



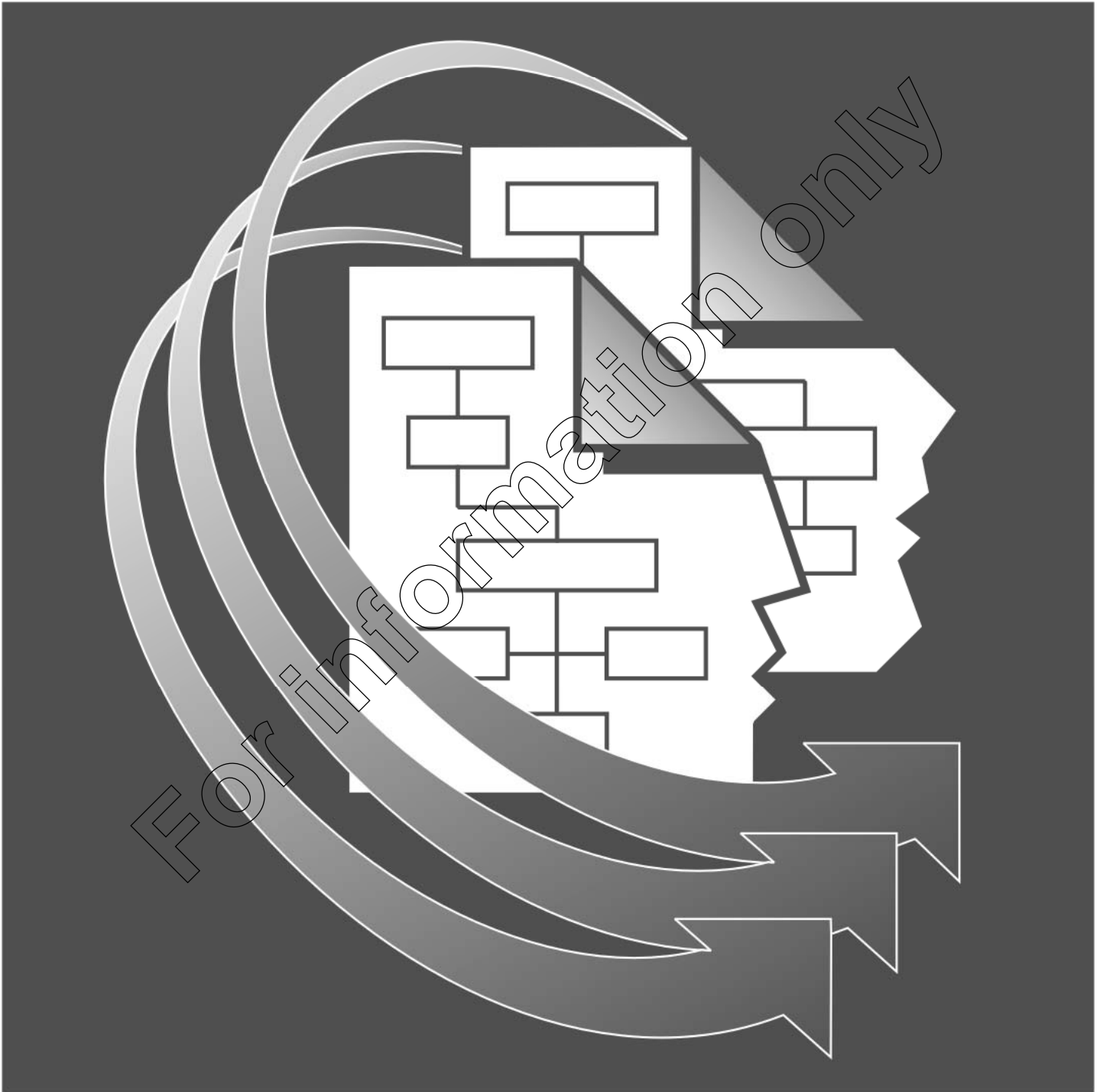
Business and Labour Market Analysis Division &
Labour Statistics Division

2005 Workplace and Employee Survey

Confidential when completed

Collected under the authority of the
Statistics Act, Revised Statutes of
Canada, 1985, Chapter S19.

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demande



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Statistics Canada
Statistique Canada

Canada

Survey Objective

The Workplace and Employee Survey will provide valuable information on the 'business of business' by looking at the practices that help firms succeed. It will poll Canadian employees and employers on a range of workplace concerns. Survey results will provide unique insight into the relationship between employment practices and firms' performances, as well as more in-depth information on the effect of technology, training and human resource practices.

Confidentiality

The law protects what you tell us. Your information is kept strictly confidential. No one, not the courts, the Canada Customs and revenue Agency or even the RCMP, can access your information. Your information cannot be made available under any other law such as the *Access to Information Act*.

We never release any information that could identify a particular individual or business without their consent.

You need help?

We would be most happy to answer any questions you might have.

Please feel free to call. Our telephone number is provided in the included letter.

You may also visit Statistics Canada's web site at www.statcan.ca.

For information only

Thank you for participating in this survey.



2005 Workplace and Employee Survey



A On March 31, 2005, were you still working for the employer you reported in our interview held a year ago?

¹ Yes → Go to Question B

³ No → Go to Question X1.1 of Exit Questionnaire (XL, XS)

Note: You must be working for a **NEW EMPLOYER** not a **NEW OWNER**. If the workplace is conducting the same type of activity with a new owner, the answer should be **YES**.

B Were you still working at the same location as last year?

¹ Yes

³ No

Note: You must be the one who changed location. If the company or workplace changed location, the answer should be **YES**; if you personally changed location, the answer should be **NO**.

C As of March 31, 2005, had your job title changed since last year?

¹ Yes → Go to Question 5 of Employee Questionnaire (EL)

³ No → Go to Question D

D As of March 31, had your most important activities or duties changed since last year?

¹ Yes → Go to Question 6 of Employee Questionnaire (EL)

³ No → Go to Question 9 of Employee Questionnaire (ES)

The following questions relate to the employee's exit conditions.

Reason for leaving job – Voluntary/Involuntary Exit

X1.1 Did you leave this job or did the job come to an end?

- ¹ Left job → Go to Question X1.2
- ² Job came to an end → Go to Question X1.3
- ³ Both → Go to Question X1.2

Note: Examples for leaving job: Found new job with new company, started business as self-employed or working owner, retired, attended school, etc.

X1.2 What was your main reason for leaving this job?

- ⁰¹ Found new job with new company (excluding self-employment)
- ⁰² Started business as self-employed or working owner
- ⁰³ Retirement
- ⁰⁴ Attend school
- ⁰⁵ Dissatisfied with job
- ⁰⁶ Moved to a new residence
- ⁰⁷ Own illness or disability
- ⁰⁸ Maternity/Parental leave
- ⁰⁹ Caring for own children
- ¹⁰ Caring for elder relative(s)
- ¹¹ Other personal or family responsibilities
- ¹² Other, specify _____

Instruction: If the answer to Question X1.1 is 1 (Left job), go to Question X1.4.

X1.3 What was the main reason why this job came to an end?

- ¹ Location moved or closed
- ² Company went out of business
- ³ Seasonal nature of work
- ⁴ Temporary lay-off/business slowdown – recall expected (not caused by seasonal conditions)
- ⁵ Permanent lay-off – no recall expected
- ⁶ Labour dispute
- ⁷ Dismissal by employer
- ⁸ Temporary job/contract ended
- ⁹ Other, specify _____

X1.4 Did you receive any additional payments when you left this job or when the job came to an end?

- ¹ Yes
- ³ No → Go to Question X2.1

Note: For example, severance pay, early retirement payment, signing bonus or any other payments related to you having "left the job" or the "job coming to an end".

X1.5 What was the amount received?

\$ _____ . _____

Determine end of previous job and current labour market status

X2.1 When did you leave your previous job or when did your job come to an end?

