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SCOTTISH STATUTORY INSTRUMENTS

2010 No. 215

CENSUS

The Census (Scotland) Amendment Regulations 2010

Made - - - - 2nd June 2010

Laid before the Scottish Parliament 3rd June 2010

Coming into force - - 25th June 2010

The Scottish Ministers make the following Regulations in exercise of the powers conferred by section 3(1) of the Census Act 1920(a) and all other powers enabling them to do so.

Citation and commencement

1. These Regulations may be cited as the Census (Scotland) Amendment Regulations 2010 and come into force on 25th June 2010.

Amendment of the Census (Scotland) Regulations 2010

- **2.**—(1) The Census (Scotland) Regulations 2010(b) are amended in accordance with paragraphs (2) to (6).
 - (2) In regulation 2 (interpretation)—
 - (a) after the definition of "Communal Establishment Enumeration Record Book" insert—
 - ""Communal Establishment Form" means the Communal Establishment Questionnaire (CE) set out in Schedule 2;
 - "Communal Establishment Individual Form" means the Individual Questionnaire (CI) set out in Schedule 2;":
 - (b) after the definition of "household" insert—
 - ""Household Form" means the Household Questionnaire (HO) set out in Schedule 2;";
 - (c) after the definition of "householder" insert—
 - ""Individual Form" means the Individual Questionnaire (HI) set out in Schedule 2;";
 - (d) omit paragraph (2); and
 - (e) paragraph (1) becomes regulation 2.

⁽a) 1920 c. 41. Section 3(1) was amended by the Statute Law (Repeals) Act 1973 (c.50), Schedule 1, Part 16, paragraph 1 and the Statistics and Registration Service Act 2007 (c.18), Schedule 1, paragraph 3(2) and (3). By virtue of section 9(3) of the Census Act 1920, (which was inserted by paragraph 11(b) of Schedule 2 to the Scotland Act 1998 (Consequential Modifications) (No. 2) Order 1999 (S.I. 1999/1820)), the Scottish Parliament is substituted for references in that Act to Parliament or either House of Parliament.

⁽b) S.S.I. 2010/211.

- (3) In regulation 10(1) (issue of forms within communal establishments) omit ", where requested,".
 - (4) In regulation 15(4)(c) (follow-up action) for "reply-paid envelope" substitute "envelope".
 - (5) In column (2) of Schedule 1 (title of form of return)—
 - (a) for entry (a) substitute "Household Questionnaire (HO)";
 - (b) for entry (b) substitute "Individual Questionnaire (CI)";
 - (c) for entry (c) substitute "Individual Questionnaire (HI)"; and
 - (d) for entry (d) substitute "Communal Establishment Questionnaire (CE)".
- (6) For the last form set out in Schedule 2 (Individual Questionnaire (HI)) substitute the form set out in the Schedule to these Regulations.

JIM MATHER
Authorised to sign by the Scottish Ministers

St Andrew's House, Edinburgh 2nd June 2010

Individual Household Form of Return for 2011 Census

Scotland's Census 2011 Shaping our future Official CD ED Line Number House rurne / Durnbur Street / Town / City	27 March 2011 This section to be filled in by the Census Enumerator
Why the census matters The census is the official count of every person and household in Scotland. It is held every 10 years and helps to plan our future public services. Please fill in this questionnaire on, or around, Sunday 27 March. It shouldn't take long. You have a legal duty to fill in this questionnaire. If you don't, or if you supply false information, you may be fined up to £1,000. Your personal information is protected by law and we will keep it confidential for 100 years. Thank you for helping to shape Scotland's future. Ouncan Macniven	Please fill in this questionnaire on, or around, 27 March 2011. Post it back using the pre-paid envelope provided. Start here Please make sure you are listed as a household member either on: • a Household Questionnaire - at question H3 on page 4 or • a Continuation Questionnaire - at question C1 on page 1 Q1 Copy your person number, as given in H3 or C1, here:
Registrar General for Scotland Need help? www.scotlandscensus.gov.uk Helpline 0300 123 1702 Textphone 18001 0300 123 1703	Declaration I have filled in this questionnaire fully and accurately, as far as I know. Signature



Important guidance - before you start

What you have to do

- ♦ Please check that the household address recorded on page 1 of this questionnaire is correct. If it is not correct, please contact the Helpline on 0300 123 1702.
- Make sure you are listed as a household member at either:
 - question H3 on page 4 of a Household Questionnaire; or
 - question c1 on page 1 of a Continuation Questionnaire.
- ♦ Copy your person number, from H3 or C1, to Q1 on page 1 of this questionnaire.
- Fill in questions 1 to 38 on pages 3 to 6 of this questionnaire.
- Sign the declaration on page 1 of this questionnaire and post it back using the pre-paid envelope provided.

