**** oBRAZAC ARV-

**ANKETA O RASPOLAGANJU VREMENOM**

**Upitnik za kućanstvo**

**2022./2023.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **IDENTIFIKACIJSKI PODACI** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Identifikacijski broj kućanstva | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  | | |  |  |  |  |  |  |
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|  | Županija | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Adresa | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | *(Ulica i kućni broj)* | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | *(Ime i prezime osobe na koju se vodi kućanstvo)* | | | | | | | | | | | | | | | | | | | | | | |  |  | *(Broj telefona)* | | | | | | | | |  |
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|  | Šifra anketara | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Šifra kontrolora | | | | | |  |  |  |  |
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| **POPIS ČLANOVA KUĆANSTVA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **H 1.** | | *Vrijeme početka popunjavanja upitnika:* | | | | | | | | | | | | | | | | |  |  | |  |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  | | | | |  |  | |  | |  |  | |  | |  |
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| **H 2.** | | **Tko su članovi Vašeg kućanstva?**  Članovima istog kućanstva smatraju se osobe koje su prisutne ili privremeno odsutne, žive na istoj adresi i sudjeluju u zajedničkim troškovima i budžetu*.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| Redni broj člana kućanstva | | | Ime | | | | | | Prezime | | | | | Datum rođenja | | | | | | | Dob | | | | Spol | | Veza između svih članova kućanstva | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | **A** | | | | | | **B** | | | | | **C** | | | | | | | **D** | | | | **E** | | *OF* | | | **01** | | **02** | | | **03** | | **04** | | | **05** | | **06** | | | **07** | | **08** | | | **09** | | **10** | | | **11** | | **12** | |
| 01 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **01** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 02 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **02** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 03 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **03** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 04 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **04** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 05 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **05** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 06 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **06** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 07 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **07** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 08 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **08** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 09 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **09** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 10 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **10** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 11 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **11** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 12 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **12** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
| 13 | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | **13** | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | | |  | |  | |
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|  | | |  | | | | | |  | | | | |  | | | |  | | |  | | | |  | | | | | 1 Muž/žena/partner/partnerica | | | | | | | | | | | | | | | 6 Svekar/svekrva, punac/punica | | | | | | | | | | | | | |
|  | | |  | | | | | |  | | | | |  | | | |  | | |  | | | |  | | | | | 2 Sin/kćer/posinak/pokćerka | | | | | | | | | | | | | | | 7 Djed/baka | | | | | | | | | | | | | |
|  | | |  | | | | | |  | | | | |  | | | |  | | |  | | | |  | |  | | | 3 Zet/snaha | | | | | | | | | | | | | | | 8 Brat/sestra/polubrat/polusestra | | | | | | | | | | | | | |
|  | | |  | | | | | |  | | | | |  | | | |  | | |  | | | |  | |  | | | 4 Unuk/unuka | | | | | | | | | | | | | | | 9 Drugi srodnik | | | | | | | | | | | | | |
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| **BRIGA O DJECI** | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **H 3.** | | **Ide li bilo koje dijete iz Vašeg kućanstva u jaslice, vrtić ili dnevni boravak, ili ga na dulje vrijeme čuva druga osoba koja nije član kućanstva?**  *Ne odnosi se na kratkoročne ili neodređene aranžmane na nekoliko dana (roditelji, susjedi, povremena, neredovna ili briga o djetetu u hitnim slučajevima). Obavezno pohađanje škole ne smatra se brigom o djeci.* | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | Da | | | | | | | | | | | | | | | | | | | 1 ⇨ Prijeći na H 4 | | | | |  |
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|  |  | Ne | | | | | | | | | | | | | | | | | | | 2 ⇨ Prijeći na H 5 | | | | |  |
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| **H 4.** | | **Kako je organizirana briga o djeci?** *Molimo da upišete posebno za svako dijete.* | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | |  |  |  |  | | --- | --- | --- | --- | |  | Briga o djeci | |  | | javna | privatna |  | | Najmlađe dijete | |  |  | | --- | --- | |  | 1 | | |  |  | | --- | --- | |  | 2 | |  | | Drugo dijete | |  |  | | --- | --- | |  | 1 | | |  |  | | --- | --- | |  | 2 | |  | | Treće dijete | |  |  | | --- | --- | |  | 1 | | |  |  | | --- | --- | |  | 2 | |  | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **PRIHOD** | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  | **Sljedeća pitanja odnose se na prihode svih članova kućanstva i sve druge prihode koje kućanstvo prima u cjelini.** | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **H 5.** | | **Koji od sljedećih izvora prihoda trenutno ima Vaše kućanstvo?**  *Za anketara: Pročitajte naglas anketiranom sve odgovore i označite „Da“ ili „Ne“ za svaki odgovor.*  **Da li Vaše kućanstvo prima…?** | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Da |  | Ne |  |  |  |
|  |  | 1. | Plaća ili naknada | | | | | | | | | | | | | | | | | | 1 |  | 2 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | 2. | Prihod od samozapošljavanja ili poljoprivrede | | | | | | | | | | | | | | | | | | 1 |  | 2 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | 3. | Mirovina | | | | | | | | | | | | | | | | | | 1 |  | 2 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | 4. | Naknada za nezaposlene | | | | | | | | | | | | | | | | | | 1 |  | 2 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | 5. | Druga vrsta socijalne naknade ili pomoći | | | | | | | | | | | | | | | | | | 1 |  | 2 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | 6. | Prihod od ulaganja, štednje ili imovine | | | | | | | | | | | | | | | | | | 1 |  | 2 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | 7. | Prihod iz drugih izvora (npr. privatni transferi) | | | | | | | | | | | | | | | | | | 1 |  | 2 |
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| **H 6.** | | **Ako zbrojite sve prihode koje ste spomenuli, možete li navesti ukupni neto mjesečni iznos kojim raspolaže Vaše kućanstvo, odnosno iznos bez poreza i doprinosa?**  *Za anketara: Podsjetite ispitanika na različite izvore prihoda: plaće, naknade, prihode od samozapošljavanja, mirovine, naknade za nezaposlene, druga socijalna primanja, prihod od investicija, štednje ili imovine itd.* | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | Mjesečni iznos u kunama | | | | | | | | | | | |  |  |  |  |  |  |  | Prijeći na **H 8** | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | Ne zna | | | | | | | | | | | |  |  | | | | | | Nastaviti s **H 7** | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | Ne želi odgovoriti | | | | | | | | | | | |  |  | | | | | | Nastaviti s **H 7** | | | | |  |
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| **H 7.** | | **Možete li nam reći barem približno mjesečni neto iznos ukupnog prihoda Vašeg kućanstva.** | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | Do 2 000 kuna | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
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|  |  | Od 2 001 do 5 000 | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
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|  |  | Od 5 001 do 8 000 | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
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|  |  | Od 8 001 do 11 000 | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
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|  |  | Ne želi odgovoriti | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
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| **PRIMANJE POMOĆI** | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  | **Sljedeća pitanja tiču se pomoći i usluga koje dobivate od nekoga izvan svoga kućanstva. Tipično se te usluge ne plaćaju, ali može biti primljen određeni manji iznos koji nije vezan za stvarnu vrijednost usluge i na redovitoj osnovi. Naknada za usluge također može biti u dobrima.** | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **H 8a1.**  **H 8a2.**  **H 8a3.**  **H 8b1.**  **H 8 b2.**  **H 8 b3.** | | **Molim Vas da mi odgovorite jeste li Vi ili neki drugi član Vašega kućanstva tijekom posljednja četiri tjedna dobili pomoć ili usluge u vezi s brigom o djeci?**  **Koliko ste puta dobili pomoć za brigu o djeci u posljednja četiri tjedna?**  **Jeste li platili pomoć za brigu o djeci i kad ste ju posljednji put koristili?**  **Molim Vas da mi odgovorite jeste li Vi ili neki drugi član Vašega kućanstva tijekom posljednja četiri tjedna dobili pomoć ili usluge u vezi s njegom bolesnih i starijih osoba?**  **Koliko ste puta dobili pomoć za njegu bolesnih i starijih osoba?**  **Jeste li platili za njegu bolesnih i starijih osoba kad ste ju posljednji put dobili?** | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **OSTALE INFORMACIJE** | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **H 9.** | | **Tko je odgovarao na upitnik? Član kućanstva broj:** | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
|  |  | *(Unesite redni broj člana kućanstva iz Popisa članova kućanstva sa strane 2).* | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **H 10.** | | **Unesite vrijeme kada ste završili popunjavanje upitnika:** | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |
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