POPCEN 2015

Data Processing
Manual Vol. I

Table of Contents

List of Appendices

List of Tables

List of Illustrations

List of Abbreviations and Acronyms

A

AHS	Average Household Size

B

BRF	Barangay Reference File
BSN	Building Serial Number

C

CAS	Census Area Supervisor
CO	Central Office
CPS	Census Project Staff

D

DPC 2015	POPCEN 2015 Data Processing Center

E

EA	Enumeration Area
EARF	Enumeration Area Reference File
EN	Enumerator
E-Questionnaire	Electronic Questionnaire

G

Geo-ID	Geographic Identification

H

HSN	Household Serial Number
HUSN	Housing Unit Serial Number

I

ID	Identification Card
ILQ	Institutional Living Quarter
IPSO	Interim Provincial Statistics Officer
IRD	Interim Regional Director
ISN	Institutional Serial Number

L

LE	List of Establishments

N

NCS-PHCD	National Censuses Service – Population and Housing Census Division
NUR	Non-Usual Residence

O

OMR	Optical Mark Recognition

P

PGR	Population Growth Rate
PMS	Progress Monitoring System
PO	Provincial Statistical Office
POPCEN 2015	2015 Census of Population
PCPS	Provincial Census Project Staff
PSA	Philippine Statistics Authority
PSO	Provincial Statistics Officer

Q

QC/QCS	Quick Count/Quick Count System

R

RCC	Receipt and Control Clerk
RCPS	Regional Census Project Staff
RSSO	Regional Statistical Services Office

S

SAQ	Self-Administered Questionnaire
SCIPS	Survey/Census Integrated Processing System
SS 2015	Scan Station 2015

T

TRACS	Tracking, Receipt and Control System
TS	Team Supervisor

U

UW	Utility Worker

V

VBLDG	Vacant Building
VHU	Vacant Housing Unit
VRH	Vacation/Rest House

Introduction

Being a huge and complex undertaking, ensuring the highest quality standards is of utmost importance in all phases of the 2015 Census of Population (POPCEN 2015), including data processing. This Data Processing Manual is prepared to guide, direct, and coordinate the work of the processing staff who will be involved in the handling and processing of census questionnaires and maps. It also provides information and instructions which will serve as guides in the exercise of sound judgment during the course of the data processing work. During this phase, all accomplished census questionnaires and maps will undergo thorough processing, which consists of manual and machine processing activities, prior to the generation of data.

1.1   STAGES OF DATA PROCESSING

Manual Processing involves the receipt and control, checking for completeness, and verification of correctness of the geographic identification (Geo-ID) and household/institutional ID of the accomplished questionnaires and maps; checking for clarity, legibility, and completeness of entries in the questionnaires; manual editing for consistency of entries; and preparation of questionnaires and maps for scanning/interpretation and further machine processing. It also includes transcribing of questionnaires and checking for the proper bundling of questionnaires and maps and folioing of other administrative forms.

Machine Processing involves the receipt and control of manually processed questionnaires and maps, scanning of questionnaires and maps to produce digital copies (images), interpretation of optical mark recognition (OMR) fields, data encoding, coding of selected items and key verification of these codes, Geo-ID validation, checking for completeness of entries, consistency checking of entries within and between records, consolidation of data according to predetermined table formats, and submission of batch/data file.

Quick Count is also a part of machine processing but will be done ahead of all other machine processing activities. Quick Count involves the encoding of the page totals of CP Form 1 using the Quick Count System (QCS); checking for completeness of coverage of each barangay, city/municipality, and province in terms of the number of households and population count of these geographic areas; and generation and evaluation of Quick Count Reports.

The Census Project Staff (CPS) of Provincial Statistical Offices (POs) of the Philippine Statistics Authority (PSA) will handle the POPCEN 2015 Data Processing

Center (DPC 2015). Generally, the DPC 2015 will be responsible for the manual and machine processing of all the accomplished questionnaires and maps that were submitted by the Head Census Area Supervisors (Head CASs) to the PO. Scanning/interpretation will be handled at the DPC with a Scan Station (SS 2015). For POs that have no SS 2015, scanning/interpretation will be done in the SS 2015 at Regional Statistical Services Office (RSSO) or nearby POs with SS 2015.

All the DPC 2015 will also be responsible for encoding of CP Form 1 using the QCS. It will also take charge of the generation and evaluation of frequency and consistency tables on selected demographic and housing/household characteristics. Further processing of data will be done at the CO prior to the generation of final tables on population, household, and housing characteristics.

Chapters 1 to 3 of this Data Processing Manual Volume I will cover introduction, set-up and flow of data processing, i.e. manual and machine processing. Chapters 4 to 10 cover instructions for receipt and control, manual processing, general screening, encoding of CP Form 1 page totals to QCS, editing of CP Forms 2 and 4, and processing of CP Forms 5 and census maps. The remaining chapters discuss bundling, folioing, packaging, and transmittal of CP Forms and Maps as well as the progress reporting of processing. Volume II of the Data Processing Manual covers topics on machine processing such as the overview, set-up, systems, tabulation, and detailed instructions on machine coding, editing, and generation of tables.

1.2   OBJECTIVES OF DATA PROCESSING

Data processing, that is, manual and machine processing, is a major part of the quality assurance procedures of census taking. This is done to ensure the highest quality of the census data.

A. Manual processing of questionnaires and maps aims to:

1. Account for all the questionnaires and maps to be processed;

2. Ascertain that all entries in the questionnaires are clear and legible and that all maps are properly accomplished/updated;

3. Check for the completeness, consistency, and reliability of entries in the questionnaires;

4. Verify the appropriateness of the codes in the boxes corresponding to the write-in entries; and

5. Transmit the questionnaires and maps for machine processing.

B. On the other hand, machine processing of questionnaires and maps aims to:

1. Encode the page totals of CP Form 1 using QCS and generate and evaluate quick count reports;

2. Account for all the questionnaires and maps to be scanned/interpret and encoded/verified;

3. Scan the questionnaires and maps to create digital copies (images) and interpret selected items to create the corresponding data files;

4. Encode entries for selected items;

5. Supply the codes for selected data items;

6. Key verify machine coded data;

7. Subject the data files to ID validation, completeness checking, and data consistency checking until the data files are declared "clean";

8. Generate reports on frequency and consistency tables for evaluation; and

9. Submit the batch files (or data files) and image files to the RSSO/CO.

1.3 QUESTIONNAIRES AND MAPS TO BE PROCESSED

Below is the list of questionnaires and maps to be processed:

a. *CP Form 1 – Listing Booklet* was used to list the buildings, housing units, households, and institutional living quarters (ILQs) in the barangay/enumeration area (EA). It was also used to record the population count and other information pertaining to the households and ILQs. (See Appendix 1.)

b. *CP Form 2 – Household Questionnaire* was used to record information about the households. This questionnaire gathered information on the following demographic and socio-economic characteristics of the household population: name of the household member, relationship to the household head, sex, date of birth, age, birth registration, marital status, religious affiliation, school attendance, literacy, highest grade/year completed, technical/vocational course obtained, overseas worker, and usual activity/occupation. It also contains housing census questions such as the type of building, construction materials of the roof of the building, construction materials of the outer walls of the building/housing unit, fuel for lighting, source of water supply for drinking, source of water supply for cooking, and tenure status of the housing unit/lot. Also included in this form is information on the registration of deaths in the last two years among household members. (See Appendix 2.)

c. *CP Form 4 – Institutional Population Questionnaire* was used to record information about persons residing in ILQs. Specifically, it contains questions on the type of ILQ, residence status of the members of the ILQ, sex, age, birth registration, marital status, religious affiliation, and highest grade/year completed of persons who are considered part of the institutional population. (See Appendix 3.)

d. *CP Form 5 – Barangay Schedule* was used to record information on some facilities and selected physical characteristics of each barangay, kinds of establishments, and presence of informal settlers, relocation areas, and in-movers in the barangay. (See Appendix 4.)

e. *Barangay/EA/Block Maps – Standard Mapping Form* was used to plot the physical features and landmarks, buildings occupied by households and those that are vacant, and ILQs found in the barangay/EA. It was also used to map a block of large or congested area in the barangay/EA. (See Appendix 5.)

Each EA pack submitted by the Head CAS should contain CP Forms 1, 2, 4, and 5 and the barangay/EA/block maps.

1.4   DATA PROCESSING FORMS TO BE USED

Different processing forms will be used to monitor the flow of census materials and keep track of the questionnaires/maps or batch/image files assigned to the processors. These forms will serve as tools for the DPC 2015/SS 2015 to ensure that no questionnaire/map and batch/image file is lost or missed during the data processing phase. They will also be used to monitor if the data processing operations are progressing at the required pace.

a. *CP Form 13 – Transmittal/Receipt Form* will be used by the Receipt and Control Clerk (RCC) in the DPC 2015 to receive the questionnaires and maps from the Head CAS; transmit processed questionnaires and maps that are for field verification/validation by the concerned Head CAS; transmit processed questionnaires and maps from the DPC 2015 to the SS 2015, and transmit batch/image files from the SS 2015 to the DPC 2015. Information in this form includes the type and quantity of materials transmitted/received by area, date the materials were transmitted/received by area, and the name of the transmitting/receiving personnel. (See Appendix 6.)

b. *CP Form 14 – Bundle Cover* was used to by the Head CAS to cover the bundle of accomplished CP Forms 1, 2, 4, and 5 by form type for every barangay/EA. It was also used as cover of maps bundled by city/municipality. It contains information on the Geo-ID of the bundled questionnaires/maps and the type and number of questionnaires/maps in the bundle. (See Appendix 7.)

c. *CP Form 15 – Folio Cover* was used by the Head CAS to cover the CP Form 10 (Daily Accomplishment Report of Enumerator), CP Form 11A (Accomplishment Report of Team Supervisor), CP Form 11B (Accomplishment Report of Census Area Supervisor), CP Form 12 (Spotcheck, Reinterview, and Observation Record), CP Form 16 (Certification of Punong Barangay), and other administrative forms that were folioed by city/municipality. (See Appendix 8.)

d. *CP Form 19 – Provincial Processing Receipt and Control Form* will be used to monitor the flow of questionnaires and maps being manually processed. It will also be used to keep track of the progress of manual processing by activity. This form will serve as a hardcopy file of the contents of the Tracking, Receipt and Control System (TRACS) database. (See Appendix 9.)

e. *CP Form 20 – Verification Slip for CP Form 5* will be used by the supervisor during the verification of CP Form 5. (See Appendix 10.)

f. *CP Form 21 – Problems Encountered/Referral Form* will be used during the manual processing to record the problems encountered by the processors. Such problems are usually referred to the supervisors. (See Appendix 11.)

g. *CP Form 22 – Accomplishment Report of Manual Processors* will be used during the manual processing to record and monitor the work output of the processors on a daily basis. This will also be used by the PO supervisors in checking the daily accomplishment of the processors. (See Appendix 12.)

h. *CP Form 24 – Map Evaluation Form* will be used to verify the completeness and quality of maps used/accomplished during the enumeration. (See Appendix 13.)

Illustrations on how to accomplish the aforementioned forms will be discussed in the succeeding chapters of this manual.

1.5   COMPUTER SYSTEMS TO BE USED

A. Tracking, Receipt and Control System (TRACS)

The *Tracking, Receipt and Control System (TRACS)* will be used as the electronic logbook of the DPC 2015 personnel during the data processing. It records the questionnaires and maps transmitted by the Head CAS to the DPC 2015. Within the DPC 2015, the TRACS will be used to track the flow of questionnaires and maps during the various stages of manual and machine processing. The TRACS will also be used to generate summary and status reports on data processing for progress monitoring.

B. Quick Count System (QCS)

The *Quick Count System (QCS)* is the system used to generate report for use in the evaluation of the completeness and coverage of each barangay, city/municipality, and province. The QCS, through the generation of QC reports will provide comparative counts of households and population based on the 2010 Census of Population and Housing (2010 CPH) and POPCEN 2015. The report generated will produce basic demographic indicators that will be used in evaluating the census counts.

C. Survey/Census Integrated Processing System (SCIPS)

The *Survey/Census Integrated Processing System (SCIPS)* is a program that contains the modules and functionalities for the effective management including receipt and control of the documents to be processed, scanning/interpretation of OMR fields, encoding of data in each document, key verification of encoded data, completeness checking of encoded batches, and data consistency of the encoded data.

D. Progress Monitoring System (PMS)

The *Progress Monitoring System (PMS)* is the system used to monitor the progress of enumeration. The information from the PMS can be used to assess, as early as possible, the EAs that are already completed.

1.6   TIMETABLE OF ACTIVITIES

The quality and timeliness of the final census results will depend greatly on the processing at the DPC 2015. Before submitting the questionnaires and maps to the SS 2015, the DPC 2015 supervisors should ensure that all questionnaires and maps are subjected to manual processing and that the timetable is strictly followed. The general schedule of data processing activities is shown in the table below.

Table 1. Schedule of Data Processing Activities	
Activity	**Duration**

1. Training for Manual Processing (three levels)
    -    Task Force Training
    -    Second Level Training
    -    Third Level Training
	
	September 14 to 16, 2015
	September 21 to 23, 2015
	September 28 to 30, 2015

2. Manual Processing	October to December 2015
3. Quick Count Processing and Evaluation	October to November 2015
4. Submission of Population Counts (by Barangay) to the President	December 30, 2015
5. Training for Machine Processing (two levels)	January 5 to 22, 2016
6. Machine Processing at the POs	January 25 to March 19, 2016
7. Submission of Data/Image Files to the CO	April 1 to 8, 2016

Data Processing Set-Up

This chapter discusses the organizational set-up of the 2015 Census of Population (POPCEN 2015) Data Processing Center (DPC 2015) and Scan Station (SS 2015). The duties and responsibilities of the DPC 2015 and SS 2015 personnel are also discussed to serve as guides in the performance of the tasks assigned to them.

2.1   ORGANIZATIONAL SET-UP OF THE DPC 2015 AND SS 2015

Activities that comprise the data processing at the DPC 2015 and SS 2015 need to be well-defined and planned to ensure the smooth flow of their operations. Each member of the unit should understand the organizational set-up to enable him/her to perform his/her tasks effectively and efficiently.

Illustration 2.1 on the next page shows the organizational set-up of the DPC 2015 and SS 2015.

During the data processing, the Interim Regional Director (IRD) will be the overall head of the DPC 2015 and SS 2015, if any, in the provinces under his/her jurisdiction. At the same time, the IRD will also be responsible for the smooth operation of the SS 2015 in case his/her Regional Statistical Services Office (RSSO) is identified as an SS 2015. He/she will be assisted by the Regional Census Project Staff (RCPS) Head/Supervisor, and Assistant Supervisor.

The SS 2015 in the RSSO will have a hired Receipt and Control Clerk (RCC) who will control and monitor the flow of questionnaires and maps to be scanned/ interpreted. Scanning/interpretation of questionnaires and/or maps will be done by the hired Scan/Interpret Operators. There will be a hired Utility Worker (UW) who will assist the data processing personnel by performing general service tasks.

The Interim Provincial Statistics Officer (IPSO)/Caretaker will spearhead the DPC 2015 and the SS 2015, if any, in the province. He/she will be assisted by the Provincial Census Project Staff (PCPS) Head/Supervisor and Assistant Supervisor. Both the Supervisor and Assistant Supervisor will take charge of the daily operations in the DPC 2015/SS 2015.

The Head Census Area Supervisor (Head CAS) will be consulted whenever there are problems during the data processing that needs to be verified in the field, such as when there are items in the questionnaires that are left unanswered or have vague answers.

In the DPC 2015 and SS 2015, if any, in the province, there will also be a hired RCC who will track the flow of questionnaires and maps in every stage of the data processing, including the transmittal of processed forms/files and their corresponding data/image files, if applicable. Hired manual processors (editors) will be responsible for the general screening and basic editing of the questionnaires and/or maps. Hired machine processors (scan/interpret operators, data encoders, coders, and editors), on the other hand, will be responsible for the scanning/interpretation, encoding, coding, and editing, respectively, of the questionnaires and/or maps. There will be a UW who will take charge of the general service tasks in the DPC 2015/SS 2015.

ILLUSTRATION 2.1
ORGANIZATIONAL SET-UP OF THE DPC 2015 AND SS 2015
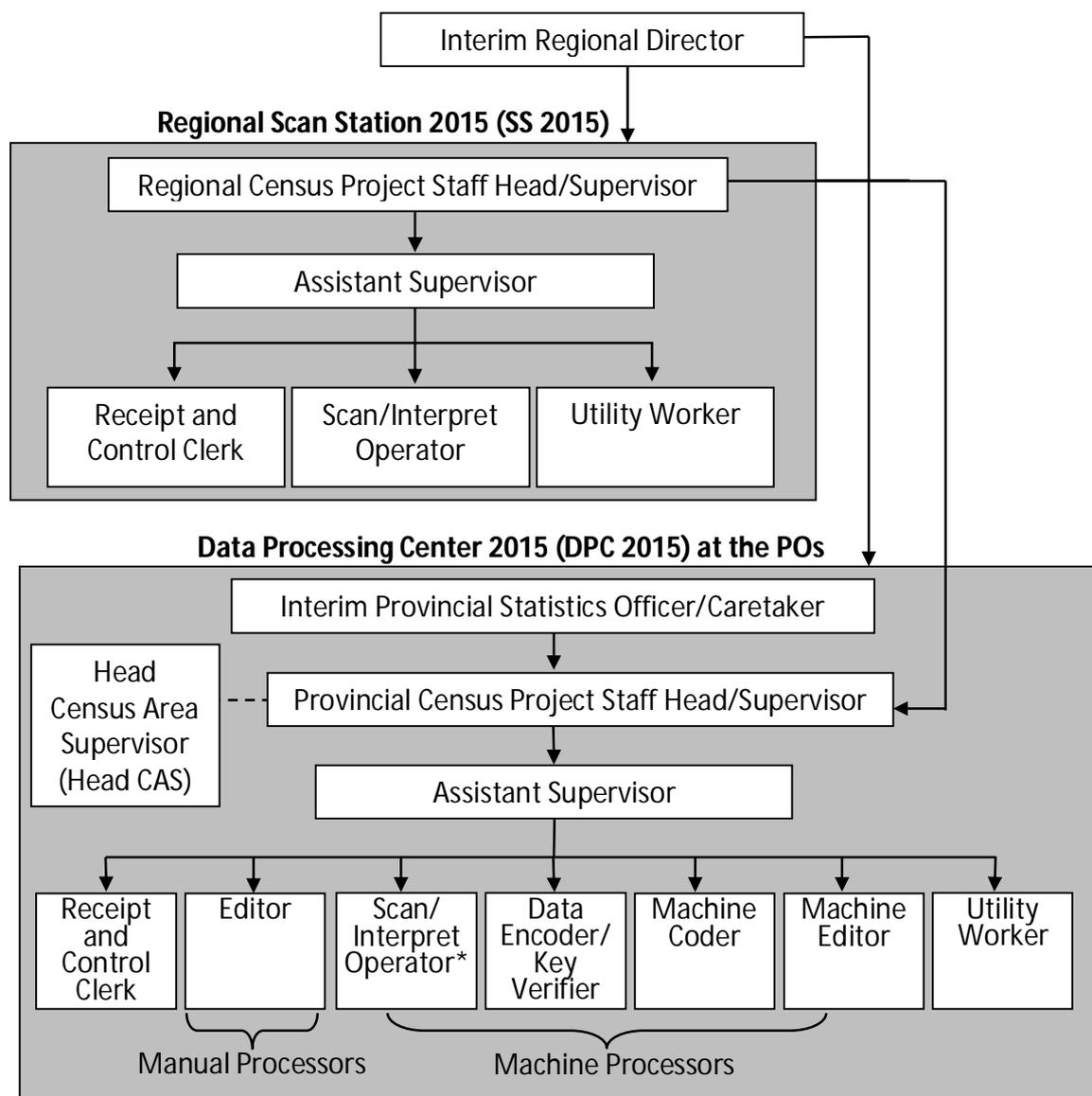
*   *For DPCs with Scan Station*

2.2   DUTIES AND RESPONSIBILITIES OF THE DPC 2015/SS 2015 PERSONNEL

The duties and responsibilities of every personnel in the DPC 2015/SS 2015 are listed below.

The **Interim Regional Director** will:

1. oversee the operations of the DPC 2015 and SS 2015, if any, in the provinces under his/her jurisdiction and the SS 2015 in the RSSO, if any;

2. be responsible in hiring the RCC, UW, Scan/Interpret Operators, and other machine processors if the RSSO has an SS 2015;

3. designate the Regional Statistician and hired Assistant Statistician to serve as the RCPS Head/Supervisor and RCPS Assistant Supervisor, respectively, for the data processing in the SS 2015 in the RSSO, if any;

4. monitor the activities to determine the problems encountered during the data processing in the DPC 2015/SS 2015;

5. resolve any issue and concern referred by the DPC 2015/SS 2015;

6. submit status report of the data processing to the Central Office (CO), Attention: National Censuses Service - Population and Housing Census Division (NCS-PHCD); and

7. submit the provincial data/image files to the CO (Attention: NCS-PHCD).

The **Interim Provincial Statistics Officer/Caretaker** will:

1. be responsible in hiring the RCC, UW, and editors in the DPC 2015 and the RCC, UW, Scan/Interpret Operators and other machine processors in the SS 2015 if the PO is also designated as a scan station;

2. designate the Provincial Statistician and hired Assistant Statistician to serve as the PCPS Head/Supervisor and Assistant Supervisor, respectively, for the data processing in the DPC 2015 and SS 2015, if any;

3. ensure that the organizational set-up and quality control procedures outlined in this manual are properly carried out during the data processing;

4. monitor the activities to determine and immediately resolve the problems relative to the data processing;

5. call the attention of the processors who does not meet the required standards for data processing. This action will be based on the reports made by the supervisors. Dismiss and replace data processors, whenever necessary;

6. undertake efficient and cost-effective field validation activities of the Head CAS/PO staff concerning missing/unreasonable/inconsistent entries which cannot be resolved for lack of basis during the data processing;

7. ensure that the standards of data quality are met;

8. review the progress report and assess periodically the compliance of the DPC 2015 and SS 2015, if any, with the timetable of the data processing, and formulate necessary strategies to meet the timetable;

9. render regular progress reports on the data processing to the IRD; and

10. submit the provincial data/image files to the IRD.

The **Regional Census Project Staff (RCPS) Head/Supervisor** will:

1. serve as the focal person for the SS 2015, if any, in the RSSO;

2. take charge of the daily operations in the SS 2015, including the distribution of questionnaires and maps to be scanned/interpreted and answering/acting on queries/issues raised by the SS 2015 hired personnel;

3. monitor the data processing operations of the DPC 2015/SS 2015 in all POs within the region;

4. supervise the transmittal of scanned/interpreted questionnaires and maps to the DPC 2015 and the data/image files to the DPC 2015 and/or the CO;

5. implement action plans to meet the scheduled completion of scanning/ interpretation in the SS 2015; and

6. perform other activities that may be required by the IRD.

The **RCPS Assistant Supervisor** will:

1. serves as the Assistant Supervisor for the SS 2015, if any, in the RSSO;

2. assist the RCPS Supervisor in monitoring the daily operations in the SS 2015;

3. ensure that the assignments of the scan/interpret operators are accomplished on time;

4. facilitate the transmittal of the scanned/interpreted questionnaires and maps to the DPC 2015, and the data/image files to the DPC 2015 and/or the CO; and

5. perform other POPCEN-related activities that may be required by the RSSO Supervisor.

The **Provincial Census Project Staff Head/Supervisor** will:

In the DPC 2015

1. serve as the Supervisor for the DPC 2015;

2. take charge of the daily operations of data processing, including answering/acting on queries/issues raised by the processors;

3. identify and recommend to the IPSO/Caretaker/IRD the processors who will become editors, coders, and encoders in the SS 2015, if any;

4. be responsible in assigning CP Form 1 (Listing Booklet), CP Form 2 (Household Questionnaire), and CP Form 4 (Institutional Population Questionnaire) to the editors, and assessment of the performance of these personnel from time to time;

5. be responsible in the assignment of CP Form 1 for encoding by the Assistant Supervisor of every page total in the Quick Count System (QCS);

6. closely supervise the work of all processors to ensure that the standards of data quality prescribed in this manual are met;

7. take charge of reviewing and verification the CP Form 5 (Barangay Schedule) and maps;

8. recommend to the IPSO/Caretaker/Head CAS cases needing field verification/validation, propose efficient strategies for doing such field verification/validation, and monitor the resolutions or actions taken;

9. perform key verification of machine coded entries in the scanned images;

10. prepare and evaluate worksheets on population counts and demographic indicators;

11. evaluate the reasonableness and consistency of data;

12. supervise the transmittal of processed questionnaires and data processing status files based on the Tracking, Receipt and Control System (TRACS);

13. assess the progress of data processing based on the status reports generated from TRACS and submit the said reports to the IPSO/caretaker;

14. implement action plans to meet the scheduled completion of data processing; and

15. perform other activities that may be required by the IPSO/Caretaker.

<u>For DPC 2015 with Scan Station</u>

The **PCPS Head/Supervisor** will:

1. serve as the focal person for the SS 2015;

2. take charge of the daily operations, including the distribution of the questionnaires and maps to be scanned/interpreted and answering/acting on queries/issues raised by the SS 2015 hired personnel;

3. supervise the transmittal of scanned/interpreted questionnaires and maps, and their corresponding data/image files to the DPC 2015;

4. implement action plans to meet the scheduled completion of scanning/interpretation in the SS 2015; and

5. perform other activities that may be required by the IPSO/caretaker.

The **Head Census Area Supervisor** (Head CAS) will:

1. assist the PCPS Head/Supervisor in resolving queries and issues raised during the general screening, editing, coding, and encoding of the questionnaires, as well as during the verification of maps; and

2. whenever necessary, conduct field verification/validation to solve the major problems referred by the supervisors on entries which are unrealistic or not common in the locality.

The **PCPS Assistant Supervisor** will:

<u>In the DPC 2015</u>

1. serves as the Assistant Supervisor in the DPC 2015;

2. assist the PCPS Supervisor in the daily operations of data processing, including answering/acting on the queries/issues raised by the processors;

3. encode every page total of CP Form 1 in the QCS;

4. check that all barangays have corresponding CP Form 5 using the Barangay Reference File (BRF) as reference;

5. perform complete editing of CP Form 5 and evaluation of maps;

6. assist in the verification of barangay/EA packs that have undergone general screening and editing;

7. oversee the generation of TRACS status reports by the RCC;

8. generate population count reports, and frequency and consistency tables for evaluation;

9. assist in the preparation and evaluation of worksheets on population counts and selected socio-economic and demographic indicators;

10. assist in the implementation of action plans to meet timetable of data processing to ensure that the assignments of data processors are accomplished on time; and

11. perform other POPCEN-related activities that may be required by the Supervisor.

For DPC 2015 with Scan Station

1. assist the PCPS Supervisor in monitoring the daily operations in the SS 2015;

2. ensure that the assignments of the scan/interpret operators are accomplished on time;

3. facilitate the transmittal of scanned/interpreted questionnaires and maps, and their corresponding data/image files to the DPC 2015; and

4. perform other POPCEN-related activities that may be required by the Supervisor.

The **Receipt and Control Clerk** will:

In the DPC 2015

1. receive and account for the completeness of the questionnaires, maps, and other census forms and materials (manuals and others) submitted by the Hired CAS against the EARF and CP Form 13 (Transmittal/Receipt Form);

2. encode in the TRACS the quantities and the dates when the questionnaires and maps were received from the Hired CAS and accomplish CP Form 19 (Provincial Processing Receipt and Control Form);

3. keep track of the flow of documents during the general screening, editing, and encoding of the page totals of CP Form 1 in the QCS using TRACS and record these also in CP Form 19;

4. assist in checking the geographic identification (Geo-ID) and completeness of CP Forms 2 and 4 vis-à-vis CP Form 1;

5. see to it that the questionnaires and maps are properly arranged in their designated racks during the data processing;

6. see to it that the CP Forms 2 and 4 are properly bundled by barangay/EA pack for transmittal to the SS 2015 for scanning/interpretation;

7. bundle CP Form 1 and maps by city/municipality and CP Form 5 by province before these are transmitted to the SS 2015 for scanning/interpretation;

8. folio CP Form 10 (Daily Accomplishment Report of Enumerator), CP Form 11A (Accomplishment Report of Team Supervisor), CP Form 11B (Accomplishment Report of Census Area Supervisor), CP Form 12 (Spotcheck, Reinterview, and Observation Record), and CP Form 16 (Certification of Punong Barangay) by city/municipality;

9. prepare the processed CP Form 1 and maps for transmittal to the SS 2015 and record these in TRACS and CP Form 19;

10. generate and submit weekly to the Supervisor the status report of TRACS on the processed questionnaires and maps; and

11. perform other POPCEN-related activities that may be required by the supervisors.

<u>For DPC 2015 with Scan Station</u>

1. receive and account for the completeness of the questionnaires and maps transmitted by the DPC 2015 against the EARF and CP Form 13;

2. encode in the SCIPS the quantities and the dates when the questionnaires and maps were received from the DPC 2015;

3. keep track of the flow of documents during the scanning/interpretation using SCIPS;

4. see to it that the questionnaires and maps are properly bundled and arranged in their designated racks during the data processing;

5. prepare the data/image files for transmittal to the DPC 2015 and record these in the SCIPS;

6. generate and submit weekly to the Supervisor the status report of SCIPS using TRACS on the scanned/interpreted questionnaires and maps; and

7. perform other POPCEN-related activities that may be required by the supervisors.

During the manual processing, the processors (editors) shall be directly responsible for the general screening and editing of the questionnaires and maps in preparation for scanning/interpretation.

Manual processors (**Screeners/Editors)** will:

1. check if the CP Forms 1, 2, and 4 are properly bundled;

2. check for the completeness of CP Forms 2 and 4 vis-à-vis CP Form 1;

3. verify the Geo-ID of CP Forms 1, 2, and 4, as well as the maps;

4. ensure that the corresponding entries in CP Forms 2 and 4 are the same with those in CP Form 1;

5. check for the legibility, acceptability, and consistency of entries in the questionnaires;

6. ensure that all applicable items in the questionnaires have entries;

7. check for the consistency of write-in entries with the codes supplied by the enumerator (EN);

8. check that the write-in entries in CP Forms 2 and 4 for Item P9 – Religious Affiliation and Item P12 – Highest Grade/Year Completed for post secondary or college course completed; and the write-in entry in CP Form 2 for Item P14 – Vocational/Technical Course Obtained and Item P16 – Usual Activity/ Occupation are clearly or sufficiently described in preparation for machine coding;

9. copy correctly from CP Form 2 the contents that was used in enumerating institutional population to CP Form 4; transcribe damaged forms with indistinguishable entries due to unnecessary marks, folds, and deterioration to new questionnaires;

10. ensure the completeness of barangay/EA/block maps vis-à-vis CP Form 1;

11. inform the supervisors of the problems encountered during the editing by accomplishing CP Form 21 (Problems Encountered/Referral Form);

12. assist in the preparation of the manually processed questionnaires and maps for scanning/interpretation;

13. assist in the evaluation of maps; and

14. perform other POPCEN-related activities that may be required by the supervisors.

