# SHOWCARDS

## WAVE 26 M

**Please keep this booklet until your interview this year**

# SHOWCARD HF16

- **Employed (including self-employed and working students):**

  **usually works 35 hours or more per week..........................................................1**

  **usually works less than 35 hours per week..........................................................2**

- **Not employed but looking for work.................3**

- **Neither employed nor looking for work:**

  **Retired........................................................4**

  **Home duties..................................................5**

  **Non-working student ...................................6**

# <u>SHOWCARD HF17</u>

*Please Answer Yes or No*

## DISABILITIES / HEALTH CONDITIONS WHICH:

- **Have lasted, or are likely to last, 6 months or more;**
- **Restrict everyday activity; and**
- **Cannot be corrected by medication or medical aids.**

- Sight problems <u>not</u> corrected by glasses or contact lenses
- Hearing problems
- Speech problems
- Blackouts, fits or loss of consciousness
- Difficulty learning or understanding things
- Limited use of arms or fingers
- Difficulty gripping things
- Limited use of feet or legs
- A nervous or emotional condition which requires treatment
- Frequent headaches or migraine
- Any other condition that restricts physical activity or physical work (e.g., back problems)
- Any disfigurement or deformity
- Any mental illness which requires help or supervision
- Shortness of breath or difficulty breathing
- Chronic or recurring pain
- Long-term effects as a result of a head injury, stroke or other brain damage
- A long-term condition or ailment which is still restrictive even though it is being treated or medication is being taken for it
- Any other long-term condition such as arthritis, asthma, heart disease, Alzheimer’s disease, dementia, etc.

# <u>SHOWCARD Q4</u>

***Types of child care you might have considered so you (or your partner) can undertake paid work:***

- **Family Day Care, Long Day Care, any other care at a Child Care Centre**
- **Outside of school hours or Vacation Care**
- **Someone paid to come to your home to care for your child**
- **Someone paid to care for your child in their home**
- **A friend, relative or neighbour caring for your child for free or for payment in kind**

# SHOWCARD Q6a

- **Family Day Care, Long Day Care, any other care at a Child Care Centre**
- **Outside of school hours or Vacation Care**
- **Someone paid to come to your home (nanny / baby-sitter)**
- **Someone paid to care for your child in their home**
- **A relative who lives with you (paid or unpaid)**
- **A relative who doesn't live with you (paid or unpaid)**
- **A friend or neighbour (caring for the child either at your home or in their home; paid or unpaid)**
- **The child's brother or sister**
- **The child goes to your (or your partner's) work**
- **Child looks after his or her self**
- **Some other form of child care**

# SHOWCARD Q6b

- **Family Day Care, Long Day Care, any other care at a Child Care Centre**
- **Outside of school hours or Vacation Care**
- **Someone paid to come to your home to care for your child (nanny / baby-sitter)**
- **Someone paid to care for your child in their home**
- **A relative who lives with you (whether paid or unpaid)**
- **A relative who doesn't live with you (whether paid or unpaid)**
- **A friend or neighbour (caring for the child either at your home or in their home, whether paid or unpaid)**
- **The child's brother or sister (whether paid or unpaid)**
- **Some other form of child care**

# SHOWCARD Q8

**Me or my partner (e.g., you arrange working hours so one of you is able to care for your child/ren) .......... 01**

**The child's brother or sister .......... 02**

**Child looks after self .......... 03**

**Child comes to my (or my partner's) workplace .... 04**

**Child's grandparent who lives with us .......... 05**

**Child's grandparent who lives elsewhere .......... 06**

**Other relative who lives with us .......... 07**

**Other relative who lives elsewhere .......... 08**

**A friend or neighbour coming to *our* home .......... 09**

**A friend or neighbour in *their* home .......... 10**

**A paid sitter or nanny .......... 11**

**Family day care .......... 12**

**Formal outside of school hours care .......... 13**

**Other (please specify) .......... 21**

# SHOWCARD Q9

Me or my partner (e.g., taking paid or unpaid leave, you arrange working hours so one of you is able to care for your child/ren)..................01

