CPH FORM 2

Approval Number: PSA-1962-02 Expiry Date · 31 December 2020



REPUBLIC OF THE PHILIPPINES

Philippine Statistics Authority





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OBLIGATION TO PROVIDE INFORMATION:

Section 25 of Republic Act 10625 (Obligation to Provide Information) stipulates that all respondents whether natural or legal persons are required to provide truthful and complete information to all statistical inquiries or surveys conducted by the Philippine Statistics Authority (PSA).



CONFIDENTIALITY:

The PSA adheres and commits to the confidentiality of information as stipulated in Section 26 of RA 10625 (Confidentiality of Information) and Section 8 of RA 10173 (Confidentiality). All data obtained herein shall be held strictly confidential, and will not be used for taxation, investigation or law enforcement purposes.

Dear Sir/Madam:

The Philippine Statistics Authority (PSA) is conducting the 2020 Census of Population and Housing (2020 CPH) to gather data on the demographic, socioeconomic, and housing characteristics of all persons, households, and institutional living quarters (ILQ) in all barangays nationwide. These data will be used by government planners, policy makers, and administrators in formulating their social and economic development plans, policies, and programs.

The conduct of the 2020 CPH is in accordance with **Republic Act (RA) No. 10625** (*Philippine Statistical Act of 2013*), which authorizes the PSA to prepare and conduct periodic censuses on population, housing, and other sectors of economy. **Batas Pambansa Blg. 72** and **Executive Order No. 352** also stipulate the conduct of a census of population and housing every ten (10) years.

Section 25 of RA 10625, states that all respondents whether natural or legal persons are obliged to provide TRUTHFUL AND COMPLETE ANSWERS to the 2020 CPH. Hence, we are requesting you to please answer all the questions that will be asked by our census interviewer. Rest assured that the data that you will furnish in this census shall be considered PRIVILEGED COMMUNICATION and as such shall be inadmissible as evidence in any proceeding. Provisions on CONFIDENTIALITY OF INFORMATION are stipulated in Section 26 of RA 10625 and Section 4 of Commonwealth Act No. 591.

Moreover, please be informed that **Section 4(e)** of **RA 10173** (Data Privacy Act of 2012) states that data privacy does not apply to "information necessary in order to carry out the functions of public authority which includes the processing of personal data for the performance by the independent agencies of their constitutionally and statutorily mandated functions."

We appreciate your utmost cooperation and support for the success of the 2020 CPH.

Thank you very much.



CLAIRE DENNIS S. MAPA, Ph.D.

Undersecretary

National Statistician and Civil Registrar General

CERTIF	ICATION	GEOGRAPHIC IDENTIFICATION					
I hereby certify that the data set forth herein were personally obtained/reviewed by me and in accordance with the instructions given by the PSA.		PROVINCE	вос	OKLET OF	BOOKLETS		
ENUMERATOR SIGNATURE OVER PRINTED NAME		CITY/MUNICIPAL	ITY _				
DATE ACCOMPLISHED (mm/dd)		BARANGAY					
		ENUMERATION AREA NUMBER					
TEAM SUPERVISOR SIGNATURE OVER PRINTED NAME DATE REVIEWED		BUILDING SERIAL NUMBER					
(mm/dd)		HOUSING UNIT SERIAL NUMBER					
	ACAS R PRINTED NAME	HOUSEHOLD SERIAL NUMBER					
DATE REVIEWED (mm/dd)		LINE NUMBER OF THE RESPONDENT					
CO/RSSO/PSO SUPERVISOR SIGNATURE OVER PRINTED NAME		NAME OF THE HOUSEHOLD HEAD LAST NAME FIRST NAME					
DATE REVIEWED		ADDRESS				NAME	
(mm	n/dd)	HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME					
			NTERVIEW RE				
VISIT NUMBER	1	2	3		SUMMARY OF VISIT		
DATE MONTH/DAY TIME BEGAN	(mm/dd)	(mm/dd)	(mm/dd)	NUMBER OF VI	SIT/S MADE		
HOUR:MINUTE TIME ENDED	AM/PM	AM/PM	AM/PM	RESULT OF FIN	IAL VISIT *		
HOUR:MINUTE RESULT	AM/PM	AM/PM	AM/PM	NUMBER OF H	DUSEHOLD MEMBERS		
OF VISIT				NUMBER OF MA	AI FS		
	CODES FOR THE	4 REFUSED		NOMBER OF ME	ALLO		
1 COMPLETED * 2 NOT YET COMPL (FOR CALLBACK)		5 OTHERS,SPECIF	Y *	NUMBER OF FE	EMALES		
3 ENTIRE HOUSEH IS ABSENT/AWAY THE ENUMERATION	DURING			ENUMERATOR'	S CODE		
	APPOINTMENT	FOR NEXT VISIT		MODE OF DATA	A COLLECTION		
VISIT NUMBER	1	2	3		ENCIL PERSONAL INTERVIEW	(PAPI)	
DATE MONTH/DAY	(mm/dd)	(mm/dd)	(mm/dd)		STERED QUESTIONNAIRE SSISTED PERSONAL INTERVIE	(SAQ) W (CAPI)	
TIME HOUR:MINUTE	AM/PM	AM/PM	AM/PM				