____ Month _____ Year
01-12

Note: Here we are talking specifically about the job you held based on our interview a year ago.

X2.2 What is your employment status: Are you currently working at a new job, running a business, or looking for work? Check one of the following conditions.

- 1 Employed at work (including self-employed) → Go to Question X3.1
- 2 Absent from work for more than three months
- 3 Temporary lay-off
- 4 Looking for work
- 5 Future start
- 6 Not in labour force, able to work
- 7 Not in labour force, permanently unable to work
- 8 Other, specify _____

If the answer to Question X2.2 is 2 to 8, Go to Questions X5.1 (XS).

Additional questions for job changers

X3.1 In this new job, which best describes your employment status?

- 1 Paid worker
- 2 Unpaid family worker
- 3 Volunteer, unpaid
- 4 Self-employed with paid help
- 5 Self-employed without paid help

X3.2 When did you start working at this particular job?

--	--

 Month

--	--	--	--	--

 Year

01-12

Instructions: • If the answer to Question X3.1 is 1 (Paid worker), go to Question X4.1 (a) (XL).

• If the answer to Question X3.1 is between 2 and 5 AND the date provided in Question X3.2 is after the date provided in Question X2.1, go to Question X5.1 (XS).

• If the answer to Question X3.1 is between 2 and 5 AND the date provided in Question X3.2 is the same as, or before the date provided in Question X2.1, go to Question 45 (b) (XS).

New employer content

X4.1 (a) Did you start working for this employer on the date answered in Question X3.2?

¹ Yes → *Go to Question X4.2*

³ No

X4.1 (b) When did you start working for this employer?

/ /

 01-12 Month Year

X4.2 What is the legal name of your current employer?

Legal name _____

X4.3 Would you say that the main type of business or industry of your new employer is similar to the main type of business of your old employer?

¹ Yes

³ No

X4.4 Considering your new employer, please describe its main business activity.

Specify _____

Instruction: If the answer to Question X3.1 is ¹ (Paid worker) AND the date provided in Question X3.2 is the same or before the date reported in Question X2.1, go to Question 2 (XL).

X5.1 What was your main activity between the end of your previous job and the time you started your new job? (If you are not currently employed, what was your main activity since the end of your previous job?)

¹ Employed by another company

² Started business as self-employed or working owner

³ Looking for work (unemployed)

⁴ Attending school

⁵ Retired

⁶ Not in labour force, able to work

⁷ Not in labour force, unable to work

⁸ Other, specify _____

Instructions: • If the answer to Question X2.2 is between 2 and 8, go to Question 45 (b) (XS).

• If the answer to Question X3.1 is between 2 and 5, go to Question 45 (b) (XS).

• If the answer to Question X3.1 is 1 (Paid worker), go to Question 2 (XL).

Section 1 – Job Characteristics

Unless otherwise specified, all questions refer to the position you held in March 2005.

1. When did you start working for this employer?

Note: You must at least give the year that you started working for the employer.

Month Year
01-12

Note: • This refers to the total uninterrupted tenure with the employer, regardless of location.

• If you quit at one time to work for another employer, we want the most recent start date.

• If you have been on extended leave or layoff from which you are expected to return, we want the original start date.

2. Did you ever work for this employer before?

¹ Yes

³ No → Go to Question 4 (a)

3. How many months did you work for them then?

• months

OR

From: Month Year
01-12

To: Month Year
01-12

Note: This is meant to include all previous terms of employment with the current employer.

4 (a) When you were first hired, how did you learn about the job opening? (Check all that apply.)

- 01 Help wanted ad
- 02 Family or friend
- 03 Union posting
- 04 Canada Employment Centre/other government agency
- 05 On-campus recruitment
- 06 News story
- 07 Job fair
- 08 Recruitment agency (headhunter)
- 09 Personal initiative
- 10 Directly recruited by employer
- 11 Internet
- 12 Other, specify _____

4 (b) When you were first hired, were you required to take: (Check all that apply.)

- 01 Tests for specific skills (for example typing or manual dexterity)
- 02 Aptitude or other personality testing
- 03 Security check
- 04 Medical examination
- 05 Drug test
- 06 Tests administered by a recruitment agency
- 07 Any other type of testing or screening, specify _____
- 08 Personal interview
- 09 Test on job-related knowledge
- 10 Test on general knowledge or literacy skills
- 11 None

5. What is your job title?

6. What are your most important activities or duties?

Instruction: If you have answered Question X3.2, go to Question 8.

7. When did you start working at this particular job?

--	--

 Month

--	--	--	--	--

 Year
01-12

Note: You must at least give the year that you started working at this job.

We are talking specifically about the job duties you described in Question 6. If you have moved in and out of the job several times, we want the most recent start date.

Instruction: If your job title and your most important activities or duties have not changed (ES), go to Question 9.

8. What is the minimum level of education required for this job?

01 Elementary school

02 Some secondary school

03 Secondary school diploma

04 Some postsecondary education

05 Trade certificate

06 College diploma

07 University undergraduate degree

08 University professional accreditation (M.D., Law, Architect, Engineer, Education, etc.)

09 University graduate degree

10 None

Unless you answered "No" in question A (XL), please answer the following questions for the job you held in March 2005, even if you have changed jobs or employers since then.

Instruction: Please answer Questions 9 to 39 (EN, EL, ES, XL).

9. Do you supervise the work of other employees on a day-to-day basis?

¹ Yes

³ No → Go to Question 10

9 (a) About how many people do you directly and indirectly supervise on a day-to-day basis?

□ □ □ □ □

Note: Directly: are employees and supervisors who report to you.
Indirectly: are employees reporting to supervisors who report to you.

10. Do you normally work the same number of paid hours per week at this job excluding all overtime?

¹ Yes → Go to Question 10 (d)

³ No → Go to Question 10 (a)

10 (a) Not counting overtime, how many paid hours on average do you work per week at this job?

□ □ □ □ • □ hours

Instruction: If you have been in this job for less than twelve months, please answer the following questions for the period of time you have been in this job. Otherwise, answer for the past twelve months.

10 (b) Over the past twelve months/since you started this job, not counting overtime, what was the maximum number of paid hours you worked per week at this job?

□ □ □ □ • □ hours

10 (c) Over the past twelve months/since you started this job, not counting overtime, what was the minimum number of paid hours you worked per week at this job? (Exclude the hours when you were on paid vacation or paid sick leave.)

• hours → Go to Question 10 (e)

10 (d) Excluding all overtime, how many paid hours do you usually work per week at this job?

• hours

10 (e) How many hours of paid overtime do you usually work per week?

• hours

Note: If the number of overtime hours varies from week to week, please provide an average.

10 (f) How many hours of unpaid overtime do you usually work per week?

• hours

Instruction: If the answer to Question 10 (e) and Question 10 (f) are both zero, please go to Question 11 (a).

10 (g) How far in advance do you usually know your overtime schedule?

- ¹ Always known
- ² More than one month (more than 31 days)
- ³ One month (22 to 31 days)
- ⁴ 3 weeks (15 to 21 days)
- ⁵ 2 weeks (8 to 14 days)
- ⁶ 1 to 7 days
- ⁷ Less than one day

11 (a) How many weeks per year do you usually work at this job? Please include vacation and other paid leave.

• weeks

11 (b) How many months of the year do you usually work at this job?

• months

12. Given your rate of pay, would you prefer to work:

- ¹ the same number of hours for the same pay? → Go to Question 13 (a)(i)
- ² fewer hours for less pay?
- ³ more hours for more pay? → Go to Question 12 (c)

12 (a) By how many hours would you like to reduce your work week?

• hours

12 (b) Why would you prefer to work fewer hours? (Check all that apply.)

- ¹ Family responsibilities
- ² Work-related stress
- ³ Other health reasons
- ⁴ More leisure time
- ⁵ Other, specify _____

} Go to
Question 13 (a)(i)

12 (c) How many additional hours per week would you prefer to work at this job?