The child's brother or sister......................................02

Child looks after self................................................03

Child comes to my (or my partner's) workplace....04

Child's grandparent who lives with us...................05

Child's grandparent who lives elsewhere...............06

Other relative who lives with us ..............................07

Other relative who lives elsewhere ..........................08

A friend or neighbour coming to ***our*** home............09

A friend or neighbour in ***their*** home........................10

A paid sitter or nanny ..............................................11

Family day care ........................................................12

Vacation care ............................................................13

Other (please specify)..............................................21

# SHOWCARD Q11

Me or my partner (e.g., you arrange working hours so one of you is able to care for your child/ren)..... 01

The child's brother or sister........................................ 02

Child's grandparent who lives with us........................ 03

Child's grandparent who lives elsewhere................... 04

Other relative who lives with us .................................. 05

Other relative who lives elsewhere ............................. 06

A friend or neighbour coming to ***our*** home................ 07

A friend or neighbour in ***their*** home............................ 08

A paid sitter or nanny .................................................. 09

Family day care ........................................................... 10

Long day care centre at workplace ............................ 11

Private or community long day care centre ............... 12

Kindergarten / pre-school ............................................ 13

Other (please specify).................................................. 21

# SHOWCARD Q12

- **Family Day Care, Long Day Care, any other care at a Child Care Centre**
- **Out of school hours or Vacation Care**
- **Someone paid to come to your home to care for your child (nanny / baby-sitter)**
- **Someone paid to care for your child in their home**
- **A relative who lives with you (whether paid or unpaid)**
- **A relative who doesn't live with you (whether paid or unpaid)**
- **A friend or neighbour (caring for the child either at your home or in their home, whether paid or unpaid)**
- **The child's brother or sister (whether paid or unpaid)**
- **Some other form of child care**

# SHOWCARD Q14

**The child's brother or sister ............................ 01**

**Child's grandparent who lives with us ............. 02**

**Child's grandparent who lives elsewhere ......... 03**

**Other relative who lives with us ........................ 04**

**Other relative who lives elsewhere .................... 05**

**A friend or neighbour coming to *our* home ...... 06**

**A friend or neighbour in *their* home .................. 07**

**A paid sitter or nanny ......................................... 08**

**Family day care .................................................. 09**

**Private or community long day care centre...... 10**

**Formal outside of school hours care ................ 11**

**Other (please specify) ......................................... 21**

# <u>SHOWCARD Q16</u>

**The child's brother or sister ................................ 01**

**Child's grandparent who lives with us .............. 02**

**Child's grandparent who lives elsewhere ......... 03**

**Other relative who lives with us .......................... 04**

**Other relative who lives elsewhere ..................... 05**

**A friend or neighbour coming to <u>*our*</u> home ...... 06**

**A friend or neighbour in <u>*their*</u> home .................. 07**

**A paid sitter or nanny ........................................... 08**

**Family day care ..................................................... 09**

**Private or community long day care centre...... 10**

**Kindergarten / pre-school ..................................... 11**

**Other (please specify) ........................................... 21**

# SHOWCARD R41

***Not including the home in which you live, do any members of this household own any of these types of properties?***

**Do not include business or farms (unless the farm is purely residential and is not a business).**

*You may select more than one*

**A second home / holiday house that is not rented out to others............................................1**

**A second home / holiday house that the household makes use of but is also rented out to others............................................2**

**Other houses and units (including investment properties).....................3**

**Vacant land...........................................................4**

**Farms ...................................................................5**

**Commercial property...........................................6**

**Other (please specify)..........................................7**

**No, none of the above..........................................9**

# SHOWCARD R54

**Food, supermarket and convenience store shopping, as well as weekly meal plan delivery services** (such as Lite n' Easy and Hello Fresh).

| *LIST A* | *LIST B* |
|---|---|
| **All groceries** including pet food, cleaning products and toiletries | **Food and drink ONLY** (do not include pet food) |
| **For example:** | **For example:** |
| • Meat and fish | • Meat and fish |
| • Bread and milk | • Bread and milk |
| • Fruit and vegetables | • Fruit and vegetables |
| • Tinned and packaged food | • Tinned and packaged food |
| • Drinks (but not alcohol) | • Drinks (but not alcohol) |
| • Pet food | |
| • Cleaning products | |
| • Toilet paper | |
| • Soap, shampoo, etc. | |

# <u>SHOWCARD R57</u>

## TOTAL GROSS INCOME OF EVERYONE LIVING IN THIS HOUSEHOLD

LAST FINANCIAL YEAR (1 July 2025 to 30 June 2026),
BEFORE TAX OR ANYTHING ELSE IS DEDUCTED.
Include income from <u>all</u> sources, such as wages, business profits, investments and government pensions and benefits.

