

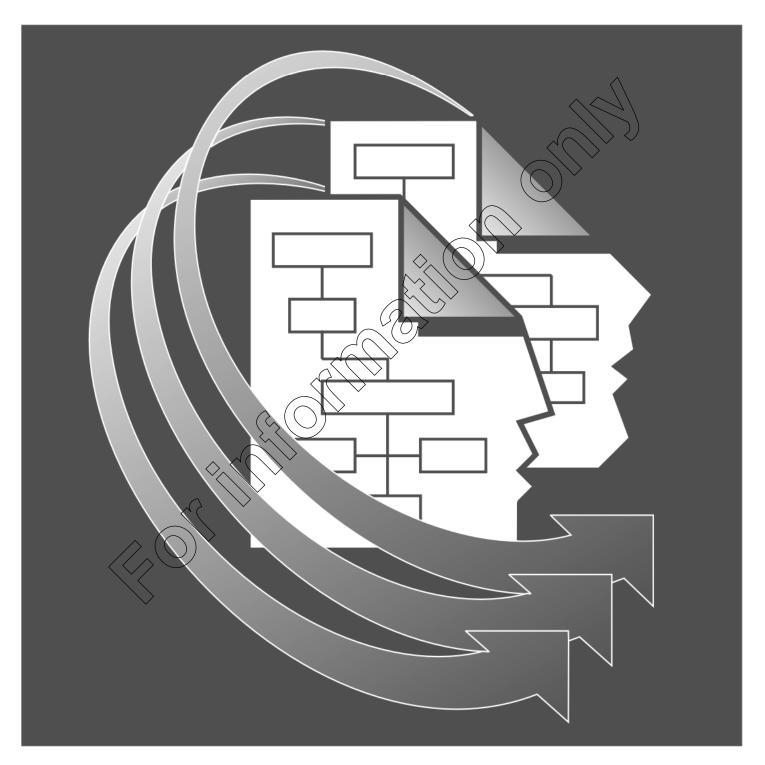
Business and Labour Market Analysis Division & Labour Statistics Division

2003 Workplace and Employee Survey

Confidential when completed

Collected under the authority of the *Statistics Act*, Revised Statutes of Canada, 1985, Chapter S19.

Version française disponible sur demande



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Survey Objective

The Workplace and Employee Survey will provide valuable information on the 'business of business' by looking at the practices that help firms succeed. It will poll Canadian employees and employers on a range of workplace concerns. Survey results will provide unique insight into the relationship between employment practices and firms' performances, as well as more in-depth information on the effect of technology, training and human resource practices.

Confidentiality

The law protects what you tell us. Your information is kept strictly confidential. No one, not the courts, the Canada Customs and revenue Agency or even the RCMP, can access your information. Your information cannot be made available under any other law such as the Access to Information Act.

We never release any information that could identify a particular individual or business without their consent.

You need help?

We would be most happy to answer any questions you might have.

Please fell free to call. Our telephone number is provided in the included letter.

You may also visit Statistics Canada's web site at www.statcan.ca.

Thank you for participating in this survey.



Business and Labour Market Analysis Division & Labour Statistics Division

2003	Workp	lace and
Empl	loyee Su	rvey



Α	On March 31, 2003, were you still working for the employer you reported in our interview held a year ago?
	¹ \bigcirc Yes \rightarrow Go to Question B
	³ No \rightarrow Go to Question X1.1 of Exit Questionnaire (XL, XS)
	Note: You must be working for a NEW EMPLOYER not a NEW OWNER . If the workplace is conducting the same type of activity with a new owner, the answer should be YES .
В	Were you still working at the same location as last year?
	¹ Yes $\langle \zeta_{\lambda} (\bigcirc) \rangle$
	³ O No
	Note: You must be the one who changed location. If the company or workplace changed location, the answer should be YES; if you personally changed location, the answer should be NO.
	()
С	As of March 31, 2003, had your job title changed since last year?
	¹ \bigcirc Yes \rightarrow Go to Question 5 of Employee Questionnaire (EL)
	³ \bigcirc No \rightarrow Go to Question D
D	As of March 31, had your most important activities or duties changed since last year?
	¹ ◯ Yes → Go to Question 6 of Employee Questionnaire (EL)
	³ ○ No → Go to Question 9 of Employee Questionnaire (ES)

The following questions relate to the employee's exit conditions.

Reason for leaving job – Voluntary/Involuntary Exit	
X1.1	Did you leave this job or did the job come to an end?
	¹ \bigcirc Left job \rightarrow Go to Question X1.2
	² \bigcirc Job came to an end \rightarrow Go to Question X1.3
	³ ⊖ Both → Go to Question X1.2
	Note: Examples for leaving job: Found new job with new company, started business as self-employed or working owner, retired, attended school, etc.
X1.2	What was your main reason for leaving this job?
	⁰¹ Found new job with new company (excluding self-employment)
	⁰² Started business as self-employed or working owner
	⁰³ Retirement
	⁰⁴ O Attend school
	⁰⁵ O Dissatisfied with job
	⁰⁶ Moved to a new residence
	07 Own illness or disability
	⁰⁸ Maternity/Parental leave
	⁰⁹ Caring for own children
	¹⁰ O Caring for elder relative(s)
	¹¹ O Other personal or family responsibilities
	¹² Other, <i>specify</i>

Instruction: If the answer to Question X1.1 is 1 (Left job), go to Question X1.4.

X1.3	What was the main reason why this job came to an end?
	¹ O Location moved or closed
	² O Company went out of business
	³ O Seasonal nature of work
	⁴ O Temporary lay-off/business slowdown – recall expected (not caused by seasonal conditions)
	⁵ O Permanent lay-off – no recall expected
	⁶ C Labour dispute
	⁷ O Dismissal by employer
	⁸ C Temporary job/contract ended
	⁹ Other, <i>specify</i>
X1.4	Did you receive any additional payments when you left this job or when the job came to an end?
	¹ O Yes
	³ No \rightarrow Go to Question X2.1
	Note: For example, severance pay, early retirement payment, signing bonus or any other payments related to you having "left the job" or the "job coming to an end".
X1.5	What was the amount received?
Dete	ermine end of previous job and current labour market status
X2.1	When did you leave your previous job or when did your job come to an end?
	UI-12 Month Year
	Note: Here we are talking specifically about the job you held based on our interview a year ago.

X2.2	What is your employment status: Are you currently working at a new job, running a business, or looking for work? Check one of the following conditions.
	¹ C Employed at work (including self-employed) Go to Question X3.1
	² O Absent from work for more than three months
	³ O Temporary lay-off
	⁴ C Looking for work
	⁵ Future start If the answer to Question X2.2 is 2 to 8 Go to
	⁶ Not in labour force, able to work
	⁷ O Not in labour force, permanently unable to work
	⁸ Other, <i>specify</i>
Addit	tional questions for job changers
X3.1	In this new job, which best describes your employment status?
	¹ O Paid worker
	² Unpaid family worker
	³ O Volunteer, unpaid
	⁴ Self-employed with paid help
	⁵ Self-employed without paid help
	$\langle \rangle \rangle$
X3.2	When did you start working at this particular job?
	UI-12 Month Year
Instr	uctions: • If the answer to Question X3.1 is 1 (Paid worker), go to Question X4.1 (a) (XL).
	 If the answer to Question X3.1 is between 2 and 5 AND the date provided in Question X3.2 is after the date provided in Question X2.1, go to Question X5.1 (XS).
	 If the answer to Question X3.1 is between 2 and 5 AND the date provided in Question X3.2 is the same as, or before the date provided in Question X2.1, go to Question 45 (b) (XS).

