

**VADU HEALTH AND DEMOGRAPHIC SURVEILLANCE SYSTEM  
(VADU HDSS)  
VADU RURAL HEALTH PROGRAM, K.E.M HOSPITAL, PUNE  
FORM FOR CHANGE IN HEAD OF HOUSEHOLD**

Starting time of the interview: <input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>		
Interviewer Name : _____		
Signature: _____ Date    /    /		
PID	CID	
Oldest <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Oldest <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
present <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	present <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Q0001	Household Number <i>(The household which head has been changed)</i>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Village      Wadi      Household Number
Q0002	Oldest Household Head Name	_____
Q0003	Name of the Respondent <i>(Respondent should be head of the household or preferably the adult member of the house)</i>	_____
Q0004	Name of the new head of the household	_____
Q0005	Reason For the change in Household Head	01 Migration of head of the household due to separation( <i>split</i> ) in household 02 Other reasons for migration of head of the household 03 Death of the Household head 04 Family Problem <i>(e.g. former head of the household is living but his/her partner is living at anywhere else)</i> 05 Other <i>(Specify)</i> _____

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Q0006	What is the relationship between respondent and present head of the household?	01 Self 02 Spouse ( <i>wife/husband</i> ) 03 Son/daughter 04 Daughter/son-in-laws 05 Grandson/daughter 06 Mother/father 07 Father/mother-in-laws 08 Brother/sister 09 Step wife 10 Grandmother/ father 11 Other relationship 12 No relation but friends /servants/ paying guest 88 Do not know/cannot say
Q0007	Date of change in head of household OR Duration	/      /      OR  /
Ending time of the interview: <input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>		
Checked by _____ Signature: _____ Date:      /      /		
Name of the data entry operator: _____ Signature : _____ Date:      /      /		