| <u>Per Year</u> | <u>Per Week</u> | |
|---|---|---|
| Negative or Zero Income | | **1** |
| $1 - $19,999 | ($1 - $379) | **2** |
| $20,000 - $29,999 | ($380 - $579) | **3** |
| $30,000 - $39,999 | ($580 - $769) | **4** |
| $40,000 - $49,999 | ($770 - $959) | **5** |
| $50,000 - $59,999 | ($960 - $1149) | **6** |
| $60,000 - $79,999 | ($1150 - $1529) | **7** |
| $80,000 - $99,999 | ($1530 - $1919) | **8** |
| $100,000 - $124,999 | ($1920 - $2399) | **9** |
| $125,000 - $149,999 | ($2400 - $2879) | **10** |
| $150,000 - $199,999 | ($2880 - $3839) | **11** |
| $200,000 - $249,999 | ($3840 - $4799) | **12** |
| $250,000 - $299,999 | ($4800 - $5759) | **13** |
| $300,000 or more | ($5760 or more) | **14** |

# <u>SHOWCARD S3</u>

***Do you or others in this household currently own any investments of this kind?***

- **Shares (in companies)**
- **Managed Funds**
- **Property Trusts (listed or unlisted)**

***<u>Make sure you include:</u>***

- Investments held for any children living here

***<u>Do not include:</u>***

- **Government bonds**
- **Family trusts / Other private trusts**
- **Cash management trusts**
- **Investments in superannuation**

# SHOWCARD S4

Less than $5,000 .................................................. 1

$5,000 to $24,999 .................................................. 2

$25,000 to $99,999 .................................................. 3

$100,000 to $499,999 .................................................. 4

$500,000 to $999,999 .................................................. 5

$1,000,000 or more .................................................. 6

Don’t know.................................................. 9

# SHOWCARD S12

***Do you or others in the household have any other type of financial investments?***

EXAMPLES:

- **Bonds**
- **Debentures**
- **Mortgage-backed securities**
- **Financial derivatives**
- **Commodities (e.g., gold)**

Do **NOT** include:

- investments already mentioned
- superannuation
- bank accounts
- accounts with other financial institutions
- cash management trusts

# SHOWCARD S13

Less than $5,000 ............................................................1

$5,000 to $24,999 .........................................................2

$25,000 to $99,999 ........................................................3

$100,000 to $499,999 ....................................................4

$500,000 to $999,999 ....................................................5

$1,000,000 or more ........................................................6

Don’t know...................................................................9

# SHOWCARD S16

Less than $25,000 .................................................1

$25,000 to $99,999 ................................................2

$100,000 to $499,999 .............................................3

$500,000 to $1,999,999 ...........................................4

$2 million to $4,999,999 ..........................................5

$5,000,000 or more ................................................6

Don't know...........................................................9

# SHOWCARD S19

Less than $10,000 ........................................................1

$10,000 to $49,999 .......................................................2

$50,000 to $199,999 .....................................................3

$200,000 to $499,999 ...................................................4

$500,000 to $999,999 ...................................................5

$1,000,000 or more .......................................................6

Don't know.......................................................................9

# SHOWCARD S20

Important: Do *not* include vehicles that you may have already mentioned as part of a business or farm.

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## GROUP 1

- **cars or vans**
- **motorbikes**
- **trucks or utilities**

** Include leased vehicles ONLY if you could sell the vehicle and keep the money (so that really it is more or less yours).*

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## GROUP 2 – Recreational Vehicles

- **boats**
- **caravans**
- **campervans**
- **jet skis**
- **trail bikes or other recreational vehicles**

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## GROUP 3 – Other Vehicles

- **tractors** *(only mention if not already recorded under business or farm)*
- **planes or helicopters**
- **other vehicles not yet mentioned**

# SHOWCARD S27

Less than $5,000 ........................................................1

$5,000 to $24,999 ......................................................2

$25,000 to $99,999 ....................................................3

$100,000 to $499,999 ................................................4

$500,000 to $999,999 ................................................5

$1,000,000 or more ...................................................6

Don't know.................................................................9

# SHOWCARD S30

HOUSEHOLD BILLS

- **Electricity or Gas**
- **Water and sewerage**
- **Telephone (excluding mobile phones)**
- **Council rates**
- **Rent, Owners corporation or Strata fees**
- **Home and contents insurance**
- **Child care**
- **School fees**
- **Internet connections**

*DO NOT INCLUDE UNPAID CREDIT CARD BILLS*

# SHOWCARD V1

a **Getting together with friends or relatives for a drink or meal at least once a month**

b **Medical treatment when needed**

c **Furniture in reasonable condition**

d **A decent and secure home**

e **Medicines when prescribed by a doctor**

f **Warm clothes and bedding, if it's cold**

g **A substantial meal at least once a day**

h **A roof and gutters that do not leak**

i **A mobile phone**

j **Home contents insurance**

k **A washing machine**

l **Access to the internet at home**

(continued next page)

# SHOWCARD V1

m **A motor vehicle**

n **Comprehensive motor vehicle insurance**

o **At least $500 in savings for an emergency**

p **A home with doors and windows that are <u>secure</u>**

q **Dental treatment when needed**

r **Buying presents for immediate family or close friends at least once a year**

s **When it is cold, able to keep at least one room of the house adequately warm**

t **A separate bed for each child**

u **A yearly dental check-up for each child**

v **A hobby or a regular leisure activity for children**

w **New school clothes for school-age children every year**

x **Children being able to participate in school trips and school events that cost money**

# SHOWCARD 1

| | |
|---|---|
| Secondary school qualification – lower level | 600 |
| Secondary school qualification – highest level | 611 |
| Nursing qualification | 001 |
| Teaching qualification | 002 |
| Trade certificate or apprenticeship | 514 |
| Technician's certificate / Advanced certificate | 511 |
| Other certificate – level I | 524 |
| Other certificate – level II | 521 |
| Other certificate – level III | 598 |
| Other certificate – level IV | 599 |
| Other certificate – don't know level | 500 |
| Associate Diploma / Diploma (2 yrs full-time or equivalent) | 421 |
| Associate Degree | 413 |
| Undergraduate Diploma / Advanced Diploma (3 yrs full-time or equivalent) | 411 |
| Bachelor Degree but not Honours | 312 |
| Honours Bachelor Degree | 311 |
| Graduate Certificate | 221 |
| Postgraduate Diploma / Graduate Diploma | 211 |
| Masters Degree | 120 |
| Doctorate | 110 |
| Other (please specify) | 995 |
| Did not complete qualification | 993 |
| Still studying | 994 |

# SHOWCARD 2

Enrolled Nurse .................................................. 511

Associate Diploma / Diploma
(2 years full-time or equivalent) ..................... 421

Undergraduate Diploma / Advanced
Diploma
(3 years full-time or equivalent) ..................... 411

Bachelor Degree but not Honours .................... 312

Honours Bachelor Degree ................................ 311

Triple, Double Certificate Nurse ....................... 310

Registered Nurse, Sister .................................. 310

Postgraduate Diploma / Graduate Diploma ..... 211

Masters Degree ................................................. 120

Doctorate ........................................................... 110

Other (please specify) ....................................... 997

# SHOWCARD 3

TPTC (Trained Primary Teaching Cert.) ........... 421

TSTC (Trained Secondary Teaching Cert.)
TITC (Trained Infants Teaching Cert.) ........... 411

Associate Diploma / Diploma
(1-2 years full-time or equivalent) .................. 498

Undergraduate Diploma of Teaching (Dip T)
(3 years full-time or equivalent) ..................... 499

Bachelor Degree but not Honours .................... 312

Honours Bachelor Degree ................................. 311

Graduate Certificate ........................................ 221

Postgraduate Diploma, Graduate Diploma,
Diploma of Education (Dip Ed)
(after Bachelor Degree or Undergrad
Diploma) ........................................................ 211

Masters Degree ................................................ 120

Doctorate ......................................................... 110

Other (please specify) ..................................... 997

# SHOWCARD 4

Secondary school qualification – lower level .......... 600

Secondary school qualification – highest level ....... 611

Certificate level I ........................................................ 524

Certificate level II ....................................................... 521

Certificate level III ...................................................... 514

Certificate level IV ....................................................... 511

Certificate – don't know level .................................... 500

Diploma (2 years full-time or equivalent).................. 421

Associate Degree ........................................................ 413

Advanced Diploma (3 years full-time or equivalent) ........................................................ 411