Newe	New employer content	
X4.1 (a)	Did you start working for this employer on the date answered in Question X3.2?	
	¹ \bigcirc Yes \rightarrow Go to Question X4.2	
	³ O No	
X4.1 (b)	When did you start working for this employer?	
	UI-12 Month Year	
X4.2	What is the legal name of your current employer?	
	Legal name	
X4.3	Would you say that the main type of business or industry of your new employer is similar to the main type of business of your old employer?	
	³ O No	
X4.4	Considering your new employer, please describe its main business activity.	
	Specify	
Instruc	ction: If the answer to Question X3.1 is (1 (Raid worker) AND the date provided in Question X3.2 is the same or before the date reported in Question X2.1, go to Question 2 (XL).	
X5.1	What was your main activity between the end of your previous job and the time you started your new job? (If you are not currently employed, what was your main activity since the end of your previous job?)	
	¹ Employed by another company	
	² O Started business as self-employed or working owner	
	³ Looking for work (unemployed)	
	⁴ Attending school	
	⁵ Retired	
	⁶ \bigcirc Not in labour force, able to work	
	⁷ \bigcirc Not in labour force, unable to work	
	⁸ Other, <i>specify</i>	
Instruc	ctions: • If the answer to Question X2.2 is between 2 and 8, go to Question 45 (b) (XS).	
	• If the answer to Question X3.1 is between 2 and 5, go to Question 45 (b) (XS).	

• If the answer to Question X3.1 is 1 (Paid worker), go to Question 2 (XL).

Section 1 – Job Characteristics

When did you start working for this employer?
Note: You must at least give the year that you started working for the employer.
U Month Year
 Note: This refers to the total uninterrupted tenure with the employer, regardless of location. If you quit at one time to work for another employer, we want the most recent start date.
 If you have been on extended leave or layoff from which you are expected to return, we want the original start date.
$\langle \rangle$
 Did you ever work for this employer before?
¹ O Yes
³ No \rightarrow Go to Question 4 (a)
How many months did you work for them then?
OR
From: 0112 Month Left Year
To: Month Year

4 (a)	When you were first hired, how did you learn about the job opening? (Check all that apply.)
	⁰¹ O Help wanted ad
	⁰² Family or friend
	⁰³ Union posting
	⁰⁴ O Canada Employment Centre/other government agency
	⁰⁵ On-campus recruitment
	⁰⁶ \bigcirc News story
	⁰⁷ O Job fair
	⁰⁸ O Recruitment agency (headhunter)
	⁰⁹ O Personal initiative
	¹⁰ O Directly recruited by employer
	¹¹ Internet
	¹² Other, <i>specify</i>
4 (b)	When you were first hired, were you required to take: (Check all that apply.)
	⁰¹ O Tests for specific skills (for example typing or manual dexterity)
	⁰² Aptitude or other personality testing
	⁰³ Security check
	05 O Drug test
	⁰⁶ Tests administered by a recruitment agency
	⁰⁷ Any other-type of testing or screening, <i>specify</i>
	⁰⁸ O Personal interview
	⁰⁹ O Test on job-related knowledge
	¹⁰ O Test on general knowledge or literacy skills
	¹¹ O None
5.	What is your job title?

Instruction: If you have answered Question X3.2, go to Question 8.

7.	When did you start working at this particular job?
	Month Year
	Note: You must at least give the year that you started working at this job We are talking specifically about the job duties you described in Question 6. If you have moved in and out of the job several times, we want the most recent start date.
	$(\bigcirc)^{*}$
Instr	ruction: If your job title and your most important activities or duties have not changed (ES), go to Question 9.
8.	What is the minimum level of education required for this job?
	⁰¹ C Elementary school
	⁰² O Some secondary school
	⁰³ O Secondary school diploma
	⁰⁴ Some postsecondary education
	⁰⁵ (Trade certificate
	⁰⁶ O College diploma
	⁰⁷ O University undergraduate degree
	⁰⁸ O University professional accreditation (M.D., Law, Architect, Engineer, Education, etc.)
	⁰⁹ O University graduate degree
	¹⁰ O None

Unless you answered "No" in question A (XL), please answer the following questions for the job you held in March 2003, even if you have changed jobs or employers since then.

Instru	uction: Please answer Questions 9 to 39 (EN, EL, ES, XL).
9.	Do you supervise the work of other employees on a day-to-day basis?
	¹ • Yes
	³ \bigcirc No \rightarrow Go to Question 10
9 (a)	About how many people do you directly and indirectly supervise on a day-to-day basis?
	Note: Directly: are employees and supervisors who report to you.
	Indirectly: are employees reporting to supervisors who report to you.
10.	Do you normally work the same number of paid hours per week at this job excluding all overtime?
	¹ \bigcirc Yes \rightarrow Go to Question 10 (d)
	³ No \rightarrow Go to Question 10 (a)
10 (a)	Not counting overtime how many paid hours on average do you work per week at this job?
	hours
Instru	uction: If you have been in this job for less than twelve months, please answer the following questions for the period of time you have been in this job. Otherwise, answer for the past twelve months.
10 (b)	Over the past twelve months/since you started this job, not counting overtime, what was the maximum number of paid hours you worked per week at this job?
	hours

10 (c)	Over the past twelve months/since you started this job, not counting overtime, what was the minimum number of paid hours you worked per week at this job? (Exclude the hours when you were on paid vacation or paid sick leave.)		
	● L hours → Go to Question 10 (e)		
10 (d)	Excluding all overtime, how many paid hours do you usually work per week at this job?		
	hours		
10 (e)	How many hours of paid overtime do you usually work per week?		
	└		
	Note: If the number of overtime hours varies from week to week, please provide an average.		
10 (f)	How many hours of unpaid overtime do you usually work per week?		
	hours		
Instru	Instruction: If the answer to Question 10 (e) and Question 10 (f) are both zero, please go to Question 11 (a).		
10 (g)	How far in advance do you usually know your overtime schedule?		
	² \bigcirc More than one month (more than 31 days)		
	³ One month (22 to 31 days)		
	⁴ 3 weeks (15 to 21 days)		
	5 2 weeks (8 to 14 days)		
	6 \bigcirc 1 to 7 days		
	⁷ O Less than one day		
11 (a)	How many weeks per year do you usually work at this job? Please include vacation and other paid leave.		
	• weeks		

11 (b)	How many months of the year do you usually work at this job?
	months
12.	Given your rate of pay, would you prefer to work:
	¹ \bigcirc the same number of hours for the same pay? \rightarrow Go to Question 13 (a)(i)
	² fewer hours for less pay?
	³ O more hours for more pay? → Go to Question 12 (c)
12 (a)	By how many hours would you like to reduce your work week?
12 (b)	Why would you prefer to work fewer hours? (Check all that apply.)
	¹ Family responsibilities
	² Work-related stress
	³ Other health reasons
	⁴ O More leisure time
	⁵ Other, <i>specify</i>
12 (c)	How many additional hours per week would you prefer to work at this job?
12 (d)	What are the reasons you did not work these additional hours? (Check all that apply.)
	¹ Øwn illhess or disability
	² Childcare unavailable
	³ Other personal or family responsibilities
	⁴ O Going to school
	⁵ Additional hours not offered by employer
	⁶ O Payment for additional hours not sufficient
	⁷ O Transportation problems
	⁸ O No reason
	⁹ Other, <i>specify</i>

The next few questions cover your general work arrangements with your employer. Reminder: Unless you answered "No" in question A (XL), the questions refer to the job you held in March 2003.	
13 (a)(i) In your usual work week, do you work each day from Monday to Friday?	
¹ O Yes	
³ O No	
13 (a)(ii) Do you work at least 6 hours per day?	
¹ O Yes	
³ O No	
13 (a)(iii)Do you usually work between the hours of 6 a.m. and 6 p.m.?	
¹ O Yes	
³ O No	
13 (b) Are you on a reduced work week by special arrangement with your employer?	
Note: A special arrangement, is an agreement that was reached with your employer to work fewer hours every week.	
³ No \rightarrow Go to Question 13 (d)	
13 (c) Which of the following best describes that arrangement?	
¹ Job sharing - you share a full-time job with another employee	
² Work sharing – you and others are working reduced hours to avoid lay-offs	
³ Family responsibilities – childcare/eldercare limit your ability to work full time	
⁴ O Physical problem/injury limits your ability to work full time	
⁵ Outside activities limit your ability to work full time	
⁶ O Retirement transition schedule	
⁷ Other, <i>specify</i>	

13 (d) Do you work a compressed work week? (This means working longer hours each day to reduce the number of days in a work week.)

 $^{1}\bigcirc$ Yes

³ O No

Instruction: If you answered "No" to Questions 13 (a)(i), 13 (a)(ii) or 13 (a)(iii), then *go to Question 13 (e);* else *go to Question 13 (j)*.

