

NOTICE - We are conducting this survey under the authority of Title 13, United States Code, Section 8. Section 9 of this law requires us to keep all information about you and your household strictly **confidential**. We may use this information only for statistical purposes. Also, Title 42, Section 3732, United States Code, authorizes the Bureau of Justice Statistics, Department of Justice, to collect information using this survey. Title 42, Sections 3789g and 3735, United States Code, also requires us to keep all information about you and your household strictly confidential.

FORM **NCVS-1**
(5-10-2001)

U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU

ACTING AS COLLECTING AGENT FOR THE
BUREAU OF JUSTICE STATISTICS
U.S. DEPARTMENT OF JUSTICE

**NATIONAL CRIME
VICTIMIZATION SURVEY
NCVS-1 BASIC SCREEN QUESTIONNAIRE**

BEFORE INTERVIEW - TRANSCRIBE FROM CONTROL CARD

Sample (cc item 1) J _____	Control number (cc item 2) PSU Segment CK. Serial	HH No. (cc item 3)
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AFTER INTERVIEW - TRANSCRIBE FROM CONTROL CARD - Cont.

ITEMS FILLED AT START OF INTERVIEW

1. Field representative identification
Code | Name
201 | |

2. Unit status
202 1 Unit in sample the previous enumeration period - *Fill 3*
2 Unit in sample first time this period - **SKIP** to 4

3. Household status - Mark first box that applies.
203 1 Same household interviewed the previous enumeration
2 Replacement household since the previous enumeration
3 Noninterview the previous enumeration
4 Other - *Specify* _____

4. Line number of household respondent
204 _____ *Go to page 2*

AFTER INTERVIEW - TRANSCRIBE FROM CONTROL CARD

5. Special place/GQ type code (cc item 6d)
205 _____

6. Tenure (cc item 8a)
206 1 Owned or being bought 2 Rented for cash 3 No cash rent

7. Land use (cc item 9)
207 1 Urban 2 Rural

8. Farm sales (cc item 10)
208 x Item blank 1 \$1,000 or more 2 Less than \$1,000

9. Type of living quarters (cc items 11c and 11d)
Housing unit
209 1 House, apartment, flat
2 HU in nontransient hotel, motel, etc.
3 HU permanent in transient hotel, motel, etc.
4 HU in rooming house
5 Mobile home or trailer with no permanent room added
6 Mobile home or trailer with one or more permanent rooms added
7 HU not specified above - *Describe* _____

OTHER unit
8 Quarters not HU in rooming or boarding house
9 Unit not permanent in transient hotel, motel, etc.
10 Unoccupied site for mobile home, trailer, or tent
11 Student quarters in college dormitory
12 OTHER unit not specified above - *Describe* _____

Use of telephone (cc item 26a and b)
10a. Location of phone - Mark first box that applies.
210 1 Phone in unit
2 Phone in common area (hallway, etc.) . . .
3 Phone in another unit (neighbor, friend, etc.)
4 Work/office phone
5 No phone - **SKIP** to 11a } *Fill 10b*

10b. Is phone interview acceptable? (cc item 26d)
211 1 Yes 2 No 3 Refused to give number

11a. Number of housing units in structure (cc item 27a)
212 1 1 - **SKIP** to 12a 4 4 7 Mobile home or trailer - **SKIP** to 12a
2 2 5 5-9
3 3 6 10+ 8 Only OTHER units

11b. Direct outside access (cc item 27b)
213 1 Yes 2 No 3 DK x Item blank

12a. Household Income (cc item 28)
214 1 Less than \$5,000 6 15,000 - 11 35,000 -
2 \$5,000 - 7 17,500 - 12 40,000 -
3 7,500 - 8 20,000 - 13 50,000 -
4 10,000 - 9 25,000 - 14 75,000 and over
5 12,500 - 10 30,000 -

12b. College/University (cc item 8b)
218 1 Yes 2 No

12c. Public Housing (cc item 8c)
219 x Item blank 1 Yes (public housing) 2 No (not public housing)

12d. Manager Verification of Public Housing (cc item 8d)
220 x Item blank
Able to verify Unable to verify
1 Public housing 3 CATI/Telephone
2 Not public housing 4 Other - *Specify* _____

12e. Indian Reservation or Indian Lands (cc item 8e)
221 1 Yes 2 No

ITEMS FILLED DURING AND/OR AFTER INTERVIEW

13. Proxy information - Fill for all proxy interviews

a. Proxy interview obtained for Line No.	b. Proxy respondent Name	Line No.	c. Reason (Enter code)
301		302	303
304		305	306
307		308	309
310		311	312

Codes for item 13c
1-12-13 years old and parent refused permission for self interview
2- Physically/mentally unable to answer } *FILL INTER-COMM*
3- TA and won't return before closeout }

14. Type Z noninterview

a. Interview not obtained for Line No.	b. Reason (Enter code)	Codes for item 14b
313	314	1 - Never available 2 - Refused 3 - Physically mentally unable to answer - no proxy available 4 - TA and no proxy available 5 - Other 6 - Office use only
315	316	
317	318	
319	320	

FILL INTER-COMM

▶ *Complete 17-28 for each Line No. in 14a*

15a. Household members 12 years of age and OVER
321 _____ Total number

15b. Household members UNDER 12 years of age
322 _____ Total number
o None

15c. Crime Incident Reports filled
323 _____ Total number of NCVS-2s filled
o None

16. Changes in Household Composition (cc item 25a)

a. Line No.	b. Reason (Enter code)
324	325
326	327
328	329
330	331

Only transcribe changes discovered during the current enumeration

HOUSEHOLD RESPONDENT'S PERSONAL CHARACTERISTICS

17. NAME (of household respondent)	18. Type of interview	19. Line No.
Last	<input type="checkbox"/> 401 1 <input type="checkbox"/> Per. – Self-respondent 2 <input type="checkbox"/> Tel. – Self-respondent 3 <input type="checkbox"/> Per. – Proxy } <i>Fill 13 on cover page</i> 4 <input type="checkbox"/> Tel. – Proxy }	<input type="checkbox"/> 402 Line No.
First		

AFTER INTERVIEW - TRANSCRIBE FROM CONTROL CARD

20. <i>(cc 13b)</i> Relationship to reference person	21. <i>(cc 17)</i> Age last birthday	22a. <i>(cc 18)</i> Marital status THIS survey period	22b. <i>(From previous enumeration)</i> Marital status LAST survey period	23. <i>(cc 19)</i> Sex	24. <i>(cc 20)</i> Armed Forces member	25a. <i>(cc 21a)</i> Education -highest grade	25b. <i>(cc 21b)</i> Education -complete that year?	26. <i>(cc 22)</i> Attending school	27. <i>(cc 23)</i> Race	28. <i>(cc 24)</i> Hispanic origin
<input type="checkbox"/> 403 01 <input type="checkbox"/> Husband 02 <input type="checkbox"/> Wife 03 <input type="checkbox"/> Son 04 <input type="checkbox"/> Daughter 05 <input type="checkbox"/> Father 06 <input type="checkbox"/> Mother 07 <input type="checkbox"/> Brother 08 <input type="checkbox"/> Sister 09 <input type="checkbox"/> Other relative 10 <input type="checkbox"/> Nonrelative 11 <input type="checkbox"/> Ref. person	<input type="checkbox"/> 404 Age	<input type="checkbox"/> 405 1 <input type="checkbox"/> Married 2 <input type="checkbox"/> Widowed 3 <input type="checkbox"/> Divorced 4 <input type="checkbox"/> Separated 5 <input type="checkbox"/> Never married	<input type="checkbox"/> 406 1 <input type="checkbox"/> Married 2 <input type="checkbox"/> Widowed 3 <input type="checkbox"/> Divorced 4 <input type="checkbox"/> Separated 5 <input type="checkbox"/> Never married 6 <input type="checkbox"/> Not interviewed last survey period	<input type="checkbox"/> 407 1 <input type="checkbox"/> M 2 <input type="checkbox"/> F	<input type="checkbox"/> 408 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="checkbox"/> 409 Grade	<input type="checkbox"/> 410 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="checkbox"/> 411 0 <input type="checkbox"/> Regular school 1 <input type="checkbox"/> College/University 2 <input type="checkbox"/> Trade school 3 <input type="checkbox"/> Vocational school 4 <input type="checkbox"/> None of the above schools	<input type="checkbox"/> 412 1 <input type="checkbox"/> White 2 <input type="checkbox"/> Black 3 <input type="checkbox"/> Amer. Indian, Aleut, Eskimo 4 <input type="checkbox"/> Asian, Pacific Islander 5 <input type="checkbox"/> Other	<input type="checkbox"/> 413 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No

