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SELF DESIGNED QUESTIONNAIRE

SECTION A: DEMOGRAPHIC DATA

Instruction:

Mark each question clearly with an **X** in the required box. A **0** has to be placed before the number in cases where a single number is required.

1. Gender of respondent

Male

1

Female

2

2. Age of respondent: according to today's date:

Years

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3. Respondent's highest educational qualification

Illiterate

01

Lower than standard 7

02

Level 1: Grade 9 (Standard 7)

03

Level 2: Grade 10 (standard 8)

04

Level 3: Grade 11 (Standard 9)

05

Level 4: Grade 12 (standard 10)

06

Level 5: One year certificate / diploma

07

Level 6: B-degree / higher diploma

08

Level 7: Honours degree

09

Level 8: Masters / Doctorate degree

10

4. What language do you speak at home?

English

1

Afrikaans

2

African

3

5. Race group

- White 1
- Black 2
- Coloured 3
- Indian 4

6. What is your marital status?

- Never married 01
- Married to **first** partner 02
- Re-married to **another** partner 03
- Traditional marriage 04
- Separated 05
- Divorced 06
- Widowed 07

7. Occupational status of respondent

What is the respondent's occupation?

Social Worker

01

Administrative Clerk

02

Security Officer

03

Management

04

8. Job title

What is your job title ?

9. Family income

*What is this family's **gross monthly** income from all sources?*

R0-00 - R2 999 per month

1

2

3

4

5

R3 000 - R5 999 per month

R6 000 - R8 999 per month

R9 000 - R11 999 per month

R12 000 - R14 999 per month

R15 000 - R17 999 per month

R18 000 - R20 999 per month

R21 000 - R23 999 per month

R24 000 plus per month

9

Key to symbols in questionnaire: Mark your choice clearly with an **X**

Yes	No
<input checked="" type="radio"/>	<input type="radio"/>

Answer = NO

10. Answer the following questions on behalf of yourself

During the past year.....

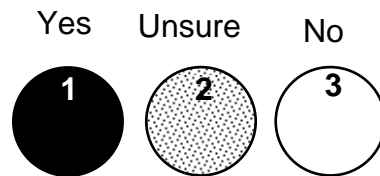
Did you get feedback about your job performance?	<input checked="" type="radio"/> 1 <input type="radio"/> 2
Did you receive a salary increase?	<input checked="" type="radio"/> 1 <input type="radio"/> 2
Were you promoted?	<input checked="" type="radio"/> 1 <input type="radio"/> 2
Were you a subject of a disciplinary hearing?	<input checked="" type="radio"/> 1 <input type="radio"/> 2
Were you rewarded for good performance?	<input checked="" type="radio"/> 1 <input type="radio"/> 2

Key to symbols in questionnaire: Mark your choice clearly with an **X**

Yes	No
<input checked="" type="radio"/>	<input type="radio"/>

Answer = NO

Have you worked night shift?	<input checked="" type="radio"/> 1 <input type="radio"/> 2
Did you get fringe benefits such as pension funds?	<input checked="" type="radio"/> 1 <input type="radio"/> 2
Did you get fringe benefits such as medical aid?	<input checked="" type="radio"/> 1 <input type="radio"/> 2
Did you get fringe benefits such as housing subsidy?	<input checked="" type="radio"/> 1 <input type="radio"/> 2
Were you paid for overtime work?	<input checked="" type="radio"/> 1 <input type="radio"/> 2
Did you get leave (paternity, sick, study or holiday leave)?	<input checked="" type="radio"/> 1 <input type="radio"/> 2



11. Answer the following questions on behalf of your department.

During the past five years.....

Was your department downsized?	<input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Were employees retrenched?	<input checked="" type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 3
Were vacant positions filled?	<input checked="" type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 2 <input type="radio"/> 3
Did employees attend in-service training?	<input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Did employees participate in teambuilding exercises?	<input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Did employees get the necessary equipment to fulfill their duties?	<input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3