Bachelor Degree but not Honours ............................ 312

Honours Bachelor Degree .......................................... 311

Graduate Certificate .................................................... 221

Graduate Diploma........................................................ 211

Masters Degree .......................................................... 120

Doctorate...................................................................... 110

Other (please specify) ................................................ 997

# SHOWCARD 5

Retired / Voluntarily not in paid employment .................................................. 1

Home duties / Child care ....................................... 2

Study / Went to school, TAFE or university ........ 3

Own disability or handicap.................................... 4

Own illness or injury ............................................ 5

Looking after ill or disabled person ..................... 6

Travel / On holiday / Leisure activities................. 7

Working in an unpaid voluntary job ..................... 8

Other activity (please specify) ........................... 98

# SHOWCARD A9

Certificate – level I ........................................................ 524

Certificate – level II ....................................................... 521

Certificate – level III ...................................................... 514

Certificate – level IV....................................................... 511

Certificate – don't know level ...................................... 500

Diploma (2 yrs full-time or equivalent)....................... 421

Associate Degree ........................................................ 413

Advanced Diploma (3 yrs full-time or
equivalent) ............................................................ 411

Bachelor Degree but not Honours ............................. 312

Honours Bachelor Degree .......................................... 311

Graduate Certificate .................................................. 221

Graduate Diploma....................................................... 211

Masters Degree .......................................................... 120

Doctorate..................................................................... 110

Other (please specify) ................................................ 998

# SHOWCARD C10

A regular daytime schedule .................................. 1

A regular evening shift .......................................... 2

A regular night shift .............................................. 3

A rotating shift (changes from days to
evenings to nights) ............................................. 4

Split shift (two distinct periods each day) ........... 5

On call.................................................................. 6

Irregular schedule ................................................ 7

Other (please specify)........................................... 8

# SHOWCARD C20

Train.............................................................. 1

Bus................................................................ 2

Ferry ............................................................. 3

Tram (including light rail)........................................ 4

Taxi or ride-share service ........................................ 5

Car ............................................................... 6

Truck.............................................................. 7

Motorbike or motor scooter ........................................ 8

Bicycle (including e-bicycle)...................................... 9

E-Scooter ......................................................... 10

Walking for at least 10 minutes ................................... 11

Other mode (please specify)........................................ 12

# SHOWCARD C25

Employed on a fixed-term contract ...................... 1

Employed on a casual basis ................................ 2

Employed on a permanent or ongoing
basis ............................................................ 3

Other (please specify) ........................................... 8

# <u>SHOWCARD C26</u>

**Collective (enterprise) agreement ....................... 1**

An agreement made at your workplace or firm between your employer and either a union or a group of employees.

*It may sometimes be known as an Enterprise Agreement.*

**Individual agreement (or contract) ...................... 2**

An agreement (formal or informal) between you and your employer. It may be verbal or written. It could simply be a letter of appointment.

**Combination of collective / enterprise agreement and individual agreement ................ 3**

This will apply in those cases where you are covered by a collective (i.e. enterprise) agreement, but are paid above the rate specified in that agreement.

**Paid <u>exactly</u> the Award rate ................................ 4**

**None of the above ................................................ 8**

Other arrangement *(please describe)*

# SHOWCARD C33

## Commercial*

Private sector “for profit” organisation ............... 1

Government business enterprise or
commercial statutory authority ......................... 2

Other commercial (please specify) ...................... 3

* *By ‘commercial’ we mean businesses that undertake activity for profit. It should not include businesses which, in the course of providing a public service, may happen to make a profit.*

## Non-commercial

Private sector “not-for-profit” organisation ........ 4

Other government organisation, such as a
public service department, local
councils, schools and universities .................. 5

Other non-commercial (please specify)............... 6

# SHOWCARD D2

Written, phoned or applied to
an employer for work ........................................ 1

Had an interview with an employer for
work........................................................... 2

Answered an advertisement for a job ................ 3

Looked in newspapers, on the internet or
checked notice boards........................................ 4

Been registered with Centrelink
as a job seeker .................................................. 5

Checked or registered with any
employment services provider or
employment agency ........................................... 6

Taken steps to purchase or start your own
business .......................................................... 7