29. Date of interview _____ → 501

Month	Day	Year	

MOBILITY QUESTIONS

Before we get to the crime questions, I have some questions that are helpful in studying where and why crimes occur.
If unsure, ASK OR VERIFY –

33a. How long have you lived at this address? 505 _____ Months (1-11) – **SKIP** to 33b
(Enter number of months OR years.)

OR

506 _____ Years (Round to nearest whole year) – *Fill Check Item A*

CHECK ITEM A How many years are entered in 33a?

5 years or more – **SKIP** to 34
 Less than 5 years – *Ask 33b*

33b. Altogether, how many times have you moved in the last 5 years, that is, since _____, 19__? 508 _____ Number of times

BUSINESS OPERATED FROM SAMPLE ADDRESS

34. Does anyone in this household operate a business from this address? 530 1 Yes – *Go to 35*
2 No – **SKIP** to 36a

PERSONAL – *Fill by observation.*
TELEPHONE – *Ask.*

35. Is there a sign on the premises or some other indication to the general public that a business is operated from this address? 531 1 Yes (Recognizable business)
2 No (Unrecognizable business)

HOUSEHOLD RESPONDENT'S SCREEN QUESTIONS

44a. During the last 6 months, (other than any incidents already mentioned,) did you call the police to report something that happened to YOU which you thought was a crime?

Briefly describe incident(s) ↗

547 1 Yes – **What happened?**
Describe above
2 No – **SKIP** to 45a

548

*

OFFICE USE ONLY

CHECK ITEM C

Look at 44a. If unsure, ASK, otherwise, mark without asking. **Were you** (was the respondent) **attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you** (the respondent) **or another household member?**

549 1 Yes – Ask 44b
2 No – **SKIP** to 45a

44b. How many times?

550

_____ Number of times (44b)

45a. During the last 6 months, (other than any incidents already mentioned,) did anything which you thought was a crime happen to YOU, but you did NOT report to the police?

Briefly describe incident(s) ↗

551 1 Yes – **What happened?**
Describe above
2 No – **SKIP** to INTRO at top of page 7

552

*

OFFICE USE ONLY

CHECK ITEM B

Look at 45a. If unsure, ASK, otherwise, mark without asking. **Were you** (was the respondent) **attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you** (the respondent) **or another household member?**

553 1 Yes – Ask 45b
2 No – **SKIP** to INTRO at top of page 7

45b. How many times?

554

_____ Number of times (45b)

NOTES

HOUSEHOLD RESPONDENT'S COMPUTER CRIME SCREEN QUESTIONS

FIELD REPRESENTATIVE – *Read introduction.*

INTRO: The next series of questions are about YOUR use of a computer. Please include ALL computers, laptops, or access to WebTV used at home, work, or school for PERSONAL USE or for operating a home business.

45c. During the last 6 months, have YOU used a computer, laptop, or WebTV for the following purposes
(Read answer categories 1-4) –

Mark (X) all that apply.

- 100** * 1 For personal use at home?
 2 For personal use at work?
 3 For personal use at school, libraries, etc.?
 4 To operate a home business?
 5 None of the above – **SKIP** to Check Item D

45d. How many computers do you have access to for personal use or for operating a home business?

- 101** 0 None
 1 1
 2 2
 3 3
 4 4 or more

45e. Do YOU use the Internet for personal use or for operating a home business?

- 102** 1 Personal use
 2 Operating a home business
 3 Both
 4 None of the above

45f. Have you experienced any of the following COMPUTER-RELATED incidents in the last 6 months
(Read answer categories 1-6) –

Mark (X) all that apply.

- 103** * 1 Fraud in purchasing something over the Internet?
 2 Computer virus attack?
 3 Threats of harm or physical attack made while online or through E-mail?
 4 Unrequested lewd or obscene messages, communications, or images while online or through E-mail?
 5 (Only ask if box 4 is marked in Item 45c) Software copyright violation in connection with a home business?
 6 Something else that you consider a computer-related crime?–Specify

 7 No computer-related incidents –**SKIP** to Check Item D

45g. Did you suffer any monetary loss as a result of the incident(s) you just mentioned?

- 104** 1 Yes
 2 No – **SKIP** to 45i

45h. How much money did you lose as a result of the incident(s)?

- 105** \$ _____ .00 Amount of loss
 Don't know

45i. Did you report the incident(s) you just mentioned to
(Read answer categories 1-5) –

Mark (X) all that apply.

- 106** * 1 A law enforcement agency?
 2 An Internet Service provider?
 3 A Website administrator?
 4 A Systems Administrator?
 5 Someone else? – Specify

 6 None of the above

HOUSEHOLD RESPONDENT'S CHECK ITEMS D AND E

CHECK ITEM D

Who besides the respondent was present when the screen questions were asked? *(If telephone interview, mark box 1 only.)*

- 555** * 1 Telephone interview – **SKIP** to 46a
Personal interview – Mark all that apply.
 2 No one besides respondent present
 3 Respondent's spouse
 4 HHLD member(s) 12+, not spouse
 5 HHLD member(s) under 12
 6 Nonhousehold member(s)
 7 Someone was present – Can't say who
 8 Don't know if someone else present

CHECK ITEM E

If self-response interview, SKIP to 46a
 Did the person for whom this interview was taken help the proxy respondent answer any screen questions?

- 556** 1 Yes
 2 No
 3 Person for whom interview taken not present

HOUSEHOLD RESPONDENT'S VANDALISM SCREEN QUESTIONS

46a. Now I'd like to ask about ALL acts of vandalism that may have been committed during the last 6 months against YOUR household. Vandalism is the deliberate, intentional damage to or destruction of household property. Examples are breaking windows, slashing tires, and painting graffiti on walls.

Since _____, 20 ____, has anyone intentionally damaged or destroyed property owned by you or someone else in your household?

(EXCLUDE any damage done in conjunction with incidents already mentioned.)

- 557** 1 Yes
2 No – **SKIP** to Check Item G

46b. What kind of property was damaged or destroyed in this/these act(s) of vandalism? Anything else?

Continue asking "Anything else?" until you get a "No" response.

Mark (X) all property that was damaged or destroyed by vandalism during reference period.

- 558** * 1 Motor vehicle (including parts)
2 Bicycle (including parts)
3 Mailbox
4 House window/screen/door
5 Yard or garden (trees, shrubs, fence, etc.)
6 Furniture, other household goods
7 Clothing
8 Animal (pet, livestock, etc.)
9 Other – Specify ↘

46c. What kind of damage was done in this/these act(s) of vandalism? Anything else?

Continue asking "Anything else?" until you get a "No" response.

Mark (X) all kinds of damage by vandals that occurred during reference period.