The **Utility Worker** will:

1. assist the RCC in retrieving and returning the questionnaires and maps from/to their designated storage racks;

2. perform general service tasks, particularly maintenance of the orderliness and cleanliness in the office;

3. prepare packages for delivery;

4. reproduce various forms needed;

5. perform liaison works within/outside the office; and

6. perform other activities that may be assigned by the supervisors.

Data Processing Flow

This chapter presents the flow of data processing operations in the 2015 Census of Population (POPCEN 2015) Data Processing Center (DPC 2015) and Scan Station (SS 2015). It also discusses the objectives and the major activities to be done during the manual and machine processing.

3.1   DATA PROCESSING FLOW

The accomplished questionnaires and maps submitted by the Head Census Area Supervisors (Head CASs) to the Provincial Statistical Office (PO) will undergo various steps during the data processing to transform them into data and information. Specifically, the major activities are as follows:

Receipt and control of EA pack involves the following activities:
- receipt and control of EA (Enumeration Area) packs containing CP Forms 1, 2, 4, and 5, maps and administrative forms at the DPC 2015;
- checking for completeness of census forms, maps, and administrative forms with CP Form 13 and Enumeration Area Reference File (EARF) as reference;
- separation of maps for bundling by city/municipality;
- separation of CP Form 5 (Barangay Schedule) for bundling by province; and
- separation of admin forms for folioing.

General Screening of EA pack containing CP Forms 1, 2, and 4 involves the following activities:
- completeness checking of CP Forms 1, 2, and 4 by EA;
- verification of the correctness of geographic identification (Geo-ID) written in CP Forms 1, 2, and 4 using EARF or Barangay Reference File (BRF);
- verification of the correctness of the household/institutional identification numbers (BSN, HUSN, HSN, and ISN) in CP Forms1, 2, and 4;
- checking of accuracy and correctness of entries in CP Form 1 with CP Forms 2 and 4 in terms of the name and address of household head/institution, serial numbers, and count of total population;
- accuracy and completeness checking of entries in the page totals; and
- enhancement of entries and/or transcription, if necessary.

Encoding of CP Form 1 involves the following activities:
- transmittal to the Assistant Supervisor for encoding of page totals using the Quick Count System (QCS);
- returning to EA pack for map evaluation/transmittal to SS 2015 for scanning;

- validation of Geo-ID and consistency checking of total population counts;
- generation of Quick Count (QC) tables for data evaluation; and
- submission of batch files to the Central Office (CO) for further evaluation.

Processing of CP Forms 2 and 4 involves the following activities:
- completeness and consistency checking of entries;
- sufficiency/clarity checking of selected data items for machine coding;
- transmittal to the SS 2015 for scanning/ interpretation;
- returning of batch file and image file of the scanned/interpreted forms to the DPC 2015 for data encoding;
- machine processing (encoding, coding, key verification, and editing);
- generation of frequency and consistency tables for data evaluation;
- submission of batch files to the Central Office (CO) for further evaluation.

**Processing of CP Form 5** involves the following activities:
- completeness checking of CP Form 5 using CP Form 13 and BRF as references;
- verification of the correctness/completeness of Geo-ID;
- enhancement of entries and/or transcription, if necessary;
- completeness and consistency checking of entries;
- transmittal to the SS 2015 for scanning/ interpretation;
- returning of batch file and image file of the scanned/interpreted forms to the DPC 2015 for data encoding;
- machine processing (encoding, coding, and editing);
- submission of batch files to the CO for generation of frequency and consistency tables for data evaluation of field offices;
- verification of inconsistent entries by field offices and if necessary, conduct field verification for these entries; and
- submission of updated batch files to CO for further evaluation.

Processing of Maps involves the following activities:
- completeness checking of census maps by EA using CP Form 13 and EARF as references;
- verification of the correctness of Geo-ID written in maps using EARF;
- verification of the correctness of household serial numbers (HSNs) on plotted buildings on the census EA maps with CP Form 1;
- redrawing of maps, if necessary;
- transmittal to the SS 2015 for scanning; and
- transmittal of image files to the CO for machine processing and for use in updating of map files.

Shown in Illustration 3.1 on the next page is the diagram of the data processing flow.

ILLUSTRATION 3.1
DATA PROCESSING FLOW

Receipt and Control of EA Packs containing CP Forms 1, 2, 4, and 5, and Other Forms
a. Receipt and control of CP forms and maps
b. Separate maps for bundling by city/municipality
c. Separate CP Form 5 for bundling by province
d. Separate admin forms for folioing

General Screening of EA pack containing CP Forms 1, 2, and 4
a. Completeness check (booklets, forms by EA)
b. ID validation
c. Checking of accuracy and correctness of entries in CP Form 1 with CP Forms 2 and 4 in terms of the name and address of household head/institution, serial numbers, and count of total members by sex
d. Checking of accuracy and correctness of entries in the page totals
e. Enhancement of entries and/or transcription, if necessary
f. Separating CP Form 1 from EA pack for encoding

General Screening of CP Form 5
a. Completeness checking
b. ID validation
c. Enhancement of entries and/or transcription, if necessary

General Screening of Census Barangay, EA, and Block Maps
a. Completeness checking
b. ID validation, including checking of sheet numbers
c. Redrawing, if necessary

CP Form 1

Encoding of page totals using Quick Count System (QCS)

Returning to EA pack

ID validation and consistency checking of population counts

Generation of QC tables

Evaluation of QC tables

Submission of batch files to CO thru RSSO

CP Forms 2 and 4

Editing
a. Checking for completeness and consistency of entries (and reflect correction of entries for count of members)
b. Checking clarity of write-in entries for selected data items in preparation for machine coding

Transmittal of questionnaires to SS 2015 for scanning

Transmittal of batch/image files to DPC 2015 for data encoding

Encoding of entries using image and batch/data files

Machine coding and key verification of selected data items

Machine Editing
a. ID validation
b. Completeness checking
c. Data consistency checking

Generation and evaluation of frequency and consistency tables

Submission of batch/image files to CO thru RSSO

Editing of items and missing entries

Review of edited forms

Transmittal to SS 2015 for scanning and interpretation

Encoding of entries using image and batch/data files

Machine Editing
a. ID validation
b. Completeness checking
c. Data consistency checking

Submission of batch files to CO thru RSSO

Generation of tables by the CO

Returning of generated tables to the DPC 2015

Evaluation of tables and field verification

Submission of batch files to CO thru RSSO

Map Evaluation
• Checking of plotted buildings and HSN with CP Form 1

Transmittal to SS 2015 for scanning

Transmittal of image files to CO thru RSSO

3.2   MAJOR ACTIVITIES TO BE DONE DURING THE MANUAL PROCESSING

The activities for the manual processing include the following:

A. Receipt and Control

1. Checking for the completeness of accomplished questionnaires and maps and other census forms and materials received from the Head CAS against CP Form 13 (Transmittal/Receipt Form) and Enumeration Area Reference File (EARF);

2. Separating maps for bundling by city/municipality;

3. Separating CP Form 5 for bundling by province;

4. Separating administrative forms for folioing;

5. Controlling and monitoring the flow of questionnaires and maps during the manual processing;

6. Controlling and monitoring the flow of CP Form 1 for data encoding and machine editing;

7. Transmittal of manually processed questionnaires and maps to the SS 2015 for scanning/interpretation; and

8. Transmittal of batch files and image files to the Regional Statistical Services Office (RSSO)/CO.

B. General Screening

9. Verification of entries in the geographic identification (Geo-ID) portion of each questionnaire and map with the EARF or Barangay Reference File (BRF) to ensure that each Enumeration Area (EA)/barangay has accomplished questionnaires and maps and that the write-in entries for the geographic areas are correctly coded;

10. Checking for the sequential arrangement of the questionnaires based on their Geo-ID, building serial number (BSN), housing unit serial number (HUSN), household serial number (HSN), and institutional serial number (ISN);

11. Checking for the completeness of the accomplished CP Forms 2 and 4 vis-à-vis CP Form 1;

12. Checking for the accuracy and correctness of the name and address of the household head; BSN, HUSN, and HSN; and number of male, female, and total household members in CP Form 1 vis-à-vis CP Form 2;

13. Checking for the accuracy and correctness of the name and address of the Institutional Living Quarter (ILQ); BSN and ISN; and number of male, female, and total ILQ members in CP Form 1 vis-à-vis CP Form 4;

14. Checking for the accuracy/correctness of entries in the page totals of CP Form 1;

15. Checking for the clarity and legibility of entries, including the "**X**" marks in the questionnaires and enhancement of such entries, if necessary;

16. Enhancement or transcription of entries from damaged or provisional questionnaires to new or appropriate questionnaires;

17. Checking for the completeness of the CP Form 5 using CP Form 13 and Barangay Reference File as references;

18. Checking for the completeness of the census maps using CP Form 13 and Enumeration Area Reference File as references;

19. Checking for the sequential arrangement of the barangay, EA, and block maps based on the Geo-ID and sheet number; and

20. Redrawing of maps, if necessary.

C. Editing

21. Editing of data items and missing entries in CP Forms 2, 4, and 5;

22. Checking for the correctness/consistency of codes corresponding to the write-in entries in Item P2 (Relationship to the Household Head/Residence Status), and Item P12 (Highest Grade/Year Completed), except for the codes for postsecondary and college courses in CP Forms 2 and 4; and

23. Checking for the sufficiency and clarity of the write-in entries in Item P9 (Religious Affiliation), P12 for the codes for postsecondary and college courses in CP Forms 2 and 4, and in Item P14 (Technical/Vocational Course Obtained) and Item P16 (Usual Activity/Occupation) in CP Form 2, in preparation for machine coding.

D. Other Activities

24. Evaluating the maps by checking for the completeness and consistency of the plotted buildings and the HSNs indicated on the maps vis-à-vis CP Form 1;

25. Preparing the questionnaires and maps for scanning/interpretation, such as sorting, spreading, and grooming;

26. Folioing of administrative forms; and

27. Accounting for the number of unused questionnaires and forms by type.

3.3   MAJOR ACTIVITIES TO BE DONE DURING THE MACHINE PROCESSING

The activities for the machine processing include the following:

A. Receipt and Control

1. Checking for the completeness of manually processed questionnaires and maps received from the DPC 2015 against CP Form 13;

2. Controlling and monitoring the flow of CP Form 1 that are for data encoding of page totals by the Assistant Supervisor;

3. Controlling and monitoring the flow of questionnaires that are for machine editing;

4. Controlling and monitoring the flow of questionnaires and maps that are for scanning/interpretation;

5. Controlling and monitoring the flow of batch/image files during the machine processing; and

6. Transmittal of the batch/image files to the DPC 2015 or the CO through the RSSO.

B. Scanning and Interpretation

7. Preparing (sorting, spreading, and grooming) the questionnaires/maps for scanning;

8. Scanning the questionnaires/maps to produce images in electronic format (scanned image files); and

9. Running the interpret program to enable interpretation of marked entries and produce batch files (data files).

C. Data Encoding

10. Encoding of page totals of CP Form 1 using QCS;

11. Encoding of entries of CP Forms 2, 4, and 5 after the scanning and interpretation; and

12. Running the Batch Analyze utility.

D. Machine Coding and Verification

13. Coding of the write-in entries for religious affiliation in P9 and postsecondary and college course in Item P12 for CP Form 2 and 4, and technical/vocational course obtained in Item P14, and usual activity/occupation in Item P16 for CP Form 2; and

14. Verification of codes of the write-in entries for religious affiliation in P9 and postsecondary and college course in Item P12 for CP Form 2 and 4, and technical/vocational course obtained in Item P14, and usual activity/occupation in Item P16 for CP Form 2.

E. Machine Editing

15. Preparing the questionnaires for data quality check by running the following programs in the Survey/Census Integrated Processing System (SCIPS), until the data files are declared "clean":

    - *Geo-ID Validation and Completeness Check* – to check if there are invalid geographic area codes or missing EAs

    - *Questionnaire ID Validation* – to check if there are duplicate HSNs and ISNs and the booklet numbers are not in sequence

    - *Data Consistency Check* – to generate error lists

    - *Analyze Batch* – to ensure that every scanned image file has a corresponding case in the encoded batch file, and vice versa.

F. Generation of Tables and Data Evaluation

16. Tabulation of CP Form 1 from utilities in QCS;

17. Evaluation of QC Tables; and

18. Generating frequency and consistency tables for evaluation of detailed demographic and socio-economic characteristics.

Receipt and Control

This chapter discusses the procedures to be followed in the receipt and control of the various census questionnaires, forms, and maps. It also identifies the specific and important tasks of the Receipt and Control Clerk (RCC) during the 2015 Census of Population (POPCEN 2015) data processing in both the Data Processing Center (DPC 2015) and Scan Station (SS 2015).

4.1   RECEIPT AND CONTROL AT THE DPC 2015

As soon as the enumeration in a city/municipality is completed, the Head Census Area Supervisor (Head CAS) will submit the boxes containing the POPCEN 2015 questionnaires, maps, and other census forms and materials to the DPC 2015. The boxes should contain the following:

a. CP Form 1 – Listing Booklet
b. CP Form 2 – Household Questionnaire
c. CP Form 4 – Institutional Population Questionnaire
d. CP Form 5 – Barangay Schedule
e. CP Form 10 – Daily Accomplishment Report of Enumerator (last batch)
f. CP Form 11A – Accomplishment Report of Team Supervisor
g. CP Form 11B – Accomplishment Report of Census Area Supervisor
h. CP Form 12 – Spotcheck, Reinterview, and Observation Record
i. CP Form 13 – Transmittal/Receipt Form
j. CP Form 14 – Bundle Cover
k. CP Forms 16 – Certification of Punong Barangay
l. Barangay/Enumeration Area (EA)/Block Maps
m. POPCEN 2015 Identification Card
n. Manuals and unused questionnaires

The RCC in the DPC 2015 will be responsible for receiving and accounting all the accomplished questionnaires, maps, unused census questionnaires and forms, and other census materials transmitted by the Head CAS to the Provincial Statistical Office (PO).

Generally, the RCC in the DPC 2015 will:

1. check all the accomplished questionnaires and maps received with those listed in CP Form 13;

2. check the Geo-ID of the questionnaires and maps using the Enumeration Area Reference File (EARF) as reference. It must be ensured that all EAs have corresponding questionnaires and maps;

3. encode in the computer using the Tracking, Receipt and Control System (TRACS) the date and quantity of CP Forms 1, 2, 4, and 5, and barangay/EA/block maps received as reported in CP Form 13, and record these information also in CP Form 19 (Provincial Processing Receipt and Control Form);

4. mark the status of a barangay/EA pack in the TRACS as "PENDING" if the questionnaires and maps transmitted and received do not tally with the counts stated in CP Form 13. In this case, the Supervisor must be informed so that the Head CAS concerned will be notified. A barangay/EA pack marked as "PENDING" in the TRACS cannot be assigned to a processor until it is cleared by the Supervisor. The detailed procedures in using the TRACS are discussed in the TRACS User's Manual;

5. separate CP Form 5 from the barangay/EA pack; bundle them by province and set aside for verification by the Assistant Supervisor and review by the Supervisor;

6. separate the maps from the barangay/EA pack; bundle them by city/municipality and set them aside for processing or evaluation after all questionnaires have been processed;

7. set aside the CP Form 10 for transmittal to the PO Supervisor. This last batch of CP Form 10 received by the PO will be used as supporting documents for the last payment of wages and other financial claims of the enumerators (ENs).

8. set aside CP Forms 11A, 11B, 12, 13, and 16 and other administrative forms for folioing and for use as reference in the future; and the manuals and other materials, including unused questionnaires and forms for storage. The specific instructions in folioing these forms will be discussed later in this manual; and

9. file the barangay/EA packs containing only CP Forms 1, 2, and 4 on designated racks. Each barangay/EA pack should be labeled and the label should be facing outside when placed on the rack for easy retrieval during the data processing.

4.2   RECEIPT AND CONTROL WITHIN THE DPC 2015 FOR MANUAL PROCESSING

The RCC shall also be responsible for controlling the flow and distribution of questionnaires and maps within the DPC 2015. As such, he/she must know where a particular barangay/EA pack or questionnaires/maps are located or who is processing the said questionnaires/maps.

Specifically, the RCC in the DPC 2015 will:

A. Receipt and Control of EA Pack that contains CP Form 1, 2, 4, 5, and maps

1.   control and distribute the barangay/EA packs containing CP Form 1, 2, 4, and maps to the processors to determine the completeness of the questionnaires and maps and the correctness of the Geo-ID codes. The distribution of the barangay/EA packs shall be carried out upon the instruction of the supervisors;

2.   verify and/or report to the Head CAS any discrepancy between the number of CP Forms 1, 2, and 4, and maps in the bundle as reported by the general screener-processor vis-à-vis CP Form 13, and correct accordingly; and

3.   control and distribute the CP Form 5 bundled by province to the Assistant Supervisor for determining the completeness and correctness of the Geo-ID codes using EARF as reference, and also for editing and later to the Supervisor for review.

B. General Screening of CP Form 1, 2, 4, 5, and maps

4.   control and distribute the barangay/EA packs containing CP Forms 1, 2, and 4 to the screener who will be responsible for the general screening of these questionnaires;

5.   control and distribute the CP Forms 5 and maps to the screener who will be responsible for the general screening of these questionnaires/maps; and

6.   after the general screening, encode in TRACS and record in CP Form 19 the number of CP Forms 1, CP Forms 2, CP Forms 4, and maps returned by the screeners.

C. Encoding of Page Totals of CP Form 1

7.   control and distribute the bundle of the CP Form 1 to the Assistant Supervisor or any Philippine Statistics Authority (PSA) personnel authorized to access the data entry menu of the Quick Count System (QCS) for encoding of page totals using QCS and return the CP Form 2 and CP Form 4 to the designated rack for editing at later scheduled time;

8. after encoding the page totals, encode in TRACS and record in CP Form 19 the number of CP Forms 1 returned by the encoder; and

9. return the bundles of encoded CP Form 1 to their EA packs.

D. Editing

10. control and distribute CP Forms 1, 2, and 4 to the processors and CP Form 5 to assistant supervisor, who will be responsible for the editing of these questionnaires. CP Form 1 should be prioritized for editing;

11. after every editing of forms, encode in TRACS and record in CP Form 19 the number of CP Forms 1, 2, and 4 returned by the processors and CP Form 5 returned by the assistant supervisor;

12. return the manually processed barangay/EA packs containing CP Forms 1, 2, and 4 to their EA pack;

13. control and distribute the CP Form 5 bundled by province to the Assistant Supervisor for editing and later to the Supervisor for review, using the CP Form 1 as reference; and

14. return the manually processed CP Form 5 to their designated folios.

E. Other Activities

15. submit to the Supervisor the CP Form 21 (Problems Encountered/Referral Form). Barangay/EA packs with problems, that is, marked as "PENDING" shall be placed on designated racks;

16. receive the copy of CP Form 21 with answers/actions taken by the Head CAS and submit to the Supervisor for verification;

17. assign the barangay/EA pack with problems to the same editor who edited the said pack, together with the copy of CP Form 21, which contains the answers/actions taken by the Head CAS and which were already verified by the Supervisor;

18. once the CP Form 1 have been processed and encoded (page totals), control and distribute the maps for processing and evaluation; and

19. generate weekly the TRACS reports and submit these to the Supervisor.

4.3   RECEIPT AND CONTROL FROM THE DPC 2015 TO THE SS 2015

Once the CP Forms 1, 2, 4, and 5 have already undergone general screening and editing, and the page totals of CP Form 1 have been encoded for Quick Count (QC) Report, the RCC should inform his/her supervisors that these questionnaires are ready for transmittal to the SS 2015 for scanning/interpretation. Maps that have undergone processing and evaluation should likewise be transmitted to the SS 2015 for scanning.

Specifically, the RCC in the DPC 2015 will:

1. transmit the CP Forms 2 and 4 bundled by barangay/EA to the SS 2015 for scanning/interpretation;

2. transmit the CP Form 1 bundled by city/municipality to the SS 2015 for priority scanning after the encoding of names; addresses; etc for identified primary sampling units for the master sample;

3. transmit the CP Form 5 bundled by province to the SS 2015 for scanning/ interpretation;

4. encode in TRACS and record in CP Form 19 the number of questionnaires by type and the date the questionnaires are transmitted to the SS 2015 for scanning/interpretation;

5. transmit the maps bundled by city/municipality to the SS 2015 for scanning;

6. encode in TRACS and record in CP Form 19 the number and the date the maps are transmitted to the SS 2015 for scanning;

7. accomplish CP Form 13 when transmitting questionnaires and maps to the SS 2015; and

8. ensure that all questionnaires and maps in CP Form 13 are accounted for in the boxes for transmittal.

4.4   HOW TO FILL OUT CP FORM 19 – PROVINCIAL PROCESSING RECEIPT AND CONTROL FORM

An accomplished CP Form 19 can be generated using TRACS. As back up, the RCC in the DPC 2015 should accomplish CP Form 19 upon receipt of the questionnaires and maps submitted by the Head CAS. This form will be used by the RCC to monitor the flow of questionnaires and maps during the various phases of data processing. This will serve as a hardcopy file of the contents in the TRACS.

Below are the instructions that should be followed by the RCC in filling out each column of CP Form 19:

Geo-ID and Sheet of Sheets Portion

1. Fill out the Geo-ID portion, that is, the name and code of the province and city/municipality.

2. Fill out the number of sheets correctly, that is, if two or more sheets of CP Form 19 are used, there should be **Sheet 1 of 2 Sheets** and **Sheet 2 of 2 Sheets**.

Columns 2 to 4 – Barangay Name and Code, and EA Number

3. Fill out the name of barangay in Column 2 and its corresponding code in Column 3.

4. Fill out EA number in Column 4. Make sure that this EA number belongs to the barangay written in Column 2.

Columns 5 to 8 – Receipt from CAS

5. Indicate in Column 5 the type of form or map and in Column 6 the number of bundles/forms/maps in the barangay/EA pack. Indicate in Column 7 the date when the barangay/EA pack is received from the Head CAS. Affix also your initials (example, Michael Q. Bello is "MQB") in Column 7 beside the date. If there are discrepancies between the actual counts and the number of questionnaires and maps reported by the Head CAS in CP Form 13, refer the matter to your Supervisor for appropriate action. Write the corresponding status in Column 8.

Columns 9 to 12 – General Screening

6. Write in Column 9 the date when the barangay/EA pack is released for general screening and completeness checking. Ask the processor to affix his/her initials beside the date when he/she receives the pack. Upon return of barangay/EA pack from the general screening and completeness checking, write the date and affix your initials in Column 10.

7. Write in Column 11 the number of bundles/forms/maps in the barangay/EA pack when it was returned by the processor after the general screening and completeness checking. If there are discrepancies between the expected counts and the number of questionnaires/maps actually returned, refer the matter to your Supervisor for appropriate action. Write the corresponding status in Column 12.

Columns 13 to 16 – Encoding of CP Form 1 for Quick Count

8. Write the date when the bundle of CP Form 1 is released for encoding of CP Form 1. Ask the processor to affix his/her initials beside the date when he/she receives the pack in Column 13. Upon return of the bundle of CP Form 1 from the encoding, affix the date and your initials in Column 14.

9. Write in Column 15 the number of CP Form 1 in the bundle when it was returned by the encoder after encoding of the page totals. If there are discrepancies between the expected counts and the number of CP Form 1 actually returned, refer the matter to your Supervisor for appropriate action. Write the corresponding status in Column 16.

Columns 17 to 20 – Editing

10. Write the date when the barangay/EA pack is released for editing. Ask the processor to affix his/her initials beside the date when he/she receives the pack in Column 17. Upon return of the barangay/EA pack from the editing, affix the date and your initials in Column 18.

11. Write in Column 19 the number of bundles/forms in the barangay/EA pack when it was returned by the processor after editing. If there are discrepancies between the actual counts and the number of questionnaires returned, refer the matter to your Supervisor for appropriate action. Write the corresponding status in Column 20.

Column 21 – Remarks

12. Write in Column 21 any remark/s related to any phase of processing, such as discrepancy in the number of questionnaires received/returned, referred to the CAS for field verification, among others.

Columns 22 to 23 – Transmittal to SS 2015

13. Once all the problems for a particular barangay/EA pack are resolved, write in Column 22 the date when the barangay/EA is transmitted to the SS 2015 for scanning/interpretation. Affix your signature beside the date.

14. Write in Column 23 the number of bundles/forms in the barangay/EA pack when it was transmitted to the SS 2015 for scanning/interpretation.

Prepared by and Verified by Portion

15. After the questionnaires and maps for a particular barangay/EA have been processed, the RCC will affix his/her signature over his/her printed name and write the date on the spaces provided below "Prepared by:". The Supervisor, on the other hand, will affix his/her signature over his/her printed name after he/she has reviewed and confirmed the correctness of the contents of CP Form 19, and write the date on the spaces provided below "Verified by:".

ILLUSTRATION 4.1
FILLED OUT CP FORM 19
(PROVINCIAL PROCESSING RECEIPT AND CONTROL FORM)

CP Form 19

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 Census of Population
PROVINCIAL PROCESSING RECEIPT AND CONTROL FORM

Sheet __I__ of __II__ Sheets

PROVINCE ____BATANGAS____

CITY/MUNICIPALITY ____TUY____

1 0
3 4

Line No. (1)	Barangay Name (2)	Code (3)	EA Number (4)	Type of Form and Map (5)	Receipt from CAS: No. of Bundles of Forms/Maps (6)	Date Received/Initials (7)	Status 1-OK 2-Pending (8)	General Screening: Date Released/Initials (9)	Date Returned/Initials (10)	No. of Bundles of Forms/Maps (11)	Status (12)	Encoding CP Form 1 for Quick Count: Date Released/Initials (13)	Date Returned/Initials (14)	No. of Bundles of Forms (15)	Status (16)	Editing: Date Released/Initials (17)	Date Returned/Initials (18)	No. of Bundles of Forms (19)	Status (20)	Remarks (21)	Transmittal to SS 2015: Date Transmitted/Initials (22)	No. of Bundles of Forms/Maps (23)
1	Acle	001																				
2			000000	Form1	5	9/5 K	1	10/5 JL	10/7 K	5	1	10/7 CC	10/9 K	5	1	10/9 MV	10/23 K	5	1		10/23 K	5
3			000000	Form2	1/250	9/5 K	1	10/5 JL	10/7 K	1/250	1					10/9 MV	10/23 K	1/250	1		10/23 K	1/250
4			000000	Form4	0	9/5 K	1	10/5 JL	10/7 K	0	1					10/9 MV	10/23 K	0	1		10/23 K	0
5			000000	Form5	1	9/5 K	1	10/5 JL	10/7 K	1	1					10/9 MV	10/23 K	1	1		10/23 K	1
6			000000	Map	1	9/5 K	1	10/5 JL	10/7 K	1	1					10/9 MV	10/23 K	1	1		10/23 K	1
7	Bayudbud	002																				
8			000000	Form1	4	9/7 K	1	10/5 JL	10/9 K	4	1	10/9 CC	10/13 K	4	1	10/13 MV	10/27 K	4	1		10/28 K	4
9			000000	Form2	1/260	9/7 K	1	10/5 JL	10/9 K	1/260	1					10/13 MV	10/27 K	1/260	1		10/23 K	1/260
10			000000	Form4	0	9/7 K	1	10/5 JL	10/9 K	0	1					10/13 MV	10/27 K	0	1		10/23 K	0
11			000000	Form5	1	9/7 K	1	10/5 JL	10/9 K	1	1					10/13 MV	10/27 K	1	1		10/23 K	1
12			000000	Map	2	9/7 K	1	10/5 JL	10/9 K	2	1					10/13 MV	10/27 K	2	1		10/23 K	2
13			000000	Form1	5	9/7 K	1	10/5 JL	10/9 K	5	1	10/9 CC	10/13 K	5	1	10/13 MV	10/27 K	5	1		10/23 K	5
14			000000	Form2	1/270	9/7 K	1	10/5 JL	10/9 K	1/250	1					10/13 MV	10/27 K	1/250	1		10/23 K	1/250
15			000000	Form4	0	9/7 K	1	10/5 JL	10/9 K	0	1					10/13 MV	10/27 K	0	1		10/23 K	0
16			000000	Form5	0	9/7 K	1	10/5 JL	10/9 K	0	1					10/13 MV	10/27 K	0	1		10/23 K	0
17			000000	Map	1	9/7 K	1	10/5 JL	10/9 K	1	1					10/13 MV	10/27 K	1	1		10/23 K	1
18	Bolboc	003																				
19			000000	Form1	7	9/7 K	1	10/5 JL	10/9 K	7	1	10/9 CC	10/13 K	7	1	10/13 MV	10/27 K	7	1		10/23 K	7
20			000000	Form2	1/310	9/7 K	1	10/5 JL	10/9 K	1/310	1					10/13 MV	10/27 K	1/310	1		10/23 K	1/310

Prepared by:

Kristel B. Palino
KRISTEL B. PALINO
Signature over printed name of Receipt and Control Clerk

10/28/2015
Date

Verified by:

Victoria C. Cruz
VICTORIA C. CRUZ
Signature over printed name of Supervisor

11/6/2015
Date

General Instructions in Manual Processing

Prior to manual processing, each processor should be acquainted with the kinds of entries that are expected to be found in the accomplished questionnaires. The processors should abide by the general instructions described in this Chapter during the processing of questionnaires.

5.1 TYPES OF RESPONSES IN CP FORMS

The enumerators (ENs) were instructed to record the responses to the questions in the questionnaires using pencil in the following manner:

For pre-coded responses:

a. an "**X**" mark is written in the box opposite the code; or

b. the code is entered in the boxes.

Example:

Relationship to the Household Head	Sex
P2	**P3**
What is _____'s relationship to the head of this household? • WRITE THE ANSWER ON THE LINE PROVIDED. • WRITE THE CODE CORRESPONDING TO THE ANSWER. REFER TO CODES AT THE BOTTOM.	*Is _____ male or female?* 1 Male 2 Female

SPOUSE

SPECIFY

CODE FOR SPOUSE → 0 2

□ 1

X 2 ← "X" MARK FOR FEMALE

For write-in entries:

a. the response is written on the space provided and/or the digits of numeric entries are written in corresponding boxes.

Examples:

Usual Activity/Occupation	Age
P16	**P5**
During the past 12 months, what was _____'s usual activity/occupation?	*What is _____'s age as of his/her last birthday?*
• ASK FOR DETAILED DESCRIPTION OF THE PERSON'S USUAL ACTIVITY/OCCUPATION. • WRITE THE ANSWER ON THE LINE PROVIDED. • LEAVE THE BOXES BLANK FOR CODING DURING THE PROCESSING.	• WRITE IN THE BOXES THE AGE IN COMPLETED YEARS. • IF LESS THAN ONE YEAR OLD, WRITE "000".

