HSES 2003-04 Form 5

TIME USE SHEET

To be completed by all household members aged 5 and above

PSU					HH SERIAL No	

DAY (MARK WITH 'X')	MON	TUE	WED	THU	FRI	SAT	SUN

Name of the household member

ID CODE (MARK WITH 'X')	1	2	3	4	5	6	7	8	9	10	11	12

Instructions: (1) Draw your timeline without interruption horizontally and vertically (2) No double lines (no two activities) for the same half hour (5) Use a black felt pen

(3) Horizontal line in the middle of cells (4) Vertical lines along right wall of cells

NIGHT MORNING EVENING NIGHT

| | Activities in the last 24 hours | Worked time in last 24 hours | | | | | | | | | | | |