- 559** * 1 Broken glass: window, windshield, glass in door, mirror
2 Defaced: marred, graffiti, dirtied
3 Burned: use of fire, heat or explosives
4 Drove into or ran over with vehicle
5 Other breaking or tearing
6 Injured or killed animals
7 Other – Specify ↘

46d. What was the total dollar amount of the damage caused by this/these act(s) of vandalism during the last 6 months? (Use repair costs if the property was repaired.)

(EXCLUDE any damage done in incidents already mentioned.)

- 560** \$ _____ . **00** – **SKIP** to Check Item F1
x Don't know
o No cost – **SKIP** to Check Item F1

46e. Was the damage under \$100 or \$100 or more?

(INCLUDE total amount for all incidents of vandalism during the last 6 months.)

- 561** 1 Under \$100
2 \$100 or more
3 Don't know

CHECK ITEM F1

Look at 46a. If unsure, ASK, otherwise, mark without asking. **In the vandalism just mentioned, were you (was the respondent) attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you (the respondent) or another household member? (other than any incident(s) already mentioned)**

Briefly describe incident(s) ↘

- 562** 1 Yes – **What happened?**
Describe above
2 No – **SKIP** to 46g

46f. How many times?

- 563** _____
Number of times (46f)

NOTES

HOUSEHOLD RESPONDENT'S HATE CRIME SCREEN QUESTIONS

46g. Hate crimes or crimes of prejudice or bigotry occur when (an offender/offenders) target(s) people because of one or more of their characteristics or religious beliefs.

Do you have any reason to suspect the vandalism just discussed was a hate crime or crime of prejudice or bigotry?

- 586** 1 Yes – Ask 46h
 2 No } **SKIP to Check Item G**
 3 Don't know ..

46h. An offender/Offenders can target people for a variety of reasons, but we are only going to ask you about a few today. Do you suspect the offender(s) targeted you because of...

(a) Your race?

- 564** 1 Yes 2 No 3 Don't know

(b) Your religion?

- 565** 1 Yes 2 No 3 Don't know

(c) Your ethnic background or national origin (for example, people of Hispanic origin)?

- 566** 1 Yes 2 No 3 Don't know

(d) Any disability (by this I mean physical, mental, or developmental disabilities) you may have? ...

- 567** 1 Yes 2 No 3 Don't know

(e) Your gender?

- 568** 1 Yes 2 No 3 Don't know

(f) Your sexual orientation?

- 569** 1 Yes 2 No 3 Don't know

If "Yes," SAY – (by this we mean homosexual, bisexual, or heterosexual)

46i. Some offenders target people because they associate with certain people or the (offender perceives/ offenders perceive) them as having certain characteristics or religious beliefs.

Do you suspect you were targeted because of...

(a) Your association with people who have certain characteristics or religious beliefs (for example, a multiracial couple)?

- 587** 1 Yes –Specify ↘ 2 No 3 Don't know

588 _____

(b) The offender(s)'s perception of your characteristics or religious beliefs (for example, the offender(s) thought you were Jewish because you went into a synagogue)?

- 589** 1 Yes – Specify ↘ 2 No 3 Don't know

590 _____

CHECK ITEM F2

Are one or more boxes marked "Yes" in 46h OR 46i?

- Yes – Ask 46j
 No – **SKIP to Check Item G**

46j. Do you have any evidence that this vandalism was a hate crime or crime of prejudice or bigotry?

If "No" or "Don't know," ASK –

- 591** 1 Yes – Ask 46k
 2 No } **SKIP to Check Item G**
 3 Don't know ..

Did the offender(s) say something, write anything, or leave anything behind at the crime scene that would suggest you were targeted because of your characteristics or religious beliefs?

HOUSEHOLD RESPONDENT'S HATE CRIME SCREEN QUESTIONS

46k. The next questions ask about the evidence you have that makes you suspect this vandalism was a hate crime or a crime of prejudice or bigotry. As I read the following questions, please tell me if any of the following happened:

- | | | | | |
|---|-------------------|---------------------------------------|--------------------------------------|--|
| <p>(a) Did the offender(s) make fun of you, make negative comments, use slang, hurtful words, or abusive language?</p> | <p>592</p> | <p>1 <input type="checkbox"/> Yes</p> | <p>2 <input type="checkbox"/> No</p> | <p>3 <input type="checkbox"/> Don't know</p> |
| <p>(b) Were any hate symbols present at the crime scene to indicate the offender(s) targeted you for a particular reason (for example, a swastika, graffiti on the walls of a temple, a burning cross, or written words)?</p> | <p>593</p> | <p>1 <input type="checkbox"/> Yes</p> | <p>2 <input type="checkbox"/> No</p> | <p>3 <input type="checkbox"/> Don't know</p> |
| <p>(c) Did a police investigation confirm the offender(s) targeted you (for example, did the offender(s) confess a motive, or did the police find books, journals, or pictures that indicated the offender(s) (was/were) prejudiced against people with certain characteristics or religious beliefs)?</p> | <p>594</p> | <p>1 <input type="checkbox"/> Yes</p> | <p>2 <input type="checkbox"/> No</p> | <p>3 <input type="checkbox"/> Don't know</p> |
| <p>(d) Do you know the offender(s) (has/have) committed similar hate crimes or crimes of prejudice or bigotry in the past?</p> | <p>595</p> | <p>1 <input type="checkbox"/> Yes</p> | <p>2 <input type="checkbox"/> No</p> | <p>3 <input type="checkbox"/> Don't know</p> |
| <p>(e) Did the vandalism occur on or near a holiday, event, location, gathering place, or building commonly associated with a specific group (for example, at the Gay Pride March or at a synagogue, Korean church, or gay bar)?</p> | <p>596</p> | <p>1 <input type="checkbox"/> Yes</p> | <p>2 <input type="checkbox"/> No</p> | <p>3 <input type="checkbox"/> Don't know</p> |
| <p>(f) Have other hate crimes or crimes of prejudice or bigotry happened to you or in your area/neighborhood where people have been targeted?</p> | <p>597</p> | <p>1 <input type="checkbox"/> Yes</p> | <p>2 <input type="checkbox"/> No</p> | <p>3 <input type="checkbox"/> Don't know</p> |
| <p>(g) Do your feelings, instincts, or perception lead you to suspect this vandalism was a hate crime or crime of prejudice or bigotry, but you do not have enough evidence to know for sure?</p> | <p>598</p> | <p>1 <input type="checkbox"/> Yes</p> | <p>2 <input type="checkbox"/> No</p> | <p>3 <input type="checkbox"/> Don't know</p> |

HOUSEHOLD RESPONDENT'S CHECK ITEM G

CHECK ITEM G

Transcribe "number of times" entry for each of the following:

- (a)** Screen Question, Item 36c, page 3
- (b)** Screen Question, Item 37c, page 3
- (c)** Screen Question, Item 39c, page 4
- (d)** Screen Question, Item 40c, page 4
- (e)** Screen Question, Item 41c, page 5
- (f)** Screen Question, Item 42c, page 5
- (g)** Screen Question, Item 43c, page 5
- (h)** Screen Question, Item 44b, page 6
- (i)** Screen Question, Item 45b, page 6
- (j)** Vandalism Screen Question, Item 46f, page 8

No entries transcribed below – Go to Check Item H

- _____ Number of times (36c)
- _____ Number of times (37c)
- _____ Number of times (39c)
- _____ Number of times (40c)
- _____ Number of times (41c)
- _____ Number of times (42c)
- _____ Number of times (43c)
- _____ Number of times (44b)
- _____ Number of times (45b)
- _____ Number of times (46f)

*FIELD REPRESENTATIVE – After completing Check Item G, fill a separate crime incident report for each screen question that has an entry of 1 or more. Do this **before** marking Check Item H.*

HOUSEHOLD RESPONDENT'S EMPLOYMENT QUESTIONS

Be sure to fill any incident reports before marking Check Item H.