ENTRY FOR USUAL ACTIVITY/ OCCUPATION → RICE FARMER
SPECIFY

NUMERIC ENTRIES FOR AGE ← 0 6 0

b. In CP Form 1, a "✓" mark is entered in the circle.

LISTING RECORD

LINE NO.	DAY OF VISIT	BUILDING SERIAL NUMBER (BSN)	HOUSING UNIT SERIAL NUMBER (HUSN)	HOUSE-HOLD SERIAL NUMBER (HSN)	INSTITU-TIONAL SERIAL NUMBER (ISN)	NAME OF HOUSEHOLD HEAD OR NAME/TYPE OF INSTITUTION / ADDRESS	POPULATION COUNT AS OF AUGUST 1, 2015			REMARKS
							TOTAL	MALE	FEMALE	
(1)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
1	8/13	0 1 0 9	0 1 3 2			LUCY BREBIESCAS				A - 8/15 3:00 PM
				0 1 4 1		56 MAGANDA STREET	◯			C – 8/15
2	13	0 1 1 0				LETTY'S DORM	8	4	4	
					0 0 0 3	58 MAGANDA STREET	✓			

INDICATOR FOR INSTITUTIONAL POPULATION

5.2   GENERAL INSTRUCTIONS FOR DATA PROCESSING

The following are the general instructions to be used during processing:

1. To distinguish the entries made during the enumeration from those entries made during the various levels of the data processing in the 2015 Census of Population (POPCEN 2015) Data Processing Center (DPC 2015), the color scheme of pens to be used are as follows:

Color of ballpen	To be used by:
Black	Editor
Red	Supervisor/Assistant Supervisor
Blue	Provincial Census Project Staff (PCPS) and Regional Census Project Staff (RCPS) and/or Central Office (CO)

Be careful in using the ballpen when editing the questionnaires. Unnecessary marks and inkblots may be interpreted as valid entries during the scanning and/or interpretation.

2. <u>Never erase an entry made by the EN</u>, whether written, coded and/or marked with "**X**". Always consider his/her entry as correct unless there is a clear indication that the entry is erroneous. Take note that, in general, write-in entries should prevail over the codes entered in the boxes.

3. As a general rule, do not guess or assume for an answer. It is better to refer the matter to your Supervisor/Assistant Supervisor who, in turn, should refer the case to the concerned Head Census Area Supervisor (Head CAS).

4. To correct an erroneous entry, <u>line out with two horizontal lines the wrong entry</u> and enter the correct one on the available space nearest the original entry. <u>Never use an eraser or liquid eraser</u> in correcting entries.

The following are illustrations on how to correct the entries:

a. For erroneous code in the boxes, line out with two horizontal lines the wrong code, and write the correct code following the prescribed strokes on the available space nearest the original code.

The prescribed strokes for writing numeric characters are:

0 I 2 3 4 5 6 7 8 9

Example:

Highest Grade/Year Completed

P12

What is the highest grade/year completed by _____ ?

- WRITE THE ANSWER ON THE LINE PROVIDED AND THE CODE CORRESPONDING TO THE ANSWER.
- REFER TO CODES AT THE BOTTOM.
- IF GRADUATE IN POST SECONDARY OR COLLEGE, SPECIFY THE COURSE AND LEAVE THE BOXES BLANK FOR CODING DURING PROCESSING.

GRADE 8 K TO 12
SPECIFY

| ~~3~~ | ~~2~~ | ~~0~~ | 480 |
---

b. For items requiring an "**X**" mark in one of the boxes, line out with two horizontal lines the wrong entry and write an "**X**" mark in the box corresponding to the correct answer. Do not extend the "**X**" mark outside the box. Also, if more than one box has an "**X**" mark, determine the correct entry and line out with two horizontal lines the incorrect response.

Example:

LINE NUMBER	Name	Relationship to the Household Head	Sex
	P1	**P2**	**P3**
	Who is the head of this household? Who are the persons usually residing here as of August 1, 2015? LIST AND WRITE THE NAME OF PERSONS OR HOUSEHOLD MEMBERS IN THIS ORDER: • Head • Spouse of the head • Never-married children of head/spouse from the oldest to the youngest • Ever-married children of head/spouse and their families from the oldest to the youngest • Other relatives of head • Nonrelatives of head	*What is ____'s relationship to the head of this household?* • WRITE THE ANSWER ON THE LINE PROVIDED. • WRITE THE CODE CORRESPONDING TO THE ANSWER. REFER TO CODES AT THE BOTTOM.	*Is ____ male or female?* 1 Male 2 Female
1	DE LEON LAST NAME TEODORICO FIRST NAME	HEAD SPECIFY 0 1	[X] 1 [X̶] 2
2	——————— LAST NAME MARIE FIRST NAME	SPOUSE SPECIFY 0 2	[X̶] 1 [X] 2

TEODORICO WAS MARKED AS FEMALE WHEN OBVIOUSLY HE IS MALE. THE "X" MARK OPPOSITE CODE "2" WAS LINED OUT AND "X" MARK WAS WRITTEN INSIDE THE BOX FOR CODE "1" (MALE).

BOTH BOXES WERE MARKED WITH "X". SINCE MARIE IS FEMALE, THE "X" MARK OPPOSITE CODE "1" WAS LINED OUT.

c. For an erroneous write-in entry, line out with two horizontal lines the incorrect entry and write the correct answer following the prescribed strokes on the available space near the original entry.

The prescribed strokes for writing alphabetic characters (in capital letters) are:

A B C D E F G H I J K L M N
Ñ O P Q R S T U V W X Y Z

Example:

Highest Grade/Year Completed
P12
What is the highest grade/year completed by ____? • WRITE THE ANSWER ON THE LINE PROVIDED AND THE CODE CORRESPONDING TO THE ANSWER. • REFER TO CODES AT THE BOTTOM. • IF GRADUATE IN POST SECONDARY OR COLLEGE, SPECIFY THE COURSE AND LEAVE THE BOXES BLANK FOR CODING DURING PROCESSING.
BS INDUSTRIAL TECH. B̶S̶ ̶I̶T̶ SPECIFY

BS IT COULD BE EITHER BS INFORMATION TECHNOLOGY OR BS INDUSTRIAL TECHNOLOGY, SO THERE IS A NEED TO ASCERTAIN THE CORRECT COURSE TITLE.

5. If an item calls for a specific number of digits, ensure that all the digits are entered in the boxes. Prefix zero(es) when necessary.

Example:

6. If there are missing entries, check if these can be reasonably determined on the basis of the other items. If the answers to these items are difficult to determine, consult your supervisors.

7. If a household member listed was lined out by the EN for exclusion from the list, line out with two horizontal lines all the entries and boxes in that particular row or line number, whether or not the lines and boxes have entries.

Example:

8. Write in the Processing Record of CP Form 14 (Bundle Cover) the date when the specific data processing activity has started and ended. The signature of the concerned personnel should also be affixed.

9. Check all the bundles for completeness. For example, for two bundles, there should be **Bundle 1 of 2 Bundles** and **Bundle 2 of 2 Bundles** written on CP Form 14. Check also the contents of the bundle as to the type of form/map.

10. Prepare a summary report on the inconsistencies or problems encountered during the general screening and editing for referral to your Supervisor. Use CP Form 21 (Problems Encountered/Referral Form) for this purpose.

General Screening of CP Forms 1, 2, and 4

Proper accounting of all the accomplished forms and maps is very important in every stage of the 2015 Census of Population (POPCEN 2015) data processing. This is to ensure that all CP Form 1 (Listing Booklet), CP Form 2 (Household Questionnaire), and CP Form 4 (Institutional Population Questionnaire) for a particular barangay/Enumeration Area (EA) are complete and not mixed up with those of other barangays/EAs. In general, this will facilitate the systematic flow of questionnaires and maps during the data processing.

Prior to editing, a general screening of CP Forms 1, 2, and 4 will be done as soon as these questionnaires are received at the POPCEN 2015 Data Processing Center (DPC 2015).

General screening of CP Form 1, CP Form 2, and CP Form 4 includes the following activities:

1. checking for completeness of CP Forms 1, 2, 4, for each EA;
2. verification of correctness of Geo-ID written in the CP Form 1, CP Form 2, and CP Form 4 of each EA/barangay using the EARF as reference;
3. checking of serial numbers assigned to buildings, housing units, households, and institutional living quarters;
4. matching of these serial number with those in CP Form 2 and CP Form 4 to ensure that for the same building, housing units, household, and institutional living quarter the serials numbers written in CP Form 1 are the same as those in CP Form 2/CP Form 4;
5. checking for correctness of the number of male and female members in the "Summary of Visit" portion in CP Form 2 and CP Form 4 based on the entries in items P1-Name of member, P2-Relationship to the household head/Residence status, and P3-Sex in these forms; and
6. checking for consistency of the total number of members, male members, and female members in CP Form 1 with the corresponding numbers in CP Form 2 and CP Form 4.

6.1 GENERAL INSTRUCTIONS IN THE GENERAL SCREENING OF CP FORMS 1, 2, AND 4

Data processors should be guided by the following general instructions in the general screening of questionnaires:

A. Assignment of EA Packs to Processors

1. All EA packs for the same barangay shall be assigned to one processor. If this is not possible, assign all the EA packs of a barangay to a group of processors who will work together.

2. If the barangay is composed of several EAs and assigned to only one processor, get one EA pack containing bundles of CP Form 1, CP Form 2, and CP Form 4 from the RCC and finish this pack first before getting another pack to avoid mixing with questionnaires from different EA packs.

B. Verification of Correctness of Geo-ID of Questionnaires and Checking for Completeness of Questionnaires

3. Check for the correctness of the Geo-ID in each CP Form 1, CP Form 2, and CP Form 4 using the Enumeration Area Reference File (EARF) written in CP Form 14 (Bundle Cover) as reference. Report any inconsistency to the Supervisor.

   • For CP Form 1, the Geo-ID panel consists of the month of visit, name and code of the province, city/municipality, and barangay, and the EA number. It also includes the number of booklets used for an EA.

   • For CP Form 2, the Geo-ID panel consists of the name and code of the province, city/municipality, and barangay, EA number, BSN, HUSN, HSN, line number of the respondent, name of household head, and address of the household. It also includes the number of booklets used for a household.

   • For CP Form 4, the Geo-ID consists of the name and code of the province, city/municipality, and barangay, EA number, BSN, ISN, code for the type of ILQ, and name/type and address of the ILQ. It also includes the number of booklets for an ILQ.

4. Ensure that CP Forms 1 are arranged by booklet number; CP Forms 2 by BSN, HUSN, and HSN and booklet number; and CP Forms 4 by BSN and ISN and booklet number.

   • The BSN, HUSN, and HSN in CP Form 2 or ISN in CP Form 4 should be the same as those found in Columns 2 to 5, respectively, of CP Form 1.

   • If there are two or more accomplished questionnaires (CP Forms 2 and 4) for the same household/institutional living quarter, make sure that the BSN, HUSN, HSN or ISN are the same for these questionnaires.

5. Ensure that all enumeration units listed in CP Form 1 have corresponding CP Form 2 or CP Form 4. Count and check if the actual number of questionnaires by form type matches with the number indicated in CP Form 14. If there is any discrepancy, refer to the Supervisor and correct accordingly.

6. Check for the final result of visit in CP Forms 2 and 4. Ideally, the code for the result of final visit should be "**1**" (interview completed). If the result of final visit is code "**2**" to "**6**", check the contents of the questionnaires if all the needed information were already collected. In this case, change the result of final visit to code "**1**" if completed. But if not, refer to Supervisor. Otherwise, record it in CP Form 21.

7. If there are missing or extra questionnaires, record these in CP Form 21 – Problems Encountered/Referral Form and report the matter to your PO Supervisor or to the Assistant Supervisor for appropriate action. The instructions on how to accomplish CP Form 21 are discussed in Section 6.9 of this Chapter. Inform also the RCC about the missing or extra questionnaires when returning the EA pack so that he/she will mark the status of the EA as "PENDING". Hence, the EA pack will not proceed to QCS encoding. Revisit to the household or ILQ will be made to get an interview if this has not been done or to pick up the filled-up questionnaire in case of a callback.

8. For enumeration units with special HSNs, 9999 (VBLDG or VHU), 8889 (VRH – vacation or rest house), 7777 (NUR) that are listed in CP Form 1 but without corresponding CP Form 2, get blank copy of CP Form 2 and fill out the Geo-ID portion, copy from CP Form 1 the building serial number (BSN), housing unit serial number (HUSN), HSN, name of the household head, if any, the entry "VHU", "VBLDG", "VRH", or "NUR", and the address. Record in CP Form 21 these Geo-ID information for the missing CP Form 2 and report this matter to your PO Supervisor who shall then call the attention of the CAS concerned for the filling-up of information on the items on housing characteristics (items B1 to B3). Revisit to the households for such information will be made.

C. Checking for Consistency of the Number of Male, Female, and Total Members in CP Form 2 and CP Form 4 with CP Form 1

9. Ensure that the count of members in CP Forms 2 and 4 exactly matches with those indicated in the CP Form 1. Otherwise, refer to the PO Supervisor and/or Assistant Supervisor for appropriate action.

    • Check that the total number of household members or total number of members in the institution recorded in the Summary of Visit portion of CP Form 2 (page 2A) or CP Form 4 (page 4A) corresponds to the line number of the last member in the household (page 2B) or (page 4B or 4C or 4D), respectively. If not, line out with two

horizontal lines the entry in the Summary of Visit portion and write the correct number based on the line number of the last member in the household. If there is no entry, enter the number based on the line number of the last member in the household.

- Check that the number of males corresponds to the number of members with "**X**" in the box for code "**1**" (Male) in Item P3-Sex and the number of females correspond to the number of members with "**X**" in the box for code "**2**" (Female). If not, line out with two horizontal lines the entry in the Summary of Visit portion of CP Form 2 or CP Form 4 and write the correct number based on Item P3-Sex. If there is no entry, write the correct number in the corresponding boxes for males and females based on Item P3-Sex.

D. Checking for the Accuracy of Page Totals in CP Form 1.

10. Check for the correctness of every page totals in CP Form 1 by manually counting the number buildings and housing units, number of vacant buildings and housing units, and number of households and Institutional Living Quarters (ILQs). Make correction/s, when necessary.

11. Check for the correctness of every page totals for the total population by sex, by adding the total household population and total institutional population. Make correction/s, when necessary.

12. Return the bundle of CP Form 1 to the Receipt and Control Clerk (RCC). This will be assigned to the Assistant Supervisor for data entry in the Quick Count System (QCS) before it is transmitted to the POPCEN 2015 Scan Station (SS 2015) for scanning.

E. Submission of EA Packs after General Screening

13. After general screening, ensure that all accomplished CP Form 1, CP Form 2, and CP Form 4 for a particular EA are arranged properly in one EA pack. The bundle of all CP Form 1 shall be on top of the EA pack, followed by the bundle of all CP Form 2 and CP Form 4. Use plastic sheet in covering each EA pack. Submit the EA pack to the RCC.

- From the EA pack, the RCC shall assign a bundle of CP Form 1 for encoding of page totals by the PO Assistant Supervisor while the bundle of CP Form 2 and CP Form 4 will remain in the pack for editing at a later scheduled time.

14. The number of CP Form 2 in each bundle should not exceed 500. For an EA with more than 500 questionnaires, rebundle CP Form 2 by dividing the total number of such questionnaires by 500, to determine the number of bundles for the EA. Do not punch holes, staple or use

fasteners/shoelaces in bundling CP Forms 1, 2 and 4. Accomplish a new CP Form 14 for rebundled questionnaires.

15. Submit the accomplished CP Form 21 to the RCC for reporting to the PO Supervisor for appropriate action. After all the missing/extra questionnaires have been accounted for, do the general screening of these questionnaires.   Insert each form in the bundle in correct sequence. Line out in CP Form 21 the status of these questionnaires/maps with "2" as PENDING and write "1" as OK. Return the EA pack along with the updated CP Form 21 to the RCC.

16. Get another EA pack for general screening.

6.2   SPECIFIC INSTRUCTIONS FOR CONSISTENCY CHECKING OF CP FORM 1

Verify the completeness and consistency of entries in every line number of CP Form 1. Check the correctness of the page totals for the total number of buildings, vacant buildings, housing units, vacant housing units, households, institutions, as well as total household population, total institutional population, and total population by sex in every page of CP Form 1.

After editing CP Form 1, there may be cases when the entries in the CP Form 1 page totals are updated based on the edited CP Forms 2 and 4.

Booklet ☐☐ **of** ☐☐ **Booklets**

This portion indicates the sequence and the total number of CP Form 1 used in the EA. The total number of CP Form 1 used is written in the second set of boxes. For example, the booklet marked "**BOOKLET 01 OF 10 BOOKLETS**" means that it is the first booklet of 10 booklets. Make sure also that the total number of booklets is consistent in all CP Form 1. Check if the last row of the last booklet of CP Form 1 used for the EA has an entry of "**00**", which indicates that it is the last line occupied for the EA.

Geographic Identification of the Province, City/Municipality, Barangay, and Enumeration Area

The province and city/municipality are allotted two boxes each for their corresponding geographic code while the barangay is allotted three boxes for its code. The EA number is allotted six boxes.

Check whether the names and codes of the province, city/municipality, and barangay, as well as the EA number entered in CP Form 1 are correct, vis-à-vis the EA Reference File (EARF). In case there are no geographic codes, supply the correct codes using the EARF. See to it that the codes are legibly written inside the boxes.

Match the name and code of the province, city/municipality, and barangay, as well as the EA number entered in CP Forms 2 and 4 against CP Form 1. If inconsistent, make the necessary corrections.

Example:

BARANGAY/ENUMERATION AREA REFENCE FILE (EARF)

REG	PROV	MUN	BGY	EA	URB	Province/City/Municipality/EA
07	22	00	000	0000	0	CEBU
07	22	09	000	0000	0	BANTAYAN
07	22	09	018	000000	2	Patao
07	22	09	018	001000	2	Patao - EA 000100
07	22	09	018	001000	2	Patao - EA 000100
07	22	09	018	002000	2	Patao - EA 000200
07	22	09	018	002000	2	Patao - EA 000200
07	22	09	018	003000	2	Patao - EA 000300
07	22	09	018	003000	2	Patao - EA 000300
07	22	09	018	004001	2	Patao - EA 004001
07	22	09	018	004001	2	Patao - EA 004001
07	22	09	019	000000	2	Putian
07	22	09	019	000000	2	Putian - EA 000000
07	22	09	019	000000	2	Putian - EA 000000

Columns 1 – Day of Visit

This column is allotted for the date of visit of the household/institution.

Columns 2 to 5 – BSN, HUSN, HSN, and ISN

1. The BSNs, HUSNs, HSNs, and ISNs should be sequential in the EA.

2. In general, a BSN corresponds to one HUSN/ILQ while an HUSN corresponds to one HSN. If not, the following cases should serve as your reference:

   a. The BSN appears in more than one line number corresponding to several HUSNs in CP Form 1. For example, when a building has two or more housing units, whether occupied or vacant, the same BSN is used for these two or more housing units.

   b. The HUSN appears in more than one line number corresponding to several HSNs in CP Form 1. For example, when housing unit is occupied by two or more households, the same HUSN is used for these two or more households that occupy the same housing unit.

3. If a building has only one housing unit which is vacant, with an HSN "9999", the BSN and HUSN assigned to this building and housing unit, respectively, should not be assigned to other buildings and housing units.

4. If a building has several housing units with at least one housing unit which is vacant, with HSN "9999", the BSN should be the same for all the housing units, whether vacant or occupied. However, the HUSN of the vacant housing unit should not be assigned to other housing units within the same building.

As a general rule, if the serial numbers are not in a sequential order, **DO NOT RENUMBER**. However, renumbering will only be allowed in the following cases:

1. If there are duplicate BSNs, as in the case of a BSN assigned to a vacant building and at the same time to another building occupied by one household, verify in the map if the building reported as vacant is indeed vacant or if it is a building with a vacant housing unit. If the building is indeed vacant, line out with two horizontal lines the BSN of the subsequent duplicate BSN, and assign a new BSN which is a number following the last BSN used in the EA.

2. If there are duplicate HUSNs, as in the case of a HUSN assigned to a vacant housing unit and at the same time to another housing unit occupied by a household, line out with two horizontal lines the HUSN of the subsequent duplicate HUSN, and assign a new HUSN to the vacant housing unit which is a number following the last HUSN used in the EA.

3. If there are duplicate HUSNs, as in the case of an HUSN assigned to different buildings, line out with two horizontal lines the subsequent duplicate HUSN, and assign a new HUSN which is a number following the last HUSN used in the EA.

4. If there are duplicate HSNs, except for HSN "9999", line out with two horizontal lines the subsequent duplicate HSN, and assign a new HSN which is a number following the last HSN used in the EA.

5. If there are gaps between the assigned BSN, HUSN, and HSN, leave the serial numbers as they are. Check if the entries in the page totals for these serial numbers are correct by manually counting the assigned HSNs, excluding HSNs 9999, 8888, 8889, and 7777. Make necessary corrections in the page totals. Record in CP Form 21 the missing serial number(s) and report this to your Supervisor for appropriate action. (See Section 6.6 on how to fill out the CP Form 21.)

Example:

HOW TO CORRECT DUPLICATE SERIAL NUMBER IN CP FORM 1

					LISTING RECORD				
LINE NO.	**DAY OF VISIT**	**BUILDING SERIAL NUMBER (BSN)**	**HOUSING UNIT SERIAL NUMBER (HUSN)**	**HOUSE-HOLD SERIAL NUMBER (HSN)**	**INSTITU-TIONAL SERIAL NUMBER (ISN)**	**NAME OF HOUSEHOLD HEAD OR NAME/TYPE OF INSTITUTION** WRITE VHU IF VACANT HOUSING UNIT; VBLDG IF VACANT BUILDING. **ADDRESS** ENTER HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME.	**POPULATION COUNT AS OF AUGUST 1, 2015**		**REMARKS**
							TOTAL	**MALE**	**FEMALE**
(1)	**(1)**	**(2)**	**(3)**	**(4)**	**(5)**	**(6)**	**(7)**	**(8)**	**(1)** / **(2)**
1	8/12	0028	0028	/ 0026		ROQUE, RAFAEL / 1 BANGKILYA ST	8 ◯	3	5
	12	0029	0029	/ 0027		REYES, JUN / 3 BANGKILYA ST	2 ◯	1	1 / A-08/15, AM C-08/15
	12	0030	~~0029~~ 0039	0028		BUENAVISTA, EDUARDO / 5 BANGKILYA ST	4 ◯	3	1
	12	0031	0030	/ 0029		FERNANDEZ, RUEL / 7A BANGKILYA ST	8 ◯	3	5
	12	0032	0031	0033 ~~0029~~		FERNANDEZ, JEN / 7B BANGKILYA ST	2 ◯	1	1
6	12	0033	0032 / 0035	9999		VBLDG / 9 BANGKILYA ST	◯		
7	12	0035	0036 / 0030			DE GUZMAN, MICHAEL / 11 BANGKILYA ST	3 ◯	1	2
8	12	0036			0001	DOM'S BOARDING HOUSE / 13 BANGKILYA ST	20 ✓	0	20 / R-REFERRAL TS C-08/12: OK (PUNONG BRGY)
9	12	0037	0037 / 0031			HIZON, JOHN / 15 BANGKILYA ST	2 ◯	1	1
10	12	0038	0038 / 0032			SANTOS, RADING / 17 BANGKILYA ST	6 ◯	2	4
TOTAL		10 / A	12 / B	8 / C	1 / D	**TOTAL HOUSEHOLD POPULATION**	35 / G	15 / H	20 / I
VACANT		1 / E	4 / F			**TOTAL INSTITUTIONAL POPULATION**	20 / J	0 / K	20 / L
						TOTAL POPULATION	55 / M	15 / N	40 / O

Duplicate HUSN for different buildings; Assign a new HUSN which is a number following the last HUSN assigned in the barangay/EA

Missing BSN 0034; record in CP Form 21

Last HUSN used in the barangay/EA

Last HSN used in the barangay/EA

Duplicate HSN; Assign a new HSN following the last HSN assigned in the barangay/EA

6. For every correction made in the serial number of BSN, HUSN and HSN/ISN, see to it that it is reflected in the corresponding CP Forms 2 and 4.

Example:

COLUMNS 1 TO 6 OF CP FORM 1					
LINE NO.	**DAY OF VISIT**	**BUILDING SERIAL NUMBER (BSN)**	**HOUSING UNIT SERIAL NUMBER (HUSN)**	**HOUSE-HOLD SERIAL NUMBER (HSN)**	**INSTITU-TIONAL SERIAL NUMBER (ISN)**	**NAME OF HOUSEHOLD HEAD OR NAME/TYPE OF INSTITUTION** WRITE VHU IF VACANT HOUSING UNIT; VBLDG IF VACANT BUILDING. **ADDRESS** ENTER HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME.
(1)	(2)	(3)	(4)	(5)	(6)
1	I2	0 0 2 9	0 0 2 9	0 0 2 7		REYES, JUN / 3 BANGKILYA ST
2	I2	0 0 3 0	~~0 0 2 9~~ **0 0 3 9**	0 0 2 8		BUENAVISTA, EDUARDO / 5 BANGKILYA ST
3	I2	0 0 3 1				FERNANDEZ, RUEL / 7A BANGKILYA ST

GEO-ID OF CP FORM 2

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 CENSUS OF POPULATION HOUSEHOLD QUESTIONNAIRE

Approval Number: PSA-1518-02
Expires on March 31, 2016

2A

GEOGRAPHIC IDENTIFICATION

BOOKLET [I] OF [I] BOOKLETS

PROVINCE	CEBU	2 2
CITY/MUNICIPALITY	BANTAYAN	0 9
BARANGAY	PATAO	0 I 8
ENUMERATION AREA NUMBER		0 0 I 0 0 0
BUILDING SERIAL NUMBER		0 0 3 0
HOUSING UNIT SERIAL NUMBER		**0039** ~~0 0 2 9~~
HOUSEHOLD SERIAL NUMBER		0 0 2 8
LINE NUMBER OF THE RESPONDENT		0 I

NAME OF THE HOUSEHOLD HEAD   BUENAVISTA   EDUARDO
                              LAST NAME   FIRST NAME
ADDRESS   5 BANGKILYA ST
           HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME

Columns 7 to 9 – Population Count

Ensure that the entry in Column 7 (Total) is equal to the sum of the numeric entries in Columns 8 (Male) and 9 (Female). If inconsistent, the number of males in Column 8 and number of females in Column 9 should prevail. Check for the consistency the total members, and total number of male and female members in CP Form 2 or 4.

6.3   CHECKING THE CORRECTNESS OF PAGE TOTALS OF CP FORM 1

Check the line numbers that have an entry in the Remarks Column. Callbacks should have been completed. Households that were issued with E-Questionnaire should be included in the count. Also, make sure that the multiple entries in one line are considered in the count.

Column totals should have entries only after all the lines on the page have been filled out, all the callbacks are successfully interviewed, and Self-Administered Questionnaires (SAQs) are already collected. If not, make the necessary corrections.

At the bottom of each page of CP Form 1, a cell should have entries in each item. Verify if the column totals for each page are correct.

Item	Editing
Total Buildings (A)	• Count all the buildings in Column 2 and check if it is the same as entry in Column Total (A).
Total Housing Units (B)	• Line numbers with "E-Questionnaire" in the remarks portion should be included in the count. • Count all the housing units in Column 3 and check if it is the same as entry in Column Total (B).
Total Households (C)	• Line numbers with "E-Questionnaire" in the remarks portion should be included in the count. • Count all the households in Column 4 and check if it is the same as entry in Column Total (C). • Take note that HSNs **7777, 8888, 8889, and 9999** are excluded from the count.
Total Institutional Living Quarters (D)	• Check the line numbers that have an entry in the Remarks Column. Callbacks should have been completed. • Count all the institutions in Column 5 and check if it is the same as entry in Column Total (D).
Vacant Building (E)	• Count all the vacant buildings in Column 2 with VBLDG written in the first line of Column 6 and check if it is the same as entry in Vacant (E).
Vacant Housing Units (F)	• Count all the vacant housing units in Column 3 with VBLDG and VHU written in the first row of Column 6 and check if it is the same as entry in Vacant (F).
Total Household Population (G) to (I)	• Add the total household population in Column 7 and check if it is the same as entry in Column Total Household Population (G), total household males in Column 8 and check if it is the same as entry in Column Total (H), and total household females in Column 9 and check if it is the same as entry in Column Total (I).

Item	Editing
Total Institutional Population (J) to (L)	• Add the total institutional members in Column 7 and check if it is the same as entry in Column Total Institutional Population (J), total institutional males in Column 7 and check if it is the same as entry in Column Total (K), and total institutional females in Column 7 and check if it is the same as entry in Column Total (L).
Total Population (M) to (O)	• Check the sum of Column (G) and Column (J) if it is the same as entry in Column Total Population (M), the sum of Column (H) and Column (K) if it is the same as entry in Column Total (N), and the sum of Column (I) and Column (L) if it is the same as entry in Column Total (O).

ILLUSTRATION 6.1
HOW TO EDIT THE PAGE TOTALS OF CP FORM 1

CP FORM 1	*Republic of the Philippines* **PHILIPPINE STATISTICS AUTHORITY**	00000I	**1A**

AUTHORITY:
Republic Act (RA) No. 10625 authorizes the Philippine Statistics Authority (PSA) to prepare and conduct periodic census on population.

CONFIDENTIALITY:
All information provided in this census shall be held STRICTLY CONFIDENTIAL in accordance with RA 10625.

**2015 CENSUS OF POPULATION
LISTING BOOKLET**

Approval Number: PSA 1518-01
Expires on March 31, 2016

CERTIFICATION

I hereby certify that the data set forth herein were personally obtained/reviewed by me and in accordance with the instructions given by PSA.