• hours

12 (d) What are the reasons you did not work these additional hours? (Check all that apply.)

- ¹ Own illness or disability
- ² Childcare unavailable
- ³ Other personal or family responsibilities
- ⁴ Going to school
- ⁵ Additional hours not offered by employer
- ⁶ Payment for additional hours not sufficient
- ⁷ Transportation problems
- ⁸ No reason
- ⁹ Other, specify _____

The next few questions cover your general work arrangements with your employer.

Reminder: Unless you answered "No" in question A (XL), the questions refer to the job you held in March 2005.

13 (a)(i) In your usual work week, do you work each day from Monday to Friday?

¹ Yes

³ No

13 (a)(ii) Do you work at least 6 hours per day?

¹ Yes

³ No

13 (a)(iii) Do you usually work between the hours of 6 a.m. and 6 p.m.?

¹ Yes

³ No

13 (b) Are you on a reduced work week by special arrangement with your employer?

Note: A special arrangement, is an agreement that was reached with your employer to work fewer hours every week.

¹ Yes

³ No → Go to Question 13 (d)

13 (c) Which of the following best describes that arrangement?

¹ Job sharing – you share a full-time job with another employee

² Work sharing – you and others are working reduced hours to avoid lay-offs

³ Family responsibilities – childcare/eldercare limit your ability to work full time

⁴ Physical problem/injury limits your ability to work full time

⁵ Outside activities limit your ability to work full time

⁶ Retirement transition schedule

⁷ Other, specify _____

13 (d) Do you work a compressed work week? (This means working longer hours each day to reduce the number of days in a work week.)

¹ Yes

³ No

Instruction: If you answered "No" to Questions 13 (a)(i), 13 (a)(ii) or 13 (a)(iii), then go to Question 13 (e); else go to Question 13 (j).

13 (e) How far in advance do you know your weekly hours of work?

¹ Always known

² More than one month (more than 31 days)

³ One month (22 to 31 days)

⁴ 3 weeks (15 to 21 days)

⁵ 2 weeks (8 to 14 days)

⁶ 1 to 7 days

⁷ Less than one day

13 (f) Do you usually work the same hours of the day?

¹ Yes

³ No

13 (g) Do you usually work the same days of the week?

¹ Yes

³ No

Instruction: If your answer to both questions 13 (f) and 13 (g) is "Yes", go to Question 13 (j).

13 (h) Are you on a work schedule of rotating shifts?

Note: By rotating shift we mean that according to a known schedule, the hours of day or the days of week change.

¹ Yes

³ No → Go to Question 13 (j)

13 (i) How many different shifts do you work in a full rotation?

13 (j) How many days a week do you usually work?

 • days

Instruction: If you answered "Yes" to Questions 13 (a)(i), 13 (a)(ii) and 13 (a)(iii), go to Question 14.

13 (k) Does your usual work week include Saturday or Sunday?

- ¹ Yes
- ² Varies, depends on shift
- ³ No

14. Do you work flexible hours? (This means you may work a certain number of core hours, but you can vary your start and stop times as long as you work the equivalent of a full work week.)

- ¹ Yes
- ³ No

15. Which of the following best describes your terms of employment in this job?

- ¹ Regular employee with no contractual or anticipated termination date → Go to Question 16
- ² Seasonal employee: my employment on this job is intermittent according to the season of the year. → Go to Question 16
- ³ Term employee: my term of employment has a set termination date → Go to Question 15 (a)
- ⁴ Casual or on-call employee → Go to Question 16

Note: Casual or on-call employees are persons:

- who may have hours of work that vary substantially from one week to the next;
- who are called to work as the need arises, not on a pre-arranged schedule.

- ⁵ Other, specify _____ → Go to Question 16

15 (a) What is the end date of this term of employment?

--	--

 01-12 Month

--	--	--	--	--

 Year

16. In your usual work week, are:

- 1 all of your duties carried out at your workplace?
- 2 most of your duties carried out outside of your workplace?
- 3 some of your duties carried out outside of your workplace?
- 4 all of your duties carried out outside of your workplace?

17. Do you ever carry out the duties of this job at home?

- 1 Yes
- 3 No → Go to Question 18 (a)

17 (a) Is your work at home mainly:

- 1 paid and within your normally scheduled work hours?
- 2 paid and in addition to your normally scheduled work hours?
- 3 unpaid and in addition to your normally scheduled work hours?

17 (b) How many hours per week do you usually work at home?

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 •

--

 hours

17 (c) What is the main reason you work at home?

- 1 Requirements of the job, finish projects, etc.
- 2 Care for children
- 3 Care for other family members
- 4 Other personal or family responsibilities
- 5 Usual place of work
- 6 Better conditions of work
- 7 Save time, money
- 8 Other, specify _____

17 (d) Does your employer offer any type of equipment or supplies and/or reimbursement of costs for working at home?

- ¹ Yes
- ² No equipment or supplies required → Go to Question 18 (a)
- ³ No → Go to Question 18 (a)

17 (e) For the work done at home, does the employer provide you with any of the following? (Check all that apply.)

- ¹ Computer hardware/software
- ² Internet access
- ³ Modem/fax
- ⁴ Cellular phone, pager, beeper
- ⁵ Other equipment or supplies, specify _____
- ⁶ Reimbursement of costs

Instruction: If you have been with this employer for less than twelve months, please answer the following questions for the period of time since you started this job. Otherwise, answer for the past twelve months.

18 (a) In the past twelve months/since you started this job, how many days of paid vacation leave have you taken?

□ □ □ □ • □ days

18 (b) How many days of paid sick leave have you taken?

□ □ □ □ • □ days

18 (c)(i) Have you taken any maternity/parental leave in the past twelve months/since you started this job?

- ¹ Yes
- ³ No → Go to Question 18 (d)

18 (c)(ii) How many days have you taken?

□ □ □ □ • □ days

18 (c)(iii) Did your employer provide supplementary maternity/parental benefits?

¹ Yes

³ No

18 (d) How many days of other paid leave have you taken (for example education leave, disability leave, bereavement, marriage, jury duty, union business)?

• days

18 (e) In the past twelve months/since you started this job, have you taken any unpaid leave?

¹ Yes

³ No → Go to Question 18 (g)

18 (f) How many days of unpaid leave have you taken?

• days

18 (g) How many days of paid vacation leave are you entitled to annually?

• days

19. In the past twelve months/since you started this job, have you been off work due to a lay-off, strike or lockout?

¹ Yes

³ No → Go to Question 20

19 (a) Were you off work due to layoffs?

¹ Yes

³ No → Go to Question 19 (b)

19 (a)(i) How many working days were you off due to lay-offs?

• days

OR

• weeks

Note: Either days or weeks are to be entered, not both.

19 (b) Were you off work due to strikes?

¹ Yes

³ No → Go to Question 19 (c)

19 (b)(i) How many working days were you off due to strikes?

• days

OR

• weeks

Note: Either days or weeks are to be entered, not both.

19 (c) Were you off work due to lockouts?

¹ Yes

³ No → Go to Question 20

19 (c)(i) How many working days were you off due to lockouts?

• days

OR

• weeks

Note: Either days or weeks are to be entered, not both.

The next questions refer to your total period of employment with your employer, including all locations that they might operate.

20. Have you ever been promoted while working for this employer? (By promotion, we mean a change in duties/responsibilities that lead to both an increase in pay and the complexity or responsibility of the job.)

¹ Yes

³ No → Go to Question 21

20 (a) How many times have you been promoted?

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20 (b) When did your most recent promotion occur?

		Month						Year

01-12

20 (c) Which of the following factors were important in earning that promotion? (Check all that apply.)

- 1 Experience gained at previous job
- 2 Seniority
- 3 Test or competitive process
- 4 Training or career development programs
- 5 Past performance evaluations
- 6 None

21. Is your job performance in your position evaluated by a standard process?

By standard process, we mean:

- Through a written report
- A private meeting with your supervisor
- A standard report

- 1 Yes
- 3 No → Go to Question 22

21 (a) Do the results of your job evaluation directly affect your level of pay or benefits?