Anything else (please specify) ......................... 98

# SHOWCARD D6

Because of your own ill health or disability .................. 01

Employers thought you were too young or too old...... 02

The hours were unsuitable ............................................ 03

You had transport problems or
it was too far to travel.................................................. 04

You did not have the required education, training
or skills ............................................................... 05

You did not have enough work experience.................. 06

Because of language difficulties.................................... 07

Because there were no jobs in your line of work ......... 08

Because there were too many applicants for the
available jobs ........................................................ 09

Because there were just no jobs at all.......................... 10

Because of difficulties in finding child care.................. 11

Any other difficulties (please specify) .......................... 98

# SHOWCARD D9

Retired / Voluntarily not in paid employment........................................................1

Home duties / Child care ......................................2

Study / Went to school, TAFE or university .......3

Own illness, injury or disability ...........................4

Looking after ill or disabled person ....................5

Travel / On holiday / Leisure activities................6

Working in an unpaid voluntary job ...................7

Other activity (please specify) ............................8

# SHOWCARD E26

Job search ........................................................................ 01

Study ................................................................................ 02

Part-time paid work .................................................... 03

Voluntary work ............................................................. 04

Work for the Dole ........................................................ 05

Launch into Work program ........................................ 06

Employability Skills Training ..................................... 07

Accredited language, literacy or numeracy
training.............................................................................. 08

Community Development Program ........................... 09

Remote Australia Employment Services (RAES)
job skills program ...................................................... 10

Defence Reserves ........................................................ 11

Other government employment or training
programmes ................................................................... 12

Other non-government employment or training
programmes ................................................................... 13

Non-vocational interventions or assistance ............ 14

# SHOWCARD F10

Housing rent free or at less than normal market rent .................................. 1

Telephone and / or contribution to private telephone calls ................................. 2

Motor vehicle (private use) .................................. 3

Superannuation (any employer contribution over and above the 12.0% compulsory contribution)....................... 4

Computer, tablet, etc. (private use) ..................... 5

Child care.......................................................... 6

Car park ............................................................ 7

Shares .............................................................. 8

Low interest loans ............................................... 9

Meals and entertainment.................................... 10

Other (please specify)......................................... 97

# SHOWCARD F28

**JobSeeker Payment** ............................................ **01**

**Youth Allowance – as a full-time student (or Australian Apprentice)** ................................ **02**

**Youth Allowance – as a job seeker** .................. **03**

**Austudy / ABSTUDY payment** ........................... **04**

**Disability Support Pension** *(paid by Centrelink)*.......................................................... **05**

**Parenting Payment <u>Single</u>** *(NOT Family Tax Benefit)*.............................................................. **06**

**Parenting Payment <u>Partnered</u>** *(NOT Family Tax Benefit)*....................................................... **07**

**Carer Payment** ................................................... **08**

**Special Benefit** ................................................... **09**

**Service Pension** *(paid by Dept of Veterans' Affairs)*............................................................... **10**

**None of these** ..................................................... **97**

# <u>SHOWCARD F30</u>

**Disability Compensation Payment / Disability Pension** *(paid by Dept of Veterans' Affairs)*..........................**1**

**Carer Allowance** *(an income supplement to assist carers)*..........................................................**2**

**War Widow's / Widower's Pension** *(paid by Dept of Veterans' Affairs)*..........................**3**

**Parental Leave Pay ..............................................4**

**Pensions or benefits paid by <u>overseas</u> governments.........................................5**

**<u>Any other</u> government pensions / benefits** *(please specify)*.........................................**8**

Do <u>not</u> include:

- Family Tax Benefit (Child Endowment)
- Superannuation payments

# SHOWCARD F39

Housing rent free or at less
than normal market rent .................................... 1

Telephone and / or contribution
to private telephone calls .................................. 2

Motor vehicle (private use) .................................. 3

Superannuation (any employer
contribution over and above the
12.0% compulsory contribution)....................... 4

Computer, tablet, etc. (private use) ..................... 5

Child care.............................................................. 6

Car park ............................................................... 7

Shares ................................................................... 8

Low interest loans ................................................ 9

Meals and entertainment...................................... 10

Other (please specify) ......................................... 97

# SHOWCARD F56

Interest from:

- banks
- other financial institution
- bonds
- debentures
- cash management trusts
- family or other private trust funds, or
- interest from loans to other persons not in this household

# <u>SHOWCARD F60</u>

**Age Pension** *(from Australian Government)* ................................ 01

**JobSeeker Payment** ................................................................ 02

**Youth Allowance – as a full-time student (or Australian Apprentice)** ................................................................ 03

**Youth Allowance – as a job seeker** ........................................ 04

**Austudy / ABSTUDY** ................................................................ 05

**Disability Support Pension** *(paid by Centrelink)* ......................... 06

**Disability Compensation Payment / Disability Pension** *(paid by Dept of Veterans' Affairs)* ................................................ 07

**Parenting Payment <u>Single</u>** *(not including the Family Tax Benefit)* ................................................................ 08

**Parenting Payment <u>Partnered</u>** *(not including the Family Tax Benefit)* ................................................................ 09

**Carer Payment** ................................................................ 10

**Carer Allowance** *(an income supplement to assist carers)* ........... 11

**Special Benefit** ................................................................ 12

**Service Pension** *(paid by Dept of Veterans' Affairs)* ..................... 13

**War Widow's / Widower's Pension** *(paid by Dept of Veterans' Affairs)* ................................................................ 14

**Parental Leave Pay** ................................................................ 15

**Pensions / benefits from <u>overseas</u> governments** .................... 16

**<u>Other government pensions / allowances</u>** *(please specify)* ...... 97

Do <u>not</u> include Family Tax Benefit.

# SHOWCARD F67

Rolled it over into another
superannuation scheme .................................... 1

Purchased an annuity ........................................... 2

Invested or saved the money elsewhere
(e.g., shares, bank accounts) ............................ 3

Paid off home /
Paid for home improvements /
Bought new home................................................ 4

Bought or paid off car / vehicle............................ 5

Cleared other outstanding debts .......................... 6

Paid for a holiday ................................................. 7

Assisted family members ..................................... 8

Other (please specify)........................................... 9

# SHOWCARD F69

**Life insurance ........................................................ 1**

**Child support / maintenance ................................ 2**

**Workers compensation /**
**Accident or sickness insurance /**
**Personal accident claims .................................. 3**

**Redundancy and severance payments ................ 4**

**Inheritance / Bequests ........................................ 5**

**Parents ................................................................ 6**

**Other persons not in this household**
**(but excluding any income already reported)... 7**

**Any other source (please specify)...................... 96**

- Include cash gifts
- Do not include Family Tax Benefit

# SHOWCARD F71

**Examples of non-cash assistance:**

- **House, flat or other property (or assistance with purchase)**
- **Housing rent**
- **Motor vehicle (or assistance with purchase)**
- **Holidays**
- **Appliances or computers**
- **Education fees**
- **Private health insurance fees**
- **Company shares**

# SHOWCARD G7

Lives in this household only................................1

Lives in this household some of the time
and lives elsewhere some of the time ...............2

Lives elsewhere all of the time ...........................3

# SHOWCARD G9

With other parent ..................................................1

With other relatives..............................................2

Foster / adoptive family ........................................3

Living independently ............................................4

Boarding school or university residence ...........5

Other (please specify)...........................................6

# SHOWCARD G21

Nowhere near enough ........................................1

Not quite enough................................................2

About right ........................................................3

A little too much ................................................4

Way too much......................................................5

# SHOWCARD G55

One single block ..................................................1

Multiple blocks ....................................................2

One single block plus other days........................3

Multiple blocks plus other days ..........................4

Only four or fewer days at a time ........................5

Or something else (please specify).....................6

# SHOWCARD J6

- **Everyday transaction or Savings Accounts** *(including offset accounts)*
- **Fixed Term Deposits**
- **Cash Management Trusts**

# SHOWCARD J32

Less than $5,000 .................................................1

$5,000 to $19,999 ................................................2

$20,000 to $49,999 ..............................................3

$50,000 to $99,999 ..............................................4

$100,000 to $199,999 ..........................................5

$200,000 to $499,999 ..........................................6

$500,000 to $999,999 ..........................................7

$1,000,000 to $1,999,999 ....................................8

$2,000,000 to $4,999,999 ....................................9

$5,000,000 or more ...........................................10

Don't know.........................................................99

Has NO super funds ...........................................97

## SHOWCARD J34

**A defined benefit fund ....................................... 1**

This type of fund pays you an amount agreed upon in advance.

