

Appendix E. Facsimile of SIPP Child Care Module

Section 5 – TOPICAL MODULES (Continued)	
Part B – CHILD CARE	
<p>CHECK ITEM T2 <i>Refer to cc items 27 and 24.</i> Is . . . the designated parent or guardian of children under 15 years of age who live in this household?</p>	<p>B100 <input type="checkbox"/> Yes <input type="checkbox"/> No – <i>SKIP to Check Item T12, page 60</i></p>
<p>CHECK ITEM T3 Is "Worked" (code 170) marked on the ISS?</p>	<p>B102 <input type="checkbox"/> Yes – <i>SKIP to Check Item T6</i> <input type="checkbox"/> No</p>
<p>CHECK ITEM T4 <i>Refer to item 30a, page 13.</i> Was . . . enrolled in school during the reference period?</p>	<p>B103 <input type="checkbox"/> Yes <input type="checkbox"/> No – <i>SKIP to Check Item T5</i></p>
<p>1. About how many hours per week did . . . usually spend in school last month?</p>	<p>B104 <input type="text"/> <input type="text"/> Hours OR x1 <input type="checkbox"/> Hours varied x2 <input type="checkbox"/> Don't know x3 <input type="checkbox"/> Not enrolled last month</p> <p style="text-align: right;">} <i>SKIP to Check Item T6</i></p>
<p>CHECK ITEM T5 <i>Refer to item 2a, page 2.</i> Did . . . spend any time looking for work or on layoff from a job during the reference period?</p>	<p>B106 <input type="checkbox"/> Yes <input type="checkbox"/> No – <i>SKIP to Check Item T12, page 60</i></p>
<p>2. About how many hours per week did . . . usually spend looking for a job last month?</p>	<p>B109 <input type="text"/> <input type="text"/> Hours OR x1 <input type="checkbox"/> Hours varied x2 <input type="checkbox"/> Don't know x3 <input type="checkbox"/> Did not look for a job last month – <i>SKIP to Check Item T12, page 60</i></p>
<p>NOTES</p>	