- 1 Yes
- 3 No

Section 2 – Computers and Other Technologies

The next set of questions refers specifically to computers and other technologies you work with on the job.

Reminder: Unless you answered "No" in question A (XL), the questions refer to the job you held in March 2005.

22. Do you use a computer in your job? Please exclude sales terminals, scanners, machine monitors, etc., these are covered in another question.

Note: By a computer, we mean a microcomputer, mini-computer, personal computer, mainframe computer or laptop that can be programmed to perform a variety of operations.

¹ Yes

³ No → Go to Question 22 (m) (EN); go to Question 23 (EL, ES, XL)

- 22 (a) How many hours a week do you normally spend using a computer at your job? (By this we mean using or developing computer applications, rather than just having the computer turned on.)

□ □ □ □ • □ hours

- 22 (b) When you first started this job, how many hours a week did you normally spend using a computer?

□ □ □ □ • □ hours

- 22 (c) What types of applications do you use? (Check all that apply.)

Note: Here we are interested in what the application does, not its name. If you are not sure about the applications, please refer to the list provided at the end of the questionnaire.

- ⁰¹ Word processors
⁰² Spreadsheets
⁰³ Databases
⁰⁴ Desktop publishing and form design
⁰⁵ General management applications
⁰⁶ Communications
⁰⁷ Programming languages and development tools
⁰⁸ Specialized office applications
⁰⁹ Data analysis
¹⁰ Graphics and presentations
¹¹ Computer-aided design
¹² Computer-aided engineering
¹³ Expert systems
¹⁴ Other, specify _____

Instruction: If only one application is used, go to Question 22 (e).

22 (d) Which of these applications do you use the most, in terms of time? Please enter the corresponding code, as printed to the left of the circle in Question 22 (c).

Type of application code:

22 (e) How many hours a week do you normally spend using this application?

• hours

22 (f) How did you learn this application? (*Check all that apply.*)

- 1 Self-learning (manuals, books, on-line tutorials, etc.)
- 2 Employer-paid formal training
- 3 Self-paid formal training
- 4 On-the-job training (co-workers, supervisors, resource people, friends)
- 5 University or community college courses
- 6 Other, *specify* _____

Instruction: If only one method of learning application is given then *go to Question 22 h*).

22 (g) What method was the most helpful in learning this application?

- 1 Self-learning (manuals, books, on-line tutorials, etc.)
- 2 Employer-paid formal training
- 3 Self-paid formal training
- 4 On-the-job training (co-workers, supervisors, resource people, friends)
- 5 University or community college courses
- 6 Other, *specify* _____

22 (h) Did you learn more:

- 1 on company time?
- 2 on your own time?
- 3 About equally on company and own time

Instruction: If only one application is used: go to Question 22 (m) (EN), go to Question 23 (EL, ES, XL).

22 (i) Which of the other applications do you use the second most, in terms of time?

Please enter the corresponding code, as printed to the left of the circle in Question 22 (c)

Type of application code:

22 (j) How many hours a week do you normally spend using this second application?

• hours

Instruction: If only two applications are used: go to Question 22 (m) (EN), go to Question 23 (EL, ES, XL).

22 (k) Which of the other applications do you use the third most, in terms of time?

Please enter the corresponding code, as printed to the left of the circle in Question 22 (c).

Type of application code:

22 (l) How many hours a week do you normally spend using this third application?

• hours

Instruction: Continue with Question 22 (m) (EN). Go to Question 23 (EL, ES, XL).

22 (m) Considering all jobs you have held, how many years have you used a computer in a work environment?

years

23. Do you use a computer-controlled or computer-assisted technology in the course of your normal duties? For example, industrial robots, retail scanning systems, etc.

¹ Yes

³ No → Go to Question 23 (f)

23 (a) What type of computer-controlled or computer-assisted technology do you use the most?

23 (a)(i) How many hours a week do you normally spend using this technology?

• hours

23 (b) What method was the most helpful in learning to use that technology?

- ¹ On-the-job training (co-workers, supervisors, resource people, friends)
- ² Employer-paid formal training
- ³ Self-learning (manuals, books, on-line tutorials, etc.)
- ⁴ Self-paid formal training
- ⁵ University or community college courses
- ⁶ Other, specify _____

23 (c) Has there been an upgrade or change in that technology in the past twelve months?

- ¹ Yes
- ³ No → Go to Question 23 (f)

23 (d) Did you receive any informal or formal training related to that change in technology?

- ¹ Yes
- ³ No → Go to Question 23 (f)

23 (e) Approximately how many days did you spend on that training? Include only the time actually spent in training sessions.

• days

23 (f) Do you use any other machine or technological device for at least one hour a day in the course of your normal duties? This question is meant to be inclusive and would include, for example, cash registers, sales terminals, typewriters, vehicles and industrial machinery.

- ¹ Yes
- ³ No → Go to Question 24

Note: Do not include the car that you drive for work unless it requires a special permit.

23 (g) What machine(s) or technological device(s) do you use for at least one hour a day? If you use more than three, please report the three you use the most, in terms of time.

1 _____
2 _____
3 _____

23 (g)(i) How many hours a week do you normally spend with the first device or machine you reported in Question 23 (g)?

□ □ □ □ • □ hours

Instruction: If you reported only one machine or device in Question 23 (g), please go to Question 23 (h).

23 (g)(ii) How many hours a week do you normally spend with the second machine or device you reported in Question 23 (g)?

□ □ □ □ • □ hours

Instruction: If you reported only two machines or devices in Question 23 (g), please go to Question 23 (h).

23 (g)(iii) How many hours a week do you normally spend with the third machine or device you reported in Question 23 (g)?

□ □ □ □ • □ hours

23 (h) Thinking of the machine or technological device you use the most, what has been the most helpful learning method to use that technology?

- 1 On-the-job training (co-workers, supervisors, resource people, friends)
- 2 Employer-paid formal training
- 3 Self-learning (manuals, books, on-line tutorials, etc.)
- 4 Self-paid formal training
- 5 University or community college courses
- 6 Other, specify _____

23 (i) Has there been an upgrade or change in that technology in the past twelve months?

¹ Yes

³ No → Go to Question 24

23 (j) Did you receive any informal or formal training related to that change in technology?

¹ Yes

³ No → Go to Question 24

23 (k) Approximately how many days did you spend on that training? Include only the time actually spent in training sessions.

• days

24. Since you started this job, has the overall technological complexity:

¹ remained about the same?

² increased?

³ decreased?

For information only

Section 3 – Training and Development

The next few questions deal with job-related training provided or paid by your employer.
Reminder: Unless you answered "No" in question A (XL), the questions refer to the job you held in March 2005.

25. In the past twelve months, have you received any classroom training related to your job?

¹ Yes

³ No → Go to Question 25 (d)

Classroom training includes:

- All training activities which have a predetermined format, including a pre-defined objective
- Specific content
- Progress may be monitored and/or evaluated

25 (a) How many different training courses have you taken in the last twelve months?

--	--	--

25 (b)(i) What was the main subject of the last course you completed?

⁰¹ Orientation for new employees

⁰² Managerial/supervisory training

⁰³ Professional training

⁰⁴ Apprenticeship training

⁰⁵ Sales and marketing training

⁰⁶ Computer hardware

⁰⁷ Computer software

⁰⁸ Other office or non-office equipment

⁰⁹ Group decision-making or problem-solving

¹⁰ Team building, leadership, communication

¹¹ Occupational health and safety, environmental protection

¹² Literacy or numeracy

¹³ Other, specify _____

25 (b)(ii) How long was the course? (Include only the time actually spent in training sessions.)

□ □ □ □ • □ days → Go to Question 25 (b) (ii) (a)

OR

□ □ □ □ • □ hours → Go to Question 25 (b) (iii)

25 (b)(ii) (a) How many hours per day?

□ □ □ • □ hours

25 (b)(iii) Did the training take place at your workplace?

- 1 Yes, entirely
- 2 Partly
- 3 No, always elsewhere

25 (b)(iv) Did the training take place during your normal working hours?

- 1 Yes
- 2 Partly
- 3 No

25 (b)(v) Who provided the training sessions? (Check all that apply.)

- 1 Supervisor
- 2 Fellow worker
- 3 In-house trainer
- 4 Outside trainer
- 5 Supplier
- 6 Other, specify _____

25 (b)(vi) To what extent are you using the skills or knowledge acquired in this training at work?

- 1 To a great extent
- 2 Somewhat
- 3 Not at all

Instruction: If the answer to Question 25 (a) is 01, go to Question 25 (d).

25 (c)(i)

What was the main subject of the second most recent course you completed?

- 01 Orientation for new employees
- 02 Managerial/supervisory training
- 03 Professional training
- 04 Apprenticeship training
- 05 Sales and marketing training
- 06 Computer hardware
- 07 Computer software
- 08 Other office or non-office equipment
- 09 Group decision-making or problem-solving
- 10 Team building, leadership, communication
- 11 Occupational health and safety, environmental protection
- 12 Literacy or numeracy
- 13 Other, specify _____

25 (c)(ii)

How long was the course? (Include only the time actually spent in training sessions.)

□ □ □ • □ days → Go to Question 25 (c) (ii) (a)

OR

□ □ □ • □ hours → Go to Question 25 (c) (iii)

25 (c)(ii) (a) How many hours per day?

□ □ • □ hours

25 (c)(iii)

Did the training take place at your workplace?

- 1 Yes, entirely
- 2 Partly
- 3 No, always elsewhere

25 (c)(iv)

Did the training take place during your normal working hours?

- 1 Yes
- 2 Partly
- 3 No

25 (c)(v) Who provided the training sessions? (Check all that apply.)

- 1 Supervisor
- 2 Fellow worker
- 3 In-house trainer
- 4 Outside trainer
- 5 Supplier
- 6 Other, specify _____

25 (c)(vi) To what extent are you using the skills or knowledge acquired in this training at work?

- 1 To a great extent
- 2 Somewhat
- 3 Not at all

25 (d) In the past twelve months, have you received any informal training related to your job (that is on-the-job training)?

- 1 Yes
- 3 No → Go to Question 26

25 (d)(i) What were the main subjects of the on-the-job training? (Check all that apply.)

- 01 Orientation for new employees
- 02 Managerial/supervisory training
- 03 Professional training
- 04 Apprenticeship training
- 05 Sales and marketing training
- 06 Computer hardware
- 07 Computer software
- 08 Other office or non-office equipment
- 09 Group decision-making or problem-solving
- 10 Team building, leadership, communication
- 11 Occupational health and safety, environmental protection
- 12 Literacy or numeracy
- 13 Other, specify _____

25 (d)(ii)

In the past twelve months, how much time in total was spent for on-the-job training? (Include only the time actually spent in training.)

• days → Go to Question 25 (d) (ii) (a)

OR

• hours → Go to Question 25 (d) (iii)

25 (d)(ii) (a) How many hours per day?

• hours

25 (d)(iii)

Who provided the training? (Check all that apply.)

- 1 Self-learning (manuals, books, on-line tutorials, etc.)
- 2 Supervisor
- 3 Fellow worker
- 4 In-house trainer
- 5 Outside trainer
- 6 Equipment supplier
- 7 Other, specify _____

25 (d)(iv)

To what extent are you using the skills or knowledge acquired in this training at work?

- 1 To a great extent
- 2 Somewhat
- 3 Not at all

26.

In the past twelve months, was there job-related training offered to you that you decided not to take?

- 1 Yes
- 3 No → Go to Question 26 (b)

26 (a) What was the main reason you decided not to take that training?

- 1 Too busy with my duties on the job
- 2 Courses not suitable (I already have the skills, heard bad things about the course, etc.)
- 3 Course too difficult
- 4 Health reasons
- 5 Family responsibilities
- 6 Too old, too late in career
- 7 Other, specify _____

26 (b) In the past twelve months, has your employer paid for or otherwise helped you to take courses, outside of your paid working hours, that were **not directly job-related**? (The objectives of these courses being for career development, not just interest.)

- 1 Yes
- 3 No → Go to Question 27

26 (c) How many such courses has your employer helped you to take in the past twelve months?

□ □ □

26 (d) Speaking of the most recent course, what was (were) the goal(s) of that course? (Check all that apply.)

- 1 Working towards a trade or vocational certificate or diploma
- 2 Working towards a degree or diploma
- 3 Working towards a professional designation
- 4 Increase literacy or numeracy skill
- 5 Other, specify _____

26 (e) Who paid for this course? (Check all that apply.)

- 1 My employer
- 2 Myself (the employee)
- 3 Another organization

Section 4 – Career-Related Training

27. In the past twelve months, have you taken any courses that were not sponsored by your employer but were career-related? (Excluding courses taken for personal interest).

¹ Yes

³ No → Go to Question 28

27 (a) How many different courses have you taken in the last twelve months?

□ □ □

27 (b)(i) What was the main subject of the last course you completed?

⁰¹ Managerial/supervisory training

⁰² Professional training

⁰³ Apprenticeship training

⁰⁴ Sales and marketing training

⁰⁵ Computer hardware

⁰⁶ Computer software

⁰⁷ Other office or non-office equipment

⁰⁸ Group decision-making or problem-solving

⁰⁹ Team building, leadership, communication

¹⁰ Occupational health and safety, environmental protection

¹¹ Literacy or numeracy

¹² Other, specify _____

27 (b)(ii) How long was the course? (Include only the time actually spent in training sessions.)

□ □ □ • □ days → Go to Question 27 (b) (ii) (a)

OR

□ □ □ • □ hours → Go to Question 27 (c) (i)

27 (b)(ii) (a) How many hours per day?

□ □ • □ hours

Instruction: If the answer to Question 27 (a) is 01, go to Question 28.

27 (c)(i)

What was the main subject of the second most recent course you completed?

- 01 Managerial/supervisory training
- 02 Professional training
- 03 Apprenticeship training
- 04 Sales and marketing training
- 05 Computer hardware
- 06 Computer software
- 07 Other office or non-office equipment
- 08 Group decision-making or problem-solving
- 09 Team building, leadership, communication
- 10 Occupational health and safety, environmental protection
- 11 Literacy or numeracy
- 12 Other, *specify* _____

27 (c)(ii)

How long did the course last? (Include only the time actually spent in training sessions.)

• days → Go to Question 27 (c) (ii) (a)

OR

• hours → Go to Question 28

27 (c)(ii) (a) How many hours per day?

• hours

28.

Since you began working in your job, have the overall skill requirements of the position:

- 1 increased?
- 2 remained about the same?
- 3 decreased?

29.

Since you began working for this company, has the amount of training available to employees:

- 1 increased?
- 2 remained about the same?
- 3 decreased?

30.

Would you say that the amount of training that you take is:

- 1 about right for the demands of the job?
- 2 too little for the demands of the job?
- 3 too much for the demands of the job?
- 4 Not applicable, no training required

Section 4A – Literacy and Numeracy Practices at Work

The next questions are about your reading, writing and mathematics activities at your job – whether these activities are done on paper or on computer.

30 (a) How often do you read or use information from one of the following as part of your job? Would you say at least once a week, less than once a week, rarely or never?

	At least once a week	Less than once a week	Rarely	Never
A. Letters, memos or e-mails	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
B. Reports, articles, magazines or journals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
C. Manuals or reference books including catalogues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
D. Diagrams or schematics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
E. Directions or instructions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
F. Bills, invoices, spreadsheets or budgets tables spreadsheets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

30 (b) Think about the importance of reading activities in relation to all of your other workplace activities. Would they be...

1 Just as important as all of your other activities?

2 Less important than all of your other activities?

3 More important than all of your other activities?

30 (c) How often do you write or fill out each of the following as part of your job? Would you say at least once a week, less than once a week, rarely or never?

	At least once a week	Less than once a week	Rarely	Never
A. Letters, memos or e-mails	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
B. Reports, articles, magazines or journals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
C. Manuals or reference books including catalogues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
D. Diagrams or schematics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
E. Directions or instructions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
F. Bills, invoices, spreadsheets or budgets tables spreadsheets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

30 (d) How often do you do each of the following as part of your job? Would you say at least once a week, less than once a week, rarely or never?

	At least once a week	Less than once a week	Rarely	Never
A. Measure or estimate the size or weight of objects	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
B. Calculate prices, costs, or budgets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
C. Count or read numbers to keep track of things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
D. Manage time or prepare timetables	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
E. Give or follow directions or use maps or street directions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
F. Use statistical data to reach conclusions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Section 5 – Employee Participation

The next few questions deal with employee participation in decisions regarding the workplace.

Reminder: Unless you answered "No" in question A (XL), the questions refer to the job you held in March 2005.

Although a program or policy may exist somewhere in your workplace, we are only interested in those that apply directly to you.

If the answer to any of questions 31 (a) to 31 (d) is "always", answer "frequently".

31 (a) How frequently are you asked to complete employee surveys?

- 1 Never
- 2 Occasionally
- 3 Frequently

31 (b) How frequently do you participate in an employee suggestion program or regular meetings in which you offer suggestions to your superiors regarding areas of work that may need improvement?

- 1 Never
- 2 Occasionally
- 3 Frequently

31 (c) How frequently do you participate in a job rotation or cross-training program where you work or are trained on a job with different duties than your regular job?

- 1 Never
- 2 Occasionally
- 3 Frequently

31 (d) How frequently are you informed (through meetings, newsletters, e-mail or Internet) about overall workplace performance, changes to workplace organization or the implementation of new technology?

- 1 Never
- 2 Occasionally
- 3 Frequently

31 (e) How frequently do you participate in a task team or labour-management committee that is concerned with a broad range of workplace issues?

Note: Task teams and labour-management committees make recommendations to line managers on such issues as safety, quality, scheduling, training and personal development programs.

¹ Never

² Occasionally

³ Frequently

⁴ Always

31 (f) How frequently do you participate in a team or circle concerned with quality or work flow issues?

¹ Never

² Occasionally

³ Frequently

⁴ Always

31 (g) How frequently are you part of a self-directed work group (or semi-autonomous work group or mini-enterprise group) that has a high level of responsibility for a particular product or service area? In such systems, part of your pay is normally related to group performance.

(Self-directed work groups:

- Are responsible for production of a fixed product or service, and have a high degree of autonomy in how they organize themselves to produce that product or service.
- Act almost as "businesses within businesses".
- Often have incentives related to productivity, timeliness and quality.
- While most have a designated leader, other members also contribute to the organization of the group's activities.)

¹ Never

² Occasionally

³ Frequently

⁴ Always

Section 6 – Personal and Family Support Programs

These questions cover the availability and use of practices that aim to help employees balance their careers and personal lives.

32. Does your employer offer personal support or family services such as childcare, employee assistance, eldercare, fitness and recreation services or other types of services?

¹ Yes

³ No → Go to Question 33

32 (a) Does your employer offer help for childcare either through an on-site centre or assistance with external suppliers or informal arrangements?

¹ Yes

³ No → Go to Question 32 (b)

32 (a)(i) Did you use this help within the past twelve months?

¹ Yes

³ No

32 (b) Does your employer offer employee assistance such as counselling, substance abuse control, financial assistance, legal aid, etc.?

¹ Yes

³ No → Go to Question 32 (c)

32 (b)(i) Did you use these services within the past twelve months?

¹ Yes

³ No

32 (c) Does your employer offer help with eldercare services?

¹ Yes

³ No → Go to Question 32 (d)

32 (c)(i) Did you use this help within the past twelve months?

¹ Yes

³ No

32 (d) Does your employer offer fitness and recreation services (on-site or off-site)?

¹ Yes

³ No → Go to Question 32 (e)

32 (d)(i) Did you use this service within the past twelve months?

¹ Yes

³ No

32 (e) Does your employer offer other personal support or family services?

¹ Yes

³ No → Go to Question 33

32 (e)(i) Please specify the type of service.

32 (e)(ii) Did you use this service within the past twelve months?

¹ Yes

³ No

Section 7 – Worker Representation and Industrial Relations

33. In your job, are you a member of a union or covered by a collective bargaining agreement?

¹ Yes

³ No

34. Is there a dispute, complaint, or grievance system in your workplace?

¹ Yes

³ No → Go to Question 35 (a)

34 (a) Have you had a dispute, complaint or grievance in the past twelve months?

¹ Yes

³ No → Go to Question 35 (a)

34 (b) What mechanisms were used to address your dispute, complaint, or grievance? (Check all that apply.)

¹ Informally addressed by manager/supervisor

² Management committee

³ Labour-management committee

⁴ Outside arbitrator

⁵ Other, specify _____

34 (c) Has the situation improved?

¹ Yes

³ No

Section 8 – Compensation

The next few questions deal with your earnings in your job.

Reminder: Unless you answered "No" in question A (XL), the questions refer to the job you held in March 2005.

35 (a) In your job, are you paid by the hour?

- ¹ Yes → Go to Question 35 (c)
³ No

35 (b) What is the easiest way for you to report your wage or salary, before taxes and other deductions? Would it be:

- ² daily
³ weekly
⁴ every two weeks
⁵ twice a month
⁶ monthly
⁷ yearly
⁸ other, specify _____

35 (c) What is your wage or salary, before taxes and other deductions?

\$ _____

Instruction: If you have been in this job for less than twelve months, please answer the following questions for the period of time since you started this job. Otherwise, answer for the past twelve months.

36 (b) Did you receive overtime payments in the past twelve months/since you started this job?

- ¹ Yes
³ No → Go to Question 36 (c)

36 (b)(i) What were your total earnings from overtime payments for that period?

\$ _____ • _____

36 (b)(ii) Were these earnings included in the wage or salary reported in question 35 (c)?

- ¹ Yes
³ No

36 (c) Did you receive any tips, commissions or piecework payments in the past twelve months/since you started this job?

1 Yes

3 No → Go to Question 36 (d)

36 (c)(i) What were your total earnings from tips, commissions or piecework payments for that period?

\$ •

36 (c)(ii) Were these earnings included in the wage or salary reported in question 35 (c)?

1 Yes

3 No

36 (d) Did you receive any productivity-related bonuses, profit-sharing or profit-related bonuses in the past twelve months/since you started this job?

1 Yes

3 No → Go to Question 36 (e)

36 (d)(i) What were your total earnings from productivity-related bonuses, profit-sharing or profit-related bonuses for that period?

\$ •

36 (d)(ii) Were these earnings included in the wage or salary reported in question 35 (c)?

1 Yes

3 No

36 (e) Did you receive any other bonuses in the past twelve months/since you started this job?

1 Yes, specify _____

3 No → Go to Question 37

36 (e)(i) What were your total earnings from other bonuses for that period?

\$ •

36 (e)(ii) Were these earnings included in the wage or salary reported in question 35 (c)?

1 Yes

3 No

The following questions cover the non-salary benefits related to this job.

37. Does your employer have any non-wage benefits such as pension plan, life insurance or dental plan?

¹ Yes

³ No → Go to Question 38

37 (a) Do you participate in an employer-sponsored pension plan? (This does not include CPP/QPP or group RRSPs.)

¹ Yes

³ No

37 (a)(i) In your company, is this benefit:

¹ Mandatory?

² Optional?

³ Not available?

37 (b) Do you participate in a group RRSP?

¹ Yes

³ No → Go to Question 37 (b)(ii)

37 (b)(i) Does your employer contribute to this plan?

¹ Yes

³ No

37 (b)(ii) In your company, is this plan:

¹ Mandatory?

² Optional?

³ Not available?

37 (c) In your job, do you participate in a life and/or disability insurance plan?

¹ Yes

³ No

37 (c)(i) In your company, are these benefits:

- ¹ Mandatory?
- ² Optional?
- ³ Not available?

37 (d) Do you participate in a supplemental medical insurance plan?

- ¹ Yes
- ³ No

Note: Examples: Drug co-payment plans, hospital stay co-payment plans, hearing-impaired benefit plan, vision care and other medical benefits not covered by provincial health plans.

37 (d)(i) In your company, is this benefit:

- ¹ Mandatory?
- ² Optional?
- ³ Not available?

37 (e) Do you participate in a dental plan?

- ¹ Yes
- ³ No

37 (e)(i) In your company, is this benefit:

- ¹ Mandatory?
- ² Optional?
- ³ Not available?

37 (f) Does your employer offer supplements to Employment Insurance benefits for maternity/parental leave or lay-offs?

- ¹ Yes
- ³ No

37 (g) In your job, do you participate in a stock purchase plan?

¹ Yes

³ No → Go to Question 38

37 (g)(i) Does your employer contribute to this plan or offer discounts on stock purchases?

¹ Yes

³ No

38. Considering all aspects of this job, how satisfied are you with the job? Would you say that you are:

¹ very satisfied?

² satisfied?

³ dissatisfied?

⁴ very dissatisfied?

39. Considering the duties and responsibilities of this job, how satisfied are you with the pay and benefits you receive? Would you say that you are:

¹ very satisfied?

² satisfied?

³ dissatisfied?

⁴ very dissatisfied?

Instruction: If your job title and your most important activities or duties have not changed (ES), go to Question 42.

If this is your first year responding to this questionnaire (EN), then go to Question 40.
Otherwise, go to Section X9 Job Comparisons Questions X40 (a) to X41 (d) (EL, XL).

Section X9 – Job Comparisons

X40 (a) In comparison to all the aspects of your previous job, is your new job:

- 1 better?
- 2 about the same?
- 3 worse?

X41 (a) Please indicate whether you think your working conditions are better, about the same or worse in your new job compared to the previous job you held.

General Working Conditions	Better	About the same	Worse	No opinion	Not applicable
A. Availability of flexible working arrangements (e.g. compressed work week, flexible hours, work at home, other flexible arrangements)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
B. Usual work hours	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
C. Availability of overtime	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
D. Availability of job or work sharing arrangements	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
E. Availability of personal and family support programs (e.g. childcare, employee assistance, eldercare, other types of services)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

X41 (b) Please specify any other working conditions that contributed to your decision to change jobs.

X41 (c) Please indicate whether you think your job opportunities are better, about the same or worse in your new job compared to the previous job you held.

Job Opportunities	Better	About the same	Worse	No opinion	Not applicable
A. <u>Opportunity for promotions</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
B. <u>Access to computers and other technologies</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
C. <u>Access to training and development</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
D. <u>Opportunity for career change</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
E. <u>Opportunity for employee participation (participating in decisions regarding the workplace)</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
F. <u>Access to worker representation (e.g. member of a union, staff and professional association)</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
G. <u>Salary increases</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
H. <u>Job security</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I. <u>Bonuses/Profit sharing</u>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

X41 (d) Please specify any other factors that contributed to your changing of jobs.

Section 9 – Work History/Turnover

Instruction: Go to Question 42 (ES, EL, XL).

40. Considering all jobs you have held, how many years of full-time working experience do you have?

• years

Instruction: If you have been working with this employer for more than 5 years, please go to Question 42.

40 (a) In the past five years, have you worked for any other employers, including yourself?

¹ Yes

³ No → Go to Question 40 (c)

40 (b) How many other employers have you worked for in the past five years, including self-employment?

40 (c) In that period, were you ever without work for more than two weeks when you were actively looking for work and not attending school on a full-time basis?

¹ Yes

³ No → Go to Question 40 (e) if the answer to question 40 (a) is "Yes", otherwise, go to Question 41.

40 (d) During the past five years how many months, in total, have you been unemployed (without having necessarily received employment benefits)?

• months

Instruction: If you reported "No" to Question 40 (a), then go to Question 41.

40 (e) Thinking about the last job you held before coming to work for your current employer, what was the main reason you left that job?

¹ Left for better pay, hours or career opportunities at current job

² Moved, immigrated, spouse relocated

³ Returned to school

⁴ Quit for any other reason

⁵ Laid off: plant closure or business failure

⁶ Laid off: business slowdown, restructuring, other reasons

⁷ End of contract, seasonal or temporary position

⁸ Left self-employment (sold business, own business failed, etc.)

⁹ Other, specify _____

Instruction: If you have worked for your current employer for more than twelve months, please go to Question 41.

40 (f) What was your job title?

40 (g) In that last job, what were your most important activities or duties?

40 (h) How many months did you work for that employer?

□ □ □ □ • □ months

40 (i) About how many hours did you usually work per week in that job (including overtime)?

□ □ □ □ • □ hours

40 (j) What was your usual wage or salary before taxes and other deductions?

\$ □ □ □ □ □ □ □ □ □ □ • □ □

- 1 hourly
- 2 daily
- 3 weekly
- 4 every two weeks
- 5 twice a month
- 6 monthly
- 7 yearly
- 8 Other, specify _____

40 (k) In that last job you held, did you have an employer-sponsored pension plan?

- 1 Yes
- 3 No

40 (l) Did you use a computer in that job?

- 1 Yes
- 3 No

40 (m) In the last twelve months on that last job, did you receive any formal training sponsored by your employer?

¹ Yes

³ No

41. Immediately before starting with your present employer, were you:

¹ working at another job → Go to Question 42

² looking for work

³ going to school → Go to Question 42

⁴ working at home, raising family, etc. → Go to Question 42

⁵ recuperating from illness or disability → Go to Question 42

⁶ Other, specify _____ → Go to Question 42

41 (a) How many weeks were you looking for work?

□ □ □ □ • □ weeks

42. Do you currently do any paid work for another employer?

Note: This includes self-employed work.

¹ Yes

³ No → Go to Question 43 (EN)

↳ Go to Question 45 (a) (ES, EL, XL)

42 (a) How many hours a week do you usually work at that (these) job(s)?

Job 1 □ □ □ □ • □ hours

Job 2 □ □ □ □ • □ hours

42 (b) What are your approximate weekly earnings in that (these) job(s)?

Job 1 \$ □ □ □ □ □ □ □ □ • □ □

Job 2 \$ □ □ □ □ □ □ □ □ • □ □

Instruction : Continue with Question 43 (EN). Go to Question 45 (a) (ES, EL, XL).

Section 10 – Demographics

Finally, we would like to ask some general questions about you and your family.

43. In what year were you born?

□ □ □ □ Year

44. GENDER

¹ Male

² Female

45 (a) What language do you most often use at work?

¹ English

² French

³ Other, specify _____

45 (b) What language do you most often speak at home?

¹ English

² French

³ Other, specify _____

Instruction: Continue with Question 46 (EN), Go to Question 47 (ES, EL, XL, XS).

46. Were you born in Canada?

¹ Yes → Go to Question 47

³ No

46 (a) In what year did you immigrate to Canada?

□ □ □ □ Year

46 (b) From what country did you emigrate?

Country: _____

47. What is the highest grade of elementary or high school (secondary school) that you have completed?

Please report the highest grade, not the year when it was completed.

