

RESIDENTIAL MOBILITY PAGE		
RM1		RM1 1 <input type="checkbox"/> H box, 17+ (1) 2 <input type="checkbox"/> SP, 17 + (1) 3 <input type="checkbox"/> Other (NP)
Complete 1a and b from household composition items, if not clear, ask: 1a. Is --- related to any persons now living in this household?		1a. 1 Y 2 N (2)
b. Is --- now living with ---'s: (1) Brother or sister? (3) Father or mother? (5) (Husband/wife)? (7) Son or daughter? MARK ALL THAT APPLY		b. 1 <input type="checkbox"/> Brother/sister 3 <input type="checkbox"/> Parent 5 <input type="checkbox"/> Spouse 7 <input type="checkbox"/> Son/daughter 0 <input type="checkbox"/> None of the above
2. How long has --- lived at this address? Enter number, then mark box If "3" years, ask: Was it less than 3 years or more than 3 years?		2. _____ Number { 1 <input type="checkbox"/> Days 2 <input type="checkbox"/> Weeks 3 <input type="checkbox"/> Months 4 <input type="checkbox"/> Years
RM2		RM2 1 <input type="checkbox"/> 3+ years in 2 (RM3) 2 <input type="checkbox"/> Less than 3 years in 2
3. Including the time --- moved here, how many times has --- moved in the past 3 years, that is, since (12-month date), 1977?		3. _____ Number
4a. What was ---'s address, including county on (12-month date), 1977? Enter only county and State		4a. County _____ State _____
b. About how many miles is that address from here?		b. <input type="checkbox"/> Initial DK - PROBE _____ Miles
c. How many people was --- living with at that time, not counting ---?		c. 00 <input type="checkbox"/> Lived alone (5) _____ Number
d. Were any of these people related to ---?		d. 1 Y 2 N (5)
e. Was --- living with ---'s: (1) Brother or sister? (3) Father or mother? (5) (Husband/wife)? (7) Son or daughter? MARK ALL THAT APPLY		e. 1 <input type="checkbox"/> Brother/sister 3 <input type="checkbox"/> Parent 5 <input type="checkbox"/> Spouse 7 <input type="checkbox"/> Son/daughter 0 <input type="checkbox"/> None of the above
5a. What is the (other) reason --- moved HERE? Was it because --- changed jobs, because --- retired, because of ---'s health, or was it for some other reason?		5a. 1 <input type="checkbox"/> Job-self 2 <input type="checkbox"/> Retired-self 3 <input type="checkbox"/> Health-self 4 <input type="checkbox"/> Job-other person 5 <input type="checkbox"/> Retired-other person 6 <input type="checkbox"/> Health-other person 8 <input type="checkbox"/> Other - Specify _____
b. Any other reason? Mark box or ask:		b. Y (Reask 5a and b) N
c. What is the MAIN reason --- moved?		c. <input type="checkbox"/> Only one reason
RM3 Q's 1-5	For persons 17 years or over, show who responded for (or was present during the asking of) Questions 1-5. If persons responded for self, show whether entirely or partly.	RM3 1 <input type="checkbox"/> Responded for self-entirely 2 <input type="checkbox"/> Responded for self-partly Person _____ was respondent