



CONFIDENTIAL
Statistics Act Ch. 19:02

REPUBLIC OF TRINIDAD AND TOBAGO
MINISTRY OF PLANNING & DEVELOPMENT
CENTRAL STATISTICAL OFFICE
TOBAGO FOOD CROP SURVEY

Survey Type:

Survey Date:

ID NO.

SECTION 1: IDENTIFICATION CHARACTERISTICS

1.1. Parish

1.2. Community

1.3. ED Number

1.4. Building Number

1.5. Holding Number

1.6. Questionnaire Number

7'1.9 Name of Holder
Surname

First Name

1.8 Location of Farm:

1.9 Location of Farm:

1.10 Telephone Contact No:
 Office Home Mobile

SECTION 2: SIZE OF HOLDING

2.1 Do you live on the Holding?
1. Yes
2. No

2.2 What is the total area of your agricultural holding?

2.3 What area of your holding do you devote to Food Crops?

SECTION 9: - ENUMERATOR'S REMARKS

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Name of Respondent:

(In Block Letters)

Relationship to Holder

Signature of Enumerator:

Date

Signature of Supervisor:

Date Checked by Supervisor:

Edited By:

Date:

SECTION A - FARM EMPLOYMENT

For the week ending _____ please indicate the number of workers employed on your farm by type of classification.

Type of Worker	Total	Permanent	Casual	Occasional
Hired Labour				
Unpaid Labour				
TOTAL				

NOTE: Permanent Workers may be classified as workers who are employed for a period of six (6) months and more within a calendar year.

Casual workers are workers who are employed for a period of three (3) to six (6) months within the year.

Occasional Workers are workers who are employed for less than three (3) months within the year.

SECTION B: FARMING CONSTRAINTS

Please state three (3) main problems affecting the viability of your farm.

Problem 1: _____

Problem 2: _____

Problem 3: _____