13 (e)	How far in advance do you know your weekly hours of work?
	¹ Always known
	² More than one month (more than 31 days)
	³ One month (22 to 31 days)
	⁴ 3 weeks (15 to 21 days)
	⁵ \bigcirc 2 weeks (8 to 14 days)
	⁶ 1 to 7 days
	⁷ C Less than one day
13 (f)	Do you usually work the same hours of the day?
	¹ O Yes
	³ O No
13 (g)	Do you usually work the same days of the week?
	¹ \bigcirc Yes \checkmark
	$^{3}\bigcirc$ Nô \bigcirc
Instru	action: If your answer to both questions 13 (f) and 13 (g) is "Yes", go to Question 13 (j).
13 (h)	Are you on a work schedule of rotating shifts?
	Note: By rotating shift we mean that according to a known schedule, the hours of day or the days of week change.
	¹ O Yes
	³ No \rightarrow Go to Question 13 (j)
	· w/

13 (i)	How many different shifts do you work in a full rotation?
13 (j)	How many days a week do you usually work?
	└──
Instru	uction: If you answered "Yes" to Questions 13 (a)(i), 13 (a)(ii) and 13 (a)(iii), go to Question 14.
13 (k)	Does your usual work week include Saturday or Sunday?
10 (II)	¹ O Yes
	² \bigcirc Varies, depends on shift
	3 No
14.	Do you work flexible hours? (This means you may work a certain number of core hours, but you can vary your start and stop times as long as you work the equivalent of a full work week.)
	¹ O Yes
	³ O No
15.	Which of the following best describes your terms of employment in this job?
	¹ Regular employee with no contractual or anticipated termination date <i>→</i> Go to Question 16
	² Seasonal employee my employment on this job is intermittent according to the season of the year (Go to Question 16
	³ Jerm employee: my term of employment has a set termination date <i>So to Question 15 (a)</i>
	⁴ Casual or on-call employee → <i>Go to Question 16</i>
	Note: Casual or on-call employees are persons: – who may have hours of work that vary substantially from one week to the next; – who are called to work as the need arises, not on a pre-arranged schedule.
	⁵ Other, specify \rightarrow Go to Question 16

15 (a)	What is the end date of this term of employment?
	UI-12 Month Year
16.	In your usual work week, are:
	¹ all of your duties carried out at your workplace?
	² most of your duties carried out outside of your workplace?
	³ Some of your duties carried out outside of your workplace ?
	⁴ all of your duties carried out outside of your workplace ?
17.	Do you ever carry out the duties of this job at home?
	¹ O Yes
	³ No \rightarrow Go to Question 18 (a)
17 (a)	Is your work at home mainly:
	¹ paid and within your normally scheduled work hours?
	² paid and in addition to your normally scheduled work hours?
	³ unpaid and in addition to your normally scheduled work hours?
17 (b)	How many hours per week do you usually work at home?
17 (c)	What is the main reason you work at home?
	¹ Requirements of the job, finish projects, etc.
	² Care for children
	³ Care for other family members
	⁴ O Other personal or family responsibilities
	⁵ O Usual place of work
	⁶ O Better conditions of work
	⁷ O Save time, money
	⁸ Other, <i>specify</i>

17 (d)	Does your employer offer any type of equipment or supplies and/or reimbursement of costs for working at home?
	¹ O Yes
	² \bigcirc No equipment or supplies required \rightarrow Go to Question 18 (a)
	³ \bigcirc No \rightarrow Go to Question 18 (a)
17 (e)	For the work done at home, does the employer provide you with any of the following? (Check all that apply.)
	¹ Computer hardware/software
	² Internet access
	³ Modem/fax
	⁴ Cellular phone, pager, beeper
	⁵ Other equipment or supplies, <i>specify</i>
	⁶ Reimbursement of costs
Instru	ction: If you have been with this employer for less than twelve months, please answer the following questions for the period of time since you started this job. Otherwise, answer for the past twelve months.
r	
18 (a)	In the past twelve months/since you started this job, how many days of paid vacation leave have you taken?
	L
18 (b)	How many days of paid sick leave have you taken?
	days
18 (c)(i)	Have you taken any maternity/parental leave in the past twelve months/since you started this job?
18 (c)(i)	
18 (c)(i)	Have you taken any maternity/parental leave in the past twelve months/since you started this job?
	Have you taken any maternity/parental leave in the past twelve months/since you started this job?

18 (c)(18 (c)(iii) Did your employer provide supplementary maternity/parental benefits?	
	¹ • Yes	
	³ O No	
40 (4)		
18 (d)	How many days of other paid leave have you taken (for example education leave, disability leave, bereavement, marriage, jury duty, union business)?	
	days	
18 (e)	In the past twelve months/since you started this job, have you taken any unpaid leave?	
	¹ O Yes	
	³ \bigcirc No \rightarrow Go to Question 18 (g)	
18 (f)	How many days of unpaid leave have you taken?	
	└└└└ days	
18 (g)	How many days of paid vacation leave are you entitled to annually?	
	L days	
19.	In the past twelve months/since you started this job, have you been off work due to a lay-off, strike or lockout?	
	¹ O Yes	
	³ No \rightarrow Go to Question 20 (EN, EL, ES)	
19 (a)	Were you off work due to layoffs?	
	¹ Yes	
	³ No \rightarrow Go to Question 19 (b)	
19 (a)(i	i)How many working days were you off due to lay-offs?	
	days	
	OR	
	• weeks	
	Note: Either days or weeks are to be entered, not both.	

Were you off work due to strikes?
¹ Yes
³ \bigcirc No \rightarrow Go to Question 19 (c)
i)How many working days were you off due to strikes?
in low many working days were you on due to surkes?
days
OR
· · · weeks
Note: Either days or weeks are to be entered, not both.
Were you off work due to lockouts?
¹ O Yes
³ No \rightarrow Go to Question 20 (EN, EL, ES)
i)How many working days were you off due to lockouts?
L days
OR
Note: Either days or weeks are to be entered, not both.
Note: Either days or weeks are to be entered, not both.
Note: Either days or weeks are to be entered, not both.
next questions refer to your total period of employment with your employer, including cations that they might operate.
next questions refer to your total period of employment with your employer, including
hext questions refer to your total period of employment with your employer, including cations that they might operate. Have you ever been promoted while working for this employer? (By promotion, we mean a change in

20 (a)	How many times have you been promoted?
20 (b)	When did your most recent promotion occur?
	Note: If you do not remember in which month you received the last promotion, enter "01" as the month.
	Month Year
20 (c)	Which of the following factors were important in earning that promotion? (Check all that apply.)
	¹ C Experience gained at previous job
	² Seniority
	³ \bigcirc Test or competitive process
	⁴ O Training or career development programs
	⁵ Past performance evaluations
	⁶ None
21.	Is your job performance in your position evaluated by a standard process?
	 By standard process, we mean: Through a written report
	 A private meeting with your supervisor A standard report
	1 Yes
	3 $$ Go to Question 22
21 (a)	Do the results of your job evaluation directly affect your level of pay or benefits?
	¹ Yes
	³ No

The next set of questions refers specifically to computers and other technologies you work with on the job.

Reminder: Unless you answered "No" in question A (XL), the questions refer to the job you held in March 2003.

22.	Do you use a computer in your job? Please exclude sales terminals, scanners, machine monitors, etc. – these are covered in another question.
	Note: By a computer, we mean a microcomputer, mini-computer, personal computer, mainframe computer or laptop that can be programmed to perform a variety of operations.
	¹ O Yes
	³ No \rightarrow Go to Question 22 (m)
22 (a)	How many hours a week do you normally spend using a computer at your job? (By this we mean using or developing computer applications, rather than just having the computer turned on.)
22 (b)	When you first started this job, how many hours a week did you normally spend using a computer?
	hours
22 (c)	What types of applications do you use? (Check all that apply.)
	Note: Here we are interested in what the application does, not its name. If you are not sure about the applications, please refer to the list provided at the end of the questionnaire.
	⁰¹ O Word processors
	03 Databases
	O Desktop publishing and form design
	 ⁰⁵ General management applications ⁰⁶ Communications
	07 \bigcirc Programming languages and development tools
	08 \bigcirc Specialized office applications
	09 Data analysis
	¹⁰ O Graphics and presentations
	¹¹ O Computer-aided design
	¹² Computer-aided engineering
	¹³ Expert systems
	¹⁴ Other, <i>specify</i>

Instruction: If only one application is used, go to Question 22 (e).