BMVilla
BETTY MAE VILLA   09/01/I5
ENUMERATOR   DATE SIGNED
SIGNATURE OVER PRINTED NAME

Cynthia Uy
CYNTHIA UY   09/05/15
TEAM SUPERVISOR   DATE SIGNED
SIGNATURE OVER PRINTED NAME

GEOGRAPHIC IDENTIFICATION

MONTH OF VISIT [0][8]   BOOKLET [0][5] OF [0][5] BOOKLETS

PROVINCE LEYTE [3][7] BARANGAY PAWING [0][I][9]

CITY/MUNICIPALITY PALO [3][9] ENUMERATION AREA NUMBER [0][0][I] [0][0][0]

LISTING RECORD

LINE NO.	DAY OF VISIT	BUILDING SERIAL NUMBER (BSN)	HOUSING UNIT SERIAL NUMBER (HUSN)	HOUSE-HOLD SERIAL NUMBER (HSN)	INSTITU-TIONAL SERIAL NUMBER (ISN)	NAME OF HOUSEHOLD HEAD OR NAME/TYPE OF INSTITUTION / ADDRESS	POPULATION COUNT AS OF AUGUST 1, 2015 TOTAL	MALE	FEMALE	REMARKS
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
1	8/26	0301	0301	0301		ROQUE, RAFAEL / I BANGKILYA ST	8 ◯	3	5	
2	26	0302	0302	0302		REYES, JUN / 3 BANGKILYA ST	2 ◯	I	I	A-08/29, 9AM C-08/30
3	26	0303	0303	0303		UY, RUBEN / 5 BANGKILYA ST	4 ◯	3	I	A-08/25, 9:30AM C-08/26
4	26	0304	0304	0304		FERNANDEZ, RUEL / 7A BANGKILYA ST	8 ◯	3	5	
5	26	0304	0305	0305		FERNANDEZ, JEN / 7B BANGKILYA ST	2 ◯	I	I	⌐
6	26	0305 / 0308	0306	9999		VBLDG / 9 BANGKILYA ST	◯			
7	26	0306	0309	0306		DE GUZMAN, MICHAEL / II BANGKILYA ST	3 ◯	I	2	R-REFERRAL: TS C-08/26: OK PUNONG BGY
8	26	0307			0001	DOM'S BOARDING HOUSE / I3 BANGKILYA ST	20 ✓	0	20	
9	26	0308	0310	0307		HIZON, JOHN / I5 BANGKILYA ST	2 ◯	I	I	
10	00						◯			

TOTAL	9̶ 8	10	7	I	**TOTAL HOUSEHOLD POPULATION**	29 4̶9̶	13	16	
	A	B	C	D		G	H	I	
VACANT	I	3			**TOTAL INSTITUTIONAL POPULATION**	20	0	20	
	E	F				J	K	L	
					TOTAL POPULATION	49	1̶5̶ 13	36	
						M	N	O	

MATCHED BY
Cynthia Uy
CYNTHIA UY   09/05/15
SIGNATURE OVER PRINTED NAME   DATE SIGNED

6.4   EDITING OF GEO-ID OF CP FORMS 2 AND 4

Geographic Identification and Interview Record

Refer to Section 6.1 of this chapter for the instructions in editing the Geo-ID portion and the Interview Record portion.

Building, Housing Unit, Household, and Institutional Serial Numbers

The BSN, HUSN, and HSN in CP Form 2 and BSN and ISN in CP Form 4 should be the same as those found in Columns 2 to 5, respectively, of CP Form 1.

Example:

COLUMNS 1 TO 6 OF CP FORM 1

LINE NO.	DAY OF VISIT	BUILDING SERIAL NUMBER (BSN)	HOUSING UNIT SERIAL NUMBER (HUSN)	HOUSE-HOLD SERIAL NUMBER (HSN)	INSTITU-TIONAL SERIAL NUMBER (ISN)	NAME OF HOUSEHOLD HEAD OR NAME/TYPE OF INSTITUTION WRITE VHU IF VACANT HOUSING UNIT; VBLDG IF VACANT BUILDING. ADDRESS ENTER HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME.
(1)	(2)	(3)	(4)	(5)		(6)
1	II	0 0 0 I	0 0 0 I	0 0 0 I		GRANDE, ALEXANDER
						245 RIZAL STREET

GEOGRAPHIC IDENTIFICATION

BOOKLET [I] OF [I] BOOKLETS

PROVINCE	CEBU	2 2
CITY/MUNICIPALITY	BANTAYAN	0 9
BARANGAY	PATAO	0 I 8
ENUMERATION AREA NUMBER		0 0 I 0 0 0
BUILDING SERIAL NUMBER		0 0 0 I
HOUSING UNIT SERIAL NUMBER		0 0 0 I
HOUSEHOLD SERIAL NUMBER		0 0 0 I
LINE NUMBER OF THE RESPONDENT		0 I

NAME OF THE HOUSEHOLD HEAD   GRANDE   ALEXANDER
LAST NAME   FIRST NAME
ADDRESS   245 RIZAL ST
HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME

The BSN, HUSN, and HSN in CP Form 2 should be consistent with the entries in Columns 2 to 4, respectively, of CP Form 1

If there are two or more accomplished CP Forms 2 for the same household, make sure that the BSN, HUSN, and HSN are the same for these questionnaires. Similarly, if there are two or more accomplished CP Form 4 for the same ILQ, make sure that the BSN and ISN are the same for these questionnaires.

Line Number of the Respondent in CP Form 2

In CP Form 2, the line number of the respondent should have been encircled on page 2B. If no Line Number is encircled, check whether there is a note in the remarks portion of CP Form 2 or in CP Form 1, specifying the source of information (for instance, neighbor, Punong Barangay, or other persons). If there is an indication that the data came from a person who is not a household member, enter "**00**". Otherwise, enter "**99**" in the boxes.

Check whether the entry for the Line Number of Respondent is the same as the encircled line number on page 2B of CP Form 2. If not, line out with two horizontal lines the entry on the cover page and write the line number of the household member whose line number has been encircled on page 2B of CP Form 2. Prefix zero (**0**) whenever necessary. Refer to the foregoing example:

Example

Name of the Household Head and Address of the Household in CP Form 2

Under the Geo-ID portion, check whether the name of the household head is the same as that written in CP Form 1. If inconsistent, the name written in CP Form 2 should prevail. However, if there is no entry in CP Form 2, copy the name of the household head in CP Form 1.

Likewise, check if the corresponding address is properly filled out. Match the address written in CP Form 2 with the address in CP Form 1. For a housing unit that is vacant (HSN 9999), occupied by a household not eligible for enumeration (HSN 8888), housing unit used only as vacation house or rest house (HSN 8889) or housing unit occupied exclusively by non-usual residents (HSN 7777), check if the entries in their respective Geo-ID are the same as those indicated in CP Form 1.

Type of Institutional Living Quarter

Check whether the two-digit code entered for the type of ILQ is consistent with the name and code of the ILQ found at the bottom part of page 4A of CP Form 4. If the code is incorrect, line out with two horizontal lines the original entry and write the correct code.

If there is no entry, check if it can be determined based on the name of the ILQ and write the two-digit code that matches with the name of the ILQ. If the name of the ILQ is also blank, or if the code could not be determined based on the name of the ILQ, record this problem in CP Form 21. Refer to Section 6.9 of this chapter for the instructions on how to accomplish this form.

IMPORTANT NOTICE

Check if the members of the ILQ (refer to write-in entries in P2-Residence Status) match with the entry indicated for the type of ILQ. If there is any inconsistency, record this case in CP Form 21 for referral to the Head CAS. For instance, refer to the Head CAS if the type of ILQ is a military camp and the entry in the residence status is a boarder or lodger.

Number of Visits Made/Final Result of Visit

The Interview Record in CP Forms 2 and 4 indicates whether or not the interview with the household/ILQ has been completed. Check the Summary of Visit portion of these questionnaires.

If there are two or more booklets used for one household or ILQ, the Interview Record panel of the additional questionnaires should have no entries. Only the first booklet should have entries in this portion.

If there is no entry in the Interview Record panel of the first booklet while the other booklet(s) for the same household/ ILQ has entries in this portion, transcribe the entries from the other booklet(s) to the first booklet and line out the entries in the Interview Record panel of the other booklet(s).

For less than four visits, the entries in the number of visits made and result of final visit should correspond to the entries recorded in the last Column of Visits 1 to 3 of the Interview Record.

Code "**3**" (No Respondent Around), Code "**5**" (Partly Completed), and Code **"6"** (Postponed) are not acceptable entries for the result of final visit. In this case, record it in CP Form 21 for referral to the Head CAS.

IMPORTANT NOTICE

If there are two or more booklets used for one household or institution, the Interview Record panel of the additional questionnaires should have no entries. Only the first booklet should have entries in this portion.

6.5   INSTRUCTIONS IN EDITING THE INTERVIEW RECORD PORTION OF CP FORMS 2 AND 4

Result of Final Visit

Ideally, the code for the result of final visit should be "**1**" (interview completed). If the result of final visit is code "**2**" to "**6**", check the contents of the questionnaires if all the needed information were already collected. In this case, change the result of final visit to code "**1**". Otherwise, record it in CP Form 21.

Number of Household Members and Number of Males and Females

Make sure that the total number of household members, as recorded in the Interview Record panel of CP Form 2 (page 2A) corresponds to the line number of the last member in the household (page 2B). If not, line out with two horizontal lines the entry in the Interview Record portion and write the correct number based on the line number of the last member in the household. Likewise, if there is no entry, enter the number based on the line number of the last member in the household.

Also, see to it that the number of males corresponds to the number of members with "**X**" in the box for code "**1**" (Male) in Item P3-Sex, and the number of females corresponds to the number of members with "**X**" in the box for code "**2**" (Female). If not, line out with two horizontal lines the entry in the Interview Record portion and write the correct number based on Item P3-Sex. Likewise, if there is no entry, write the correct number in the corresponding boxes for males and females based on Item P3-Sex.

Total Members in the Institution and Number of Males and Females

Make sure that the total number of members in the institution, as recorded in the Interview Record panel of CP Form 4 (page 4A) corresponds to the line number of the last member in the institution (page 4B or 4C or 4D). If not, line out with two horizontal lines the entry in the Interview Record portion and write the correct number. If there is no entry, enter the number based on the line number of the last member in the institution.

In the Interview Record panel of CP Form 4, make sure that the number of males corresponds to the number of members with "**X**" in the box for code "**1**" (Male) in Item P3-Sex, and that the number of females corresponds to the number of members with "**X**"

in the box for code "**2**" (Female). If not, line out with two horizontal lines the entry in the Interview Record portion and write the correct number. If there is no entry, write the correct number in the corresponding boxes for males and females based on Item P3-Sex.

Example:

6.6   HOW TO FILL OUT CP FORM 21 – PROBLEMS ENCOUNTERED/REFERRAL FORM: PART A: TO BE ACCOMPLISHED BY THE SCREENER

CP Form 21 (Problems Encountered/Referral Form) is the form that will be used in recording the problems encountered during the data processing. This form is divided into two parts: PART A. TO BE ACCOMPLISHED BY THE SCREENER, and PART B. TO BE ACCOMPLISHED BY THE EDITOR. Part A should be filled out during the general screening while Part B should be filled out by the editor during the editing of CP Forms 2 and 4, and maps.

The following are the specific instructions for the screener in filling out the CP Form 21.

1. Use a separate CP Form 21 for every EA.

2. Fill out the Geo-ID portion by writing the name and code of the province, city/municipality, and barangay, and the EA number.

3. Indicate in Column 1 whether there is a missing/extra questionnaire or map by writing code "**1**" for Missing Questionnaire or Map or code "**2**" for Extra Questionnaire or Map.

4. Indicate in Column 2 the type of missing/extra questionnaire and/or map (that is, a barangay map, EA map or block map).

5. Indicate in Column 3 the number of missing/extra questionnaires or maps.

6. Write in Column 4 the necessary remarks regarding the missing/extra questionnaire or map. Write also the action taken to account for the missing/extra questionnaires or maps. Unresolved cases should be marked as "PENDING" in the Tracking, Receipt and Control System (TRACS) and in CP Form 19 by the RCC.

7. After recording all the missing/extra questionnaires/maps, write your name (as screener) and affix your signature on the space provided. Record also the date when you return the EA pack, including the CP Form 21.

8. Return this form together with the EA pack to the RCC.

ILLUSTRATION 6.2
FILLED OUT CP FORM 21
(PROBLEMS ENCOUNTERED/REFERRAL FORM)

6.7   ENHANCEMENT OF ENTRIES

The purpose of enhancing the entries in all CP forms is to make the entries clearer or readable for scanning and/or interpretation. This should be undertaken simultaneously while screening CP Forms 1, 2, 4, and 5. This is done by overwriting the write-in entries (tracing the numbers or letters written by the EN) or the "**X**" or "✔" marks that are **unclear, unreadable, fine, threadlike** or **faded** using the supplied black ballpen**.   Be careful in using the** ballpen when enhancing the entries of the questionnaire.   Inkblots may be interpreted as valid entries during the machine processing. <u>Erasing the original entries made by the EN and rewriting them again should be avoided</u>.

6.8   TRANSCRIPTION OF A DAMAGED FORM TO A BLANK FORM

There might be instances when some accomplished questionnaires submitted to the DPC 2015 are already in bad condition, that is, crumpled, folded, dirty, with holes or stapled. These questionnaires may be rejected by the scanning machine. Moreover, there are questionnaires with many erasures that the encoders may have a hard time reading/deciphering the answers to be keyed-in. Thus, damaged questionnaires and those with many erasures should be transcribed to new questionnaires. Cases like these should be reported to the Supervisor.

It is the task of the processor to transcribe correctly the entries from a damaged and defective questionnaire to a new questionnaire using the supplied black ballpen. The processor should indicate in the certification portion of the new questionnaire that such questionnaire was transcribed from the original questionnaire.   In the new questionnaire write "TRANSCRIBED TO SERIAL NUMBER _____", while in the original questionnaire, write only "TRANSCRIBED FROM SERIAL NUMBER _____". Make sure that the entries in the original questionnaire are completely and correctly copied. Write "SGD" before the name of the Enumerator, Team Supervisor, and other personnel who reviewed/signed the original questionnaire.

The processor should place all original/damaged questionnaires on top of the EA pack after completing his/her designated task and return this pack to the RCC. The RCC should place all original/damaged questionnaires on a designated rack.

The RCC should pull out the damaged questionnaire from the EA pack before these are to be transmitted to the SS 2015.

Example:

ORIGINAL/DAMAGED QUESTIONNAIRE	TRANSCRIBED FROM ORIGINAL

TRANSCRIBED TO SN 002501

CERTIFICATION

I hereby certify that the data set forth herein were personally obtained/reviewed by me and in accordance with the instructions given by the PSA.

SViado

SHERLEY LYN M. VIADO

ENUMERATOR
SIGNATURE OVER PRINTED NAME

8/15/2015

DATE ACCOMPLISHED

Hannah Chua

HANNAH T. CHUA

TEAM SUPERVISOR
SIGNATURE OVER PRINTED NAME

8/22/2015

DATE REVIEWED

CENSUS AREA SUPERVISOR
SIGNATURE OVER PRINTED NAME)

DATE REVIEWED

CO/RSSO/PO
SIGNATURE OVER PRINTED NAME

DATE REVIEWED

TRANSCRIBED TO SN 000500

CERTIFICATION

I hereby certify that the data set forth herein were personally obtained/reviewed by me and in accordance with the instructions given by the PSA.

SGD SHERLEY LYN M. VIADO

ENUMERATOR
SIGNATURE OVER PRINTED NAME

8/15/2015

DATE ACCOMPLISHED

SGD HANNAH T. CHUA

TEAM SUPERVISOR
SIGNATURE OVER PRINTED NAME

8/22/2015

DATE REVIEWED

CENSUS AREA SUPERVISOR
SIGNATURE OVER PRINTED NAME)

DATE REVIEWED

CO/RSSO/PO
SIGNATURE OVER PRINTED NAME

DATE REVIEWED

Encoding of CP Form 1 Page Totals to Quick Count System

After the CP Form 1 (Listing Booklet), CP Form 2 (Household Questionnaire), CP Form 4 (Institutional Population Questionnaire), CP Form 5 (Barangay Schedule), and maps have undergone general screening, CP Form 1 will be assigned to the 2015 Census of Population (POPCEN 2015) Assistant Supervisor or any personnel authorized by the Philippine Statistics Authority (PSA) to encode the page totals and other relevant information for the Quick Count.

Quick Count refers to *the compiled data on the 2015 number of households and population count for each completed EA based on the accomplished CP Form 1 during the conduct of enumeration*. The encoded data from CP Form 1 will be used as inputs for the evaluation of the completeness of coverage of each barangay, city/municipality, and province in terms of the number of households and population count of these geographic areas.

7.1   DATA ENCODING OF CP FORM 1 FOR QUICK COUNT REPORT

After general screening, the data encoding of CP Form 1 will be done by the PSA personnel authorized to access the data entry menu of the QCS. He/she will encode the page totals for the following data items:

- Questionnaire serial number
- Month of visit
- Booklet number
- Geographic code of the province, city/municipality, barangagy, and EA number
- Number of buildings
- Number of housing units
- Number of households
- Number of institutions
- Number of vacant buildings
- Number of vacant housing units
- Total number of household population
- Total number of male household population
- Total number of female household population
- Total number of institutional population
- Total number of male institutional population
- Total number of female institutional population

- Total number of population
- Total number of male population
- Total number of female population

These data from CP Form 1 will be tabulated for the evaluation of the number of households and population count of each barangay.

7.2   THE QUICK COUNT SYSTEM (QCS)

The Quick Count (QC) will employ the QCS developed by the PSA Information Technology (IT) experts. The QCS is a set of computer application programs used in compiling data based on every CP Form 1 of completed enumeration areas (EAs). The features of QCS are:

- Data entry;
- Completeness check;
- Generation of error lists;
- Generation of Quick Count Reports;
- Submission of Quick Count Reports to the Regional Statistical Services Office (RSSO); and
- Submission of data files to the Central Office (CO).

The QCS User's Manual discusses the different functions of the QCS. It also discusses the personnel who have access to the QCS, the personnel who will perform encoding, and the personnel who will validate the encoded data based on CP Form 1, and the personnel responsible in generating tables on the number of households and population for evaluation.

The QCS will generate reports on the 2015 number of households and 2015 population count for each completed EAs. These reports will be used for evaluation of completeness of coverage of each barangay, city/municipality, and province.

7.3   GUIDELINES FOR DATA ENCODING OF PAGE TOTALS OF CP FORM 1

1. The Supervisor shall assign to the Assistant Supervisor the encoding of page totals in CP Form 1 using QCS.

2. The Assistant Supervisor shall get all CP Form 1 of an EA pack from the RCC for encoding. He/she shall encode entries found in all page totals of all CP Form 1 of an EA pack before getting CP Form 1 of another EA pack to encode. He/she shall return the CP Form 1 to the Supervisor after encoding of page totals.

   - All CP Forms 2 and 4 will remain in the EA pack. Once the CP Form 1 of that EA pack are encoded and returned to the RCC, this EA pack with CP Forms 1, 2, and 4 shall be processed for manual editing.

3. The Supervisor shall receive the CP Form 1 after these are encoded and shall assign another batch of CP Form 1 to the Assistant Supervisor using the QCS. The Supervisor shall return the encoded CP Form 1 to the RCC.

4. After all CP Form 1 of an EA have been encoded, the Supervisor shall validate the encoded data using the QCS menu on Data Consistency check and

Completeness Check. Both these checks will generate error lists. Data Consistency check will be used to generate list of errors or inconsistency between and among data items in CP Form 1. Completeness Check will be used to generate list of invalid Geographic Identification encoded for CP Form 1 and EAs with no encoded data of CP Form 1.

5. The Supervisor shall be responsible for the generation of tables on the number of households and population for evaluation.

7.4   QUICK COUNT TABLES

The QC tables will be used in evaluating the census results on the number of households and population for all barangays. There are two Quick Count Tables for POPCEN 2015. These are:

Quick Count Table 1 – consists of 14 columns that show encoded POPCEN 2015 data on the number of households, total population, household population, and institutional population by EA. This table also includes sex ratio of total population and average household size.

Quick Count Table 1. Number of Households, Total Population, Household Population, and Institutional Population by Enumeration Area: 2015		Number of Households	Total Population	Household Population	Institutional Population
Province, City/Municipality, Barangay, and EA					
Geo Code	Geo Name				
(1)	(2)	(3)	(4)	(5)	(6)

Quick Count Table 1. Number of Households, Total Population, Household Population, and Institutional Population by Enumeration Area: 2015 (Continuation)									
Province, City/Municipality, Barangay, and EA		Total Population		Household Population		Institutional Population		Sex Ratio of Total Population	Average Household Size
Geo Code	Geo Name	Male	Female	Male	Female	Male	Female		
(1)	(2)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)

Quick Count Table 2 – consists of 17 columns that show the comparative counts of households, total population, household population, and institutional population based on the 2010 Census of Population and Housing (2010 CPH) and POPCEN 2015 by barangay. It also shows the annual population growth rate (PGR) by barangay for the period 2010-2015, as well as the annual percent change for the number of households and institutional population, sex ratio, and average household size for the period 2010-2015, by barangay.

Quick Count Table 2. Number of Households, Total Population, Household Population, and Institutional Population, PGR 2010-2015, Annual Percent Change 2010-2015 for the Number of Households and Institutional Population, Sex Ratio, and Average Household Size, by Barangay: 2010-2015										
Province, City/Municipality, and Barangay		Number of Households		Total Population		Household Population		Institutional Population		PGR 2010-2015
Geo Code	Geo Name	2010	2015	2010	2015	2010	2015	2010	2015	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)

Quick Count Table 2. Number of Households, Total Population, Household Population, and Institutional Population, PGR 2010-2015, Annual Percent Change 2010-2015 for the Number of Households and Institutional Population, Sex Ratio, and Average Household Size, by Barangay: 2010-2015 (Continuation)							
Province, City/Municipality, and Barangay		Annual Percent Change 2010-2015		Sex Ratio		Average Household Size	
Geo Code	Geo Name	Number of Households	Institutional Population	2010	2015	2010	2015
(1)	(2)	(12)	(13)	(14)	(15)	(16)	(17)

7.5 GENERAL GUIDELINES IN THE EVALUATION OF QUICK COUNT

Once all the CP Form 1 for a city/municipality have been encoded through the QCS by the PSA personnel authorized to access the data entry menu of the QCS, the Provincial Statistical Office (PO) will tabulate the QC Report 1 and QC Report 2. These reports will be used in the evaluation of the completeness of coverage of each barangay, city/municipality, and province.

QC Report 2 will be used by the PO in evaluating the census results on the number of households and population for all barangays. This report contains the following information:

a. Number of Households: 2015 and 2010
b. Total Population: 2015 and 2010
c. Household Population: 2015 and 2010

d. Institutional Population: 2015 and 2010
e. Annual Population Growth Rate: 2010-2015
f. Change in the Number of Households: 2010-2015
g. Average Household Size: 2015 and 2010
h. Change in the Count of Institutional Population: 2010-2015
i. Sex Ratio: 2015 and 2010

The procedures for evaluating the census results using the indicators listed above are as follows:

a. **Annual Population Growth Rate (PGR)**. For barangays, the acceptable value is a positive number not exceeding 4.0 percent. For cities and municipalities, the acceptable value is 0.0 to 3.0 percent.

    A barangay with a zero or negative PGR, or with a PGR greater than 4.0 percent should be investigated. If the reason for the unreasonably high PGR (more than 4.0 percent) is migration within the province, identify the barangay of origin and verify if there is a corresponding decrease in the population count in that barangay. Similarly, if migration within the province is the reason for a negative PGR, identify the barangay of destination; this barangay should have a corresponding increase in population count.

    Normally, the annual growth rate for total population and household population are almost the same. If there is a large discrepancy, investigate if the barangay has an institutional living quarter (ILQ) with a large number of residents.

b. **Annual Percent Change of Households**. Acceptable range is 0.0 to 3.0 percent for a non-*poblacion*, and 0.0 to 5.0 percent for a *poblacion*. Investigate barangays, which are not classified as *poblaciones* but with more than 3.0 percent annual increase in the number of households. A *poblacion* with more than 5.0 percent annual increase should also be investigated. A decline in the number of households (a negative percent change) should also be verified. Any substantial increase in population count without corresponding increase in the number of households is a cause of suspicion for gross overcount. Also the annual percent change of households should not exceed the average annual PGR. If the annual percent change of households exceeds the latter, then investigate for possible splitting of households.

c. **Average Household Size (AHS)**. The acceptable range for AHS is 4.0 to 6.0. Any deviation from this range should be investigated.

d. **Difference of 2015 and 2010 Institutional Population Counts**. Investigate a substantial increase in the institutional population counts, such as if the institutional population count has increased from 100 in 2010 to some hundreds or thousands in 2015.

e. **Sex ratio.** The acceptable range of sex ratio is 90 to 110. Any deviation from this range should be investigated. For barangays with extremely high sex ratio, determine if there is a presence of mining industry or any industry were males are predominantly engaged in.

7.6   SUBMISSION OF QUICK COUNT RESULTS

Once the page totals of the CP Form 1 have already been encoded and the QC tables have been generated and evaluated, the batch files of CP Form 1 for a completely enumerated province should be transmitted to the Central Office (CO) through the Regional Statistical Services Office (RSSO). These QC data will undergo further evaluation at the CO.

Editing of Accomplished CP Forms 2 and 4

The complex process of data collection in the field was not spared from several conditions which might have resulted to some errors in the entries made in the census questionnaires. The errors may have been committed by the respondents in their responses and/or by the enumerators (ENs) in filling out the questionnaires during the enumeration. Hence, efforts directed to identify and correct as many errors as possible should be done.

To ensure the high quality of data from the 2015 Census of Population (POPCEN 2015), all accomplished questionnaires and maps will undergo editing during the manual processing phase at the POPCEN 2015 Data Processing Center (DPC 2015). Another round of editing will be done during the machine processing phase also at the DPC 2015.

This chapter discusses the types of errors that should be edited and the instructions that should be followed in editing the questionnaire.

Editing of CP Forms 2 and 4 involves the *consistency checking of entries of the related items, completeness of the responses, clarity and legibility of entries/answers, and correctness of the codes written by the EN. It also involves checking for the clarity and sufficiency of the write-in entries for selected data items (Items P9, P12, P14, and P16 in CP Form 2 and Items P9 and P12 in CP Form 4) in preparation for machine coding.* Editing of CP Form 2 (Household Questionnaire) and CP Form 4 (Institutional Population Questionnaire) will be done by the editors.

Errors detected during the editing may be resolved by referring to the other entries in the questionnaire. However, there are some cases or problems during editing that should be referred to the Supervisor. These cases/problems should be recorded in CP Form 21 (Problems Encountered/Referral Form) for submission and discussion by the editor with his/her Supervisor.

The Head Census Area Supervisor (Head CAS), on the other hand, may be asked to resolve errors which may need field verification.

8.1   TYPES OF ERRORS TO BE EDITED

These are basically the types of errors in the questionnaires that editors should correct and edit:

1. Inconsistent response with related item/s. This occurs when two related items do not correctly correspond with each other.

    Example:

Relationship to the Household Head	Sex
P2	**P3**
What is _____'s relationship to the head of this household?	*Is _____ male or female?*
• WRITE THE ANSWER ON THE LINE PROVIDED. • WRITE THE CODE CORRESPONDING TO THE ANSWER. REFER TO CODES AT THE BOTTOM.	1 Male 2 Female
SON **SPECIFY** 0 3	☐ 1 ☒ 2

An entry of **SON** in the "Relationship to the Household Head" should correspond to an **"X"** mark for **MALE** in "Sex"

2. Wrongly coded item. This occurs when a code does not correspond to the write-in entry.

    Example:

A code of **42** should be assigned to the write-in entry of **SISTER**

Relationship to the Household Head
P2
What is _____'s relationship to the head of this household?
• WRITE THE ANSWER ON THE LINE PROVIDED.   • WRITE THE CODE CORRESPONDING TO THE ANSWER. REFER TO CODES AT THE BOTTOM.
SISTER   **SPECIFY**   4 I

CODES FOR ITEM P2 – RELATIONSHIP TO HOUSEHOLD HEAD

01 Head	31 Grandson	51 Nephew
02 Spouse	32 Granddaughter	52 Niece
03 Son	33 Father	53 Other relative
04 Daughter	34 Mother	54 Nonrelative
21 Stepson	41 Brother	61 Boarder
22 Stepdaughter	42 Sister	62 Domestic helper
23 Son-in-law	43 Uncle	
24 Daughter-in-law	44 Aunt	

3. Missing entry. This occurs when there is no entry for an item where a response is required.

    Example:

	Sex	Date of Birth	Age	Birth Registration		Is ___ divorce... la...
he d	**P3**	**P4**	**P5**	**P6**	**P7**	
head d? ER ;TO FER	*Is ___ male or female?* 1 Male 2 Female	*In what month and year was ___ born?* MM Month YYYY Year	*What is ___'s age as of his/her last birthday?* • WRITE IN THE BOXES THE AGE IN COMPLETED YEARS. • IF LESS THAN ONE YEAR OLD, WRITE "000".	*Was ___'s birth registered with the Local Civil Registry Office?* 1 Yes 2 No 3 Don't know WRITE **X** IN THE BOX CORRES-PONDING TO THE ANSWER.	*Has ___ ever had a copy of his/her birth certificate?* 1 Yes 2 No 3 Don't know WRITE **X** IN THE BOX CORRES-PONDING TO THE ANSWER.	... ... • WRI... COR... ANS... • FOR... WRI...
	X 1 ☐ 2	0 2 **MM** 1 9 7 9 **YYYY**	(blank)	X 1 ☐ 2 ☐ 3	X 1 ☐ 2 ☐ 3	☐

There is no entry for **AGE**.

8.2   GENERAL INSTRUCTIONS IN EDITING OF ACCOMPLISHED CP FORMS

Data processors should be guided by the following steps in editing the CP Forms 2 and 4:

CP Form 2

a. Validate the correctness of the number of household members by sex written in the Summary of Visit portion by verifying if Item P3 (Sex) is consistent with Item P2 (Relationship to the Household Head) and/or Item P1 (Name of the Household Member). If there are errors to be corrected in CP Form 2, they should also be reflected in CP Form 1.

b. Check for the completeness of responses, watching out for items which were left blank when they are supposed to have entries, vice versa.

c. Check for the clarity and legibility of all write-in entries including the "**X**" marks in the questionnaires.

d. Check for the consistency of two related items.

e.   Check for the correctness of the codes given for Item P2 (Relationship to the Household Head) and Item P12 (Highest Grade/Year Completed), except for the course of persons who have finished postsecondary or college level.

f.   Check for the clarity and sufficiency of the write-in entries for Item P9 (Religious Affiliation), Item P12 (Highest Grade/Year Completed) for postsecondary or college courses, Item P14 (Technical/Vocational Course Obtained) and Item P16 (Usual Activity/Occupation) in preparation for machine coding.

g.   After editing, return the bundle of CP Form 2 to the RCC. The bundle of CP Form 2 will be transmitted to the SS 2015 for scanning/interpretation.

CP Form 4

a.   Validate the correctness of the number of ILQ members by sex written in the Summary of Visit portion by verifying if Item P3 (Sex) is consistent with Item P1 (Name of the ILQ Member). If there are errors to be corrected in CP Form 4, they should also be reflected in CP Form 1.

b.   Check for the completeness of responses, watching out for items which were left blank when they are supposed to have entries, vice versa.

c.   Check for the clarity and legibility of entries, including the "**X**" marks in the questionnaires.

d.   Check for the correctness of the codes given for Item P2 (Residence Status in the ILQ) and Item P12 (Highest Grade/Year Completed), except for the course of persons who have finished postsecondary or college level.

e.   Check for the clarity and sufficiency of the write-in entries for Item P9 (Religious Affiliation) and Item P12 (Highest Grade/Year Completed) for postsecondary or college courses, in preparation for machine coding.

f.   After the editing, return the bundle of CP Form 4 to the RCC. The bundle of CP Form 4 will be transmitted to the SS 2015 for scanning/interpretation.