2B POPULATION CENSUS QUESTIONS GENERAL INSTRUCTIONS: 1. WRITE THE DETAILED ANSWER/DESCRIPTION ON THE LINES PROVIDED. WRITE THE NUMBER OR CODE CORRESPONDING TO THE ANSWER IN THE BOX/ES. REFER TO THE CODES FOR ITEM P2 AT THE BOTTOM OF THIS PAGE. FOR ALL PERSONS Relationship to the Household Name Sex **Date of Birth** Age **Birth Registration Marital Status** Head P3 P4 P5 P1 P8 E What What Who is the head of this In what Was Has Is N household? Who are male ever had single, married, month П the persons usually relationship and year age birth а сору common law/ or registered М residing here to the head female? as of of his/her live-in, widowed, В as of May 1, 2020? born? of this his/her with the birth or divorced/ separated/annulled? household? certificate? Ε last Local 1 Male 2 Female Month (MM) Year (YYYY) birthday? ORDER OF LISTING: Civil R Single Married Registry Head 2 No 3 Don't know Spouse of the head Office? Common-law/Live-in Widowed Divorced/Separated/ Annulled Unknown Never-married children of the head/spouse, from the oldest to the youngest Yes No Don't Ever-married children 6 3 of the head/spouse and their families, from the oldest to the youngest FOR CHILDREN "0" TO "9" YEARS OLD, WRITE CODE "1" (SINGLE) IN THE BOX. · Other relatives of the head Nonrelatives of the head MM LAST NAME SPECIFY YYYY FIRST NAME MM LAST NAME SPECIFY FIRST NAME YYYY LAST NAME SPECIFY 3 FIRST NAME YYYY ММ LAST NAME SPECIFY FIRST NAME мм 5 LAST NAME SPECIFY FIRST NAME MM LAST NAME SPECIFY 6 FIRST NAME YYYY INDICATOR FOR **CHECK FOR PERSONS** CODES FOR ITEM P2 - RELATIONSHIP TO THE HOUSEHOLD HEAD **NOT YET LISTED ADDITIONAL BOOKLET** Are there other persons in this household who were not yet listed, such as infants, small children, elderly persons, and overseas workers? ARE THERE MORE THAN 01 Head 09 Grandson 15 Brother 21 Nephew SIX (6) MEMBERS IN THIS 02 Spouse 10 Granddaughter 16 Sister 22 Niece HOUSEHOLD? 03 Son 11 Father 17 Brother-in-law 23 Boarder 04 Daughter 12 Mother 18 Sister-in-law 24 Domestic helper 05 Stepson 13 Father-in-law 19 Uncle 25 Other relative Yes, USE 14 Mother-in-law 20 Aunt 26 Nonrelative Yes, ADD 06 Stepdaughter TO THE LIST. **ADDITIONAL** 07 Son-in-law BOOKLET. 08 Daughter-in-law 2 No