□ □

48. Did you graduate from high school (secondary school)?

¹ Yes

³ No

49. Have you received any other education?

¹ Yes

³ No → Go to Question 51

50. What was that education? (Check all that apply.)

Trade-vocational:

⁰¹ Trade or vocational diploma or certificate

College:

⁰² Some college, CEGEP, institute of technology or nursing school

⁰³ Completed college, CEGEP, institute of technology or nursing school

University:

⁰⁴ Some university

⁰⁵ Teachers' college

⁰⁶ University certificate or diploma below bachelor level

⁰⁷ Bachelor or undergraduate degree or teachers' college (e.g. B.A., B.Sc., B.A.Sc., 4-year B.Ed.)

⁰⁸ University certificate or diploma above bachelor level

⁰⁹ Master's degree (M.A., M.Sc., M.Ed., MBA, MPA and equivalent)

¹⁰ Degree in medicine, dentistry, veterinary medicine, law, optometry or theology (M.D., D.D.S., D.M.D., D.V.M., LL.B., O.D., M.DIV.) or 1-year B.Ed. after another bachelor's degree

¹¹ Earned doctorate

Other:

¹² Industry certified training or certification courses

¹³ Other, specify _____

50 (a) What was the major field of study or training of your highest degree, certificate or diploma (excluding secondary or high school graduation certificates)?

51. What is your current legal marital status?

- 1 Legally married (and not separated) → Go to Question 53
- 2 Legally married and separated
- 3 Divorced
- 4 Widowed
- 5 Single (never married)

52. Are you currently living with a common-law partner?

- 1 Yes
- 3 No

53. Do you have any dependent children?

- 1 Yes
- 3 No → Go to Question 54 (a)

53 (a) Please indicate their ages, starting with the youngest. If any children are less than one year old, record age as "01".

1		2		3		4	
5		6		7		8	

Instruction: If all children's ages are greater than 12, go to Question 54 (a).

53 (b) Are any of your children in childcare (in the care of someone other than you or another legal guardian)? Please do not include regular school hours.

- 1 Yes
- 3 No

Since the worker's well-being is related to the family's income as well as his/her own income, we would like to ask you a few questions about your immediate family's earnings and income. These questions refer only to those family members living in your household.

54 (a) Over the past twelve months what were the approximate **annual employment earnings** of all members of your immediate family (including yourself)?

\$ •

54 (b) Over the past twelve months what was your **family's approximate annual income from sources other than employment?** For example: pensions, investment income and social benefits. Please include your own income from sources other than employment.

\$

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Instructions : • Continue with Question 55 (EN).

• If you are not a paid worker (XS), go to Question 57.

• If you are a paid worker (ES, EL, XL), go to Question 56 (a).

55. Canadians come from many ethnic, cultural and racial backgrounds. From which groups did your parents or grandparents descend? (Check all that apply.)

- 01 Canadian
- 20 American
- 02 British (from England, Scotland, Ireland, etc.)
- 03 French
- 04 Any other European groups
- 05 Arab (from Egypt, Jordan, Lebanon, Iraq, etc.)
- 06 Black (from Africa, Caribbean, Haiti, U.S.A., Canada, etc.)
- 07 Chinese
- 08 East Indian (from India, Pakistan, East Africa, etc.)
- 09 Filipino
- 10 Inuit (Eskimo)
- 11 Japanese
- 12 Korean
- 13 Latin American (from Mexico, Central America or South America)
- 14 Métis
- 15 North American Indian (First Nations, Aboriginal persons, Native Peoples)
- 16 North African (from Egypt, Morocco, Algeria, etc.)
- 17 South East Asian (from Burma, Cambodia, Laos, Viet Nam, etc.)
- 18 West Asian (from Syria, Turkey, Afghanistan, Iran, etc.)
- 19 Other, specify _____

56 (a) Does your employer have any recruitment or career programs for minority groups?

¹ Yes

³ No → Go to Question 57

56 (b) Have you ever participated in these programs?

¹ Yes

³ No

Instruction: These questions refer to conditions or health problems that have lasted or are expected to last **six months or more.**

57. Do you have any difficulty hearing, seeing, communicating, walking, climbing stairs, bending, learning or doing any similar activities?

¹ Yes, sometimes

² Yes, often

³ No

57 (a) Does a physical condition **or** mental condition **or** health problem **reduce the amount or the kind of** activity **you can do...**

A) At home?

¹ Yes, sometimes

² Yes, often

³ No

Instruction: If you are not a paid worker (XS), go to Question 57 (a) C).

B) At work or at school?

¹ Yes, sometimes

² Yes, often

³ No

⁴ Not applicable

C) In other activities, for example, transportation or leisure?

¹ Yes, sometimes

² Yes, often

³ No

Instructions: If you are new to this survey (EN) or if you have a different job (EL) or the same job (ES) as the previous year and you answered "1 or 2" to Question 57, then *continue with Question 58*; otherwise, *go to Question 59*.

If you are not a paid worker (XS) and you answered "1 or 2" to Question 57, then *go to Question 58 (b)*; otherwise, *go to the end of the interview*.

If you are a paid worker (XL) and you answered "1 or 2" to Question 57, then *continue with Question 58*; otherwise, *go to the end of the interview*.

58. Does your employer have any recruitment or career programs for employees with disabilities?

¹ Yes

³ No → *Go to Question 58 (b)*

58 (a) Have you ever participated in these programs?

¹ Yes

³ No

58 (b) Do you need altered facilities or equipment aids to help accommodate your condition?

¹ Yes

³ No → *Go to Question 59*

Instruction: If you are not a paid worker (XS), *go to Question 59*.

58 (c) Does your employer provide these altered facilities, equipment or aids to you?

¹ Yes

³ No

59. In case we have difficulty in reaching you next year, could you please give us the name and telephone number of a relative or someone we could call to obtain your telephone number.

Last name _____

Given name _____

Telephone number (_____) _____

On behalf of Statistics Canada, we would like to thank you for taking the time to answer this survey.

Please use this list if you know the name of the application but you are not sure under which category it falls. The numbers correspond to the numbers to the left of the circles in Question 22 (c).

Access (database)	3	Lotus 1-2-3	2
Access (programming)	7	Management applications	5
Adabas (database)	3	Microsoft Office	4
Adabas (programming)	7	Microsoft Project	5
Ami Pro	1	MS-QUERY	9
Basic	7	MS-Write	1
C	7	Net Bui	6
C++	7	Netscape	6
Clipper	7	Oracle (database)	3
COBOL	7	Oracle (programming)	7
Communications	6	Orange	13
Compuserve	6	Other	14
Computer Aided Design	11	Outlook	6
Corel Draw	10	Outsideln	6
Correcteur 101	8	Pagemaker	4
Crystal Reports	4	Paradox (database)	3
Data Analysis	9	Paradox (programming)	7
Databases	3	PCTCP	6
DB-2	3	PerForm Pro	4
dBase (database)	3	PL/1	7
dBase (programming)	7	PM-Work Bench	5
DELPHI	7	Power Builder	7
Desktop Publishing	4	Power Play	9
Developer	12	Powerpoint	10
Development tool	7	Programming language	7
E-mail systems	6	Quattro Pro	2
Easycase	12	SAS (data analysis)	9
Excel	2	SAS (programming)	7
Excellerator	12	SGML	1
Extra!	6	SmallTalk	7
FAME	9	Spreadsheets	2
Form Design	4	SPSS	9
Fortran	7	SQL	7
Foxpro (database)	3	SQL Server	3
Foxpro (programming)	7	SQL Windows	7
Framemaker	4	Statgraphics	9
Freelance	10	StatPac	9
GML	1	STP	12
Graphics and presentation	10	SUDAAN	9
Harvard Graphics	10	Sybase	3
HTML (communications)	6	Systems Architect	12
HTML (programming)	7	Timeline	5
Hugo	8	Turbo Pascal	7
Internet	6	Ventura	4
Intranet	6	Visual Basic	7
JAVA (communications)	6	Word	1
JAVA (programming)	7	Wordperfect	1
Jetform	4	Wordpro	1
Lotus Smart Suite Integration	4	Wordprocessors	1