IMPORTANT NOTICE

After editing of CP Form 2 and 4, ensure that the changes in the final, correct, and accurate count of household members and members of the institutional living quarters are the also reflected in the corresponding CP Form 1.

8.3   EDITING OF CP FORM 2

All items in CP Form 2 require only one answer. Items that are left blank should be checked for skipping patterns. Some population items require particular age groups to have entries.

Item	Guidelines on Editing
Population Census Questions	
Line Number	• Check if the line numbers on the additional sheets are renumbered starting from "**9**" and so on. • Check if the line number of the respondent is the same with the encircled line number in page 2B.
P1 – Name	• The name of the household head should occupy the first row of the questionnaire and should, therefore, match with the name written on page 2A in the Geo-ID portion of the questionnaire and column 6 of CP Form 1. If the household head is not written on the first row, leave as is. • Check if the names of the household members are legibly written in capital letters on the spaces provided. Spot any fictitious name, name of popular figures like actors, actresses, and others, reported as household members. Spot names that are repeated in many questionnaires since it indicates possible population padding. Write the problem in CP Form 21. • The total number of household members specified in Summary of Visit portion should correspond to the number of household members listed in this column. If not, correct accordingly the number of household members in the Summary of Visit portion.
P2 – Relationship to the Household Head	• The first member of the household should be the household head with a code of "**01**". This code should appear only once and should always occupy the first line. • If there is no household head indicated, that is, no code "**01**", or if two or more household members have a code of "**01**", refer to CP Form 1 for the name of the household head, or refer to Supervisor. However, if the household head does not occupy the first line, leave it as it is. • Verify if the code in the boxes matches with the description written on the space provided for this item. In case of inconsistencies, refer to the name, age, sex and/or marital status of the respondent and make necessary corrections. Otherwise, refer to Supervisor. • Check if the codes in this item are valid. If not, the write-in entry should prevail.

Item	Guidelines on Editing
	• Look for an entry of **"BOARDER"** or code "**61**". If it occurred 10 or more, do not include them as members of the household with whom they live. These boarders will all be considered as institutional population and will be listed separately from the household using CP Form 4.
P3 – Sex	• Check if only one box is marked with "**X**" for every person. • If there is no entry or two boxes are marked with "**X**", determine the sex of the household member based on item P1 (Name of the Household Member) and/or item P2 (Relationship to the Household Head). If it is still difficult to determine the sex based on these items, refer to Supervisor. • Check the consistency of the number of males and females in the Summary of Visit portion of this form and the entries in Cols. 7, 8, and 9 of CP Form 1. In case of inconsistency, correct the entries in the Summary of Visit portion of this form and in Cols. 7, 8, and 9 of CP Form 1 based on the details of this item. • If there are several blank entries, refer to supervisor.
P4 – Date of Birth	• Check if every household member has a reported date of birth. There should be an entry on the appropriate code for the month "**MM**" and year "**YYYY**" of birth for all members of the household. If there is no entry, refer to Supervisor. • Check also for the consistency of the date of birth and age. For example, there is inconsistency if the age is 10 years old and the reported date of birth is "**01 1995**". Verify this with the Supervisor.
P5 – Age	• Check if every household member has a reported age. Blank is not acceptable. • If the age reported is doubtful or unrealistic, refer to Supervisor. • See to it that the age is reported in three digits. • The age gap between the mother and her oldest child should be 15 years and over. If not, check for the remarks that would explain why the age gap is less than 15 years. • The age gap between the father or mother and the household head should be 15 years and over. If not, check for the remarks that would explain why the age gap is less than 15 years.
P6 – Whether a Member's Birth was Registered at the LCR	• Check if only one box is marked with "**X**" for every person. If not, refer to Supervisor. • Blank is not acceptable.

Item	Guidelines on Editing
Office	
P7 – Copy of Birth Certificate	• Check if only one box is marked with "**X**" for every person. If not, refer to Supervisor. • Blank is not acceptable.
P8 – Marital Status	• Check if the age of a person is below 10 years old and the box opposite code "**1**" is marked with an "**X**". Otherwise, change to code "**1**". • Check for the consistency of the marital status of household head and spouse. Both should have an "**X**" mark opposite code "**2**" for married or code "**5**" for common-law/live-in. If not, refer to Supervisor. • If box for code "**6**" was frequently marked with "**X**", refer to Supervisor. • Blank is not acceptable.
P9 – Religious Affiliation	• Check if the write-in entry on the space provided is legibly written in capital letters on the line provided. For these entries, the corresponding code boxes should be left blank as the codes will be supplied during the machine processing at the Provincial Statistical Office (PO). • If there is no write-in entry in space provided, refer to Supervisor.
P10 – School Attendance	• Check if only one box is marked with "**X**" for every person 5 to 24 years old. If not, refer to supervisor. Blank is not acceptable.
P11 – Literacy	• Check if only one box is marked with "**X**" for every person 5 years old and over. If not, refer to supervisor. Blank is not acceptable.
P12 – Highest Grade/Year Completed	• Check if there is an entry for every person 5 years old and over. If not, refer to Supervisor. • Check if the write-in entry on the line provided matches with the code for the highest grade/year completed. If inconsistent, write-in entry will prevail. The list of codes and description for the highest grade/year completed is found at the bottom of page 2C. If there is no answer, refer to Supervisor. • For post secondary or college graduate, check if the specific course is legibly written in capital letters on the line provided. For these entries, the corresponding code boxes should be left blank as the codes for the post secondary and college courses will be supplied during the machine processing at the PO. • Check for consistency of entries between item P4-Age and this item. For example, there is inconsistency if the

Item	Guidelines on Editing
	age is 10 years old and the reported highest grade/year completed is college graduate. Refer to Supervisor.
P13 – Graduate of Technical/Vocational Course	• Check if only one box is marked with "**X**" for every person 15 years old and over. If not, refer to Supervisor. • If the box for code "**1**" is marked with "**X**", item P14-Technical/Vocational Course Obtained should have an entry. However, if the box for code "**2**" is marked with "**X**", item P14 should be blank. Otherwise, refer to Supervisor. • Blank is not acceptable.
P14 – Technical/ Vocational Course Obtained	• If the box for code "**1**" in P13 is marked with "**X**" then there should be a write-in entry in the line provided in this column for all persons 15 years old and over. If the box for code "**2**" in P13 is marked with "**X**", refer to Supervisor if inconsistent. • Check if the write-in entry is legibly written in capital letters on the line provided. The boxes for codes should be blank. This will be supplied during the machine processing at the PO.
P15 – Overseas Worker	• Check if only one box is marked with "**X**" for every person 15 years old and over. If not, refer to supervisor. • Blank is not acceptable.
P16 – Usual Activity/Occupation	• Check if there is an entry for every person 15 years old and over. If blank, refer to Supervisor. • Check if the write-in entry is legibly written in capital letters on the line provided. The boxes for codes should be left blank. This will be supplied during the machine processing at the PO. • Check if the write-in entry for usual activity/occupation is a specific occupation. For example, an entry of CLERK is not acceptable. Refer to Supervisor. • Check for consistency of entries between item P5-Age, item P12-Highest Grade/Year Completed, and this item. For example, there is inconsistency if the age is 15 years old, the reported highest grade/year completed is high school graduate, and the occupation is lawyer. Refer to Supervisor.
Check for Persons Not Yet Listed	• Check if only one box is marked with "**X**" in each item. If none, refer to Supervisor. • If the box for code "**1**" is marked with "**X**", check if there are infant less than 1 year old, children aged 1 to 9 years old, and overseas workers or household members temporarily away in the list. Refer to Supervisor.

Item	Guidelines on Editing
Use of Additional Booklets	• Check if only one box is marked with "**X**" in this item. If blank or more than 1 box is marked with "**X**", refer to Supervisor. • If the box for code "**1**" is marked with "**X**", check if there is/are additional CP Form 2 used for the household. If none, refer to Supervisor. • In case there is more than one booklet used for the household, the box for code "**1**" for the booklets used will be marked with "**X**".
Housing Census Questions	
B1 – Type of Building	• Check if only one box is marked with "**X**". Otherwise, refer to Supervisor. • CP Form 2 with HSN 7777, 8888, 8889, and 9999 should have entry on this item. Otherwise, refer to Supervisor. • Check for CP Form 2 with the same BSN. These forms should have an "**X**" mark opposite code "**2**" for duplex or code "**3**" for multi-unit residential. If not, refer to Supervisor. • If the box for code "**7**" (Others, Specify) is marked with "**X**", check if there is a specific answer written on the line provided opposite this category. If not specified, refer to Supervisor. • Blank should only be acceptable for BSN 5555 and HUSN 5555. Otherwise, refer to Supervisor.
B2 – Construction Materials of the Roof and B3 – Construction Materials of the Outer Walls	• Check if only one box is marked with "**X**" for each item in B2 and B3. Otherwise, refer to Supervisor. • If the box for code "**8**" (Others, specify) is marked with "**X**" in item B2, check if there is a specific entry written on the line provided opposite this category and determine if this can be categorized from codes "**1**" to "**7**". If not specified, refer to Supervisor. • Check that the kind of construction materials for the roof is code "**6**" for "**Makeshift/salvaged/improvised materials**" for housing units in non-building structures such as trailers, barges, carts, boats, trucks, culverts, or those under the bridge. • Check that the kind of construction materials for the outer walls is code "**08**" for "**Makeshift/salvaged/ improvised materials**" for housing units in non-building structures such as trailers, barges, carts, boats, trucks, culverts, or those under the bridge. • If the box for code "**10**" (Others, specify) is marked with "**X**" in item B3, check if there is a specific entry written on the line provided opposite this category and determine if this can be categorized from codes "**01**" to

Item	Guidelines on Editing
	"**09**". If not specified, refer to Supervisor. • CP Forms 2 with HSN 7777, 8888, 8889, and 9999 should have entries in items B2 and B3. Otherwise, refer to Supervisor. • Blank should only be acceptable for BSN 5555 and HUSN 5555. Otherwise, refer to Supervisor.
H1 – Fuel for Lighting	• Check if only one box is marked with "**X**". Otherwise, refer to Supervisor. • If the box for code "**7**" (Others, Specify) is marked with "**X**", check if there is a specific answer written on the line provided opposite this category and determine if this can be categorized from codes "**1**" to "**6**". If not specified, refer to Supervisor. • Special HSN (7777, 8888, 8889, and 9999) should be blank, otherwise line out.
H2 – Source of Water Supply for Drinking and H3 – Source of Water Supply for Cooking	• Check if only one box is marked with "**X**" for each source of water supply for drinking and cooking. Otherwise, refer to Supervisor. • If the box for code "**12**" (Others, Specify) is marked with "**X**", check if there is a specific answer written on the line provided opposite this category and determine if this can be categorized from codes "**01**" to "**11**". If not specified, refer to Supervisor. • Do not accept "neighbor" as source of water supply. Refer to Supervisor. • Special HSN (7777, 8888, 8889, and 9999) should be blank, otherwise line out.
H4 – Tenure Status of the Housing Unit/Lot	• Check if only one box is marked with "**X**". Otherwise, refer to Supervisor. • Special HSN (7777, 8888, 8889, and 9999) should be blank, otherwise line out.
Registration of Deaths in the Last Two Years among Household Members	
D1 – Whether any Household Member Died in the Past Two Years	• Check if only one box is marked with "**X**". Otherwise, refer to Supervisor. • Blank should only be acceptable for HSN 7777, 8888, 8889, and 9999. Otherwise, refer to Supervisor.
D2 – Number of Former Household Members Who Died in the Past Two Years	• There should be a numeric entry in the box for this item if item D1 is marked with "**X**" for code "**1**". If none, refer to Supervisor. • Check if there is an additional booklet if the answer in this item is 5 or more. If none, refer to Supervisor. • Blank should only be acceptable for HSN 7777, 8888, 8889, and 9999. Otherwise, refer to Supervisor.
D3 – Name of Former Household Member	• Check if the name of the former household members who died anytime from July 2013 to July 2015 is legibly

Item	Guidelines on Editing
Who Died in the Past Two Years	written in capital letters on the spaces provided.
D4 – Sex of Former Household Member Who Died in the Past Two Years	• Check if only one box is marked with "**X**" for every person. • If there is no entry or two boxes are marked with "**X**", determine the sex of the household member based on item D3 (Name). If it is still difficult to determine the sex based on these items, refer to Supervisor.
D5 – Age at Death of Former Household Member Who Died in the Past Two Years	• Check if only one box is marked with "**X**" for every person. If not, refer to Supervisor. • If there is an "**X**" mark opposite code "**1**" for days, check if there is a numeric entry in the box for age at death recorded in days. • If there is an "**X**" mark opposite code "**2**" for months, check if there is a numeric entry in the box for age at death recorded in months. • If there is an "**X**" mark opposite code "**3**" for years, check if there is a numeric entry in the box for age at death recorded in years.
D6 – Whether Death was Registered at the LCR Office	• Check if only one box is marked with "**X**" for every person. If not, refer to Supervisor.
D7 – Copy of Death Certificate	• Check if only one box is marked with "**X**" for every person. If not, refer to Supervisor.
Remarks	• Check if the Remarks portion for any information that provides explanation or clarification on the entries reported in this form.

8.4   EDITING OF CP FORM 4

In editing CP Form 4, follow the same instructions given in editing CP Form 2 for the same items. Additional instructions for specific items are given below:

Item	Guidelines on Editing
P1 to P9, and P12	• See guidelines on field editing of CP Form 2 for similar population items in CP Form 4. • There should be entries for all persons residing in the ILQs. • If blank, check for remarks. ILQs may be in operation but no residents at the time of enumeration. • Otherwise, refer to Supervisor.
P2 – Residence Status	• Check if the description for the residence status of each member is written legibly on the spaces provided.

Item	Guidelines on Editing
	• Check if the write-in entries and codes for residence status are consistent. • Check if the codes in this item are valid. Refer to Supervisor if the entry is not among those codes. The list of codes and description of residence status is found on bottom page of 4B. • Check if the residence status of most members corresponds to the type of ILQ in the Geo-ID portion. • Otherwise, refer to Supervisor.

8.5   HOW TO FILL OUT CP FORM 21 – PROBLEMS ENCOUNTERED/REFERRAL FORM: PART B: TO BE ACCOMPLISHED BY THE EDITOR

The following are the specific instructions for the editor in filling out Part B should be filled out by the editor during the editing of CP Forms 2 and 4, and maps of CP Form 21.

1.   Use a separate CP Form 21 for every EA. This is the same CP Form 21 where PART A was filled out during the general screening for an EA.

2.   Indicate in Column 1 the code corresponding to the problem encountered in the questionnaire, that is, code 1 for unused BSN, HUSN, HSN or ISN, code 2 for inconsistent item, code 3 for incomplete/blank entry, code 4 for needed enhancement or entries, code 5 for needed transcription to a new form, and code 5 for other types of problem.

3.   Indicate in Column 2 the type of questionnaire and write the BSN, HUSN, HSN, and ISN of the said questionnaire in Columns 3, 4, 5, and 6, respectively.

4.   Write the specific problems encountered in the questionnaire in Column 7 and the corresponding action taken by the supervisor in Column 8.

5.   Mark the status of the questionnaires with unresolved cases with "2" for PENDING in Column 9. Otherwise, mark the status with "1" for OK.

6.   Write the necessary remarks in Column 10 regarding the problem encountered.

7.   If two or more CP Form 21 were used to record the problems, make sure that the number of sheets is correctly reflected, that is, for two sheets, there should be **Sheet 1 of 2 Sheets** and **Sheet 2 of 2 Sheets**.

8.   After recording all the problems encountered, write your name (as editor) and affix your signature on the space provided. Record also the date when you return the EA pack, including the CP Form 21.

9. Return this form together with the EA pack to the RCC.

ILLUSTRATION 8.1
FILLED OUT CP FORM 21
(PROBLEMS ENCOUNTERED/REFERRAL FORM

CP Form 21						Sheet __1__ of __1__ Sheets			
Republic of the Philippines PHILIPPINE STATISTICS AUTHORITY		PROVINCE				BENGUET		1 1	
		CITY/MUNICIPALITY				BAGUIO CITY		0 2	
2015 Census of Population PROBLEM ENCOUNTERED/REFERRAL FORM		BARANGAY				HILLSIDE		0 4 5	
		ENUMERATION AREA NUMBER						0 0 0 0 0 0	

B. TO BE ACCOMPLISHED BY

Questionnaire Indicator 1 – Missing 2 – Extra	Type of Questionnaire/ Form or Map	Number of Missing/Extra Questionnaire or Map	Status 1 – Ok 2 – Pending
(1)	(2)	(3)	(4)
1	Form 2	1	2

C. TO BE ACCOMPLISHED BY EDITOR

Indicator
1 – Unused BSN, HUSN, HSN or ISN
2 – Inconsistent item
3 – Incomplete/blank entry
4 – Needed enhancement of entries
5 – Needed transcription to a new form
6 – Others

Indicator	Type of Questionnaire	BSN	HUSN	HSN	ISN	Specify Problems Encountered	Actions Taken by the Supervisor	Status 1 – Ok 2 – Pending	Remarks
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
3	Form 2	0006	0006	0006		NO ENTRIES ON P5 , P10 & P11	REINTERVIEW THE HOUSEHOLD	2	
2	Form 2	0032	0035	6039		MORE THAN ONE HOUSEHOLD HEAD	REINTERVIEW THE HOUSEHOLD	2	
1	Form 2	0040	0047	0053			REVISIT THE AREA	2	

Prepared by:

NICOMAINE FAULKERSON
Signature over printed name of Screener

10|13|2015
Date

Edited by:

SHARMAINE MENDOZA
Signature over printed name of Editor

10/16/2015
Date

Referred to:

MARTIN KARGANILLA
Signature over printed name of CAS

10/20/2015
Date

Approved by:

JASMINE CURTIS
Signature over printed name of Supervisor

10/22/15
Date

8.6   GENERAL GUIDELINES FOR SUPERVISORS ON PROBLEMS REFERRED BY THE PROCESSORS

The Supervisors should be guided by the following general guidelines on problems referred by the processor:

1. The Head CAS assigned to the EA/barangay during enumeration will make the final decision on how to edit the incomplete and/or inconsistent items that are referred to by the processors during the editing of accomplished CP Forms.

2. If the processor served as EN, TS, or CAS during the enumeration in the EA where the accomplished CP forms have errors or items that are incomplete and/or inconsistent, he/she can be asked for the right entries to these items during the editing of accomplished CP Forms. The Supervisor has to use his/her best judgment as to the confidence of the entries supplied by the processor for these items.

3. For field verification of accomplished questionnaires with unresolved problems or questionnaires that are missing, revisit the household or ILQ to conduct an interview or pick up the filled out questionnaire, whichever is the case.

Processing of Accomplished CP Form 5

Upon receipt of all the accomplished CP Form 5 (Barangay Schedule) submitted by the Head Census Area Supervisor (Head CAS), the Receipt and Control Clerk (RCC) in the 2015 Census of Population (POPCEN 2015) Data Processing Center (DPC 2015) will separate the CP Form 5 from the barangay/Enumeration Area (EA) packs and bundle them by province. All CP Forms 5 will be processed and edited by the Assistant Supervisor. In turn, the Supervisor will review and verify all these forms.

9.1 GENERAL INSTRUCTIONS IN PROCESSING OF CP FORM 5

The Assistant Supervisor will edit all the accomplished CP Form 5. In doing so, he/she will:

1. Get the bundled CP Form 5 (by province) from the RCC.

2. Perform a complete editing of all CP Form 5.

3. Each barangay should have an accomplished CP Form 5. If none, refer this problem to the Supervisor. If more than one accomplished CP Form 5, refer this problem to the supervisor.

4. Refer to the Supervisor problems in the questionnaires that cannot be resolved during the editing. The Supervisor will notify the concerned Head CAS so that appropriate action could be done, such as conducting field verification to rectify errors or fill in blank responses.

5. Return the edited bundled CP Form 5 after editing to the RCC.

9.2 EDITING OF CP FORM 5 BY THE ASSISTANT SUPERVISOR

In general, all items in CP Form 5 require only one answer. For items in Part I – Barangay Facilities/Characteristics, Part II – Kinds of Establishments, Part III – Informal Settlers, Part IV – Presence of Relocation Area, and Part V – In-movers in the Barangay that are left blank or with no entry at all should be checked for skipping pattern.

Below are the detailed instructions in editing CP Form 5.

Item	Editing
Identification Panel	
Geographic Identification (Geo-ID)	• Blank Geo-ID is not acceptable. • Check if the Geo-ID matches with the Barangay Reference File (BRF). If not, verify the CP Form 5 with the supervisor and correct the entries accordingly. • The names of province, city/municipality, and barangay should be legibly written in capital letters on the lines provided and the corresponding codes are properly entered in the boxes.
Certification	• The name, signature of TS, and date when the TS accomplished this form should be legibly written.
Interview Record	• Blank entries are not acceptable. • The name of the respondent, designation/position of the respondent in the barangay, and address of the barangay hall should be legibly written in capital letters. • The day of visit should be written in "mm/dd" format on the boxes provided. • The time of the interview began and ended should be written in 24-hour format on the boxes provided.
• Part I – Barangay Facilities/Characteristics	
Q1 to Q4	• Blank entries are not acceptable. • Check if only one box is marked with "X" for every facility/characteristics in items Q1 to Q4. ✓ If the answer is Yes in item Q3, there should be a corresponding "X" mark for the distance between the nearest point of this barangay and the national highway using the access road. ✓ If the answer is No in item Q4a, Q4b, Q4c, Q4d, Q4e, Q4f, Q4g, Q4h, Q4i, Q4j, Q4k, Q4l, Q4m, Q4n, Q4o, and Q4p, there should be a corresponding "X" mark for the distance of such facility in the barangay. ✓ Check if only one box is marked with "X" for items Q4q and Q4r. • Otherwise, refer to Supervisor.
Part II – Kinds of Establishments	
Q5 to Q12	• Blank entries are not acceptable. • Check if only one box is marked with "X" for every kind of establishment in items Q5 to Q12. ✓ If the answer is code "1" (Yes) in items Q5 to Q12, there should be a corresponding entry in items Q5a, Q5b, Q6a , Q6b, Q7a, Q7b, Q8a, Q8b, Q9a, Q9b, Q10a, Q10b, Q11a, Q11b, Q12a, and Q12b. ✓ If the answer is code "1" (Yes) in items Q5b, Q6b, Q7b, Q8b, Q9b, Q10b, Q11b, and Q12b for the establishments with 10 to 99 employees, there

Item	Editing
	should be a corresponding entry in Q5c, Q6c, Q7c, Q8c, Q9c, Q10c, Q11c, and Q12c for the number of such establishment in the barangay. • Otherwise, refer to supervisor.
Part III – Informal Settlers	
Q13	• Blank entries are not acceptable in items Q13a, Q13b, Q13c, Q13d, Q13e, Q13f, Q13g, Q13h, and Q13i. • Check if only one box is marked with "X" in items Q13a, Q13b, Q13c, Q13d, Q13e, Q13f, Q13g, Q13h, and Q13i. • Otherwise, refer to supervisor.
Part IV – Presence of Relocation Areas	
Q14	• Blank entries are not acceptable in items Q14a and Q14b. • Check if only one box is marked with "X" in items Q14a and Q14b. • Otherwise, refer to supervisor.
Part V – In-Movers	
Q15	• Blank entries are not acceptable in items Q15a, Q15b, Q15c, and Q15d. • Check if only one box is marked with "X" for each item in in-movers. • Otherwise, refer to supervisor.
Remarks	• Check in the Remarks portion for any information that provides explanation or clarification on the entries reported in this form. This information may help in editing a particular item in CP Form 5.

9.3   VERIFICATION OF ENTRIES IN CP FORM 5 BY THE SUPERVISOR

After editing, CP Form 5 will undergo scanning, interpretation, and data entry. DPC 2015 will immediately send the batch files to the Central Office (CO). CO in turn will generate tables for the Supervisor to verify the entries in CP Form 5. During the verification, the Supervisor will accomplish CP Form 20 (Verification Slip for CP Form 5). The List of Establishments (LE) of the PSA will be used as reference during the verification of CP Form 5. Items with no entries but require an entry, items with questionable entries, and items with entries that are inconsistent with LE will be subjected to field verification.

Instructions in Filling Out CP Form 20

1. The Supervisor should fill out CP Form 20 for each barangay.

2. Write the name and the corresponding code of the province, city/municipality, and barangay in the Geo-ID portion.

3. There are two parts in CP Form 20: Part A – Data Items with Errors and Part B – Verification for the Kind and Number of Establishments. Part A of this form contains five columns, namely, Item in CP Form 5 (Column 1), Total Number of Items with Error (Column 2), Type of Error (Column 3), Specific Item with Error by Type of Error (Column 4), and Remarks/Action Taken (Column 5). Part B contains seven columns, namely, Kind of Establishment (Column 1), Establishments with 100 employees or more (Columns 2 and 3), Establishment with 10 to 99 employees (Columns 4 and 5), and No Establishment (Columns 6 and 7).

Part A – Data Items with Errors

*   Accomplish this part by item in CP Form 5.

*   Column 1 – items in CP Form 5, namely, Geo-ID, Part I – Barangay Facilities/Characteristics, Part II – Kinds of Establishments in the Barangay, Part III – Informal Settlers, Part IV – Presence of Relocation Area, and Part V – In-movers.

*   Column 2 – count and write the total number of items with error in Geo-ID portion of CP Form 5.

*   Column 3 – identify the type of error those items with error listed in Column 2. The type of error can be any of the following: wrong entry (code 1), missing entry (code 2), faulty skip/invalid blank (code 3), and other type of error (code 4). If code 4, write the specific error.

*   Column 4 – write the specific item with error according to the type of error listed in Column 3.

*   Column 5 – write any remarks or action taken to resolve the errors.

*   Total Number of Items With Errors – count the total number of items with error in this row.

Part B – Verification for the Kind and Number of Establishments

*   Accomplish this part by kind of establishment.

*   Column 1 – kind of establishment, namely, commercial, recreational, manufacturing, accommodation and food service, financial, repair services, personal services, and other establishment.

*   Columns 2 and 3 – Establishments with 100 employees or more
    ✓   Column 2 – write **Y** if code 1 for Yes in CP Form 5 in Q5a, Q6a, Q7a, Q8a, Q9a, Q10a, Q11a, or Q12a.

    ✓ Column 3 – write the number of establishments reported in LE.

- Columns 4 and 5 – Establishments with 10 to 99 employees
  - ✓ Column 4 – copy and write the number of establishments with 10 to 99 employees by kind of establishment based on CP Form 5.
  - ✓ Column 5 – copy and write the number of establishments with 10 to 99 employees by kind of establishment reported in LE.

- Columns 6 and 7 – No Establishment
  - ✓ Column 6 – write **N** if code 2 for No in CP Form 5 in Q5, Q6, Q7, Q8, Q9, Q10, Q11, or Q12.
  - ✓ Column 7 – write **N** if there are no establishments by kind of establishment reported in LE.

- Result of Comparison/Action Taken – write the result of comparison of the number of establishments based on CP Form 5 and those reported in LE. Write also any information that could explain the difference and the action taken to resolve the inconsistency, if needed.

The Supervisor should write and affix his/her name and signature below this form and indicate the date when this form is accomplished.

Below is a copy of CP Form 20.

ILLUSTRATION 9.1
CP FORM 20 (VERIFICATION SLIP FOR CP FORM 5)

CP Form 20

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 Census of Population
VERIFICATION SLIP FOR CP FORM 5

Province _____ ☐☐

City/Municipality _____ ☐☐

Barangay _____ ☐☐☐

A. Data Items with Errors

Item in CP Form 5	Total Number of Items with Error	Type of Error 1 – Wrong entry 2 – Missing entry 3 – Faulty skip/invalid blank 4 – Others, specify	Specific Item with Error by Type of Error	REMARKS/ACTION TAKEN
(1)	(2)	(3)	(4)	(5)
Geo-ID				
Part I – Barangay Facilities/ Characteristics				
Part II – Kinds of Establishments in the Barangay				
Part III – Informal Settlers				
Part IV – Presence of Relocation Area				
Part V – In-movers				
TOTAL NUMBER OF ITEMS WITH ERRORS				

B. Verification for the Kind and Number of Establishments

Compare the number of establishments in CP Form 5 with the List of Establishments (LE) by type of establishment and number of employees in these establishments.

Kind of Establishment	Establishments with 100 employees or more		Establishments with 10 to 99 employees		No establishment	
	CP Form 5	LE	CP Form 5	LE	CP Form 5	LE
	WRITE Y IF CODE 1 FOR YES IN CP FORM 5 IN Q5a, Q6a, Q7a, Q8a, Q9a, Q10a, Q11a, OR Q12a.	WRITE NUMBER OF ESTABLISH-MENTS	WRITE NUMBER OF ESTABLISHMENTS		WRITE N IF CODE 2 FOR NO IN CP FORM 5 IN Q5, Q6, Q7, Q8, Q9, Q10, Q11, OR Q12.	WRITE N IF NO ESTABLISH-MENT
(1)	(2)	(3)	(4)	(5)	(6)	(7)
a. commercial						
b. recreational						
c. manufacturing						
d. accommodation and food service						
e. financial						
f. repair services						
g. personal services						
h. other establishments						
RESULT OF COMPARISON/ REMARKS/ACTION TAKEN						

Verified by:

_____
Signature over Printed Name of Supervisor

_____
Date

Processing of Census Maps

In every census undertaking, maps play important role especially during enumeration and post-enumeration activities. During the census enumeration phase, the enumerators (ENs) used barangay/Enumeration Area (EA)/block maps to plot households and to sketch important landmarks and area features. These maps serve as tools in ensuring the complete coverage of census areas. Moreover, these maps also serve as guides for ENs and supervisors during future survey operations. It is, therefore, necessary that maps are complete and must conform to the standards set by the office to ensure their effectiveness in future statistical undertakings.

Upon receipt of all accomplished maps submitted by the Head Census Area Supervisor (Head CAS), the Receipt and Control Clerk takes out the barangay/Enumeration Area (EA)/block maps from the barangay/EA packs, and bundles them by city/municipality for verification by hired processors.

This chapter discusses the different phases of processing of maps, specifically on verification of maps vis-à-vis CP Form 1. The verification of maps is aimed at ensuring the completeness and quality of maps updated during the enumeration, prior to their submission to the POPCEN 2015 Scan Station (SS 2015) for scanning. Verification of maps with CP Form 1 should be done only after all CP Form 1 have been completely processed.

For the machine processing of maps, a separate set of instructions should be provided by the Information Resources Department.

10.1   TYPES OF MAPS TO BE PROCESSED

All maps accomplished during the enumeration should undergo verification. These maps include:

1. Original Barangay Map

This is the map of a barangay provided to the EN prior to the enumeration activity. This map is printed in a standard mapping form. It has barangay boundaries and some physical features of the barangay such as roads, streets, school, and church, and others.