	POPULATION CENSUS QUESTIONS							2C			
	GENERAL INSTRUCTIONS: 1. WRITE THE ANSWER/DETAILED DESCRIPTION ON THE LINES PROVIDED. 2. WRITE THE NUMBER OR CODE CORRESPONDING TO THE ANSWER IN THE BOX/ES. 3. REFER TO THE CODE BOOK FOR THE CODES IN ITEMS P9, P11, AND P12.										
		3. REFER TO THE CODE BOOK FOR ALL PERSONS				FOR THE CODES IN ITEMS P9, P11, AND P12. FOR ALL PERSONS 5 YEARS OLD AND OVER					
L	Religious Affiliation	Citizenship		Ethnicity	Functional Difficulty						
N E	P9	P10	P11	P12	P13						
N U M	What is's religious	is's a citizen		What is's ethnicity by descent/blood relation/	The following questions ask about difficulties a person may have doing certain activities because of a HEALTH PROBLEM. Does have any difficulty/problem in?						
В	anniation:	1 YES, Filipino	country is a citizen of?	consanguinity?	а	b	<i>nave</i>	d d	е	f	
E R		citizen 2 YES, Filipino with dual citizenship 3 NO	a cluzeri or?	Is he/she a/an? MENTION THE	Seeing, even if wearing glasses	Hearing, even if using hearing aid	Walking or climbing steps	Remembering or concentrating	Self-caring (such as washing all over or dressing)	Communicating using his/her usual (customary) language	
				PREDOMINANT/ COMMON INDIGENOUS							
		IF CODE "1",		PEOPLES (IP) OR NON-IP	MENTION	THESE CAT	regories:				
		GO TO ITEM P12.		GROUPS IN THE AREA.				YES, a lot of difficulty	4 – Cannot do it at all		
					а	b	С	d	е	f	
1	SPECIFY		SPECIFY	SPECIFY							
2	SPECIFY		SPECIFY	SPECIFY							
	SPECIFY		SPECIFY	SPECIFY							
3	SFECII 1		SPECIFY	SPECIFY							
4	SPECIFY		SPECIFY	SPECIFY							
5	SPECIFY		SPECIFY	SPECIFY							
6	SPECIFY		SPECIFY	SPECIFY							
RI	EMARKS										

