

## EVS Household Survey Form

Visitor Name: \_\_\_\_\_

District:		Tehsil:		Area:		UC:		Visit Date:													
Street No.			House No.			Nearest Renowned Place:															
Postal Address:																					
Contact Person Name:						Contact No.															
CNIC:									Occupation												
Father's Name:						Contact No.															
CNIC:									Occupation												
Mother's Name:						Contact No.															
CNIC:									Occupation												
Since When you have been staying in this house?																					
No. of families living in this house			No. of persons earning			Total monthly income			No. of members dependent on this amount												
No. of children going to school			No. of children below age 4 Years			No. of Persons above Age 17 Years															
Building Status:		Rented	<input type="checkbox"/>	Owned	<input type="checkbox"/>	Family System:		Nuclear	<input type="checkbox"/>	Joint	<input type="checkbox"/>	Type of Transport									
Monthly Expanse (approx):		House Rent:		Transport Utility:		School Fee:		Tuition Fee:													
Facilities Available:		Electricity:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Sui Gas:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Telephone:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Transport	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Name of the Child	Gender	Date of Birth	Age	Current Activity for the Child	Have ever sent to school	If yes, was it Govt/Pvt./Madrassah?	Reason for leaving	Want to send school again													

Signature of Monitor

Verified by: