

**Confidentiality:**

This survey is authorized by Commonwealth Act No. 591.  
All data obtained cannot be used for taxation, investigation  
or enforcement purposes.

ISS Form 1

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REPUBLIC OF THE PHILIPPINES  
NATIONAL STATISTICS OFFICE

# INFORMAL SECTOR SURVEY (ISS)

## (LISTING OF EMPLOYED PERSONS 15 YEARS OLD AND OVER)

IDENTIFICATION AND OTHER INFORMATION

Booklet \_\_\_\_ of \_\_\_\_ booklets

**Geographic Identification Codes**

Province \_\_\_\_\_

Mun/City \_\_\_\_\_

Bgy \_\_\_\_\_

EA .....

SHSN .....

HCN .....

**Design Codes**

Replicate ..... ☐

Stratum .....

PSU No. ....

Rotation Group .....

Number of Households in the housing unit .....

Name of Household Head: \_\_\_\_\_

Address: \_\_\_\_\_

Number of employed person/s .....  

No.	Line Number of Employed Person/s	Respondent Status	Interview Code
1.	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
5.	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>

**Respondent Status Code**

- 1 – Completed by the  
employed person  
2 – Completed by  
responsible member  
3 – Refusal

**Interview Code**

- 1 - Completed  
2 - Refusal

**Certification**

I hereby certify that the data gathered in this questionnaire were  
obtained/reviewed by me personally and in accordance with instructions.

Signature over Printed Name of Enumerator

Date Accomplished

Signature over Printed Name of Supervisor

Date Reviewed

Line No.	Name of employed person  (Copy from ISH Form 2)	Job Number	What is your occupation?  (Specify occupation, e.g. elementary teacher, palay farmer, etc.)	PSOC Code	What is your class of worker? (Enter code)	What is the nature of your employment?  <i>If col 05 = 3, 4 or 6, go to col 14</i> (Enter code)	Ask cols 07-13 only if col 05 = 0, 1, 2, or 5							All things considered, are you satisfied with your job?  1 - Very Unsatisfied 2 - Unsatisfied 3 - Moderate 4 - Satisfied 5 - Very Satisfied <i>If col 05=0 or 2, go to col 29</i> (Enter code)	Place of work Where do you mainly undertake your work?  (Enter code)	Industry of Enterprise What is the kind of business/ industry of this work?  (Specify industry e.g. private school, palay farm, etc.)	PSIC Code
							Are the terms of your employment covered by a written contract? 1 - Yes 2 - No, verbal only 3 - No (Enter code)	Does your employer pay for your contribution to the GSIS/ SSS?  1 - Yes 2 - No (Enter code)	Do you benefit from paid leave/ or from compensation instead of leave?  1 - Yes 2 - No (Enter code)	In case of incapacity to work due to health reasons, would you benefit from paid sick leave?  1 - Yes 2 - No (Enter code)	In case of birth of a child, would you be given the opportunity to benefit from maternity/ paternity leave?  1 - Yes 2 - No (Enter code)	If there is due cause, could your employment be terminated by your employer without advance notice?  1 - Yes 2 - No (Enter code)	In case of termination of employment (either initiated by you or your employer) would you receive the benefits and compensation specified in the existing labor laws?  1 - Yes 2 - No (Enter code)				
(01)	(02)	(03)	(04)	(04a)	(05)	(06)	(07)	(08)	(09)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(16a)

**Codes for Column 05 (Class of worker)**

- 0 - Worked for private household
- 1 - Worked for private establishment/corporation
- 2 - Worked for gov't/gov't corporation
- 3 - Self-employed without any paid employee
- 4 - Employer in own family-operated farm or business
- 5 - Worked with pay on own family-operated farm or business
- 6 - Worked without pay on own family-operated farm or business

**Codes for Column 06 (Nature of employment)**

- 1 - Permanent job/business/unpaid family work
- 2 - Short-term or seasonal or casual unpaid family work
- 3 - Worked for different employer/"amo" on day-to-day or week-to-week