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2D **POPULATION CENSUS QUESTIONS GENERAL INSTRUCTIONS:** 1. WRITE THE ANSWER/DETAILED DESCRIPTION ON THE LINES PROVIDED. WRITE THE NUMBER OR CODE CORRESPONDING TO THE ANSWER IN THE BOX/ES. REFER TO THE CODE BOOK FOR THE CODES IN ITEMS P14 AND P15. FOR ALL PERSONS 15 YEARS OLD FOR ALL PERSONS 5 YEARS OLD AND OVER AND OVER **Residence of Mother** Residence **Highest Grade/** at the Time of Birth of the Household Member Literacy **Overseas Worker** Ν Five (5) Years Ago Year Completed E P15 P16 P17 P20 What is the highest In what province In what province read U and city/municipality did _____ reside and write and city/municipality an overseas grade/year completed М __'s mother did a simple message by_ worker? В reside at the time on May 1, 2015? in any language Ε of ____'s birth? or dialect? R 1 Yes 2 No REFER TO THE CODES AT THE BOTTOM OF THIS PAGE, EXCEPT FOR THE CODES FOR SPECIFIC COURSES. PROVINCE PROVINCE SPECIFY CITY/MUNICIPALITY CITY/MUNICIPALITY PROV CITY/MUN PROV CITY/MUN PROVINCE PROVINCE CITY/MUNICIPALITY CITY/MUNICIPALITY SPECIFY PROV CITY/MUN PROV CITY/MUN PROVINCE PROVINCE 3 CITY/MUNICIPALITY CITY/MUNICIPALITY SPECIFY PROV CITY/MUN PROV CITY/MUN PROVINCE PROVINCE SPECIFY CITY/MUNICIPALITY CITY/MUNICIPALITY PROV CITY/MUN PROV CITY/MUN PROVINCE PROVINCE CITY/MUNICIPALITY SPECIFY CITY/MUNICIPALITY PROVINCE PROVINCE 6 CITY/MUNICIPALITY CITY/MUNICIPALITY SPECIFY CITY/MUN CODES FOR ITEM P17 - HIGHEST GRADE/YEAR COMPLETED INCLUSIVE/SPECIAL NEEDS EDUCATION PROGRAM 00000 No grade completed COLLEGE COLLEGE 68100 1st Year 68200 2nd Year 68300 3rd Year 68300 3rd Year 68400 4th Year 68500 5th Year 68600 6th Year IF COLLEGE GRADUATE, SPECIFY COURSE. K TO 12 PROGRAM K TO 12 PROGRAM OLD CURRICULUM OLD CURRICULUM 10002 Elementary 24002 High School JUNIOR HIGH SCHOOL PRESCHOOL 02000 Preschool HIGH SCHOOL PRESCHOOL 01000 Kindergarter CONTINUING/SECOND-CHANCE EDUCATION PROGRAM **24100** Grade 7 **24200** Grade 8 **24300** Grade 9 21000 1st Year 22000 2nd Year 23000 3rd Year ELEMENTARY ELEMENTARY 24003 High School 11100 Grade 1 12100 Grade 2 13100 Grade 3 14100 Grade 4 15100 Grade 5 16100 Grade 6 11000 Grade 1 12000 Grade 2 24400 Grade 10 graduate 24000 4th Year POST SECONDARY POST BACCAL AUREATE SENIOR HIGH SCHOOL IF GRADE 11 COMPLETER OR GRADE 12 GRADUATE, SPECIFY GRADE LEVEL AND TRACK/STRAND 12000 Grade 2 13000 Grade 3 14000 Grade 4 15000 Grade 5 16000 Grade 6 17000 Grade 6 graduate 18000 Grade 7 graduate 25000 High school graduate 78880 Master's degree undergraduate IF GRADUATE OF MASTER'S DEGREE, SPECIFY COURSE. **4880** Post secondary undergraduate IF GRADUATE OF POST SECONDARY, SPECIFY COURSE. SHORT-CYCLE TERTIARY EDUCATION PROGRAM 58880 Short-cycle tertiary undergrar IF GRADUATE OF SHORT-CYCLE TERTIARY, SPECIFY COURSE. 88880 Doctorate degree undergraduate IF GRADUATE OF DOCTORAL DEGREE, SPECIFY COURSE