22 (d)	Which of these applications do you use the most, in terms of time? Please enter the corresponding code, as printed to the left of the circle in Question 22 (c).
	Type of application code:
22 (e)	How many hours a week do you normally spend using this application?
	hours
22 (f)	How did you learn this application? (Check all that apply.)
	¹ O Self-learning (manuals, books, on-line tutorials, etc.)
	² C Employer-paid formal training
	³ Self-paid formal training
	⁴ On-the-job training (co-workers, supervisors, resource people, friends)
	⁵ University or community college courses
	⁶ Other, <i>specify</i>
(Instruction. If only one method of loarning application is given then go to Question 22 h)	
Instru	uction: If only one method of learning application is given then go to Question 22 h).
Instru	uction: If only one method of learning application is given then go to Question 22 h).
Instru 22 (g)	uction: If only one method of learning application is given then <i>go to Question 22 h</i>). What method was the most helpful in learning this application?
	What method was the most heipful in learning this application?
	What method was the most helpful in learning this application?
	What method was the most helpful in learning this application? ¹ Self-learning (manuals, books, on-line tutorials, etc.) ² Employer-paid formal training
	What method was the most helpful in learning this application? ¹ Self-learning (manuals, books, on-line tutorials, etc.) ² Employer-paid formal training ³ Self-paid formal training
	What method was the most helpful in learning this application? ¹ Self-learning (manuals, books, on-line tutorials, etc.) ² Employer-paid formal training ³ Self-paid formal training ⁴ On-the-lob training (co-workers, supervisors, resource people, friends)
	What method was the most helpful in learning this application? ¹ Self-learning (manuals, books, on-line tutorials, etc.) ² Employer-paid formal training ³ Self-paid formal training ⁴ On-the-lob training (co-workers, supervisors, resource people, friends) ⁵ University or community college courses
22 (g)	What method was the most helpful in learning this application?
22 (g)	What method was the most helpful in learning this application?

Instru	uction: If only one application is used, go to Question 22 (m).	
22 (i)	Which of the other applications do you use the second most, in terms of time?	
	Please enter the corresponding code, as printed to the left of the circle in Question 22 (c) Type of application code:	
22 (j)	How many hours a week do you normally spend using this second application?	
	L hours	
Instru	Instruction: If only two applications are used, go to Question 22 (m).	
22 (k)	Which of the other applications do you use the third most, in terms of time?	
	Please enter the corresponding code, as printed to the left of the circle in Question 22 (c).	
	Type of application code:	
22 (I)	How many hours a week do you normally spend using this third application?	
	hours	
22 (m)	Considering all jobs you have held, how many years have you used a computer in a work environment?	
	years v	
	$\langle \rangle \langle 0 \rangle^{\vee}$	
23.	Do you use a computer-controlled or computer-assisted technology in the course of your normal duties? For example, industrial robots, retail scanning systems, etc.	
	¹ O Yes	
	³ \bigcirc No \rightarrow Go to Question 23 (f)	
23 (a)	What type of computer-controlled or computer-assisted technology do you use the most?	

23 (a)(i) How many hours a week do you normally spend using this technology?
	hours
23 (b)	What method was the most helpful in learning to use that technology?
	¹ On-the-job training (co-workers, supervisors, resource people, friends)
	² Employer-paid formal training
	3 Self-learning (manuals, books, on-line tutorials, etc.)
	⁴ O Self-paid formal training
	⁵ University or community college courses
	⁶ Other, <i>specify</i>
23 (c)	Has there been an upgrade or change in that technology in the past twelve months?
	¹ O Yes
	³ No \rightarrow Go to Question 23 (f)
23 (d)	Did you receive any informal or formal training related to that change in technology?
	¹ Yes $(\bigcirc)^{\vee}$
	3 No \rightarrow Go to Question 23 (f)
23 (e)	Approximately how many days did you spend on that training? Include only the time actually spent in training sessions.
	└└└ days
23 (f)	Do you use any other machine or technological device for at least one hour a day in the course of your normal duties? This question is meant to be inclusive and would include, for example, cash registers, sales terminals, typewriters, vehicles and industrial machinery.
	¹ O Yes
	³ \bigcirc No \rightarrow Go to Question 24
	Note: Do not include the car that you drive for work unless it requires a special permit.

	/hat machine(s) or technological device(s) do you use for at least one hour a day? If you use more than aree, please report the three you use the most, in terms of time.
	1
	2
	3
23 (g)(i)	How many hours a week do you normally spend with the first device or machine you reported in Question 23 (g)?
	L hours
Instruct	ion: If you reported only one machine or device in Question 23 (g), please go to Question 23 (h).
23 (g)(ii)	How many hours a week do you normally spend with the second machine or device you reported in Question 23 (g)?
	L hours
Instruct	ion: If you reported only two machines or devices in Question 23 (g), please go to Question 23 (h).
23 (g)(III)	How many hours a week do you normally spend with the third machine or device you reported in Question 23 (g)?
23 (g)(iii)	How many hours a week do you normally spend with the third machine or device you reported in Question 23 (g)?
23 (g)(iii) 23 (h)	Question 23 (g)?
	Question 23 (g)?
	Question 23 (g)?
	Question 23 (g)? Thinking of the machine or technological device you use the most, what has been the most helpful learning method to use that technology? On-the-job training (co-workers, supervisors, resource people, friends)
	Question 23 (g)? Thinking of the machine or technological device you use the most, what has been the most helpful learning method to use that technology? On-the-job training (co-workers, supervisors, resource people, friends)
	Question 23 (g)? Thinking of the machine or technological device you use the most, what has been the most helpful learning method to use that technology? ¹ On-the-job training (co-workers, supervisors, resource people, friends) ² Employer-paid formal training ³ Self-learning (manuals, books, on-line tutorials, etc.)

23 (i)	Has there been an upgrade or change in that technology in the past twelve months?
	¹ • Yes
	³ \bigcirc No \rightarrow Go to Question 24
23 (j)	Did you receive any informal or formal training related to that change in technology?
	¹ O Yes
	³ \bigcirc No \rightarrow Go to Question 24
23 (k)	Approximately how many days did you spend on that training? Include only the time actually spent in training sessions.
	L days
24.	Since you started this job, has the overall technological complexity:
	¹ O remained about the same?
	² increased?
	³ decreased?
	HAND HAND

Remin	ext few questions deal with job-related training provided or paid by your employer. der: Unless you answered "No" in question A (XL), the questions refer to the job you March 2003.
25.	In the past twelve months, have you received any classroom training related to your job?
-0.	1 \bigcirc Yes
	3 No \rightarrow Go to Question 25 (d)
	 Classroom training includes: All training activities which have a predetermined format, including a pre-defined objective
	 Specific content Progress may be monitored and/or evaluated
25 (a)	How many different training courses have you taken in the last twelve months?
	$\Box \Box \qquad \qquad$
25 (b)(i)	What was the main subject of the last course you completed?
	⁰¹ Orientation for new employees
	⁰² Managerial/supervisory training
	⁰³ O Professional training
	⁰⁴ Apprenticeship training
	⁰⁵ Sales and marketing training
	07 Computer software
	08 Other office or non-office equipment
	⁰⁹ O Group decision-making or problem-solving
	¹⁰ O Team building, leadership, communication
	¹¹ O Occupational health and safety, environmental protection
	¹² C Literacy or numeracy
	¹³ Other, <i>specify</i>

25 (b)(ii)	How long was the course? (Include only the time actually spent in training sessions.)				
	• days				
	OR				
	hours				
25 (b)(iii)	Did the training take place at your workplace?				
	¹ \bigcirc Yes, entirely				
	² Partly				
	³ O No, always elsewhere				
25 (b)(iv)	Did the training take place during your normal working hours?				
	¹ O Yes				
	² Partly				
	³ O No				
25 (b)(v)	Who provided the training sessions? (Check all that apply.)				
	¹ O Supervisor				
	² Fellow worker				
	³ O In-house trainer				
	⁴ Outside trainer				
	⁵ Supplier				
	⁶ Other, specify				
25 (b)(vi)	To what extent are you using the skills or knowledge acquired in this training at work?				
	1 \bigcirc To a great extent				
	² O Somewhat				
	³ O Not at all				

Instruction: If the answer to Question 25 (a) is 01, go to Question 25 (d).

25 (c)(i)	What was the main subject of the second most recent course you completed?					
	⁰¹ Orientation for new employees					
	⁰² O Managerial/supervisory training					
	⁰³ O Professional training					
	⁰⁴ O Apprenticeship training					
	⁰⁵ O Sales and marketing training					
	⁰⁶ O Computer hardware					
	⁰⁷ Computer software					
	⁰⁸ O Other office or non-office equipment					
	⁰⁹ O Group decision-making or problem-solving					
	¹⁰ O Team building, leadership, communication					
	¹¹ O Occupational health and safety, environmental protection					
	¹² \bigcirc Literacy or numeracy \diamondsuit					
	¹³ Other, <i>specify</i>					
25 (c)(ii)	How long was the course? (Include only the time actually spent in training sessions.)					
	L days					
	OR S					
25 (c)(iii)	Did the training take place at your workplace?					
	¹ Yes, entirely					
	² Rantly					
	³ \bigcirc No, always elsewhere					
25 (c)(iv)	Did the training take place during your normal working hours?					
	¹ O Yes					
	² Partly					
	³ O No					

25 (c)(v)	Who provided the training sessions? (Check all that apply.)					
	¹ O Supervisor					
	² O Fellow worker					
	3 O In-house trainer					
	⁴ O Outside trainer					
	⁵ O Supplier					
	⁶ Other, <i>specify</i>					
25 (c)(vi)	To what extent are you using the skills or knowledge acquired in this training at work?					
	¹ • To a great extent					
	² Somewhat					
	³ Not at all					
25 (d)	In the past twelve months, have you received any informal training related to your job (that is on-the-job training)?					
	³ No \rightarrow Go to Question 26					
25 (d)(i)	What were the main subjects of the on-the job training? (Check all that apply.)					
	⁰¹ Orientation for new employees					
	⁰² Managerial/supervisory training					
	⁰³ O Professional training					
	⁰⁴ O Apprenticeship training					
	⁰⁵ Sales and marketing training					
	⁰⁶ Computer hardware					
	⁰⁷ O Computer software					
	⁰⁸ O Other office or non-office equipment					
	⁰⁹ O Group decision-making or problem-solving					
	¹⁰ O Team building, leadership, communication					
	¹¹ O Occupational health and safety, environmental protection					
	¹² O Literacy or numeracy					
	¹³ Other, <i>specify</i>					

25 (d)(ii) In the past twelve months, how much time in total was spent for on-the-job training? (Include only the time actually spent in training.)
L L days
OR
hours
25 (d)(iii) Who provided the training? (Check all that apply.)
¹ Self-learning (manuals, books, on-line tutorials, etc.)
² Supervisor
³ Fellow worker
⁴ In-house trainer
⁵ Outside trainer
⁶ C Equipment supplier
⁷ Other, <i>specify</i>
25 (d)(iv) To what extent are you using the skills or knowledge acquired in this training at work?
¹ \bigcirc To a great extent
² Somewhat
³ Not at all
26. In the past twelve months, was there job-related training offered to you that you decided not to take?
¹ Yes
³ \bigcirc No \rightarrow Go to Question 26 (b)

26 (a)	What was the main reason you decided not to take that training?
	$^{1}\bigcirc$ Too busy with my duties on the job
	2 \bigcirc Courses not suitable (I already have the skills, heard bad things about the course, etc.)
	³ \bigcirc Course too difficult
	⁴ O Health reasons
	⁵ Family responsibilities
	⁶ O Too old, too late in career
	⁷ Other, <i>specify</i>
26 (b)	In the past twelve months, has your employer paid for or otherwise helped you to take courses, outside of your paid working hours, that were not directly job-related ? (The objectives of these courses being for career development, not just interest.)
	¹ O Yes
	³ No \rightarrow Go to Question 27
26 (c)	How many such courses has your employer helped you to take in the past twelve months?
26 (d)	Speaking of the most recent course, what was (were) the goal(s) of that course? (Check all that apply.)
	¹ Working towards a trade or vocational certificate or diploma
	² Working towards a degree or diploma
	³ Working towards a professional designation
	⁴ Increase literacy or numeracy skill
	⁵ Other, <i>specify</i>
26 (e)	Who paid for this course? (Check all that apply.)
	¹ My employer
	² Myself (the employee)
	³ Another organization

Section 4 – Career-Related Training

27.	In the past twelve months, have you taken any courses that were not sponsored by your employer but were career-related? (Excluding courses taken for personal interest).						
	1 \bigcirc Yes						
	$^{\circ}\bigcirc$ No \rightarrow Go to Question 28						
27 (a)	How many different courses have you taken in the last twelve months?						
27 (b)(i)	What was the main subject of the last course you completed?						
	⁰¹ O Managerial/supervisory training						
	⁰² O Professional training						
	⁰³ \bigcirc Apprenticeship training						
	⁰⁴ O Sales and marketing training						
	 ⁰⁵ Computer hardware ⁰⁶ Computer software 						
	⁰⁷ O Other office or non-office equipment						
	⁰⁸ Group decision-making or problem-solving						
	⁰⁹ Team building, leadership, communication						
	¹⁰ Occupational health and safety, environmental protection						
	¹¹ C Literacy or humeracy						
	¹² Other, specify						
27 (b)(ii)	How long was the course? (Include only the time actually spent in training sessions.)						
1	• days						
	OR						
l	• hours						

Instruction: If the answer to Question 27 (a) is 01, go to Question 28.

27 (c)(27 (c)(i) What was the main subject of the second most recent course you completed?					
	⁰¹ O Managerial/supervisory training					
	⁰² O Professional training					
	⁰³ O Apprenticeship training					
	⁰⁴ O Sales and marketing training					
	⁰⁵ O Computer hardware					
	⁰⁶ O Computer software					
	⁰⁷ O Other office or non-office equipment					
	⁰⁸ O Group decision-making or problem-solving					
	⁰⁹ O Team building, leadership, communication					
	¹⁰ Occupational health and safety, environmental protection					
	¹¹ \bigcirc Literacy or numeracy					
	¹² Other, <i>specify</i>					
27 (c)((ii) How long did the course last? (Include only the time actually spent in training sessions.)					
	L days					
	OR					
	hours					
28.	Since you began working in your job, have the overall skill requirements of the position:					
	¹ O increased? $(\zeta (O))^{\vee}$					
	² remained about the same?					
	³ decreased?					
	\sim					
29.	Since you began working for this company, has the amount of training available to employees:					
	1 increased?					
	² remained about the same?					
	³ decreased?					
30.	³ O decreased? Would you say that the amount of training that you take is:					
30.						
30.	Would you say that the amount of training that you take is:					
30.	Would you say that the amount of training that you take is: ¹ \bigcirc about right for the demands of the job?					

The next questions are about your reading, writing and mathematics activities at your job – whether these activities are done on paper or on computer.						
30 (a)	How often do you read or use information from one of the following as part of your job? Would you say at least once a week, less than once a week, rarely or never?					
			At least once a week	Less than once a week	Rarely	Never
	A.	Letters, memos or e-mails	0	0		\bigcirc
	B.	Reports, articles, magazines or journals	0	0		\bigcirc
	C.	Manuals or reference books including catalogues	\bigcirc		0	\bigcirc
	D.	Diagrams or schematics	0	\sim	\bigcirc	\bigcirc
	E.	Directions or instructions			\bigcirc	\bigcirc
	F.	Bills, invoices, spreadsheets or budgets tables spreadsheets		>	\bigcirc	\bigcirc
30 (b)		ink about the importance of reading a build they be	activities in relation	to all of your other w	orkplace activitie	S.
	¹ Just as important as all of your other activities?					
	² Less important than all of your other activities?					
	³ More important than all of your other activities?					

		w often do you write or fill out each o ek, less than once a week, rarely or ne		as part or your job?		
			At least once a week	Less than once a week	Rarely	Never
	A.	Letters, memos or e-mails	\bigcirc	\bigcirc	\bigcirc	\bigcirc
	В.	Reports, articles, magazines or journals	\bigcirc	\bigcirc	0	\bigcirc
	C.	Manuals or reference books including catalogues	\bigcirc	\bigcirc	R	\bigcirc
	D.	Diagrams or schematics	\bigcirc	\bigcirc		\bigcirc
	E.	Directions or instructions	\bigcirc	0 (($\sum i = i$	\bigcirc
	F.	Bills, invoices, spreadsheets or budgets tables spreadsheets	\bigcirc		0	\bigcirc
30 (d)	Ho	w often do you do each of the following ce a week, rarely or never?	as part of your	job? Would you say	at least once a we	ock loss that
		<pre></pre>	At least once a week	Less than once a week	Rarely	Never
	A.	Measure or estimate the size or weight of objects	once a	once a		
	A. B.	Measure or estimate the size or	once a	once a		
	В.	Measure or estimate the size or weight of objects	once a	once a		
	В.	Measure or estimate the size or weight of objects Calculate prices, costs, or budgets Count or read numbers to keep track	once a	once a		
	B. C.	Measure or estimate the size or weight of objects Calculate prices, costs, or budgets Coupt or read numbers to keep track of things Manage time or prepare timetables	once a	once a		

The next few questions deal with employee participation in decisions regarding the workplace.

Reminder: Unless you answered "No" in question A (XL), the questions refer to the job you held in March 2003.

Although a program or policy may exist somewhere in your workplace, we are only interested in those that apply directly to you.

If the a	inswer to any of questions 31 (a) to 31 (d) is "always", answer "frequently".
31 (a)	How frequently are you asked to complete employee surveys?
	² Occasionally
	³ Frequently
31 (b)	How frequently do you participate in an employee suggestion program or regular meetings in which you offer suggestions to your superiors regarding areas of work that may need improvement?
	¹ O Never
	² Occasionally
	³ Generative Contractions of the second se
31 (c)	How frequently do you participate in a job rotation or cross-training program where you work or are trained on a job with different duties than your regular job?
	² Occasionally
	³ Frequently
31 (d)	How frequently are you informed (through meetings, newsletters, e-mail or Internet) about overall workplace performance, changes to workplace organization or the implementation of new technology?
	¹ Never
	² Occasionally
	³ Frequently

31 (e)	How frequently do you participate in a task team or labour-management committee that is concerned with a broad range of workplace issues?
	Note: Task teams and labour-management committees make recommendations to line managers on such issues as safety, quality, scheduling, training and personal development programs.
	¹ O Never
	² Occasionally
	³ Frequently
	⁴ Always
31 (f)	How frequently do you participate in a team or circle concerned with quality or work flow issues?
	² Occasionally
	³ Frequently
	⁴ Always
31 (g)	How frequently are you part of a self-directed work group (or semi-autonomous work group or mini-enterprise group) that has a high level of responsibility for a particular product or service area? In such systems, part of your pay is normally related to group performance.
	 (Self-directed work groups: Are responsible for production of a fixed product or service, and have a high degree of autonomy in how they organize themselves to produce that product or service. Act almost as "businesses within businesses".
	 Often have incentives related to productivity, timeliness and quality. While most have a designated leader, other members also contribute to the organization of the group's activities.)
	¹ O Never
	² Occasionally
	³ Frequently
	⁴ O Always

Section 6 – Personal and Family Support Programs

	questions cover the availability and use of practices that aim to help employees e their careers and personal lives.
32.	Does your employer offer personal support or family services such as childcare, employee assistance, eldercare, fitness and recreation services or other types of services?
	¹ • Yes
	³ \bigcirc No \rightarrow Go to Question 33
32 (a)	Does your employer offer help for <u>childcare</u> either through an on-site centre or assistance with external suppliers or informal arrangements?
	¹ O Yes
	³ No \rightarrow Go to Question 32 (b)
32 (a)(i)	Did you use this help within the past twelve months?
	¹ O Yes
	³ O No
32 (b)	Does your employer offer employee assistance such as counselling, substance abuse control, financial assistance, legal aid, etc.?
	¹ O Yes
	³ No \rightarrow Co to Question 32 (c)
32 (b)(i)	Did you use these services within the past twelve months?
	¹ O Yes
	³ O No
32 (c)	Does your employer offer help with <u>eldercare</u> services?
	¹ • Yes
	³ \bigcirc No \rightarrow Go to Question 32 (d)

32 (c)(i)	Did you use this help within the past twelve months?
	¹ O Yes
	³ O No
32 (d)	Does your employer offer fitness and recreation services (on-site or off-site)?
	¹ • Yes
	³ No \rightarrow Go to Question 32 (e)
32 (d)(i)	Did you use this service within the past twelve months?
	¹ O Yes
	³ O No
32 (e)	Does your employer offer other personal support or family services?
	¹ O Yes
	³ No \rightarrow Go to Question 33
32 (e)(i)	Please specify the type of service
32 (e)(ii)	Did you use this service within the past twelve months?
	¹ Ves
	³ No

Section 7 – Worker Representation and Industrial Relations

33.	In your job, are you a member of a union or covered by a collective bargaining agreement?
	¹ O Yes
	³ O No
34.	Is there a dispute, complaint, or grievance system in your workplace?
	¹ O Yes
	³ No \rightarrow Go to Question 35 (a)
34 (a)	Have you had a dispute, complaint or grievance in the past twelve months?
	³ No \rightarrow Go to Question 35 (a)
34 (b)	What mechanisms were used to address your dispute, complaint, or grievance? (Check all that apply.)
	¹ Informally addressed by manager/supervisor
	² Management committee
	³ Labour-management committee
	⁴ Outside arbitrator
	⁵ Other, specify
34 (c)	Has the situation improved?
	¹ Yes
	³ O No

Section 8 – Compensation

The next few questions deal with your earnings in your job.

Reminder: Unless you answered "No" in question A (XL), the questions refer to the job you held in March 2003.

35 a)	In your job, are you paid by the hour?
	¹ \bigcirc Yes \rightarrow Go to Question 35 (c)
	$^{\circ}$ Yes \rightarrow Go to Question 35 (C) $^{\circ}$ No
	○ No
35 b)	What is the easiest way for you to report your wage or salary, before taxes and other deductions? Would it be:
	² daily
	³ O weekly
	⁴ every two weeks
	⁵ twice a month
	⁶ monthly $(\bigcirc)^{\vee}$
	⁷ yearly
	⁸ other, <i>specify</i>
35 c)	What is your wage or salary, before taxes and other deductions?
_	
Instru	uction: If you have been in this job for less than twelve months, please answer the following questions for the period of time since you started this job. Otherwise, answer for the past twelve months.
36 b)	Did you receive overtime payments in the past twelve months/since you started this job?
	1 Ves
	³ No \rightarrow Go to Question 36 (c)
36 (b)(i) What were your total earnings from overtime payments for that period?
36 b(ii) Were these earnings included in the wage or salary reported in question 35 (c)?
	¹ O Yes
	³ O No

36 (c)	Did you receive any tips, commissions or piecework payments in the past twelve months/since you started this job?
	¹ O Yes
	³ \bigcirc No \rightarrow Go to Question 36 (d)
36 (c)(i)	What were your total earnings from tips, commissions or piecework payments for that period?
	\$
36 (c)(ii)	Were these earnings included in the wage or salary reported in question 35 (c)?
	¹ O Yes
	³ O No
36 (d)	Did you receive any productivity-related bonuses, profit-sharing or profit-related bonuses in the past twelve months/since you started this job?
	¹ O Yes
	³ \bigcirc No \rightarrow Go to Question 36 (e)
36 (d)(i)	What were your total earnings from productivity-related bonuses, profit-sharing or profit-related bonuses for that period?
	\$
36 d(ii)	Were these earnings included in the wage or salary reported in question 35 (c)?
	¹ O Yes
36 (e)	Did you receive any other bonuses in the past twelve months/since you started this job?
	¹ Xes, specity
	³ No \rightarrow Go to Question 37
36 (e)(i)	What were your total earnings from other bonuses for that period?
	\$
36 e(ii)	Were these earnings included in the wage or salary reported in question 35 (c)?
	¹ Yes
	³ O No