If the barangay is not divided into EAs, the EA boundaries are not indicated on the map, except the barangay boundaries. In addition, the location of

buildings and households are plotted accordingly, and the corresponding household serial numbers (HSNs) are also indicated.

2. **EA Map**

If the barangay is divided into EAs, the total maps for the area should include the original barangay map and the EA maps. These maps are printed in standard mapping form. The original barangay map is used as reference by the EN/s assigned in the area while the EA map is used for plotting the buildings with their corresponding HSNs. Aside from the physical features, the original barangay map has barangay boundaries and EA boundaries (if the barangay is composed of EAs), while the EA map has EA boundaries only. In this case, the plotting of buildings with their corresponding HSNs should have been done on the EA map, not on the barangay map.

3. **Block Maps**

If the buildings in the barangay/EA are too dense to plot on the EA map, the ENs were instructed to prepare block map/s. A block map is sketch of a block barangay/EA in a standard mapping form. For block maps, the plotting of buildings with their corresponding HSNs should have been done on the blank mapping form, not on the barangay/EA map.

10.2   GUIDELINES IN CHECKING THE COMPLETENESS AND QUALITY OF MAPS

After the general screening, the maps will undergo completeness check and verification. The processors will be responsible for the verification of maps. Each processor or group of processors assigned should verify maps with the corresponding edited and verified CP Form 1 for a barangay/EA. The distribution of workload for map verification will be determined by the Supervisor.

The processor must ensure the following:

1. The number of maps received for each barangay/EA is equal to the number indicated in CP Form 14 (Bundle Cover). If there are missing maps, fill out CP Form 21 (Problems Encountered/Referral Form) and report it to your Supervisor.

2. The names and codes for the province, city/municipality, and barangay as well as the EA number of all map sheets for the barangay/EA should be the same as the corresponding Geo-ID in CP Form 1. If there is an error in geographic name and/or code, report this to your supervisor through CP Form 21.

The map sheet numbering (Sheet ☐☐ of ☐☐ Sheets) should be correct;

   a. For a barangay with one EA, check that the original barangay map is numbered as "Sheets <u>01</u> of <u>01</u> Sheets".

   b. For a barangay divided into two or more EAs, check that the Barangay/EA maps are labeled in this manner:

      • Barangay map (Original Sheet): "Sheet <u>01</u> of <u>01</u> Sheets"

      • Each EA maps (Original Sheet): "Sheet <u>01</u> of *nn* Sheets", where *nn* refers to the number of EA/block maps drawn within the EA.

3. The whole barangay map must be composed of EA maps and/or block maps. Report any inconsistencies to your Supervisor through CP Form 21.

10.3   GENERAL INSTRUCTIONS IN THE VERIFICATION OF MAPS

Hired processors will be assigned to do the verification of maps vis-à-vis CP Form 1. In doing so, he/she should:

1. Get a bundle maps and their corresponding CP Form 1.

2. Perform a complete verification of the maps corresponding to the accomplished CP Form 1.

3. Refer to the Supervisor problems during the verification of the maps. The Supervisor shall notify the concerned Head CAS so that appropriate action could be done on problematic maps.

4. Return the verified maps and the corresponding CP Form 1 to the RCC.

10.4   SPECIFIC INSTRUCTIONS IN THE VERIFICATION OF MAPS

1. For every building listed in CP Form 1, check if there is a corresponding building symbol plotted on the map.

2. Check if the household serial numbers below each building symbol plotted on the map corresponds to the HSNs listed in CP Form 1.

3. Assess if the orientation of the map is correct (for non-GIS maps).

4. Check for updates made on the physical features and landmarks on the map.

5. Check if the names of streets and roads, and the areas/streets/roads bounding the barangay/EA/block are properly indicated on the map.

10.5   HOW TO FILL OUT CP FORM 24 – MAP EVALUATION FORM

After all the maps have undergone the completeness check, these maps should be checked also for quality in terms of the presence of boundaries, street names, orientation, among others. The Processors should fill out CP Form 24 (Map Evaluation Form) for this activity.

Below are the instructions to the processors on how to fill out CP Form 24:

1.   Fill out the Geo-ID portion by writing the name and corresponding code of the province and city/municipality.

2.   Write the barangay name and its corresponding code in Columns 2 and 3, as well as the Enumeration Area (EA) number in Column 4.

3.   Write in Columns 5 the type of map being processed. Indicate code "**1**" (Barangay Map), code "**2**" (EA Map), and code "**3**" (Block Map). Then, write in Column 6 number of sheets of maps being processed.

4.   Indicate code "**1**" (Yes) or code "**2**" (No) in the columns corresponding to the following questions:

   • Column 7 – Are all printed maps in prescribed mapping form? If NO, specify the type of form or paper used.

       Check if the maps are printed in the prescribed mapping form. Specify the type of form or paper used if the map/s is/are not printed in the prescribed mapping form.

   • Column 8 – Are all maps in good condition? If NO, specify the sheet numbers of the maps that fail the requirements.

       Check if the maps are crumpled, folded, dirty, or with holes or staples.

   • Column 9 – Do all maps have correct orientation?

       Use the original barangay map as reference in determining the correct map orientation.

   • Column 10 – Do all maps have clear boundaries?

       In order for a map to have a well defined boundary, boundaries must lie on prominent landmarks such as road networks, rivers, creeks, among others.

- Column 11 – Do barangay/EA/block map have street names/landmark names and symbols?

  Check for street names if these have been indicated on the map for easy familiarization and canvassing of the area during enumeration.

- Column 12 – Do plotted buildings have correct HSNs?

  Check for HSNs below the plotted building symbol for HSNs on the map. Refer to the HSNs listed in CP Form 1.

- Column 13 – Are plotted buildings in correct relative location on the maps vis-à-vis street/sitio name indicated in CP Form 1?

  Check for plotted building symbols in terms of their sequence and arrangement on the map in relation to the street/sitio name. Refer to the addresses, that is, street/sitio name for each building listed in CP Form 1.

- Column 14 – Are all maps reconcilable with its barangay map? Check shapes and boundaries if reconcilable.

  Check for the general shape of the EA/block map if these are the same with its mother map.

- Column 15 – Recommendation

  The Supervisor should provide recommendation, either the map needs redrawing (code 1), needs field validation (code 2), or OK for submission (code 3).

5. If two or more sheets of CP Form 24 were used, make sure that the number of sheets is reflected, that is, for two sheets, there should be Sheet <u>1</u> of <u>2</u> Sheets (for the first sheet) and Sheet <u>2</u> of <u>2</u> Sheets (for the second sheet).

6. Write on the Remarks column all observations or information regarding the completeness/quality of the map. Print and sign your name as the Processor who verified the map and the date this form had been accomplished. Your supervisor should also sign the form upon his/her review and date of his/her review.

ILLUSTRATION 10.1
FILLED OUT CP FORM 24
(MAP EVALUATION FORM)

CP Form 24

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 Census of Population
MAP EVALUATION FORM

PROVINCE: BENGUET
CITY/MUNICIPALITY: LA TRINIDAD

Sheet 1 of 1 Sheets
1 1 / 1 0

Line No. (1)	Barangay Name (2)	Code (3)	EA Number (4)	Type of Map 1–Barangay 2–EA 3–Block Map (5)	Number of sheets (6)	Are all printed maps in prescribed mapping form? If NO, specify the type of form/paper used. (7)	Are all maps in good condition? If NO, specify the sheet number/s that fails the requirements. (8)	Do all maps have correct orientation? (9)	Do all maps have clear boundaries? (10)	Do barangay/EA/block maps have street names/landmark names and symbols? (11)	Do plotted buildings have correct HSNs? (12)	Are the plotted buildings in correct relative location on the map vis-à-vis the street/statio name indicated in CP Form 1? (13)	Are all maps reconcilable with its barangay map? Check shape and boundaries if reconciliable. (14)	RECOMMENDATION 1 – Needs redrawing 2 – Needs field validation 3 – OK for submission (15)
01	BETAG	008	001000	1	1	1	1	1	1	1	1	1	1	3
02			002000	2	1	1	1	1	1	1	1	1	1	3
03			003000	2	1	1	1	2	1	1	1	1	1	1
04			004000	2	1	1	1	1	1	1	1	1	1	3
05			005002	2	1	1	1	1	1	1	1	1	1	3
06			005002	2	1	1	1	1	1	1	1	1	1	3
07			006003	3	2	1	1	1	1	1	1	1	1	2
08			007002	2	1	1	1	1	2	1	1	1	1	3
09			008003	2	1	1	1	1	1	1	1	1	1	3
10			009005	2	1	1	1	1	1	1	1	1	1	3
11			010006	2	1	1	1	1	1	1	1	1	1	3
12			011006	2	1	1	1	1	1	1	1	1	1	3
13														

INDICATOR FOR THE QUALITY OF MAPS (INDICATE "1" FOR YES OR "2" FOR NO)

Prepared by:
CLEVERLY ESTRADA
Signature Over Printed Name of Processor
10/20/2015
Date

Verified by:
Jaymine Curtis
Signature Over Printed Name of Supervisor
10/22/15
Date

Instructions in Bundling and Folioing of CP Forms and Census Maps

Bundling and/or folioing of CP Forms will be done to facilitate their systematic transmittal of said forms from the 2015 Census of Population (POPCEN 2015) Data Processing Center (DPC 2015) to the POPCEN 2015 Scan Station (SS 2015). This chapter discusses the procedures in bundling of processed CP Forms 1, 2, 4, and 5, and maps, as well as folioing of other census administrative forms.

Preliminary bundling of accomplished CP Form 1 (Listing Booklet), CP Form 2 (Household Questionnaire), and CP Form 4 (Institutional Population Questionnaire) by barangay/Enumeration Area (EA) was already done by the Head Census Area Supervisor (Head CAS) prior to the submission of these questionnaires to the Provincial Statistical Office (PO).

Upon receipt of the barangay/EA packs from the Head CAS, the Receipt and Control Clerk (RCC) in the DPC 2015 separates the CP Form 5 (Barangay Schedule) from the barangay/EA packs, bundles them by province, and sets them aside for verification by the Assistant Supervisor. The maps are likewise separated from the barangay/EA pack, bundled by city/municipality, and set aside for processing. The CP Forms 2 and 4, on the other hand, should remain properly bundled by barangay/EA throughout the different phases of data processing activities. Folioing of other administrative forms should also be done by the RCC for control, monitoring, and reference purposes.

Bundling means *compiling the basic census questionnaires and maps used during the enumeration and wrapping them in plastic sheets for transmittal.*

Folioing means *compiling the census administrative forms (including control and monitoring forms) using a fastener or shoelace inserted into the holes of these forms.*

CP Form 14 (Bundle Cover) will be used in bundling while CP Form 15 (Folio Cover) will be used in folioing.

11.1 QUESTIONNAIRES AND FORMS TO BE BUNDLED OR FOLIOED

The following questionnaires are to be bundled:

1. CP Form 1 (Listing Booklet)
2. CP Form 2 (Household Questionnaire)
3. CP Form 4 (Institutional Population Questionnaire)
4. CP Form 5 (Barangay Questionnaire)
5. Census Maps

The following CP forms used for control and monitoring purposes and other administrative forms are to be folioed:

1. CP form 10 (Daily Accomplishment/Report of the Enumerator)
2. CP Form 11A (Accomplishment Report of Team Supervisor)
3. CP Form 11B (Accomplishment Report of Census Area Supervisor)
4. CP Form 12 (Spotcheck, Reinterview, and Observation Record)
5. CP Form 13 (Transmittal/Receipt Form)
6. CP Form 16 (Certification of Punong Barangay)
7. CP Form 19 (Provincial Processing Receipt and Control Form)
8. CP Form 20 (Verification Slip for CP Forms 1, 2, 4, and 5 and Maps)
9. CP Form 21 (Problems Encountered/Referral Form)
10. CP Form 22 (Accomplishment Report of Manual Processors)
11. CP Form 24 (Map Evaluation Form)

11.2 PREPARING THE QUESTIONNAIRES FOR TRANSMITTAL TO THE SS 2015

The RCC in the DPC 2015 should follow the foregoing instructions in bundling the major census questionnaires and folioing the census administrative forms:

1. Bundle by city/municipality all CP Form 1 that have undergone general screening, editing, and processing of maps.

2. Set aside and bundle by province all CP Form 5 right after the barangay/EA packs have been transmitted by the Head CAS to the DPC 2015.

3. Set aside and bundle by city/municipality all barangay/EA/block maps right after the barangay/EA packs have been transmitted by the Head CAS to the DPC 2015.

4. Ensure that CP Forms 2 and 4 remain properly bundled by barangay/EA as these forms are passed around from one processor to another during the various stages of data processing.

5. Fill out the applicable portion for DPC 2015 in CP Form 13 before the bundles are transmitted to the SS 2015 for scanning/interpretation.

   a. Record the date when the bundles will be transmitted to the SS 2015.

   b. Ask the Supervisor to affix his/her signature in the column next to the date recorded.

   c. Ask also the Provincial Census Project Staff (PCPS) to affix his/her signature and write the date the bundles are to be transmitted to the SS 2015.

6. Prepare/arrange the bundles in the box for transmittal to the SS 2015.

11.3 BUNDLING INSTRUCTIONS FOR CP FORMS 1, 2, 4, AND 5, AND MAPS

Each EA pack submitted by the Head CAS to the DPC 2015 should contain CP Forms 1, 2, 4, and 5, and the barangay/EA/block maps. After the general screening and editing, these questionnaires and maps are rebundled to facilitate scanning/interpretation. The rebundling schemes are as follows:

- CP Form 1 are rebundled by city/municipality;
- CP Form 2 are rebundled if the number of questionnaires in each EA pack exceeds 500;
- CP Form 4 are rebundled if the number of questionnaires in each EA pack exceeds 500;
- CP Form 5 are rebundled by province; and
- Maps are rebundled by city/municipality.

The following must be followed by the RCC in rebundling the CP Forms 1, 2, 4, and 5, and maps:

CP Form 1

1. Sort all accomplished CP Form 1 for a particular city/municipality. Arrange them in ascending order of the geographic code of the barangay, EA number, and booklet number.

2. If the number of CP Form 1 for a city/municipality exceeds 500, rebundle the questionnaire following these rules:

   a. Each bundle should contain at most 500 CP Form 1;

    b. If there are more than one bundle of CP Form 1 for a particular city/municipality, the forms should be more or less equally distributed to each of the bundles; and

    c. Make sure that all CP Form 1 for a barangay/EA are placed in the same bundle.

3. Spread out the questionnaires with pages 1A and 1D upturned.

4. Cover the bundle with CP Form 14.

5. Fill out the required information in CP Form 14, such as the name and code of the province and city/municipality, bundle number, and number of CP Form 1 contained in the bundle.

6. Fill out the CP Form 14 information in the Processing Record for DPC 2015.

7. All CP Form 14 must be placed on top of the questionnaires in a bundle.

8. Use the plastic sheet supplied in bundling the questionnaires.

9. Fill out CP Form 13 for transmittal to the SS 2015.

CP Form 2

1. Make sure that the CP Form 2 are still bundled by EA and are arranged by ascending order of BSN, HUSN, and HSN.

2. If the number of CP Form 2 for an EA exceeds 500, rebundle the questionnaires following these rules:

    a. Each bundle should contain at most 500 CP Form 2;

    b. If there are more than one bundle of CP Form 2 for an EA, the forms should be more or less equally distributed to each of the bundles; and

    c. Make sure that all CP Form 2 for an EA are placed in the same bundle.

3. Spread out the questionnaires with pages 2A and 2D upturned.

4. Cover the bundle with CP Form 14.

5. Fill out the required information in CP Form 14, such as the name and code of the province and city/municipality, bundle number, and number of CP Form 1 contained in the bundle.

6. Fill out the CP Form 14 information in the Processing Record for DPC 2015, if necessary.

7. All CP Form 14 must be placed on top of the questionnaires in a bundle.

8. Use the plastic sheet supplied in bundling the questionnaires.

9. Fill out CP Form 13 for transmittal to the SS 2015.

CP Form 4

1. Make sure that the CP Form 4 are still bundled by EA and are arranged by ascending order of BSN and ISN.

2. If the number of CP Form 4 for an EA exceeds 500, rebundle the questionnaires following these rules:

   a. Each bundle should contain at most 500 CP Form 4;

   b. If there are more than one bundle of CP Form 4 for an EA, the forms should be more or less equally distributed to each of the bundles; and

   c. Make sure that all CP Form 4 for an EA are placed in the same bundle.

3. Spread out the questionnaires with pages 4A and 4D upturned.

4. Cover the bundle with CP Form 14.

5. Fill out the required information in CP Form 14, such as the name and code of the province and city/municipality, bundle number, and number of CP Form 4 contained in the bundle.

6. Fill out the CP Form 14 information in the Processing Record for DPC 2015, if necessary.

7. All CP Form 14 must be placed on top of the questionnaires in a bundle.

8. Use the plastic sheet supplied in bundling the questionnaires.

9. Fill out CP Form 13 for transmittal to the SS 2015.

CP Form 5

1. Sort all CP Form 5 for a province. Arrange them by ascending order of the geographic code of the city/municipality and barangay.

2. Fill out CP Form 14 and write the required information in the CP Form 14, that is, the name and code of the province and city/municipality; type of form, and the number of CP Form 5 contained in the bundle.

3. Fill out the information in the Processing Record in CP Form 14 for the DPC 2015.

4. Put the accomplished CP Form 14 on top of the bundle.

5. Place inside the supplied plastic sheet the bundle of CP Form 5.

6. Fill out CP Form 13 for transmittal to the SS 2015.

Maps

1. Sort all accomplished barangay/EA/block maps for a particular city/municipality. Arrange them in ascending order of the geographic codes of the barangay, EA number, block number, and sheet number.

2. Cover each bundle with CP Form 14. Fill out the required information in the CP Form 14: name and code of the province, city/municipality, type of map, and number of maps contained in the bundle.

3. All CP Forms 14 must be placed on top of the questionnaires or maps in the bundle.

4. Place bundle inside the supplied plastic sheet.

5. Fill out CP Form 13 for transmittal to the SS 2015.

IMPORTANT NOTICE

Do not punch holes, staple, or use fasteners/shoelaces in bundling CP Forms 1, 2, 4, 5, and maps.

11.4   FOLIOING INSTRUCTIONS FOR OTHER CP CONTROL FORMS

Upon receipt of all the control, monitoring, and administrative forms such as CP Forms 10, 11A, 11B, 12, 13, 16, 19, 20, 21, 22 and 24 the RCC shall folio these forms in the following manner:

1. Sort all the control, monitoring, and administrative forms to be folioed for a particular province in ascending order of the geographic code of the city/municipality, barangay, EA number.

2. Use a fastener/shoelace to bind the forms.

3. Cover each folio with CP Form 15 (Folio Cover).

4. Set aside the folioed forms. They will be used as reference during verification.

Packaging and Transmittal of CP Forms and Maps and Progress Reporting

At the 2015 Census of Population (POPCEN) Data Processing Center (DPC 2015), all processed questionnaires and maps will undergo various preparatory steps before they are transmitted to the Scan Station (SS 2015) for scanning/interpretation. These preparatory activities follow a systematic order to ensure that all questionnaires and maps are properly accounted for.

This chapter discusses the procedures in packaging and transmitting the processed forms and maps from the DPC 2015 to the SS 2015. Also discussed in this chapter is the monitoring of the progress of data processing at the DPC 2015.

12.1 PACKAGING AND TRANSMITTAL OF PROCESSED QUESTIONNAIRES AND MAPS FROM THE DPC 2015 TO THE SS 2015

Once all the questionnaires and maps have undergone general screening, editing, they should be transmitted by the Receipt and Control Clerk (RCC) in the DPC 2015 to the SS 2015 for scanning and/or interpretation.

For the timely submission of questionnaires and maps to the SS 2015, the Provincial Census Project Staff (PCPS) should see to it that the timetable of activities is strictly followed. He/she should make the necessary measures to ensure the timely and orderly transmittal of the questionnaires and maps to the SS 2015.

The following are the procedures in transmitting the manually processed CP Form 1 (Listing Booklet), CP Form 2 (Household Questionnaire), CP Form 4 (Institutional Population Questionnaire), CP Form 5 (Barangay Schedule), and maps from the DPC 2015 to the SS 2015:

1. Transmit CP Form 1 to the SS 2015 after completing the processing of maps. The CP Form 1 should be bundled by city/municipality and transmitted to the SS 2015.

2. Transmit CP Forms 2, and 4 to the SS 2015 for scanning and interpretation. These questionnaires should be bundled by Enumeration Area (EA) and should be transmitted to the SS 2015 by city/municipality or in batches of batches of barangays in big city/municipalities.

3. Transmit the CP Form 5 bundled by province to the SS 2015 for scanning and interpretation.

4. Transmit the barangay/EA/block maps by city/municipality to the SS 2015 for scanning.

The RCC in the DPC 2015 should pack the questionnaires and/or maps to be transmitted to the SS 2015.   He/she should inform the Supervisor that the questionnaires and/or maps are ready for transmittal.

The PCPS Head or Supervisor should perform the following activities before the questionnaires are transmitted to the SS 2015:

1. Ensure that all manually processed questionnaires and maps for each city/municipality and/or province are all accounted for.

2. See to it that the questionnaires are bundled in the following manner:

   • CP Form 1 by city/municipality
   • CP Forms 2 and 4 by barangay/EA
   • CP Form 5 by province
   • Barangay/EA/block maps by city/municipality

3. Check if the forms are placed in the boxes in the following manner:

   • CP Forms 2 and 4 by group of barangays/EAs
   • CP Form 1 by city/municipality
   • CP Form 5 by province
   • Barangay/EA/block maps by city/municipality

4. Check if the boxes are labeled as:

   Box *1* of *n* boxes
   Box *2* of *n* boxes

   Box *n* of *n* boxes
   where *n* is the total number of boxes used in packaging the forms.
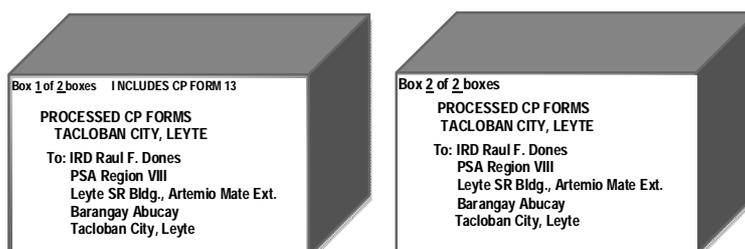
5. Ensure that the CP Form 13 is included in the first box. The box label should indicate that it contains the CP Form 13 (Transmittal/Receipt Form).

6. Inform, in advance, the Interim Regional Director or Regional Census Project Staff (RCPS) Head/Supervisor, if any, about the quantity and type of questionnaires and the date these questionnaires are to be transmitted.

12.2   PROGRESS REPORTING OF PROCESSING

a. Processor and Assistant Supervisor

Each processor shall be provided with CP Form 22 (Accomplishment Report of Manual Processors) wherein he/she will record his/her daily accomplishments.

In filling out the CP Form 22, the Processor must be guided by the following instructions:

1. A form must be provided to each Processor/Assistant Supervisor for each level of processing, that is, for general screening, editing, and encoding.

2. Write the name and code of the province and city/municipality. Indicate your designation by writing an "**X**" mark opposite the appropriate box, that is, Processor or Assistant Supervisor.

3. Write the date in Column 1 and write the name and code of barangay in Columns 2 and 3, and the EA number in Column 4.

4. Instruction for Column 5

5. Write the number of CP Form 1 in Column 6 processed for the date listed in Column 1, number of CP Form 2 in Column 8, number of CP Form 4 in Column 10, and number of CP Form 5 in Column 12.

6. In the Columns 7, 9, 11, 13 (Cumulative)**,** indicate the cumulative number of questionnaires processed since the start of processing a particular barangay/EA pack.

7. For barangay/EA pack that was processed in more than one day, encircle the cumulative total number of questionnaires by type for a particular barangay/EA pack after all CP Forms 1, 2, 4, and 5 have been edited or coded. For a barangay/EA that have been completely edited or coded within the same day, there is no need to encircle the cumulative total number of forms.

8. For Processors, if transcription of CP Form was made, write in the Remarks portion the number of questionnaires transcribed for a particular barangay/EA.

9. Do not forget to write your name and affix your signature at the bottom of the form, and submit CP Form 22 to your Supervisor after recording your accomplishment for the week.

ILLUSTRATION 12.1
FILLED OUT CP FORM 22
(ACCOMPLISHMENT REPORT OF MANUAL PROCESSORS)

CP Form 22   Sheet _____ of _____ Sheets

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 Census of Population
ACCOMPLISHMENT REPORT OF MANUAL PROCESSORS

Province _____

City/Municipality _____

☐ Processor   ☐ Assistant Supervisor

DATE	BARANGAY Name	Code	EA Number	Processing Activity (See codes below)	CP Form 1 Daily	CP Form 1 Cumulative	CP Form 2 Daily	CP Form 2 Cumulative	CP Form 4 Daily	CP Form 4 Cumulative	CP Form 5 Daily	CP Form 5 Cumulative	Maps Daily	Maps Cumulative	REMARKS
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)
10/9	Acle	001	000000	2	2	2	110	110	0	0					
10/12	Acle	001	000000	2	3	5	140	250	0	0					
10/13	Bayudbud	002	001000	2	4	4	190	190	0	0					
10/14	Bayudbud	002	001000	2	0	4	70	260	0	0					
10/14	Bayudbud	002	002000	2	3	3	145	145	1	1					
10/15	Bayudbud	002	002000	2	2	5	115	260	0	0					
10/15	Bolboc	003	001000	2	2	2	90	90	0	0					
10/16	Bolboc	003	001000	2	5	7	220	310	0	0					

TYPE AND NUMBER OF FORMS PROCESSED

Codes for Column 5
1 – General Screening
2 – Editing
3 – Encoding
4 – Others, specify

Prepared by: _____   _____
             Signature over Printed Name of Processor   Date

Verified by: _____   _____
             Signature over Printed Name of Supervisor   Date

b. Supervisor

The Supervisor will keep track of the daily accomplishment of each processor or Assistant Supervisor based on CP Form 22.

As Supervisor, he/she should inform the PSO about the progress of the provincial processing based on the reports generated using Transmittal, Receipt and Control System (TRACS). The RCC and Assistant Supervisor should assist the Supervisor in checking the status of the data processing operations based on the processed forms.

Using TRACS, the following reports should be generated to monitor the progress of manual processing:

a. *Generated CP Form 19 – Provincial Processing Receipt and Control Form* contains consistent entries with the CP Form 19 that was manually accomplished by the RCC.

b. *TRACS Report 1 – Status of Submission of Accomplished CP Questionnaires/Maps* contains the number of questionnaires/ maps submitted and the date/s of submission (start and end) by barangay/EA. This will be generated per type of questionnaire/map to check if all forms have been received at the DPC 2015.

c. *TRACS Report 2 – Accomplishment of Processors* contains the total number of questionnaires/maps processed per activity phase.

d. *TRACS Report 3 – Accomplishment of the Province by City/Municipality* contains the number and proportion of questionnaires/maps processed by type of questionnaire/map and activity by city/municipality.

e. *TRACS Report 4 – Status of Pending Packs* contains the number of pending questionnaires/maps per type of questionnaire/map and activity in each barangay/EA pack

f. *TRACS Report 5 – Progress of Provincial Processing* contains the number and percentage of barangays/EAs, with completely processed questionnaires by city/municipality.

Any problem that may cause delay in the processing operation should be reported to the PSO.

The updated TRACS data file should be transmitted to the SS 2015. The TRACS shall be installed in all the DPC 2015 to generate management reports to be made in monitoring the progress of data processing.

c. Provincial Statistics Officer

The PSO shall keep track of the progress of data processing in the DPC 2015 based on the information provided by the Supervisor. He/she shall attend to any problem that may be encountered during the course of data processing operations at the DPC 2015. This implies that, he/she shall take all the necessary steps to ensure that the data processing operations are accomplished on time based on the prescribed quality standards. Any delay in the operation should be reported to the RSSO and Central Office (CO). Submit status to the CO, through the RSSO.

Appendices

CP Form 1 – Listing Booklet

CP FORM 1

AUTHORITY:
Republic Act (RA) No. 10625 authorizes the Philippine Statistics Authority (PSA) to prepare and conduct periodic census on population.

CONFIDENTIALITY:
All information provided in this census shall be held STRICTLY CONFIDENTIAL in accordance with RA 10625.

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 CENSUS OF POPULATION
LISTING BOOKLET

Approval Number: PSA 1518-01
Expires on March 31, 2016

1A

CERTIFICATION

I hereby certify that the data set forth herein were personally obtained/reviewed by me and in accordance with the instructions given by PSA.

_____ ENUMERATOR   DATE SIGNED
SIGNATURE OVER PRINTED NAME

_____ TEAM SUPERVISOR   DATE SIGNED
SIGNATURE OVER PRINTED NAME

GEOGRAPHIC IDENTIFICATION

MONTH OF VISIT ☐☐   BOOKLET ☐☐ OF ☐☐ BOOKLETS

PROVINCE _____ ☐ BARANGAY _____ ☐☐☐

CITY/MUNICIPALITY _____ ☐ ENUMERATION AREA NUMBER _____ ☐☐☐☐☐

LISTING RECORD

LINE NO.	DAY OF VISIT	BUILDING SERIAL NUMBER (BSN)	HOUSING UNIT SERIAL NUMBER (HUSN)	HOUSE-HOLD SERIAL NUMBER (HSN)	INSTITU-TIONAL SERIAL NUMBER (ISN)	NAME OF HOUSEHOLD HEAD OR NAME/TYPE OF INSTITUTION / ADDRESS	POPULATION COUNT AS OF AUGUST 1, 2015			REMARKS
							TOTAL	MALE	FEMALE	
(1)		(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
1							○			
2							○			
3							○			
4							○			
5							○			
6							○			
7							○			
8							○			
9							○			
10							○			
TOTAL		A	B	C	D	TOTAL HOUSEHOLD POPULATION	G	H	I	
VACANT		E	F			TOTAL INSTITUTIONAL POPULATION	J	K	L	
						TOTAL POPULATION	M	N	O	

NAME OF HOUSEHOLD HEAD OR NAME/TYPE OF INSTITUTION: WRITE VHU IF VACANT HOUSING UNIT; VBLDG IF VACANT BUILDING.
ADDRESS: ENTER HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME.