How to fill in this questionnaire

This questionnaire will be scanned by a computer. To make sure we record your answers correctly, follow the instructions below.

Please:

- · use black or blue ink
- tick your answers within the box like this:
- print your answers, in English, within the box like this:
 SMITH
 Use capital letters - one per box
- correct any mistakes like this:

 or SMIITH
- continue on to the next line (if possible) like this, if a word will not fit on to one line:

 130 LADYWELL CRES

DO NOT draw a line through questions or pages. The computer may mistake this for an answer.



Indi	vidual questions		
1	What is your name? First name Last name What is your sex?	9	Do you look after, or give any help or support to family members, friends, neighbours or others because of either: • long-term physical / mental ill-health / disability; or • problems related to old age? • Do not count anything you do as part of your paid employment. No Yes, 1 - 19 hours a week Yes, 20 - 34 hours a week Yes, 35 - 49 hours a week Yes, 50 or more hours a week One year ago, what was your usual address?
	Male Female		
3	What is your date of birth? Day Month Year On the 27 March 2011, what is your legal marital or	10	
	Same-sex civil partnership status? Never married and never registered a same-sex civil partnership Married In a registered same-sex civil partnership Separated, but still legally married Separated, but still legally in a same-sex civil partnership Divorced Formerly in a same-sex civil partnership which is now legally dissolved Widowed Surviving partner from a same-sex civil partnership		If you had no usual address one year ago, state the address where you were staying. The address on the front of this questionnaire Student term-time / boarding school address in the UK, please write in below Another address in the UK, please write in
5	Are you a schoolchild or student in full-time education? Yes No → Go to 7		Postcode Outside the UK, please write in country
7	During term-time, do you live: at the address on the front of this questionnaire? at another address? → Go to 38 What is your country of birth? Scotland → Go to 9 England → Go to 9 Wales → Go to 9 Northern Ireland → Go to 9 Republic of Ireland Elsewhere, please write in the current name of the country	11	What address do you travel to for your main job or course of study (including school)? ◆ Answer for the place where you spend the most time. ◆ If you report to a depot, please write in the depot address. Not currently working or studying → Go to 13 Work or study mainly at, or from, home → Go to 13 No fixed place Work on an offshore installation - please use the address panel below to write in where you travel offshore from, for example "ABERDEEN HARBOUR" The address below, please write in
8	If you were not born in the United Kingdom, when did you most recently arrive to live here? Do not count short visits away from the UK. Month Year		



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Individual questions continued			
12	How do you usually travel to your main place of work or study (including school)?	15	What is your ethnic group?
	work or study (including school)?Tick one box only.		♦ Choose ONE section from A to F, then tick ONE box
	Tick the box for the longest part, by distance, of your usual journey to work or study.	А	which best describes your ethnic group or background. White
	Driving a car or van		Scottish
	Passenger in a car or van		Other British
	On foot		Irish
	Bus, minibus or coach		Gypsy / Traveller
	Train		Polish
	Underground, subway, metro, light rail or tram		Other white ethnic group, please write in
	Taxi		
	Bicycle		
	Motorcycle, scooter or moped	В	Mixed or multiple ethnic groups
	Other		Any mixed or multiple ethnic groups, please write in
13			
13	What religion, religious denomination or body do you belong to?		
	This question is voluntary.		
	None	С	Asian, Asian Scottish or Asian British
	Church of Scotland		Pakistani, Pakistani Scottish or Pakistani British
	Roman Catholic		Indian, Indian Scottish or Indian British
	Other Christian, please write in below		Bangladeshi, Bangladeshi Scottish or Bangladeshi British
	Muslim		Chinese, Chinese Scottish or Chinese British
	Buddhist		Other, please write in
	Sikh		
	Jewish		
	Hindu	D	African
	Another religion or body, please write in		African, African Scottish or African British
			Other, please write in
14	What do you feel is your national identity?		
-	Tick ALL that apply.	Ε	Caribbean or Black
	Scottish		Caribbean, Caribbean Scottish or Caribbean British
	English		Black, Black Scottish or Black British
	Welsh		Other, please write in
	Northern Irish		
	British	F	Other ethnic group
	Other, please write in	-	Arab, Arab Scottish or Arab British
			Other, please write in