The fo	lowing questions cover the non-salary benefits related to this job.
37.	Does your employer have any non-wage benefits such as pension plan, life insurance or dental plan?
	¹ O Yes
	³ No \rightarrow Go to Question 38 (EN, EL, ES)
37 (a)	Do you participate in an employer-sponsored pension plan? (This does not include CPP/QPP or group RRSPs.)
	¹ O Yes
	³ O No
37 (a)(i)	In your company, is this benefit:
	¹ Mandatory?
	² O Optional?
	³ Not available?
37 (b)	Do you participate in a group RRSP?
	¹ O Yes
	³ No \rightarrow Go to Question 37 (b)(ii)
37 (b)(i)	Does your employer contribute to this plan?
	¹ O Yes
	³ O No
	$(0)^{\vee}$
37 (b)(ii)	In your company, is this plan:
	¹ Mandatory?
	² Optional?
	³ O Not available?
37 (c)	In your job, do you participate in a life and/or disability insurance plan?
	¹ O Yes
	³ O No
i i	

37 (c)(i)	In your company, are these benefits:
	¹ Mandatory?
	² Optional?
	³ Not available?
37 (d)	Do you participate in a supplemental medical insurance plan?
	¹ Yes
	³ O No
	Note: Examples: Drug co-payment plans, hospital stay co-payment plans, hearing-impaired benefit
(Note: Examples: Drug co-payment plans, hospital stay co-payment plans, hearing-impaired benefit plan, vision care and other medical benefits not covered by provincial health plans.
37 (d)(i)	In your company, is this benefit:
	¹ Mandatory?
	² Optional?
	³ O Not available?
37 (e)	Do you participate in a dental plan?
	Yes
	³ O No
37 (e)(i)	In your company, is this benefit:
	¹ Mandatory?
	² Optional?
	3 Not available?
37 (f)	Does your employer offer supplements to Employment Insurance benefits for maternity/parental leave or lay-offs?
	¹ O Yes
	³ O No

37 (g)	In your job, do you participate in a stock purchase plan?
	¹ O Yes
	³ \bigcirc No \rightarrow Go to Question 38 (EN, EL, ES)
37 (g)(i) Does your employer contribute to this plan or offer discounts on stock purchases?
	¹ O Yes
	³ O No
38.	Considering all aspects of this job, how satisfied are you with the job? Would you say that you are:
	¹ very satisfied?
	² satisfied?
	³ dissatisfied?
	⁴ very dissatisfied?
39.	Considering the duties and responsibilities of this job, how satisfied are you with the pay and benefits you receive? Would you say that you are:
	¹ very satisfied?
	² satisfied?
	³ dissatisfied?
	⁴ O very dissatisfied?
Instru	iction: If your job title and your most important activities or duties have not changed (ES), go to Question 42.
	If this is your first year responding to this questionnaire (EN), then <i>go to Question 40</i> . Otherwise, <i>go to Section X9</i> Job Comparisons Questions X40 (a) to X41 (d) (EL, XL).

Section X9 – Job Comparisons

(a) Please indicate whether you think your working conditions are better, about the same or worse in your new job compared to the previous job you held.						
	General Working Conditions	Better	About the same	Worse	No opinion	Not applicab
A.	Availability of flexible working arrangements (e.g. compressed work week, flexible hours, work at home, other flexible arrangements)			0	0	\bigcirc
B.	Usual work hours		0	\bigcirc	0	\bigcirc
C.	Availability of overtime	> 	0	0	0	0
D.	Availability of job of work sharing arrangements	0	0	0	0	0
E.	Availability of personal and family support programs (e.g. childcare, employee assistance, eldercare, other types of services)	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

c) Please indicate whether you think your job opportun compared to the previous job you held.	ities are be	etter, about the	e same or	worse in yo	our new job
Job Opportunities	Better	About the same	Worse	No opinion	Not applicable
A. Opportunity for promotions	\bigcirc	0	\bigcirc	\bigcirc	0
B. Access to computers and other technologies	0	\bigcirc	\bigcirc	<u> </u>	\bigcirc
C. Access to training and development	\bigcirc	\bigcirc			\bigcirc
D. Opportunity for career change	\bigcirc		$\sum_{i=1}^{n}$	\bigcirc	\bigcirc
E. Opportunity for employee participation (participating in decisions regarding the workplace)			0	0	0
F. Access to worker representation (e.g. member of a union, staff and professional association)		0	0	0	0
G. Salary increases	0	\bigcirc	0	\bigcirc	0
H. Job security	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I. Bonuses/Profit sharing	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
) Please specify any other factors that contributed to y	our changi	ng of jobs.			

Section 9 – Work History/Turnover			
Instru	action: Go to Question 42 (ES, EL, XL).		
40.	Considering all jobs you have held, how many years of full-time working experience do you have?		
	years		
Instru	Action: If you have been working with this employer for more than 5 years, <i>please go to Question 42.</i>		
40 (a)	In the past five years, have you worked for any other employers, including yourself? ¹ ○ Yes ³ ○ No → Go to Question 40 (c)		
40 (b)	How many other employers have you worked for in the past five years, including self-employment?		
40 (c)	In that period, were you ever without work for more than two weeks when you were actively looking for work and not attending school on a full-time basis? ¹ ○ Yes ³ ○ No → Go to Question 40 (e) if the answer to question 40 (a) is "Yes", otherwise, go to Question 41.		
40 (d)	During the past five years how many months; in total, have you been unemployed (without having necessarily received employment benefits)?		
Instru	action: If you reported "No" to Question 40 (a), then go to Question 41.		
40 (e)	Thinking about the last job you held before coming to work for your current employer, what was the main reason you left that job? 1 Left for better pay, hours or career opportunities at current job 2 Moved, immigrated, spouse relocated 3 Returned to school 4 Quit for any other reason 5 Laid off: plant closure or business failure 6 Laid off: business slowdown, restructuring, other reasons 7 End of contract, seasonal or temporary position 8 Left self-employment (sold business, own business failed, etc.) 9 Other, specify		

Instruction: If you have worked for your current employer for more than twelve months, *please go to Question 41*.

40 (f)	What was your job title?
40 (g)	In that last job, what were your most important activities or duties?
40 (h)	How many months did you work for that employer?
	└ └ month
40 (i)	About how many hours did you usually work per week in that job (including overtime)?
	hours
40 (j)	What was your usual wage or salary before taxes and other deductions?
	¹ O hourly
	² daily
	³ O weekly
	⁴ • every two weeks
	5 twice a month
	⁶ monthly
	7 yearly
	⁸ Other, <i>specify</i>
40 (k)	In that last job you held, did you have an employer-sponsored pension plan?
	¹ Yes
	³ O No
40 (I)	Did you use a computer in that job?
	¹ O Yes
	³ O No

40 (m)	In the last twelve months on that last job, did you receive any formal training sponsored by your employer?
	¹ O Yes
	³ O No
41.	Immediately before starting with your present employer, were you:
	¹ \bigcirc working at another job \rightarrow Go to Question 42
	² O looking for work
	³ \bigcirc going to school \rightarrow Go to Question 42
	⁴ ◯ working at home, raising family, etc. → <i>Go to Question 42</i>
	⁵ \bigcirc recuperating from illness or disability \rightarrow Go to Question 42
	⁶ Other, specify \rightarrow Go to Question 42
41 (a)	How many weeks were you looking for work?
	└ └ weeks
42.	Do you currently do any paid work for another employer
	Note: This includes self-employed work
	¹ \bigcirc Yes
	³ No \rightarrow Go to Question 43 (EN)
	Go to Question $#5$ (a) (ES, EL, XL)
42 (a)	How many hours a week do you usually work at that (these) job(s)?
	Job 1 • L hours
	Job 2
42 (b)	What are your approximate weekly earnings in that (these) job(s)?
	Job 1 \$ •
	Job 2 \$ •

Instruction : Continue with Question 43 (EN). Go to Question 45 (a) (ES, EL, XL).

Section 10 – Demographics

Final	y, we would like to ask some general questions about you and your family.
43.	In what year were you born?
	Year
44.	GENDER
	² Female
45 (a)	What language do you most often use at work?
	² French
	³ Other, <i>specify</i>
45 (b)	What language do you most often speak at home?
	² O French
	³ Other, <i>specify</i>
Instru	uction: Continue with Question 46 (\mathbb{E} N) Go to Question 47 (ES, EL, XL, XS).
46.	Were you born in Canada
	¹ \bigcirc Yes \rightarrow Go to Question 47
	3 No
46 (a)	In what year did you immigrate to Canada?
	Year
46 (b)	From what country did you emigrate?
40 (5)	
	Country:
47.	What is the highest grade of elementary or high school (secondary school) that you have completed?
	Please report the highest grade, not the year when it was completed.