MATCHED BY _____ _____
SIGNATURE OVER PRINTED NAME   DATE SIGNED

CP Form 1 – Listing Booklet

1B ┐					LISTING RECORD				
LINE NO.	DAY OF VISIT	BUILDING SERIAL NUMBER (BSN)	HOUSING UNIT SERIAL NUMBER (HUSN)	HOUSE-HOLD SERIAL NUMBER (HSN)	INSTITU-TIONAL SERIAL NUMBER (ISN)	NAME OF HOUSEHOLD HEAD OR NAME/TYPE OF INSTITUTION WRITE VHU IF VACANT HOUSING UNIT; VBLDG IF VACANT BUILDING. ADDRESS ENTER HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME.	POPULATION COUNT AS OF AUGUST 1, 2015 TOTAL	MALE	FEMALE	REMARKS ┌
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
11							○			
12							○			
13							○			
14							○			
15							○			┘
16							○			
17	└						○			
18							○			
19							○			
20							○			
21							○			
22							○			
23							○			
24							○			
25							○			
TOTAL		A	B	C	D	TOTAL HOUSEHOLD POPULATION	G	H	I
VACANT		E	F	┘		TOTAL INSTITUTIONAL POPULATION	J	K	L
						TOTAL POPULATION	M	N	O
MATCHED BY	SIGNATURE OVER PRINTED NAME	DATE SIGNED							┘

CP Form 1 – Listing Booklet

LINE NO.	DAY OF VISIT	BUILDING SERIAL NUMBER (BSN)	HOUSING UNIT SERIAL NUMBER (HUSN)	HOUSE-HOLD SERIAL NUMBER (HSN)	INSTITU-TIONAL SERIAL NUMBER (ISN)	NAME OF HOUSEHOLD HEAD OR NAME/TYPE OF INSTITUTION / ADDRESS	POPULATION COUNT AS OF AUGUST 1, 2015 TOTAL	MALE	FEMALE	REMARKS
(1)	(2)	(3)	(4)	(5)		(6)	(7)	(8)	(9)	(10)
26							◯			
27							◯			
28							◯			
29							◯			
30							◯			
31							◯			
32							◯			
33							◯			
34							◯			
35							◯			
36							◯			
37							◯			
38							◯			
39							◯			
40							◯			

LISTING RECORD — 1C

WRITE VHU IF VACANT HOUSING UNIT; VBLDG IF VACANT BUILDING.
ENTER HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME.

TOTAL	A	B	C	D	TOTAL HOUSEHOLD POPULATION	G	H	I
VACANT	E	F			TOTAL INSTITUTIONAL POPULATION	J	K	L
					TOTAL POPULATION	M	N	O

MATCHED BY _____ _____
SIGNATURE OVER PRINTED NAME   DATE SIGNED

CP Form 1 – Listing Booklet

1D   ⌐   **LISTING RECORD**

LINE NO.	DAY OF VISIT	BUILDING SERIAL NUMBER (BSN)	HOUSING UNIT SERIAL NUMBER (HUSN)	HOUSE-HOLD SERIAL NUMBER (HSN)	INSTITU-TIONAL SERIAL NUMBER (ISN)	NAME OF HOUSEHOLD HEAD OR NAME/TYPE OF INSTITUTION / ADDRESS	POPULATION COUNT AS OF AUGUST 1, 2015			REMARKS
							TOTAL	MALE	FEMALE	⌐
(1)	(2)	(3)	(4)	(5)		(6)	(7)	(8)	(9)	(10)
41							○			
42							○			
43							○			
44							○			
45							○			⌐
46							○			
47	⌐						○			
48							○			
49							○			
50							○			
51							○			
52							○			
53							○			
54							○			
55							○			
TOTAL		A	B	C	D	TOTAL HOUSEHOLD POPULATION	G	H	I	
VACANT		E	F			TOTAL INSTITUTIONAL POPULATION	J	K	L	
						TOTAL POPULATION	M	N	O	

MATCHED BY   SIGNATURE OVER PRINTED NAME   DATE SIGNED

CP Form 2 – Household Questionnaire

CP FORM 2	Republic of the Philippines	2A
AUTHORITY: Republic Act (RA) No. 10625 authorizes the Philippine Statistics Authority (PSA) to prepare and conduct periodic census on population. **CONFIDENTIALITY:** All information provided in this census shall be held STRICTLY CONFIDENTIAL in accordance with RA 10625.	**PHILIPPINE STATISTICS AUTHORITY** **2015 CENSUS OF POPULATION** **HOUSEHOLD QUESTIONNAIRE**	Approval Number: PSA-1518-02 Expires on March 31, 2016

CERTIFICATION	GEOGRAPHIC IDENTIFICATION
I hereby certify that the data set forth herein were personally obtained/reviewed by me and in accordance with the instructions given by the PSA.	BOOKLET ☐ OF ☐ BOOKLETS
_____ **ENUMERATOR** SIGNATURE OVER PRINTED NAME	PROVINCE _____ ☐☐
_____ DATE ACCOMPLISHED	CITY/MUNICIPALITY _____ ☐☐
_____ **TEAM SUPERVISOR** SIGNATURE OVER PRINTED NAME	BARANGAY _____ ☐☐☐
_____ DATE REVIEWED	ENUMERATION AREA NUMBER _____ ☐☐☐☐☐
_____ **CENSUS AREA SUPERVISOR** SIGNATURE OVER PRINTED NAME	BUILDING SERIAL NUMBER _____ ☐☐☐
_____ DATE REVIEWED	HOUSING UNIT SERIAL NUMBER _____ ☐☐☐
_____ **CO/RSSO/PO** SIGNATURE OVER PRINTED NAME	HOUSEHOLD SERIAL NUMBER _____ ☐☐☐
_____ DATE REVIEWED	LINE NUMBER OF THE RESPONDENT _____ ☐☐
	NAME OF THE HOUSEHOLD HEAD _____ LAST NAME	FIRST NAME
	ADDRESS _____ HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME

INTERVIEW RECORD

VISIT NUMBER	1	2	3	SUMMARY OF VISIT	
DATE MONTH:DAY	☐☐ ☐☐	☐☐ ☐☐	☐☐ ☐☐	NUMBER OF VISITS MADE	☐
TIME BEGAN HOUR:MINUTE	☐☐ ☐☐	☐☐ ☐☐	☐☐ ☐☐	RESULT OF FINAL VISIT*	☐
TIME ENDED HOUR:MINUTE	☐☐ ☐☐	☐☐ ☐☐	☐☐ ☐☐	NUMBER OF HOUSEHOLD MEMBERS	☐☐
RESULT OF VISIT*	☐	☐	☐	NUMBER OF MALES	☐☐
				NUMBER OF FEMALES	☐☐

*CODES FOR RESULT OF VISIT

1	COMPLETED	4	ENTIRE HOUSEHOLD IS ABSENT FOR EXTENDED PERIOD OF TIME	6	POSTPONED
2	REFUSED			7	OTHERS,
3	NO RESPONDENT AROUND	5	PARTLY COMPLETED		SPECIFY_____

MODE OF DATA COLLECTION** ☐

**CODES FOR MODE OF DATA COLLECTION

1 PERSONAL INTERVIEW
2 SELF-ADMINISTERED QUESTIONNAIRE

NEXT VISIT				
DATE MONTH:DAY	☐☐ ☐☐	☐☐ ☐☐	☐☐ ☐☐	
TIME HOUR:MINUTE	☐☐ ☐☐	☐☐ ☐☐	☐☐ ☐☐	

HOUSEHOLD DEFINITION	HOUSEHOLD MEMBERSHIP
A **household** is a social unit consisting of a person living alone or a group of persons who sleep in the same housing unit and have a common arrangement in the preparation and consumption of food.	LIST THE PERSONS OR HOUSEHOLD MEMBERS IN THIS ORDER: • Head • Spouse of the head • Never-married children of head/spouse from the oldest to the youngest • Ever-married children of head/spouse and their families from the oldest to the youngest • Other relatives of head • Nonrelatives of head

REMARKS

CP Form 2 – Household Questionnaire

CP Form 2 – Household Questionnaire

CP Form 2 – Household Questionnaire

2D	**HOUSING CENSUS QUESTIONS**	

ANSWER ITEMS B1 TO B3 BASED ON YOUR OBSERVATION. IF DOUBTFUL, ASK THE RESPONDENT.

B1 Type of Building
WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.

- 1 Single house
- 2 Duplex
- 3 Multi-unit residential (3 or more units)
- 4 Commercial/industrial/ agricultural (office, factory, and others)
- 5 Institutional living quarter (hotel, hospital, prison, and others)
- 6 Tent
- 7 Others, SPECIFY

B2 Construction Materials of the Roof of the Building
WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.

- 1 Galvanized iron/aluminum
- 2 Tile/concrete/clay tile
- 3 Half galvanized iron and half concrete
- 4 Bamboo/cogon/nipa/anahaw
- 5 Asbestos
- 6 Makeshift/salvaged/ improvised materials
- 7 Trapal
- 8 Others, SPECIFY

B3 Construction Materials of the Outer Walls of the Building/Housing Unit
WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.

- 01 Concrete/brick/stone
- 02 Wood
- 03 Half concrete/brick/ stone and half wood
- 04 Galvanized iron/aluminum
- 05 Bamboo/sawali cogon/nipa
- 06 Asbestos
- 07 Glass
- 08 Makeshift/ salvaged/ improvised materials
- 09 Trapal
- 10 Others, SPECIFY
- 11 No walls

Now, I would like to ask you some questions regarding lighting and source of water supply, as well as tenure status of your housing unit/lot.

H1 Fuel for Lighting
What type of fuel does your household use for lighting?
WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.

- 1 Electricity
- 2 Kerosene (gaas)
- 3 Liquefied petroleum gas (LPG)
- 4 Oil (vegetable, animal, and others)
- 5 Solar panel
- 6 Solar lamp
- 7 Others, SPECIFY
- 0 None

H2 Source of Water Supply for Drinking
What is your household's main source of water supply for drinking?
WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.

- 01 Own use faucet, community water system
- 02 Shared faucet, community water system
- 03 Own use, tubed/piped deep well
- 04 Shared tubed/piped deep well
- 05 Tubed/piped shallow well
- 06 Dug well
- 07 Protected spring
- 08 Unprotected spring
- 09 Lake, river, rain, and lake
- 10 Peddler
- 11 Bottled water
- 12 Others, SPECIFY

H3 Source of Water Supply for Cooking
What is your household's main source of water supply for cooking?
WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.

- 01 Own use faucet, community water system
- 02 Shared faucet, community water system
- 03 Own use, tubed/piped deep well
- 04 Shared tubed/piped deep well
- 05 Tubed/piped shallow well
- 06 Dug well
- 07 Protected spring
- 08 Unprotected spring
- 09 Lake, river, rain, and lake
- 10 Peddler
- 11 Bottled water
- 12 Others, SPECIFY

H4 Tenure Status of the Housing Unit/Lot
What is the tenure status of the housing unit and lot occupied by your household?
WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.

- 1 Own or owner-like possession of house and lot
- 2 Rent house/room, including lot
- 3 Own house, rent lot
- 4 Own house, rent-free lot with consent of owner
- 5 Own house, rent-free lot without consent of owner
- 6 Rent-free house and lot with consent of owner
- 7 Rent-free house and lot without consent of owner

REGISTRATION OF DEATHS IN THE LAST TWO YEARS AMONG HOUSEHOLD MEMBERS

Now, I would like to ask you some questions about deaths in your family in the past two years and whether these deaths had been registered at the Local Civil Registry Office (LCRO). I understand that it is not easy to talk about deaths in the family but it is important that you tell us about them, so that the government can develop programs and policies that will help facilitate claims for death benefits, life insurance, inheritance, and programs to promote complete registration of deaths at the LCRO.

D1 Was there any former member of this household who died in the past two years, from July 2013 to July 2015?
WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.

- 1 Yes
- 2 No, END INTERVIEW.

D2 How many former members of this household have died in the past two years, from July 2013 to July 2015?
WRITE IN THE BOX THE CORRESPONDING NUMBER AND FILL OUT THE MATRIX BELOW.

IF 5 OR MORE DEATHS, USE ADDITIONAL BOOKLET.

L I N E N U M B E R	Name D3	Sex D4	Age at Death D5		Death Registration D6	D7
	LIST THE NAMES OF FORMER HOUSEHOLD MEMBERS WHO DIED ANYTIME FROM JULY 2013 TO JULY 2015.	Is ___ male or female? 1 Male 2 Female	How old was ___ when he/she died? ENTER AGE AT DEATH IN: • DAYS IF AGE AT DEATH IS LESS THAN 1 MONTH; • MONTHS IF AGE AT DEATH IS 1 MONTH BUT LESS THAN 2 YEARS; OR • YEARS IF AGE AT DEATH IS 2 YEARS OR OLDER. FOR AGE 98 YEARS OR OLDER, WRITE "98". WRITE X IN THE BOX CORRESPONDING TO THE REPORTED AGE AT DEATH IN DAYS, MONTHS OR YEARS.		Was the death of ___ registered with the Local Civil Registry Office? 1 Yes 2 No 3 Don't know WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.	Have you or any member of this household ever obtained a copy of his/her death certificate? 1 Yes 2 No 3 Don't know WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.
1	LAST NAME ___ FIRST NAME ___	1 2	1 DAYS 2 MONTHS	3 YEARS 4 DON'T KNOW	1 2 3	1 2 3
2	LAST NAME ___ FIRST NAME ___	1 2	1 DAYS 2 MONTHS	3 YEARS 4 DON'T KNOW	1 2 3	1 2 3
3	LAST NAME ___ FIRST NAME ___	1 2	1 DAYS 2 MONTHS	3 YEARS 4 DON'T KNOW	1 2 3	1 2 3
4	LAST NAME ___ FIRST NAME ___	1 2	1 DAYS 2 MONTHS	3 YEARS 4 DON'T KNOW	1 2 3	1 2 3

CP Form 4 – Institutional Population Questionnaire

CP FORM 4

AUTHORITY:
Republic Act (RA) No. 10625 authorizes the Philippine Statistics Authority (PSA) to prepare and conduct periodic census on population.

CONFIDENTIALITY:
All information provided in this census shall be held STRICTLY CONFIDENTIAL in accordance with RA 10625.

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 CENSUS OF POPULATION
INSTITUTIONAL POPULATION
QUESTIONNAIRE

Approval Number: PSA-1518-03
Expires on March 31, 2016

4A

CERTIFICATION

I hereby certify that the data set forth herein were personally obtained/reviewed by me and in accordance with the instructions given by PSA.

_____
ENUMERATOR
SIGNATURE OVER PRINTED NAME

_____
DATE ACCOMPLISHED

_____
TEAM SUPERVISOR
SIGNATURE OVER PRINTED NAME

_____
DATE REVIEWED

_____
CENSUS AREA SUPERVISOR
SIGNATURE OVER PRINTED NAME

_____
DATE REVIEWED

_____
CO/RSSO/PO SUPERVISOR
SIGNATURE OVER PRINTED NAME

_____
DATE REVIEWED

GEOGRAPHIC IDENTIFICATION

BOOKLET [ ] OF [ ] BOOKLETS

PROVINCE _____

CITY/MUNICIPALITY _____

BARANGAY _____

ENUMERATION AREA NUMBER _____

BUILDING SERIAL NUMBER _____

INSTITUTIONAL SERIAL NUMBER _____

TYPE OF INSTITUTIONAL LIVING QUARTER (SEE CODES BELOW) _____

NAME OF INSTITUTIONAL LIVING QUARTER _____

NAME OF THE RESPONDENT _____
LAST NAME   FIRST NAME

DESIGNATION OF RESPONDENT _____

ADDRESS _____
HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME

INTERVIEW RECORD

VISIT NUMBER	1	2	3	SUMMARY OF VISIT	
DATE MONTH:DAY				NUMBER OF VISITS MADE	[ ]
TIME BEGAN HOUR:MINUTE				RESULT OF FINAL VISIT*	[ ]
TIME ENDED HOUR:MINUTE				TOTAL MEMBERS IN THE INSTITUTION	[ ][ ][ ][ ]
RESULT OF VISIT*	[ ]	[ ]	[ ]	NUMBER OF MALES	[ ][ ][ ][ ]

*CODES FOR RESULT OF VISIT

| NUMBER OF FEMALES | [ ][ ][ ][ ] |

1 COMPLETED
2 REFUSED
3 NO RESPONDENT AROUND
4 ALL MEMBERS ARE ABSENT FOR EXTENDED PERIOD OF TIME
5 PARTLY COMPLETED
6 POSTPONED
7 OTHERS, SPECIFY _____

MODE OF DATA COLLECTION** [ ]

**CODES FOR MODE OF DATA COLLECTION

NEXT VISIT				1 PERSONAL INTERVIEW
DATE MONTH:DAY				2 SELF-ADMINISTRATIVE QUESTIONNAIRE
TIME HOUR:MINUTE				

CODES FOR TYPE OF INSTITUTIONAL LIVING QUARTER

01	Hotel, motel, lodging house, dormitory, and others	21	Military camp and station
02	Hospital and nurses' home	22	Logging, mining, and construction/public works camp
03	Welfare institution	23	Oceangoing and interisland/coastal vessel
04	Corrective and penal institution	24	Refugee camp
05	Convent, nunnery, seminary, and boarding school	25	Others, SPECIFY _____

CP Form 4 – Institutional Population Questionnaire

4B				**POPULATION CENSUS QUESTIONS**				⌐

				FOR ALL PERSONS				FOR ALL PERSONS 5 YEARS AND OVER
	Name	Residence Status	Sex	Age	Birth Registration		Marital Status	Religious Affiliation	Highest Grade/ Year Completed
	P1	P2	P3	P5	P6	P7	P8	P9	P12

Column descriptions:

- **P1** — Who are the persons residing in this institutional living quarter (ILQ) as of August 1, 2015? LIST THE NAME OF ALL MEMBERS OF THE INSTITUTIONAL LIVING QUARTER FOLLOWING THE ORDER SPECIFIED IN THE CODES FOR THE RESIDENCE STATUS AT THE BOTTOM.
- **P2** — What is ____'s position or residence status in this ILQ? • WRITE THE ANSWER ON THE LINE PROVIDED. • WRITE THE CODE CORRESPONDING TO THE ANSWER. REFER TO CODES AT THE BOTTOM.
- **P3** — Is ____ male or female? 1 Male　2 Female • WRITE THE ANSWER ON THE LINE PROVIDED. • WRITE THE CODE CORRESPONDING TO THE ANSWER. REFER TO CODES AT THE BOTTOM.
- **P5** — What is ____'s age as of his/her last birthday? • WRITE IN THE BOXES THE AGE IN COMPLETED YEARS. • IF LESS THAN ONE YEAR OLD, WRITE "000".
- **P6** — Was the birth of ____ registered with the Local Civil Registry Office? 1 Yes　2 No　3 Don't know. WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.
- **P7** — Has ____ ever had a copy of his/her birth certificate? 1 Yes　2 No　3 Don't know. WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.
- **P8** — Is ____ single, married, widowed, divorced/separated, or in a common-law/live-in arrangement? 1 Single 2 Married 3 Widowed 4 Divorced/separated 5 Common-law/Live-in 6 Unknown • WRITE X IN THE BOX CORRESPONDING TO THE ANSWER. • FOR PERSONS 0 TO 9 YEARS OLD, WRITE X IN THE BOX FOR SINGLE.
- **P9** — What is ____'s religious affiliation? • WRITE THE ANSWER ON THE LINE PROVIDED. • LEAVE THE BOXES BLANK FOR CODING DURING PROCESSING.
- **P12** — What is the highest grade/year completed by ____? • WRITE THE ANSWER ON THE LINE PROVIDED AND THE CODE CORRESPONDING TO THE ANSWER. • REFER TO CODES AT THE BOTTOM. • IF GRADUATE IN POST SECONDARY OR COLLEGE, SPECIFY THE COURSE AND LEAVE THE BOXES BLANK FOR CODING DURING PROCESSING.

Line rows (1–8), each containing:

Line	Name	Residence Status	Sex	Age	Birth Registration (P6)	Birth Cert (P7)	Marital Status (P8)	Religious Affiliation	Highest Grade/Year
1	LAST NAME / FIRST NAME	SPECIFY	☐1 ☐2	☐☐☐	☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
2	LAST NAME / FIRST NAME	SPECIFY	☐1 ☐2	☐☐☐	☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
3	LAST NAME / FIRST NAME	SPECIFY	☐1 ☐2	☐☐☐	☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
4	LAST NAME / FIRST NAME	SPECIFY	☐1 ☐2	☐☐☐	☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
5	LAST NAME / FIRST NAME	SPECIFY	☐1 ☐2	☐☐☐	☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
6	LAST NAME / FIRST NAME	SPECIFY	☐1 ☐2	☐☐☐	☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
7	LAST NAME / FIRST NAME	SPECIFY	☐1 ☐2	☐☐☐	☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
8	LAST NAME / FIRST NAME	SPECIFY	☐1 ☐2	☐☐☐	☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY

CODES FOR ITEM P2 – RESIDENCE STATUS

- 01 Manager, director, person-in-charge
- 02 Staff member/employee, including physician and nurse
- 03 Officer/enlisted man, trainee
- 04 Officer/crew member in a merchant vessel
- 21 Priest, seminarian, nun, postulant
- 22 Lodger or boarder
- 23 Patient in hospital, sanitarium, and others
- 24 Ward in home for the aged, orphanage, welfare institution, and others
- 31 Prisoner/detainee
- 32 Others

CODES FOR ITEM P12 – HIGHEST GRADE/YEAR COMPLETED

- 000 No grade completed
- 010 Preschool

Elementary
- 110 Grade 1
- 120 Grade 2
- 130 Grade 3
- 140 Grade 4
- 150 Grade 5
- 160 Grade 6
- 170 Grade 6 graduate
- 180 Grade 7 graduate
- 191 SPED, undergraduate
- 192 SPED, graduate

High school
- 210 1st Year
- 220 2nd Year
- 230 3rd Year
- 240 4th Year
- 250 High school graduate

Post Secondary
- 310 1st Year
- 320 2nd Year
- IF GRADUATE, SPECIFY COURSE.

K to 12 Program
- 410 Grade 1
- 420 Grade 2
- 430 Grade 3
- 440 Grade 4
- 450 Grade 5
- 460 Grade 6
- 470 Grade 7
- 480 Grade 8
- 490 Grade 9
- 500 Grade 10
- 510 Grade 11
- 520 Grade 12

College
- 710 1st Year
- 720 2nd Year
- 730 3rd Year
- 740 4th Year
- 750 5th Year
- 760 6th Year
- IF GRADUATE, SPECIFY COURSE.

Post baccalaureate
- 910 Master's degree undergraduate
- 920 Master's degree graduate
- 930 Doctorate degree undergraduate
- 940 Doctorate degree graduate

CP Form 4 – Institutional Population Questionnaire

POPULATION CENSUS QUESTIONS								**4C**

	FOR ALL PERSONS							FOR ALL PERSONS 5 YEARS AND OVER
	Name	Residence Status	Sex	Age	Birth Registration		Marital Status	Religious Affiliation	Highest Grade/ Year Completed

L I N E N U M B E R	**P1** Who are the persons residing in this institutional living quarter (ILQ) as of August 1, 2015? LIST THE NAME OF ALL MEMBERS OF THE INSTITUTIONAL LIVING QUARTER FOLLOWING THE ORDER SPECIFIED IN THE CODES FOR THE RESIDENCE STATUS AT THE BOTTOM.	**P2** What is ____'s position or residence status in this ILQ? • WRITE THE ANSWER ON THE LINE PROVIDED. • WRITE THE CODE CORRESPONDING TO THE ANSWER. REFER TO CODES AT THE BOTTOM PAGE 4B.	**P3** Is ____ male or female? 1 Male 2 Female	**P5** What is ____'s age as of his/her last birthday? • WRITE IN THE BOXES THE AGE IN COMPLETED YEARS. • IF LESS THAN ONE YEAR OLD, WRITE "000".	**P6** Was the birth of ____ registered with the Local Civil Registry Office? 1 Yes 2 No 3 Don't know WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.	**P7** Has ____ ever had a copy of his/her birth certificate? 1 Yes 2 No 3 Don't know WRITE X IN THE BOX CORRES-PONDING TO THE ANSWER.	**P8** Is ____ single, married, widowed, divorced/separated, or in a common-law/live-in arrangement? 1 Single 2 Married 3 Widowed 4 Divorced/separated 5 Common-law/Live-in 6 Unknown • WRITE X IN THE BOX CORRESPONDING TO THE ANSWER. • FOR PERSONS 0 TO 9 YEARS OLD, WRITE X IN THE BOX FOR SINGLE.	**P9** What is ____'s religious affiliation? • WRITE THE ANSWER ON THE LINE PROVIDED. • LEAVE THE BOXES BLANK FOR CODING DURING PROCESSING.	**P12** What is the highest grade/year completed by ____? • WRITE THE ANSWER ON THE LINE PROVIDED AND THE CODE CORRESPONDING TO THE ANSWER. • REFER TO CODES AT THE BOTTOM. • IF GRADUATE IN POST SECONDARY OR COLLEGE, SPECIFY THE COURSE AND LEAVE THE BOXES BLANK FOR CODING DURING PROCESSING.
9	LAST NAME ___ SPECIFY ___ FIRST NAME	SPECIFY	☐1 ☐2		☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
10	LAST NAME ___ FIRST NAME	SPECIFY	☐1 ☐2		☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
11	LAST NAME ___ FIRST NAME	SPECIFY	☐1 ☐2		☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
12	LAST NAME ___ FIRST NAME	SPECIFY	☐1 ☐2		☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
13	LAST NAME ___ FIRST NAME	SPECIFY	☐1 ☐2		☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
14	LAST NAME ___ FIRST NAME	SPECIFY	☐1 ☐2		☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
15	LAST NAME ___ FIRST NAME	SPECIFY	☐1 ☐2		☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY
16	LAST NAME ___ FIRST NAME	SPECIFY	☐1 ☐2		☐1 ☐2 ☐3	☐1 ☐2 ☐3	☐1 ☐2 ☐3 ☐4 ☐5 ☐6	SPECIFY	SPECIFY

REMARKS

CODES FOR ITEM P12 – HIGHEST GRADE/YEAR COMPLETED

Elementary	High school	K to 12 Program	College	Post baccalaureate
000 No grade completed	210 1st Year	410 Grade 1	710 1st Year	910 Master's degree undergraduate
010 Preschool	220 2nd Year	420 Grade 2	720 2nd Year	920 Master's degree graduate
110 Grade 1	230 3rd Year	430 Grade 3	730 3rd Year	
120 Grade 2	240 4th Year	440 Grade 4	740 4th Year	
130 Grade 3	250 High school graduate	450 Grade 5	750 5th Year	930 Doctorate degree undergraduate
140 Grade 4		460 Grade 6	760 6th Year	
150 Grade 5		470 Grade 7	IF GRADUATE, SPECIFY COURSE.	940 Doctorate degree graduate
160 Grade 6	**Post Secondary**	480 Grade 8		
170 Grade 6 graduate	310 1st Year	490 Grade 9		
180 Grade 7 graduate	320 2nd Year	500 Grade 10		
191 SPED, undergraduate	IF GRADUATE, SPECIFY COURSE.	510 Grade 11		
192 SPED, graduate		520 Grade 12		

CP Form 4 – Institutional Population Questionnaire

4D					POPULATION CENSUS QUESTIONS					⌐
				FOR ALL PERSONS						FOR ALL PERSONS 5 YEARS AND OVER
L I N E N U M B E R	Name	Residence Status	Sex	Age	Birth Registration		Marital Status		Religious Affiliation	Highest Grade/ Year Completed
	P1	P2	P3	P5	P6	P7	P8		P9	P12
	Who are the persons residing in this institutional living quarter (ILQ) as of August 1, 2015? LIST THE NAME OF ALL MEMBERS OF THE INSTITUTIONAL LIVING QUARTER FOLLOWING THE ORDER SPECIFIED IN THE CODES FOR THE RESIDENCE STATUS AT THE BOTTOM. ⌐	What is ____'s position or residence status in this ILQ? • WRITE THE ANSWER ON THE LINE PROVIDED. • WRITE THE CODE CORRESPONDING TO THE ANSWER. REFER TO CODES AT THE BOTTOM PAGE 4B.	Is ____ male or female? 1 Male 2 Female	What is ____'s age as of his/her last birthday? • WRITE IN THE BOXES THE AGE IN COMPLETED YEARS. • IF LESS THAN ONE YEAR OLD, WRITE "000".	Was the birth of ____ registered with the Local Civil Registry Office? 1 Yes 2 No 3 Don't know WRITE X IN THE BOX CORRESPONDING TO THE ANSWER.	Has ____ ever had a copy of his/her birth certificate? 1 Yes 2 No 3 Don't know WRITE X IN THE BOX CORRES- PONDING TO THE ANSWER.	Is ____ single, married, widowed, divorced/separated, or in a common-law/live-in arrangement? 1 Single 2 Married 3 Widowed 4 Divorced/separated 5 Common-law/Live-in 6 Unknown • WRITE X IN THE BOX CORRESPONDING TO THE ANSWER. • FOR PERSONS 0 TO 9 YEARS OLD, WRITE X IN THE BOX FOR SINGLE.		What is ____'s religious affiliation? • WRITE THE ANSWER ON THE LINE PROVIDED. • LEAVE THE BOXES BLANK FOR CODING DURING PROCESSING. ⌐	What is the highest grade/year completed by ____? • WRITE THE ANSWER ON THE LINE PROVIDED AND THE CODE CORRESPONDING TO THE ANSWER. • REFER TO CODES AT THE BOTTOM. • IF GRADUATE IN POST SECONDARY OR COLLEGE, SPECIFY THE COURSE AND LEAVE THE BOXES BLANK FOR CODING DURING PROCESSING.
17	LAST NAME / FIRST NAME	SPECIFY	☐ 1 ☐ 2	☐☐☐	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 4 ☐ 5 ☐ 6	SPECIFY	SPECIFY
18	LAST NAME / FIRST NAME	SPECIFY	☐ 1 ☐ 2	☐☐☐	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 4 ☐ 5 ☐ 6	SPECIFY	SPECIFY
19	LAST NAME / FIRST NAME	SPECIFY	☐ 1 ☐ 2	☐☐☐	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 4 ☐ 5 ☐ 6	SPECIFY	SPECIFY
20	LAST NAME / FIRST NAME	SPECIFY	☐ 1 ☐ 2	☐☐☐	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 4 ☐ 5 ☐ 6	SPECIFY	SPECIFY
21	LAST NAME / FIRST NAME	SPECIFY	☐ 1 ☐ 2	☐☐☐	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 4 ☐ 5 ☐ 6	SPECIFY	SPECIFY
22	LAST NAME / FIRST NAME	SPECIFY	☐ 1 ☐ 2	☐☐☐	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 4 ☐ 5 ☐ 6	SPECIFY	SPECIFY
23	LAST NAME / FIRST NAME	SPECIFY	☐ 1 ☐ 2	☐☐☐	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 4 ☐ 5 ☐ 6	SPECIFY	SPECIFY
24	LAST NAME / FIRST NAME	SPECIFY	☐ 1 ☐ 2	☐☐☐	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 4 ☐ 5 ☐ 6	SPECIFY	SPECIFY

USE OF ADDITIONAL BOOKLET

Are there more than 24 members in this institutional living quarter?