	HOUSING CENSUS QUESTIONS 2E							
GENERAL INSTRUCTIONS: 1. WRITE THE NUMBER OR CODE CORRESPONDING TO THE ANSWER IN THE BOX/ES. 2. WRITE THE ANSWER/DETAILED DESCRIPTION ON THE LINE PROVIDED FOR "OTHERS, SPECIFY" IN ITEMS B1 AND B3 TO B6.								
	ITEMS B1 TO B4 AND B7 ARE TO BE ANSWERED THROUGH OBSERVATION. IF DOUBTFUL, ASK THE RESPONDENT.							
B1	Type of building							
1 2 3 4 5	Single house Duplex Apartment/accessoria/rowhouse Condominium/condotel Other multi-unit residential	6 7 8 9	Commercial/industrial/agricultural (e.g. office, factory, barn) Institutional living quarter (e.g. hotel, hospital, convent, jail) Other types of building (e.g. bus/trailer, boat, tent), SPECIFYGO TO ITEM H11. None (e.g. homeless, cart), END INTERVIEW.					
B2	Number of floors of the building							
1 2 3	One floor (e.g. bungalow, including basement/ mezzanine floor) Two floors Three floors	4 5 6	Four floors Five to 10 floors 11 floors or more					
В3	Construction materials of the roof							
1 2 3 4	Galvanized iron/aluminum Concrete/clay tile Half galvanized iron and half concrete Wood/bamboo	5 6 7 8	Cogon/nipa/anahaw Asbestos Makeshift/salvaged/improvised materials Others, SPECIFY					
B4	Construction materials of the outer walls							
03 04	Concrete/brick/stone Wood Half concrete/brick/stone and half wood Galvanized iron/aluminum Bamboo/sawali/cogon/nipa	06 07 08 09 10	Asbestos Glass Makeshift/salvaged/improvised materials Others, SPECIFY None					
B5	Finishing materials of the floor of the housi	ng u	nit					
1 2 3 4	Ceramic tile/marble/granite Cement/brick/stone Wood plank Wood tile/parquet	5 6 7 8	Vinyl/carpet tile Linoleum Others, SPECIFY None					
В6	Construction materials of the floor of the ho	usin	ng unit					
1 2 3 4	Concrete Wood Coconut lumber Bamboo	5 6 7	Earth/sand/mud Makeshift/salvaged/improvised materials Others, SPECIFY					
В7	State of repair of the building							
1 2 3	Needs no repair/needs minor repair Needs major repair Dilapidated/condemned	4 5 6	Under construction (ongoing)					
	Year building was built							
01 02 03 04 05	en was this building built? 2020 2019 2018 2017 2016 2011 – 2015	07 08 09 10 11	2001 – 2010 1991 – 2000 1981 – 1990 1980 or earlier Don't know					
	D1 Floor area of the housing unit							
01 02 03 04 05 06 07 08 09 10	Less than 5 sq.m. or Less than 54 sq.f. 5 - 9 sq.m. or 54 - 107 sq.f. 10 - 19 sq.m. or 108 - 209 sq.f. 20 - 29 sq.m. or 210 - 317 sq.f. 30 - 49 sq.m. or 318 - 532 sq.f. 50 - 69 sq.m. or 533 - 748 sq.f. 70 - 89 sq.m. or 749 - 963 sq.f. 90 - 119 sq.m. or 964 - 1,286 sq.f. 120 - 149 sq.m. or 1, 287 - 1,609 sq.f. 150 - 199 sq.m. or 1, 610 - 2,147 sq. 200 sq.m. and over or 2,148 sq.ft. and over	t. t. t. t. t. t. t. ft. ft.						

2F	HOUSEHOLD CENSUS QUESTIONS					
GENERAL INSTRUCTIONS:	GENERAL INSTRUCTIONS: 1. WRITE THE NUMBER OR CODE CORRESPONDING TO THE ANSWER IN THE BOX/ES. 2. WRITE THE ANSWER/DETAILED DESCRIPTION ON THE LINES PROVIDED FOR ITEMS H11 TO H14. 3. REFER TO THE CODE BOOK FOR THE CODES IN ITEMS H13 AND H14.					
		CODE				
 Own or owner-like poss Own house, rent lot Own house, rent-free k 	the housing unit and lot occupied by this household? session of the house and lot of with consent of owner of without consent of owner ding lot t with consent of owner					
H11 Land ownership						
 WRITE CODE "1" IF THE Al a) Other residential land/s b) Agricultural land/s c) Agricultural land/s acquires as an agrarian reform be 	wsehold own the following? NSWER IS "YES"; OTHERWISE, WRITE CODE "2" IF THE ANSWER IS "NO". The state of through Comprehensive Agrarian Reform Program, an eneficiary					
	in crop farming, livestock and/or poultry raising, aquaculture, fishing,					
a) Crop farm b) Livestock and/or poultry c) Aquafarm d) Fishing activity e) Other farm/activity, SPE	er of this household who operated a/an? NSWER IS "YES"; OTHERWISE, WRITE CODE "2" IF THE ANSWER IS "NO". farm					
H13 Language/dialect ger What is the language/dialect	generally spoken at home by the members of this household?					
	ECT					
H14 Residence five (5) ye In what province and city/m five (5) years from now, that	unicipality does this household intend to reside					
PRO	OVINCE CITY/MUNICIPALITY	PROV CITY/MUN				
REMARKS						