**Codes for Column 15 (Place of work)**

**Fixed Premises**

- 01 - At home with no special work space
- 02 - At home with work space inside/attached to the home
- 03 - Business premises with fixed location independent from home
- 04 - Farm or individual agricultural /subsidiary plot
- 05 - Home or workplace of the client
- 06 - Construction site
- 07 - Market, bazaar stall, trade fair
- 08 - Street pavement or highway with fixed post
- 09 - Employer's home

**No fixed premises**

- 10 - Transport vehicle
- 11 - No fixed location e.g. mobile, door-to-door; street w/o fixed post)
- 90 Others ( specify) \_\_\_\_\_

Line No.	J o b N u m b e r	Legal Organization		Employment Size			Registration		Bookkeeping and accounting practices			Production	Do you have other job?  If "YES", enter the number, go to page 2 col 03  If "NO", enter "0", go to next employed person/HH	
		What is the legal status/ organization of the enterprise where you work?  (If code 2, 3, or 4 skip to col 19)  (Enter code)	Type of Enterprise In which type of enterprise do you work?  (Enter code)	How many persons (including yourself) usually work in the place where you work/your business/your production unit?			How many are paid employees?  (Enter the total number)	Is the enterprise in which you work registered in any national/ local government agency?  1 - Yes 2 - In the process 3 - No, skip to col. 25  (Enter code)	Under which form is the enterprise registered?  (Multiple entries) 1 - Local government 2 - National government 3 - Others, Specify,  (Enter code)	If col 05=3,4,6		If col 05=1,5		Does the enterprise you own or where you work sell or barter its goods/ services?  1 - Yes 2 - No  (Enter code)
				Total	Male	Female				How does your enterprise/ business maintain its records or account?	Does your business have a BIR business TIN?  1 - Yes 2 - No  (Enter code)	Do you get a pay slip? (payroll)  1 - Yes with complete information 2 - Yes simple pay slip 3 - No  (Enter code)		
(01)	(03)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)

**Codes for Column 17 (Legal organization)**

- 1 - Single proprietorship/individual business or farm
- 2 - Partnership
- 3 - Corporation (stock or nonstock; nonprofit)
- 4 - Cooperative
- 5 - Others (specify) \_\_\_\_\_
- 6 - Do not know

**Codes for Column 18 (Type of enterprise)**

- 1 - Factory or plantation
- 2 - Bank or insurance company
- 3 - Commercial/restaurant/service chain
- 4 - Construction company
- 5 - Private hospital or school
- 6 - Engineering firm
- 7 - Farm, small workshop/garage/shop, carinderia, mobile
- 8 - Others (specify) \_\_\_\_\_

**Codes for Column 25 (Bookkeeping)**

- 1 - No written accounts kept
- 2 - Informal records for personal use
- 3 - Simplified accounting format required for tax payment
- 4 - Detailed formal accounts (balance sheet)
- 5 - Others, (specify) \_\_\_\_\_

Line No.	Name of employed person	Job number	TO BE FILLED-UP BY THE ENUMERATOR					<p>What is the full name and address/location of your enterprise?</p> <p><i>If place of work is in fixed business premise outside of housing unit, write complete name and address.</i></p> <p><i>Otherwise, write "Housing Unit"</i></p> <p>Go to next job of employed person/next employed person. If this is the last person or job, proceed with ISS Form 2 interviews for each IS identified and marked in column 34.</p> <p>(Write the name of the business (if applicable) / Name of operator)</p>
			<i>If the entry in column (05) is either code 3 or 4, enter "O". otherwise enter "X".</i>	<i>If the entry in column(17) is code 1,5 or 6 and If the entry in column (18) is code 7 or 8 enter "O". otherwise enter "X".</i>	<i>If the entry in column (25) is either codes 1,.2 or 3, enter "O". otherwise enter "X".</i>	<i>If the entry in column (28) is code 1 enter "O". otherwise enter "X".</i>	<i>Put a check mark (/) if the entries in cols 30 to 33 are all "O", and go to column 35</i>	
(01)	(02)	(03)	(30)	(31)	(32)	(33)	(34)	(35)
								Name:
								Address:
								Name:
								Address:
								Name:
								Address:
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