WRITE X IN THE BOX FOR YES. OTHERWISE, WRITE X IN THE BOX FOR NO.

☐ 1 Yes, USE ADDITIONAL BOOKLET.

☐ 2 No

CODES FOR ITEM P12 – HIGHEST GRADE/YEAR COMPLETED

Elementary	High school	K to 12 Program	College	Post baccalaureate
000 No grade completed	210 1st Year	410 Grade 1	710 1st Year	910 Master's degree undergraduate
010 Preschool	220 2nd Year	420 Grade 2	720 2nd Year	
110 Grade 1	230 3rd Year	430 Grade 3	730 3rd Year	920 Master's degree graduate
120 Grade 2	240 4th Year	440 Grade 4	740 4th Year	
130 Grade 3	250 High school graduate	450 Grade 5	760 5th Year	930 Doctorate degree undergraduate
140 Grade 4		460 Grade 6	780 6th Year	
150 Grade 5	**Post Secondary**	470 Grade 7	IF GRADUATE, SPECIFY COURSE.	940 Doctorate degree graduate
160 Grade 6	310 1st Year	480 Grade 8		
170 Grade 6 graduate	320 2nd Year	490 Grade 9		
180 Grade 7 graduate	IF GRADUATE, SPECIFY COURSE.	500 Grade 10		
191 SPED, undergraduate		510 Grade 11		
192 SPED, graduate		520 Grade 12		

CP Form 5 – Barangay Schedule

CP FORM 5	*Republic of the Philippines* **PHILIPPINE STATISTICS AUTHORITY** **2015 CENSUS OF POPULATION BARANGAY SCHEDULE**	**5A**
AUTHORITY: Republic Act (RA) No. 10625 authorizes the Philippine Statistics Authority (PSA) to prepare and conduct periodic census on population. **CONFIDENTIALITY:** All information provided in this census shall be held STRICTLY CONFIDENTIAL in accordance with RA 10625.	(TO BE ACCOMPLISHED BY THE TEAM SUPERVISOR)	Approval Number PSA 1518-04 Expires on March 31, 2016

CERTIFICATION	**GEOGRAPHIC IDENTIFICATION**
I hereby certify that the data set forth herein were personally obtained/reviewed by me and in accordance with the instructions given by the PSA.	PROVINCE _____ ☐☐ CITY/MUNICIPALITY _____ ☐☐ BARANGAY _____ ☐☐☐
_____ **TEAM SUPERVISOR** SIGNATURE OVER PRINTED NAME	
_____ DATE ACCOMPLISHED	**INTERVIEW RECORD**
_____ **CENSUS AREA SUPERVISOR** SIGNATURE OVER PRINTED NAME	NAME OF THE RESPONDENT (LAST NAME, FIRST NAME) _____ _____
_____ DATE REVIEWED	DESIGNATION/POSITION IN THE BARANGAY _____
_____ **CO/RSSO/PO SUPERVISOR** SIGNATURE OVER PRINTED NAME _____ DATE REVIEWED	ADDRESS OF THE BARANGAY HALL _____ NUMBER AND STREET OR SITIO NAME
	DATE OF VISIT MONTH : DAY ☐☐ ☐☐ TIME BEGAN HOUR : MINUTE ☐☐ ☐☐ TIME ENDED HOUR : MINUTE ☐☐ ☐☐

Part I – Barangay Facilities/Characteristics

INSTRUCTION: WRITE **X** IN THE BOX CORRESPONDING TO THE ANSWER.

Q1 *Is your barangay, a ...*

a. former poblacion or central district of the city/municipality? ☐ 1 Yes ☐ 2 No

b. poblacion/central district or part of the poblacion/central district? ☐ 1 Yes ☐ 2 No

Q2 *Does your barangay have a street pattern, that is, a network of streets of at least three streets or roads?* ☐ 1 Yes ☐ 2 No

Q3 *Is this barangay accessible to the national highway?* ☐ 1 Yes ☐ 2 No, GO TO Q4a

IF YES, what is the distance in kilometers between the nearest point of this barangay and the national highway using the access road? ☐ 1 2 kms. or less ☐ 2 more than 2 kms.

Q4 *In the barangay, is there a ...*

a. town/city hall or provincial capitol? ☐ 1 Yes, GO TO Q4b ☐ 2 No

IF NO, what is the distance of the nearest town/city hall or provincial capitol from the barangay hall? ☐ 1 2 kms. or less ☐ 2 more than 2 kms.

b. church, chapel or mosque where religious service is held at least once a month? ☐ 1 Yes, GO TO Q4c ☐ 2 No

IF NO, what is the distance of the nearest church, chapel or mosque (where religious service is held at least once a month) from the barangay hall? ☐ 1 2 kms. or less ☐ 2 more than 2 kms.

c. public plaza or park for recreation? ☐ 1 Yes, GO TO Q4d ☐ 2 No

IF NO, what is the distance of the nearest public plaza or park from the barangay hall? ☐ 1 2 kms. or less ☐ 2 more than 2 kms.

d. cemetery? ☐ 1 Yes, GO TO Q4e ☐ 2 No

IF NO, what is the distance of the nearest cemetery from the barangay hall? ☐ 1 2 kms. or less ☐ 2 more than 2 kms.

e. market place or building where trading activities are carried out at least once a week? ☐ 1 Yes, GO TO Q4f ☐ 2 No

IF NO, what is the distance of the nearest market place or building (where trading activities are carried out at least once a week) from the barangay hall? ☐ 1 2 kms. or less ☐ 2 more than 2 kms.

CP Form 5 – Barangay Schedule

5B	Part I – Barangay Facilities/Characteristics

INSTRUCTION: WRITE **X** IN THE BOX CORRESPONDING TO THE ANSWER.

Q4 *In the barangay, is there a/an ...*

f. *elementary school?*
☐ 1 Yes, GO TO Q4g   ☐ 2 No

IF NO, *what is the distance of the nearest elementary school from the barangay hall?*
☐ 1 2 kms. or less   ☐ 2 more than 2 kms.

g. *high school?*
☐ 1 Yes, GO TO Q4h   ☐ 2 No

IF NO, *what is the distance of the nearest high school from the barangay hall?*
☐ 1 2 kms. or less   ☐ 2 more than 2 kms.

h. *college/university?*
☐ 1 Yes, GO TO Q4i   ☐ 2 No

IF NO, *what is the distance of the nearest college/university from the barangay hall?*
☐ 1 2 kms. or less   ☐ 2 more than 2 kms.

i. *library?*
☐ 1 Yes, GO TO Q4j   ☐ 2 No

IF NO, *what is the distance of the nearest library from the barangay hall?*
☐ 1 2 kms. or less   ☐ 2 more than 2 kms.

j. *hospital?*
☐ 1 Yes, GO TO Q4k   ☐ 2 No

IF NO, *what is the distance of the nearest hospital from the barangay hall?*
☐ 1 2 kms. or less   ☐ 2 more than 2 kms.

k. *puericulture center, barangay health center/station or clinic?*
☐ 1 Yes, GO TO Q4l   ☐ 2 No

IF NO, *what is the distance of the nearest puericulture center, barangay health center/station or clinic from the barangay hall?*
☐ 1 2 kms. or less   ☐ 2 more than 2 kms.

l. *fire station or public fire protection service?*
☐ 1 Yes, GO TO Q4m   ☐ 2 No

IF NO, *what is the distance of the nearest fire station or public fire protection service from the barangay hall?*
☐ 1 2 kms. or less   ☐ 2 more than 2 kms.

m. *seaport in operation?*
☐ 1 Yes, GO TO Q4n   ☐ 2 No

IF NO, *what is the distance of the nearest seaport in operation from the barangay hall?*
☐ 1 2 kms. or less   ☐ 2 more than 2 kms.

n. *community waterworks system?*
☐ 1 Yes, GO TO Q4o   ☐ 2 No

IF NO, *what is the distance of the nearest place with community waterworks system from the barangay hall?*
☐ 1 2 kms. or less   ☐ 2 more than 2 kms.

o. *post office or postal service?*
☐ 1 Yes, GO TO Q4p   ☐ 2 No

IF NO, *what is the distance of the nearest post office or postal service from the barangay hall?*
☐ 1 2 kms. or less   ☐ 2 more than 2 kms.

p. *landline telephone system or calling station?*
☐ 1 Yes, GO TO Q4q   ☐ 2 No

IF NO, *what is the distance of the nearest landline telephone system or calling station from the barangay hall?*
☐ 1 2 kms. or less   ☐ 2 more than 2 kms

q. *cellular phone signal?*
☐ 1 Yes   ☐ 2 No

r. *public street sweeper?*
☐ 1 Yes   ☐ 2 No

Part II – Kinds of Establishments in the Barangay

INSTRUCTION: WRITE **X** IN THE BOX CORRESPONDING TO THE ANSWER.

In the barangay, is there a/an ...

Q5 <u>*commercial establishment*</u> *such as a wholesale and retail store, department store, supermarket, hypermarket, grocery, convenience store, bazaar, ukay-ukay, meat shop, hardware store, drugstore, bookstore, gasoline station, LPG dealer, motor vehicles and auto supplies dealer, animal feeds dealer, pet shop or sari-sari store with at least one paid employee?*

☐ 1 Yes, GO TO Q5a   ☐ 2 No, GO TO Q6

Q5a. *Does this barangay have commercial establishments with 100 employees or more?*
☐ 1 Yes   ☐ 2 No

Q5b. *Does this barangay have commercial establishments with 10 to 99 employees?*
☐ 1 Yes   ☐ 2 No, GO TO Q6

Q5c. *How many such establishments with 10 to 99 employees are there in this barangay?*
ENTER THE NUMBER IN THE BOX.
☐☐☐

CP Form 5 – Barangay Schedule

Part II – Kinds of Establishments in the Barangay	5C

INSTRUCTION: WRITE **X** IN THE BOX CORRESPONDING TO THE ANSWER.

In the barangay, is there a/an …

Q6 *recreational establishment such as a gym, fitness center, badminton court, billiard hall, bowling lane, golf course, racetrack, lottery or betting station, cockpit arena, beach resort, swimming resort, recreational camp, and other establishments for recreational activities?*

☐ 1 Yes, GO TO Q6a   ☐ 2 No, GO TO Q7

Q6a. *Does this barangay have recreational establishments with 100 employees or more?* ☐ 1 Yes ☐ 2 No

Q6b. *Does this barangay have recreational establishments with 10 to 99 employees?* ☐ 1 Yes ☐ 2 No, GO TO Q7

Q6c. *How many such establishments with 10 to 99 employees are there in this barangay?*
ENTER THE NUMBER IN THE BOX.
☐☐☐

Q7 *manufacturing establishment such as a slaughter house, fish dryer, ice cream maker, grains miller, sugar refinery/miller, bakery, ice plant, wine maker, water refilling station, garments factory, tailor or dress shop, shoe factory, handicrafts maker, furniture maker, firecracker factory, cement plant, boat shop, and others?*

☐ 1 Yes, GO TO Q7a   ☐ 2 No, GO TO Q8

Q7a. *Does this barangay have manufacturing establishments with 100 employees or more?* ☐ 1 Yes ☐ 2 No

Q7b. *Does this barangay have manufacturing establishments with 10 to 99 employees?* ☐ 1 Yes ☐ 2 No, GO TO Q8

Q7c. *How many such establishments with 10 to 99 employees are there in this barangay?*
ENTER THE NUMBER IN THE BOX.
☐☐☐

Q8 *accommodation and food service establishment such as a hotel, motel, suite/apartment hotel, condotel, inn, guest house, hostel, pension house, dormitory, boarding house, restaurant, cafeteria or refreshment parlor, café or coffee shop, canteen, burger stand, caterer, night club, bar, videoke club, and others?*

☐ 1 Yes, GO TO Q8a   ☐ 2 No, GO TO Q9

Q8a. *Does this barangay have accommodation and food service establishments with 100 employees or more?* ☐ 1 Yes ☐ 2 No

Q8b. *Does this barangay have accommodation and food service with 10 to 99 employees?* ☐ 1 Yes ☐ 2 No, GO TO Q9

Q8c. *How many such establishments with 10 to 99 employees are there in this barangay?*
ENTER THE NUMBER IN THE BOX.
☐☐☐

Q9 *financial establishment such as a bank, financing/investment/ insurance company, credit/lending firm, pawnshop, credit cooperative, and other financial institutions?*

☐ 1 Yes, GO TO Q9a   ☐ 2 No, GO TO Q10

Q9a. *Does this barangay have financial establishments with 100 employees or more?* ☐ 1 Yes ☐ 2 No

Q9b. *Does this barangay have financial establishments with 10 to 99 employees?* ☐ 1 Yes ☐ 2 No, GO TO Q10

Q9c. *How many such establishments with 10 to 99 employees are there in this barangay?*
ENTER THE NUMBER IN THE BOX.
☐☐☐

Q10 *establishment offering repair services such as an auto repair shop, vulcanizing shop, computer repair shop, watch repair shop, and other repair shops for consumer electronics, household appliances, and other personal and household goods?*

☐ 1 Yes, GO TO Q10a   ☐ 2 No, GO TO Q11

Q10a. *Does this barangay have repair services with 100 employees or more?* ☐ 1 Yes ☐ 2 No

Q10b. *Does this barangay have repair services with 10 to 99 employees?* ☐ 1 Yes ☐ 2 No, GO TO Q11

Q10c. *How many such establishments with 10 to 99 employees are there in this barangay?*
ENTER THE NUMBER IN THE BOX.
☐☐☐

Q11 *establishment offering personal services such as a health spa, beauty parlor, barber shop, massage parlor, laundry shop, funeral parlor, and other establishments offering personal services activities?*

☐ 1 Yes, GO TO Q11a   ☐ 2 No, GO TO Q12

Q11a. *Does this barangay have personal services with 100 employees or more?* ☐ 1 Yes ☐ 2 No

Q11b. *Does this barangay have personal services with 10 to 99 employees?* ☐ 1 Yes ☐ 2 No, GO TO Q12

Q11c. *How many such establishments with 10 to 99 employees are there in this barangay?*
ENTER THE NUMBER IN THE BOX.
☐☐☐

Q12 *other establishments such as internet shop, computer game station, medical clinic, law office, taxi operator, vehicle rental firm, cargo handler, freight forwarder, courier, private postal service firm, video rental, photocopier, waste collector, establishments engaged in electrical, plumbing, and other establishments not included in Items Q5 to Q11?*

☐ 1 Yes, GO TO Q11a   ☐ 2 No, GO TO PART III

Q12a. *Does this barangay have other establishments such as _____ (MENTION EXAMPLES IN Q12) with 100 employees or more?* ☐ 1 Yes ☐ 2 No

Q12b. *Does this barangay have other establishments such as _____ (MENTION EXAMPLES IN Q12) with 10 to 99 employees?* ☐ 1 Yes ☐ 2 No, GO TO PART III

Q12c. *How many such establishments with 10 to 99 employees are there in this barangay?*
ENTER THE NUMBER IN THE BOX.
☐☐☐

CP Form 5 – Barangay Schedule

5D	Part III – Informal Settlers	⌐

INSTRUCTION: WRITE **X** IN THE BOX CORRESPONDING TO THE ANSWER.

Q13   *In this barangay, are there households who reside in …*

a.	*estero/creek/waterways?*	☐ 1 Yes	☐ 2 No	
b.	*riverbank/shoreline?*	☐ 1 Yes	☐ 2 No	
c.	*along railroad?*	☐ 1 Yes	☐ 2 No	
d.	*garbage dumpsite?*	☐ 1 Yes	☐ 2 No	⌐
e.	*under the bridge?*	☐ 1 Yes	☐ 2 No	
f.	*sidewalk or easement of roads and highways?*	☐ 1 Yes	☐ 2 No	
g.	*other danger areas such as cliff, cemetery, and others?*	☐ 1 Yes	☐ 2 No	
h.	*government land without legally recognizable claims to the land?*	☐ 1 Yes	☐ 2 No	
i.	*private land which they do not own?*	☐ 1 Yes	☐ 2 No	

Part IV – Presence of Relocation Area

INSTRUCTION: WRITE **X** IN THE BOX CORRESPONDING TO THE ANSWER.

Q14   *In this barangay, is there a …*   ⌐

a.	*temporary relocation area?*	☐ 1 Yes	☐ 2 No
b.	*permanent relocation/resettlement area?*	☐ 1 Yes	☐ 2 No

Part V – In-Movers

Q15   *Was there a large or significant number of families who moved to this barangay in the last five years due to the following reasons…*

a.	*Typhoon?*	☐ 1 Yes	☐ 2 No	
b.	*Other natural calamity/disaster?*	☐ 1 Yes	☐ 2 No	
c.	*Peace and order problem?*	☐ 1 Yes	☐ 2 No	
d.	*Reason other than natural calamity, disaster or peace and order problem?*	☐ 1 Yes	☐ 2 No	∟

REMARKS

Standard Mapping Form

CP Form 13 – Transmittal/Receipt Form

CP Form 13
(Prepare in duplicate.)

Sheet _____ of _____ sheets

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

**2015 Census of Population
TRANSMITTAL/RECEIPT FORM**

Region _____

Name of
Transmitting
Personnel _____

Designation of
Transmitting
Personnel _____

Province _____

AREA/DESCRIPTION OF MATERIALS City, Municipality, Barangay, Enumeration Area Number/ Questionnaires, Forms, Manuals, and Supplies	UNIT	TRANSMITTED		RECEIVED		
		Quantity	Date	Quantity	Date	Name/Signature
(1)	(2)	(3)	(4)	(5)	(6)	(7)

REMARKS:

CP Form 14 – Bundle Cover

CP Form 14

Bundle _____ of _____ bundles

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 Census of Population
BUNDLE COVER
(Questionnaire Transmittal and Processing Record)

Province _____   Barangay _____

City/Municipality _____   Enumeration Area Number ___

Type of Form   CP Form 1 ☐   CP Form 2 ☐   CP Form 4 ☐   CP Form 5 ☐   Map ☐

Number of Forms ☐

	Activity	Date Start	Date End	Signature over Printed Name	Remarks
Bundling Record					
CAS	Checking for completeness of bundled forms/maps				
	Bundling of forms/maps				
	Transmittal to Provincial Statistical Office (Data Processing Center)				
Processing Record at Data Processing Center and Scan Station					
General Screening for Quick Count	Receipt and control of forms/maps				
	Verification of geo-ID				
	Completeness checking of forms/maps				
	Matching of CP Form 1 with CP Forms 2 and 4				
	Data entry of page totals of CP Forms 1				
	Transmittal of data file to Central Office				
	Approved by PSO:				
Manual Processing at Data Processing Center	Receipt and control of forms/maps				
	Verification of geo-ID				
	Completeness checking of forms/maps				
	Editing/consistency checking of entries				
	Verification of entries				
	Document preparation				
	Transmittal of forms/maps to Scan Station				
	Approved by PSO:				
Machine Processing at Scan Station	Receipt and control				
	Scanning of CP Forms 1, 2, 4, 5, and maps				
	Completeness checking of scanned forms/maps				
	Test for interpretability of CP Forms 2, 4, and 5				
	Transmittal of data file to Data Processing Center				
	Approved by PSO/RD:				
Machine Processing at Data Processing Center	Receipt and control				
	Data Entry of CP Forms 2, 4, and 5				
	Completeness checking of data files and image files				
	Editing/consistency checking of entries				
	Coding				
	Verification of codes				
	Tabulation of select population and housing characteristics				
	Transmittal of data files to Central Office				
	Approved by PSO/RD:				

CP Form 15 – Folio Cover

CP Form 15   Folio Number _____

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 Census of Population
FOLIO COVER

Province _____ [ ][ ] City/Municipality _____ [ ][ ]

Instruction: Write **X** in the box for the type of form this folio cover is being used for.

[ ]	CP Form 10	[ ]	CP Form 18
[ ]	CP Form 11A	[ ]	CP Form 19
[ ]	CP Form 11B	[ ]	CP Form 20
[ ]	CP Form 12	[ ]	CP Form 21
[ ]	CP Form 16	[ ]	CP Form 22
[ ]	CP Form 17		

Folioed/Verified by: _____

Date: _____

CP Form 19 – Provincial Processing Receipt and Control Form

CP Form 19

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 Census of Population
PROVINCIAL PROCESSING RECEIPT AND CONTROL FORM

PROVINCE _____

CITY/MUNICIPALITY _____

Sheet _____ of _____ Sheets

Line No.	BARANGAY Name	Code	EA Number	RECEIPT FROM CAS Type of Form and Map	Number of Bundles of Forms/Maps	Date Received/ Initials	Status 1-OK 2-PENDING	GENERAL SCREENING Date Released/ Initials	Date Returned/ Initials	Number of Bundles of Forms/Maps	Status 1-OK 2-PENDING	ENCODING OF CP FORM 1 FOR QUICK COUNT Date Released/ Initials	Date Returned/ Initials	Number of Bundles of Forms	Status 1-OK 2-PENDING	EDITING Date Released/ Initials	Date Returned/ Initials	Number of Bundles of Forms	Status 1-OK 2-PENDING	REMARKS	TRANSMITTAL TO SS 2015 Date Transmitted/ Initials	Number of Bundles of Forms/Maps
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)
1																						
2																						
3																						
4																						
5																						
6																						
7																						
8																						
9																						
10																						
11																						
12																						
13																						
14																						
15																						
16																						
17																						
18																						
19																						
20																						

Prepared by:

_____
Signature over printed name of Receipt and Control Clerk

_____
Date

Verified by:

_____
Signature over printed name of Supervisor

_____
Date

CP Form 20 – Verification Slip for CP Form 5

CP Form 20

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

**2015 Census of Population
VERIFICATION SLIP FOR CP FORM 5**

Province _____ ☐☐

City/Municipality _____ ☐☐

Barangay _____ ☐☐☐

Item in CP Form 5	Total Items	Number of Items with Error and Type of Error 1 – Wrong entry 2 – Missing entry 3 – Faulty skip/invalid blank 4 – Others, specify	Specific Item in CP Form 5 with Error	REMARKS/ACTION TAKEN
Geo-ID				
Part I – Barangay Facilities/ Characteristics				
Part II – Kinds of Establishments in the Barangay				
Part III – Informal Settlers				
Part IV – Presence of Relocation Area				
Part V – In-movers				
TOTAL NUMBER OF ITEMS WITH ERRORS				

Part II – Kinds of Establishments
Compare the number of establishments in CP Form 5 with the List of Establishments (LE) by type of establishment and number of employees in these establishments.

Kind of Establishment	Establishments with 100 employees or more		Establishments with 10 to 99 employees		No establishment	
	CP Form 5	LE	CP Form 5	LE	CP Form 5	LE
	WRITE Y IF CODE 1 FOR YES IN CP FORM 5 IN Q5a, Q6a, Q7a, Q8a, Q9a, Q10a, Q11a, OR Q12a.	WRITE NUMBER OF ESTABLISH-MENTS	WRITE NUMBER OF ESTABLISHMENTS		WRITE N IF CODE 2 FOR NO IN CP FORM 5 IN Q5, Q6, Q7, Q8, Q9, Q10, Q11, OR Q12.	WRITE N IF NO ESTABLISH-MENT
a. commercial						
b. recreational						
c. manufacturing						
d. accommodation and food service						
e. financial						
f. repair services						
g. personal services						
h. other establishments						
RESULTS OF COMPARISON/ REMARKS/ACTION TAKEN						

Verified by:

_____   _____
Signature over Printed Name of Supervisor   Date

CP Form 21 – Problems Encountered/ Referral Form

CP Form 21

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 Census of Population
PROBLEM ENCOUNTERED/REFERRAL FORM

PROVINCE

CITY/MUNICIPALITY

BARANGAY

ENUMERATION AREA NUMBER

Sheet _____ of _____ Sheets

A. TO BE ACCOMPLISHED BY THE SCREENER

Questionnaire Indicator 1 – Missing 2 – Extra	Type of Questionnaire/ Form or Map	Number of Missing/Extra Questionnaire or Map	Status 1 – Ok 2 – Pending
(1)	(2)	(3)	(4)

B. TO BE ACCOMPLISHED BY THE EDITOR

Indicator
1 – Unused BSN, HUSN, HSN or ISN
2 – Inconsistent item
3 – Incomplete/blank entry
4 – Needed enhancement of entries
5 – Needed transcription to a new form
6 – Others

Type of Questionnaire	BSN	HUSN	HSN	ISN	Specify Problems Encountered	Actions Taken by the Supervisor	Status 1 – Ok 2 – Pending	Remarks
(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

Prepared by:

Edited by:

_____
Signature over printed name of Screener

Date

_____
Signature over printed name of Editor

Date

Referred to:

Approved by:

_____
Signature over printed name of CAS

Date

_____
Signature over printed name of Supervisor

Date

CP Form 22 – Accomplishment Report of Manual Processors

CP Form 22

Sheet _____ of _____ Sheets

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 Census of Population
ACCOMPLISHMENT REPORT OF MANUAL PROCESSORS

Province _____

City/Municipality _____

☐ Processor   ☐ Assistant Supervisor

DATE	BARANGAY		EA Number	Processing Activity (See codes below)	TYPE AND NUMBER OF FORMS PROCESSED											REMARKS
	Name	Code			CP Form 1		CP Form 2		CP Form 4		CP Form 5		Maps		
					Daily	Cumulative	Daily	Cumulative	Daily	Cumulative	Daily	Cumulative	Daily	Cumulative	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)

Codes for Column 5
1 – General Screening
2 – Editing
3 – Encoding
4 – Others, specify

Prepared by: _____   _____
           Signature over Printed Name of Processor   Date

Verified by: _____   _____
           Signature over Printed Name of Supervisor   Date

CP Form 24 – Map Evaluation Form

CP Form 24

Republic of the Philippines
PHILIPPINE STATISTICS AUTHORITY

2015 Census of Population
MAP EVALUATION FORM

Sheet _____ of _____ Sheets

PROVINCE _____

CITY/MUNICIPALITY _____

Line No.	BARANGAY			Type of Map 1 – Barangay 2 – EA 3 – Block Map	Number of sheets	INDICATOR FOR THE QUALITY OF MAPS (INDICATE "1" FOR YES OR "2" FOR NO)							RECOMMENDATION 1 – Needs recrawing 2 – Needs field validation 3 – OK for submission
	Name	Code	EA Number			Are all printed maps in prescribed mapping form? If NO, specify the type of form/paper used.	Are all maps in good condition? If NO, specify the street number/s that fall's the requirements.	Do all maps have correct orientation?	Do all maps have clear boundaries?	Do barangay/ EA/block maps have street names/ landmark names and symbols?	Do plotted buildings have correct HSNs?	Are the plotted buildings in correct relative location on the map vis-à-vis the street/sitio name indicated in CP Form 1?	Are all maps reconcilable with its barangay map? Check shape and boundaries if reconcilable.	
(1)	(2)	(3)	(4)			(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(19)
01														
02														
03														
04														
05														
06														
07														
08														
09														
10														
11														
12														
13														

Prepared by:

_____
Signature Over Printed Name of Processor

_____
Date

Verified by:

_____
Signature Over Printed Name of Supervisor

_____
Date

Religious Affiliation

CODE	RELIGIOUS AFFILIATION
00	None
01	Aglipay
02	Alliance of Bible Christian Communities of the Philippines
03	Assemblies of God
04	Association of Baptist Churches in Luzon, Visayas, and Mindanao
05	Association of Fundamental Baptist Churches in the Philippines
06	Baptist Conference of the Philippines
07	Bible Baptist Church
08	Bread of Life Ministries
09	Buddhist
10	Cathedral of Praise, Incorporated
11	Charismatic Full Gospel Ministries
12	Christ the Living Stone Fellowship
13	Christian and Missionary Alliance Church of the Philippines
14	Christian Missions in the Philippines
15	Church of Christ
16	Church of God World Mission in the Philippines
17	Church of Jesus Christ of the Latter Day Saints
18	Church of the Nazarene
19	Christian Reformed Church in the Philippines, Incorporated
20	Conservative Baptist Association in the Philippines
21	Convention of the Philippine Baptist Church
22	Crusaders of the Divine Church of Christ, Incorporated
23	Door of Faith
24	Evangelical Christian Outreach Foundation
25	Evangelical Free Church of the Philippines
26	Evangelical Presbyterian Church
27	Faith Tabernacle Church (Living Rock Ministries)
28	Filipino Assemblies of the First Born, Incorporated
29	Foursquare Gospel Church in the Philippines
30	Free Believers in Christ Fellowship
31	Free Methodist Church
32	Free Mission in the Philippines, Incorporated
33	General Baptist Churches of the Philippines
34	Good News Christian Churches
35	Higher Ground Baptist Mission
36	IEMELIF Reform Movement
37	Iglesia Evangelica Unida de Cristo

38	Iglesia Evangelista Methodista en Las Islas Filipinas (IEMELIF)
39	Iglesia Filipina Independiente
40	Iglesia ni Cristo
41	Iglesia sa Dios Espiritu Santo, Incorporated
42	Independent Baptist Churches of the Philippines
43	International Baptist Missionary Fellowship
44	International One Way Outreach
45	Islam
46	Jehovah's Witness
47	Jesus Christ Saves Global Outreach
48	Jesus is Alive Community, Incorporated
49	Jesus is Lord Church
50	Jesus Reigns Ministries
51	Love of Christ International Ministries
52	Lutheran Church of the Philippines
53	Miracle Life Fellowship International
54	Miracle Revival Church of the Philippines
55	Missionary Baptist Churches of the Philippines
56	Pentecostal Church of God Asia Mission
57	Philippine Benevolent Missionaries Association
58	Philippine Ecumenical Christian Church
59	Philippine Episcopal Church
60	Philippine Evangelical Mission
61	Philippines General Council of the Assemblies of God
62	Philippine Good News Ministries
63	Philippine Grace Gospel
64	Philippine Independent Catholic Church
65	Philippine Missionary Fellowship
66	Philippine Pentecostal Holiness Church
67	Potter's House Christian Center
68	Presbyterian Church in the Philippines
69	Roman Catholic, including Catholic Charismatic
70	Salvation Army, Philippines
71	Seventh Day Adventist
72	Southern Baptist Church
73	Take the Nation for Jesus Global Ministries (Corpus Christ)
74	Things to Come
75	UNIDA Evangelical Churches
76	United Church of Christ in the Philippines
77	United Evangelical Church of the Philippines (Chinese)
78	Union Espiritista Cristiana de Filipinas, Incorporated
79	United Methodists Church
80	United Pentecostal Church (Philippines), Incorporated
81	Universal Pentecostal Church

82	Victory Chapel Christian Fellowship
83	Watch Tower Bible and Tract Society of the Philippines, Incorporated (Jehovah's Witnesses)
84	Way of Salvation
85	Way of Salvation Church Incorporated, The
86	Wesleyan Church, The
87	Word for the World
88	Word International Ministries, Incorporated
89	World Missionary Evangelism
90	Worldwide Church of God
91	Zion Christian Community Church
92	Other Baptists
93	Other Evangelical Churches
94	Other Methodists
95	Other Protestants
96	Tribal religions
97	Other religious affiliations