-employed and tuition costs were financed from his/her own company, consider that the costs were paid by somebody else.

	Activity A	Activity B
Fully paid by yourself	<input type="checkbox"/> 1	<input type="checkbox"/> 1
Party paid your yourself and partly paid by somebody else	<input type="checkbox"/> 2	<input type="checkbox"/> 2
Fully paid by somebody else	<input type="checkbox"/> 3	<input type="checkbox"/> 3
Free activity	<input type="checkbox"/> 4	<input type="checkbox"/> 4
You don't know	<input type="checkbox"/> 5	<input type="checkbox"/> 5

}
→ D46

}
→ D46

Activity A

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Activity B

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Activity A

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Activity B

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Activity A

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Activity B

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Activity A

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Activity B

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Activity A

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Activity B

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Activity A

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Activity B

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Activity A

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Activity B

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Activity A

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Activity B

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Activity A

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→ D46

Activity B

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}
→ D46

Activity A

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→ D46

Activity B

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→ D46

Activity A

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→ D46

Activity B

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→ D46

Activity A

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→ D46

Activity B

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→ D46

D 44. Which one of the following entities were paid in-part or in-full for tuition, registration, exam fees, and expenses for books or technical study means, regarding you studies for the following non-formal learning activities?
 Mark all that apply

	Activity A		Activity B	
	Yes	No	Yes	No
Employer or prospective employer	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Public employment services (ETC/JobsPLUS)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Other public institutions	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
A household member or relative	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
No answer	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Not applicable	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
None of the above	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

D 45. How much did you personally (or any member of your household ore relative) pay for tuition, registration, exam fees, and expenses for books or technical study means, regarding your studies for the non-formal learning activities?
 Enter the amount for each activity

	Activity A €	Activity B €
	<input type="text"/>	<input type="text"/>
No answer	<input type="checkbox"/> ₉₉	<input type="checkbox"/> ₉₉
Not applicable	<input type="checkbox"/> ₉₈	<input type="checkbox"/> ₉₈

D 46. How much are you currently using the skills or knowledge that you acquired from these non-formal learning activities?
 Give an answer for each activity

	Activity A	Activity B
A lot	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
A fair amount	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂
Very little	<input type="checkbox"/> ₃	<input type="checkbox"/> ₃
Not at all	<input type="checkbox"/> ₄	<input type="checkbox"/> ₄
No answer	<input type="checkbox"/> ₉₉	<input type="checkbox"/> ₉₉
Not applicable	<input type="checkbox"/> ₉₈	<input type="checkbox"/> ₉₈

D 47. According to your expectations, how often do you think you will use the skills and knowledge acquired from these non-formal activities?
 To answer for each activity

	Activity A	Activity B
A lot	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
A fair amount	<input type="checkbox"/> ₂	<input type="checkbox"/> ₂
Very little	<input type="checkbox"/> ₃	<input type="checkbox"/> ₃
Not at all	<input type="checkbox"/> ₄	<input type="checkbox"/> ₄
No answer	<input type="checkbox"/> ₉₉	<input type="checkbox"/> ₉₉
Not applicable	<input type="checkbox"/> ₉₈	<input type="checkbox"/> ₉₈

Activity A		Activity B		Activity A		Activity B		Activity A		Activity B		Activity A		Activity B	
Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2

Activity A €	Activity B €	Activity A €	Activity B €	Activity A €	Activity B €	Activity A €	Activity B €
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99
<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98

Activity A	Activity B	Activity A	Activity B	Activity A	Activity B	Activity A	Activity B
<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3
<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99
<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98

Activity A	Activity B	Activity A	Activity B	Activity A	Activity B	Activity A	Activity B
<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3
<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99
<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98

D 48. Have the new skills/knowledge acquired through these non-formal learning activities helped you in any of the following ways?

Mark all that apply
Multiple answers for every action

	Activity A		Activity B	
	Yes	No	Yes	No
Getting a (new) job	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Higher salary/wages	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Promotion in the job	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
News tasks	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Better performance in present job	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Personal-related reasons (meet other people, refresh your skills on general subjects, etc.)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
No outcome yet	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
No answer	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Not applicable	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
None of the above	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

Activity A		Activity B		Activity A		Activity B		Activity A		Activity B		Activity A		Activity B	
Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
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SECTION E

DIFFICULTIES RELATED TO PARTICIPATION IN EDUCATION AND TRAINING

- E 1. Previously you mentioned that during the last 12 months, you participated in formal and/or non-formal education and training. Would you have liked to participate even more in such activities?
Ask question E5 only if respondents in E1 wanted to participate even more IN EDUCATION AND TRAINING (E1 = 1)
- Yes (group 2) ₁ → E5
- No (group 1) ₂
- No answer ₉₉
- Not applicable ₉₈
- E 2. You answered negatively to the previous question. Do you think that there was no need for additional education and training?
- Yes ₁ → E5
- No ₂ → E3
- No answer ₉₉
- Not applicable ₉₈
- E 3. Previously, you mentioned that in the last 12 months, you did not take part in any formal nor non-formal activities. Would you have liked to participate even more in such activities?
Ask question E5 only if respondents in E3 wanted to PARTICIAPTE IN EDUCATION AND TRAINING (E3 = 1)
- Yes (group 4) ₁ → E5
- No (group 3) ₂
- No answer ₉₉
- Not applicable (respondents that did not participate in formal and non-formal activities) ₉₈
- E 4. You answered negatively to the previous question. Do you think that there was no need for additional education and training?
- Yes ₁ → F1
- No ₂
- No answer ₉₉
- Not applicable ₉₈

SECTION E

DIFFICULTIES RELATED TO PARTICIPATION IN EDUCATION AND TRAINING

₁ → E5
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E 5. Which of the following obstacles prevented you from participating in education and training?