Section 5 – TOPICAL MODULES (Continued)			
Part B – CHILD CARE (Continued)			
CHECK ITEM T5 Refer to cc items 18, 19, 24, and 27. Beginning with the youngest child enter person numbers, ages, and names of children under 15, who are household members, for whom the person is a parent or guardian.	YOUNGEST	SECOND YOUNGEST	THIRD YOUNGEST
	Person No. <input type="text"/> <input type="text"/> <input type="text"/> Age <input type="text"/> <input type="text"/> Name <input type="text"/>	Person No. <input type="text"/> <input type="text"/> <input type="text"/> Age <input type="text"/> <input type="text"/> Name <input type="text"/>	Person No. <input type="text"/> <input type="text"/> <input type="text"/> Age <input type="text"/> <input type="text"/> Name <input type="text"/>
ASK 3a–4f for the youngest child and then read 3a–4f for the second and third youngest.			
Now we have some questions about how the children in this household were cared for while ... was working (in school/looking for a job). 3a. During (Last month), what was (Name of child) usually doing or how was (Name of child) usually cared for during most of the hours that ... worked (was in school/looking for a job)? Mark the arrangement in which the child spent the most hours in a typical week last month. Mark (X) only one box.	8120 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Child's other parent/stepparent <input type="checkbox"/> 2 Child's brother/sister <input type="checkbox"/> 3 Child's grandparent <input type="checkbox"/> 4 Other relative of child <input type="checkbox"/> 5 Nonrelative of child <input type="checkbox"/> 6 Child in day/group care center <input type="checkbox"/> 7 Child in nursery/preschool <input type="checkbox"/> 8 Child in organized school-based activity (before/after school) <input type="checkbox"/> 9 Child in kindergarten, elementary or secondary school <input type="checkbox"/> 10 Child cares for self <input type="checkbox"/> 11 ... works at home <input type="checkbox"/> 12 ... cares for child at work (in class/while job hunting) <input type="checkbox"/> 13 Child not born and/or ... not guardian as of last month <input type="checkbox"/> 14 ... did not work, go to school, or look for job last month 	8122 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Child's other parent/stepparent <input type="checkbox"/> 2 Child's brother/sister <input type="checkbox"/> 3 Child's grandparent <input type="checkbox"/> 4 Other relative of child <input type="checkbox"/> 5 Nonrelative of child <input type="checkbox"/> 6 Child in day/group care center <input type="checkbox"/> 7 Child in nursery/preschool <input type="checkbox"/> 8 Child in organized school-based activity (before/after school) <input type="checkbox"/> 9 Child in kindergarten, elementary or secondary school <input type="checkbox"/> 10 Child cares for self <input type="checkbox"/> 11 ... works at home <input type="checkbox"/> 12 ... cares for child at work (in class/while job hunting) <input type="checkbox"/> 13 Child not born and/or ... not guardian as of last month 	8124 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Child's other parent/stepparent <input type="checkbox"/> 2 Child's brother/sister <input type="checkbox"/> 3 Child's grandparent <input type="checkbox"/> 4 Other relative of child <input type="checkbox"/> 5 Nonrelative of child <input type="checkbox"/> 6 Child in day/group care center <input type="checkbox"/> 7 Child in nursery/preschool <input type="checkbox"/> 8 Child in organized school-based activity (before/after school) <input type="checkbox"/> 9 Child in kindergarten, elementary or secondary school <input type="checkbox"/> 10 Child cares for self <input type="checkbox"/> 11 ... works at home <input type="checkbox"/> 12 ... cares for child at work (in class/while job hunting) <input type="checkbox"/> 13 Child not born and/or ... not guardian as of last month
	b. Was (Name of child) usually cared for at his/her home, at someone else's home, or at some other place?	8126 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Child's home <input type="checkbox"/> 2 Other private home <input type="checkbox"/> 3 Other place 	8128 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Child's home <input type="checkbox"/> 2 Other private home <input type="checkbox"/> 3 Other place
CHECK ITEM T7 Is box 3–8 marked in item 3a?	8132 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No – SKIP to 3f, page 58 	8134 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No – SKIP to 3f, page 58 	8136 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No – SKIP to 3f, page 58
3c. Was any money payment usually made for this arrangement?	8138 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No – SKIP to 3f, page 58 	8140 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Yes – SKIP to 3d <input type="checkbox"/> 2 No – SKIP to 3f, page 58 	8142 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Yes – SKIP to 3d <input type="checkbox"/> 2 No – SKIP to 3f, page 58
CHECK ITEM T6 Are there 2 or more children listed in Check Item T6?	8144 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No – SKIP to 3e 		
3d. Does ... (or ...'s family) pay for (Name of child)'s child care separately, or does the payment for the care you just described also cover some other child?	8146 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Payment for youngest child separately <input type="checkbox"/> 2 Includes another child 	8148 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Payment for second youngest child separately <input type="checkbox"/> 2 Includes another child 	8150 <ul style="list-style-type: none"> <input type="checkbox"/> 1 Payment for third youngest child separately <input type="checkbox"/> 2 Includes another child
ASK OR VERIFY – e. In a typical week, how much did ... (or ...'s family) usually pay in this arrangement for (Name of child)? (If payment includes money paid for another child, write in total amount for all children in first mentioned child's column. If dollar amount already recorded from previous child(ren) mark codes X2 or X3 as applicable.)	8152 \$ <input type="text"/> . <input type="text"/> Per week x1 <input type="checkbox"/> DK	8154 \$ <input type="text"/> . <input type="text"/> Per week x1 <input type="checkbox"/> DK Previously recorded for – x2 <input type="checkbox"/> Youngest child	8156 \$ <input type="text"/> . <input type="text"/> Per week x1 <input type="checkbox"/> DK Previously recorded for – x2 <input type="checkbox"/> Youngest child x3 <input type="checkbox"/> Second youngest

Section 5 – TOPICAL MODULES (Continued)

Part B – CHILD CARE (Continued)