CHECK ITEM H	Is the respondent 16 years or older?	1 <input type="checkbox"/> Yes – Ask 47a 2 <input type="checkbox"/> No – SKIP to Check Item I
47a.	Did you have a job or work at a business LAST WEEK? (Do not include volunteer work or work around the house.) (If farm or business operator in household, ask about unpaid work.)	576 1 <input type="checkbox"/> Yes – SKIP to 48a 2 <input type="checkbox"/> No – Ask 47b
47b.	ASK OR VERIFY – Did you have a job or work at a business DURING THE LAST 6 MONTHS?	577 1 <input type="checkbox"/> Yes – Ask 47c 2 <input type="checkbox"/> No – SKIP to Check Item I
47c.	Did that (job/work) last 2 consecutive weeks or more?	578 1 <input type="checkbox"/> Yes – Ask 48a 2 <input type="checkbox"/> No – SKIP to Check Item I
48a.	ASK OR VERIFY – Which of the following best describes your job? PERSONAL INTERVIEW (Show flashcard) TELEPHONE INTERVIEW – Were you employed in the (Read main headings until you get a yes. Then read answer categories) – Mark (X) only one category.	579 <p>Medical Profession – As a –</p> 1 <input type="checkbox"/> Physician 2 <input type="checkbox"/> Nurse 3 <input type="checkbox"/> Technician 4 <input type="checkbox"/> Other – Specify _____ <p>Mental Health Services Field – Are your duties –</p> 5 <input type="checkbox"/> Professional (Social worker/psychiatrist) 6 <input type="checkbox"/> Custodial care 7 <input type="checkbox"/> Other – Specify _____ <p>Teaching Profession – Were you employed in a –</p> 8 <input type="checkbox"/> Preschool 9 <input type="checkbox"/> Elementary 10 <input type="checkbox"/> Junior high or middle school 11 <input type="checkbox"/> High school 12 <input type="checkbox"/> College or university 13 <input type="checkbox"/> Technical or industrial school 14 <input type="checkbox"/> Special education facility 15 <input type="checkbox"/> Other – Specify _____ <p>Law Enforcement or Security Field – Were you employed as a –</p> 16 <input type="checkbox"/> Law enforcement officer 17 <input type="checkbox"/> Prison or jail guard 18 <input type="checkbox"/> Security guard 19 <input type="checkbox"/> Other – Specify _____ <p>Retail Sales – Were you employed as a –</p> 20 <input type="checkbox"/> Convenience or liquor store clerk 21 <input type="checkbox"/> Gas station attendant 22 <input type="checkbox"/> Bartender 23 <input type="checkbox"/> Other – Specify _____ <p>Transportation Field – Were you employed as a –</p> 24 <input type="checkbox"/> Bus driver 25 <input type="checkbox"/> Taxi cab driver 26 <input type="checkbox"/> Other – Specify _____ <p align="center">OR</p> 27 <input type="checkbox"/> Something else – Specify _____
48b.	ASK OR VERIFY – Is your job with (Read answer categories) –	580 1 <input type="checkbox"/> A private company, business, or individual for wages? 2 <input type="checkbox"/> The Federal government? 3 <input type="checkbox"/> A State, county, or local government? 4 <input type="checkbox"/> Yourself (Self-employed) in your own business, professional practice, or farm?
48c.	If box 12 is marked in 48a, mark without asking. Are you employed by a college or university?	581 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
48d.	(Read answer categories) – While working at your job, do you work mostly in	582 1 <input type="checkbox"/> A city? 2 <input type="checkbox"/> Suburban area? 3 <input type="checkbox"/> Rural area? 4 <input type="checkbox"/> Combination of any of these?
CHECK ITEM I	Is this the last household member to be interviewed?	<input type="checkbox"/> Yes – Ask or verify Control Card items. Then END interview. <input type="checkbox"/> No – Ask or verify Control Card items. See note below before interviewing next household member.

*FIELD REPRESENTATIVE – If the next household member to be interviewed is under 18, tell the household respondent that you will be asking the **same** questions you just asked him/her.*

INDIVIDUAL'S SCREEN QUESTIONS

44a. During the last 6 months, (other than any incidents already mentioned,) did you call the police to report something that happened to YOU which you thought was a crime?

Briefly describe incident(s) ↘

547 1 Yes – **What happened?**
Describe above
2 No – **SKIP** to 45a

548

*

OFFICE USE ONLY

CHECK ITEM B

Look at 44a. If unsure, ASK, otherwise, mark without asking. **Were you** (was the respondent) **attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you** (the respondent) **or another household member?**

549 1 Yes – Ask 44b
2 No – **SKIP** to 45a

44b. How many times?

550

_____ Number of times (44b)

45a. During the last 6 months, (other than any incidents already mentioned,) did anything which you thought was a crime happen to YOU, but you did NOT report to the police?

Briefly describe incident(s) ↘

551 1 Yes – **What happened?**
Describe above
2 No – **SKIP** to *INTRO* below

552

*

OFFICE USE ONLY

CHECK ITEM C

Look at 45a. If unsure, ASK, otherwise, mark without asking. **Were you** (was the respondent) **attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you** (the respondent) **or another household member?**

553 1 Yes – Ask 45b
2 No – **SKIP** to *INTRO* below

45b. How many times?

554

_____ Number of times (45b)

INDIVIDUAL'S COMPUTER CRIME SCREEN QUESTIONS

FIELD REPRESENTATIVE – Read introduction.

INTRO: The next series of questions are about YOUR use of a computer. Please include ALL computers, laptops, or access to WebTV used at home, work, or school for PERSONAL USE or for operating a home business.

45c. During the last 6 months, have YOU used a computer, laptop, or WebTV for the following purposes

(Read answer categories 1–4) –

Mark (X) all that apply.

100

*

- 1 For personal use at home?
- 2 For personal use at work?
- 3 For personal use at school, libraries, etc.?
- 4 To operate a home business?
- 5 None of the above – **SKIP** to Check Item D

45d. How many computers do you have access to for personal use or for operating a home business?

101

- 0 None
- 1 1
- 2 2
- 3 3
- 4 4 or more

45e. Do YOU use the Internet for personal use or for operating a home business?

102

- 1 Personal use
- 2 Operating a home business
- 3 Both
- 4 None of the above

INDIVIDUAL'S COMPUTER CRIME SCREEN QUESTIONS

45f. Have you experienced any of the following COMPUTER-RELATED incidents in the last 6 months
(Read answer categories 1-6) –

Mark (X) all that apply.

103

- 1 **Fraud in purchasing something over the Internet?**
- 2 **Computer virus attack?**
- 3 **Threats of harm or physical attack made while online or through E-mail?**
- 4 **Unrequested lewd or obscene messages, communications, or images while online or through E-mail?**
- 5 (Only ask if box 4 is marked in Item 45c) **Software copyright violation in connection with a home business?**
- 6 **Something else that you consider a computer-related crime? – Specify** _____
- 7 **No computer-related incidents – SKIP to Check Item D**

45g. Did you suffer any monetary loss as a result of the incident(s) you just mentioned?

104

- 1 Yes
- 2 No – **SKIP to 45i**

45h. How much money did you lose as a result of the incident(s)?

105

- \$ _____ .00 Amount of loss
- x Don't know

45i. Did you report the incident(s) you just mentioned to (Read answer categories 1-5) –

Mark (X) all that apply.

106

- 1 **A law enforcement agency?**
- 2 **An Internet Service provider?**
- 3 **A Website administrator?**
- 4 **A Systems Administrator?**
- 5 **Someone else? – Specify** _____
- 6 **None of the above**

INDIVIDUAL'S CHECK ITEMS D, E, AND G

CHECK ITEM D

Who besides the respondent was present when the screen questions were asked? (If telephone interview, mark box 1 only.)