(Mark all that apply);
You can accept several answers

	Yes	No
1. Prerequisites	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
2. Costs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
3. Lack of employer support or lack of support from public services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
4. Overlapping schedules with your obligations	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
5. Distance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
6. No access to a computer and/or the Internet	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
7. Family responsibilities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
8. Health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
9. Age	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
10. Other personal reasons	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
11. No suitable education or training activity	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
12. Negative previous learning experiences	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
13. Other		
<hr/>		
14. Not applicable (E1=2 and E3=2 and E2=2 and E4=2)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

E 6. Among the obstacles that you mentioned previously, which one was the most important?

No answer	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Not applicable	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

Yes

 1

No

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 1 2 1 2 1 2

Yes

 1

No

 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2

 1 2 1 2 1 2

Yes

 1

No

 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2

 1 2 1 2 1 2

Yes

 1

No

 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2

 1 2 1 2 1 2

**SECTION F
INFORMAL LEARNING**

F 1. During the last 12 months, apart from the activities mentioned earlier, have you deliberately tried to learn anything at work or during your free time to improve your knowledge or skills through any of the following means?

PARTICIPATION IN INFORMAL LEARNING	Yes	No
By learning from a family member, a friend or a colleague	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
By learning from printed materials (books, professional magazines, journals, etc.)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Learning by using computers (online or offline)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Learning from television/radio/video	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Learning by guided tours in museums, historical or natural or industrial sites	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Learning by visiting learning centers (including libraries)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
No answer	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
Not applicable	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

**SECTION F
INFORMAL LEARNING**

Yes

 1 1 1 1 1 1 1 1

No

 2 2 2 2 2 2 2 2

Yes

 1 1 1 1 1 1 1 1

No

 2 2 2 2 2 2 2 2

Yes

 1 1 1 1 1 1 1 1

No

 2 2 2 2 2 2 2 2

Yes

 1 1 1 1 1 1 1 1

No

 2 2 2 2 2 2 2 2

**SECTION G
KNOWLEDGE OF LANGUAGE**

G 1. What is your mother tongue?

- Language 1 (mother tongue) refers to the first language learned at home in childhood and still understood by the individual at the time of the survey.
- In bilingual homes the language used for in-house communication would be the mother tongue. If two languages (e.g. Maltese and English) were used, this would mean that person has more than one mother tongue.
- If the respondent has more than one mother tongue, then the respondent should identify as language 1, the language he/she uses and understands better at the time of the survey.
- (000 if does not)

Language 1

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Language 2

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G 2. How many foreign languages can you use, other than your mother tongue?

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If 0 → H3

No answer

 99

G 3. List all the languages you can use except your mother tongue(s) (ranked by skills level in language)?
(000 if does not)

Language 1

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Language 2

--	--	--

Language 3

--	--	--

Language 4

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Language 5

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Language 6

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Language 7

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SECTION G
KNOWLEDGE OF LANGUAGE

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If 0 → H3

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If 0 → H3

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If 0 → H3

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If 0 → H3

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G 4. Which of the languages you mentioned before (excluding your mother tongue) do you know best?

Language 1

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No answer

₉₉

Not applicable

₉₈

G 5. Which of the following cases best describes your knowledge about the first best and second best known languages you mentioned before (excluding your mother tongue)?

Language 1 Language 2

I only understand and can use a few words and phrases

₀
₀

I can understand and use the most common everyday expressions. I use the language in relation to familiar things and situations

₁
₁

I can understand the essential of clear language and produce simple text. I can describe experiences and events and communicate fairly fluently.

₂
₂

I can understand a wide range of demanding texts and use the language flexibly. I master the language almost completely.

₃
₃

No answer

₉₈
₉₈

Not applicable

₉₉
₉₉

Person 2	Person 3	Person 4	Person 5

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₉₉
₉₈

Language 1

Language 2

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₀
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₉₉

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₉₉
₉₈

Language 1

Language 2

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₉₉
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Language 1

Language 2

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Language 1

Language 2

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INCOME OF THE HOUSEHOLD (Part 2)

H 3. What is the total net MONTHLY income of your HOUSEHOLD? If you do not know the exact amount, kindly write an estimate.

- This corresponds to the net monthly income of all people who are currently members of the household at the date of the interview as well as the income received by the household as a whole are to be taken into account. It comprises all cash income from employment, interests and dividends, social benefits, regular cash transfers received from other households and other cash income less regular cash transfers paid by the households, taxes and social insurance contributions.
- Income bands to be used only if respondent cannot provide exact values.

Write total amount €

H 4. If the respondent is not able to provide an exact figure, then select one of the following income brackets.

€3,125 or more ₁

€2,160 or more but less than €3,125 ₂

€1,500 or more but less than €2,160 ₃

€950 or more but less than €1,500 ₄

Less than €950 ₅