48.	Did you graduate from high school (secondary school)?		
	¹ O Yes		
	³ O No		
49.	Have you received any other education?		
	¹ O Yes		
	³ \bigcirc No \rightarrow Go to Question 51		
50.	What was that education? (Check all that apply.)		
	Trade-vocational:		
	⁰¹ O Trade or vocational diploma or certificate		
	College:		
	⁰² Some college, CEGEP, institute of technology or nursing school		
	⁰³ Completed college, CEGEP, institute of technology or nursing school		
	University:		
	⁰⁴ O Some university		
	⁰⁵ O Teachers' college		
	⁰⁶ University certificate or diploma below bachelor level		
	⁰⁷ Bachelor or undergraduate degree of teachers' college (e.g. B.A., B.Sc., B.A.Sc., 4-year B.Ed.)		
	⁰⁸ University certificate or diploma above bachelor level		
	⁰⁹ O Master's degree (M.A., M.Sc., M.Ed., MBA, MPA and equivalent)		
	¹⁰ Degree in medicine, dentistry, veterinary medicine, law, optometry or theology (M.D., D.D.S., D.M.D., D.V.M., L.B., O.D., M.DIV.) or 1-year B.Ed. after another bachelor's degree		
	¹¹ O Earned doctorate		
	Other:		
	¹² Industry certified training or certification courses		
	¹³ Other, specify		
50 (a)	What was the major field of study or training of your highest degree, certificate or diploma (excluding secondary or high school graduation certificates)?		

51.	What is your current legal marital status?		
	¹ ◯ Legally married (and not separated) → Go to Question 53		
	² C Legally married and separated		
	³ Divorced		
	⁴ O Widowed		
	⁵ Single (never married)		
52.	Are you currently living with a common-law partner?		
	¹ O Yes		
	³ O No		
53.	Do you have any dependent children?		
	¹ O Yes		
	³ No \rightarrow Go to Question 54 (a)		
53 (a)	Please indicate their ages, starting with the youngest if any children are less than one year old, record age as "01".		
Instru	uction: If all children's ages are greater than 12, go to Question 54 (a).		
53 (b)	Are any of your children in childcare (in the care of someone other than you or another legal guardian)? Please do not include regular school hours.		
	3 No		
incon	Since the worker's well-being is related to the family's income as well as his/her own income, we would like to ask you a few questions about your immediate family's earnings and income. These questions refer only to those family members living in your household.		
54 (a)	Over the past twelve months what were the approximate annual employment earnings of all members of your immediate family (including yourself)?		
	\$		

54 (b)	Over the past twelve months what was your family's approximate annual income from sources other than employment ? For example: pensions, investment income and social benefits. Please include your own income from sources other than employment.			
	\$			
Instru	 Instructions : • Continue with Question 55 (EN). • If you are not a paid worker (XS), go to Question 57. • If you are a paid worker (ES, EL, XL), go to Question 56 (a). 			
55.	Canadians come from many ethnic, cultural and racial backgrounds. From which groups did your parents or grandparents descend? (Check all that apply.)			
	²⁰ O American			
	⁰² British (from England, Scotland, Ireland, etc.)			
	⁰³ French			
	O Any other European groups			
	Arab (from Egypt, Jordan, Lebanon, Iraq, etc.)			
	⁰⁶ Black (from Africa, Caribbean, Haiti, U.S.A., Canada, etc.)			
	⁰⁷ Chinese			
	⁰⁸ East Indian (from India, Pakistan, East Africa, etc.)			
	⁰⁹ Filipino			
	¹¹ Japanese			
	¹² Korean			
	¹³ Clatin American (from Mexico, Central America or South America)			
	¹⁴ O Métis			
	¹⁵ O North American Indian (First Nations, Aboriginal persons, Native Peoples)			
	¹⁶ O North African (from Egypt, Morocco, Algeria, etc.)			
	¹⁷ O South East Asian (from Burma, Cambodia, Laos, Viet Nam, etc.)			
	¹⁸ West Asian (from Syria, Turkey, Afghanistan, Iran, etc.)			
	¹⁹ Other, <i>specify</i>			

56 (a)	Does your employer have any recruitment or career programs for minority groups?
	¹ O Yes
	³ \bigcirc No \rightarrow Go to Question 57
56 (b)	Have you ever participated in these programs?
	¹ O Yes
	³ O No
Instru	uction: These questions refer to conditions or health problems that have lasted or are expected to last six months or more.
57.	Do you have any difficulty hearing, seeing, communicating, walking, climbing stairs, bending, learning or doing any similar activities?
	² Yes, often ³ No
	³ O No
57 (a)	Does a physical condition or mental condition or health problem reduce the amount or the kind of activity you can do
	A) At home?
	¹ Yes, sometimes
	² Yes, often
	³ No
	Instruction: If you are not a paid worker (XS), go to Question 57 (a) C).
	B) At work or at school?
	1 Yes, sometimes
	² Yes, often
	³ No
	⁴ O Not applicable
	C) In other activities, for example, transportation or leisure?
	¹ \bigcirc Yes, sometimes
	² Yes, often
	³ O No

Instructions:	If you are new to this survey (EN) or if you have a different job (EL) or the same job (ES) as the previous year and you answered "1 or 2" to Question 57, then <i>continue with Question 58</i> ; otherwise, <i>go to Question 59.</i>
	If you are not a paid worker (XS) and you answered "1 or 2" to Question 57, then <i>go to Question 58</i> (<i>b</i>); otherwise, <i>go to the end of the interview.</i>
	If you are a paid worker (XL) and you answered "1 or 2" to Question 57, then <i>continue with Question</i> 58: otherwise, go to the end of the interview.

58.	Does your employer have any recruitment or career programs for employees with disabilities?
	¹ Yes
	³ \bigcirc No \rightarrow Go to Question 58 (b)
58 (a)	Have you ever participated in these programs?
	¹ O Yes
	³ O No
	$(\bigcirc)^{\sim}$
58 (b)	Do you need altered facilities or equipment aids to help accommodate your condition?
	¹ O Yes
	³ No \rightarrow Go to Question 59
Instru	uction: If you are not a paid worker (XS), go to Question 59.
58 (c)	Does your employer provide these altered facilities, equipment or aids to you?
	1 Yes \checkmark
	³ Na
59.	In case we have difficulty in reaching you next year, could you please give us the name and telephone number of a relative or someone we could call to obtain your telephone number.
	Last name
	Given name
	Telephone number ()

On behalf of Statistics Canada, we would like to thank you for taking the time to answer this survey.

Please use this list if you know the name of the application but you are not sure under which category it falls. The numbers correspond to the numbers to the left of the circles in Question 22 (c).

Access (database)	3
Access (programming)	7
Adabas (database)	3
Adabas (programming)	7
Ami Pro	1
Basic	7
С	7
C++	7
Clipper	7
COBOL	7
Communications	6
Compuserve	6
Computer Aided Design	11
Corel Draw	10
Correcteur 101	8
Crystal Reports	4
Data Analysis	9
Databases	3
DB-2	3
dBase (database)	3
dBase (programming)	7
DELPHI	7
Desktop Publishing	4
Developer	12
Development tool	
E-mail systems	$\sqrt{6}$
Easycase	12
Excel	$\overrightarrow{2}$
Excellerator	12
Extra!	6
FAME	9
Form Design	4
Fortran	7
Foxpro (database)	3
Foxpro (programming)	7
Framemaker	4
Freelance	10
GML	1
Graphics and presentation	
	10
Harvard Graphics	<u>10</u> 10
Harvard Graphics	10
HTML (communications)	10 6
HTML (communications) HTML (programming)	10 6 7
HTML (communications) HTML (programming) Hugo	10 6 7 8
HTML (communications) HTML (programming) Hugo Internet	10 6 7 8 6
HTML (communications) HTML (programming) Hugo Internet Intranet	10 6 7 8 6 6
HTML (communications) HTML (programming) Hugo Internet Intranet JAVA (communications)	10 6 7 8 6 6 6 6
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	Wordperfect	1
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