555

- 1 Telephone interview – **SKIP to Check Item G**
- 2 **Personal interview – Mark all that apply.**
- 3 No one besides respondent present
- 4 Respondent's spouse
- 5 HHLD member(s) 12+, not spouse
- 6 HHLD member(s) under 12
- 7 Nonhousehold member(s)
- 8 Someone was present – Can't say who
- 9 Don't know if someone else present

CHECK ITEM E

If self-response interview, **SKIP to Check Item G**

Did the person for whom this interview was taken help the proxy respondent answer any screen questions?

556

- 1 Yes
- 2 No
- 3 Person for whom interview taken not present

CHECK ITEM G

Transcribe "number of times" entry for each of the following:

- (a) Screen Question, Item 36c, page 13
- (b) Screen Question, Item 40c, page 13
- (c) Screen Question, Item 41c, page 14
- (d) Screen Question, Item 42c, page 14
- (e) Screen Question, Item 43c, page 14
- (f) Screen Question, Item 44b, page 15
- (g) Screen Question, Item 45b, page 15

No entries transcribed below – Go to Check Item H

- _____ Number of times (36c)
- _____ Number of times (40c)
- _____ Number of times (41c)
- _____ Number of times (42c)
- _____ Number of times (43c)
- _____ Number of times (44b)
- _____ Number of times (45b)

*FIELD REPRESENTATIVE – After completing Check Item G, fill a separate crime incident report for each screen question that has an entry of 1 or more. Do this **before** marking Check Item H.*

INDIVIDUAL'S EMPLOYMENT QUESTIONS

Be sure to fill any incident reports before marking Check Item H.

CHECK ITEM H	Is the respondent 16 years or older?	1 <input type="checkbox"/> Yes – Ask 47a 2 <input type="checkbox"/> No – SKIP to Check Item I
	47a. Did you have a job or work at a business LAST WEEK? (Do not include volunteer work or work around the house.) <i>(If farm or business operator in household, ask about unpaid work.)</i> ASK OR VERIFY –	576 1 <input type="checkbox"/> Yes – SKIP to 48a 2 <input type="checkbox"/> No – Ask 47b
	47b. Did you have a job or work at a business DURING THE LAST 6 MONTHS?	577 1 <input type="checkbox"/> Yes – Ask 47c 2 <input type="checkbox"/> No – SKIP to Check Item I
	47c. Did that (job/work) last 2 consecutive weeks or more? ASK OR VERIFY –	578 1 <input type="checkbox"/> Yes – Ask 48a 2 <input type="checkbox"/> No – SKIP to Check Item I
	48a. Which of the following best describes your job? PERSONAL INTERVIEW <i>(Show flashcard)</i> TELEPHONE INTERVIEW – Were you employed in the <i>(Read main headings until you get a yes. Then read answer categories) – Mark (X) only one category.</i>	579 <p>Medical Profession – As a –</p> 1 <input type="checkbox"/> Physician 2 <input type="checkbox"/> Nurse 3 <input type="checkbox"/> Technician 4 <input type="checkbox"/> Other – Specify _____ <p>Mental Health Services Field – Are your duties –</p> 5 <input type="checkbox"/> Professional (Social worker/psychiatrist) 6 <input type="checkbox"/> Custodial care 7 <input type="checkbox"/> Other – Specify _____ <p>Teaching Profession – Were you employed in a –</p> 8 <input type="checkbox"/> Preschool 9 <input type="checkbox"/> Elementary 10 <input type="checkbox"/> Junior high or middle school 11 <input type="checkbox"/> High school 12 <input type="checkbox"/> College or university 13 <input type="checkbox"/> Technical or industrial school 14 <input type="checkbox"/> Special education facility 15 <input type="checkbox"/> Other – Specify _____ <p>Law Enforcement or Security Field – Were you employed as a –</p> 16 <input type="checkbox"/> Law enforcement officer 17 <input type="checkbox"/> Prison or jail guard 18 <input type="checkbox"/> Security guard 19 <input type="checkbox"/> Other – Specify _____ <p>Retail Sales – Were you employed as a –</p> 20 <input type="checkbox"/> Convenience or liquor store clerk 21 <input type="checkbox"/> Gas station attendant 22 <input type="checkbox"/> Bartender 23 <input type="checkbox"/> Other – Specify _____ <p>Transportation Field – Were you employed as a –</p> 24 <input type="checkbox"/> Bus driver 25 <input type="checkbox"/> Taxi cab driver 26 <input type="checkbox"/> Other – Specify _____ <p align="center">OR</p> 27 <input type="checkbox"/> Something else – Specify _____
	ASK OR VERIFY – 48b. Is your job with <i>(Read answer categories) –</i>	580 1 <input type="checkbox"/> A private company, business, or individual for wages? 2 <input type="checkbox"/> The Federal government? 3 <input type="checkbox"/> A State, county, or local government? 4 <input type="checkbox"/> Yourself (Self-employed) in your own business, professional practice, or farm?
	If box 12 is marked in 48a, mark without asking. 48c. Are you employed by a college or university?	581 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
	48d. While working at your job, do you work mostly in <i>(Read answer categories) –</i>	582 1 <input type="checkbox"/> A city? 2 <input type="checkbox"/> Suburban area? 3 <input type="checkbox"/> Rural area? 4 <input type="checkbox"/> Combination of any of these?
CHECK ITEM I	Is this the last household member to be interviewed?	<input type="checkbox"/> Yes – END interview. <input type="checkbox"/> No – See note below before interviewing next household member.

FIELD REPRESENTATIVE – If the current respondent is a parent or legal guardian and the next household member to be interviewed is under 18, tell the current respondent that you will be asking the same questions you just asked him/her.

INDIVIDUAL'S SCREEN QUESTIONS

44a. During the last 6 months, (other than any incidents already mentioned,) did you call the police to report something that happened to YOU which you thought was a crime?

Briefly describe incident(s) ↘

547 1 Yes – **What happened?**
Describe above
2 No – **SKIP** to 45a

548

*

OFFICE USE ONLY

CHECK ITEM B

Look at 44a. If unsure, ASK, otherwise, mark without asking. **Were you** (was the respondent) **attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you** (the respondent) **or another household member?**

549 1 Yes – Ask 44b
2 No – **SKIP** to 45a

44b. How many times?

550

_____ Number of times (44b)

45a. During the last 6 months, (other than any incidents already mentioned,) did anything which you thought was a crime happen to YOU, but you did NOT report to the police?

Briefly describe incident(s) ↘

551 1 Yes – **What happened?**
Describe above
2 No – **SKIP** to INTRO below

552

*

OFFICE USE ONLY

CHECK ITEM C

Look at 45a. If unsure, ASK, otherwise, mark without asking. **Were you** (was the respondent) **attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you** (the respondent) **or another household member?**

553 1 Yes – Ask 45b
2 No – **SKIP** to INTRO below

45b. How many times?

554

_____ Number of times (45b)

INDIVIDUAL'S COMPUTER CRIME SCREEN QUESTIONS

FIELD REPRESENTATIVE – Read introduction.

INTRO: **The next series of questions are about YOUR use of a computer. Please include ALL computers, laptops, or access to WebTV used at home, work, or school for PERSONAL USE or for operating a home business.**

45c. During the last 6 months, have YOU used a computer, laptop, or WebTV for the following purposes

(Read answer categories 1-4) –

Mark (X) all that apply.

100

*

- 1 For personal use at home?
- 2 For personal use at work?
- 3 For personal use at school, libraries, etc.?
- 4 To operate a home business?
- 5 None of the above – **SKIP** to Check Item D

45d. How many computers do you have access to for personal use or for operating a home business?

101

- 0 None
- 1 1
- 2 2
- 3 3
- 4 4 or more

45e. Do YOU use the Internet for personal use or for operating a home business?

102

- 1 Personal use
- 2 Operating a home business
- 3 Both
- 4 None of the above

INDIVIDUAL'S COMPUTER CRIME SCREEN QUESTIONS

45f. Have you experienced any of the following COMPUTER-RELATED incidents in the last 6 months
(Read answer categories 1-6) –

Mark (X) all that apply.

103

- 1 **Fraud in purchasing something over the Internet?**
- 2 **Computer virus attack?**
- 3 **Threats of harm or physical attack made while online or through E-mail?**
- 4 **Unrequested lewd or obscene messages, communications, or images while online or through E-mail?**
- 5 (Only ask if box 4 is marked in Item 45c) **Software copyright violation in connection with a home business?**
- 6 **Something else that you consider a computer-related crime? –Specify** _____
- 7 No computer-related incidents – **SKIP** to Check Item D

45g. Did you suffer any monetary loss as a result of the incident(s) you just mentioned?

104

- 1 Yes
- 2 No – **SKIP** to 45i

45h. How much money did you lose as a result of the incident(s)?

105

- \$ _____ .00 Amount of loss
x Don't know

45i. Did you report the incident(s) you just mentioned to
(Read answer categories 1-5) –

Mark (X) all that apply.

106

- 1 **A law enforcement agency?**
- 2 **An Internet Service provider?**
- 3 **A Website administrator?**
- 4 **A Systems Administrator?**
- 5 **Someone else? – Specify** _____
- 6 None of the above

INDIVIDUAL'S CHECK ITEMS D, E, AND G

CHECK ITEM D

Who besides the respondent was present when the screen questions were asked? (If telephone interview, mark box 1 only.)

555

- 1 Telephone interview – **SKIP** to Check Item G
- 2 **Personal interview – Mark all that apply.**
- 3 No one besides respondent present
- 4 Respondent's spouse
- 5 HHLD member(s) 12+, not spouse
- 6 HHLD member(s) under 12
- 7 Nonhousehold member(s)
- 8 Someone was present – Can't say who
- 9 Don't know if someone else present

CHECK ITEM E

If self-response interview, **SKIP** to Check Item G

Did the person for whom this interview was taken help the proxy respondent answer any screen questions?

556

- 1 Yes
- 2 No
- 3 Person for whom interview taken not present

CHECK ITEM G

Transcribe "number of times" entry for each of the following:

- (a) Screen Question, Item 36c, page 19
- (b) Screen Question, Item 40c, page 19
- (c) Screen Question, Item 41c, page 20
- (d) Screen Question, Item 42c, page 20
- (e) Screen Question, Item 43c, page 20
- (f) Screen Question, Item 44b, page 21
- (g) Screen Question, Item 45b, page 21

No entries transcribed below – Go to Check Item H

- _____ Number of times (36c)
- _____ Number of times (40c)
- _____ Number of times (41c)
- _____ Number of times (42c)
- _____ Number of times (43c)
- _____ Number of times (44b)
- _____ Number of times (45b)

*FIELD REPRESENTATIVE – After completing Check Item G, fill a separate crime incident report for each screen question that has an entry of 1 or more. Do this **before** marking Check Item H.*

INDIVIDUAL'S EMPLOYMENT QUESTIONS

Be sure to fill any incident reports before marking Check Item H.

CHECK ITEM H	Is the respondent 16 years or older?	1 <input type="checkbox"/> Yes – Ask 47a 2 <input type="checkbox"/> No – SKIP to Check Item I
	47a. Did you have a job or work at a business LAST WEEK? (Do not include volunteer work or work around the house.) <i>(If farm or business operator in household, ask about unpaid work.)</i> ASK OR VERIFY –	576 1 <input type="checkbox"/> Yes – SKIP to 48a 2 <input type="checkbox"/> No – Ask 47b
	47b. Did you have a job or work at a business DURING THE LAST 6 MONTHS? ASK OR VERIFY –	577 1 <input type="checkbox"/> Yes – Ask 47c 2 <input type="checkbox"/> No – SKIP to Check Item I
	47c. Did that (job/work) last 2 consecutive weeks or more? ASK OR VERIFY –	578 1 <input type="checkbox"/> Yes – Ask 48a 2 <input type="checkbox"/> No – SKIP to Check Item I
	48a. Which of the following best describes your job? PERSONAL INTERVIEW <i>(Show flashcard)</i> TELEPHONE INTERVIEW – Were you employed in the <i>(Read main headings until you get a yes. Then read answer categories) –</i> Mark (X) only one category.	579 <p>Medical Profession – As a –</p> 1 <input type="checkbox"/> Physician 2 <input type="checkbox"/> Nurse 3 <input type="checkbox"/> Technician 4 <input type="checkbox"/> Other – Specify _____ <p>Mental Health Services Field – Are your duties –</p> 5 <input type="checkbox"/> Professional (Social worker/psychiatrist) 6 <input type="checkbox"/> Custodial care 7 <input type="checkbox"/> Other – Specify _____ <p>Teaching Profession – Were you employed in a –</p> 8 <input type="checkbox"/> Preschool 9 <input type="checkbox"/> Elementary 10 <input type="checkbox"/> Junior high or middle school 11 <input type="checkbox"/> High school 12 <input type="checkbox"/> College or university 13 <input type="checkbox"/> Technical or industrial school 14 <input type="checkbox"/> Special education facility 15 <input type="checkbox"/> Other – Specify _____ <p>Law Enforcement or Security Field – Were you employed as a –</p> 16 <input type="checkbox"/> Law enforcement officer 17 <input type="checkbox"/> Prison or jail guard 18 <input type="checkbox"/> Security guard 19 <input type="checkbox"/> Other – Specify _____ <p>Retail Sales – Were you employed as a –</p> 20 <input type="checkbox"/> Convenience or liquor store clerk 21 <input type="checkbox"/> Gas station attendant 22 <input type="checkbox"/> Bartender 23 <input type="checkbox"/> Other – Specify _____ <p>Transportation Field – Were you employed as a –</p> 24 <input type="checkbox"/> Bus driver 25 <input type="checkbox"/> Taxi cab driver 26 <input type="checkbox"/> Other – Specify _____ <p align="center">OR</p> 27 <input type="checkbox"/> Something else – Specify _____
	ASK OR VERIFY – 48b. Is your job with <i>(Read answer categories) –</i>	580 1 <input type="checkbox"/> A private company, business, or individual for wages? 2 <input type="checkbox"/> The Federal government? 3 <input type="checkbox"/> A State, county, or local government? 4 <input type="checkbox"/> Yourself (Self-employed) in your own business, professional practice, or farm?
	If box 12 is marked in 48a, mark without asking. 48c. Are you employed by a college or university?	581 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
	48d. While working at your job, do you work mostly in <i>(Read answer categories) –</i>	582 1 <input type="checkbox"/> A city? 2 <input type="checkbox"/> Suburban area? 3 <input type="checkbox"/> Rural area? 4 <input type="checkbox"/> Combination of any of these?
CHECK ITEM I	Is this the last household member to be interviewed?	<input type="checkbox"/> Yes – END interview. <input type="checkbox"/> No – See note below before interviewing next household member.

FIELD REPRESENTATIVE – If the current respondent is a parent or legal guardian and the next household member to be interviewed is under 18, tell the current respondent that you will be asking the same questions you just asked him/her.

INDIVIDUAL'S PERSONAL CHARACTERISTICS

17. NAME	18. Type of interview	19. Line No.
Last	<div style="border: 1px solid black; padding: 2px; display: inline-block;">401</div> 1 <input type="checkbox"/> Per. – Self-respondent 2 <input type="checkbox"/> Tel. – Self-respondent 3 <input type="checkbox"/> Per. – Proxy 4 <input type="checkbox"/> Tel. – Proxy } <i>Fill 13 on cover page</i> 5 <input type="checkbox"/> Noninterview (Type Z) – <i>Fill 19–28 on this page and 14 on cover page</i>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">402</div> Line No.
First		

AFTER INTERVIEW – TRANSCRIBE FROM CONTROL CARD

20. <i>(cc 13b)</i> Relationship to reference person	21. <i>(cc 17)</i> Age last birthday	22a. <i>(cc 18)</i> Marital status THIS survey period	22b. <i>(From previous enumeration)</i> Marital status LAST survey period	23. <i>(cc 19)</i> Sex	24. <i>(cc 20)</i> Armed Forces member	25a. <i>(cc 21a)</i> Education -highest grade	25b. <i>(cc 21b)</i> Education -complete that year?	26. <i>(cc 22)</i> Attending school	27. <i>(cc 23)</i> Race	28. <i>(cc 24)</i> Hispanic origin
<div style="border: 1px solid black; padding: 2px; display: inline-block;">403</div> 01 <input type="checkbox"/> Husband 02 <input type="checkbox"/> Wife 03 <input type="checkbox"/> Son 04 <input type="checkbox"/> Daughter 05 <input type="checkbox"/> Father 06 <input type="checkbox"/> Mother 07 <input type="checkbox"/> Brother 08 <input type="checkbox"/> Sister 09 <input type="checkbox"/> Other relative 10 <input type="checkbox"/> Nonrelative 11 <input type="checkbox"/> Ref. person	<div style="border: 1px solid black; padding: 2px; display: inline-block;">404</div> Age _____	<div style="border: 1px solid black; padding: 2px; display: inline-block;">405</div> 1 <input type="checkbox"/> Married 2 <input type="checkbox"/> Widowed 3 <input type="checkbox"/> Divorced 4 <input type="checkbox"/> Separated 5 <input type="checkbox"/> Never married	<div style="border: 1px solid black; padding: 2px; display: inline-block;">406</div> 1 <input type="checkbox"/> Married 2 <input type="checkbox"/> Widowed 3 <input type="checkbox"/> Divorced 4 <input type="checkbox"/> Separated 5 <input type="checkbox"/> Never married 6 <input type="checkbox"/> Not interviewed last survey period	<div style="border: 1px solid black; padding: 2px; display: inline-block;">407</div> 1 <input type="checkbox"/> M 2 <input type="checkbox"/> F	<div style="border: 1px solid black; padding: 2px; display: inline-block;">408</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<div style="border: 1px solid black; padding: 2px; display: inline-block;">409</div> Grade _____	<div style="border: 1px solid black; padding: 2px; display: inline-block;">410</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<div style="border: 1px solid black; padding: 2px; display: inline-block;">411</div> 0 <input type="checkbox"/> Regular school 1 <input type="checkbox"/> College/University 2 <input type="checkbox"/> Trade school 3 <input type="checkbox"/> Vocational school 4 <input type="checkbox"/> None of the above schools	<div style="border: 1px solid black; padding: 2px; display: inline-block;">412</div> 1 <input type="checkbox"/> White 2 <input type="checkbox"/> Black 3 <input type="checkbox"/> Amer. Indian, Aleut, Eskimo 4 <input type="checkbox"/> Asian, Pacific Islander 5 <input type="checkbox"/> Other	<div style="border: 1px solid black; padding: 2px; display: inline-block;">413</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No

29. Date of interview _____ →

501

| | | | | | | |
 Month Day Year

MOBILITY QUESTIONS

Before we get to the crime questions, I have one or two questions that are helpful in studying where and why crimes occur.
If unsure, ASK OR VERIFY –

33a. How long have you lived at this address?
(Enter number of months OR years.)

505

 _____ Months (1-11) – **SKIP** to 33b

OR

506

 _____ Years (Round to nearest whole year) – *Fill Check Item A*

CHECK ITEM A How many years are entered in 33a?

5 years or more – **SKIP** to 36a
 Less than 5 years – *Ask 33b*

33b. Altogether, how many times have you moved in the last 5 years, that is, since _____, 19__?

508

 _____ Number of times

INDIVIDUAL'S SCREEN QUESTIONS

41a. (Other than any incidents already mentioned,) has anyone attacked or threatened you in any of these ways (Exclude telephone threats) –

- (a) With any weapon, for instance, a gun or knife –
 - (b) With anything like a baseball bat, frying pan, scissors, or stick –
 - (c) By something thrown, such as a rock or bottle –
 - (d) Include any grabbing, punching, or choking,
 - (e) Any rape, attempted rape or other type of sexual attack –
 - (f) Any face to face threats –
- OR**
- (g) Any attack or threat or use of force by anyone at all? Please mention it even if you are not certain it was a crime.

Briefly describe incident(s) ↘

MARK OR ASK –

41b. Did any incidents of this type happen to you?

- 541** 1 Yes – **What happened?**
Describe above
2 No – **SKIP to 42a**

41c. How many times?

542 _____
Number of times (41c)

42a. People often don't think of incidents committed by someone they know. (Other than any incidents already mentioned,) did you have something stolen from you OR were you attacked or threatened by (Exclude telephone threats) –

- (a) Someone at work or school –
- (b) A neighbor or friend –
- (c) A relative or family member –
- (d) Any other person you've met or known?

Briefly describe incident(s) ↘

MARK OR ASK –

42b. Did any incidents of this type happen to you?

- 543** 1 Yes – **What happened?**
Describe above
2 No – **SKIP to 43a**

42c. How many times?

544 _____
Number of times (42c)

43a. Incidents involving forced or unwanted sexual acts are often difficult to talk about. (Other than any incidents already mentioned,) have you been forced or coerced to engage in unwanted sexual activity by –

- (a) Someone you didn't know before –
 - (b) A casual acquaintance –
- OR**
- (c) Someone you know well?

Briefly describe incident(s) ↘

MARK OR ASK –

43b. Did any incidents of this type happen to you?

- 545** 1 Yes – **What happened?**
Describe above
2 No – **SKIP to 44a**

43c. How many times?

546 _____
Number of times (43c)

INDIVIDUAL'S SCREEN QUESTIONS

44a. During the last 6 months, (other than any incidents already mentioned,) did you call the police to report something that happened to YOU which you thought was a crime?

Briefly describe incident(s) ↘

547 1 Yes – **What happened?**
Describe above
2 No – **SKIP** to 45a

548

*

OFFICE USE ONLY

CHECK ITEM B

Look at 44a. If unsure, ASK, otherwise, mark without asking. **Were you** (was the respondent) **attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you** (the respondent) **or another household member?**

549 1 Yes – Ask 44b
2 No – **SKIP** to 45a

44b. How many times?

550

_____ Number of times (44b)

45a. During the last 6 months, (other than any incidents already mentioned,) did anything which you thought was a crime happen to YOU, but you did NOT report to the police?

Briefly describe incident(s) ↘

551 1 Yes – **What happened?**
Describe above
2 No – **SKIP** to *INTRO* below

552

*

OFFICE USE ONLY

CHECK ITEM C

Look at 45a. If unsure, ASK, otherwise, mark without asking. **Were you** (was the respondent) **attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you** (the respondent) **or another household member?**

553 1 Yes – Ask 45b
2 No – **SKIP** to *INTRO* below

45b. How many times?

554

_____ Number of times (45b)

INDIVIDUAL'S COMPUTER CRIME SCREEN QUESTIONS

FIELD REPRESENTATIVE – Read introduction.

INTRO: The next series of questions are about YOUR use of a computer. Please include ALL computers, laptops, or access to WebTV used at home, work, or school for PERSONAL USE or for operating a home business.

45c. During the last 6 months, have YOU used a computer, laptop, or WebTV for the following purposes

(Read answer categories 1–4) –

Mark (X) all that apply.

