Federal Republic of Nigeria National Bureau of Statistics Abuja, Nigeria

GENERAL HOUSEHOLD SURVEY

Tracking Form (T1) for Panel Households

INSTRUCTIONS

- 1. Fill-out this form if the household has moved from the address where it was found during the previous visit:
- 2. Section 1 must be complete. Information should be obtained from the questionnaire used in the previous visit
- 3. Place an "X" in the box to select a response in the case of selection type questions.
- 4. This form should be submitted to the State Officer, through the field supervisor.

SECTION 1: HOUSEHOLD IDENTIFICATION

	HHID:			
1.	ZONE:	2. STATE		
3.	LGA:			
4.	SECTOR:			
5.	EA:			
6.	RIC CODE:			
7.	HH NO.			
8.	NAME OF HOUSE	EHOLD HEAD:		
9.	ENTIRE HOUSEHO	OLD HAS MOVED YES NO		
FOR	STATE OFFICE USE	ONLY		
FOR	M STATUS	Complete DESTINATION STATES: Incomplete	Code	
TRA	CKING TYPE	Complete Household Together Complet Household Moved & Split		

SECT	ION 2: RELOCATED HOUSEHOLD INFO	RMATION		
1.	When did this household move?		dd/mm/yy / / WRITE 99/99/99 IF NOT KNOWN	
2.	Is this a permanent move? (i.e. the household will not be coming	back)?	YES (▶Q4) NO DON'T KNOW	
3.	When do you expect the household (nreturn?	nembers) to	dd/mm/yy / / WRITE 99/99/99 IF NOT KNOWN	
4.	Have all household members moved t location?	o the same new	YES (▶Q6) NO DON'T KNOW	
5.	How many new locations have they m	oved to?	WRITE 99 IF NOT KNOWN	
6.	Is this (are any of these) new location(s) in Nigeria?	YES NO (►SECTION 3) DON'T KNOW	
			LD MEMBERS MOVED, PLEASE COLLE D TO THIS NEW LOCATION IN NIGERI	
7.	FIRST KNOWN LOCATION PLACE/VILLAGE:			
8.	DISTRICT:			
9.	STATE:			
10.	LGA:		[
11.	ADDRESS OF HOUSEHOLD:			
12.	Have all hosehold members moved to	this first new location?	YES (►SECTION 3) NO DON'T KNOW	

13. How many of the household members moved to this first new location?										
(GIVE HOUSEHOLD MEMBERS INFORMATION IN QUESTIONS 12 TO 15)										
14.	15.	16.	17.							
ROSTER ID CODES	What is the name of the household	What is a phone number	What is a second phone							
OF PERSONS	member that moved to this first location?	through which the person	number through which the							
THAT MOVED TO		can be reached?	person can be reached?							
THIS NEW										
LOCATION										
		T	T							

SECC 18.	OND KNOWN I PLACE/VILLA						
19.	9. DISTRICT:						
20.). STATE:						
21.	LGA:						
22.	ADDRESS OF	HOUSEHOLD:					
23.	How many of	f the household members	s moved to this sec	cond new location?			
	IF NO MEMB	ERS MOVED TO A SECON	D LOCATION, RECORD "0" AND SKIP TO NEXT SECTION.				
	(GIVE HOUSE	HOLD MEMBERS INFOR	MATION IN QUEST	TIONS 24 TO 27)			
24.		25.		26.	27.		
ROSTER ID CODES WHO OF THE PERSONS me		What is the name of the	household	What is a phone number	What is a second phone	,	
	T MOVED TO NEW	member that moved to flocation?	this second	through which the person can be reached?	number through which person can be reached?	the	
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	T MOVED TO NEW		this second		number through which	the	

IHIE	RD KNOWN LO	CATION					
29.	PLACE/VILLA	GE:					
30.	DISTRICT:						
31.	STATE:						
32.	LGA:						
33.	ADDRESS OF	HOUSEHOLD:					
34.	How many o	f the household member	s moved to this th	nird new location?			
	(GIVE HOUSI	EHOLD MEMBERS INFOR	MATION IN QUES	RD "0" AND SKIP TO NEXT SEC STIONS 35 TO 38) SE AN ADDITIONAL TRACKING			
35.		36.		37.	38.		
OF T THA THIS		What is the name of the member that moved to location?		What is a phone number through which the person can be reached?	What is a seco number through person can be	gh which	h the

SECTION 3: INFORMANT IDENTIFICATION

Record details of persons providing information. Give individual code if the informant is a household member.

					ID C	ode
1.	FULL NAME OF FIRST INFORM	IANT:				
2.	PHONE NUMBER	FIRST:		SECOND:		
2a.	PLACE "X" IN BOX IF PHONE NUMBER IS VERIFIED:		FIRST PHONE VERIFIED	SECOND PHONE VERI	FIED	
3.	PLACE/VILLAGE:					
4.	DISTRICT:					
5.	STATE:					
6.	LGA:					
7.	ADDRESS OF HOUSEHOLD:					
					ID C	Code
8.	FULL NAME OF SECOND INFORMANT:					
9.	PHONE NUMBER	FIRST:		SECOND:		
9a.	PLACE "X" IN BOX IF PHONE NUMBER IS VERIFIED:		FIRST PHONE VERIFIED	SECOND PHONE VERI	FIED	
10.	PLACE/VILLAGE:					
11.	DISTRICT:					
12.	STATE:					
13.	LGA:					
14.	ADDRESS OF HOUSEHOLD:					

				ſ	ID Coc	le
15.	FULL NAME OF THIRD INFORM	//ANT:				
16.	PHONE NUMBER	FIRST:	SEC	COND:		
16a.	PLACE "X" IN BOX IF PHONE NUMBER IS VERIFIED:		FIRST PHONE VERIFIED	SECOND PHONE VERIFI	ED	
17.	PLACE/VILLAGE:					
18.	DISTRICT:	•				
19.	STATE:					
20.	LGA:					
21.	ADDRESS OF HOUSEHOLD:					
		•				