Indi	Individual questions continued			
16	Which of these can you do? ◆ Tick all that apply. English Scottish Gaelic Scots	21	Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months? • Include problems related to old age.	
	Understand		Yes, limited a lot	
	Speak		Yes, limited a little	
	Read		No	
	Write	22	If you are aged 16 or over → Go to 23	
or			If you are aged 15 or under → Go to 38	
	None of these	23	Which of these qualifications do you have? ◆ Tick all that apply.	
17	How well can you speak English?		O Grade, Standard Grade, Access 3 Cluster,	
	Very well Well Not well Not at all		Intermediate 1 or 2, GCSE, CSE, Senior Certificate or equivalent	
			SCE Higher Grade, Higher, Advanced Higher, CSYS,	
18	Do you use a language other than English at home?		A Level, AS Level, Advanced Senior Certificate or equivalent	
	Tick all that apply. No English apply.		GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or	
	No, English only Yes, British Sign Language		equivalent	
	Yes, other - please write in		GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	
	res, other - piease write in		HNC, HND, SVQ level 4 or equivalent	
40	How is your booth in concell		Degree, Postgraduate qualifications, Masters, PhD,	
19	How is your health in general?		SVQ level 5 or equivalent Professional qualifications (for example, teaching,	
	Very good Good Fair Bad Very bad		nursing, accountancy)	
20	Development of the fellowing and itsings		Other school qualifications not already mentioned (including foreign qualifications)	
20	Do you have any of the following conditions which have lasted, or are expected to last, at least 12 months?		Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)	
	◆ Tick all that apply.		Other Higher Education qualifications not already mentioned (including foreign qualifications)	
	Deafness or partial hearing loss		No qualifications	
	Blindness or partial sight loss Learning disability (for example, Down's Syndrome)	24	Last week were you:	
	Learning difficulty (for example, dyslexia)		♦ Tick all that apply.	
	Developmental disorder (for example, Autistic		 Include any paid work, including casual or temporary work, even if only for one hour. 	
	Spectrum Disorder or Asperger's Syndrome)		working as an employee? → Go to 30	
	Physical disability		on a Government sponsored	
	Mental health condition		training scheme?	
	Long-term illness, disease or condition		self-employed or freelance? → Go to 30	
	Other condition, please write in		working paid or unpaid for your own or your family's business? Go to 30	
			away from work ill, on maternity leave, on holiday or temporarily laid off?	
or			doing any other kind of paid work? → Go to 30	
OI.	No condition		none of the above	



Indi	Individual questions continued			
25	Were you actively looking for any kind of paid work during the last 4 weeks? Yes No If a job had been available last week, could you have	33	Briefly describe what you do (did) in your main job.	
	started it within 2 weeks? Yes No			
27	Last week, were you waiting to start a job already obtained? Yes No		Do (did) you supervise any employees? ◆ Supervision involves overseeing the work of other employees on a day-to-day basis. Yes No	
28	Last week were you: ♦ Tick all that apply. retired (whether receiving a pension or not)? a student?	35	How many hours (to the nearest full hour) a week do (did) you usually work in your main job? ◆ Include paid and unpaid overtime. Number of hours worked in a typical week At your workplace, what is (was) the main activity of	
	looking after home or family? long-term sick or disabled? other	30	 For example, ARMED FORCES, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING, DOCTOR'S SURGERY. If you are (were) a civil servant, please write 	
29	Have you ever worked? Yes, please write in the year you last worked → Go to 30 No, have never worked → Go to 38		GOVERNMENT. If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department within the local authority.	
30	Answer the remaining questions for your main job or, if not working, your last main job. • Your main job is the job in which you usually work (worked) the most hours.	37	In your main job, what is (was) the name of the organisation you work (worked) for?	
31	In your main job, are (were) you: an employee? self-employed or freelance without employees? self-employed with employees?		If you are (were) self-employed in your own organisation, please write in the business name.	
32	What is (was) your full and specific job title? ◆ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER.		No organisation, for example, self-employed, freelance, or work (worked) for a private individual.	
	◆ Do not state your grade or pay band.	38	 There are no more questions. ♦ Remember to sign the declaration on page 1. ♦ Post the questionnaire back using the pre-paid envelope provided. 	



EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations amend the Census (Scotland) Regulations 2010 to correct an omission in the forms to be used for the 2011 census in Scotland. They also clarify the forms and arrangements prescribed for the purposes of those Regulations.

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