100

*

- 1 For personal use at home?
- 2 For personal use at work?
- 3 For personal use at school, libraries, etc.?
- 4 To operate a home business?
- 5 None of the above – **SKIP** to Check Item D

45d. How many computers do you have access to for personal use or for operating a home business?

101

- 0 None
- 1 1
- 2 2
- 3 3
- 4 4 or more

45e. Do YOU use the Internet for personal use or for operating a home business?

102

- 1 Personal use
- 2 Operating a home business
- 3 Both
- 4 None of the above

INDIVIDUAL'S COMPUTER CRIME SCREEN QUESTIONS

45f. Have you experienced any of the following COMPUTER-RELATED incidents in the last 6 months
(Read answer categories 1-6) –

Mark (X) all that apply.

- 103** *
- 1 **Fraud in purchasing something over the Internet?**
 - 2 **Computer virus attack?**
 - 3 **Threats of harm or physical attack made while online or through E-mail?**
 - 4 **Unrequested lewd or obscene messages, communications, or images while online or through E-mail?**
 - 5 (Only ask if box 4 is marked in Item 45c) **Software copyright violation in connection with a home business?**
 - 6 **Something else that you consider a computer-related crime? – Specify**
- _____
- _____
- 7 No computer-related incidents – **SKIP** to Check Item D

45g. Did you suffer any monetary loss as a result of the incident(s) you just mentioned?

- 104**
- 1 Yes
 - 2 No – **SKIP** to 45i

45h. How much money did you lose as a result of the incident(s)?

105 \$ _____ .00 Amount of loss
x Don't know

45i. Did you report the incident(s) you just mentioned to
(Read answer categories 1-5) –

Mark (X) all that apply.

- 106** *
- 1 **A law enforcement agency?**
 - 2 **An Internet Service provider?**
 - 3 **A Website administrator?**
 - 4 **A Systems Administrator?**
 - 5 **Someone else? – Specify**
- _____
- _____
- 6 None of the above

INDIVIDUAL'S CHECK ITEMS D, E, AND G

CHECK ITEM D

Who besides the respondent was present when the screen questions were asked? (If telephone interview, mark box 1 only.)

- 555** *
- 1 Telephone interview – **SKIP** to Check Item G
 - 2 **Personal interview – Mark all that apply.**
 - 3 No one besides respondent present
 - 4 Respondent's spouse
 - 5 HHLD member(s) 12+, not spouse
 - 6 HHLD member(s) under 12
 - 7 Nonhousehold member(s)
 - 8 Someone was present – Can't say who
 - 9 Don't know if someone else present

CHECK ITEM E

If self-response interview, **SKIP** to Check Item G

Did the person for whom this interview was taken help the proxy respondent answer any screen questions?

- 556**
- 1 Yes
 - 2 No
 - 3 Person for whom interview taken not present

CHECK ITEM G

Transcribe "number of times" entry for each of the following:

- (a) Screen Question, Item 36c, page 25
- (b) Screen Question, Item 40c, page 25
- (c) Screen Question, Item 41c, page 26
- (d) Screen Question, Item 42c, page 26
- (e) Screen Question, Item 43c, page 26
- (f) Screen Question, Item 44b, page 27
- (g) Screen Question, Item 45b, page 27

- No entries transcribed below – Go to Check Item H
- _____ Number of times (36c)
- _____ Number of times (40c)
- _____ Number of times (41c)
- _____ Number of times (42c)
- _____ Number of times (43c)
- _____ Number of times (44b)
- _____ Number of times (45b)

FIELD REPRESENTATIVE – After completing Check Item G, fill a separate crime incident report for each screen question that has an entry of 1 or more. Do this **before** marking Check Item H.

INDIVIDUAL'S EMPLOYMENT QUESTIONS

Be sure to fill any incident reports before marking Check Item H.

CHECK ITEM H	Is the respondent 16 years or older?	1 <input type="checkbox"/> Yes – Ask 47a 2 <input type="checkbox"/> No – SKIP to Check Item I
	47a. Did you have a job or work at a business LAST WEEK? (Do not include volunteer work or work around the house.) <i>(If farm or business operator in household, ask about unpaid work.)</i> ASK OR VERIFY –	576 1 <input type="checkbox"/> Yes – SKIP to 48a 2 <input type="checkbox"/> No – Ask 47b
	47b. Did you have a job or work at a business DURING THE LAST 6 MONTHS? ASK OR VERIFY –	577 1 <input type="checkbox"/> Yes – Ask 47c 2 <input type="checkbox"/> No – SKIP to Check Item I
	47c. Did that (job/work) last 2 consecutive weeks or more? ASK OR VERIFY –	578 1 <input type="checkbox"/> Yes – Ask 48a 2 <input type="checkbox"/> No – SKIP to Check Item I
	48a. Which of the following best describes your job? PERSONAL INTERVIEW <i>(Show flashcard)</i> TELEPHONE INTERVIEW – Were you employed in the <i>(Read main headings until you get a yes. Then read answer categories) –</i> Mark (X) only one category.	579 <p>Medical Profession – As a –</p> 1 <input type="checkbox"/> Physician 2 <input type="checkbox"/> Nurse 3 <input type="checkbox"/> Technician 4 <input type="checkbox"/> Other – Specify _____ <p>Mental Health Services Field – Are your duties –</p> 5 <input type="checkbox"/> Professional (Social worker/psychiatrist) 6 <input type="checkbox"/> Custodial care 7 <input type="checkbox"/> Other – Specify _____ <p>Teaching Profession – Were you employed in a –</p> 8 <input type="checkbox"/> Preschool 9 <input type="checkbox"/> Elementary 10 <input type="checkbox"/> Junior high or middle school 11 <input type="checkbox"/> High school 12 <input type="checkbox"/> College or university 13 <input type="checkbox"/> Technical or industrial school 14 <input type="checkbox"/> Special education facility 15 <input type="checkbox"/> Other – Specify _____ <p>Law Enforcement or Security Field – Were you employed as a –</p> 16 <input type="checkbox"/> Law enforcement officer 17 <input type="checkbox"/> Prison or jail guard 18 <input type="checkbox"/> Security guard 19 <input type="checkbox"/> Other – Specify _____ <p>Retail Sales – Were you employed as a –</p> 20 <input type="checkbox"/> Convenience or liquor store clerk 21 <input type="checkbox"/> Gas station attendant 22 <input type="checkbox"/> Bartender 23 <input type="checkbox"/> Other – Specify _____ <p>Transportation Field – Were you employed as a –</p> 24 <input type="checkbox"/> Bus driver 25 <input type="checkbox"/> Taxi cab driver 26 <input type="checkbox"/> Other – Specify _____ <p align="center">OR</p> 27 <input type="checkbox"/> Something else – Specify _____
	ASK OR VERIFY – 48b. Is your job with <i>(Read answer categories) –</i>	580 1 <input type="checkbox"/> A private company, business, or individual for wages? 2 <input type="checkbox"/> The Federal government? 3 <input type="checkbox"/> A State, county, or local government? 4 <input type="checkbox"/> Yourself (Self-employed) in your own business, professional practice, or farm?
	If box 12 is marked in 48a, mark without asking. 48c. Are you employed by a college or university?	581 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
	48d. While working at your job, do you work mostly in <i>(Read answer categories) –</i>	582 1 <input type="checkbox"/> A city? 2 <input type="checkbox"/> Suburban area? 3 <input type="checkbox"/> Rural area? 4 <input type="checkbox"/> Combination of any of these?
CHECK ITEM I	Is this the last household member to be interviewed?	<input type="checkbox"/> Yes – END interview. <input type="checkbox"/> No – See note below before interviewing next household member.

FIELD REPRESENTATIVE – If the current respondent is a parent or legal guardian and the next household member to be interviewed is under 18, tell the current respondent that you will be asking the same questions you just asked him/her.

NOTES