	YOUNGEST	SECOND YOUNGEST	THIRD YOUNGEST
3f. About how many hours per week was (Name of child) usually cared for in the arrangement while ... worked (was in school/was looking for a job) last month?	8158 <input type="text"/> <input type="text"/> Hours	8180 <input type="text"/> <input type="text"/> Hours	8162 <input type="text"/> <input type="text"/> Hours
g. Was any other arrangement usually used for (Name of child) in a typical week last month?	8164 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to next child or Check Item T11	8166 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to next child or Check Item T11	8168 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item T11
4a. What did (Name of child) do or how was (Name of child) cared for during most of the other hours that ... worked (was in school/ was looking for a job)? <i>Mark the arrangement in which the child spent the second most hours in a typical week.</i> <i>Mark (X) only one box.</i>	8170 1 <input type="checkbox"/> Child's other parent/stepparent 2 <input type="checkbox"/> Child's brother/sister 3 <input type="checkbox"/> Child's grandparent 4 <input type="checkbox"/> Other relative of child 5 <input type="checkbox"/> Nonrelative of child 6 <input type="checkbox"/> Child in day/ group care center 7 <input type="checkbox"/> Child in nursery/ preschool 8 <input type="checkbox"/> Child in organized school-based activity (before/after school) 9 <input type="checkbox"/> Child in kindergarten, elementary or secondary school 10 <input type="checkbox"/> Child cares for self 11 <input type="checkbox"/> ... works at home 12 <input type="checkbox"/> ... cares for child at work (in class/while job hunting) <i>SKIP to Check Item T9</i>	8172 1 <input type="checkbox"/> Child's other parent/stepparent 2 <input type="checkbox"/> Child's brother/sister 3 <input type="checkbox"/> Child's grandparent 4 <input type="checkbox"/> Other relative of child 5 <input type="checkbox"/> Nonrelative of child 6 <input type="checkbox"/> Child in day/ group care center 7 <input type="checkbox"/> Child in nursery/ preschool 8 <input type="checkbox"/> Child in organized school-based activity (before/after school) 9 <input type="checkbox"/> Child in kindergarten, elementary or secondary school 10 <input type="checkbox"/> Child cares for self 11 <input type="checkbox"/> ... works at home 12 <input type="checkbox"/> ... cares for child at work (in class/while job hunting) <i>SKIP to Check Item T9</i>	8174 1 <input type="checkbox"/> Child's other parent/stepparent 2 <input type="checkbox"/> Child's brother/sister 3 <input type="checkbox"/> Child's grandparent 4 <input type="checkbox"/> Other relative of child 5 <input type="checkbox"/> Nonrelative of child 6 <input type="checkbox"/> Child in day/ group care center 7 <input type="checkbox"/> Child in nursery/ preschool 8 <input type="checkbox"/> Child in organized school-based activity (before/after school) 9 <input type="checkbox"/> Child in kindergarten, elementary or secondary school 10 <input type="checkbox"/> Child cares for self 11 <input type="checkbox"/> ... works at home 12 <input type="checkbox"/> ... cares for child at work (in class/while job hunting) <i>SKIP to Check Item T9</i>
b. Was (Name of child) usually cared for at his/her home, at someone else's home, or at some other place?	8176 1 <input type="checkbox"/> Child's home 2 <input type="checkbox"/> Other private home 3 <input type="checkbox"/> Other place	8178 1 <input type="checkbox"/> Child's home 2 <input type="checkbox"/> Other private home 3 <input type="checkbox"/> Other place	8180 1 <input type="checkbox"/> Child's home 2 <input type="checkbox"/> Other private home 3 <input type="checkbox"/> Other place
CHECK ITEM T9 Is box 3–8 marked in item 4a?	8182 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 4f	8184 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 4f	8186 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 4f
4c. Was any money payment usually made for this arrangement?	8188 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 4f	8190 1 <input type="checkbox"/> Yes – SKIP to 4d 2 <input type="checkbox"/> No – SKIP to 4f	8192 1 <input type="checkbox"/> Yes – SKIP to 4d 2 <input type="checkbox"/> No – SKIP to 4f
CHECK ITEM T10 Are there 2 or more children listed in Check Item T6?	8194 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 4e		
4d. ASK OR VERIFY – Does ... (or ...'s family) pay for (Name of child's) child care separately, or does the payment for the care you just described also cover some other child?	8196 1 <input type="checkbox"/> Payment for youngest child separately 2 <input type="checkbox"/> Includes another child	8198 1 <input type="checkbox"/> Payment for second youngest child separately 2 <input type="checkbox"/> Includes another child	8200 1 <input type="checkbox"/> Payment for third youngest child separately 2 <input type="checkbox"/> Includes another child
e. ASK OR VERIFY – In a typical week, how much did ... (or ...'s family) usually pay in this arrangement for (Name of child)? (If payment includes money paid for another child, write in total amount for all children in first mentioned child's column. If dollar amount already recorded from previous child(ren) mark codes X2 or X3 as applicable.)	8202 \$ <input type="text"/> <input type="text"/> Per week x1 <input type="checkbox"/> DK	8204 \$ <input type="text"/> <input type="text"/> Per week x1 <input type="checkbox"/> DK Previously recorded for – x2 <input type="checkbox"/> Youngest child	8206 \$ <input type="text"/> <input type="text"/> Per week x1 <input type="checkbox"/> DK Previously recorded for – x2 <input type="checkbox"/> Youngest child x3 <input type="checkbox"/> Second youngest
f. About how many hours per week was (Name of child) usually cared for in the arrangement while ... worked (was in school/was looking for a job)?	8208 <input type="text"/> <input type="text"/> Hours SKIP to next child or Check Item T11	8210 <input type="text"/> <input type="text"/> Hours SKIP to next child or Check Item T11	8212 <input type="text"/> <input type="text"/> Hours SKIP to Check Item T11