**An accumulation (or growth) fund ................ 2**

This type of fund pays you according to how successfully the funds have been invested.

# SHOWCARD J37

Less than $5,000 ........................................................1

$5,000 to $24,999 .....................................................2

$25,000 to $99,999 ...................................................3

$100,000 to $499,999 ...............................................4

$500,000 or more .....................................................5

# SHOWCARD K1

## DISABILITIES / HEALTH CONDITIONS WHICH:

- **Have lasted, or are likely to last, 6 months or more;**
- **Restrict everyday activity; and**
- **Cannot be corrected by medication or medical aids.**

**Sight problems not corrected by glasses or lenses........................1**

**Hearing problems ...........................................................................2**

**Speech problems..............................................................................3**

**Blackouts, fits or loss of consciousness ........................................4**

**Difficulty learning or understanding things .....................................5**

**Limited use of arms or fingers .........................................................6**

**Difficulty gripping things ..................................................................7**

**Limited use of feet or legs ...............................................................8**

**A nervous or emotional condition which requires treatment ........9**

**Frequent headaches or migraine ..................................................10**

**Any other condition that restricts physical activity or physical work (e.g., back problems) ..............................................11**

**Any disfigurement or deformity .....................................................12**

**Any mental illness which requires help or supervision ...............13**

**Shortness of breath or difficulty breathing ...................................14**

**Chronic or recurring pain..............................................................15**

**Long-term effects as a result of a head injury, stroke or other brain damage ....................................................................16**

**A long-term condition or ailment which is still restrictive even though it is being treated or medication is being taken for it ........................................................................17**

**Any other long-term condition such as arthritis, asthma, heart disease, Alzheimer's disease, dementia, etc..................18**

# <u>SHOWCARD K15</u>

*Your standard of living compared with other Australians your age*

**Well above average................................................1**

**Somewhat above average ....................................2**

**About average ........................................................3**

**Somewhat below average ....................................4**

**Well below average................................................5**

# SHOWCARD K16

*Your standard of living compared with your parents when they were your current age*

**Much better .......................................................1**

**Somewhat better ..................................................2**

**About the same ....................................................3**

**Somewhat worse...................................................4**

**Much worse .........................................................5**

# SHOWCARD K17

*Your parents' standard of living when they were your current age, compared with others of their generation*

**Well above average..............................................1**

**Somewhat above average .....................................2**

**About average .......................................................3**

**Somewhat below average .....................................4**

**Well below average...............................................5**

# SHOWCARD K18

*Your children's standard of living compared with you, when they reach your current age*

**Much better..........................................................1**

**Somewhat better ..................................................2**

**About the same ....................................................3**

**Somewhat worse...................................................4**

**Much worse ..........................................................5**

# SHOWCARD K19

*Your children's standard of living compared with others of their generation, when they reach your current age*

**Well above average.............................................1**

**Somewhat above average ...................................2**

**About average .....................................................3**

**Somewhat below average ...................................4**

**Well below average..............................................5**

# SHOWCARD K23

Your ethnic or cultural background .................... 1

Your religious beliefs .......................................... 2

Your sex ............................................................ 3

Your gender identity or expression ..................... 4

Your sexual orientation ........................................ 5

Your age............................................................ 6

Your disability, impairment or long-term
health condition ............................................... 7

Your mental state ................................................ 8

Your physical appearance ................................... 9

Your political beliefs ........................................... 10

Any other reason (please specify) ..................... 11

None of these .................................................... 97

# SHOWCARD K24

An employer or someone at work ................................ 1

A teacher or fellow student at school or uni ................ 2

A family member.......................................................... 3

A friend or acquaintance............................................... 4

A member of the public................................................. 5

A landlord or real estate agent ...................................... 6

A doctor or someone in health care............................. 7

Someone in aged care, disability or social services ... 8

Someone in a business providing goods or services
to customers (e.g., shop assistant, waiter or
tradesperson)............................................................ 9

A customer, client or patient of yours ........................ 10

A police officer or someone in the justice system .... 11

Anyone else (please specify)..................................... 12

# <u>SHOWCARD K25</u>

**No understanding ..................................................1**

**Limited understanding .........................................2**

**Moderate understanding......................................3**

**Strong understanding...........................................4**