Mon State Rural Household Survey, April-May 2016

The Republic of the Union of Myanmar

Centre for Economic and Social Development (MDRI-CESD)
Michigan State University

I am [name of enumerator] and am conducting a survey for researchers from the Myanmar Development Resource Institute (MDRI), the International Food Policy Research Institute and Michigan State University. This survey is being conducted to provide researchers with a detailed understanding of socio-economic situation and aspiration of the people in Mon State with the objective of carrying out analyses to assist policymakers in identifying policies to promote welfare in the state. The researchers selected the households which were interviewed in the previous "Mon State Rural Households Survey-2015" and therefore, your household was selected again for participation. The interview takes approximately 1 hour to complete. You have the right to not participate or stop the interview at any time. Please note, however, that we value your participation. Be assured that the information you give will be held in the strictest confidence and in no circumstance will your household be identified. If you have questions or concerns about your role and rights as a research participant, or if you would like to receive more information about this study, you may contact, anonymously if you wish, Kyan Htoo of the Myanmar Development Resource Institute at 09 782290994.

A01.	District	
A02.	Township	
A03.	Ward / Village Tract	
A04.	Ward Segment/Village	
A05.	Household ID	

A06.	GPS Coordinates: Latitude	|___|___| º |___|___| , |___|___|___|___|
A07.	GPS Coordinates: Longitude	|___|___| º |___|___| , |___|___|___|___|
A08.	Date of interview DD/MM/YY	|___|___| /|___|___|/2 0 |___|___|
A09.	Start time	|___|___| : |___|___|
A10.	End time	|___|___| : |___|___|

By signing here, enumerator confirms that consent to conduct interview was obtained.		
A11.	Name of household head	
A12.	Name of household head's father	
A13.	Name of respondent	
A14.	Name of enumerator	|___|___|
A15.	Name of supervisor	|___|___|
A16.	Name of data entry person 1	|___|___|
A17.	Date of first entry DD/MM/YY	|___|___| /|___|___|/2 0 |___|___|
A18.	Name of data entry person 2	|___|___|
A19.	Date of second entry DD/MM/YY	|___|___| /|___|___|/2 0 |___|___|
A20.	Name of MDRI supervisor	|___|___|